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## MENTAL RETARDATION AND JUVENILE DELINQUENCY A PSYCHOLOGICAL APPROACH

Some years ago an eminent American doctor <sup>1</sup> wrote, «Every feeble-minded person, especially the high-grade imbecile, is a potential criminal, needing only the proper environment and opportunity for the development and expression of his criminal tendencies... The unrecognized imbecile is the most dangerous element in the community... feeble-mindedness is the mother of crime, pauperism and degeneracy...» Few, if any social scientists today would be so dogmatic in their assertions as to such a direct relationship between mental retardation and delinquency. Inferior intelligence per se is not a cause of anti-social behavior. Nevertheless, world-wide studies have consistently shown that intelligence (or lack of it), is not only closely related to delinquency, but it also determines, to some degree, the type of crime committed by the offender. Crimes such as embezzlement, kidnapping, forgery and fraud are usually planned and attempted by more intelligent criminal minds, than those crimes involving violence, petty thieving and sex-misconduct.

One, however, must not assume that the majority of de-

linquents are of low intelligence or that all persons of low intelligence are or will be delinquents. And, one might rightly argue that the results of most studies of delinquents are biased as they are often based on spurious statistics gathered from institutional populations in reform schools and prisons, and from juvenile court records. These cases are those delinquents who have been apprehended and sentenced by the courts. It is a well known fact that magistrates tend to avoid sending intelligent delinquents or delinquents from «good» homes to prison. Also, the more intelligent offender operates in such a way as to lessen his chances of being discovered. In doing this he frequently takes advantage of his less intellectually endowed companions. Delinquents of low intelligence, once caught, are more apt to become recidivists, for the stigma of juvenile delinquency coupled with low intelligence makes social adaptation and rehabilitation an extremely difficult task. Hence, mentally retarded delinquents are proportionately more numerous in the court records. In the past it was also a common practice to label delinquents subnormal without making an objective evaluation of their intelligence. Studies based on court records before the advent of psychological tests have revealed an exaggerated proportion of mentally retarded among delinquents. However, it seems that as psychometric tools become more refined and superior research techniques are used, the percentage of mentally retarded among the delinquent becomes increasingly and conspicuously lower. Nevertheless, even present studies are not conclusive in showing the exact percentage of juvenile delinquents who are mentally retarded.

The central theme of this discussion, however, will not be to offer further evidence as to the number of juvenile delinquents who are mentally retarded, rather an attempt will be made to describe and explain the causative factors leading to delinquent behavior among the mentally retarded. The reader will appreciate that many of these operative factors are to be found among delinquents of average or above average intelligence. This is to be expected as the overall difference between the gifted, normal and subnormal is said to be one of degree rather than kind. For, whatever the percentage of mentally retarded delinquents in our society may be, it is now generally accepted that the lower the intelligence of the child, the more

difficult it will be for him to adjust himself to the demands of his environment, and consequently he is more susceptible to come into conflict with the laws of his society. It is also generally agreed that a delinquent of low intelligence has, as regards therapy and rehabilitation, a poorer prognosis than a delinquent of average or superior intelligence.

Thus, the mentally retarded juvenile delinquents present a special problem which demands specialized techniques and a comprehensive understanding of human behavior if preventive and therapeutic programs are to be effective. Limitation of space will only permit a cursory discussion of the dynamics of behavior and personality. The concerned reader will be well advised to read more deeply any chapter on Behaviour and Personality found in text books on general, abnormal or educational psychology.

At this juncture we shall, for the sake of clarity, define briefly mental retardation. No attempt will be made here to define juvenile delinquency nor describe the sociological factors leading to misconduct. Other writers contributing to this symposium will have adequately covered this and other aspects of juvenile delinquency. In general our approach will be psychological and more specifically psycho-analytical. It is not held that this is the only explanation of behavior nor is it to be understood that the writer agrees (or disagrees) with all the theories of the Freudians, rather he has found in the writings of Freud the most lucid and ingenious explanation of the dynamics of human behavior.

The term, mentally retarded, as it is used in this article is synonymous with mental subnormality<sup>2</sup>. According to the American Association of Mental Deficiency, «Mental retardation refers to subaverage general intellectual functioning which originates during the developmental period and is associated with impairment in one or more of the following: (1) maturation, (2) learning, and (3) social adjustment.» This includes all concepts such as amentia, feeble-mindedness, mental deficiency, mental subnormality, idiocy, imbecility, and moronity. It is important to remember that mental retardates are far from being a homogeneous group, as they range from the babbling idiot whose intelligence may be at the animal level, to the high-grade borderline defective who may hardly be discernible from

the normal child. The mentally retarded are not to be confused with the backward or the mentally ill, although backwardness and mental illness are often concomitant features of the mental retarded.

To understand the psychology of the subnormal's behavior, one must have some idea of the development of the personality of the normal child. Briefly, human behavior is the result of the interaction and interrelation of cognition or thinking, conation or striving and affection or feeling, as these are influenced by hereditary and environmental factors. Thus, man functions as a whole, but this does not mean that the whole is always integrated, well organized or functions smoothly. Neither does it imply that each component of the whole has an equal role in determining man's ultimate behavior. This behavior is the end-result of phylogenetic evolution and ontogenetic development, that is man's descent from animal to his ascent as a rational being. Thus, from conception the normal child will have experienced a continuous development of the cognitive, conative and affective aspects and the dynamic functions —id, ego, and super-ego— of the mind. It will be recalled that at birth the id, which roughly corresponds to conation, is the predominant force which directs the child's behavior. As the child comes in contact with his environment the id undergoes a certain modification and evolution out of which cognition and affection emerge. This emergence is called the ego which serves affective and cognitive functions, as well as modifying conation. The normal child thus evolves from an entity directed by instinctual strivings and seeking self-gratification to a rational being whose behavior will be largely determined by the extent to which his conative life or id will be subservient to his cognition or ego. It is the author's opinion that this will be largely genetically determined although adverse environmental factors, especially those affecting the fetus in utero, or the child during the formative years can seriously affect behavior. According to Freudian hypotheses, the child is also equipped with an internal moral agency by which he learns to modify and divert his instinctual urges and impulses, and to establish a system of values, morals and ethics. He therefore learns to behave rightly or wrongly according to the norms of his society. As the normal child grows physically

he grows intellectually. He becomes increasingly capable of making associations, seeing relationships, and abstract thinking. He can thus understand such concepts as bad and good, right and wrong, and learn to respect the rights of others. He learns to analyze a certain situation, deduce certain conclusions, and apply these conclusions to a similar or new situation. He learns to control or sublimate his sexual impulses and finds that deferred satisfaction is preferable to immediate gratification and more rewarding. Thus, the normal child functions as an integrated well organized whole.

The child's mental life, however, is conditioned by the anatomical structure of the brain. Physiologically the part of his central nervous system —the cerebrospinal system— influencing cognitive behavior should be functioning (and to some degree controlling) harmoniously with the autonomic system which regulates his emotions. However, when one part of the whole is adversely affected, the total personality is changed, usually in a negative direction. This is the plight of the mentally retarded whose cognitive defect affects every phase of his total development, his behavior and his overall personality. Thus, psychologically, the mentally retarded, though varying widely in degrees of intelligence and in clinical types, all have one thing in common: *an incomplete or desintegrated ego*, which prevents them from adapting themselves adequately to their environment. The failure of complete ego development is the result of an inherited inferior quality of whatever materials make up the central nervous system, and/or injury to those areas of the brain which are particularly concerned in the higher intellectual manifestations —the prefrontal, parietal and temporal lobes— aggravated by detrimental or incompatible environmental factors. From birth, the subnormal develops at a slower pace than the normal. His abnormal instinctive life, his failure to understand the complexities of his surroundings and the hostile attitude of his parents, other adults, and children, will cause severe frustration and anxiety. He steadily acquires all the psychological qualities of the juvenile delinquent.

Thus, the young subnormal arrives at puberty inadequately equipped to assume the independent role and the social demands of his society. His arrested mental development pre-

vents him from fully understanding abstract concepts such as bad and good. He cannot learn to relate similar or different things and consequently he does not benefit from past experiences. His retardation is not only in the cognitive area but extends to the conative and affective. Cognition becomes subservient to conation. The mentally retarded therefore cannot control his impulses nor sublimate his sexual desires. Continuous failure to deal with the demands of society will inevitably lead him to suffer further feelings of insecurity anxiety and aggression. If these feelings are allowed to persist, and if he remains in the community, the mentally retarded is a potential juvenile delinquent, unless he receives judicious guidance or constant supervision. A victim of his conative drives (id) the mentally retarded may seek immediate gratification without in-sight or fore-sight or care for the consequences which his slow mind cannot envisage. He accidentally or purposely commits criminal acts, and his poor motor coordination and slow reflexes enhance the chances of his being caught by the law, and thus he becomes branded a juvenile delinquent.

It is thus seen that there is a significant relationship between intelligence and delinquency, for some intelligence is required to commit any crime. However, the lower the intelligence of the subnormal the less capable he is of committing anti-social acts; hence idiots, imbeciles and low-grade morons are virtually excluded from delinquency. Juvenile delinquent subnormals will usually be those with IQ's at the border line or high-grade moron level (Binet IQ's 60-80). «Among this group a large proportion have relatively strong and well-differentiated sexual drives... (which)... will drive the feeble-minded youth into forbidden courses of action and, if prevented, will increase his tension. The usual aggressive reaction may result which, coupled with his bodily capacity to do damage and his poor self-control, may not stop short of homicide»<sup>1</sup>. This may explain the statement made earlier in this article that mentally retarded delinquents are most commonly petty offenders, violently destructive, impulsive, and sex-offenders. This is especially true of the delinquent retarded boys. Mentally retarded girls are frequently exploited by unscrupulous men and led to prostitution. It cannot be over emphasized however, that mental retardates become sex offenders not because they are over

sexed (many, in fact, are under sexed) but because of their lack of judgement, naivety and their suggestibility. Moreover, their poor intelligence and lack of social graces make normal sex relations difficult. Neither should it be felt that mental retardates have innate criminal propensities. They are, in most cases, the unfortunate victims of both an inferior heredity and environment.

In sum, the normal adolescent, when faced with a problematic situation can resort to the cognitive areas of his mind to assist him in controlling his emotions and enabling him to size up the problem, attempt its solution or seek assistance from others. But the mentally retarded adolescent in a similar situation might use or regress to the same methods of behavior that were characteristic of the level at which his intellectual and emotional growth ceased. If the problem persists and is beyond his mental capacity his thwarted attempt to solve it may bring about an imbalance between cognition and conation, and between the ego and the id, resulting in the disintegration of the ego. That is, the loss of emotional balance can stimulate instinctual impulses and destroy intellectual functioning. When this occurs the frustrated subnormal adolescent resorts to child-like behavior, seeks immediate gratification for his desires, and displays temper tantrums, violence and uncontrolled reactions. Thus, in the absence of guidance and supervision, or if permitted to remain in conflicting situations, the mentally retarded's behavior may deteriorate to such an extent that it becomes asocial, anti-social, or criminal. The disintegrated ego of the subnormal causes emotional instability which is the one psychological factor common to all juvenile delinquents. However, with proper orientation, supervision and protection, or if removed from disturbing environmental influences, most mentally retarded children, in spite of their many handicaps, adjust themselves to their surroundings and become law-abiding citizens in the community. Unfortunately, high-grade mentally retarded children generally come from sub-cultural homes. Their parents are often of low intelligence, law breakers and incapable of guiding their children. The onus of initiating a preventive and therapeutic program for these children may therefore fall on the teacher. Thus, teachers should be trained to recognize signs of abnor-

mal behavior in retarded children so as to provide them, as early as possible, with a school atmosphere which encourages social maturity and emotional stability. A coordinated program of training, rehabilitation and therapy should be carried out among other institutions in the community. However, much research is sorely needed in order to discover the proper techniques for reducing the incidence of mentally retarded children who may become juvenile delinquents.

1. DR. WALTER E. FERNALD, *Medical Superintendent of the Walter E. Fernald State School*, from "Mental Deficiency" by J. Wallin, 1956, pág. 78.

2. Many authorities (e. g. Sarason et. al.) prefer a dichotomous classification based on the presence or absence of detectable injury to the central nervous system. Where such injury is found to be the causative factor of poor intellectual performance the group is referred to as mentally defective, if no detectable injury is found the group is called mentally retarded.

3. R. F. TREDGOLD and K. SODDY, *Tredgold's Mental Deficiency*, London 1956.