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SOCIODEMOGRAPHIC AND CLINICAL PROFILES OF FORENSIC CASES REFERRED FOR PSYCHOLOGICAL ASSESSMENT IN SPECIALIZED PSYCHIATRIC SETTINGS LAHORE

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ABSTRACT
In Pakistan, forensic cases that are referred for psychological assessment have increased multifold in past few years. The needs of forensic clientele sometimes differ significantly from those of the conventional clinical clientele. Lack of familiarity with the specific needs may deeply impact the quality of clinical services provided to this sensitive clientele. Literature however, revealed a significant gap about the forensic psychiatric cohort in Pakistan, therefore, the present study was aimed to study the social, personal and psychiatric characteristics specific of this cohort. Forensic cases referred for psychological assessment in specialized psychiatric facilities of Lahore were reviewed thoroughly. In total, 462 cases were selected for in depth review based on the inclusion criteria. The average age of the individuals was observed to be 29±11.34 years and men were noted to be in majority. Most individuals were single and had varying educational background. Results provided information related to personal characteristics, psychological disorders, reason for assessment referral etc. The findings were discussed in context of broader empirical context. Forensic psychiatric cases differ from conventional clinical clientele in several ways and understanding the idiosyncratic needs of this cohort requires to first identify the social and clinical characteristic of profiles of this cohort which ll be helpful in identifying their needs.
Keywords: Forensic cases, Mental health problems, Tertiary Care, Sociodemographic correlates Marginalized cohort

INTRODUCTION

Forensic psychology is a specialized field following on the intersection of psychology and law. Forensic psychology serves to a highly heterogenous population with considerably different clinical needs, high risk of discrimination attached to it (Van-der Veeken et al., 2015). Most of the time, specific clinical needs of the forensic cohort remain unmet due to the lack of understanding. Therefore, the literature cannot underscore the significance of recognizing the attributes setting this cohort apart from other services users to better meet their complex needs (Lunsky et al., 2010). Forensic psychological cases are on rise in Pakistan and pose excessive burden and several challenges on already weak mental health infrastructure of the country. The exact statistics of this special cohort are lacking but understanding the social and clinical profiles of these

The Research of Medical Science Review

cases is pertinent to provide effective assistance to legal agencies and for developing relevant management plans for a large number of clinical clientele requiring psychological help. Millions of individuals are detained in prisons or other closed settings around the world daily (Van Hout & Wessels, 2021) this cohort is heterogenous and comprise many vulnerable groups including those suffering from mental health issues (United Nations Office on Drugs and Crime, 2016). A growing research literature underscores the significance of studying a host of clinical, ethical and sociopolitical reasons linked with judiciarisation of individuals with mental illnesses that increase the stigma and marginalization surrounding this cohort (Paradis-Gagné & Holmes , 2020; Sugie & Turney 2017).

Pakistan is struggling with appalling increase of mental health problems across various population cohorts (Khalily, 2011; Shah et al., 2022) particularly those involved in criminal activities (Sarfraz, 2022). Although the exact prevalence of psychiatric problems among forensic population in Pakistan is lacking, experts have reported increase in morbidity of psychiatric disorders in this cohort (Hassan et al, 2017). Many tertiary care hospitals regularly receive psychiatric forensic cases to conduct detailed psychological assessment. In most cases, the assessment is aimed to establish criminal responsibility of the accused, competency to stand trial and eligibility of making informed decisions (guardianship cases).

The forensic cases present a wide range of clinical problems from which schizophrenia, substance abuse, drug induced psychosis, severe depression, post-traumatic stress disorder, obsessive compulsive disorders, personality disorders and bipolar affective disorders are most frequently observed (Nakatani, 2011; Nakatani & Hasuzawa, 2015). In addition to genuine disorders, there are many cases that involve feigning various psychiatric disorders in an attempt to avoid legal sanctions.

For several reasons forensic psychiatric cases are reported to face more stigma and discrimination from society, legal system and even healthcare professionals (Douzenis,2016; Habib et al., 2019). Sometimes they also face judicial apathy along with human right and legal violations (Kallivayalil, 2009). These problems become even more pronounced in middle and low income countries like Pakistan where mental health issues alone are associated with a lot of social stigma, rejection and discrimination

(Shafiq, 2020) and combined with the forensic offence warrant for dual stigma and discrimination (Abbasi & Khan, 2014; Jamshed et al., 2023).

A careful analysis of primary characteristics of individuals comprising any cohort is considered significant to develop better understanding of that cohort. In this regard, examining social, personal and clinical characteristics of individuals coming from forensic clinical context seems relevant. As afar as the general sociocultural perception is concerned, females are not perceived to have an active involvement in crimes (Zadeh & Ahmed, 2012), low education and lower socio economic level, young age, history of substance abuse have been found to be common factors attached with criminal involvement (Emir et al., 2022). Moreover, there is a broad range of mental psychiatric problems frequently reported in forensic population in Pakistan from insomnia to schizophrenia, bipolar affective disorders, personality disorders, obsessive compulsive disorders, generalized anxiety etc. (Bilal & Saeed, 2011; Mushtaque, 2022; Qadir et al., 2017) .

Research literature revealed that the age range of majority of the convicts with mental health issues is between 18 and 45 years, they have no or low education, are usually single or divorced, are employed in low skilled jobs or unemployed, belong to lower or lower middle socioeconomic levels, have significantly large proportion of males and mostly involved in sexual offenses, theft, homicide and assault (Rayirala et al., 2021).

Forensic psychiatric patients face unique challenges in Pakistan that include lack of awareness about psychological problems, complexities of the legal system, dual sociocultural stigma and discrimination, inadequate and dated legal framework for mental health, limited mental health resources and biased perception often attributable to cultural and religious beliefs (Shah et al., 2022). In depth evaluation of forensic psychiatric cases can help develop better understanding of possible factors leading to legal violations, and this can only be achieved by studying the forensic psychiatric clientele (Habib et al., 2019; Qadir, 2017). The present study was part of a large scale study and it aimed to explore the sociodemographic factors significant to medico legal cases presented for detailed psychological assessment and to identify the psychiatric disorders most frequently reported in these cases.

The Research of Medical Science Review

Method

Case files of forensic cases presented in tertiary care units in Lahore were identified through retrospective cross sectional design. The files were selected from the archival record of the past five consecutive years. In total, 671 cases were identified in the record, however, only 462 case files fulfilled the selection criteria. The selection criteria required the case files to at least have had the basic forensic details, complete sociodemographic history, case history of the individual and details of psychometric evaluation. Files having incomplete information or no information regarding these parameters were excluded in first screening of content analysis. The project design and procedural details were thoroughly reviewed by the concerned ethical and research review boards. Formal permissions were sought from concerned authorities to access the case files archived in the record section. A very thorough content analysis was carried out to collect data from case files of medicolegal cases presented in specialized psychiatry facilities in Lahore. Files containing ambiguous and or incomplete information were excluded in the initial screening and not included in the study. After identifying the complete case files, three trained researchers performed a thorough review to analyze the content in detail on all files individually to record and code the relevant information. A structured rubric was designed and employed to study the case files. To ensure the privacy of the data, names and personally identifiable information were not recorded on the research forms. The collected data was then analyzed through SPSS and employed descriptive and inferential statistical procedures.

Results

The findings of the study suggest that the age range of the sample was from 19 years till 53 years (Mean 29±11.34 years). A large majority of the sample comprised men (85 %), most of whom were single (almost 43 %) at the time of assessment and were reported to be educated till 5th grade (40 %).

Table1. Demographic Characteristics of the Sample

Variables	f	%
Gender		
Females	65	14.06
Males	397	85.93
Residential Area		
Urban	103	22
Rural	210	46
Sub Urban	149	32
Marital Status		
Married	115	24.89
Single	198	42.85
Divorced	143	30.95
Education		
Illiterate	51	11.04
Primary	184	40.04
Matric	92	19.91
Intermediate	82	17.75
Graduation	42	9.09
Postgraduation	9	1.94

Age of the sample ranged from 19 till 53 years with mean of 29±11.34 years and education ranged from having no education till MPhil. The cases included Muslims (77%), Christians (19%) and minority of those belonging to other religions (4%). Before conviction, most of the individuals were living in joint family system (58%) and others belonged to nuclear family system (42%). The mean family income was recorded to be 46305 ± 22.71 rupees per month. A large majority of the sample was residents of rural area (59 %) with other residing in urban (26 %) and suburban (15%) settlements. Most of the cases were employed on some

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job (43%) before getting involved in the offense, a small proportion was self employed (19%), whereas, 38% were unemployed.

Table 2. Descriptives of Forensic Characteristics of the Sample

Variables	Frequency	Percentage
Referral Reason		
Competency to stand trial	141	31 %
Diminished responsibility	228	49 %
Guardianship	93	20 %
Accusations/offense*		
Murder	21	5 %
Attempt to murder	44	11 %
Rape	29	7 %
Arson/damaging property	20	5 %
Fighting/beating	56	14 %
Departmental/official dispute	48	12 %
Blasphemy	19	5 %
Fraud	37	9 %
Harassment	121	31 %

Note. * 67 guardianship cases didn't have any other offense attached so these were excluded The total duration of imprisonment ranged from 5 months to 23 years and about 11 percent of sample observed to have criminal record prior to current legal proceedings.

Majority of the cases were undertrial (f=389, 84 %) and a small number (f=23 ,5%) was on bail. The average duration of imprisonment was 3±1.97 years Almost half of the cases were referred for assessment of diminished responsibility (49%). Most of the cases (31%) involved harassment (sexual or physical) followed by involvement in aggressive acts /fighting (14%).

Table 3. Psychiatric Disorders Reported in the Sample

Disorder	Frequency	Percentage
Intellectual disability	39	8 %
Schizophrenia and related disorders	69	15 %
Depression	158	34 %
Mania/Hypomania	20	4 %
GAD	5	1 %
OCD	51	11 %
Personality disorder	10	2 %
Malingering	32	7 %
NFD	48	10 %
No Psychiatric problem	28	6 %
Neurological disorders	10	2 %

Depression was observed to have the highest frequency from all disorders followed by schizophrenia and related disorders (34%) and obsessive compulsive disorders (11%). A large majority of the cases (f= 351, 76%) was also involved in substance abuse problem. Interestingly, 7 percent cases were involved in malingering and 6 percent found to have no significant psychological disturbance. A large majority (69%) of the cases reportedly have significant history of substance abuse.

Fraud accusations and guardianship cases were noted to have lowest frequency of clinical conditions, whereas, departmental disputes, fighting and harassment problems observed to have highest frequency of clinical problems. On the other hand malingering was observed to be present across all groups.

Discussion

A large body of literature reports that the psychological disorders are highly prevalent in forensic population compared to general population (Mental Health Commission, 2011;Van Hout & Wessels, 2021). Forensic or medicolegal cases are frequently attended in psychiatric facilities in Pakistan for in depth psychological assessment. Although the forensic cases are a pressing concern in various ways, the research in this particular area is scarce in Pakistan. Present study was an attempt to fill in some of the significant research gaps existing in this pertinent area. Present study was designed to collect the basic information on social, personal characteristics of forensic psychiatric clientele and to identify mental health issues commonly observed in this specific clinical cohort.

Findings of the present study provided good understanding into personal characteristics of the forensic cases presented for psychiatric information. This information can be used to develop key insights into this special area.

According to popular social belief, men comprise majority of the forensic clientele which was also observed in the present study where there was only a small proportion of cases involving female convicts. This was also supported by findings of researches conducted in Pakistan and other countries that also reported proportionally large number of male convicts in forensic psychiatric cases compared to female convicts (Dawood et al.,2017; Ishfaq & Kamal, 2019; Nicholls et al., 2009). Majority of the cases belonged to rural or suburban residential settlements and were employed at the time of committing the offense. This aligns and reflects the trend in of the country that majority of the population in Pakistan resides in non urban settings. However, these findings did not match well with the findings of previous researches reporting majority of forensic cases as urban residents with high rates of unemployment (Emir et al., 2022). This variation can be a reflection of significantly different sample characteristic as in the previous studies the population was primarily from urban area. The findings could be supported with those reported by Qayyum (2007) that employment was higher in those residing in urban areas of Pakistan. Unemployment is sometimes presented as one of the factors linked with criminal violations but the direction of relationship is not clear as some studies report unemployment as an outcome of criminal activities, others report it as a reason of criminal act yet some researches didn't find impact of unemployment on overall crime rate (Papps & Winkelmann, 1998). Single and divorced cases made the majority in the present study which aligned with the findings of several previous studies (Crocker et al., 2015), however, it was not clear from the records whether the convicts were single/divorced at the time of committing the crime or the relationship status changed after that. Majority of the cases reported their educational status to be low which aligned to the trend reported in earlier studies (Rayirala et al., 2021).

Researchers have reported that forensic cases referred for psychological assessment usually present a range of psychological disturbances (Effendi et al., 2023; Rayirala et al., 2021). This aligns with the findings of the present study where most of the convicts presented a broad range of psychological disorders from generalized anxiety disorders to schizophrenia.

The present study identified that psychological disorders were observed in a large majority of the cases and it also observed a broad range of psychological disorders in forensic cases which aligned to many researches that also identified clinically significant mental health issues in forensic clientele in many countries (Innocenti et al., 2021; Linehan et al., 2005; Nicholls et al., 2009). Forensic clientele remains exposed to maltreatment, discrimination, legal and human rights violations which increases their vulnerability towards psychological disorders (Nicholls et al., 2009). Sometimes, those who already struggle with mental health issues get involved in legal violations, in both instances, these individuals require professional attention. The present study could not identify the direction of causal association between psychological disorders and criminal record, however, it only could identify the type of psychological disorders observed in the forensic clientele. Majority of the cases identified to have substance abuse problem which gets support from the findings of many previous studies reporting high incident rates of substance abuse in forensic psychiatric cases (Emir et al., 2022). Strong history of substance abuse was reported for most of the cases included in the

present study, which falls aligned to the literature reported a strong link between drug abuse and criminal acts (Valeria et al., 2021).

The present study provided interesting information on social and personal profiles of forensic cases referred for psychological assessment in Lahore. The findings would be helpful in designing the further researches in this area to develop deeper understanding of the characteristics and needs of this specific cohort.

Conclusion:

Forensic psychiatric clientele differ significantly from conventional psychiatric clientele in several ways and understanding the needs specific to this cohort requires to first identify the social and clinical characteristic of this cohort.

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The Research of Medical Science Review

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