EPIDEMIOLOGICAL CONSIDERATIONS UPON THE PSYCHIATRIC FORENSIC CASUISTRY IN JUVENILE **DELINQUENCY IN SIBIU COUNTY**

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Abstract: Purpose: Noticing an increased incidence of juvenile delinquency in Sibiu County, I investigated this phenomenon in order to identify plausible pathogenesis factors for juvenile delinquency, which could interest future studies. Method: I conducted a retrospective five-year study on 315 cases of psychiatric expertise in minors, performed by the Sibiu County Forensic Department through the activity of the Psychiatric Forensic Commission. I followed the epidemiological distribution by gender, age, education, felony types, family and others. Results: I found that most of cases were represented by male minors (92%) of 15 years old (57%), with a similar proportion of rural and urban environment of origin (52% in urban, 48% in rural). Most common contravention was theft (77%), that was performed in group (77%), in condition of clear consciousness (99%). Important relation with dysfunctional family (43%) and school failure were noticed.

INTRODUCTION

Juvenile delinquency is a deviance phenomenon triggered by bio-psycho-social factors and characterized by the incapacity of minors and young persons to adapt to the rules of conduct in society. Minors participate and especially commit acts of theft, vagrancy and begging. In a large number of cases there are involved assault, rapes and body injuries, while a small number include murders or attempts of murder.(1,2) Factors that contributed to the appearance of this phenomenon are: school dropout, lack of careful and continuous parent supervision, broken families, negative influence of the entourage, consumption of hallucinogenic substances, drugs and alcohol, mental disorders, impulsiveness, aggressiveness, and so on.(2,3) Behaviour disorders in children represent one of the biopsychological causes of juvenile delinquency. There are no specialized facilities for juvenile delinquents, which actually justifies the large number of relapses.(4) Affectivity, too, plays an important part in the process of shaping a suitable behaviour.(5)

PURPOSE

Noting the relatively high incidence of juvenile delinquency in Sibiu County, I considered appropriate to investigate this phenomenon in order to identify the etiological and pathogenic factors in pursuance of elaborating conclusions regarding adequate prophylactic methods.

MATERIALS AND METHODS

I conducted a five-year retrospective study on the forensic psychiatric examinations in minors. The documents were extracted from the archives of Sibiu County Forensic Department (2010-2014). Out of the total number of 1 908 cases of psychiatric forensic expertise, 315 referred to minors. I have analyzed the case distribution in relation to the main epidemiologic and legal coordinates, according to the presence or absence of judgment; I have taken into consideration the mesologic factors and the potential existence of psychiatric pathology with certain etiopathogenic importance. From an epidemiologic point of view,

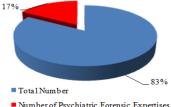
I have analyzed the case distribution according to gender, age and environment of origin. Legally, I have investigated: the type of felony (theft, assault, rape, robbery, murder etc.) and the means of action (single or in group). Mesologically, I have classified the cases in relation to the minors' family environment and their level of education (unschooled, school dropout or absenteeism). Within the psychiatric area, I have encountered cases with no psychopathogenic disorders or with behaviour disorders, mental retardation or other pathologies. As regarding the study group, I have been monitoring the number of psychiatric forensic expertise by recording multiple cases of the kind.

RESULTS

Number of Psychiatric Forensic Expertise in minors. I found a 17% of the total cases of forensic psychiatric

examinations (FPE) during 2010-2014 performed on minors, as shown in figure no. 1.

Figure no. 1. The distribution of psychiatric forensic expertise in minors



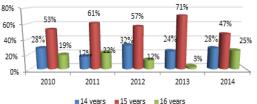
■ Number of Psychiatric Forensic Expertises

I have analyzed the case distribution on years of the cases and I obtained the following results: 27% in 2010, 26% in 2011, 19% in 2012, 11% in 2013 and 17% in 2014, as shown in table no. 2 below. An approximately equal case distribution can be observed along the 5-year period, with a dramatic decrease in the year 2013. Observing gender distribution of cases during 2010-2014, there has been noticed an obvious incidence of the male gender, as presented in literature; (1,2) the distribution is represented in table no. 3. Maximum prevalence of boys was

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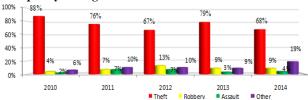
recorded in 2010, while the maximum incidence of girls was in 2013.

Figure no. 2. Case distribution according to age during 2010-2014 $\,$



The monitoring of age distribution revealed a relatively high proportion of subjects within 15 years of age (57%) during 2010-2014. Relating to the studied period, the maximum incidence of cases with subjects of 14 years of age was in 2012, the maximum number of cases in the range of 15 years of age was recorded in 2013, while the cases with subjects of 16 years of age had the highest incidence in 2014. Case distribution according to the environment of origin revealed an approximately equal proportion, with a slight increase for the urban environment, due to relatively high urbanity in Sibiu: 52% in the urban environment, 48% in the rural environment.

Figure no. 3. Case distribution according to the type of delinquency during 2010-2014



The type of delinquency was also a criterion. Most of the felonies were thefts (77%) during the whole studied period. The rest of the delinquencies were represented by robberies, assault, rape, murder, or other types of violence. The maximum incidence of thefts was registered in 2010 (88%), most of the robberies were committed in 2012 (13%), while assaults were committed during 2011 and 2012 in the same proportion (7%).

The following table displays the presence and the absence of judgment in studied minors. None of the 315 minors was found with diminished judgment. According to the forensic psychiatric expertise, most of the minors were in full command of their mental faculties. I have observed the distribution of juvenile delinquency cases as related to the method of action, namely single or in group. In a significant number of cases (119), the method of action was not declared. 75% of the remaining 196 cases were committed in group. From the point of view of minors' distribution according to level of education, there has been noticed an important percentage of 38% of minors that were either unschooled or drop-outs. Those who were still enrolled in school had a high rate of absenteeism. Also, the distribution of cases according to the type of graduated school, normal or special, was monitored. Most of the minors (90%) have attended a normal school.

In the analyzed cases, I have monitored the distribution of the psychiatric disorders that I encountered during the 5-year period. More than half of the studied minors had no psychiatric disorders, while the rest could rather be included in the category of behavioural disorders, mental retard, or other pathologies. I have analyzed the case distribution according to the parents' social status, meaning whether the minors come from legal families, concubine parents, divorced parents, and parents working at a distance, monoparental families, or other. 58% of the minors come from legally married families, but nevertheless there

can be noticed a higher incidence of those who come from broken families.

Figure no. 4. Distribution of cases according to psychiatric pathology during 2010-2014



CONCLUSIONS

- Our study revealed a significant percentage of the psychiatric forensic examinations in minors during 2010-2014.
- Within forensic examinations, a prevalence of male gender was obvious.
- By analyzing the age segment between 14 and 16 years old, the study has shown a maximum incidence of 15 year-old cases.
- According to the environment of origin, the case distribution was actually similar, with a slightly higher incidence in urban environment, due to the high urbanity in Sibiu County.
- Of the existing types of felonies, theft had the highest incidence among minors.
- Most delinquencies were committed in organized crime groups.
- As for the presence or absence of judgment, most of the minors were in full command of their mental faculties.
- From the point of view of encountered psychiatric pathology, most of the minors showed no signs of psychiatric disorders.
 The rest of them fell into the category of behavioural disorders, mental retard or other pathologies.
- According to the level of education, a high number of cases presented different degrees of educational deficiencies due to lack of schooling, school abandon, respectively high rate of absenteeism.
- Furthermore, the family environment represents a relevant factor in minors' behaviour. Correspondingly, it has been observed that almost half of minor delinquents come from unstructured families.

REFERENCES

- Delicvenţa-juvenilă-cauze-şi-condiţii-favorizante. [online].
 2011 [cited 2015 Jan. 20]; Available from: URL: www.criminalistic.ro.
- Banciu D. Introducere în sociologia delincvenței juvenile. Editura Medicală: București; 1990.
- Boncu Ş. Devianţa tolerată. Editura Universităţii Al. I. Cuza: Iaşi; 2000.
- 4. Morar S. Medicină Legală. Curs partea I și II. Editura Universității Lucian Blaga: Sibiu; 2006.
- Enache A. Medicină legală. Curs pentru studenții facultăților de medicină. Editura MIRTON: Timișoara; 2005.
- Marica AM. Introducere în problematica delincvenței juvenile. Editura Ovidius University Press: Constanța; 2007.
- Andrei O, Morar S, Oancea L. Actualități în asistența medicală. Vol.3. Editura ARS DOCENDI: București; 2013.
- 8. Grecu F, Rădulescu SM. Delincvența juvenilă în societatea contemporană. Editura Lumina Lex; 2003.
- 9. Stanisor E. Delincvenţa juvenilă. Editura Oscar Print; 2009.
- Vasile AS. Psihologia delincvenței juvenile. Editura Universul Juridic; 2010.
- Rotari O. Delincvenţa juvenilă probleme actuale şi căi de soluţionare. Univ. Liberă Intern. din Moldova, Fac. Drept. – Ch. – ULIM; 2010.