

Applying Criminological Theories to Mental Health and Criminal Behavior: An Applied Learning Case Study Approach

MICHAEL D. BIRMINGHAM

Missouri Western State University

BRODIE MCALEXANDER

Missouri Western State University

Keywords: applied learning, criminology, mental health, General Strain Theory, Rational Choice Theory, depression, schizophrenia

ABSTRACT

The overlap between mental health disorders and criminal behavior is a growing area of concern in both criminology and applied practice. Depression and schizophrenia are two of the most studied disorders linked to justice involvement, yet their interaction with criminological theories is often underutilized in applied learning. This paper reframes the relationship between mental health and crime through General Strain Theory and Rational Choice Theory, presenting case-based applications for teaching, training, and professional development. Using fictionalized but research-informed case studies, we illustrate how applied learning activities can help students and practitioners connect theory to practice, improve treatment-oriented responses, and reduce reliance on incarceration for individuals with mental illness.

Mental health and crime intersect in complex ways, particularly within carceral systems where rates of psychiatric disorders far exceed those of the general population. The U.S. Department of Justice (2024) reports that 64% of jail inmates have a diagnosable mental illness, compared to 21% of adults in the general population. Depression and schizophrenia represent two of the most significant disorders implicated in criminal justice contact, each raising distinct theoretical and applied questions.

Traditional approaches often focus narrowly on symptom management or crime prevention, overlooking how mental health conditions interact with criminological theories. Applied learning strategies—especially case-based pedagogy—can bridge this gap by grounding abstract theory in practice-oriented scenarios. This approach equips students, practitioners, and justice professionals with frameworks to interpret behavior and design interventions.

THEORETICAL FRAMEWORK

General Strain Theory

General Strain Theory (Agnew, 1992) posits that individuals under chronic stress may engage in delinquency when legitimate coping strategies are unavailable. Depression intensifies the impact of strain, reducing resilience and problem-solving capacity.

Rational Choice Theory

Rational Choice Theory (Cornish & Clarke, 1986) suggests that individuals make decisions based on a cost-benefit analysis. Schizophrenia complicates rational choice because hallucinations and cognitive distortions interfere with decision-making processes.

CASE APPLICATIONS FOR APPLIED LEARNING

Case 1: Depression and Strain (Maria)

Maria, a 27-year-old woman, lost her job and was arrested for shoplifting food. Diagnosed with Major Depressive Disorder, she reported hopelessness and social isolation.

Applied analysis indicates that strains include unemployment, poverty, and prior victimization. Depression amplifies these stressors by lowering her sense of agency and coping ability. Students can apply Agnew's framework to map Maria's strains and design a reentry plan integrating therapy, housing assistance, and workforce training.

Case 2: Schizophrenia and Rational Choice (David)

David, a 34-year-old man, was arrested for trespassing while experiencing auditory hallucinations. Diagnosed with schizophrenia in early adulthood, he cycles between homelessness and short jail stays.

Rational Choice Theory assumes cost-benefit logic, but psychosis disrupts decision-making. David's choices often emerge from delusions rather than reasoned judgment. Students examine how Rational Choice Theory both applies and fails in David's case, then develop alternatives such as mental health courts,

housing support, and medication management to reduce justice involvement.

Pedagogical Implications

The use of case studies in applied learning promotes:

1. Theory-to-practice transfer: Students not only memorize theories but apply them to realistic contexts.
2. Critical thinking: Learners evaluate where theories succeed and where they fail to explain behavior.
3. Intervention design: Applied activities encourage the development of treatment and policy recommendations.
4. Empathy and professional readiness: Role-playing offenders' experiences fosters practitioner sensitivity.

DISCUSSION

The findings from prior research suggest that depression aligns closely with strain-based theories, while schizophrenia complicates rational choice models. Both conditions demonstrate how mental illness magnifies vulnerabilities to justice involvement, often through co-occurring substance use and social disadvantage.

Applied learning pedagogy allows instructors to use these theoretical tensions as teaching moments. Rather than treating theories as static explanations, case-based teaching frames them as analytical tools to guide decision-making in real-world contexts. This approach better prepares students for work in correctional, clinical, and community-based settings.

CONCLUSION

The intersection of mental health and crime requires a dual focus on theory and application. Depression and schizophrenia illustrate how different disorders map onto criminological frameworks in distinct ways, producing unique risks for justice involvement.

For applied learning, case-based teaching offers a powerful strategy to bridge abstract criminological theory with practical interventions. Students who engage with realistic scenarios develop deeper understanding, empathy, and readiness to address complex challenges at the intersection of mental health and criminal justice.

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