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Association of Demographic Factors and Comorbid Diagnoses with Crime Type in an Arrest Cohort with Schizophrenia and/or Related Psychosis

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Authors

Comments
Presented at Psychiatry Research Day at the University of Massachusetts Medical School, 2009.
Background

The implications of the context between the criminal justice system and individuals with schizophrenia persist despite decades of research into criminality and risk of arrest. Research exploring the broader construct of criminality has predominantly focused on individuals with severe mental illness as a collective. This study differs from others by examining diagnoses correlated with schizophrenia and related psychoses and their relationships with risk of arrest across a spectrum of criminal categories ranging in severity.

Methods

Demographic and comorbid diagnoses were collected from a 10-year arrest cohort of 3,588 clients of a public mental health system who had received an important diagnosis of schizophrenia or related psychoses. The likelihood of arrest across six broadly defined criminal charge categories was examined and compared using demographics and comorbid diagnoses in separate logistic regression models.

Results

Across our cohort, 63% experienced arrest for nuisance or low-level offenses, 50% were arrested for serious violent crimes, and 46% were arrested for public order crimes. 69% were arrested for property crimes, and 46% were arrested for crimes against persons. 42% were arrested for crimes related to sex for hire, indecent exposure, and lewd and lascivious behavior.

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PTSD and Serious Violent Crime

We dichotomized comorbid anxiety disorders into two variables, those with PTSD and those without. Replacing the anxiety diagnosis with these two variables in the full cohort Serious Violent Crime model revealed that comorbid PTSD was associated with Serious Violent Crime arrest (OR = 2.35, 95% CI 1.20-4.63 p = 0.013) and non-PTSD anxiety disorder was not (OR = 1.17, 95% CI 0.54-2.52 p = 0.693). This finding was similar for males and females and consistent with observations about violent behavior and a history of trauma in similar populations.

Conclusion

Diagnoses correlated with schizophrenia carry implications for risk of arrest across a spectrum of offense categories. Risk assessment and interventions aimed at reducing offending and re-offending should identify and target comorbid psychiatric and substance abuse disorders in their efforts to reduce the likelihood of justice involvement among persons with schizophrenia.