

Research Article

A Social Constructionist Influenced Scoping Review of Addictions, Deviance and Crime: Biopsychosocial Perspectives for the Emerging Forensic Mental Health Nursing and Healthcare Services of the Middle East

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Abstract

Background: Nurses and healthcare professionals employed within correctional and forensic mental health settings encounter unique challenges in the care of their patients due to the custodial and restrictive environments.

Regions within the Middle East, such as the United Arab Emirates and the Kingdom of Saudi Arabia have experienced exponential economic and healthcare infrastructural development recently. Mental health has been prioritized for development by recent legislation and practice developments which incorporates the development of specialist Forensic psychiatry services mediating a need for specialized nurses and allied healthcare staff. Traditionally, forensic care was provided under general services. The need to progress specialist forensic services with a focus on the multi-disciplinary staff that seeks to develop safer communities, enhanced care and supporting the criminal justice system. Within the Middle East nurses and healthcare staff are employed from generic backgrounds and must rapidly adapt to the subjectivities of how patients and themselves are impacted by power relations, discourses and criminality of which their initial training maybe insufficient.

Research Methods: The authors provide a review article that aims to provide a foundation for the nuances of forensic staff through social constructionism. The authors adopted the use of the framework of Arksey and O'Malley (2005). This enabled a systematic approach to searching the literature and creating a comprehensive foundation to guide the review. The use of a scoping review provided a better understanding of the compatibility, content, and outcomes to position the reader to the

theoretical construct that society can be seen as existing in both an objective and subjective reality. This review article seeks to create an understanding on how the former reality is brought about through the interaction of patients involved in forensic mental health services and wider society.

Discussion: The article explores addictions and associated deviant behaviours, allowing for an investigation into how nurses and healthcare practitioners in the Middle East might need to recognize the subjectivities of forensic healthcare with its fluid and dynamic constructs and how they need to practice outside dominant theories. This paper argues for preparedness of thought understood through social constructionism and demonstrates that it is envisaged that any frequently repeated action becomes cast into a pattern, which can be reproduced without much effort. The interconnectedness between the themes of addiction, deviance and crime allows for a holistic overview and therefore improved understanding for care providers. This was achieved through the bio-psycho-social model which creates an awareness of patient's addictions, deviance and their lifestyle choices.

Conclusion: Through the emergence of these complex forms of knowledge, deviance within the lives of patients can be better understood by the emerging professions employed within the emerging forensic healthcare services within the Middle East. These individuals are carefully and dutifully navigating the cultural complexities of mental illness, addictions and associated deviant behaviour.

Keywords: Forensic mental health; Scoping review; Social construction; Deviance; Addiction; crime; Biopsychosocial; Middle east

Introduction

The relationship between mental health and crime has been prioritised by the WHO as a necessity to safeguard the mental health of offenders [1]. As a theoretical and conceptual starting point, the research of Crotty stipulates that the experiencing of society as a subjective reality is achieved through a primary and a secondary process of socialisation. In adopting this approach this study explores addiction and deviance as encountered by patients needing forensic mental health care within the Middle East region. Burr stipulates that an individual's identity stems not from inside the person but from the social realm in which they inhabit [2]. In this method the study will seek to extend the findings of Berger and Luckmann's work on socialisation in that the processes are enacted upon patients through significant others such as nurses who mediate the objective reality of society, rendering it meaningful and in this way, it is internalised by the individuals (patients) [3]. Atkinson advocates that understanding an individual's life story can create meaning and this is crucially important for generic healthcare staff who maybe working within forensic settings within the region [4]. The nation is multicultural with a diverse range of languages. Burr highlights that language can hold inherent challenges for social constructionism in the accurate transmission of an individual's thoughts and feelings, but its strength lies in the in the interpretation of thought in constructing concepts [2]. This paper will demonstrate the importance of developing knowledge around forensic staff and pertinent issues and concepts can pre-empt the development needs of this service within the Middle Eastern region. The authors attempt to provide a means by which knowledge can be explored and realised by nurses and healthcare staff through structuring the way the world is experienced by patients they encounter within forensic settings and how they may then reflect on deviance and addictions. The study extrapolates the ethos of the biopsychosocial model in exploring the phenomena of those with addictions, substance misuse issues, deviance and criminality in order to create a holistic understanding [5]. In contrast to the medical model, the bio-psycho-social model of health care focuses on the patients as 'experts' of their own conditions and in the management of their lifestyles [6]. This is of importance as particularly nurses within forensic settings in the Middle East, who due to cultural and religious backgrounds may have little or no understanding on the nuanced lived experiences of patients with criminality and substance misuse needs. Furthermore, how to formulate a plan of care for these individuals to support their rehabilitation, recovery, and custodial discharge.

Research Methods

Scoping review

This study undertakes a scoping review of the relevant literature that allows for an exploration of mental health and crime that seeks to support the emergence of forensic

mental health as a necessity to safeguard the mental health of offenders and to prioritise the needs of the multi-disciplinary teams entrusted to progress forensic mental health in the Middle East.

The use of scoping reviews is advocated by Arksey and O'Malley [7]. These authors advocate for the use of a scoping review to highlight if there is a need to address broader topics where many different study designs might be applicable and whether there is a challenge in identifying a clear question. Additionally, Arksey and O'Malley explain that whereas literature and systematic reviews are predominantly concerned with providing answers to questions from a relatively narrow range of quality assessed studies, scoping reviews are less inclined to seek to address a specific research question nor, consequently, to assess the quality of included studies.

This research strategy of adopting a scoping review, rather than a systematic review allowed the authors an evidenced based approach when sourcing relevant studies that allowed for a philosophical exploration with recommendations. Arksey and O'Malley advocate that an inclusive approach should be adopted [7]. This allowed the authors to review qualitative, quantitative and randomised control trials within the scoping review. However, it became apparent that there was a challenge in sourcing a breadth of material from the Middle East and so grey literature, theory or perspectives that may have relevance to the understanding of the selected topic was applied. Table 1 provides a tabular format for the study's adherence to this framework.

Table 1: Scoping review framework-six step approach.

1	Identify the research questions
2	Identify the relevant studies
3	Study selection
4	Charting the data
5	Collating, summarising and reporting
6	Consult stakeholders and policy makers - aim: to obtain more references, provide insights on what the literature fails to highlight (optional).

The co-authors were selected as they are embedded within relevant clinical and educational positions within the region or have specialised professional backgrounds that are able to add insight into this study's explorative approach. The authors wished to create an understanding on addictions, deviance and crime with the inclusion of historical literature as well and contemporary. This formulated into the use of the biopsychosocial model to focus the finds of the scoping review. This allowed the authors to nurture perspectives and to triangulate relevance to the cultural nuances of addictions, crime and subsequent needs of forensic mental health

within the Middle East and North Africa (MENA) region. Therefore, the authors needed to extrapolate and justify a continuation and strengthening of the new paradigm shift to offer and evidence the needs to develop forensic healthcare services and strategies within the region.

Types of sources

This scoping review considered quantitative, qualitative, and mixed methods study designs for inclusion. Documents published from database inception to the present were included. If search parameters allowed, literature and study's from the date 1850 to present were included to allow for the inclusion of seminal literature. Sources were eligible only if the full text was available (e.g., documents available only as abstracts are excluded). Only sources available in English were considered for inclusion due to limited literature on forensic mental health within the region.

Study Selection

Following the search, all retrieved sources will be entered into reference management software EndNote v.8 (Clarivate Analytics, PA, USA), and duplicate references will be removed. Two reviewers will independently review titles and abstracts of all citations against the inclusion criteria to determine the relevance of the study. If the relevance of a study is unclear from the abstract, then the full article will be reviewed. Full articles of selected studies will be reviewed against the inclusion criteria independently by two reviewers. Reasons for exclusion of full-text papers that do not meet the inclusion criteria will be recorded and reported in the scoping review. Any disagreements that arise between the reviewers at each stage of the selection process will be resolved through discussion or with a third reviewer.

Data extraction

This research strategy of adopting the scoping review of Arksey and O'Malley [7]. This model of scoping review supports an inclusive approach allowing for both the sourced literature and insights from the authors. This allowed the authors to review qualitative, quantitative and randomised control trials within the scoping review and assess relevance to the cultural and societal needs of the region. This was of benefit as there was a challenge in sourcing seminal work on forensic mental health within the region and so contextualizing the subject matter with reference to the historical text on addictions, crime and deviance was the approach adopted to create an understanding for the nursing and healthcare workforce.

Objective and review question

The author's rationale for conducting a scoping review was to provide a methodology for determining the state of the evidence on the selected topic, this is especially useful when issues require clarification before empirical further studies are undertaken. Therefore, the purpose of this study is to adopt Arksey and O'Malley's scoping review methodology was to explore addictions and deviance through the

holistic overview of the biopsychosocial approach.

What is the extent and nature of published literature that will assist in a biopsychosocial overview of addiction and deviance that will empower a dialogue of the emerging forensic mental health services of the Middle East.

This review paper was conducted to aid in the on-going dialogue for policy makers to consider when seeking to enhance forensic client-centered frameworks and to examine the training needs of an emerging specialised service focusing on the juxtaposing interplay between mental health and that of criminology.

Methods

Methodological frameworks: Creating a perspective

Constructionism in this study refers to two forms of understanding; that it is both the meaning-making activity of the individual mind and the collective generation and transmission of meaning in society as described by Crotty [8]. Crotty's interpretation was chosen as he claims that meanings are constructed by human beings as they participate in the world they are interpreting [8]. This approach of social constructionism is based on the studies of Berger and Luckmann [9], in which all knowledge is socially constructed, including our knowledge of what is real. The landmark contribution to social constructionism by Berger and Luckmann was recognised through their works within 'The Social Construction of Reality' [8]. This epistemological approach was first attached to the work of Immanuel Kant and this understanding of social constructionism was utilised by the notable sociologists of the Chicago Tradition such as Mead [9]. The authors, adopt Crotty's approach, evident within his earlier work as it explains that social constructionism creates an awareness that humans (patients) in some respects construct the reality they perceive [10]. This is of importance to this study which seeks to create an understanding of the lived experiences of the patients within forensic services and how they may interpret their world and consequently how their nurses can create meaning about that reality. Therefore, a constructionist approach asserts that concepts are constructed rather than discovered and argue that they correspond to a reality within society [11]. Berger and Luckmann highlight the subtle realism that reality is socially defined but that this reality relates to the subjective experience of individuals interaction with ordinary life and how they make meaning of the world rather than to the objective reality of the natural world [3]. This is of crucial importance for the emerging health and social care forensic workforce in the Middle East in exploring perceptions on the offending behaviour of the patients. Articulating this concern, Steedman believes that the very nature of being human and our attempts to come to an understanding of what this means provides the essence of our need to pursue knowledge, as opposed to scientific inquiry [12]. This paper adopts social constructionism into its exploration as there is a need for the nurses and healthcare staff within the forensic settings within the identified region to

understand deviance and addictions and how their patients define their reality and how they perceive it. This article is therefore concerned with the nature and construction of knowledge on the issue of addictions and the relationship with deviance and how this emerging knowledge can have significance towards forensic services in the MENA region.

Steedman emphasises that social constructionism is unconcerned with ontological questions, or questions of causation [12]. This study argues that both forms of understanding are relevant and necessary to nurses and healthcare staff as their patients' experiences can be seen as constructions of an individual nature and constructions that have arisen from engrained political, cultural and societal influences that have impacted their lives and influenced their maladaptive behaviour. Consequently, creating addiction and the presence of deviance and crime as either a causality or subsequent feature within the lives of the patients. Lincoln argues that constructionism focuses on the point that humans are social beings who interact with two realities; a physical and temporal reality and an enacted and constructed reality [13]. In reference to forensic patients, identified as addicts and deviants these definitions suggest that their experiences can be understood on at least two levels by their nurses and the multidisciplinary team. Firstly, at the physical and temporal level of reality, the 'addict' is an ontological reality that impacts significantly on the patients experience of society (Klotz, 2004). In relation to Lincoln's first reality the research by Lantman-De Valk, Metsemakers, Haveman, and Crebolder indicates that an awareness of their lives can be constructed through gaining knowledge of how they are shaped by their substance misuse experiences which sets them apart or identifies them as different from the rest of a society in which these practices are not accepted or tolerated by the population [14]. Lincoln explains that these factors (addictions and substance misuse) in a patient's life may prove challenging to explain solely in a socially, culturally and politically constructed term [13]. Therefore Lincoln's second reality is relevant to this study as it explores the enacted and constructed level of reality that the patients within forensic settings experience and becomes part of a social categorisation system that is based on dichotomies of identity, before their addiction and importantly for recovery and discharge, after their illicit substance misuse. This is supported by Gallagher who articulates the point that constructions are socially, culturally and politically embedded and can change in different contexts and at a given historical moment [15]. This will be evidenced and explored further within the discussion section on causality and relationship between addictions, deviance and crime. Crotty urges caution in that constructionism should be used to reify people (patients) as objects by their offending behaviour as would be the case in the lives of the patients [8]. Instead, nurses and healthcare staff may need to consider that a reality may exist beyond the way that an individual (addict) makes sense of the ways that they actually are. In creating an awareness of this through Lincoln's belief that constructionism can create a focus on the two realities that

the patient (addict) within the study provides an insight into these realities. This will be an important feature to be explored within subsequent sections [13].

Crotty stipulates that the experiencing of society as a subjective reality is achieved through a primary and a secondary process of socialisation [8]. In adopting this approach this paper explores the addicts, deviants' identity as constructed by society. Burr stipulates that an individual's identity stems not from inside the person but from the social realm in which they inhabit [2]. This is of importance for this study which examines societies perception of the addict engaged in deviance and crime and how understanding can be created through this methodological process for the multi-disciplinary professions within the Middle East.

In this approach the study will seek to extend the findings of Berger and Luckmann's work on socialisation in that the processes is enacted upon the patients through significant others who mediate the objective reality of society, rendering it meaningful and in this way it is internalised by the patients with addictions and substance misuse issues. According to Plummer this point is stressed in that the observers (nurse and wider healthcare practitioners) provides guidance [16], it is the patients voice that determines the frame of reference for their story and the interactions between the individual and social world. For a culturally diverse multidisciplinary workforce there is a need to conceptualise the relationship and understanding between criminality, deviance, and addictions through a conceptually understood model to progress their skill set and understanding of forensic care needs within the MENA region.

Discussion

Criminality, deviant behaviour and addictions: Biological causes

To perpetuate understanding the paper continues with a deliberation on why individuals appear to be drawn into a criminal act with the presence of addictions and substance misuse being a causality. The authors will explore the causes of criminal behaviour and relate these to the literature on offending and the relationship with addictions and substance misuse. Within the available literature, the causes of criminal behaviour are systematically divided into biological, psychological, cognitive, socio-economic and political explanations. In addition to these fields the authors believed that there was a need to integrate the criminogenic factors into a holistic overview prior to exploring the relationship between addiction, deviance and crime from the theory and practice relevant to the care of patients within forensic services.

Criminality, deviant behaviour and addictions: Causation

Conklin proposes that offenders differ from non-offenders in a physiological and anatomical level [17], and therefore attributes crime to individual traits and factors. Indeed, this

is relevant to patients with a pre-existing tendency towards criminal activity prior to addictions and substance misuse becoming a feature within their life. There are a number of early theories e.g., Lombroso's theory of atavism [18], and Conklin's theory of somatypes that held that criminals were of a substandard breed, far removed from law abiding members of the public because of hereditary or genetic defective composition inclusive of a propensity towards addictions and substance misuse behaviours [19].

There has been some progression from these early theories and an inclination to not just categorise individuals as inherently substandard but rather to look for intraindividual causes of criminal behaviour and addictions. Barlow and Durand reviewed research on family [20], twin and adoption studies and suggested that there was a genetic influence on criminal behaviour but that the combination of gene-environmental interaction was more plausible as genetic factors only influenced crime causation in the presence of certain environment influences such as addictions and substance misuse. Barlow and Durand theorised that in individuals showing abnormally low levels (under-arousal hypothesis) of cortical arousal might cause individuals to engage in stimulation-seeking behaviours such as gambling and or substance misuse in order to reduce perceived boredom [20]. Bird explains that many individuals who engage in inappropriate behaviour which leads them into contact with the judicial system appear to have a natural inclination towards risk taking behaviour [21]. Barlow and Durand propose the fearlessness hypothesis [20], which holds that individuals diagnosed with personality disorders often have difficulty in associating certain cues or signs with impending punishment or danger, therefore preventing them from developing an adequate capacity for impulse control which can be a feature within the profile of patients being cared for within forensic services with addictions and substance misuse issues.

Furthermore, Conklin highlights the fact that within the research offenders appear to have lower levels of monoamine oxidase which in turn has been linked to extreme impulsivity [17], sensation seeking, childhood hyperactivity, poor academic performance and high rates of alcohol and substance misuse which have all been linked to criminality. Within the female offending population, a study by Conklin found that the criminal activity was more likely to occur during the four days before and four days during the menstruation cycle [17]. The nurse's and healthcare practitioners awareness of these biological factors will assist in enhanced care provision and support holistic care when examined in collaboration with psychological and cognitive causes.

Criminality, deviant behaviour and addictions: Psychological and cognitive causes

Drake, Muncie and Westmarland highlight the point that psychological explanations have to some extent replaced biological explanations of criminality during and after the

20th century [21]. They believe that the current overview of those engaged in deviant behaviour associated with substance misuse as being psychologically unbalanced, has brought about the present philosophical shift of rehabilitation through the use of talking therapies. Brookman, et al., discuss this progression towards psychological explanations linked to the emergence of the psychoanalytical perspective [23], that is to say that individuals are regarded as antisocial by nature and therefore in need of socialisation to avoid further addiction and substance misuse behaviour. From a psychoanalytical perspective, Becker believes deviance and unlawful behaviour such as use of illegal substances can be viewed as a result of faulty or inadequate socialisation [24], which could be solved through psychological treatment rather than direct involvement of the judicial system who could be viewed as an agent of social control, albeit provided to ensure the immediate safety of society.

In the past, psychological causes of deviance and criminal behaviour were believed to be located intra-individually in the form of defective development, low intelligence and psychopathology, and was therefore seen as unrelated to the individual's environment. Researchers such as Hudson and Steinberg noted that the psychological effects of inter-individual factors such as themes noted within this study of unemployment, poverty [25,26], one parent families, sexual abuse, child-hood abuse and neglect, childhood violence, and dysfunctional family relations were possible causes of criminogenic factors associated with substance issue within the life stories. Hernstein and Murray put forward their opinion that this change in the view of the possible reasons of psychological causes of crime have led to the development of the mental deficiency theory [27].

The mental deficiency theory identifies offenders as having a generally lower intelligent quotient and that as a result, they are unable to appreciate the reasons for the existence of the law, and the consequences of their actions, or are unable or unwilling to control their actions [17]. Similarly, this theory has drawn criticism by Cullen who found that the effects of intelligence on deviance and crime was insignificant and further criticised the mental deficiency theory for ignoring white collar crime completely [28]. However, Hirschi's Control theory [15], supports the belief that psychological factors cannot be viewed in isolation from interpersonal factors. Hirschi's Control theory supports evidence that proposes that individuals who engage with illicit use of alcohol and drugs lack the intimate attachments, aspirations and moral beliefs that connect law-abiding individuals to a conventional way of life [17].

Specifically relevant to this research, is the suggestion by Conklin that involvement in addictions and substance misuse can create a social stigma which weakens social bonds [17]. This is highly relevant within the Middle East where criminal activity, addictions and substance misuse will have stigma and associated shame for the perpetrators. In

addition to this point Hirchi's Control theory maintains that maladaptive peer relationships in childhood have been linked to later deviance and this study would suggest links to the use of substances leading to criminality [17].

Researchers have, as yet not been able to demonstrate conclusive evidence linking personality characteristics to criminal behaviour, despite the fact that a great number of studies have initially shown tenuous links to various traits [17]. Tittle (1985) maintains that there are various conditions such as coming from a single parent family, having a diagnosis of a personality disorder and being susceptible to peer pressure, may result in interpersonal insecurity, which therefore may predispose an individual to deviant and criminal activity. Conklin explains that there has long been an identified link between criminal behaviour and traits such as low frustration threshold [17], high levels of aggression, and an inability to delay gratification. Research undertaken by Barlow and Durand add that impulsivity [20], defiance, resentment, absence of feelings of remorse or guilt, indifference to the concerns of others, inability to establish and maintain close interpersonal traits, and inability to learn from experience, are the typical traits of the psychopathic personality disorder. Furthermore, Barlow and Durand claim that many individuals with a personality disorder are at greatly elevated levels of risk for criminal behaviours such as associations with drug use [20]. These researchers suggest that the difference between these individuals diagnosed with personality disorder who become criminals and those who do not is one of intelligence. Carson et. al., highlights research on differences in the quality of socialisation in non-offenders, first offenders, and repeat offenders, finding the repeat offenders are the most poorly socialised [29]. Related to this issue is Rubington and Weinberg's proposition that the development of a deviant personality is influenced by the response of other people to the alleged deviant act [30]. The authors of this article would theorise that depending on the identity of the persons responding, approval and disapproval of the act may either facilitate or inhibit the development of the deviant personality, as a function of inclusion in or exclusion from a substance user or group associated with addictions. The authors urge awareness that stigma and shame emanating from a deviant or criminal behaviour associated with illegal substances could provide a "family", with a community based on shared beliefs, experiences, and support socialising albeit that the actions maybe deviant in nature and against the rules imposed by society. This factor would mean that detecting and diverting individuals with addiction and substance misuse behaviours away from judicial and forensic services could become problematic. A solution could be patients undertaking corrective actions through restorative actions found within peer support that utilises shared experiences. Campbell and Leaver state that peer support between individuals can aid them to be more empowered against the distractions caused by stress and coping with substance abuse [31]. This was similarly a feature within the lead authors earlier research on the benefits of peer support with those of a shared iden-

tity and life experiences [32-36].

In the 1970's research by Yochelson and Samenow identified criminal thought patterns that were supposedly responsible for criminal behaviour [37], and this research had similarities to the work undertaken by Walters and White (1989) claim that faulty and irrational thinking characterises lifestyle criminals. Barlow and Durand believed that individuals with a mental disorder such as substance misuse or addiction [20], could process reward and punishment differently to individuals without this diagnosis in that they are less likely to be deterred from a goal by the lack of reward or the likelihood of punishment. These researchers believed that by utilising the Gray's model of brain functioning it was possible to stipulate that individuals with a mental deficiency could have genetically inherited weak behaviour inhibition systems and overactive reward systems [20]. This explanation, if assimilated by the emerging forensic workforce aids in informing why the individuals become engaged in addictions and substance misuse leading to criminality.

Criminality, deviant behaviour and addictions: Political and socio-economic causes

In exploring social structures as a cause of criminal behaviour a researcher named Merton created his theory of anomie which suggested that normlessness occurs when social structures prevent individuals from reaching culturally approved goals through institutionalised means [38], consequently the individual may resort to violations of the law to reach their goals which society which they consider to be desirable.

Agnew developed a general strain theory, which holds that there are various sources of strain that cause crime [19]. Agnew proposed that the actual or anticipated failure to achieve positively valued goals, actual or anticipated removal of positively valued stimuli, and actual or anticipated presentation of negative stimuli. Therefore, this may be seen as three measures of strain that may cause criminal behaviour depending on the magnitude, recency, duration and clustering of stressful events. Agnew believed that the impact of strain is influenced by individual adaptability as well as factors such as temperament, intelligence, interpersonal skills, self-efficacy, association with delinquent peers, and conventional social support [19]. Agnew's theory is of specific value to the understanding of the relatedness of addictions, deviance and crime as it provides an opportunity to explore the factors underlying addict perpetrator crime [19]. It is hypothesised that the strains of 'actual or anticipated removal of positively valued stimuli' (e.g. social standing) and 'actual or anticipated presentation of negative stimuli' (e.g. addict, drug user). This experience of such strain experienced by patients in forensic services may precipitate a link between crimes committed by those with addiction and substance misuse needs.

Carson, et al., state that historically [29], societies that ex-

perience periods of extensive unemployment, observe an increase in crime. Conklin believed that there was a complex connection between unemployment and crime as some crimes could only occur as a result of opportunities found whilst in employment, whereas other crime occurs because of being unemployed [17]. The current global downturn may be a contributing to crimes committed due to addictions and substance misuse and may be an indicator within risk assessments that clinical practitioners may observe within forensic services. This feature mirrors research undertaken by Conklin who explains that steady employment tends to give people a stake in society, which they do not wish to jeopardise by committing crime [17]. Conklin theorised that relative deprivation is an important issue in the causation of crime [17]. As Conklin states, resentment of poverty is more common among the poor in a wealthy nation than among people in a poor nation. It is therefore the perception of an unfair distribution of wealth rather than the person's actual level of poverty that can cause violations of the law [17].

This early work by Glaser provides further insight in explaining that although an individual may initially violate a law by chance or out of ignorance, the social labelling, devaluing and stigmatisation of the individual may cause the deviant aspects of the individual's behaviour to be overemphasised. Nurses and healthcare workers within Middle East's forensic services need to be aware of this of this overemphasis as it may cause changes in patient's self-concept, leading to feelings of unworthiness and hostility towards others in society. A consequence of the labelling may be the attributing factor that observed continued criminal behaviour for the addict/substance misuser, associated with a subculture of labelled individuals, and a limitation of opportunities for success through the perceived short-term misplaced benefits of crime. Relating to the work of Werdmolder. it is possible to ascertain that for those patients that healthcare workers in the Middle East may encounter, feelings of rejection may be an indication that they have less ties to conventional institutions and that this marginalisation could lead to increasingly inadequate socialisation as the label of addict and substance abuser become engrained within their self-image.

Conclusion

The study's research question was reached through the adoption of a scoping review and a constructionist epistemology to create an understanding around addictions and substance misusers' experiences and relationship with deviance and crime. The authors argue that a general theory on the relatedness of deviance, crime, addictions and substance misuse is problematic, as there is considerable variation in both human behaviour and the environment to expect one theory to be applicable in all instances and across multiple cultures. However, the authors also contend that it is indeed possible to construct a general theory on the causation of this interrelatedness for the training of

nurses and healthcare practitioners, as different phenomena relating to the relationship may be included within a theoretical commonality so that what appears to be different causes may be expressions of a common casual relatable theme. This paper articulates that the relationship between deviance, crime and addictions should not be simplified into mere casual observations. Rather, the development of a conceptual framework for rehabilitation of this offender group with significant health needs should be based on formulated theory, for the betterment of patients receiving care.

The societal needs underlying criminal behaviour related to addictions must also be fully understood to ensure that they are met in rehabilitation and ultimately prevention. The study has explored the theoretical causality of deviance and crime as it related to addictions taking inspiration from biopsychosocial model [5], which considered all the factors which contribute to illness, rather than giving primacy to biological factors alone and this will enhance the healthcare workforce's ability to understand the patients experiences of disrupted well-being, as it relates to addictions. These findings assist in developing further understanding on a challenging sub-group within the region. If the patients (offenders) with addiction and substance misuse needs are respected as even partially competent agents of their own lives when afforded adequate access to information and resources, it becomes possible to provide a framework in which they can consider their personal and social reasons for acting unlawfully and be assisted in finding ways to overcome their forensic healthcare needs and to eventually contribute positively to society.

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Conflicts of Interests

Authors have no conflict of interest to declare.

Authors' contributions

RM Conceptualisation, all authors writing, editing.

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