21% To 45% of Prisoners Have ADHD 15 Peer Reviewed Studies Show. Crime & Jail Are Costly, Treatment Is Cheap

by Pete Quily on January 12, 2011 · 29 comments

21-45% of criminals in prison have ADHD 15 clinical studies from peer reviewed journals show that I list below. Only 8% of children and 5% of adults have ADHD.

If people with ADHD are 4 to 9 times more likely to commit crimes and go to jail than non ADDers, shouldn’t every court screen for ADHD and offer diagnosis and proper treatment? The UK screens all prisoner for ADHD why don’t we? Pay to diagnose and treat ADHD now (cheap), or pay exponentially more later for crime costs and expensive jails. Costs $101,000 a year to keep a prisoner in a Canadian jail.

In this post I’ll do 4 things:

1. Go over the background of ADHD, crime and prison.

2. Show statistics on people with ADHD who are in prison and arrests.

3. Give excerpts of abstracts of 15 clinical studies from peer reviewed journals.

4. Ask you to do something.

1. Background of ADHD, Crime and Prison:

They don’t screen for ADHD in prisons in Canada, or in the vast majority jails in the US (they might in some places I’m not sure). In the UK, police, courts and prisons tests all adult offenders for attention deficit disorder in a bid to reduce re-offending rates and cut aggressive behaviour in prisons.

Research revealed a disproportionately high number of undiagnosed and untreated sufferers in the criminal justice system. “We know that conditions like attention deficit hyperactivity disorder can contribute to people turning to crime,” said UK health minister Phil Hope.
“We are concerned that ADHD is not understood well enough in the criminal justice system so cases go unnoticed.

Most people with ADHD do not commit crimes or go to jail. There are billionaires that attribute their success to ADHD, many entrepreneurs have ADHD, there’s a MENSA ADHD special interest group with 600+ members, I’ve coached many successful adults with ADHD including police officers.

When ADHD is ignored, ADDers are more likely to accumulate comorbid or co-existing conditions. I.e., depression, anxiety, bipolar, learning disabilities, OCD, PTSD, huge rates of drug and alcohol addiction, gambling, eating disorders, oppositional defiant disorder, conduct disorder, antisocial personality disorder etc.

80% of adults with ADHD don’t know they have it. Some will self medicate with negative methods; drugs, alcohol, gambling, high risk activities, conflict and violence. vs positive methods.

Please tell your politicians, police and media about these studies. and ask them to start training doctors to diagnose and treat ADHD in children, teens and adults, and run anti stigma and ADHD education campaigns and start screening them in prison like the UK does.

Read ADHD and the Criminal Justice System Spinning out of Control

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2. Statistics On People With ADHD Who Are In Prison And Arrests

These are taken from the abstracts of 15 clinical studies on ADHD, crime and jail from peer reviewed journals

I’ll cover these topics:

- Numbers of people with ADHD in jail
- Rates of arrests and types of crime
Teens with ADHD in Jail and comorbidities / co-existing conditions

Comorbidities / co-existing conditions of adult ADHD inmates

Some reasons why people with ADHD commit crimes

ADHD medications and crime- inverse correlation

Some reasons why people with ADHD commit crimes

Numbers of people with ADHD in jail

- 46% of female prisoners in Rhode Island met criteria for childhood ADHD.
- Swedish study showed 40% of adult male longer-term prison inmates had ADHD.
- The overall prevalence of ADHD in young male prisoners according to DSM-IV was 45%
- Half of the male prisoners in Iceland (50%) were found on screening to have met criteria for ADHD in childhood
- Studies show that at least 25% of prisoners in the United States have ADHD.
- Diagnosable ADHD was found to occur in 25.5% of the adult male inmates, and major depression occurred in 25.5% of the inmates. A significant relationship between ADHD and depression was found to exist.

Rates of arrests and types of crime

- Follow up study using arrest records showed significantly more people with ADHD than comparisons had been arrested (47% vs. 24%), convicted (42% vs. 14%), and incarcerated (15% vs. 1%).
- Follow up study using arrest records showed people with ADHD had significantly higher rates of felonies and aggressive offenses than non adders
- The ADHD symptomatic group had significantly higher rates of total, acquisitive and violent offending than other prisoners, as well as greater regular heroin use.
- For violent offending, ADHD symptoms were the strongest predictor followed by alcohol dependence.
- Hyperactive subjects had significantly higher juvenile (46% versus 11%) and adult (21% versus 1%) arrest rates. Juvenile and adult incarceration rates were also significantly higher. Childhood conduct problems predicted later criminality.

Teens with ADHD in Jail and comorbidities / co-existing conditions

- Only 2 out of 30 Swedish prison inmates confirmed with ADHD had received a diagnosis of
ADHD during childhood

- Addicted delinquents with ADHD showed worse social environment and a higher degree of psychopathology, including externalizing and internalizing behavior, compared to addicted delinquents without ADHD.

- Hyperactive children are at risk for both juvenile and adult criminality. The risk for becoming an adult offender is associated with conduct problems in childhood and serious antisocial behavior (repeat offending) in adolescence.

- Children with impulsive ADHD were more likely to commit impulsive crimes such as theft. Children with inattentive ADHD were more likely to engage in premeditated crimes, such as burglary and selling drugs.

- Significant increase of emotional and internalizing problems in the ADHD group compared to delinquents without ADHD or ADHD history. ADHD delinquents scored higher on the personality dimension neuroticism, and showed lower scores on the dimensions agreeableness and consciousness.

- Follow up study using arrest records showed the development of an antisocial or substance use disorder in adolescence completely explained the increased risk for subsequent criminality for ADHD inmates.

- Even in the absence of comorbid conduct disorder in childhood, ADHD increases the risk for developing antisocial and substance use disorders in adolescence, which, in turn, increases the risk for criminal behavior in adolescence and adulthood.

Comorbidities / co-existing conditions of adult ADHD inmates

- Women with ADHD were more likely to be inconsistently employed, recently homeless, lifetime incarceration of more than 90 days, current smokers and ever used marijuana regularly.

- Offenders with ADHD were more likely to report problems with emotional and social functioning and to have higher suicide risk scores.

- Offenders with ADHD had higher rates of mood, anxiety, psychotic, somatoform, antisocial and borderline personality disorders.

- The results support prior findings of high ADHD prevalence in prison inmates and suggest that emotional and internalizing abnormalities are prominent problems in this population.

Some reasons why people with ADHD commit crimes

- It also appears that when individuals with ADHD commit violent crimes, these acts are more likely to be crimes of spontaneous and “reactive” aggression rather than carefully plotted out offenses. Such crimes are generally impulsive acts driven by a provocation or conflict that triggers an outburst.

- Those with ADHD also have other triggers for crimes; adolescents and adults with untreated ADHD are often bored, sensation seeking, or simply impulsive, and this combination of attributes.
leads them to react with poor judgment. A desired item appears, they want it, so they take it

- Children with ADHD are struggling with chronic symptoms of inattention, distractibility, hyperactivity, and impulsivity and frequently do not realize this satisfaction. They can become alienated or friendless, and to avoid this outcome, they learn that outlandish behavior can earn them the respect of their peers. To them, negative attention is more desirable than no attention whatsoever, and befriending “bad kids” is preferable to having no friends.

**ADHD medications and crime- inverse correlation**

- The researchers compared the rates of prescriptions for these psychiatric medications to rates of violent crimes in the United States from 1997-2004 with a statistical regression analysis.[4] They found a significant inverse correlation; that is, as prescriptions went up, violent crimes came down

- The researchers stated, “Our evidence suggests that, in particular, sales of new-generation antidepressants and stimulants used to treat ADHD are negatively associated with rates of violent crime.”

**Recommendations**

- The results underline the need of adequate therapeutic programs for addicted young prison inmates considering ADHD comorbidity, which is associated with additional psychopathology and social problems.

- Prisoners should routinely undergo screening for ADHD in order to identify those who would benefit from a comprehensive assessment to determine who may have ADHD and associated problems.

- ADHD’s presence should alert prison staff that the offender is likely to require more intensive mental health services.

- The study recommended extensive school intervention programs for children with ADHD

- Development of such intervention programs and evaluating them for efficiency could be dollars well spent in terms of crime and drug abuse averted.

- There is an urgent need to treat drug addiction and ADHD symptoms in order to reduce offending among the most persistent offenders. Recently, treatment programmes have been developed for adults with ADHD, heroin and crack cocaine addiction which can be applied to this population.

- ADHD is a significant factor relating to both crime and punishment. The condition increases the risk of committing a crime, and once the individual is incarcerated, the conundrum develops regarding appropriate treatment. Evidence suggests that proper treatment may reduce the risk for criminal behavior and the rate of recidivism among afflicted criminals.

- it is important for psychiatrists to consider ADHD as a valid factor in crime and the treatment of ADHD as a potentially preventive measure against the commission of violent and nonviolent criminal acts. Resolving or improving ADHD symptoms can bring relief to the individual as well as to society at large.
3. Excerpts from Abstracts of 15 Clinical Studies from Peer Reviewed Journals Documenting the Links Between ADHD, Crime and Jail

1. **Swedish study showed 40% of adult male longer-term prison inmates had ADHD.**

Ylva Ginsberg, Tatja Hirvikoski, and Nils Lindefors

ADHD among longer-term prison inmates is a prevalent, persistent and disabling disorder

The estimated prevalence of adult ADHD among longer-term inmates was 40%. Only 2 out of 30 prison inmates confirmed with ADHD had received a diagnosis of ADHD during childhood, despite most needed health services and educational support.

All subjects reported lifetime substance use disorder (SUD) where amphetamine was the most common drug. Mood and anxiety disorders were present among half of subjects; autism spectrum disorder (ASD) among one fourth and psychopathy among one tenth. Personality disorders were common; almost all inmates presented conduct disorder (CD) before antisocial personality disorder (APD). Prison inmates reported more ADHD symptoms during both childhood and adulthood, compared with ADHD psychiatric outpatients.

Our findings imply the need for considering these severities when designing treatment programmes for prison inmates with ADHD

2. **Childhood attention deficit hyperactivity disorder, substance use, and adult functioning among incarcerated women.**

Hennessey KA, Stein MD, Rosengard C, Rose JS, Clarke JG.
Rhode Island Hospital, USA.

**OBJECTIVE:** To estimate prevalence of childhood ADHD among incarcerated women and determine its association with substance use and adult functioning.

**METHOD:** 192 female participants are recruited from the Department of Corrections in Rhode Island. Childhood ADHD is defined as scoring >46 on the Wender Utah Rating Scale.

**RESULTS:** The findings reveal that **46% met criteria for childhood ADHD.** Multivariate analysis reveal that **women meeting WURS criteria were more likely to be inconsistently employed (OR = 0.23, 95% CI = 0.10-0.54), recently homeless (OR = 2.09, 95% CI = 1.02-4.30), lifetime incarceration of more than 90 days (OR = 3.00, 95% CI = 1.37-6.57), current smokers (OR = 2.99, 95% CI = 1.24-7.20),** and ever used marijuana regularly (OR = 3.47, 95% CI = 1.61-7.45).

**CONCLUSION:** Among incarcerated women, childhood ADHD is associated with negative social and health behaviors.

3. **Attention Deficit Hyperactivity Disorder in Men and Women Newly Committed to Prison**
Clinical Characteristics, Psychiatric Comorbidity, and Quality of Life

Int J Offender Ther Comp Criminol June 2010 vol. 54 no. 3 361-377
Patricia Westmoreland, Iowa Department of Corrections, Oakdale, Tracy Gunter, Peggy Loveless, Jeff Allen, Bruce Sieleni, Donald W. Black University of Iowa, Iowa City, donald-black@uiowa.edu

Attention deficit hyperactivity disorder (ADHD) is associated with comorbid psychiatric diagnoses and antisocial behaviors that contribute to criminality, yet studies of ADHD in offenders are few. The authors evaluate a random sample of 319 offenders using a version of the Mini International Neuropsychiatric Interview and Medical Outcome Survey Health Survey.

ADHD was present in 68 subjects (21.3%). Offenders with ADHD were more likely to report problems with emotional and social functioning and to have higher suicide risk scores (p < .001). They also had higher rates of mood, anxiety, psychotic, and somatoform disorders. Antisocial and borderline personality disorders were also more common among offenders with ADHD.

The authors conclude that ADHD is common in offenders and is associated with comorbid disorders, worse quality of life, and higher risk for suicidal behaviors. Its presence should alert prison staff that the offender is likely to require more intensive mental health services.

4. Drug addiction in young prison inmates with and without attention deficit hyperactivity disorder

Fortschr Neurol Psychiatr. 2007 May;75(5):285-92. Epub 2006 Jan 4
Retz W, Retz-Junginger P, Schneider M, Scherk H, Hengesch G, Rösler M.
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Prospective studies of children with ADHD have shown a high level of substance use disorder comorbidity, particularly when associated with social maladaptation and antisocial behavior. Conversely, studies of drug abusing participants and delinquents revealed a high prevalence of ADHD comorbidity. In this study 129 young male prison inmates were systematically examined for ADHD and substance use disorders. 64.3 % showed harmful alcohol consumption. 67.4 % fulfilled DSM-IV criteria for any drug abuse or dependence. 28.8 % of these participants were diagnosed with ADHD, combined type, other 52.1 % showed ADHD residual type. Opioid dependence was more common in delinquents without ADHD.

Addicted delinquents with ADHD showed worse social environment and a higher degree of psychopathology, including externalizing and internalizing behavior, compared to addicted delinquents without ADHD. Neuroticism and conscientiousness ratings of the addicted ADHD group, but not of those without ADHD, differed from non-addicted delinquents.

The results underline the need of adequate therapeutic programs for addicted young prison inmates considering ADHD comorbidity, which is associated with additional psychopathology and social problems.

5. Screening for attention-deficit hyperactivity disorder and co-morbid mental disorders among
prison inmates.

Einarsson E, Sigurdsson JF, Gudjonsson GH, Newton AK, Bragason OO.
Department of Psychology, University of Aarhus, Aarhus, Denmark.

Attention-deficit hyperactivity disorder (ADHD) is a developmental disorder, which is associated with a number of psychiatric conditions, mostly personality disorder, substance misuse, anxiety and depression. The aim of the present study was to investigate the relationship between ADHD symptoms and associated psychiatric conditions among prisoners. The participants were 90 male prisoners in Iceland who were assessed within 10 days of admission to the prison. The Mini International Neuropsychiatric Interview (MINI) and the Standardised Assessment of Personality-Abbreviated Scale (SAPAS) were administered. Childhood ADHD symptoms were screened by the Wender-Utah Rating Scale and current adult symptoms by the DSM-IV Checklist for ADHD.

Half of the prisoners (50%) were found on screening to have met criteria for ADHD in childhood and of those over half (60%) were either fully symptomatic or in partial remission of their symptoms. A logistic regression analysis revealed that the MINI Antisocial Personality Disorder scale was the single best predictor of current ADHD symptoms. Many prisoners are either fully symptomatic or in partial remission of their ADHD symptoms and have serious co-morbid problems, primarily associated with antisocial personality disorder and substance dependence.

Prisoners should routinely undergo screening for ADHD in order to identify those who would benefit from a comprehensive assessment to determine who may have ADHD and associated problems.

6. Lifetime criminality among boys with attention deficit hyperactivity disorder: a prospective follow-up study into adulthood using official arrest records.

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This study investigates the relationship between childhood attention deficit hyperactivity disorder (ADHD) and later criminality. White boys (n=207, ages 6-12) with ADHD, free of conduct disorder, were assessed at ages 18 and 25 by clinicians who were blind to childhood status. A non-ADHD group served as comparisons. Lifetime arrest records were obtained when subjects were 38 years old for subjects who resided in New York State throughout the follow-up interval (93 probands, 93 comparisons).

Significantly more ADHD probands than comparisons had been arrested (47% vs. 24%), convicted (42% vs. 14%), and incarcerated (15% vs. 1%). Rates of felonies and aggressive offenses also were significantly higher among probands.

Importantly, the development of an antisocial or substance use disorder in adolescence completely explained the increased risk for subsequent criminality.
Results suggest that even in the absence of comorbid conduct disorder in childhood, ADHD increases the risk for developing antisocial and substance use disorders in adolescence, which, in turn, increases the risk for criminal behavior in adolescence and adulthood.

7. **A prospective study of hyperactive boys with conduct problems and normal boys: adolescent and adult criminality.**

Satterfield JH, Schell A.
Department of Psychiatry, Oregon Health Sciences University, Portland, USA.

**OBJECTIVE:** To examine the relationship between attention deficit disorder with hyperactivity in childhood and criminality in adolescence and adulthood in 89 hyperactive and 87 normal control subjects.

**METHOD:** In this prospective study, adolescent follow-up intervals ranged from 13 to 21 years and adult follow-up ranged from 18 to 23 years. The official arrest records for all subjects were obtained.

**RESULTS:** Hyperactive subjects had significantly higher juvenile (46% versus 11%) and adult (21% versus 1%) arrest rates. Juvenile and adult incarceration rates were also significantly higher. Childhood conduct problems predicted later criminality, and serious antisocial behavior in adolescence predicted adult criminality.

**CONCLUSIONS:** Hyperactive children are at risk for both juvenile and adult criminality. The risk for becoming an adult offender is associated with conduct problems in childhood and serious antisocial behavior (repeat offending) in adolescence. Hyperactive children who do not have conduct problems are not at increased risk for later criminality.

8. **Children with ADHD were twice as likely as their peers to commit robbery in adulthood and were 50 percent more likely to sell drugs**

PubMed version

Fletcher J, Wolfe B.
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After controlling for race, education and income level, certain types of crime were linked to particular symptoms of ADHD in children ages 5 to 12.

The type of crime committed depended on whether the child was diagnosed with impulsive ADHD, inattentive ADHD or a combination of the two. **Children with impulsive ADHD were more likely to commit impulsive crimes such as theft.** Children with inattentive ADHD were more likely to engage in premeditated crimes, such as burglary and selling drugs. Children with both impulsive and inattentive ADHD were less likely to commit crimes compared to children with the other subtypes.
The study recommended extensive school intervention programs for children with ADHD, who not only tend to perform worse in school but also leave school earlier than their peers.

**Implications:** Our results suggest that children showing ADHD symptoms should be viewed as a group at high risk of poor outcomes as young adults. As such, a good case can be made for targeting intervention programs on this group of children and conducting evaluations to learn if such interventions are effective in reducing the probability that these children commit a crime. Development of such intervention programs and evaluating them for efficiency could be dollars well spent in terms of crime and drug abuse averted.

9. **Prevalence of attention deficit-/hyperactivity disorder (ADHD) and comorbid disorders in young male prison inmates.**

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**METHOD:** We investigated 129 prison inmates (mean age+/SE: 19.2+/−2.0 years) and 54 healthy male control subjects (mean age+/SE: 22.2+/−3.12 years) for the presence of adult ADHD using the Wender Utah Rating Scale (WURS), the Eysenck Impulsivity Questionnaire (EIQ), the diagnostic criteria for ADHD according to DSM-IV and ICD-10-research criteria and the Utah criteria for adult ADHD. In order to determine comorbid personality disorders we applied the International Personality Disorder Examination (IPDE). Externalization (ED) and Internalization Disorders (ID) were evaluated by means of the Achenbach Scales. Alcoholism (ALC) was examined via the Alcohol Use Disorder Test (AUDIT) and substance use disorder (SUD) has been investigated with the Structured Clinical Interview for DSM-IV (SCID).

**RESULTS:** The overall prevalence of ADHD according to DSM-IV was 45%. The prevalence of disturbance of activity and attention (DAA) and hyperkinetic conduct disorder (HCD) via the ICD-10 research criteria was 21.7%. Sole DAA without any comorbid condition could be detected in one case. The most common diagnostic combinations were DAA/HCD and SUD/ALC (89% of all DAA/HCD cases).

**CONCLUSION:** The prevalence of DAA/HCD or ADHD in young adult prison inmates is significantly elevated when compared to nondelinquent controls. Generally the population of young adult male prison inmates exhibits a considerable psychiatric morbidity. Of the total sample, 64% suffered from at least 2 disorders. Only 8.5% had no psychiatric diagnoses. This indicates the urgent need for more psychiatric expertise in young offender facilities.

10. **An epidemiological study of ADHD and major depression in a male prison population.**

Eyestone LL, Howell RJ.
Brigham Young University, Provo, Utah 84602.
One hundred two inmates were interviewed and tested to determine epidemiological rates of ADHD and depression in an adult male prison population. The Beck Depression Inventory, Hamilton Rating Scale, and four measures to assess childhood and adult ADHD were completed. The two disorders were diagnosed independently.

**Diagnosable ADHD was found to occur in 25.5 percent of the inmates, and major depression occurred in 25.5 percent of the inmates. A significant relationship between ADHD and depression was found to exist** (*p* < .001). Having identified a major mental health problem in the prison population, implications include a need for further diagnosis and treatment of these disorders within a prison setting. The relationship between depression and ADHD also needs further examination.

11. **Predictors of offending among prisoners: the role of attention-deficit hyperactivity disorder and substance use.**

*J Psychopharmacol.* 2010 Jun 17. [Epub ahead of print]
Young S, Wells J, Gudjonsson G.
King’s College London, Institute of Psychiatry.

The aim of the study was to investigate predictors of offending among prisoners from official records after controlling for age at first conviction and antisocial personality disorder. The participants were 198 Scottish prisoners, who had completed Diagnostic Statistical Manual IV screens for child and adult attention-deficit hyperactivity disorder (ADHD) symptoms and the Millon Clinical Multiaxial Inventory III for Axis I and Axis II disorders.

The **ADHD symptomatic group had significantly higher rates of total, acquisitive and violent offending than other prisoners, as well as greater regular heroin use.**
Hierarchical multiple regressions, using child and adult symptoms as dimensions, showed that frequent use of heroin in the year prior to imprisonment was the single most powerful predictor of the extent of total offending, with ADHD symptoms also adding independently to the variance in offending.

In contrast, for violent offending, ADHD symptoms were the strongest predictor followed by alcohol dependence. The findings demonstrate the importance of heroin use and ADHD symptoms in the persistence of offending.

**There is an urgent need to treat drug addiction and ADHD symptoms in order to reduce offending among the most persistent offenders. Recently, treatment programmes have been developed for adults with ADHD, heroin and crack cocaine addiction which can be applied to this population.**

12. **Interrogative suggestibility, compliance and false confessions among prisoners and their relationship with attention deficit hyperactivity disorder (ADHD) symptoms.**

Gudjonsson GH, Sigurdsson JF, Bragason OO, Newton AK, Einarsson E.
Department of Psychology, Institute of Psychiatry, London, UK. g.gudjonsson@iop.kcl.ac.uk

**BACKGROUND:** Interrogative suggestibility and compliance are important psychological
vulnerabilities during interrogation. The aim of the study was to investigate the relationship of suggestibility and compliance with childhood and current symptoms of attention deficit hyperactivity disorder (ADHD). Compliance has not been studied previously in relation to ADHD. A further aim was to investigate the relationship between ADHD and the reporting of having made a false confession to the police.

**METHOD:** The participants were 90 male prisoners, all of whom had completed the Gudjonsson Suggestibility and Compliance Scales (GSS and GCS) within 10 days of admission to the prison. Childhood ADHD symptoms were screened by the Wender Utah Rating Scale (WURS) and current adult symptoms by the DSM-IV Checklist criteria for ADHD.

**RESULTS:** Half of the prisoners (50%) were found on screening to meet criteria for ADHD in childhood and, of those, over half (60%) were either fully symptomatic or in partial remission of their symptoms. ADHD symptoms were found to be significantly associated with compliance, but not with suggestibility. The relationship with compliance was stronger (effect size) in relation to current than childhood symptoms. The ADHD symptomatic groups were significantly more likely to claim that they had made a false confession to the police in the past.

**CONCLUSIONS:** The findings raise important questions about the potential vulnerability of adults with ADHD symptoms in terms of their ability to cope with interrogation.

13. **Psychometric and psychopathological characterization of young male prison inmates with and without attention deficit/hyperactivity disorder.**


Regarding WRI and YSR/YASR we found a significant increase of emotional and internalizing problems in the ADHD group compared to delinquents without ADHD or ADHD history. **ADHD delinquents scored higher on the personality dimension neuroticism, and showed lower scores on the dimensions agreeableness and consciousness.** Using discriminant analysis, high scores on the WRI subscales disorganization and attention difficulties and NEO-FFI neuroticism were the best predictors of ADHD diagnosis.

The results support prior findings of high ADHD prevalence in prison inmates and suggest that emotional and internalizing abnormalities are prominent problems in this population.

Further studies are needed to elucidate the role of ADHD as an independent factor for life-persistent criminality, since specific treatment may help to ameliorate the legal prognosis.

14. **ADHD and correctional health care.**

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Two thirds of all felons released from state prisons are rearrested within 3 years. This appalling recidivism rate explains the intense and growing interest on the topic of desistance from crime. Yet, inexplicably, one of the major factors affecting desistance from crime and the recidivism rate has received scant attention. That factor is attention-deficit/hyperactivity disorder (ADHD).

This article establishes the widespread prevalence of ADHD in the prison system and the critical importance of identifying and treating ADHD as an essential component for any best practice models for preventing crime and reducing recidivism.

It also examines the major mechanisms whereby ADHD increases the risk for crime and recidivism.

15. ADHD and Crime: Considering the Connections CME Continuing Medical Education

From MedscapeCME Psychiatry & Mental Health
Joel L. Young, MD
CME Released: 04/12/2010; Valid for credit through 04/12/2011

Those with ADHD also have other triggers for crimes; adolescents and adults with untreated ADHD are often bored, sensation seeking, or simply impulsive, and this combination of attributes leads them to react with poor judgment. A desired item appears, they want it, so they take it.[1]

It also appears that when individuals with ADHD commit violent crimes, these acts are more likely to be crimes of spontaneous and “reactive” aggression rather than carefully plotted out offenses. Such crimes are generally impulsive acts driven by a provocation or conflict that triggers an outburst. Research with adult male offenders seems to bear out this hypothesis.[2]

Studies show that at least 25% of prisoners in the United States have ADHD. The recidivism rate among all felons is high, and an estimated two thirds are rearrested within about 3 years.[3] These statistics have important implications for society at large.

The researchers compared the rates of prescriptions for these psychiatric medications to rates of violent crimes in the United States from 1997-2004 with a statistical regression analysis.[4] They found a significant inverse correlation; that is, as prescriptions went up, violent crimes came down. As a comparison, the authors also looked at the prescription rate of statins for cholesterol treatment and found no relationship between the number of prescriptions for statins and the crime rate.

The researchers stated, “Our evidence suggests that, in particular, sales of new-generation antidepressants and stimulants used to treat ADHD are negatively associated with rates of violent crime.”


Table 1. Crime Categories for Each Group in the Milwaukee Study
A study of 320 prisoners in Iowa found that 14.3% of the female prisoners and 23.1% of the male prisoners met the diagnostic criteria for ADHD.[10]

In an analysis of 110 female offenders with ADHD in a German prison,[11] Rösler and colleagues found a 24.5% lifetime prevalence of ADHD and a 10% prevalence of persistent ADHD. The inmates with ADHD were significantly younger at their first conviction (19.2 years, compared with 27 years for the non-ADHD women). In addition, the rate of diagnosis of ADHD was higher with younger age; for example, the prevalence of ADHD was 17.9% among the female inmates ages 25 and below and fell to just 10% among inmates ages 26-45 years.[11] Why the older inmates were less symptomatic is
unclear. Perhaps they were more experienced at dealing with their symptoms.

Children and adolescents derive their self-esteem through succeeding in school and pleasing the adults around them. Children with ADHD are struggling with chronic symptoms of inattention, distractibility, hyperactivity, and impulsivity and frequently do not realize this satisfaction. They can become alienated or friendless, and to avoid this outcome, they learn that outlandish behavior can earn them the respect of their peers. To them, negative attention is more desirable than no attention whatsoever, and befriending “bad kids” is preferable to having no friends.

Punishment for impulsive and criminal actions can begin a cascade of decline. A young offender’s introduction to the juvenile justice system exposes them to increasingly troubled adolescents who can readily offer further education about wayward activities. Preventing this destructive cycle is the fundamental reason for early identification and treatment of this population.

ADHD is a significant factor relating to both crime and punishment. The condition increases the risk of committing a crime, and once the individual is incarcerated, the conundrum develops regarding appropriate treatment. Evidence suggests that proper treatment may reduce the risk for criminal behavior and the rate of recidivism among afflicted criminals.

Coherent approaches to treating youth with ADHD both in and out of the criminal justice system need to be developed. Additional study will further enlighten these difficult issues. For the present, it is important for psychiatrists to consider ADHD as a valid factor in crime and the treatment of ADHD as a potentially preventive measure against the commission of violent and nonviolent criminal acts. Resolving or improving ADHD symptoms can bring relief to the individual as well as to society at large.

4. Ask you to do something

Please tell your politicians of all levels, criminal justice system, healthcare system and the media both mainstream and social media about this clinical research between ADHD, crime, and jail.

Please demand they take stop ignoring ADHD and start committing resources to diagnosing and treating it, and running anti stigma and education campaigns on ADHD and start screening prisoners for ADHD and diagnosing and treating in prison.

People with ADHD can be very productive or very destructive and expensive members of society. It’s much cheaper to diagnose and treat us than to waste taxpayers dollars warehousing us in expensive jails.

Hopefully the BC Liberals and the BC NDP leadership candidates will read this and respond. Please let them know about this.

The BC Liberal Government closed down the only Adult ADHD clinic in BC, the BC adult ADHD clinic that was added on to the children’s BC ADHD clinic at children’s hospital. George Abbott who is now running for leader of the BC Liberals was the health minister responsible for killing the clinic at the time. Kevin Falcon was later health minister and he never reopened the clinic, Kevin is also running for Leader of the BC Liberals.
The adult clinic quickly became half their case load (more adults with ADHD than children with it) and developed a *politically embarassing* year long wait list for an entire year. They asked the govt for money to reduce the wait list and the BC Liberal govt refused, and shut the clinic down and abandoned the patients.

I asked the BC NDP health critic Adrian Dix’s office to do something about it and just got empty promises and no action at all. Adrian Dix is probably likely to announced he’s running for leadership of the BC NDP soon. The BC NDP are the ones that empties the mental hospitals in BC and said they’d “integrate them into the community”. But they didn’t, and they abandoned them to the predators of Vancouver’s downtown Eastside and homelessness.

Hopefully both parties call to reopen the BC adult ADHD clinic at an Adult hospital in Vancouver (safer from the chance of possible budget cuts/destruction down the road than at a childrens one)

Hopefully they’ll both actually **carry out the 8 policy recommendations on ADHD that the BC Medical Association asked for in their white paper on ADHD in BC**

The one where they had useful suggestions but underestimated the costs of ADHD to BC taxpayers by billions because they only counted the costs of children with ADHD and ignored the costs of adults with ADHD.

### Related Posts:

- [ADHD and Addictions 5 more Clinical Studies](#)
- [If He Outgrew It, What Is He Doing in My Prison?](#)
- [ADHD Children Have Nearly 4 x Higher Risk for Suicide Attempts and Depression](#)
- [Women and Girls with ADD are Often Undiagnosed.](#)
- [Teenage girls with ADHD have a higher risk of mental illness Harvard study shows](#)

### Comments:

**michelle miller** February 4, 2011 at

I totaly agree with you. i am a criminal justice student right now,ut also raising a young man with aspergers, adhd, ODD and a sensory issue, and i agree with this. parents need to be educated in the out come of ignoring these symptoms in your child . i had to write a paper for class this week, id like to email it to you. I used your page as a reference in my paper, please send me your email address.

**Pete Quily** February 4, 2011 at

Thanks Michelle.

pete AT addcoach4u.com
Salvatore Scarpato February 6, 2011 at

Thanks Michelle, I am also in 100% agreement with you!

Kildonan Private Dyslexia School March 7, 2011 at

Wow. It’s pretty interesting to think about the correlation of these numbers with ADHD. Great read.

Dr Charles Parker April 10, 2011 at

Pete,
This is simply an outstanding review, excellent job, needs to go into an ebook for others to reference! The big reason for all the confusion? – In medicine we are simply shooting at appearances, vapors, descriptions and still are in the dark ages regarding the practicality and easy of simply thinking about brain function.
cp

Pete Quily April 10, 2011 at

Thanks Charles,

I spent a quite a bit of time on it. That’s part of it, also a big part not enough medical professionals trained on ADHD at all. Here at UBC medical school students only get one hour in their whole training on ADHD.

Also most govt/media healthcare people don’t take adhd seriously, very few medical professional do what you do, help get the word out on ADHD in a factual non stigmatizing way, and most people with adhd often unwilling to do anything to change govt/media/healthcare/public opinion about ADHD for a variety of reasons.

Will think about an ebook

Aimee Patrick May 1, 2011 at

Hi there, I was really interested to read your article. I am an undergraduate psychology student and I am doing a summer research project in a prison on ADHD but I am not too sure yet what path to take.
In your opinion what further research now do you think is required?
Thanks
Aimee

Dr Charles Parker May 4, 2011 at

Aimee,
Take a careful look at those with ADHD and failure of current testing to identify them correctly. Testing measures provide woefully insufficient information and are quite often based upon the same weary superficial criteria as found in the DSM 4.

Point being: they have ADHD and got missed thru either not testing or thru inadequate testing –
and then you could ask about treatment the absolutely ridiculous next piece with pervasive imprecision and monitoring of stimulant meds.

cp

Michael Montegut October 12, 2011 at

Hi Pete,

This is a fascinating read. I will forward your post to my mother. I was diagnosed many years ago with ADHD. It was very hard for our whole family, but my mother was the one who held it together and helped me succeed. When things were really hard and I felt like I could not take it anymore she would continue to encourage me and help me to study and graduate. It was at these times she also acknowledged that it was hard, but she was never giving up and that she knew I could and would make it. She would often add that she just knew that half the people in prison must have ADHD, but probably did not know it or did not get the intensive support needed to make positive progress in life. Wow! She was right! I will be forwarding this post to her. Proof positive that she really understood how devastating the disorder could be.

Thanks for this detailed and research supported post.

Sincerely,

Michael Montegut

Elise-Marie Tancred November 16, 2011 at

Hi there Pete,

I was working on an article about this topic myself when I stumbled onto your article. What an outstanding piece of work. I wish each and every medical doctor, medical school, parent and teacher could read this and start taking ADHD and it’s untreated consequences seriously. I am a research psychologist and ADHD counselor – and the ignorance, especially within the medical community is mind boggling.

It seems ADHD has been hi-jacked by pharmaceutical politics, which is why we need a lot of advocating and proper scientific research data.

amy hines January 12, 2012 at

As a desperate mother of a 12 year old son w/ severe adhd, and having adhd myself, I share your feelings 100%. Would it not be easier on everyone, if the problem was treated, and the offenders are taught how to function, and counseled on how to treat adhd. They have this negative self image, and failed attempts @ living a successful life since they can remember, and unless you’re taught better, you keep living the same way. More, and more crime, and more, and more money spent to support a prison, rather than to solve the problem.

Mr ADHD April 1, 2012 at

I’ve sold hard drugs for about 6 years in Vancouver and I’ve been charged 4 times but luckily I got off everytime at trial. One day one of my customers told me he got diagnosed with ADHD and he was getting treated with adderall and was doing quite well in the bcit plumbing program. Then
I went to my doctor to seek out a psychiatrist to get diagnosed for ADHD which I always suspected I had and I’ve been diagnosed and getting medicated for it now. I am doing extremely well in school with a 3.78 gpa and I hope to transfer to ubc next year. I feel I didn’t have a choice selling coke and heroin, it seemed like the best alternative when I couldn’t write essays or do math no matter how hard I tried I couldn’t pass. I was beaten repeatedly by my father for not being able to complete my homework and excell in test all throughout high school. Teachers didn’t help either they all said I was lazy and I wasn’t even though I was smart. No one wants to hire you if you can’t read write or do math. I could only stand doing entry level jobs with no promise of a future for so long and I was failing in college repeatedly. Having ADHD isn’t simply being too full of energy or being too hyper; it having the inability to carry out everyday tasks that most people take for granted everyday. Jails and high schools should have ADHD screening policies. Not all drug addicts and criminals who have ADHD choose to live their life the way they do. They truly don’t have a choice when they can’t carry out everyday tasks that 95% of the population are able to do everyday all the time. Some People with ADHD are really brilliant but they can’t carry out their ideas. But after medication and treatment they can. It’s such a simple solution to a fixable problem that many people don’t know they have or even know its a fixable problem.

lauren September 2, 2012 at

This is a very informative article on a very serious subject that way too many people are ignorant about. I taught grade school for 26 years and have known for years that there had to be some correlation between kids with adhd and adult criminals. These children are generally unsuccessful in school and further, because of their disruptive tendencies, they keep many others from being successful in school. I have always believed that the lower third of my class that just needed a little extra support from me, would be able to improve significantly if I didn’t always have at least one and many times three or four adhd kids in my class, who would regularly disrupt the quiet seat work time, and even the lesson I was teaching. Even if I could ignore some of the outrageous behavior and keep helping a struggling student, most of the other kids in a 3rd or 4th grade class do not have the maturity to do so and would get reactive. Which effectively and predictably, stopped the attention I was trying to give the needy student. So, in a normal class of say 32 kids, I would have 10 that needed extra help on a lesson, and I might be able to get to three or four of them because of the adhd kids, who, of course, wouldn’t be doing the lesson either.

The problem I encountered year after year was ignorant parents who would base their decision not to take their child to the doctor and get medication, on misinformation, such as gossip, rumors, wives tales, anything but accurate truth from reliable sources. For years I had resources to give parents, so they could educate themselves. And, once in awhile it worked. I was always very supportive. But, many times these parents would turn on me. It got worse when we got email, because emails are so easy to use to vent. Because adhd is inherited, I would sometimes get an impulsive, reactive, blaming email from the parent who clearly also had adhd. I would frequently be accused of disliking their kid, and wanting to medicate them to make my job easier. Most of my parents refused to consider any real intervention and I got no support from the school district. I am, by no means, the Lone Ranger, here, either. All of my colleagues faced the same thing.

This situation is heartbreaking, because the children affected with adhd are just as lovable and deserving as the others. They can be talented and highly intelligent, but unable to access their gifts because of this disability. And, they pay the price for their parent’s dogmatic insistence that they are normal and don’t need help.

It is a real tragedy that they also grow up to self medicate with illegal substances and commit crimes. But, any teacher will tell you they pretty much knew what the future would hold for these kids if their conditions were continued to be ignored by uninformed parents and school districts.
Way too often, parents don’t get their first “Wake Up” call until the kid is in high school and gets picked up for getting drunk and stealing a car, although none of his teachers, starting with kindergarten would find it surprising.
And, there would be a trail of report cards that would tell the story, if anyone had been paying attention.

Alan Brown  September 29, 2012 at

Pete,

This is outstanding information and delivery. I have the opportunity to make a TEDx presentation on this topic next week. At the end of the presentation, I want to give the audience (which could be 300-600 influentials) FIVE THINGS they can do NOW or TODAY to make a difference. If you were standing before that audience, what would you ask them to do?

Thank you!
Alan Brown

Pete Quily  September 30, 2012 at

Thanks Alan,

I appreciate it. Congrats on the TEDX gig. What’s the exact topic and title of your speech? adult adhd? crime? adhd and crime? could you send me a link to a blog post or an article telling me a bit more about your speech so I could tailor the answer accordingly?

Alan Brown  September 30, 2012 at

Hi Pete, the working title is “A Declaration On Behalf of the 85%”. Here’s a link to my submission, which has gotten me to the final round of consideration for presenting before hundreds of influential people at TEDx San Diego: http://www.youtube.com/watch?v=qpJ6Kc4NFyk&feature=youtu.be

I make my final pitch this Friday and I’m told by the head of the judging committee that he thinks the thing that will determine whether I get the speaking slot is what I do with the “five things you can do RIGHT NOW” to make a difference (see the video). As I mentioned, I want that audience of 300-600 to do things like simultaneously Tweet Representative Fred Upton to push H.R. 6256 – the Recidivism Reduction Act, or send a friend who might have undiagnosed ADHD a link to a self-assessment, etc. But I want to be sure the legislative requests are accurate and up to day, and of course see if there’s something MORE dramatic we can do to get people to DO something enthusiastically!

Thanks so much for your input…
Alan

Pete Quily  October 14, 2012 at

Hi Alan,

my apologies, the post got trapped in my spam filter. Hope you got the gig
Of Course. Green Party Leader Elizabeth May's Answer to my ? Would She Support Screening Federal Prisoners For ADHD | Adult ADD Strengths
Ujjal Dosanjh Liberal MP Vancouver South Supports Screening Prisoners in Federal Jails for ADHD | Adult ADD Strengths
Hedy Fry Liberal MP For Vancouver Centre Supports Screening Prisoners in Federal Jails for ADHD | Adult ADD Strengths
Wendy Yuan Liberal Candidate Vancouver Kingsway Supports Screening Prisoners in Federal Jails for ADHD | Adult ADD Strengths
Sukh Dhaliwal Liberal MP For Newton North Delta Supports Screening Prisoners in Federal Jails for ADHD | Adult ADD Strengths
Alan Beesley Liberal candidate for Delta - Richmond East Supports Screening Prisoners in Federal Jails for ADHD | Adult ADD Strengths
Girls And Women With ADHD Have Higher Rates of Anorexia Nervosa, Here Are Some Reasons Why | Adult ADD Strengths
First Elected Politician With The Courage To Go Public With ADHD in Canada Or America. Thanks Sarah Blyth! | Adult ADD Strengths
Reefer Madness: Parenting ADHD Kids | ADHD from A to Zoë
Prison and ADHD Screening
Breaking the Silence of ADHD Stigma | World of Psychology
Advice for the Adult (and not so adult) ADHDer | Jeff's ADD Mind

Previous post: If My Physician Doesn’t Understand ADHD, How Can I Expect My Employer Or Colleagues To Understand?

Next post: It Would Take More Public Awareness
Pete Quily Adult ADHD Coach

**ADHD Books & Gadgets**

- [The Mindfulness Prescription for Adult ADHD](#)
- [The ADHD Effect on Marriage: Understand and Rebuild Your Relationship in Six Steps](#)
- [The Complete Idiot's Guide to Adult ADHD](#)
- [The Disorganized Mind: Coaching Your ADHD Brain to Take Control of Your Time, Tasks, and Talents](#)
- [ADD Friendly Ways to Organize Your Life](#)
- [You Mean I'm Not Lazy, Stupid or Crazy?!](#)
ADHD & Me. What I learned from lighting fires at the dinner table

10 Simple Solutions to Adult ADHD

No more lost keys/wallet. Keyfinder Remote

Invisible Clock II meditation Timer. Silent or Beeping

Reduce Last Minuteitis. Visual Time Timer

ADHD & The Criminal Justice System, Spinning Out of Control

Superparenting for ADD: Dr. Ed Hallowell
Do you have some of the problems I help my Adult ADHD clients with?

Visit My Adult ADHD Website ADDCoach4u

Pete Quily In The News

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Adult ADHD Screener Test

Pete's Bio

Try A Free Sample Session of Adult ADHD Coaching

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- Misc. (25)
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- What Would It Take To Go Public With ADHD? (10)

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