

A Comparison of Male and Female Theft Offenders Remanded to a State Psychiatric Hospital

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ABSTRACT

We report a retrospective study examining the prevalence, demographic profile and pattern of psychiatric morbidity of theft offenders remanded for psychiatric assessment by the Singapore courts. Case records of 100 male and 100 female consecutively remanded theft offenders were reviewed. There was a high rate of psychopathology, with schizophrenia as the commonest disorder. Sex differences were identified in demographic profiles, psychiatric diagnoses, types of offences committed and likely psychiatric determinants of the offence. Depression was more common in females while substance abuse and antisocial personality disorder were diagnosed more frequently in males.

Keywords: Schizophrenia, depression, substance abuse, antisocial personality disorder

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INTRODUCTION

Individuals in Singapore who have committed offences that do not warrant capital punishment and who either have a record of psychiatric treatment or are suspected to suffer from a mental disorder are remanded by the courts for assessment to Woodbridge Hospital, the only state psychiatric hospital in Singapore. By contrast, those who have committed more serious offences (such as rape or murder) are remanded to the prisons. Theft is the commonest offence amongst individuals remanded for psychiatric assessment in Singapore⁽¹⁾, but little is known about the prevalence of psychiatric disorders in this population.

The aims of this study are to determine the prevalence of psychiatric disorder and the demographic profile of theft offenders remanded for psychiatric assessment by the courts, to identify possible psychiatric determinants of their offence, and to examine for sex differences in such data.

METHODOLOGY

The study sample involved 100 consecutive male and 100 consecutive female theft offenders remanded at Woodbridge Hospital for psychiatric assessment over a 4-year period from 1996-1999. We developed a standardised database recording the offender's demographic details and psychiatric history, as well as information on the index offence. All data were obtained from the hospital case records and complemented by court reports, charge sheets and statements of facts supplied by the police. Diagnoses were based on the assessing psychiatrist's diagnosis as recorded in the case file, which was coded according to the ICD-9 classification system. For patients with multiple diagnoses, we sought to find the higher order diagnosis (e.g. psychosis being weighted higher than neurosis, and axis I diagnoses having priority over axis II and axis III diagnoses respectively). In the case of patients remanded more than once during the study period, the most recent theft offence was taken to be the index offence.

The chi-square statistic was used to examine for associations between the variables and the significance of the t-test was used in the correlation of the mean age between the males and females.

RESULTS

Table I compares the demographic profile of the male and female offenders. The females were slightly older than the males. With regard to ethnic distribution, females had an over-representation of Chinese, and males an over-representation of Malays and Indians. The majority of the males were single but there were approximately equal numbers of single and married females. The proportion of divorced or separated females also outweighed the males. Most of the offenders had not proceeded beyond secondary school education, and there was no significant difference in educational level across the sexes. The unemployment rate was high among both sexes, while those in employment mainly comprised unskilled workers. About a quarter of the females were housewives.

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Table I. Demographic profile of male and female theft offenders.

	Males (n=100)	Females (n=100)	Total (%)	Test	P
Age (mean)	33.0 (SD 10.6)	36.1 (SD 9.9)	34.6	t = -2.08	< 0.05
Race					
Chinese	62	82	72.0		
Malay	24	10	17.0		
Indian	13	5	9.0		
Other	1	3	2.0	$\chi^2 = 13.0$	< 0.005
Marital status					
Single	79	44	61.5		
Married	19	40	29.5		
Divorced/separated	2	16	9.0	$\chi^2 = 28.3$	< 0.001
Education level					
No formal education or primary education only	49	40	44.5		
Secondary education	45	52	48.5		
Pre-university level & above	6	8	7.0	$\chi^2 = 1.7$	0.43
Employment					
Unemployed	46	49	47.5		
Home duties	0	23	11.5		
Unskilled	43	23	33.0		
Skilled	11	5	8.0	$\chi^2 = 31.4$	< 0.001

Table II. Psychopathology of male and female theft offenders.

	Males (n=100)	Females (n=100)	Total (%)	Test	P
Primary diagnosis at discharge					
Schizophrenia	33	46	39.5		
Mania/hypomania/other psychoses	6	8	7.0		
Depression	3	18	10.5		
Mental retardation	8	5	6.5		
Personality disorder	7	8	7.5		
Substance abuse	17	4	10.5		
Others	19	5	12.0		
No mental illness	7	6	6.5	$\chi^2 = 30.2$	< 0.001
Psychosis at time of offence					
Definite	27	31	29.0		
Probable	3	1	2.0		
No	70	68	69.0	$\chi^2 = 1.2$	0.55

Schizophrenia was the commonest diagnosis in both sexes (Table II). About one-third of all the offenders were assessed to be psychotic at the time of the offence. The significant and distinct difference in overall diagnostic distribution was due largely to depression being more prevalent among the females, while substance abuse and other disorders were more common among the males. A significantly higher proportion of the males had multiple diagnoses compared to the females (29% versus 16%), with substance abuse and antisocial personality disorder being the most common primary and secondary disorders among the males, 16% and 14% respectively. In regard to personality disorders, the males and females differed significantly, with 21% of the males being diagnosed as having an antisocial personality disorder, as opposed to 10% of the females. None of the males were diagnosed as having a borderline personality disorder, as opposed to 5% of the females. Seven percent of the males were diagnosed

to have sexual fetishism, their offences involving theft of female undergarments to satisfy their fetish. Seven percent of all the offenders had no mental illness recorded.

One-quarter of the offenders had a previous history of remand suggesting recidivism, and this was more common among the males than the females (i.e. 31% versus 22%). While half the offenders had a past psychiatric history, there were no significant differences among the sexes on this variable.

Most (75%) of the female offenders were remanded for shoplifting, double the 37% rate for males (Table III). The remaining males stole from homes, streets, vehicles or other public places, committed snatch-theft, or stole cars, motorcycles or bicycles from parking lots. Concomitant offences (such as housebreaking, possession of offensive weapons, outrage of modesty, voluntarily causing hurt and consumption of controlled drugs) were committed by 15% of the males, as against only 4% of the females. In regard to the types of

Table III. Comparison of the index offence in male and female theft offenders.

	Males (n=100)	Females (n=100)	Total (%)	Test	P
Type of offence					
Shoplifting	37	75	56.0		
Other forms of theft	48	21	34.5		
Theft with other offences	15	4	9.5	$\chi^2 = 29.8$	< 0.001
Psychiatric determinants of the offence					
Depressed mood					
Yes	4	23	13.5		
No	96	77	86.5	$\chi^2 = 15.5$	< 0.001
Absentmindedness					
Yes	8	20	14.0		
No	92	80	86.0	$\chi^2 = 6.0$	< 0.05
Alcohol/recreational drug consumption on day of offence					
Depressed mood					
Yes	31	13	22.0		
No	69	87	78.0	$\chi^2 = 9.4$	< 0.005

items stolen, females tended to be more likely to steal accessories, cosmetics, bags and wallets, while the males stole more electronic goods.

The stated motivations and determinants behind the index offence varied. The most commonly cited included financial reasons (24%), "absentmindedness" (14%), depressed mood (14%) and being under the influence of delusions or hallucinations (10%). Eighteen percent were unable to justify their actions and 8% flatly denied their offence. Table III shows that there were significantly more females who stole because they either reported being depressed or "absentminded" compared to the males. Most of the depressed females also complained of being "absentminded" at the time of their offence. One-third of the males admitted to consuming alcohol or recreational drugs on the day of the offence, as opposed to only 13% of the females, and this was statistically significant ($p < 0.005$).

About two-thirds of the offenders took actions to conceal their act and there were no differences among the sexes with regard to this behaviour. The majority, 99% ($n=197$), were assessed to be fit to plead in court and not of unsound mind at the time of the offence. The remainder who were unfit to plead all suffered from schizophrenia and were in psychotic relapse at the time of assessment.

DISCUSSION

This is a study of thieves who had been caught and remanded, that is, "unsuccessful" thieves, who had been judged as possibly mentally ill. Our subjects were of lower educational level and social standing compared to Singapore's population⁽²⁾. The unemployment rate was also high among both sexes, with those in employment comprising mainly unskilled workers, differing from Singapore's

population where 39% of the labour force are skilled, 58% unskilled, and only 3% unemployed⁽²⁾. The proportion of married individuals among both sexes in this study was low (30%) compared to Singapore's population aged 15 and above, where two-thirds are married (67%)⁽²⁾. This may be attributed to the fact that many of the offenders had psychiatric problems, which may have decreased their chances of meeting prospective partners and getting married. However, in comparison with other local studies of offenders remanded to our state psychiatric hospital, their demographic profile did not differ^(1,3,4). This contrasted with findings of a local prison cohort of 62 molesters, where 93% were gainfully employed in a wide range of occupations and nearly half were married. There was also a relatively higher proportion of ethnic minority races in the prison cohort (Chinese 53%, Malay 26%, Indian 13% and others 6%)⁽⁵⁾.

The female theft offenders were slightly older than the males. Overseas studies have shown that, although the peak incidence of recorded crime in both sexes occurs at the age of 15, there is a swift decline in males after the age of 30. The decline with age is slower in women, with a second peak between the ages of 45 to 55, and these latecomers to crime tend to be depressed, socially isolated individuals with broken marriages⁽⁶⁾.

Our study showed that schizophrenia was the commonest psychiatric diagnosis among both sexes, in agreement with other local studies of hospital remandees^(1,3,4). One postulate is that schizophrenic people are more likely to exhibit bizarre or deviant behaviour as a result of their mental state and are thus more likely to be detected and subsequently remanded for psychiatric evaluation. The presence of a past psychiatric history may have also influenced the decision of the courts. Schizophrenia has also been found to be

associated with a constant downward drift, commonly to unemployment⁽⁷⁾, which could have resulted in the commission of "survival crimes".

Interestingly, the majority of a sample of 14 shoplifters referred to a psychological medicine unit in a general hospital were diagnosed to have a depressive illness rather than schizophrenia⁽⁸⁾, and only 16% of molesters from a local prison cohort had a past psychiatric history, while an additional 15% were judged to have an antisocial personality disorder⁽⁵⁾. One explanation could be that individuals with less serious psychiatric problems are less likely to be remanded for psychiatric evaluation, and those deemed not to be suffering from any mental illness are more likely to be fined or sent to prison.

The number of depressed female theft offenders in this study far outweighed the males. The precise mechanism that transmutes depression into shoplifting is not well understood. Gudjonsson postulated that factors such as low self-esteem and general dissatisfaction with life could provide a starting point for a chain of developments where feelings of anger, frustration and lack of self-fulfillment become temporarily relieved through shoplifting⁽⁹⁾.

Substance abuse and antisocial personality disorder were more prevalent among the males, especially for those with multiple diagnoses. Psychopathy has been found to be strongly positively correlated with substance abuse or dependence⁽¹⁰⁾. Substance abuse has been shown in numerous studies to be highly correlated with crime⁽¹¹⁾, and Hammersley et al⁽¹²⁾ reported an association of polydrug use with theft and delinquency.

Few (7%) of our sample had no mental illness, lower than overseas figures of 8 to 17%^(13,14) and earlier local figures of 12 to 18%^(1,3,4). This could suggest an improvement in the accuracy of the local system assigning the mentally ill to the psychiatric service. Appelbaum et al⁽¹⁵⁾ reported that establishing court clinics reduced the number of inappropriate commitments under criminal law as the clinic staff served a gate-keeping function by conducting mental health evaluations in court, forestalling many court-ordered inpatient forensic evaluations.

In regard to the psychiatric determinants behind the index offence, significantly more female offenders complained of being depressed or "absentminded" as compared to the males. Numerous studies have shown that mental disorder is associated with "absentmindedness"⁽¹⁶⁾, which, in some people, may lead to unintended shoplifting. There was also a higher incidence of alcohol and recreational drug consumption on the day of the offence in males.

The main limitation of our study is its retrospective design. The diagnoses were based

on the individual psychiatrist's assessment during the period of remand, not on structured clinical interviews. The results from this study may also be somewhat biased as a consequence of being limited to an inpatient sample, increasing the likelihood that the offenders remanded would suffer from the more severe forms of mental illness.

CONCLUSION

This study found high rates of psychopathology and significant differences between male and female theft offenders remanded for psychiatric assessment not only in terms of their demographic profiles, but also in terms of their psychiatric diagnoses, offences committed and the psychiatric determinants of their offence. The females had a higher prevalence of depression, while the males had a higher prevalence of substance abuse and antisocial personality disorder.

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