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A Diagnostic Study of Robbers

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ABSTRACT: The author reviews some of the literature on robbers and their offenses, and presents an original study of all 13 robbers referred to a maximum security hospital for pretrial psychiatric evaluation during 1 year. When compared with non-substance-abusers, accused robbers who abused alcohol or drugs tended to be younger, use weapons more often, and commit more robberies as an afterthought to other violent offenses against private citizens. Methods similar to the one used here might be helpful in understanding the relationships between other offenses and diagnoses.

KEYWORDS: psychiatry, robbery, comparative analysis

Robbery has been glorified in legend and the arts, yet terrorizes us on the streets. Legally defined as a theft accompanied by the threat or application of force, robbery is a common serious crime. It is an offense that is ostensibly motivated by the need for money, whether that need arises from a desperate desire to provide for one's family or to buy drugs. It is also among the most feared and dangerous of crimes. Yet we know comparatively less about robbers than about killers or sex offenders. In this paper, I briefly review some psychiatric studies of robbers, present data on a study of robbery defendants admitted to a maximum security hospital for pretrial psychiatric evaluation, and review some of the other literature that I believe is relevant to a clinical understanding of robbers.

Psychiatric Studies of Robbers

Psychiatric studies of robbers have been infrequent and have relied on various methods and case sources, although they generally have examined apprehended or incarcerated offenders. Kaufman [1] interviewed 100 convicted robbers consecutively admitted to a state penitentiary and found that "alcoholism was an outstanding symptom" in one fourth of the offenders. "Ill-defined and poorly elaborated" personality disorders were present in 72 offenders, while only 28 of the study population exhibited "conventional" psychiatric syndromes such as mental retardation, "psychasthenias and anxiety hysterias, organic syndromes, and smoldering schizophrenias." MacDonald [2] reported on his study of the police records of 1000 armed robberies committed in Denver from January to December 1971, his psychiatric examinations of 100 armed robbers for the courts during a 3½-year period, and anecdotal accounts from "detectives and police departments, both within and beyond Colorado." Based on his examinations and these anecdotal accounts, he noted that armed robbers from his sample were rarely psychotic, and he regarded alcoholism and drug addiction

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as having nonspecific significances to robbery. More recently, Gunn and Gristwood [3] studied 27 incarcerated offenders with a history of at least one robbery conviction and compared them with 62 nonrobbers. Personal interviews and various rating instruments formed the basis of comparison. They found robbers to be younger, more violent recidivists, while "professional robbers" tended to have fewer convictions for violent offenses than other robbers. They found no differences between the groups' psychiatric histories, although they did not specify diagnoses nor did they mention histories of alcohol or drug abuse.

At least two recent archival studies of defendants referred for pretrial psychiatric evaluation have examined the relationship between index crimes, including robbery, and diagnoses. Henn et al [4] examined the records of 1195 offenders referred for such evaluations to the forensic science service of an urban community mental health center between 1952 and 1973. Personality disorders, alcohol and drug abuse, other disorders, and schizophrenia were the most common primary and secondary diagnoses among the 156 robbers in that study. Unfortunately, Henn et al interdependently considered multiple charges for each offender, a point that precludes meaningful comparison of diagnoses between robbers and nonrobbers. Bluestone and Mallela [5] studied the records of 1440 defendants similarly referred to a court clinic from 1968 to 1975, of whom 189 were charged with robbery. Personality disorders, schizophrenia, substance abuse disorders, and other disorders were the most common *Diagnostic and Statistical Manual (DSM) II* diagnoses among these robbers. Bluestone and Mallela classified charges into independent groups, allowing comparisons of diagnoses among different types of offenders. Those disorders most common among robbers were also the most common disorders among nonrobbers in their study. Table 1 shows the percentages of the defendants from these two studies with various diagnoses.

The robbery offense has generally received secondary attention in psychiatric studies of robbers. Based on his review of the police records of 1000 armed robberies in Denver during the first ten months of 1971, MacDonald [2] observed that 36.3% of these robberies occurred in streets, alleys, parking lots, public parks, or school grounds. While 6.8% of all the armed robberies occurred in apartment houses or homes, 59.6% occurred in commercial establishments. Slightly more than 82% of these 1000 armed robberies involved the use of real or simulated firearms. Gunn and Gristwood [3] used the McClintock-Gibson criteria² and observed that 59% committed their robberies against people carrying money or goods as part of their jobs, 19% robbed on private premises, 15% robbed after a short association between victim and offender, and only 7% robbed in the open following a sudden attack. Unfortunately, these studies did not attempt to examine offense variables as a function of diagnosis.

A Study of Robbers

I decided to study all accused robbers referred to a maximum security hospital for pretrial psychiatric evaluation during one year and examine the role of substance abuse in their offenses by comparing the other variables between the substance-abusing and non-substance-abusing robbers.

Methods

The site of this study was a maximum security hospital for men which has been described in detail elsewhere [6]. I examined every accused robber who was admitted for pretrial psy-

²McClintock and Gibson [10] studied 749 robberies and 499 convicted robbers in London during the 1950s. They classified robberies according to the method by which the victim was attacked. Group I robberies were of persons who, as part of their employment, were in charge of money and goods. Group II were robberies in the open following a sudden attack. Group III were robberies on private premises. Group IV were robberies after a brief preliminary association between victim and offender. Group V were robberies in cases of previously lengthy association between victim and offender.

TABLE 1—Percentages of defendants with various diagnoses from two studies.^a

Diagnosis	Henn et al ^b (N = 156)	Bluestone and Mallela ^c	
		Robbers (N = 189)	Nonrobbers (N = 1251)
Personality disorders	50	22	20.5
Alcohol and drug abuse	20	17	18
Other disorders	17	21	23
Schizophrenia	15	21	22
No mental illness	9	2	2
Mental retardation	8	6	4
Affective disorder	5	0.5	0.8
Organic brain syndrome	3	1	2

^aSee text for description of these studies.

^bAdapted by the author from Henn et al [4].

^cAdapted by the author from Bluestone and Mallela [5].

chiatric examination for one year. Demographic, historical, offense, and diagnostic data were collected.

Demographic variables for each defendant included age, race, highest educational level attained, vocation during the past three months, and marital status. Historical data for each defendant included the presence or absence of any psychiatric history or criminal arrest. Offense variables included the use of weapons, self-reported reasons for the offense, associated offenses, intoxication during the offense, and whether the offense involved a commercial or noncommercial victim. Clinical diagnoses were made according to DSM III criteria and multiple diagnoses were allowed. The diagnoses were subsequently considered as substance use disorders (substance abuse), mental retardation, schizophrenia, affective disorder, schizoaffective disorder, psychosexual disorders, and antisocial personality disorder.

The mean ages of the groups of substance-abusing and non-substance-abusing defendants were compared by the *t* test. The numbers of robbery charges and other associated charges were compared across the substance-abusing and non-substance-abusing groups by the Mann-Whitney U Test [7]. Other variables were compared across the substance-abusing and non-substance-abusing groups in a two-by-two table by using the Fisher Exact Probability Test [7]. All tests were two-tailed and values of $p < 0.05$ were considered statistically significant.

Results

There were 454 defendants referred for pretrial psychiatric examination during the year, of whom 13 were accused robbers. The prevalence of robbers referred was 28.63 per 1000. The mean age of all robbers was 26, and they were all unemployed and single at the time of referral. There were nine white and four black defendants and their mean educational level was tenth grade. Eleven defendants had prior psychiatric contacts and nine were previously arrested. All of these defendants admitted to committing the acts with which they were charged.

Each of these robbers acted alone and eight used weapons. Seven robbers were also charged with nonrobbery offenses. Eight robbers planned their robberies, while five robbers admitted that their robberies were an afterthought to other offenses. There were five commercial and eight noncommercial robberies.

The distribution of diagnoses is presented in Table 2. Almost half the subjects received the diagnosis of alcohol abuse. The diagnoses of drug abuse, antisocial personality disorder, and

TABLE 2—Number of robbery defendants with various DSM III diagnoses.^a

DSM III Diagnosis	Number
Alcohol abuse	6
Drug abuse	5
Antisocial personality disorder	5
Schizophrenia	4
Affective disorder	3
Mental retardation	3
Schizoaffective disorder	2
Psychosexual disorder	1

^aMultiple diagnoses allowed.

schizophrenia were each made in approximately one third of the study subjects. Mental retardation, affective disorders, schizoaffective disorders, and psychosexual disorders occurred less commonly.

Table 3 shows the numerical distribution of other diagnoses among those with and without a diagnosis of substance abuse. Those subjects with a diagnosis of substance abuse also tended to have diagnoses of antisocial personality disorder, mental retardation, or affective disorder, while those without substance abuse diagnoses tended to have the diagnosis of schizophrenia. The man with a psychosexual disorder was once believed to have schizophrenia. However, careful interviewing disclosed that he had an atypical paraphilia.

There were seven defendants with diagnoses of alcohol or drug abuse, and six non-substance-abusers. Four of the seven substance abusers abused both alcohol and drugs. All substance abusers admitted to being intoxicated at the time of their offense, while the non-substance-abusers claimed not to have been intoxicated during their offenses. The group of substance abusers had a mean age of 22.28 years ($n_1 = 7$; standard deviation $SD = 5.44$), while the non-substance-abusers had a mean age of 30.33 years ($n_2 = 6$; $SD = 4.03$). This difference was statistically significant ($t = 4.10$; $p < 0.005$; degrees of freedom [df] = 11). There were no significant differences between substance abusers and non-substance-abusers with regard to race, educational level, or criminal or psychiatric histories.

Table 4 shows weapon use as a function of alcohol or drug abuse. Robbers with diagnoses of substance abuse had a statistically significant tendency to have used weapons in contrast to robbers without substance abuse diagnoses ($p = 0.009$; $df = 1$).

TABLE 3—Other diagnoses among those with and without substance abuse diagnoses.

DSM III Diagnosis	Number
Substance abuse	7
Antisocial personality disorder	5
Mental retardation	3
Affective disorder	2
Schizoaffective disorder	1
Schizophrenia	1
No substance abuse	6
Schizophrenia	3
Schizoaffective disorder	1
Affective disorder	1
Psychosexual disorder	1

TABLE 4—*Weapons use by robbery defendants as a function of substance abuse.*^a

Presence of Substance Abuse	Used Weapons	Did Not Use Weapons
Substance abuse	7	0
No substance abuse	1	5

^a $p = 0.0093$; $df = 1$.

Table 5 shows "afterthought" robberies as a function of substance abuse. Robbery defendants with a diagnosis of substance abuse had a statistically significant tendency to have committed their robberies as an afterthought to other offenses when compared with non-substance-abusing robbers ($p = 0.0326$; $df = 1$).

The numbers of robbery and other concomitant charges as a function of substance abuse are displayed in Table 6. While there was no significant difference in the numbers of robbery charges as a function of substance abuse ($U = 19.5$; $n_1 = 6$; $n_2 = 7$; $p > 0.05$), those robbery defendants with a diagnosis of substance abuse had a statistically significant tendency to have concomitant charges, while nonabusing robbers were usually charged only with robbery ($U = 5$; $n_1 = 6$; $n_2 = 7$; $p = 0.042$). The entire group of substance abusers had five associated charges of assault and battery, four additional counts of rape, and one each of larceny, public intoxication, and burglary. The only additional charge for the group of nonabusers was one count of receiving stolen property.

The type of index robbery as a function of substance abuse is shown in Table 7. Substance abusing robbers tended to commit noncommercial robberies, while substance nonabusing

TABLE 5—*Robberies committed as an afterthought as reported by substance-abusing and non-substance-abusing defendants.*^a

Presence of Substance Abuse	Robbery as Afterthought	Robbery Not as Afterthought
Substance abuse	5	2
No substance abuse	0	6

^a $p = 0.0326$; $df = 1$.TABLE 6—*Numbers of robbery and other charges against substance-abusing and non-substance-abusing defendants.*

Robbery Charges ^a		Other Charges ^b	
Substance Abusers ($n_2 = 7$)	Non-Substance-Abusers ($n_1 = 6$)	Substance Abusers ($n_2 = 7$)	Non-Substance-Abusers ($n_1 = 6$)
2	1	5	0
1	1	2	0
1	1	0	0
1	7	1	1
2	1	1	0
1	1	2	0
1		1	

^a $U = 19.5$; $n_1 = 6$, $n_2 = 7$; $p > 0.05$.^b $U = 5$; $n_1 = 6$, $n_2 = 7$; $p = 0.042$.

TABLE 7—Types of robberies committed by substance-abusing and non-substance-abusing defendants.^a

Presence of Substance Abuse	Robbery Type	
	Commercial	Noncommercial
Substance abuse	0	7
No substance abuse	4	2

^a $p = 0.042$; $df = 1$.

robbers tended to commit commercial robberies against banks or other businesses ($p = 0.042$; $df = 1$).

Discussion

This study examined characteristics of robbers referred to a maximum security hospital for pretrial psychiatric evaluation, specifically investigating the relationship between a diagnosis of substance abuse and certain characteristics of the defendants and their robberies.

Each of these defendants committed their respective index robberies alone. However, the substance abusers were somewhat different than the non-substance-abusers. The substance abusers were younger than the non-substance-abusers. Additionally, the substance-abusing robbers usually committed their robberies as an afterthought to other injurious attacks, such as assault and battery or rape. They were inclined to use weapons against private citizens, while the non-substance-abusers tended to attempt unarmed robberies against commercial establishments such as banks. It seems that the substance-abusing and non-substance-abusing robbery defendants in this study committed different types of offenses.

The prevalence of robbers referred for evaluation to this maximum security hospital was 28.63 per 1000. The prevalences of robbers referred in the studies of Henn et al [4] and Bluestone and Mallela [5] were, respectively, 130.54 and 131.25 per 1000. One explanation for the lower prevalence of robbers seen in this study is the decentralized pretrial evaluation process practiced in this state, although other explanations cannot be excluded on the basis of these data.

Nonpsychiatric Studies of Robbers

Substance Use Among Robbers

Substance use is relatively common among robbers in nonpsychiatric studies. Two studies of recently arrested offenders are of particular interest. Shupe [8] measured the urine alcohol levels of 882 people immediately after their arrests for felonies. Eighty-five (9.6%) of the offenders were robbers. The robbers constituted 10% of the offenders with no alcohol in their urine samples, and 9% of the offenders with urine alcohol concentrations of at least 0.10%. Of these robbers, 60% had urine alcohol concentrations in excess of 0.10% while 66% of the nonrobbers had similar concentrations.

In a widely cited study, Eckerman et al [9] examined arrest charges as functions of drug abuse among 1889 arrestees by structured interview protocol, urine analysis, and record reviews of drug registers and criminal histories for drug offenses. Robbers comprised 287 (15%) of the group of arrestees. However, robbers comprised between 17 and 19% of drug users and between 11 and 14% of non-drug-users, depending on the method of identification. Between 29 and 76% of the robbers used drugs, while 22 and 66% of the nonrobbers used drugs, depending on the criteria by which drug use was defined. Robbery was alterna-

tively considered as a serious crime against persons or a property offense in some subsequent analyses.

When drug use was defined by urine analysis alone, drug users were charged with significantly more property offenses only when robbery was classified as a property offense. However, when drug use was defined by record review alone, questionnaire, and urine analysis, or all three methods, drug users were more likely to be charged with property crimes regardless of whether robbery was classified as a serious crime against the person or a property offense. The nearly equal percentages of substance use among robbers and nonrobbers in these studies suggests that substance use per se probably does not discriminate robbery from other offenses.

McClintock and Gibson [10] studied 749 robberies and 499 convicted robbers in London during the 1950s. They noted that persistently violent offenders, "some who were violent when drunk," were statistically inclined to be more involved in Type II or V² robberies than other types of robberies. Normandeau [11] used the McClintock-Gibson criteria² to examine records of 1722 robbery incidents involving 2482 offenders and 1788 victims in Philadelphia during the 1960s. Four percent of the robbers claimed to have used alcohol at the times of their robberies, and Normandeau concluded that "alcohol . . . does not seem to trigger robbery." Unfortunately he did not include drug use as a variable and did not study the types of robberies or other offense characteristics as a function of alcohol use.

Conklin [12] studied robbery as a system in which he traced 1243 reported robberies and interviewed a nonrandom sample of 67 incarcerated robbers in Boston during the 1960s. He developed a typology of robbers based on their personal characteristics and found 7 professionals, 41 opportunists, 12 addicts, and 7 alcoholics. He subsequently made some qualitative observations on offense characteristics as functions of addiction or alcoholism. He noted that addicts robbed occasionally to support their drug use. Conklin believed that addict robbers used less planning than professionals and selected their victims in ways to minimize the risk of arrest. Many addict robbers carried weapons. In contrast, alcoholic robbers committed their robberies as unplanned afterthoughts to other assaults and usually did not carry weapons unless by habit. However, he did not consider the sample of interviewees to be representative of all robbers or all convicted robbers, a point which precludes meaningful comparison.

Feeney and Weir [13] took a somewhat different approach in conducting a large study of robbery in Oakland. As part of their protocol, they selected a nonrandom sample of 82 adults and 31 juveniles from among convicts in prisons and local jails for detailed interviews. The types of robberies committed by the adults were evenly divided between offenses against commercial establishments and those against individuals. They subsequently examined some variables as a function of the robbery having had a commercial or individual victim. Those adults who robbed commercial establishments tended to be older than those who robbed individuals. Only 27% of commercial robbers (compared with 49% of individual robbers) admitted to being intoxicated on alcohol, drugs, or both at the time of their offense.

Other Variables of the Robbery Offense

Several authors have also commented upon the number of robbers and their use of weapons in robbery offenses. McClintock and Gibson [10] observed that approximately 37% of their robberies involved lone offenders and 37% involved weapons. Weapons were most commonly used in their Group I (commercial) robberies. Normandeau [11] noted that 66.7% of his robberies involved only one robber and 51% involved weapons. Conklin [12] subsequently reported that robberies by lone offenders had a greater tendency to involve weapons than robberies by at least two offenders. Feeney and Weir [13] observed that while 61% of commercial robbers reported at least some planning before their robberies, only 29% of those who robbed individuals reported at least some planning. They also found "no

apparent differences between adults doing commercial robberies and those robbing individuals in the number of partners." While 93% of the adult commercial robbers were armed, only 68% of the individual robbers were armed.

Although these preceding studies have examined large numbers of robberies, offenders, and victims, their different methods, sampling techniques, and study variables make comparisons difficult [10-13]. Additionally, clinical diagnoses were not made, nor were the other variables studied as functions of substance abuse.

Conclusions

This paper has reviewed some psychiatric and nonpsychiatric studies of robbers and robbery incidents and presented data on an original study of robbery defendants referred to a maximum security hospital for pretrial psychiatric examination. Although the role of psychiatric disorders in robbery has received limited attention in this literature, there apparently have been no quantitative studies of robbers and their offenses as functions of a psychiatric diagnosis. This study was an attempt to remedy that deficit.

This study is not directly comparable with other investigations because of differences in method, variables studied, and sources of case ascertainment. It is also difficult to generalize the results of this study, because of the highly select nature of the population under consideration. Yet this paper suggests that a diagnosis of substance abuse in this context is associated with different types of offenders and offenses than those not associated with substance abuse. I strongly recommend use of this study design on larger samples representative of various offense types as one way of further understanding the relationships between specific diagnoses and offenses.

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