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Spruin, Elizabeth, Canter, David V., Youngs, Donna E. and Coulston, Belinda

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Criminal Narratives of Mentally Disordered Offenders: An Exploratory Study

Elizabeth Spruin

Canterbury Christ Church University, UK,

David Canter,

Huddersfield University, UK,

Donna Youngs,

Huddersfield University, UK

&

Belinda Coulston

South London and Maudsley NHS Trust

Address for Correspondence:

Dr. Elizabeth Spruin

School of Psychology, Politics and Sociology

Canterbury Christ Church University

Canterbury, Kent

CT1 1QU

England

E-mail: Liz.Spruin@canterbury.ac.uk.

Criminal Narratives of Mentally Disordered Offenders: An exploratory study

The Mental Health Act (MHA) 2007 provides a framework for the requirement and treatment of MDOs, with the main criteria being that the individual has a mental disorder and is a risk to others or to themselves. Section 1(2) of the MHA defines mental disorder as "*any disorder or disability of the mind.*" This includes: personality disorders; eating disorders; autistic spectrum disorders; mental illnesses such as depression; bipolar disorder and schizophrenia, and learning disabilities. These vulnerabilities create an individual who is more likely to develop: poor social skills (Melamed, 2012); impairments in appropriate problem solving and coping mechanisms; emotional deficits, such as shallow affect (Hare, 1993); lack of empathy, guilt and remorse (Mullen, 2006), and emotional impairments (e.g. Blair, 2005; Tremeau, 2006).

Although MDOs cannot be punished for their crimes via imprisonment, they can be subjected to compulsory admission to and treatment at secure hospitals. These offenders are therefore detained under the MHA 2007 within secure hospitals, which implement specialised treatment services which emphasize best welfare, and contribute to prevention and improving the offenders' mental health (Bal & Koenraadi, 2000). This process subsequently diverts MDOs from the Criminal Justice System (CJS) to services where their mental health needs can be adequately addressed. Forensic mental health services, therefore, focus on stabilization of the disorder, enhancement of independent functioning and maintenance of internal and external controls that prevent patients from acting violently and committing other offences (Lamb, Weinberger, & Gross, 1999). These procedures of treatment and potential release differ drastically from those for offenders who are deemed not to suffer from a mental disorder and are subsequently sentenced within the CJS. As Knight and Stephens (2009) explain, prison 'culture' is based on the principles of punishment, security and control; these codes conflict with the health service's emphasis on welfare. While secure hospitals were

developed to treat mental disorders, the prison regime was developed to provide a punishment that removes offenders from society, exercises maximum control over their lives and attempts to deter them from offending again on release. It can therefore be suggested that these drastically different approaches across environments delineate the distinct variations between offenders with mental disorders and those without. Whilst there has been ample research exploring the association of mental disorder and crime (e.g., Montanes-Rada, Ramirez, & Taracena, 2006; Soyka, Graz, Bottlender, Dirschedi & Schoech, 2007; Wallace, Mullen, Burgess, Palmer, Ruschena, & Browne, 1998), along with the process (e.g., Laing, 1999; Staite, 1994) and treatment of offenders with mental disorders (e.g., Knight & Stephens, 2009; Peay, 2007), there has been minimal exploration into the impact mental disorders have on offenders narrative experience of their crimes.

Narrative Theory

The narrative theory proposes that individuals make sense of their lives by developing a story or narrative with themselves as the central character (Baumeister & Newman, 1994). These 'narratives' comprise an individual's unique sequence of events, their mental states and their experiences involving human beings as characters or actors (Bruner, 1990). As such, the stories that people combine to make sense of their lives are fundamentally about their struggle to reconcile who they imagine they were, are, and might be within the social contexts of family, community, the workplace, ethnicity, religion, gender, social class and culture (McAdams, 1985). Accordingly, stories are the most natural way in which people describe almost everything that happens in their lives; consequently, we are all experts within our own storylines, because nothing is clearer to us than how we view our own lives (Booker, 2005). Advocates of narrative theories suggest that the notion that people can resemble, or can be made to resemble, characters in a logical and coherent story indicates a great deal of intuitive appeal (McAdams, 2006).

The increase in consideration of narrative theory, and understanding of subjective accounts of what happened from one individual's point of view, has led to more investigative research within the area of life stories. In particular, researchers have begun to analyse the structure of these personal narratives in terms of their key components, plots, settings and scenes, as well as characters and their dominant roles (Canter & Youngs, 2009). Analysing the structure of narratives is thus vital in understanding the story that people create for themselves. At the same time, however, many leading narrative psychologists (e.g., McAdams, 1988; Polkinghorne, 1988) have argued that there are limits to the range of possible structures for every life story that is told (Canter & Youngs). Polkinghorne highlights that there are relatively few compelling ways of telling a story. Similarly, McAdams argues that life stories can be conceptualised by one of four archetypal story forms. The origins of these proposed structures developed from Frye's (1957) "Theory of Mythoi".

Frye (1957) suggested a classification system for a number of classic stories ranging from ancient times to modern day; the origins of these suggested classifications derived from Aristotle's *Poetics*. Frye stated that all stories take one of four dominant forms, which he called 'mythic archetypes'; 'comedy', 'romance', 'tragedy' and 'irony'. Each story is viewed as either a hybrid of two or more of the archetypes, or as a pure manifestation a single type.

Although these four dominant themes developed separately, Frye argued that these themes are also related, claiming that the primary structure of the narrative process is 'cyclical movement', which is similar to the changing sequence of the four major seasons (comedy (spring), romance (summer), tragedy (autumn) and irony (winter)). From this argument he developed the 'Theory of Mythoi', which highlighted the fundamental form of the narrative process: cyclical movement. Most recently, theorists have utilised the major formulations of the archetypal forms that stories can take, and the work of narrative

psychologists, to explore criminal activity and offenders' personal narratives, proposing that every assertion or statement they make corresponds to their overall narratives, which may be dominated by one of the four mythic themes. Therefore, investigating the offender's personal narratives is one pathway into beginning to understand the underlying thought processes which have led to their criminal actions

Criminal Narratives

The narrative approach has recently aided in the further understanding of criminality, as it helps to bridge the gap between the disciplines of psychology and the law (Canter, 2008). The law seeks to identify the narrative which explains how a crime occurred; within this view, offenders are active agents in their own actions. In contrast however, social and behavioural sciences seek to understand the external forces, such as genetic, neurological or hormonal factors, and upbringing or social pressures, which give rise to criminal actions; within this view, offenders are passive agents within their actions (Canter, 2010). Consequently, the implementation of the personal narrative approach within criminality has begun to emphasise offenders as active agents within their actions, thereby connecting with legal explorations of *mens rea* and 'motive'

The challenge that this emerging framework is confronted with however is conceptualising the notion of a criminal's personal narrative, along with the development and implementation of a systematic way of studying these concepts. McAdams (1985; 2006) argued that life stories are not always composed in clear sequences of events, but rather, they can be constructed in terms of 'well-formed' or 'ill-formed' stories, with the ill-formed stories being occupied mostly with tension and confusion, along with episodes of inconsistent narrative and changes in the role of the central character. Canter (1994) expanded these ideas of McAdams' by exploring this framework within the context of criminal actions, proposing that these ill-formed narratives are clues to the hidden nature of offenders' lives. He

suggested that the actions which the offender carries out during a crime may be regarded as one reflection of a personal narrative. Canter further proposed that criminal activity can only be understood through in-depth analysis and understanding of 'criminals' narratives', and by connecting those narratives to characteristic roles and actions. Maruna (2001) supported these ideas, asserting that criminal narratives are useful in revealing specific components of an offender's life, in particular, explaining the changing dynamic features of a criminal's life.

Canter, Kaouri & Ioannou (2003) were the first to explore Canter's (1994) initial hypothesis that criminals may see their crimes in terms of certain narratives. These researchers investigated the notion of characterising criminal narratives through a structured questionnaire, which can be preceded by an offender's open-ended account of their life story. Canter and colleagues proposed that that characterising something as complex as a personal narrative could be achieved through exploration of the 'roles' offenders think they play during the commission of a crime. Predominantly arguing that within every unfolding story lie certain roles that act as summaries to more complex processes, an offender's perception of themselves within a particular role therefore affects the way a narrative unfolds. The researchers therefore asked offender to think of a crime they had committed and then asked them to express the extent to which the crime felt like certain emotions. Through this process it was possible to collect quantitative answers that were open to statistical analysis. The results found that the roles played by criminals could be categorised into four distinct themes that supported a circular order of criminal roles.

Following Canter et al.'s (2003) investigation into characterising criminal narratives through a sequence of questionnaire responses and open-ended interviews, Canter, Youngs and Ioannou (2009) carried out a study to establish the potential for exploring the roles which offenders assign to themselves during the commission of a crime. Specifically, the study developed a questionnaire exploring the role which offenders saw themselves as acting out

during a crime. The questionnaire was based on information collected through previous interviews with offenders carried out by Canter et al. The results of the study found four distinct patterns that offenders fell into, which correlated to four separate roles that the offenders believed themselves to play: irony (the victim); adventure (the professional); quest (the hero), and tragedy (the revenger). This structure of roles which emerged were significantly related to Frye's mythoi (i.e., romance, comedy, irony and tragedy). These patterns were unexpected, given that Frye's mythoi were derived from studies conducted on law-abiding citizens. As such, Frye's mythoi revealed different emphases to those summarised in Frye's writings (Canter & Youngs, 2009). These results illustrated a sequential structure within criminal narratives and contributed to the further understanding of criminal narratives in relation to motivation and behaviour. These results also complement Presser's (2009) notion that an offender's narrative is an immediate antecedent of offending, suggesting that narratives have a direct impact in the instigation of criminal actions.

Recently, using case study interviews, Youngs and Canter (2011) extended the criminal narrative research further by articulating a more in depth understanding of the four thematic narrative roles (hero, professional, victim and revenger) believed to be active within offenders during their criminal events. The case studies presented by Youngs and Canter allowed for direct descriptions of offender's experiences, thereby providing a more tangible conceptualisation of the proposed narrative roles. Subsequent to Youngs and Canter's research, Canter and Youngs (2012) further discussed the development of the narrative approach, of particular note was their emphasis on the importance of qualitative narrative accounts to enhance understanding of the more complex processes which underlying the four narrative roles. The researchers specifically focused on the narrative accounts of offenders' index offence which allowed for enhanced insight into the many components that are

inherently captured within an offence narrative, including psychological processes, such as thinking styles, self-concepts and affective components.

Aims of the Present study

Whilst the research on criminal narratives continues to expand within the general offending population, insight into the narratives of MDOs has yet to be empirically explored. If the law states that MDOs do not have the capacity to be held accountable for their criminal actions due to their mental capacity, and consequently lack understanding of what they were doing, this should have an impact on the criminal accounts of their crimes. The aim of this study is to therefore explore the personal narratives of MDOs through implementing the criminal narrative framework. It is proposed that resulting narrative roles will be conceptually similar to previous research (e.g., Canter et al., 2009), they will differentiate pragmatically due to the specific nature of the offending population (e.g., mentally disordered offenders).

The potential importance of establishing a criminal narrative framework which includes MDOs is invaluable for the further progression of both forensic and investigative psychology. Firstly, it offers the possibility of informing the formulation of mentally disordered offending profiles by providing investigators with a better understanding of the psychological processes of an offender and their possible characteristics. Secondly, the interviewing of MDOs can be better informed by understanding the storyline to which the offenders relate within their crimes. Thirdly, the framework enables those offenders who have a mental disorder to reconstruct their personal narratives and relate these narratives to their criminal actions. Lastly, this method is an innovative concept which can further encourage offenders to review their thinking processes and enable them to create functional new thoughts when antecedent events arise in the future. Some of these progressive factors have already been successfully implemented within the general offending population (e.g.,

Canter, 2010) and therefore the next logical step would be to expand what we already know to offending populations which need further exploration within the investigative discipline.

Method

Participants

Data was collected from two medium secure forensic psychiatric hospitals in South London, of which 40 participants were recruited. Data was also collected from a housing association that worked in partnership with forensic mental health services, of which 20 participants were recruited. In total, 60 adult male offenders, who had been convicted of an offence and were either sectioned under the Mental Health Act 2007 ($n = 50$), or received a custodial sentence ($n = 20$), were recruited for the current study.

The participant's ages ranged from 20 to 66 ($M = 38.6$, $SD = 10.7$), with a variety of ethnicities including: Black British (38.6%); White British (38.6%); Black African (12.3%); Black Caribbean (8.6%), and Asian (2.9%). A large portion of the sample reported being single (75.7%); 13.9% reported being divorced; 7.1% were separated; 2.9% were married, and 1.4% were divorced. Participants also had a range of mental health problems, with a mean age of onset of 26.42 ($SD = 9.11$, range = 15 – 49). The participants' convictions ranged from sexual (e.g., rape, sexual assault) and violent (e.g., murder, manslaughter) offences to a number of other offences (e.g., robbery, theft, etc.).

Due to the low frequencies of specific types of mental disorders (e.g., PTSD, $n = 1$; histrionic, $n = 1$), in order to investigate relationships between mental disorders and criminal narratives, mental disorders were each assigned to one of three categories: Axis I - clinical syndrome ($n = 20$), Axis II - developmental disorders and personality disorders ($n = 20$) and 'No Formal Diagnosis' ($n = 20$). Axis I included: schizophrenia; PTSD; schizoaffective and bipolar disorders, and psychosis. Axis II included: ASPD; schizoid disorders; BPD, and

histrionic disorders. The No Formal Diagnosis category included all those participants who were currently being assessed or who exhibited traits for various disorders and did not have a formal diagnosis within the above axes. With that, if participants disclosed a diagnosis or the clinical staff inferred about particular diagnoses but there was no documentation on the participants file information of the said diagnosis, then the participant was subsequently classed within the No Formal Diagnosis category.

Procedure

This study was first approved by the NHS Ethics Committee. Subsequent to this approval, participants identified as potential candidates were located at either a) one of the two forensic MSU sites or b) residing with the identified housing association. Inclusion criteria for the study included: participants considered mentally stable by their care team, spoke and understood fluent English and were willing to discuss an identified offence. Potential participants were provided with a full verbal briefing regarding the purpose of the research. If participants agreed to engage in the study, they were asked to read and sign a consent form, at which point they were also allocated a participant number to ensure anonymity. Upon signing the consent form, the participants were provided with a day, time and location to complete the following *Demographic Questionnaire* and *Criminal Narrative Role Questionnaire*. The researcher was present for the duration of each participant's completion of the allocated psychometrics in order to assist with any reading or literacy problems or difficulties with any of the questions asked. The questionnaires took approximately 60 – 90 minutes to complete, after which participants were debriefed verbally thanked for their assistance with the research.

Measures

Participants completed two separate questionnaires: a *Demographic Sheet* and the *Criminal Narrative Role Questionnaire*.

The *Demographic Questionnaire* consisted of a sixty-four item demographic sheet which obtained information regarding: the participants' personal details (e.g., "current age", "marital status", "where were you living at the time of the offence?", etc.); their offending history (e.g., "number of prior convictions", "age of first conviction", "number of times in prison/hospital", etc.); index offence details (e.g., "date of offence", "sentence length", "where did the offence occur?", etc.), and victim details (e.g., "number of victim(s)", "gender of victim(s)", "injury to victim(s)", etc.). Information provided by the participant was also cross referenced with their clinical records.

Criminal Narrative Role Questionnaire (Canter, Youngs & Ioannou, 2009). This is a 36-item measure designed to represent the type of role which it was hypothesised that the offender saw themselves playing during the commission of their offence. The role statements were developed through the researchers (Canter et al., 2003; Canter et al., 2009) considering Frye's archetypal mythoi (1957) and narrative theory (McAdams, 1988). The questionnaire is based on four themes, which correlate to four roles which the offenders believed themselves to play: *irony (the victim)*, *adventure (the professional)*, *quest (the hero)* and *tragedy (the revenger)*. Each item is scored on a five-point Likert-type scale (not at all = 1, just a little = 2, some = 3, a lot = 4, very much = 5). Such a scale allows for more elaboration on the participants' answers, providing more detail than a dichotomy format.

Data Analysis

The technique used to explore the themes which emerge within the *Criminal Narrative Role Questionnaire* was Smallest Space Analysis (SSA; Guttman, 1968). This specific method was chosen as the main aim of the study was to examine the association and relationship of criminal narratives within MDOs. Accordingly, SSA examines the association between every variable in relation to each other and displays the correlations between variables as distances in a statistically derived geometric space (Guttman). Underlying roles

were therefore likely to form through the variables that were highly correlated, which would be configured within the SSA as points closer together, thereby implying various distinct themes.

This process of analyzing and classifying the plotted variables within the SSA is part of the facet theory approach (Canter, 1985). The variables that are presented within the classified 'facets', or themes, are more than just elements belonging to a particular group; rather, these variables empirically support the facets within which they fall. Furthermore, variables which are more similar in their facet structure will be more empirically similar. Thus, variables within the same facets are more highly correlated; similarly, variables that appear in different facet elements are less correlated (Canter). Within the current study, these 'facets' refer to the overall classification of the distinct narrative roles (e.g., Hero, Professional, Victim, Revenger).

Results

The SSA was carried out on the 36 items of the *Criminal Narrative Role Questionnaire* across 60 cases. The purpose of the data analysis was to identify the criminal narrative patterns associated with MDOs. The resulting analysis showed a coefficient of alienation of 0.22, indicating an adequate fit for this data. Each point in the SSA plot (see Figure 1) is a role statement which offenders saw themselves playing during the commission of their offence. The variable labels are brief summaries of each of the 36 questions; full descriptions of these labels are presented in Table 1. The closer any two points are, the more likely it is that the role statements will co-occur in similar narrative themes. Therefore, underlying roles were therefore likely to form through the variables that were highly correlated, which would be configured within the SSA as points closer together, thereby implying various distinct themes.

Insert Figure 1 about here

Insert Table 1 about here

Structure of Narrative Roles

The SSA configuration was examined to investigate the regional hypothesis that narrative role items which have a common theme will be found in the same region of the SSA space. Examination of all 36 items within the configuration led to the conclusion that distinct themes could be identified. The next step in exploring the structure of the SSA was to investigate the initial hypothesis that narrative roles could be split into regions corresponding to the facets suggested in previous research (Canter et al., 2003; Canter et al., 2009). Four narrative roles were evident through the visual examination of the plot. These four regions were labelled *Victim*, *Professional*, *Hero* and *Revenger*. Whilst these themes were conceptually similar to Canter et al.'s (2009) study, there were clear distinctions within the displayed findings. The distinctions are further discussed below, and the association of these differences between mental diagnoses is also discussed.

A scale reliability analysis, using Cronbach's alpha, was conducted for the items within each of the proposed four themes, in order to give an indication of the adequacy of the

split. The analyses confirmed that all scales had moderate to high internal consistency:

Professional, $\alpha = 0.81$; *Revenger*, $\alpha = 0.76$; *Hero*, $\alpha = 0.89$, and *Victim*, $\alpha = 0.71$.

Victim. The general framework of this narrative role is extremely similar to Canter et al.'s (2009) *Victim (Irony)* narrative; specifically, both narratives view the offenders' accounts of their role in terms of confusion ('*confused*') and powerlessness ('*helpless*') seen in the region. An extension of this sense of powerlessness is the belief that they are the main '*victim*' in the event. There are, however, distinct differences between the results found in the present study and those found by Canter et al. Most notably, Canter et al.'s findings suggested that the feeling of victimisation was the main characteristic of this role. While this was a major contributing factor within the role found in the current population, the offenders' lack of understanding was also a driving force for their offences, with such statements as: it was the '*only choice*', the '*only thing*' to do and the only thing they could think of doing ('*think doing*'). The role of the *Victim* was also depicted by other responses which pointed to helpless despair and a general lack of understanding; these statements included: '*nothing mattered*', '*nothing special*', '*not part*' and '*stop myself*'.

In general, the distinction between the *Victim* role as portrayed here and in previous research lies within the offenders' lack of understanding and comprehension of their inescapable situation, and the belief that their offences were their only choice. These differences could be justified by the distinctive nature of the population, specifically, MDOs are deemed to be vulnerable adults under the MHA 2007, and this vulnerability has a vast impact on their social and problem-solving skills, which accounts for some of their criminal behaviour (Melamed, 2010). For example, poor social problem-solving abilities may lead to criminal behaviours such as violence, sexual offending and arson, an offence being a maladaptive attempt to solve personal or interpersonal problems (Zechmeister & Romero,

(2002). These deficits in problem-solving skills also lead MDOs to have a lack of understanding in many aspects of their offending; accordingly, the different responses depicted within this role could correspond to specific mental health problems within the population.

Professional. The *Professional* is rooted in concepts originally proposed by Canter et al.'s (2009) *Professional (Adventure)* narrative. The offender takes on the role of a 'professional' who knows what they are doing and takes necessary 'risk' as a professional, with offending being seen as 'routine' or a 'usual day' of work and all going to plan. The actions within both narratives are therefore rooted in 'control' and mastery of an offender's environment. Generally, the roles in these narratives are essentially associated with the positive emotions of a 'professional' (Canter et al.).

There are numerous differences however between the *Professional (Adventure)* narrative and the *Professional* found within the current study. For example, the *Professional (Adventure)* narrative is one defined by 'adventure'; this individual enjoys the 'power' and 'excitement' from completing a job. This outlook contrasts with the *Professional* who enjoys the 'manly' persona their offences provide, and believes their role is defined by 'fate'. It could therefore be argued that these types of individuals regard their criminal activity as a lifestyle or 'routine', these distorted values and acceptance of antisocial behaviours could be explained through the specific mental disorders of the population.

Hero. The *Hero* role shows some similarities to Canter et al.'s (2009) *Hero (Quest)* narrative. Specifically, both narratives are built on the idea of a heroic quest, whereby offenders justify their actions by seeing them as part of a 'mission'. Despite some similarities however, the driving force behind this idea of a 'mission' is vastly different here. The heroic

voyage within the *Hero (Quest)* narrative is the driving force behind the offender's criminal actions, which is illustrated with responses such as being unable to 'stop myself', or feeling that it was a 'manly' thing to do. In addition, the offender may feel he has been dishonoured, so now his pride demands that there will be consequences, which is portrayed through responses in terms of 'looking for recognition'. There is also a sense of bravado and nonchalance which is vital to this narrative; this theme is revealed in the offender's description of the actions as 'nothing special' (Canter et al.). The *Hero* role within the current study however, is presented as an offender who sees their actions as an adventurous ('adventure'), exciting and interesting mission, and is driven by the desire for recognition ('looking for recognition') and power. This person also feels that their adventure is part of their job ('doing job'), which they have to do ('had to') in order to obtain the recognition and power they crave. Once the job is completed, the offender feels that they are in control of their environment and their actions; this sense of completion is the intrinsic motivation (e.g., self-esteem, confidence) which reinforces their criminal behaviour.

Revenger. The *Revenger* most closely resembles Canter et al.'s (2009) *Revenger (Tragedy)* narrative. Both narratives portray a story of the unstoppable revenge of an individual who has been wrongfully treated and deprived. The offender retaliates by seeking revenge in order to achieve what they believe is 'right'.

The difference between the two narratives however, lies within how the offender takes on the role of the 'revenger'. In the *Revenger (Tragedy)* narrative, the perpetrator believes that he has no choice but to take on the role of the revenger; this role is captured by responses which justify the actions, for example, assertions that it was 'right'. These types of responses capture the meaning of this storyline, which involves a character who believes that revenge is their only option. In contrast, the *Revenger* within the current study belongs to a

narrative whereby the offender does not care about anything else (*'didn't care'*) except *'getting their own back'*; these offenders do not believe revenge is their only option, but they just want to get the situation over with (*'get it over'*) and resolved, making many of their actions reckless and irresponsible in an attempt to seek revenge as quickly as possible. The reckless nature of these offenders could be linked to their impairments in appropriate problem-solving and coping skills. These offenders could become overwhelmed by negative feelings such as distress, anxiety or anger; this, linked with their self-regulation problems and lack of adaptive coping skills, could trigger reckless behaviour.

Dominant narratives within mental disorders

The SSA structure presented in Figure 1 indicates that there are four narrative roles presented within MDOs; *Professional*, *Hero*, *Revenger* and *Victim*. To investigate the hypothesis that narrative roles would differentiate across mental disorders, the associations between the four narrative roles and mental disorders were explored further. As previously mentioned, the SSA structure illustrates that while these roles are distinguishable, they are part of an integrated system and are therefore not isolated from each other. Accordingly, to investigate the above hypothesis, a procedure (originally adopted by Youngs (2004) to relate personality to offence style) was implemented to explore the narrative role variables and the diagnoses which reflected this systemic structure, rather than misrepresenting any relationships by classifying offenders into artificial categories.

This method examined the scores on the individual narrative items as external variables on the SSA plot. Mean scores on each of the narrative role items were calculated for all diagnostic categories (Axis I, Axis II and No Formal Diagnosis). These mean scores were subsequently examined separately for each of the four narrative scales, to determine how they varied across regions of the SSA plot. Mean scores were placed on the item

location on the plot (see figures below), thereby demonstrating any relationship between specific narratives and diagnosis through the regional patterns produced by the mean scores on the plots. The average overall mean of each narrative role falls between 1 and 3 (averages are based on a five-point Likert scale, where: (1) = *Not at all*; (2) = *Just a little*; (3) = *Some*; (4) = *A lot*, and (5) = *Very much indeed*, indicating a mild to moderate intensity of the role being evident within the criminal offence.

Insert Figure 2 about here

Axis I Diagnoses. Axis I Diagnoses. As indicated in Figure 2, the *Victim* has a higher overall average within Axis I diagnoses ($M = 2.87$, $SD = 0.24$) compared to the remaining narrative roles within the category; *Revenger* ($M = 2.12$, $SD = 0.19$), *Professional* ($M = 1.98$, $SD = 0.15$) and *Hero* ($M = 1.92$, $SD = 0.14$). The largest overall means within the *Victim* role agreed with such statements as: '*It was my only choice*' ($M = 2.90$), '*I couldn't stop myself*' ($M = 3.26$) and '*I was confused about what was happening*' ($M = 3.23$). These results could be associated with the disorders included within the clinical syndrome category of Axis I. In particular, those with schizophrenia, schizoaffective disorder or psychosis often have a deluded perception of reality, thereby lacking complete understanding of their current environment. In addition, the symptoms of clinical depression, such as feeling hopeless, worthless and helpless, are also associated with the paranoid features of psychosis and schizophrenia. It could therefore be suggested that offenders who take on the *Victim* role are most likely to have Axis I diagnoses.

Insert Figure 3 about here

Axis II Diagnoses. Figure 2 shows the pattern of mean scores within Axis II diagnoses, with the highest overall average falling within the *Revenger* role ($M = 2.63$, $SD = 0.19$). The highest mean scores agreed with the items ‘*I was trying to get Revenge*’ ($M = 2.95$) and ‘*I didn’t care what would happen*’ ($M = 2.73$). The overall mean for the *Revenger* role is much higher than the *Hero* ($M = 1.75$, $SD = 0.39$) and *Victim* ($M = 2.01$, $SD = 0.20$) roles within this sub-population, whilst the *Professional* ($M = 2.40$, $SD = 0.25$) role indicates a closer average range to the *Revenger*. The reckless nature of these offenders is one of the main features for those with personality disorders, which are classified within Axis II. This could suggest that the *Revenger* narrative is embedded in the deficits of emotional regulation, along with the symptoms of frustration and anger which are major patterns of personality disorders and are the driving force behind the *Revenger* role for these offenders. The lack of emotional regulation, coupled with a low tolerance and high level of impulsivity, combine to make this ‘revenger’ an impulsive character.

Furthermore, the moderate identification within the *Professional* role within this sub-category further ascertains the identity of offenders who often exhibit Axis II diagnoses. More specifically, offenders with personality disorders often regard their criminal activity as a ‘lifestyle’ or ‘routine’, have numerous antisocial peers, endorse criminal sentiments and values (Simord, 1997) and exhibit a host of antisocial and criminal activities and behaviours. In essence, offenders that take on the *Professional* role appear to exhibit distorted patterns of thoughts, feelings and behaviours that are often presented by offenders with personality disorders. These distortions are most likely to have developed through early experiences of abuse (physical, emotional or sexual), trauma or severe neglect in earlier life, which have

seriously interrupted their normal development (Together, 2010). These early experiences often render these types of offenders vulnerable to early criminal activity, and their perception of crime is often distorted in the sense that they see their criminal activities as a part of who they are, or as their *'fate'* in life.

Insert Figure 4 about here

No Formal Diagnosis. Figure 4 exhibited similar overall mean scores across all four narrative roles, with the *Hero* role indicating a slightly higher overall average ($M = 2.32$, $SD = 0.39$), followed by the *Victim* ($M = 2.12$, $SD = 0.29$), *Professional* ($M = 2.09$, $SD = 0.30$) and *Revenger* ($M = 1.99$, $SD = 0.22$) roles. The less marked regionalisation of a specific narrative role could be a reflection of the population. In particular, it draws significance to the offenders who did not exhibit a formal diagnosis, suggesting that the relationship between narrative role may relate to the more direct and conscience mental disorders. Although there was no general trend for narrative roles, the slightly higher average of the *Hero* role could function as an illustration of the types of offenders that do not exhibit any formal mental disorder, as the motivation behind the actions within the *Hero* role is rooted in some form of reinforcement (e.g., recognition, power, intrinsic motivation) which, according to behavioural principles, reinforces their actions and the frequency of those actions.

Discussion

The purpose of this study was to gain insight and understanding into the narratives of MDOs through the implementation of the criminal narrative framework. The findings indicated that not only can the criminal narrative framework be successfully utilised with MDO's, but also that these narrative themes can be a function of specific mental disorders.

Through establishing the criminal narrative framework within a mentally disordered criminal population, this study provides new insight into how these specific offenders view their crimes and themselves. More specifically, this study begins to demonstrate that while MDOs may not have the capacity to understand their actions in the eyes of the legal system, the MDOs within this study do show the capacity to process their criminal actions and identify with a narrative story. Therefore, although in legal terms MDOs lack the ability to understand that their actions are wrong, and therefore are unable to be sentenced for their crimes, the participants within this study do show awareness of experiences within their crimes and are able to illustrate this criminal experience in a coherent manner. Furthermore, society often labels offenders with mental disorders as 'abnormal', yet what this study has found is that the crimes these offenders commit appear to correspond to the four life stories which represent experiences within the 'normal' population (romance, comedy, tragedy and irony), as found in previous research (e.g., Frye, 1957; McAdams, 1988), and also to those of other offending populations (e.g., Canter et al., 2003; 2009, Youngs & Canter, 2011).

Despite these theoretical implications, this research only sets the groundwork for studying the criminal narratives of MDOs. Further research needs to be carried out to replicate the findings in more general mentally disordered populations, thereby aiding in the theoretical advancement of the criminal narrative framework. The more general implications and value of further research in the area could aid in the theoretical understanding of how MDOs calculate, devise and carry out their criminal activity, as personal narratives are created by individuals to help them comprehend their actions on the basis of their perception of their circumstances, leading to their own insight into what led them to pursue their crimes in the manner which they did.

Further understanding into the narratives of MDOs also elaborates the various forms of justifications and neutralizations that are often embedded within an offenders own account

of their offence. More specifically, the results of this study elaborate the points of Youngs and Canter (2011), who argued that offence narratives reveal the psychological influences operating during offending and the four narrative themes clarify the range of psychological processes inherent in criminal actions. It could therefore be stated that similar to the concepts Youngs and Canter noted within the general offending population, MDOs also use stories and particular characters (e.g. *Victim*, *Professional*, *Hero* or *Revenger*) to not only make sense of their experiences but also to justify and rationalize their behaviours. For instance, Sykes and Matza (1957) stated that any dissonance resulting from feelings of guilt and shame following engagement in criminal behaviour can be neutralised by implementing cognitive techniques (e.g. denial of responsibility, denial of injury, denial of the victim, condemnation of the condemners, and appeal to higher loyalties), these cognitive techniques are embedded within the various narrative roles. The *Professional* may deny injury as they are most likely to carry out property related offences, the *Hero* believes their actions are for the greater good and therefore appeal to higher loyalties, the *Victim* denies the account of another victim, believing that they are the true sufferer within the incident and the *Revenger* condemns the condemner, seeking vengeance for some wrong doing.

The value of this research also extends further than expanding the theoretical understanding of MDOs, the results of this study can also aid in further development within the investigative psychology discipline. As Canter & Youngs (2009) discuss in their book, the investigative psychology approach to understanding coherence within offending actions assumes that this requires understanding of the meaning of the crime as it makes sense to the offender. This concept stems from Canter's (1994) argument that the narrative provides insight into the motivation and intention to act; therefore, by understanding the narrative, we move a step forward in understanding not only the action, but also the unfolding series of episodes which the offender goes through to turn their narrative into action. This process can

also unmask aspects of the offender's personality and other enduring characteristics which are central to the investigative psychology discipline.

Specifically, a key concept within investigative psychology is that there are associations between offenders' actions and their characteristics, and that inferences can be drawn about offenders' characteristics based on their actions. For example, the actions of the *Victim* are associated with confusion, and lack of understanding with regard to their current situation; these offenders therefore believe that their criminal offences are their only choice. The actions and motives behind their offences lead to inferences about their mental state; specifically, these offenders appear to have deficits in problem-solving skills and self-awareness, which are linked closely to a number of major mental illnesses, such as schizophrenia, schizoaffective disorders or psychosis, all of which have characteristics of a deluded perception of reality and a consequent lack of complete understanding within their current environment. In essence, the study and further exploration of MDOs' narrative roles is a vital step in the development of offender profiling, as it adds an innovative and alternative technique to the process of profiling by drawing inferences about characteristics through the offenders' own understanding of their actions.

Overall, the current study was the first step in overcoming the many challenges that lay ahead, by recognising that MDOs may understand the conscious acts they carry out and perhaps should not be regarded as incapable of understanding their actions. On the contrary, similar to other criminals, MDOs appear to make sense of their lives through formulating a narrative in which they play the protagonist. This study has also provided the first analysis of the narrative roles of MDOs, resulting in a step towards creating a systematic framework which helps in explaining crimes through offenders' own understanding. The next step is therefore to build on the foundations created within this study to help build a theory of crime that is all-encompassing, focusing not only on the psychological, biological and social

elements of crime, but also on the internal and emotional processes within an offender that often drive an offence forward.

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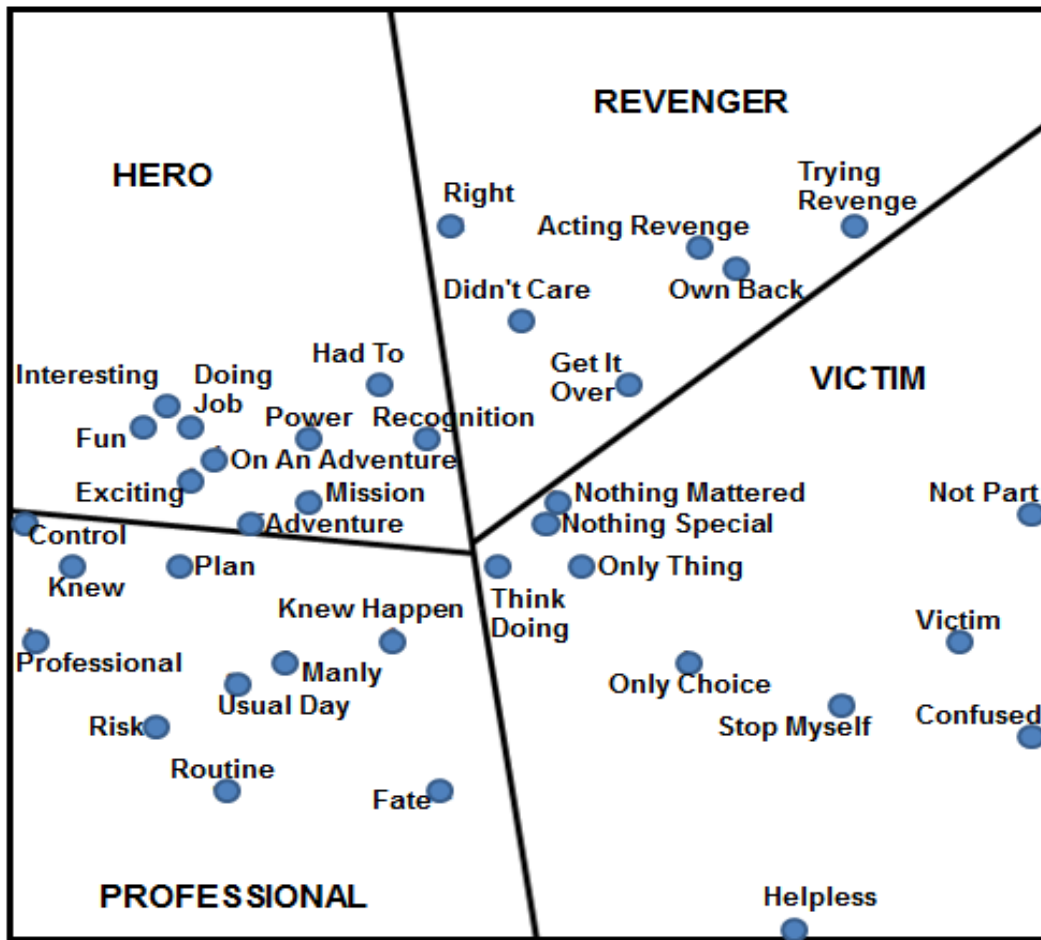


Figure 1. SSA-I of 36 narrative roles with set interpretation regions ($N = 60$). 2-dimensional Smallest Space Analysis (SSA) of narrative roles with regional interpretation. *Coefficient of Alienation* = 0.2245. Variable labels are brief summaries of full questions.

Table 1. Narrative role labels and full descriptions

Question Number	Full Question	SSA Label
1	I was like a professional	Professional
2	I had to do it	Had to
3	It was fun	Fun
4	It was right	Right
5	It was interesting	Interesting
6	It was like an adventure	Adventure
7	It was routine	Routine
8	I was in control	Control
9	It was exciting	Exciting
10	I was acting out of revenge	Acting Revenge
11	I was doing a job	Doing Job
12	I knew what I was doing	Knew
13	It was the only thing to do	Only thing

Running head: PERCEPTIONS OF MENTALLY DISORDERED OFFENDERS

14	It was a mission	Mission
15	Nothing else mattered	Nothing matter
16	I had power	Power
17	I was helpless	Helpless
18	It was my only choice	Only choice
19	I was a victim	Victim
20	I was confused about what was happening	Confused
21	I was looking for recognition	Recognition
22	I just wanted to get it over with	Get it over
23	I didn't care what would happen	Didn't Care
24	What was happening was just fate	Fate
25	It all went to plan	Plan
26	I couldn't stop myself	Stop myself
27	It was like I wasn't part of it	Not part
28	It was a manly thing to do	Manly
29	For me it was just like a usual day's work	Usual day
30	I was trying to get revenge	Trying revenge
31	It was like being on an adventure	On an adventure
32	It was the only thing I could think of doing	Think doing
33	There was nothing special about what happened	Nothing special
34	I was getting my own back	Own back
35	I knew I was taking a risk	Risk
36	I guess I always knew it was going to happen	Knew happen

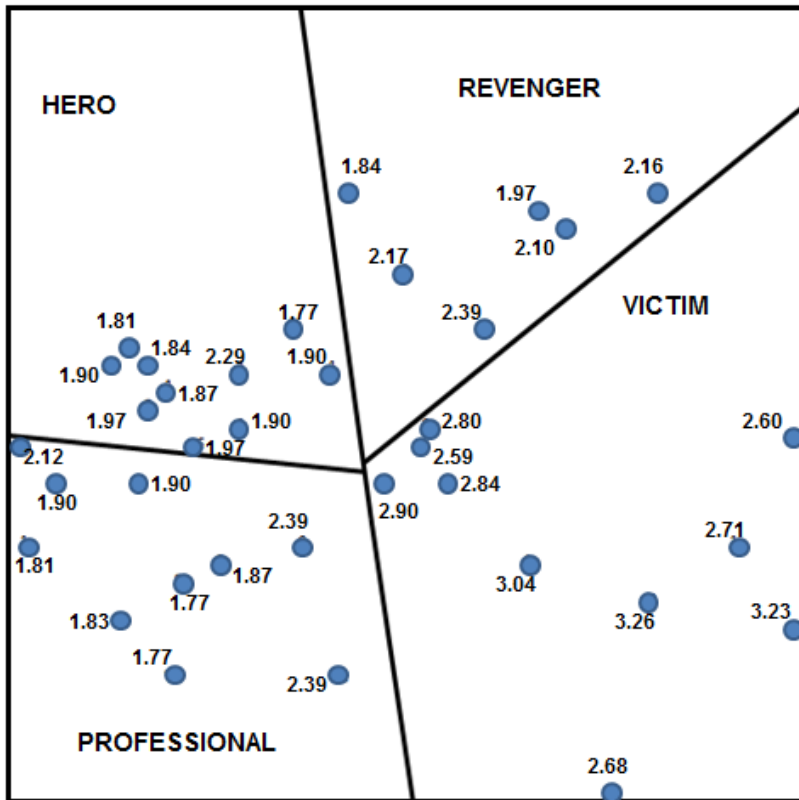


Figure 2. SSA-I of 36 narrative role items with means for Axis I diagnoses ($n = 20$)

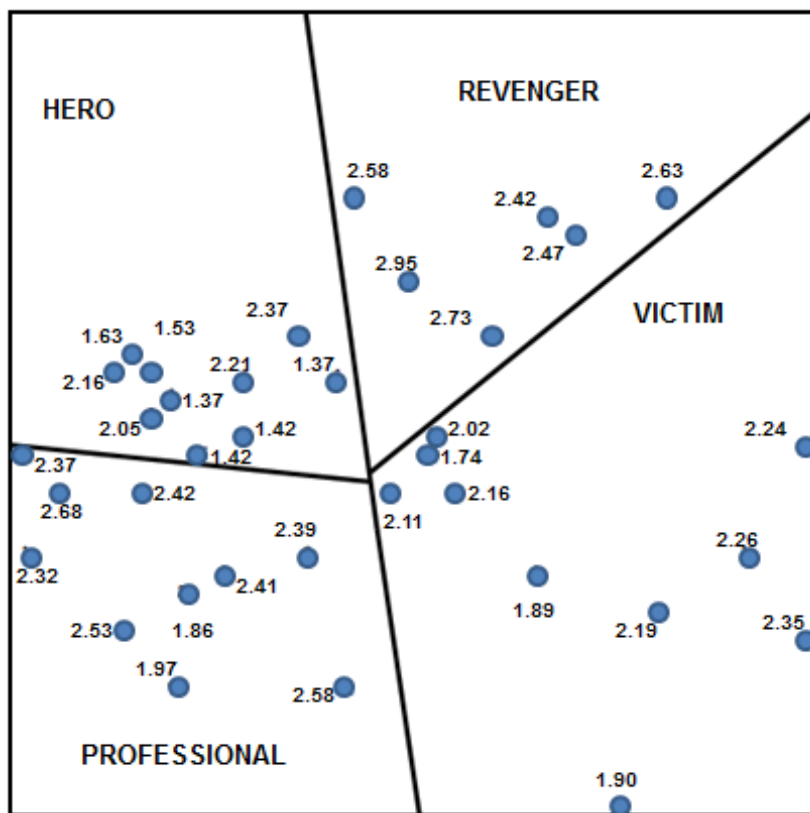


Figure 3. SSA-I of 36 narrative role items with means for Axis II diagnoses ($n = 20$)

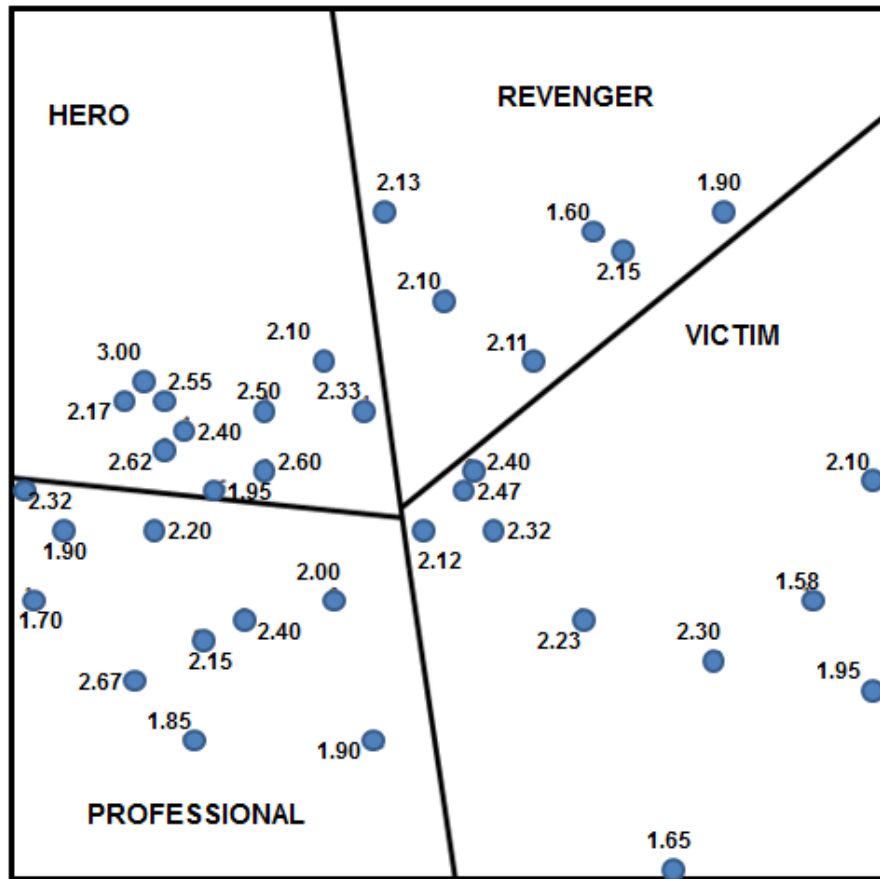


Figure 4. SSA-I of 36 narrative role items with means for no formal diagnosis ($n = 20$)