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978-0-521-10706-8 - Crimes of Violence by Mentally Abnormal Offenders: A Psychiatric and Epidemiological Study in the Federal German Republic

H. Hafner and W. Boker

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by mentally
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Crimes of violence by
mentally abnormal offenders

A psychiatric and epidemiological study
in the Federal German Republic

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The greatest injustices proceed from those who pursue immoderation
and not from those who are guided by necessity
(Aristotle)

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FOREWORD

The publication of this monograph in English translation will enable it to be read throughout the world, and will help to bring to the authors the recognition they well deserve. It is the most systematic and detailed epidemiological study yet undertaken of the extent to which the mentally abnormal are responsible for major crimes of violence.

Their sample consists of all the 533 men and women detained as legally irresponsible in the Federal Republic of Germany between 1955 and 1964 suffering from psychosis or serious degrees of subnormality after committing homicide or intended but unsuccessful homicide.

Hitherto the extensive literature on the subject has mainly dealt with individual psychiatrists' collections of patients, selected in unknown ways. In addition, all forensic research tends to be complicated by differences in the criteria of behaviour in the criminal law and the medical criteria of abnormality. Apart from this, an unknown number of violent offences are not reported or followed by detection, and many psychotic individuals may not be known to the health authorities. The authors therefore chose to study a type of offender which is probably most reliably notified and arrested, and types of mental disorder (schizophrenic, affective, or organic psychoses, and moderate to severe subnormality) about which there is a substantial agreement among psychiatrists.

In popular imagination mentally ill or subnormal patients are liable to unpredictable outbursts of dangerous violence. The representativeness of the sample enables the authors to calculate that such individuals are no more, but also no less, likely to commit homicide than the mentally healthy.

The detailed analysis of age, family, social and occupational relations, motives, symptoms, as well as the duration of illness and quality of any aftercare the offenders may or may not have received, has made it possible to point to situations or symptoms of special danger, especially for close relatives, and to suggest better policies of prevention.

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The data are set out in great detail. The concluding summary chapter gives a clear impression of the main findings, and readers may find it convenient to read this first before turning to the earlier chapters on matters which especially concern them.

In supervising the translation, I should like to express my overwhelming debt to Miss Helen Marshall, for many years personal secretary to the late Professor Sir Aubrey Lewis, and later librarian of the Institute of Psychiatry, who carried out not only the initial translation but all the typing.

T.C.N. Gibbens

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PREFACE

The efforts of modern psychiatry are resulting in more open treatment of the mentally abnormal. An unknown but growing number of chronic patients suffering from mental illness and mental handicap who used to be regarded as needing permanent institutional care are being given the chance of living in the community. This places a greater burden upon their families and upon society, and may also expose them to greater risks than they have been accustomed to bear.

Those of us who took part in early attempts to introduce community psychiatry and psychiatric rehabilitation into the Federal German Republic know what resistances had to be overcome. How could one really reply to the main objection that 'the mentally abnormal are unpredictable and dangerous'? The divergent lines of thought current in our own specialty were of little help. There was no empirical study which could supply reliable information. The scientist's own beliefs - though highly esteemed by many - do not provide him with a solid foundation, even if he is himself a practitioner.

If we want to encourage a society to take risks, then our knowledge of the extent of these risks must be fairly assured. If the risks are great, involving possibly death or serious bodily harm, then the citizen has a right to know whether he is more at risk from the violence of 'normal' men than from the violence of the mentally abnormal. If more mentally abnormal individuals are to live freely in the community, then we must be in a position to identify those among them who represent a high risk. So long as this is not possible, we must either use protective measures indiscriminately against a large number of harmless patients, or be prepared for unknown dangers. So far no serious consideration has been given to the development of well-aimed preventive measures carefully directed at the criminal violence of the mentally abnormal.

The present investigation was planned with this goal in mind: at the same time we hoped it would contribute to the development of the research

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in the field of 'psychiatric epidemiology', which has been neglected in Germany since 1935. The empirical basis of the study is a comprehensive epidemiological survey of all mentally abnormal offenders who committed a violent crime in the Federal Republic between 1 January 1955 and 21 December 1964.

For methodological and practical reasons the study is limited to violent crime committed by the mentally ill and the mentally handicapped. It was not possible to investigate other crimes committed by the mentally abnormal, or the criminality of those psychiatric patients who do not fall within this diagnostic definition. This is to be regretted, particularly when one considers the important question of 'instinctual crimes', which the project leader (Häfner) had originally wished to include in the study when he was first in touch with the then Federal Ministry of Health.

The risk of violent crime is nevertheless probably the most important factor in our research aims. The amount of work involved and the time required were also considerations which helped to limit the questions we were able to ask.

The study is essentially a collaborative effort. After a preliminary investigation by one of us (Häfner), who also developed the methodological framework of the enquiry and drew up the questions to be asked in it, there followed a phase of planning which lasted eight months and which covered also a pilot study, conducted jointly by the two authors and partly by Wagner, Immich, Köhler and Schmitt. The transcription of hospital records and police and court files onto the coded questionnaire was carried out by A. Schmitt (343 cases) and W. Böker (130 cases). The analysis of data and the interpretation of results was carried out by the project leader (Häfner) supported by preparatory work done by A. Schmitt and W. Böker and by statistical advice given by G. Köhler and J. Werner. There are several reasons for the long time which elapsed between the actual survey and the publication of the findings. For example, the protracted work of evaluation was still further delayed because in the random selection of the control population an error occurred which was discovered by the authors only after the second draft manuscript had been prepared. We therefore had to obtain a new control group from the admissions to another regional hospital and repeat part of the statistical work.

The conduct of such an extensive investigation calls for the co-operation of a large number of people and institutions, and this was admirably forthcoming. We are indebted to the officials of the Regional Offices of Justice, the Federal Criminal Bureau and the Regional Criminal Bureaus, to

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the judges of the regional courts and to the prosecuting authorities who so readily made the necessary documents available to us. In particular we thank Dr Rangol of the Federal Statistical Bureau who responded to our many requests unflinching, promptly and to all feasible extent.

The directors, physicians and archivists of the regional psychiatric hospitals gave us not only every support in our collection of data but also offered us friendly hospitality. We would record our special gratitude to Dr Hoffman-Stuedner, Professor Heinrich and their colleagues at the regional hospitals of Wiesloch and Landeck. We also had the support of colleagues at the Institute for Documentation and Statistics at the German Cancer Research Centre, who helped in the electronic processing of data whenever we needed their co-operation.

It is not possible to name individually all those without whom this study would not have been possible. Representative mention may be made of Frau Brigitta Kroeber, documentalist, who collaborated in the collection and preparation of data, and of Hannelore Holz, Rosemarie Illgen, Christa Khalil and Stefanie Steiniger, of the secretarial staff, who tackled a mountain of manuscripts in several revisions, drew up tables and helped to calculate significant values and to prepare innumerable documents. Our thanks are finally due to the Federal Ministry of Youth, Family and Health for providing the resources which enabled us to carry out the research programme.

Before concluding we would like to make one point for the benefit of the non-specialist reader. This book sets out to present the methodology and detailed findings of a very comprehensive empirical investigation and to weigh up critically all possible adequate interpretations. Therefore its chapters on results abound in tables and in difficult textual passages. In the final chapter we have, however, tried to give a readable summary of the main findings and their practical implications. By beginning there, it is possible to obtain a general synopsis which will facilitate access to the more difficult parts of the book.

Mannheim, June 1972

Heinz Häfner
Wolfgang Böker

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NOTE ON THE TRANSLATION

The English version of our book is a literal translation. This seemed appropriate since the investigations on which the book is based are completed. Besides, they could no longer be carried out as a consequence of the present strict regulations for the protection of confidentiality and personal data.

Some of the terms used in the text do not fully correspond to the present usage. The diagnostic categories and groups, for example, are not identical with the terms used in the International Classification of Diagnoses (ICD), 9th revision. We could not correct this because a classification of diagnoses edited by the German Association of Psychiatry and Neurology was generally applied at the time when the diagnoses and the data-collection were made in the GFR. However, the diagnostic groups used in our investigation correspond to a large extent to the definitions given in the ICD 8th revision.

The translator, to whom we wish to express our deep thanks for her excellent work, has used the terms 'mentally defective' and 'mental deficiency' for *Schwachsinnige* and *Schwachsinn*. The group covered by these terms is ICD No. 311-313 (mild to severe deficiency or retardation). The other diagnostic groups are equivalent to the German classification scheme as well as to ICD 8th revision.

September 1981

H.H.
W.B.