

# Psychiatric Disorders and Violence: A Study of Delinquent Youth After Detention

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**Objective:** To examine the relationship between psychiatric disorders and violence in delinquent youth after detention.

**Method:** The Northwestern Juvenile Project is a longitudinal study of youth from the Cook County Juvenile Temporary Detention Center (Chicago, Illinois). Violence and psychiatric disorders were assessed via self-report in 1,659 youth (56% African American, 28% Hispanic, 36% female, aged 13–25 years) interviewed up to 4 times between 3 and 5 years after detention. Using generalized estimating equations and logistic regression, we examined the following: the prevalence of violence 3 and 5 years after detention; the contemporaneous relationships between psychiatric disorders and violence as youth age; and whether the presence of a psychiatric disorder predicts subsequent violence.

**Results:** Rates of any violence decreased between 3 and 5 years after detention, from 35% to 21% (males), and from 20% to 17% (females). There was a contemporaneous relationship between disorder and violence. Compared to the group with no disorder, males and females with any

disorder had greater odds of any violence (adjusted odds ratio [AOR] = 3.0, 95% CI = 1.9–4.7, and AOR = 4.4, 95% CI = 3.0–6.3, respectively). All specific disorders were associated contemporaneously with violence, except for major depressive disorder/dysthymia among males. Substance use disorders predicted subsequent violence. Males with other drug use disorder and females with marijuana use disorder 3 years after detention had greater odds of any violence 2 years later (AOR = 3.4, 95% CI = 1.4–8.2, and AOR = 2.0, 95% CI = 1.1–3.8, respectively).

**Conclusion:** Aside from substance use disorders, the psychiatric disorders studied may not be useful markers of subsequent violence. Violence assessment and reduction must be key components of ongoing psychiatric services for high-risk youth.

**Key Words:** psychiatric disorder, violence, youth, delinquents, longitudinal

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Many studies have examined the association between psychiatric disorders and violence in adults.<sup>1–4</sup> Among adults with serious mental illness, those with psychotic symptoms or a co-occurring substance use disorder (SUD) are more likely to be violent than the general population.<sup>1,2,5</sup> Far less is known about youth, in part because studies have focused less on psychiatric disorders than on substance use or mental health problems and their relationship to violence.<sup>6–11</sup>

Studying psychiatric disorders allows a more systematic approach, providing a consistent, consensually understood, and clinically meaningful description of the frequency, severity, and recency of symptoms, and their relationship to violence. However, we found only 6 studies of youth, 2 cross-sectional<sup>12,13</sup> and 4 longitudinal,<sup>14–17</sup> that examined psychiatric disorders and violence. These investigations found that some psychiatric disorders (attention-deficit/hyperactivity disorder [ADHD], conduct disorder [CD], SUD, and schizophrenia spectrum disorder) were associated with violence.<sup>12–17</sup> Depression and anxiety disorders

predicted violence only when comorbid with CD or SUD.<sup>15</sup> Despite their contributions, these studies have limitations.

First, half of the studies examined only 1 or 2 disorders, providing limited information.<sup>14,16,17</sup> Moreover, these studies could not examine how co-occurring psychiatric disorders known to be associated with violence—SUD and disruptive behavior disorders (DBD)—may confound this association.<sup>12,13,15</sup>

Second, behavioral disorders and violence were assessed using similar questions.<sup>12–17</sup> DSM criteria for DBD include physically violent and aggressive behavior,<sup>18</sup> such as “initiating physical fights” or “using a weapon to cause serious physical harm to others.” Failure to adjust for this tautology may generate spurious associations.

Finally, few studies of psychiatric disorders and violence examined the highest-risk populations.<sup>13,14</sup> None studied youth in the juvenile justice system. The largest and best-designed investigations examined only youth in the general population.<sup>12,15–17</sup> This omission is critical: delinquent youth have much higher rates of psychiatric disorders and comorbid disorders than youth in the general population.<sup>19–21</sup> Moreover, risk factors for violence—impulsivity, child abuse, poor parental supervision, delinquent peers, and neighborhood disintegration—are more prevalent among delinquent youth.<sup>22–27</sup>



Supplemental material cited in this article is available online.

This article addresses these limitations. We use data from the Northwestern Juvenile Project, a prospective longitudinal study of a large stratified, random sample of delinquent youth. We examine the association between psychiatric disorders and violence in the following 3 ways: 1) the prevalence of violence 3 and 5 years after detention; 2) the contemporaneous relationship between violence and psychiatric disorders as youth age; and 3) whether the presence of psychiatric disorder predicts subsequent violence. Our analyses correct for the overlapping symptoms of DBD and violence and also control for DBD and SUD, disorders often associated with violence.

## METHOD

The most relevant information on our methods is summarized below. Additional information is available in Supplement 1 (available online) and is published elsewhere.<sup>20,21</sup>

### Sampling and Interview Procedures

**Baseline Interviews.** We recruited a stratified random sample of 1,829 youth at intake to the Cook County Juvenile Temporary Detention Center (CCJTDC) in Chicago, IL, between November 20, 1995, and June 14, 1998. Consistent with juvenile detainees nationwide,<sup>28</sup> nearly 90% of detainees at CCJTDC were male; most were of racial/ethnic minorities. To ensure adequate representation of key subgroups, we stratified our sample by gender, race/ethnicity (African American, non-Hispanic white, Hispanic, and “other” race/ethnicity), age (10–13 years or ≥14 years), and legal status (processed as a juvenile or as an adult). Face-to-face structured

interviews were conducted at the detention center in a private area, most within 2 days of intake.

**Follow-Up Interviews.** We conducted follow-up interviews at 3 and 4.5 years after baseline for the entire sample, and 2 additional interviews at 3.5 and 4 years after baseline for a random subsample of 997 participants. For each follow-up, we interviewed participants whether they lived in the community or in correctional facilities.

### Procedures to Obtain Assent and Consent

Participants signed either an assent form (if they were <18 years of age) or a consent form (if they were ≥18 years). The Northwestern University Institutional Review Board and the Centers for Disease Control and Prevention Institutional Review Board approved all study procedures and waived parental consent, consistent with federal regulations regarding research with minimal risk.<sup>29,30</sup>

### Measures

We used data from only the follow-up interviews because many of the violence variables were measured only at follow-up.

**Perpetration of Violence.** We assessed violence via self-report because official arrest or court records underreport violent behavior.<sup>31</sup> Questions were drawn from the Denver Youth Survey.<sup>32</sup> Participants were asked if, during the 3 months prior to the interview, they had committed the following (yes/no): assault; assault with a weapon; robbery; forced sex; or use of a gun. An “any violence” variable (yes/no) reflects whether participants reported any of these violent behaviors.

**Psychiatric Diagnosis.** We administered the Diagnostic Interview Schedule for Children Version IV (child and young adult versions), based on the *DSM-IV*, to assess manic episode, hypomania, major depressive disorder (MDD), dysthymia, generalized anxiety

**TABLE 1** Prevalence of Violence at Time 1 and Time 2 for Males and Females<sup>a</sup>

Violent Behavior	Males				Females				Tests of Gender Differences, Contrasting Males to Females <sup>c</sup>		Changes in Prevalence Over Time, per Year <sup>d</sup>	
	Time 1 <sup>b</sup> (n = 1,044)		Time 2 <sup>b</sup> (n = 992)		Time 1 <sup>b</sup> (n = 604)		Time 2 <sup>b</sup> (n = 565)		AOR	(95% CI)	AOR	(95% CI)
	%	(SE)	%	(SE)	%	(SE)	%	(SE)				
Any Violence <sup>e</sup>	34.6	(2.6)	21.4	(2.2)	19.8	(1.7)	16.7	(2.4)	2.3*	(1.8, 3.0)	0.77*	(0.7, 0.9)
Forced sex <sup>f</sup>	0.04	(0.0)	0.0	-	0.2	(0.2)	0.2	(0.2)				
Assault without a weapon	25.1	(2.3)	18.1	(2.0)	16.1	(1.5)	11.6	(1.4)	2.0*	(1.5, 2.6)	0.83*	(0.7, 1.0)
Robbery	3.9	(1.1)	1.8	(0.7)	1.1	(0.4)	0.6	(0.3)	4.1*	(1.7, 9.9)	0.74	(0.5, 1.1)
Assault with a weapon	5.9	(1.2)	5.0	(1.2)	6.2	(1.0)	7.8	(2.4)	1.3	(0.8, 2.0)	0.84	(0.7, 1.0)
Gun use	14.8	(2.0)	6.8	(1.3)	4.3	(0.8)	5.1	(2.3)	4.7*	(3.1, 7.2)	0.67*	(0.6, 0.8)

Note: AOR = adjusted odds ratio; SE = standard error.

<sup>a</sup>Descriptive and inferential statistics are weighted to adjust for sampling design and reflect the demographic characteristics of the Cook County Juvenile Temporary Detention Center. Violence was assessed for the past 3 months.

<sup>b</sup>Of the 1,054 males and 605 females interviewed at time 1, 10 males and 1 female were not administered the violence questions. Of the 993 males and 568 females interviewed at time 2, 1 male and 3 females were not administered the violence questions.

<sup>c</sup>Odds ratios (ORs) contrast males to females and describe differences in prevalence as youth age. We used all available interviews to estimate gender differences in violent behavior. ORs are adjusted for race/ethnicity, incarceration (indicator for having spent none of the last 90 days incarcerated, yes/no; number of days in corrections), judicial status (processed in adult or juvenile court), age at baseline, and aging (time since baseline).

<sup>d</sup>ORs are given per 1 year. For example, an OR of 0.80 means that the odds of violence were decreasing by 20% per year. We used all available interviews to estimate changes in prevalence over time. ORs are adjusted for gender, race/ethnicity, incarceration (indicator for having spent none of the last 90 days incarcerated, yes/no; number of days in corrections), judicial status (processed in adult or juvenile court), and age at baseline.

<sup>e</sup>“Any violence” includes the violent behaviors listed.

<sup>f</sup>There were too few instances of forced sex to examine gender differences or changes in prevalence over time. Forced sex was reported by 1 male and 1 female at time 1, and by 1 female at time 2.

\*p < .05.

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