

## Childhood Conduct Disorder and Adult Criminal Behaviour

Jijo Abraham

### Conduct Disorder

Conduct disorder is a group of behavioural and emotional problems that usually begins during childhood or adolescence. Children and adolescents with the disorder have a difficult time following rules and behaving in a socially acceptable way. They may display aggressive, destructive, and deceitful behaviors that can violate the rights of others. Adults and other children may perceive them as “bad” or delinquent, rather than as having a mental illness.

The essential features of Conduct Disorder involve a repetitive and persistent pattern in which basic rights of others and other age appropriate societal rules or norms are violated resulting in clinically significant impairment in functioning. This includes aggressive behaviours, behaviours that result in property damage or loss, deceitfulness or theft, abusing of animals and other rule violations like running away from home, truancy.

Children with conduct disorder often are also diagnosed with another disorder because the traits of aggression or behavior for each may overlap. Characteristics of children of this type include but are not limited to bullying, assaults, and physical fights, cruelty to animals, arson, shoplifting, and disobedience. Individuals diagnosed with conduct disorder exhibit neuropsychological deficits. These deficits affect verbal comprehension skills and IQ levels (Moffitt, 1993b). These verbal skill deficits include impaired social judgment, weak language processing, and poor auditory memory (Moffitt, 1994). Conduct disorder often develops into antisocial personality disorder, so it's not surprising that antisocial persons share the same verbal skill deficits. The deficit in verbal understanding may well be cause for what seems to be impulsivity because the children are more likely to act on their own will when they do not understand what is going on. Delinquent children are shown to consistently score lower on IQ tests than children who are not delinquent.

Children who develop conduct disorder sometimes become frustrated at how they act and how they become socially different from everyone else. The factors of biological bases, social marginality, and family situations all can be coped with to decrease the symptoms of conduct disorder. Mental disorders do not just happen to someone out of the blue; they become part of that person through factors one must learn from. It is not fair that some children have to witness the divorce and remarriage of their parents, but children have to understand it is not their fault. If children can realize that, then stress will not increase so much, and the cry for attention will not be so pronounced. Having children be considered outcasts within peer groups also is not fair. Children should all be socially accepted and have friends so characteristics of rejection, hatred, and anger do not appear. A biological basis for conduct disorder is something slightly more difficult. The chemical imbalance within the brain cannot permanently be changed but can be put back in balance with medication. Medication, in some options, might not be the best solution, but it will help diminish the characteristics of conduct disorder.

### **Childhood Conduct Disorder and Adult Criminality**

Pajer (1998) studied the relationship between delinquent behavior among boys and criminal behavior among men. The findings were an excellent example of what developmental psychopathologists call "homotypic continuity" which means that there is a strong correlation between a disorder at one point in time and the same symptoms in the same or a similar disorder at a further point in time.

Soderstrom (2004) verified psychiatric factors for associations with violent tendency or relapse and lifetime history of aggression (LHA). Conduct disorder, ADHD, and ASPD were all associated with violent tendency, where the individuals would have to readmit themselves to their psychologist or psychiatrist. This proves that once an individual is diagnosed with one or more of these behavioral disorders, it is very likely that they will continue to have it for most of their lives.

Babinski, Hartsough, and Lambert (1999) in their study found out that individuals who have both hyperactivity-impulsivity and conduct problems are the adults who will have a higher percentage of arrests later in life.

Personality disorders which is directly related with high lifetime history of aggression scores are paranoid personality disorder, schizotypal personality disorder, borderline personality disorder, and antisocial personality disorder. This shows that the majority of emotional or behavioral disorders have a strong relationship to aggression.

In studying the relationship between childhood and adult onset disorders by Soderstrom (2004) conduct disorder was seen co-existing with bipolar disorder, and/or anxiety disorders, and/or substance abuse. The scores of aggression and crime were highly correlated with conduct disorder and hyperactivity.

### **Conduct Disorder and Abuse of animals and its relation to criminal behaviour**

The abuse of animals is a juvenile behaviour that has more than a causal link with serious violent activities in adults. In the past decade in particular, there has been increased research activity to examine this recurring phenomenon, not only as an indication of conduct disorder, but also in the perspective of violence in adult offenders.

Verlinden (2000 as cited in Ascione, 2001) discovered that in 45% of school shootings in the United States (9 in total from 1996-1999) the perpetrators had a history of cruelty to animals. This mirrors a study a decade earlier in which the FBI discovered a similar percentage in perpetrators of homicide (Ressler, Burgess, & Douglas, 1988). While assessing 28 convicted and incarcerated sexual homicide perpetrators, 46% self-reported adolescent animal abuse and 36% childhood animal abuse. Over a third admitted to also abusing animals in adulthood.

Looking beyond serial and mass murder, Tingle, Barnard, Robbins, Newman, & Hutchinson (1986) studied a sample of 64 male sexual offenders, and found animal abuse in earlier developmental stages in 48% of rapists. Schiff, Louw, and Ascione (1999, as cited in Ascione, 2001) consulted 117 incarcerated men and found that 63% of those imprisoned for aggressive crimes (n = 58) had previously been cruel to animals. Although these studies highlight the more serious element of animal

abuse and its prevalence among acute, violent offenders, a considerable body of knowledge is emerging that implies the existence of animal cruelty in other categories of offenders.

Achenbach, Howell, Quay and Connors (1991 as cited in Ascione, 2001) report cruelty to animals as being significantly higher in occurrence among youths that had been referred to mental health clinics. Cruelty frequencies of up to 34% were reported in their sample, which becomes more striking when compared to a control group (who had not been referred) who ranged between 0-13%.

A later study by Achenbach (1992, as cited in Ascione, 2001) indicates that youths aged 4 and older have a marginally higher rate of self-reported incidents of cruelty to animals than for vandalism. This was further supported by Offord, Boyle and Racine (1991 as cited in Ascione, 2001), who found that the prevalence for animal cruelty was in tandem with two other symptoms of conduct disorder: vandalism and fire-setting. Thus it is not surprising that they may share similar levels of activity in the lives of violent offenders and in attempting to understand the causes of animal abuse, numerous studies have focused on its prevalence in such areas as abusive families, corporal punishment, sexual abuse and strained individuals.

The correlation between animal abuse and its apparent association with serious violent crimes has been documented by Ressler et al. (1988) in relation to serial murder, and by Verlinden (2000) with mass murder.

These US studies implicate the role that animal abuse may play in various facets of violence from childhood development to crime rehearsal. Many infamous serial killers, such as Albert de Salvo, Richard Speck, Henry Lee Lucas, David Berkowitz and Carrol Edward Cole have been implicated in this association.

In Australia there has been a number of individuals that conform to this model of offending behaviour. Archibald Beattie McCafferty, the Sydney "Kill Seven" murderer, strangled chickens, dogs and cats apparently to see what it was like (Kidd, 1998). Prior to his murderous activities in Frankston, Victoria in 1993, Paul Charles Denyer exenterated a neighbour's cat and cut the throats of its kittens. He also wrote on the walls with the cat's blood and it appeared that one of its eyes had been wrenched out (Kidd, 1998).

### **Conclusion**

Children with childhood or adolescence onset of conduct disorder, attention deficit disorder with or without hyperactivity (ADHD), and/or antisocial personality disorder (ASPD) are more predisposed to a life of criminal activity. These disorders are often co-morbid, which means they affect the occurrence of one or the other, and in the instances where a child has more than one disorder, the higher his inclination for adult criminality will be. Males are more influenced by these disorders than females. Females usually learn to channel their behavioral problems or develop psychological problems or disorders.

However, this does not mean that every child who is diagnosed with one or more of the disorders mentioned will be a criminal, but the rate of occurrence is significantly high. Around half or more of these children will commit serious criminal activities and develop arrest records.