Journal of Nursing
Revista de Enfermagem
UFPE On Line
ISSN: 1981-8963

ORIGINAL ARTICLE

THE RELATIONSHIP PSYCHIATRIC DIAGNOSIS AND CRIMES COMMITTED BY INTERNALS OF A FORENSIC PSYCHIATRIC PRISON

A RELAÇÃO DIAGNÓSTICO PSIQUIÁTRICO E CRIMES PRATICADOS POR INTERNOS DE UMA PENITENCIÁRIA PSIQUIÁTRICA FORENSE

LA RELACIÓN DIAGNÓSTICOS PSIQUIÁTRICOS Y CRÍMENES COMETIDOS POR LOS PRESOS DE UNA PENITENCIARÍA PSIQUIÁTRICA FORENSE

Emanuella Kelle Veras de Lima[1], Odinélia Batista Arantes Lima[2], Gerson da Silva Ribeiro[3], Leila de Cássia Tavares da Fonsêca[4], Franceleide de Araújo Rodrigues[5]

ABSTRACT

Objectives*:** to trace the socio demographic profile of the interns of a forensic psychiatric penitentiary; to identify the relationship between diagnosis and crimes committed by inmates. ***Method: a retrospective study with a quantitative approach performed in a forensic psychiatric penitentiary in Paraíba, with 50 records of inmates. The data were collected through a form and the information was tabulated and analyzed from the literature. The study had the research project approved by the Ethics Committee in Research, CAAE: 1508.0.000.462-11. ***Results:*** it was found that 34% of the individuals were aged 20-29 years old, with a prevalence of mental and behavioral disorders (37,1%) and crimes against life (35%). ***Conclusion:*** the population of inmates is similar to other institutions with the same profile: young adult patients, predominantly male, diagnoses of mental and behavioral disorders and personality disorders. ***Descriptors:*** Diagnosis; Crime; Forensic Psychiatry.

RESUMO

Objetivos: traçar o perfil sócio demográfico dos internos de uma penitenciária psiquiátrica forense; identificar a relação entre diagnóstico e crimes praticados pelos internos. ***Método:*** estudo retrospectivo, com abordagem quantitativa, realizado em uma penitenciária psiquiatríca forense da Paraíba, com 50 prontuários de internos. Os dados foram coletados por meio de um formulário e as informações foram tabuladas e analisadas a partir da literatura. O estudo teve o projeto de pesquisa aprovado pelo Comitê de Ética em Pesquisa, CAAE: 1508.0.000.462-11. ***Resultados:*** verificou-se que 34% dos indivíduos encontram-se na faixa etária de 20-29 anos, com predomínio de transtornos mentais e comportamentais (37,1%) e crimes contra a vida (35%). ***Conclusão:*** a população de internos é semelhante à de outras instituições com o mesmo perfil: pacientes adultos jovens, predomínio do gênero masculino, diagnósticos de transtorno mentais e comportamentais e transtornos de personalidade. ***Descritores:*** Diagnóstico; Crime; Psiquiatria Forense.

RESUMEN

Objetivos: trazar el perfil sociodemográfico de los internos de una prisión psiquiátrica forense, para identificar la relación entre el diagnóstico y los crímenes cometidos por los reclusos. ***Método:*** estudio retrospectivo, con abordaje cuantitativo, realizado en una cárcel psiquiátrica forense en Paraíba, con 50 prontuarios de los internos. Los datos fueron recolectados a través de un formulario y las informaciones fueron tabuladas y analizadas de la literatura. El estudio tuvo el proyecto de investigación aprobado por el Comité de Ética en Investigación, CAAE: 1508.0.000.462-11. ***Resultados:*** se encontró que el 34% de los individuos tienen entre 20 a 29 años, con una prevalencia de los trastornos mentales y del comportamiento (37,1%) y los crímenes contra la vida (35%). ***Conclusión:*** la población de internos es similar a otras instituciones con el mismo perfil: pacientes adultos jóvenes, predominantemente masculina, diagnósticos de trastornos mentales y del comportamentales y trastornos de la personalidad. ***Descriptores:*** Diagnóstico; Crimen; Psiquiatría Forense.

[1]Nurse, Federal University of Paraíba/UFPB. João Pessoa (PB), Brazil. E-mail: emanuellakelle@hotmail.com; [2]Nurse, Federal University of Paraíba/UFPB. João Pessoa (PB), Brazil. E-mail: odinelia.arantes@hotmail.com; [3] Nurse, Master Teacher in Public Health, Federal University of Paraíba/ UFPB. João Pessoa (PB), Brazil. E-mail: florenceribeiro@hotmail.com; [4]Nurse, Master Teacher in Public Health, Federal University of Paraíba/UFPB. João Pessoa (PB), Brazil. E-mail: leilafonsecarr@hotmail.com; [5]Nurse, Master Teacher in Nursing, Federal University of Paraíba /UFPB. João Pessoa (PB), Brazil. E-mail: franceand@gmail.com

INTRODUCTION

The prison population of Brazil has 548.003 inmates, with about 287.31 prisoners per 100 thousand inhabitants. With regard to prisons in the country, 1.399 existent prisons were male, only 28 are hospitals of custody and psychiatric treatment.[1] Thus, the crime being a complex phenomenon, which has multiple biopsychosocial determinants, deserve special attention from people with mental perpetrators of crimes.[2]

Whereas the right to health is guaranteed to every individual, health policies should act, ensuring the promotion and protection of human rights in a focal and immediacy, whether vulnerable groups as well as the marginalized.[3]

In 2003 was created the National Health Plan in the Penitentiary System (PNSSP), established by Ministerial Decree n ° 1.777/2003, in order to ensure access to health care for persons deprived of liberty (male, female and psychiatric), offering actions and primary care services in situ, ie, within the prisons.[4]

The relationship between severe mental disorder and violence is very complex and, despite advances in methodology in psychiatric research, the issue continues to generate various debates often seen that there is considerable time between the crime and the proper assessment of subjects who committed including their mental state, diagnosis and environmental circumstances.[5] mental health policies and current clinical practices have failed to recognize that aggressive behavior and victimization are problems of many patients with serious mental disorders.[6] Consequently, care services are not provided sufficient resources to address these problems by increasing the number of patients transferred to forensic services.

In Brazil, studies have assessed the population of internal Psychiatric Institute, which revealed that in relation to criminal activity, 74% had committed violent crimes against persons (murder, attempted murder and assault) and 9% had committed a sex crime. Thus, although the literature has been scarce compared with studies assessing the profile of mentally ill offenders, it is believed that the search for knowledge of these professionals is essential for the planning of assistance inside and outside of the institutional environment. [5,7]

In England, some studies in psychiatric hospitals with 1.740 patients revealed that there is a predominance of males (83%) and aged 20-50 years old (82%) with a mean of 39,4 years old. Regarding the made diagnoses , it was found a prevalence of schizophrenia and delusional disorder (53%), followed by 16% of mental retardation. Personality disorders appeared in 41% of the cases.[8]

Upon the foregoing, it is consistent to emphasize that crime is also a public health issue, where social and economic marginalization determine, increasingly, the disregard of human rights and citizenship, in favor of a Manichean fight against evil and violence.

We also stress the importance of this study, due to the lack of studies on the subject, so that they can support the improvement of health conditions of the scenario study, in addition to considerable health professionals reflections that allow the awakening of a critical and reflective awareness observed in daily prison system, becoming therefore the following questions: What is the socio-demographic profile of the inmates of a Forensic Psychiatric Penitentiary? What is the relationship between diagnosis and crimes committed by an internal Prison Forensic Psychiatric?

Faced with the above, the study aims to:

• Trace the socio demographic inmates of a prison psychiatric forensics.

• Identify the relationship between diagnosis and crimes committed by inmates.

METHOD

A retrospective study with a quantitative approach, performed in a forensic psychiatric prison, located in the city of João Pessoa/Paraíba, Northeast Brazil. The sample consisted of 50 records of internal, then you meet the following criteria: availability of information accessible and easily understood the spelling in the records. We excluded the charts that they not had the possibility of understanding in spelling.

Data were collected from July to August 2011, through an instrument developed by the researchers, consists of two parts: the first part refers to socio demographic and the second addressing the relationship between diagnosis and crimes committed by inmates.

Data were tabulated and analyzed in *Excel®,* spreadsheets, and data were presented in figures and subsequently analyzed from the literature.

The study followed the ethical principles of Resolution 196/969 of the National Health Council. It was approved by the Ethics and

Committee in Research, Center for Health Sciences, Federal University of Paraíba/UFPB under nº CAAE: 1508.0.000.462 -11. Because this is a retrospective documentary research, it was used the Term of Free and Informed Consent Form (ICF).

RESULTS AND DISCUSSION

Regarding the identification data, the results were presented in terms of age, education, profession and marital status. Regarding the diagnoses, these were identified using the criteria of ICD-10 and the crimes committed that were analyzed according to the Brazilian Penal Code.

• *Identification data*

As shown in Figure 1 it was found that 34% of people are aged 20 and 29, revealing that the prison population in the study area corresponds to younger individuals.

The results are consistent with the literature in relation to age. Statistics recorded by INFOPEN Information System (Prisons) - Ministry of Justice addressed with regard to the aspects concerning the age of the population of prisoners in Brazil, that in 2011, 122.616 inmates are aged between 18-24 years and 105.396 prisoners aged between 25-29 years. In the year 2012, 136.525 inmates are aged between 18-24 years and 116,696 prisoners aged between 25-29 years. Thus, it is shown that the prison population of inmates aged 18-29 years has increased in recent years. [1]

Study[10] reveals that probably the worsening of the disorder and multiple episodes productive associated with worsening of clinical status, is one of the factors related to the commission of the offense at this age.

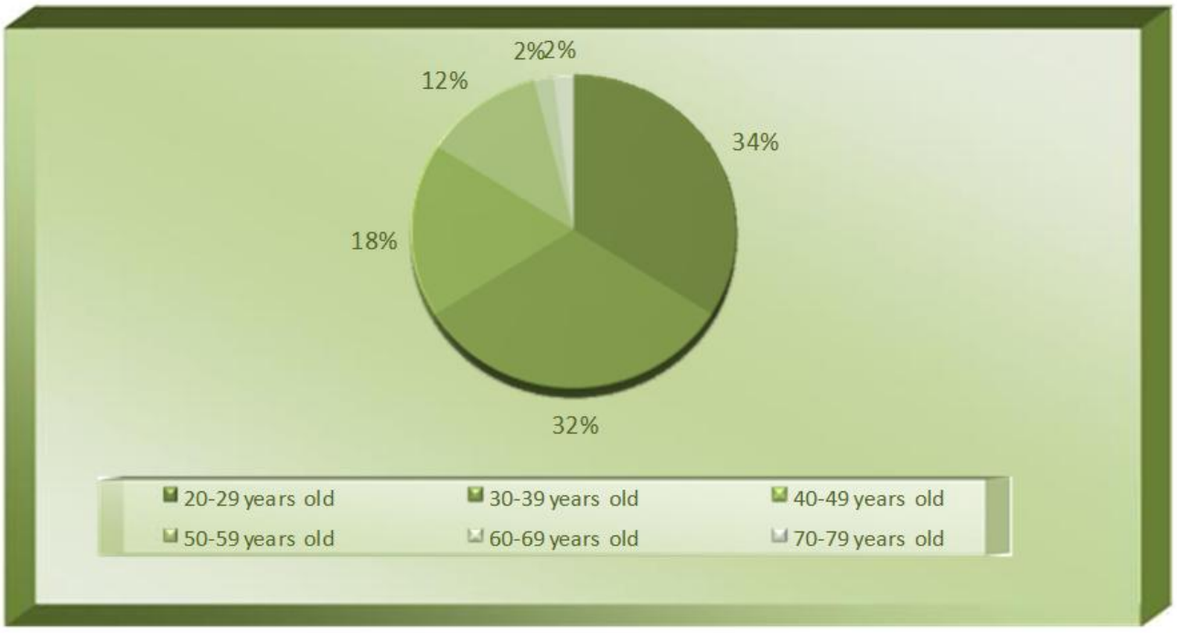

Figure 1. Distribution of the percentage referent to the age group of inmates in a psychiatric prison. João Pessoa / PB.

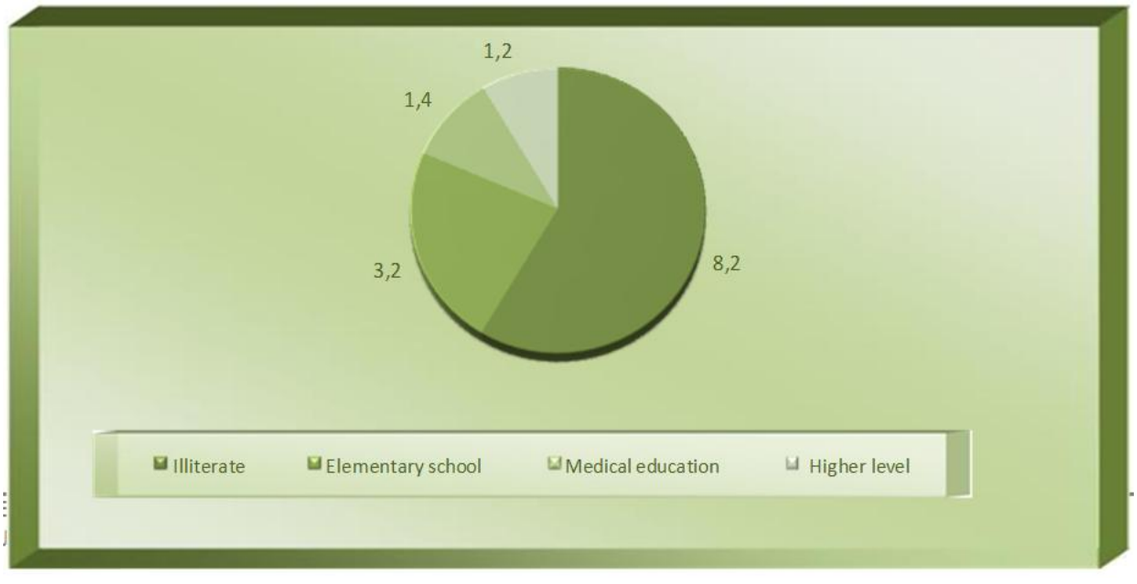

Figure 2. Percentage distribution regarding the education of inmates of a psychiatric prison.

It can be seen in Figure 2 that the inpatients of a psychiatric prison only 48% finished elementary school. Thus, the low education level of inmates can be explained by its terms in relation to socioeconomic level, compounded by difficult access to specialized treatments and the limited possibility for learning due to mental disorder.[11]

The data presented corroborate the statistics recorded according to INFOPEN - Ministry of Justice (2012), in which the 482.073 prisoners, for the total male prison population in Brazil, 219.241, or 45,47% have primary education.[1]

Study12 reveals that this reality is quite disturbing when they state that only one in ten Brazilian inmates participating in educational activities offered in prisons.

Despite the small number of inmates with higher level (4%), an assumption that can be made is that the higher the education level, the higher the socioeconomic status of the internal and, consequently, higher conditions of access to specialized psychiatric treatment, the which decreases the chances of involvement in conflicts and criminal activities.[13]

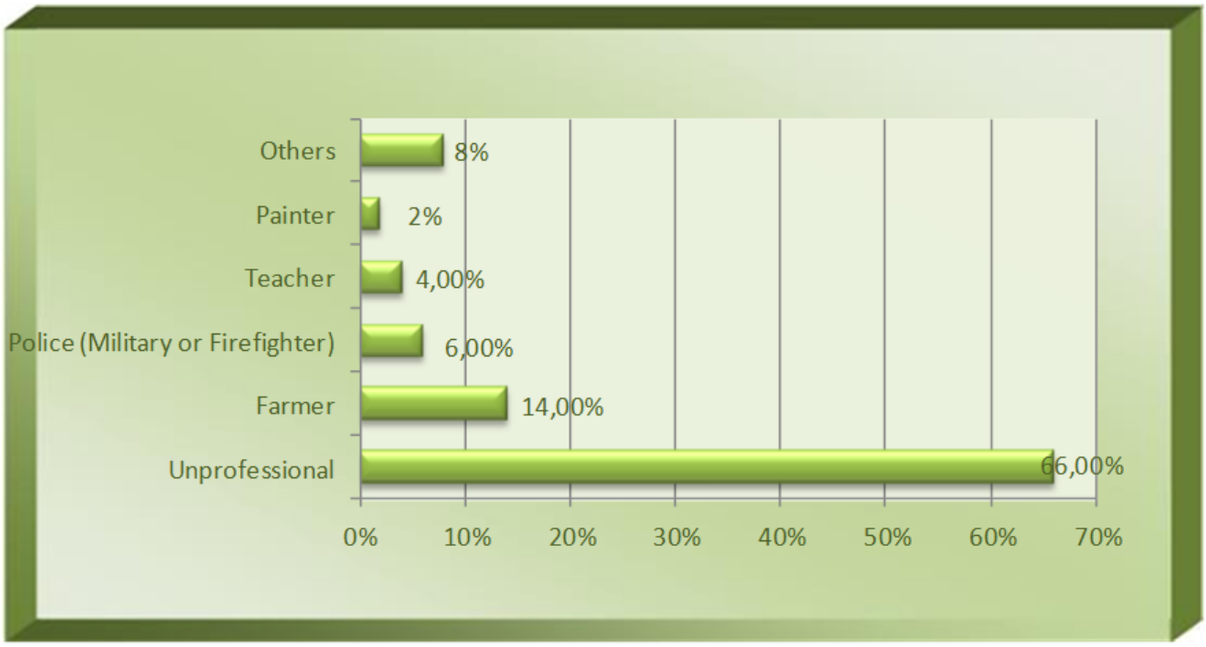

Figure 3. Distribution percentage for the profession of the internals of a psychiatric prison.

Regarding the occupations pursued by inpatients in a forensic psychiatric prison before they are serving the sentence, shows that 66% of them did not exercise any profession, this fact is disturbing because work occupies the mind and ennobles the man, as stated in our constitution.

Thus, one can identify the fact that the inmates of the prison do not have any job associated with the age group between 20-29 years, when they committed the crimes, shows that the absence of a defined profession could be related to mental illness they have, causing them to become unproductive and even incapable.[14]

Studies emphasize that the 15 families who live with a person with psychosis is constantly invade the thoughts and feelings of the patient with mental disorder. It is noticed that the family relationship the patient often forces the family to make things in your favor, and the family does not know how to behave in front of manifestations such as delusions of persecution, confusion, excessive spending and collections.

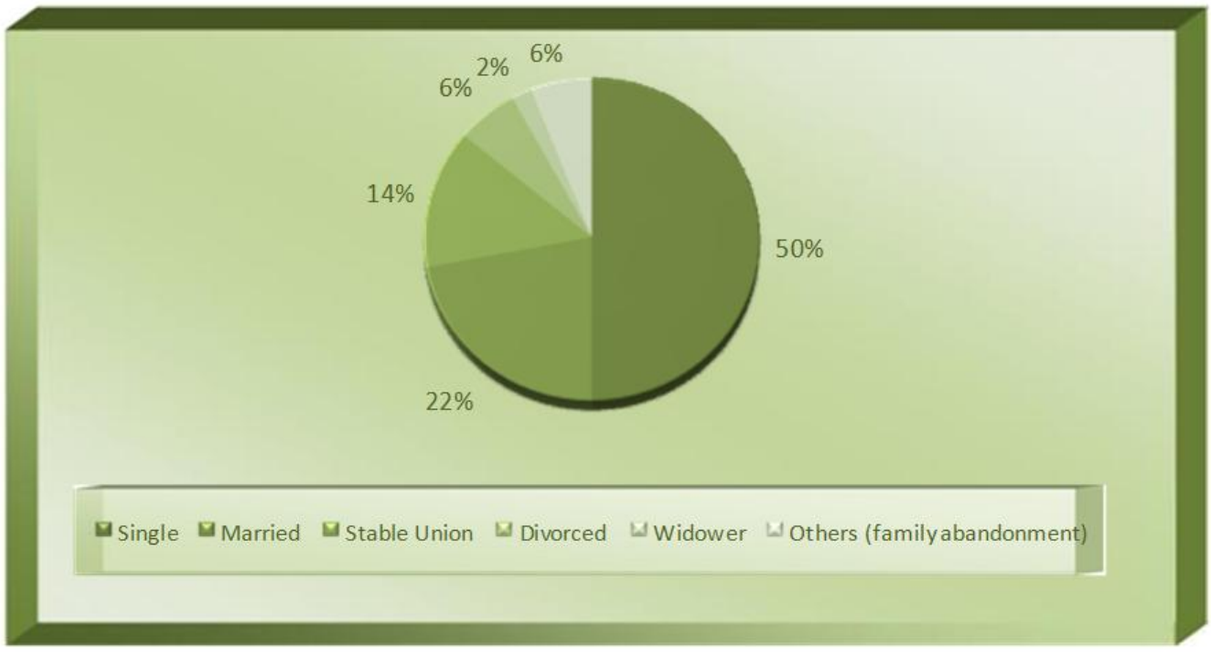

Figure 4. Percentage distribution regarding the marital status of inmates of a psychiatric prison.

It is evident in Figure 4, that the participants in the sample 50% are single. INFOPEN data reveal that the total male prison population in Brazil corresponds to 482.073 inmates, 136.74 are single, showing that marital aforementioned prevails in convicts [1].

These data corroborate studies conducted in seven regions of England forensic psychiatric service in medium security, which evaluated 2.608 patients admitted to institutions. A predominance of male population and singles.[16]

There are studies that mention the high percentage of individuals classified as unmarried, due to the fact of not having a real internal marital status, because even having a companion may have been classified as singles.[17]

- **Data referent to the relation between psychiatric diagnosis with crimes**

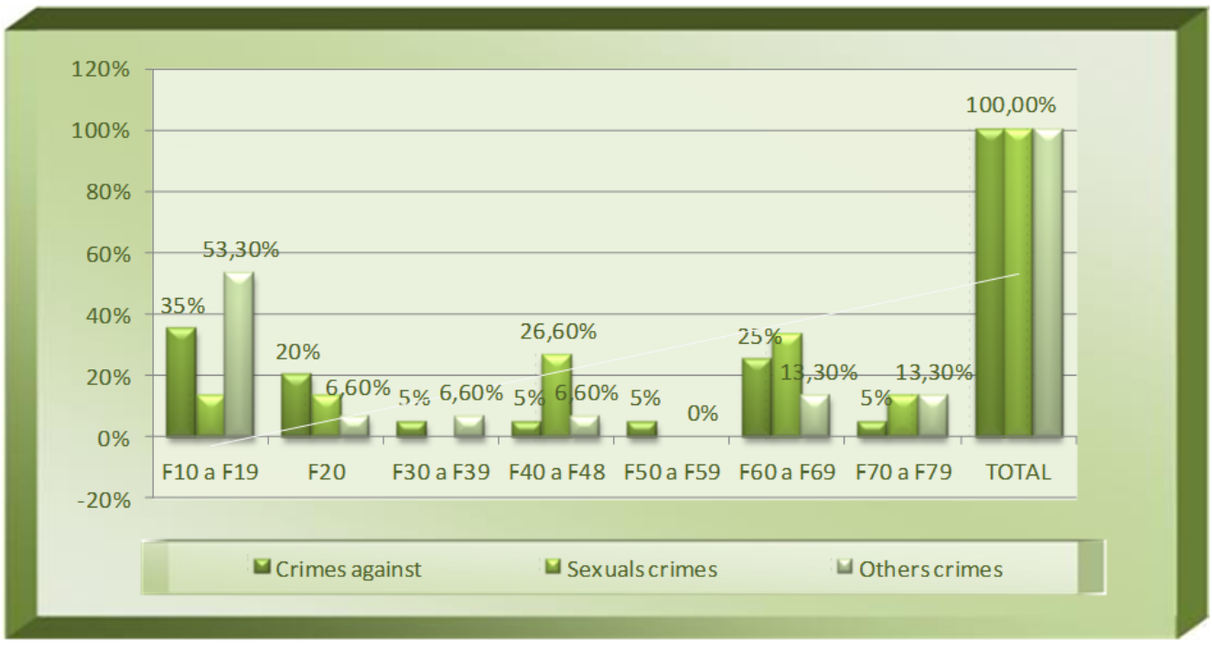

Figure 5. Percentage distribution on the relation between psychiatric diagnosis with crimes.

Relating to psychiatric disorders and criminality it has long been the subject of various international studies, however, in Brazil these data are scarce. Recent estimates reveal that 8 % to 12 % of the U.S. prison population suffers from a serious mental disorder.[18]

The distribution of psychiatric diagnosis was taken from the latest opinion held in the institution and in the attached chart studied , considering the diagnostic criteria adopted by the tenth revision of the International Classification of Diseases (ICD-10) [19].

Thus , what is observed is the prevalence of mental and behavioral disorders 37,1 % of hospitalized due to use of psychoactive substances , which include acute intoxication (F10.0) , multiple drug use and use of other substances psychoactive (F19.0) . This was another category of personality disorders and adult behavior (F60 to F69), with 18 cases, equivalent to a total of 29%.

When referring to the distribution of crimes, these were divided according to the Brazilian Penal Code into three categories: crimes against life, such as homicide and bodily injury, sexual crimes, such as rape and indecent assault, and other crimes such as assault, drug trafficking, receiving stolen goods and burglary.

In this study , we observed a higher prevalence of crimes against life , with 20 individuals (35 %) and the group of patients with mental and behavioral disorders due to psychoactive substance use (F10 to F19) appearing with greater frequency .

It is something expected in part because most serious crimes involve imprisonment under the Criminal Code. Therefore, incompetent criminals who committed this crime must, by law, remain in custody in inpatients. This finding is also consistent with the findings of other studies , which found a prevalence of crimes like murder and other violence , carried out by individuals with mental and behavioral disorders due to use of psychoactive substances.[8]

A study of Taylor[8] found a strong association between psychotic symptoms and violent behavior recently, as 93% of individuals had psychotic symptoms when they committed these crimes and 47% were "definitely" or "probably" motivated by these crimes.

It is noteworthy, that the group of personality disorders and adult behavior, which stresses the diagnosis (F60.2) had a higher percentage in relation to sexual offenses with 33,4%, and among these three cases, victims were younger than 14 years old.

These findings corroborate with studies that evaluated sex crimes committed by individuals with personality disorders and adult behavior and found that two-thirds of the victims were younger than 16 years old. Thus, it can identify the young age of the victim suggests that it might offer less resistance to the aggressor. Furthermore, it can be speculated that individuals with personality disorders and adult behavior, perhaps by identifying, approach children creating an intimacy with them, and such intimacy, jumping to acts of sexual content and aggressive.[11]

CONCLUSION

The results of the study showed that the population of inmates at the forensic prison examination is similar to those of other institutions, including other countries with the same profile: young adult patients, predominantly male and diagnoses of mental and behavioral disorders and personality disorders and adult behavior.

The findings in relation to socio-demographic profile and the relationship between diagnosis and crimes committed by inmates indicate that aspects of the victim have an important role in the crime and should be the focus of future work deeper. Furthermore, knowing the characteristics of inpatients is of paramount importance to improve the ability to detect and deal with the internal order to plan future assistance policies, risk assessment and violence prevention.

The scarcity of publications on the subject makes it difficult to raise awareness about the real problem of health of these inmates, besides restricting the dissemination of knowledge to society. Therefore, it is worth emphasizing the importance of further studies addressing psychiatric populations related to specific crimes, and that the studies may support information to the process of risk identification and prevention of violence committed by people with severe mental disorders.

REFERENCES

1. Brasil. Ministério da Justiça. Sistema Integrado de Informações Penitenciárias [Internet]. 2012 [cited 2013 Mar 21]. Available from: http://www.infopen.gov.br/

2. Chalub MT, Lisieuxl B. Álcool, drogas e crime. Rev bras psiquiatr [Internet]. 2007 Oct [cited 2013 Mar 25]; 28 (2Suppl):69-73. Available from: http://www.scielo.br/scielo.php?pid=S151644462006000600004&script=sci_abstract&tlng=pt

3. Arruda AJCG, Oliveira MHB, Guilam MC, Costa TF, Leite I F, Costa KNFM. Saúde atrás das grades: sob a óptica dos apenados em regime fechado. Rev Enferm UFPE on line [Internet]. 2012 Dec [cited 2013 Mar 16];6(12):2884-92. Available from: http://www.revista.ufpe.br/revistaenfermagem/index.php/revista/article/view/3430/pdf_1722

4. Brasil. Ministério da Saúde. Secretaria de Atenção à Saúde, Departamento de Ações

Programáticas Estratégicas, Plano Nacional de Saúde no Sistema Penitenciário. Brasília: Ministério da Saúde, 2006.

5. Teixeira EH, Pereira MC, Rigacci R, Dalgalarrondo P. Esquizofrenia, psicopatologia e crime violento: uma revisão das evidências empíricas. J bras psiquiatr [Internet]. 2007 [cited 2012 Nov 10]; 56 (2): 127-33. Available from: http://www.scielo.br/pdf/jbpsiq/v56n2/a09v56n2.pdf

6. Hodgins S, et al. Mental disorder and crime: evidence from a Danish birth cohort. Arch Gen Psychiatry [Internet]. 1999 [cited 2012 Aug 21];53(6):489-96. Available from: http://www.ncbi.nlm.nih.gov/pubmed/8639031

7. Taborda JGV, Cardoso RG, Morana HCP. Forensic psychiatry in Brazil. Int J Law Psychiatry, 23(5-6): 579-88, 2000.

8. Taylor PJ, Leese M, Williams D, Butwell M, Daly R, Larkin E. Mental disorder and violence (a special high-security hospital study). Br J Psychiatry [Internet]. 1998 [cited 2012 Aug 21];172(1): 218-26. Available from: http://www.ncbi.nlm.nih.gov/pubmed/9614470

9. Brasil. Ministério da Saúde. Conselho Nacional de Saúde, Comissão Nacional de Ética em Pesquisa. Resolução nº 196 de 10 de outubro de 1996: aprova as diretrizes e normas regulamentadoras de pesquisa envolvendo seres humanos. Brasília: Ministério da Saúde, 1996. 83-91p.

10. Black DW. Bad boys, bad men: confronting antisocial personality disorder. New York: Oxford University; 1999.

11. Teixeira EH, Dalgalarrondo P. Crime, diagnóstico psiquiátrico e perfil da vítima: um estudo com a população de uma casa de custódia do estado de São Paulo. J Bras Psiquiatr [Internet]. 2006 [cited 2013 Aug 21];55(3):192-94. Available from: http://www.scielo.br/pdf/jbpsiq/v55n3/v55n3a03.pdf

12. Brasil. Conselho Nacional de Educação. Levantamento mostra escolaridade dos presidiários no País. [Internet]. Brasília; 2012. [cited 2013 Apr 10]. Available from: http://www.brasil.gov.br/noticias/arquivos/2012/04/24/levantamento-mostra-escolaridade-dos-presidiarios-no-pais

13. Gauer GJC et al. Inimputabilidade: estudo dos internos do Instituto Psiquiátrico Forense Maurício Cardoso. Rev Psiquiatr RS [Internet]. 2007 [cited 2013 Aug 21];29(3):286-93. Available from: http://www.scielo.br/pdf/rprs/v29n3/v29n3a08.pdf

14. Abreu PSB, Paula LV; Klafke A; Rosa AB; Terrazas TL; Silva MS. Fardo do paciente psiquiátrico crônico na família. Rev ABP-APAL [Internet]. 2008 Apr/June [cited 2013 Jan 10];13(2):49-52. Available from: http://bases.bireme.br/cgi-bin/wxislind.exe/iah/online/?IsisScript=iah/iah.xis&src=google&base=LILACS&lang=p&nextAction=lnk&exprSearch=123236&indexSearch=ID

15. Texeira EH, Dalgalarrondo P. Risco de violência e precariedade de recursos assistenciais para casos agudos. J bras psiquiatr [Internet]. 2006 [cited 2012 Oct 27]; 54 (3): 192-94. Available from: http://www.scielo.br/scielo.php?script=sci_arttext&pid=S0047-20852006000300003

16. Coid J, Kahtan N, Gault S, Cook A, Jarman B. Medium secure forensic psychiatry services: comparison of seven English health regions. Br J Psychiatry [Internet]. 2001 [cited 2013 Aug 21]; 178(1):55-61. Available from: http://bjp.rcpsych.org/content/178/1/55.short

17. Meleiro A, Teng CT. Fatores de risco de suicídio. In: Meleiro A, Teng CT, Wang YP. Suicídio: estudos fundamentais. São Paulo: Segmento Farma; 2004. p. 109-31.

18. Moscatelo R. Comparação entre diagnóstico psiquiátrico e delito cometido em 100 pacientes do Manicômio Judiciário de Franco da Rocha. Rev bras psiquiatr [Internet]. 1999 Apr/June [cited 2013 Feb 27];21(2):131-31. Available from: http://www.scielo.br/scielo.php?script=sci_arttext&pid=S1516-44461999000200013

19. Classificação de Transtornos Mentais e de Comportamento da CID-10. Porto Alegre: Artmed; 1993. 352p.

20. Noreik K, Grunfeld B. Mental retardation and sexual abuse: 65 mentally retarded men submitted to forensic psychiatric examination because of sex offences. Tidsskr Nor Laegeforen [Internet]. 1993 [cited 2013 Feb 27];113(16): 2003-5. Available from: http://www.ncbi.nlm.nih.gov/pubmed/8322353

Submission: 2013/07/07
Accepted: 2013/09/01
Publishing: 2014/01/01

Corresponding Address

Emanuella Kelle Veras de Lima
Av. Ivo Pereira Lima, S/N
Bairro São Francisco
CEP: 58778-000 – Aguiar (PB), Brazil