Exploring the relationship between mental illness and crime psychology essay



The idea that there is a relationship between mental illness and crime has been prevalent since the early 19th Century, and this essay will attempt to explore this relationship in general, and specifically home in on the relationship between schizophrenia and violent crime, presenting arguments for and against there being a correlation. We must first though look at some general definitions for mental illness and types of crime, before discussing the general relationship and evidence for the specific relationship between schizophrenia and violent crime. Additionally an explanation of the symptoms of schizophrenia will be defined and how this may consequently lead to criminal activity.

In general terms then it is difficult to ascertain a correlation between most of these mental disorders and the types of crime listed, apart from digging deeper into the specific area of schizophrenia and violent crime. For example, one does not see a relationship between organic brain disorders such as Parkinson's Disease and any of the categories of crime, nor indeed between schizophrenia and Robbery, Burglary, Theft & Handling Stolen Goods, Fraud & Forgery, Criminal Damage, and Drug Offences.

It has however been identified that there are close links between mental illness and crime, and historically this can be traced back to the 1800's when James Hadfield provided the law with a principal case, in which it was recognized that Hadfield had been suffering with paranoid delusions after he attempted to kill King George. The court stated that 'He being under the influence of insanity at the time the act was committed' (Thomas Bewley madness to illness, archive 17)

We should therefore consider a definition of schizophrenia. Schizophrenia presents itself in varying ways. Irrationality of behavior is common amongst sufferers, along with disturbances of thought and perception. This can lead to delusional jealousy and the individual may act in a way that makes them violent towards others. Delusions are common amongst sufferers; these delusions may lead a patient to have beliefs that are not generally accepted in society. Consequently, a schizophrenic may act on a belief, it is not unusual for a patient to believe that they are part of a secret service and being watched, therefore the delusions take over and the patient may act irrationally. There is said to be 'a degree of incongruity between thoughts and emotions' (Prins, 1995, p94). Mullen (2006) studied the correlation between schizophrenia and violence, in this study he suggested that there were significant factors that were prevalent in schizophrenic, violent offenders. This includes psychosocial factors, psychosocial factors will incorporate the biological factors such as inherent schizophrenia, which is passed on through genetics and environmental factors are often found to be contributory. Patients that suffer from a psychiatric illness are more likely to be vulnerable in society, due to unemployment, social isolation and educational failure. Patients that suffer with acute symptoms will often isolate them selves from the community, therefore detection of accumulative symptoms will become increasingly difficult to identify.

Perhaps the strongest evidence is where P. Lindqvist and P. Allebeck (1990) compared the crime rate of patients suffering with schizophrenia and the crime rate of the general population. It was reported that 'the rate of violent offences was four times higher among the schizophrenics' (Allebeck, 1990,

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v157, p345-350). Mullen (2006) explores type one and two violence amongst Schizophrenic offenders. In patients who are labelled as having type 'one' violence they will typically 'look' like a patient and the attack will occur on a carer. However those who fall in to the type two categories will have a history of anti social behaviour and subsequently be known to the police for previous offences. This patient will 'look' like a criminal. Consequently most offences are committed by a patient that displays type 'two' violence.

According to Rashmi Nemade, Ph. D. & Mark Dombeck, PhD (2009), documented in the Schizophrenia Stigma and Violence report, it suggested that 'This small relationship between violence and mental illness is dwarfed by the much larger relationship between substance abuse problems and violence.'(Schizophrenia stigma and violence, 2009) Substance abuse increases the likelihood of the schizophrenic patient committing a violent crime, amongst schizophrenics who have been diagnosed with co morbidity the probability of a violent crime is much increased.

In a new study, presented in the scientific journal JAMA, researchers compared the rate of violent crime in over 8, 000 people diagnosed with schizophrenia between 1973 and 2006, and a control group of 80, 000 people from the general population of Sweden.

Twenty-eight percent of those with schizophrenia and co-occurring substance abuse were convicted of violent crime, compared to eight percent of those with schizophrenia and no substance abuse, and five percent of the general population.

"Hence, the idea that people with schizophrenia are generally more violent than those without is not true," says Dr Niklas Långström, one of the researchers behind the study.

There is also significant evidence to support the predominance of schizophrenia in males opposed to females. A study conducted by Michael Soyka et al, reported that 'male patients (117 of 685, 17. 1%) outnumbered female patients (52 of 977, 5. 3%) by more than 3 to 1. The rate of violent crimes was especially high: 62 (3. 7%) patients were convicted for physical injury offences.' (Soyka, 2007, Pages 89-98).

Interestingly the concept of mental illness sufferers having a greater chance of being the victim of crime has a much stronger correlation than being the perpetrator of criminal activity. It has been suggested that a patient suffering from a long and enduring psychiatric illness such as schizophrenia, would statistically be more likely to commit a violent crime. However someone suffering from a mental disorder can be vulnerable in society, conversely it has to be considered that they may become a target for criminality.

A study conducted by Elizabeth Walsh and Paul Moran (2003) identified a correlation between severe mental illness and victimization; the study looked at 691 patients who were suffering from a severe mental illness. The subjects were compared to the same amount of people from the general population. The participants were asked if they had been assaulted, beaten or molested. The results showed that 16% had been subjected to victimization in one year, this figure can be compared to that of the British

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Crime Survey (2008/9) in which it reported that 'For police recorded crime, total violence against the person decreased by 6%'. (British crime survey, p2). J . Brekke (2001) looked at Schizophrenic patients within the community over a five year period; the study looked at 172 patients living in the community. He discovered that 38% were victims of crime and a staggering 91% of those reported crimes were of a violent nature. He found that the rates of criminality that this client group were subjected to were '14 times more likely to be victims of crime' (G . silsby, 2001). This evidence suggests that people who suffer from a psychiatric illness are certainly vulnerable within society and subjected to violent crimes and harassment.

It can be recognized by the weight of evidence and statistical information that there is a definitive correlation between crime and psychiatric disorders. This has been identified since the 1800's and through various studies and reports in this area, a link can positively be identified. Schizophrenia can be a debilitating illness which subsequently affects mood, perception and the sufferer can have delusions. Allbeck (1990) studies do indeed indicate that crime in patients suffering a psychiatric illness 'was four times higher among the schizophrenics' (1990, p345-350). Schizophrenic patients suffer with delusions and as a result this may lead to violent behaviors as identified by Allbeck (1990) and Mullen (2006). Equally patients with a psychiatric disorder can become victim to crime (Moran, 2003). It is a common misconception that Schizophrenic patients will be violent; certainly there is evidence to support this opinion. However there are clearly people living in communities with this disorder who can manage to live a relatively normal life, who in fact are subjected to harassment and persecution. Research

conducted by Walsh and Moran (2003) highlights the prevalence of victimization amongst the Schizophrenic communities and therefore they are exposed criminality.

In conclusion then, there is a relationship between mental illness and crime, but it is important to stress that this does not mean that there is a correlation between all mental illnesses and all crimes.

Specifically there is evidence that there is a relationship between schizophrenia and violent crime, but the evidence suggests this is a much smaller factor than other factors such as drug and solvent abuse, and interestingly that there is a much stronger correlation with mental disorder patients being the victims of crime.