

**Demographic, Economic and Social Characteristics of  
Psychopaths in Aleppo City  
(Case Study of Ibn Khaldoun Psychiatric Hospital)<sup>1</sup>**

**Abdullah Ktaish\*, Amira Obedo\* \***

\* Postgraduate student (PhD), Department of Statistics and  
Information Systems, Faculty of Economics, University of Aleppo

\* \* Professor, Department of Statistics and Information Systems,  
Faculty of Economics, University of Aleppo

**Abstract**

This research aims to study the demographic, economic and social characteristics of patients with mental illnesses in Ibn Khaldoun Psychiatric Hospital in Aleppo city through the study of descriptive statistics for patients residing in the center, for the period of time covered by the study from 2019 to 2021. The researcher found that males, young people and married people as demographic factors are more susceptible to various mental illnesses, and the low economic level and work in the service and industrial fields as economic factors may be one of the contributing factors to the spread of mental illnesses, and the low level of education and residence in the city and displacement due to war and the low number of children as social factors may be one of the contributing factors to the spread of mental illnesses.

**Keywords:** mental health, mental illness.

---

<sup>1</sup>The General Authority of Ibn Khaldoun Hospital, a psychiatric and mental health hospital, located in the countryside of Aleppo, Duweirneh village.

**Introduction:**

Mental illness is one of the diseases that most societies suffer from according to their different cultures and economic and social conditions. Undoubtedly, disturbances, wars and disasters of various nature adversely affect the physical and psychological health of the population. As we know, the Syrian society has experienced a new and different reality than the situation less than a decade ago. The crisis has formed a negative reality at all levels, socially, psychologically, economically and culturally. In addition, the war detachments of displacement and exposure to war and fighting may have caused a range of disorders that significantly affected mental health and may have increased the number of patients with mental illnesses. Since the city of Aleppo has a large share of the crisis and its detachments over several years, which prompted the researcher to study psychiatric diseases in Aleppo by visiting Ibn Khaldoun Psychiatric Hospital to find out the demographic, economic and social characteristics of the patients residing in the hospital

**Research problem:**

The problem of research is the increase in the number of people suffering from various types of mental illnesses in the city of Aleppo in recent years, which has a significant negative impact on the affected individual, his family and his community.

Thus, the research problem can be summarized in the following question:

How to depict the reality of mental illnesses in the city of Aleppo during the studied period, and what are the demographic, economic and social characteristics of patients.

**The importance of the research:**

The importance of the research stems from the fact that it will address a vital topic that has not been the focus of previous studies, which is the study of the demographic, economic and social characteristics of psychiatric patients in the city of Aleppo, which enables the population in the city of Aleppo to benefit from its results in the prevention of these diseases in the future.

**Research Objective:**

The research aims to depict the reality of mental illnesses in Ibn Khaldoun Hospital in Aleppo, and to show the demographic, economic and social characteristics of patients.

**Theoretical Section:****- The concept of mental health:**

Mental health according to the World Health Organization is the well-being and physical, psychological and social adequacy and is not just the absence of disorder, as it represents a set of manifestations of behavior that the individual exhibits, including a sense of self-satisfaction and the ability to appreciate others, courage, spontaneity, honesty in arrangement, good treatment, fear of the future, and the exchange of love and respect for oneself [1].

**- The concept of mental illness:**

About 450 million people suffer from mental and behavioral disorders around the world, where a quarter of humans suffer from one or more of these disorders at some point in their lives. Half of the causes leading to disability and premature death in the world result from psychological disorders. [2] Psychological diseases are a group of deviations that do not result from physical or organic imbalance or damage to the brain, even if their symptoms are physical. These deviations take a variety of manifestations, the most important of which are psychological tension, depression, anxiety, obsession, involuntary coercive acts, and a feeling of weakness of determination and inability to achieve the goals, fears and black ideas that besiege the individual in his wakefulness, making him distracted to Bal and in sleep, making him insomnia that does not know sleep to his stomach [3].

**Practical Section (Field Study):**

In this section, the researcher discusses the definition of the Ibn Khaldoun Center for Psychiatric Diseases and then the research form submitted to the Ibn Khaldoun Center for Psychiatric Diseases to obtain the data. Then, we learn about the characteristics of the patients in the research sample through the submitted form.

**- Introducing Ibn Khaldoun Hospital**

The MentalHealth Hospital in Aleppo was established in 1953 from three blocks , which is now known as:

Old ward: contains patients less calm psychologically.

Precautionary ward: It includes patients sentenced by the judiciary to be placed in a precautionary shelter.

Women's ward: It consists of two ground floors that used to house the administration and the upper one includes women patients.

The ground floor was used for the quieter patients after the administration moved to the new ward.

The researcher went to Ibn Khaldoun Hospital in the village of Al-Duwairina in the countryside of Aleppo and met with the director of the hospital, Dr. PsaM. Hayek, who showed unparalleled cooperation with the researcher.

After studying the reality of the hospital and the lack of sufficient data for the research, and after the researcher met with a number of patients, work was done to create a research form in order to obtain the required data.

- **Search Form**

The research form included 20 questions divided as follows:

First: The pathological characteristics of psychiatric patients: This section includes the type of disease and the patient's condition.

Second: Demographic characteristics of psychopaths: age, sex, place of birth and marital status.

Third: The economic characteristics of psychopaths: The situation of employment or unemployment, the level of income, the number of children, the level of dependency and access to any assistance in addition to the adequacy of food)

Fourth: The social characteristics of psychiatric patients: They included the level of education, place of residence and the situation of displacement, although the patient usually suffers from psychological pressure.

The research form included 146 patients out of 225 inpatients at Ibn Khaldoun Hospital, accounting for about 65% of patients, where data were collected over the years 2019-2020-2021.

Below we will review the data contained in the research form provided as follows.

**First: The pathological characteristics of psychiatric patients:**

We will review the data related to the information about the disease, as the form provided to patients showed the following data.

**Table (1): Pathological Characteristics of Psychiatric Patients**

Variable	groups	frequencies	Percentage %
<b>The type of mental illness the patient suffers from</b>	Mental disability	10	6.849%
	dejection,	36	24.658%
	worried,	19	13.014%
	Schizophrenia	64	43.836%
	I can recognize	1	0.006%
	Dipole	13	8.904%
	schizophrenia	1	0.006%
	Psychotic attack	1	0.006%
	OCD.	1	0.006%
	<b>Total</b>	<b>146</b>	<b>100.00%</b>
<b>Did the patient have any aggressive behaviors towards others?</b>	- No. None.	31	21.233%
	Sometimes from	94	64.384%
	Yes, and always.	21	14.384%
	<b>Total</b>	<b>146</b>	<b>100.00%</b>
<b>Did the patient have any suicide attempts?</b>	- No. None.	61	41.781%
	Sometimes from	72	49.315%
	Yes, and always.	13	8.904%
	<b>Total</b>	<b>146</b>	<b>100.00%</b>
<b>Is it possible to completely heal the patient and return to normal life?</b>	- No. None.	40	27.397%
	Maybe	91	62.329%
	Yeah, for sure.	15	10.274%
	<b>Total</b>	<b>146</b>	<b>100.00%</b>

Source: Prepared by the researcher, based on the questionnaire provided.

❖ **The type of mental illness the patient suffers from**

The previous table No. (1) shows that the most prevalent disease is schizophrenia with 64 patients out of the total number of sample members, followed by depression with 36 patients and then anxiety with 19 patients, then the rest of the bipolar diseases come with 13 patients and then intellectual disability with 10 patients followed by other types of mental illnesses (PTSD - schizophrenia - psychotic attack - obsessive-compulsive disorder) with only one patient out of the total study sample. The diseases (schizophrenia - depression - anxiety) are the most prevalent among the psychiatric diseases in the

study sample with a total of 119 patients and more than 80% of the total sample size.

❖ **Did the patient have any aggressive behaviors towards others?**

The previous table No. (1) shows that the number of patients who have permanently aggressive behaviors is 21 patients, while 94 patients have a tendency to such behaviors from time to time, while 31 psychiatric patients do not have any aggressive behaviors towards others. The tendency for aggressive behavior from time to time and yes permanently amounted to 115 patients and about 79% of the total sample size. That is, out of every 10 psychopaths, about 8 patients have a tendency to behave aggressively. This high percentage may give an indication that psychopaths in general are prone to violence against others.

❖ **Did the patient have any suicide attempts?**

The previous table (1) shows that the number of patients who have suicide attempts is 13 patients while 72 patients have a tendency to such attempts while 61 psychiatric patients have no suicide attempts. The tendency to commit suicide is sometimes from time to time, yes, and permanently reached 85 patients, exceeding 58% of the total sample size, that is, out of every 10 psychiatric patients, about 6 patients have attempted suicide. This percentage is considered high and may give an indication that mental illness may lead the patient to suicide by more than 58%.

❖ **Is it possible to completely heal the patient and return to normal life?**

The previous table (1) shows that the number of patients who can fully recover from mental illness is only 15 patients, while 91 patients have the possibility of recovery from the disease, while 40 psychiatric patients have no possibility of recovery at all. The number of patients who cannot be cured of mental illness is 40, which is more than 27% of the sample size, while only 15 patients with 10% can be cured for sure. These data give an indication that mental illnesses of various kinds are serious and difficult to cure.

**Second: Demographic Characteristics of Psychiatric Patients:**

We will review the demographic characteristics of psychiatric patients, as the form provided to patients showed the following data.

**Table (2): Demographic Characteristics of Psychiatric Patients**

<b>variable</b>	<b>Groups</b>	<b>frequencies</b>	<b>Percentage %</b>
<b>Gender</b>	Male	85	58.22%
	Female	61	41.78%
	<b>Total</b>	<b>146</b>	<b>100.00%</b>
<b>Age</b>	18-33 years	47	32.19%
	34-49 years	70	47.95%
	50-65 years	26	17.81%
	66 years and over	3	2.05%
	<b>Total</b>	<b>146</b>	<b>100.00%</b>
<b>Marital Status</b>	Single	33	22.60%
	Married	55	37.67%
	Widowed	27	18.49%
	liberator, divorcee	31	21.23%
	<b>Total</b>	<b>146</b>	<b>100.00%</b>

**Source:** Prepared by the researcher, based on the questionnaire provided.

❖ **Patient Gender Study Sample:**

The previous table No. (2) shows that the number of males is 85 patients compared to 61 female patients.

The number of males is 85 patients with more than 58% of the sample size, while the number of females is 61 patients with about 42%. These data may give an indication that males are more likely to develop mental illness than women.

❖ **Age Group of Patients Sample Study**

The previous table No. (2) shows that the number of patients in the first age group less than 34 years old reached 47 patients, representing more than 32% of the sample size, while the number of patients in the second age group less than 50 years old reached 70 patients, representing more than 47% of the sample size, that is, the two groups combined accounted for more than 80% of the sample size, which is a very high percentage, which indicates that psychological

diseases were not limited to the elderly category only, but the young group, especially in the early age group.

❖ **Marital Status of Patients Study Sample**

The above table shows that there are 33 single patients, 55 married patients, 31 divorced patients and 27 widows. The number of married people is 55 patients, which exceeds 37% of the sample size. That is, out of every 100 psychiatric patients, 37 are married. These data may give an indication that married couples are more likely to develop mental illness than single, divorced and widowed couples.

**By studying the demographic characteristics of psychopaths, we found that:**

Males are more susceptible to various mental illnesses than females, and mental illnesses were predominant in the youth category, and married people are more susceptible to mental illness than the rest of the social groups. The researcher believes that this may be due to the fact that young married males are more vulnerable to the pressures of different lives than females, especially with regard to difficult life conditions, which are increasingly complex and continuous, such as providing the needs and requirements of the family, which men are often responsible for this task, which may lead to the incidence of various mental illnesses.

**Fourth: Economic Characteristics of Psychiatric Patients:**

We will review the economic determinants of psychiatric patients, as the form provided to patients showed the following data.

**Table (4): Economic Characteristics of Psychiatric Patients**

<b>Variable</b>	<b>groups</b>	<b>frequencies</b>	<b>Percentage %</b>
<b>Unemployment and employment</b>	at a loose end	44	30.14%
	Working	102	69.86%
	<b>Total</b>	<b>146</b>	<b>100.00%</b>
<b>Scope of Work</b>	Classification	39	38.24%
	Agricultural	16	15.69%
	Industry	33	32.35%
	Business Landscape	14	13.73%
	<b>Total</b>	<b>102</b>	<b>70.00%</b>



<b>The nature of the relationship with work</b>	I work for others for	73	71.57%
	I'm the employer.	29	28.43%
	<b>Total</b>	<b>102</b>	<b>70.00%</b>
<b>Income Level</b>	LOW	125	85.62%
	Moderate	14	9.59%
	High	7	4.79%
	<b>Total</b>	<b>146</b>	<b>100.00%</b>

Source: Prepared by the researcher, based on the questionnaire provided.

❖ **Unemployment and employment of study sample patients.**

The previous table No. (4) shows that the number of unemployed patients is 44 patients, while there were 102 patients who had work. The number of unemployed patients was 44 out of 146 patients, which is about 30% of the sample size, while the rest of the sample were working about 70%. That is, out of every 10 psychopaths, 3 are unemployed and unemployed. The above may give an indication that unemployment may increase the likelihood of mental illness.

❖ **The income level of the study sample patients.**

The previous table No. (4) shows that the number of low-income patients is 125 patients, while we had 14 middle-income patients, while 7 patients had a high income level. The number of low-income patients is 125 out of 146 patients, which constitutes more than 85% of the sample size, while the number of high-income patients is only 7 patients, with only about 5%. This gives an indication that the level of income of the individual may be low, with the concomitant feeling of malaise, weakness and living pressures that may increase the likelihood of a person suffering from mental illness.

❖ **Field of work of the patients in the study sample**

After excluding 44 unemployed, the previous table No. (4) shows that the number of patients working in the service field is 39 patients out of 102, while there were 33 patients working in the industrial field compared to 16 patients working in the agricultural field while there were 14 patients working in the commercial field. The number of patients working in the service field is 39 patients out of 102 patients, which constitutes about 38% of the sample size, while the number of patients working in the industrial field is 33 patients out of 102 patients, which means that workers in the service and industrial fields together accounted for about 70% of the working sample, which

may give an indication that workers in these two fields are more vulnerable to mental illnesses than the fields of agriculture and trade.

❖ **The nature of the work relationship for the patients of the study sample**

After excluding 44 unemployed, the previous table No. (4) shows that the number of patients working for third parties is 73 patients out of 102, while there were 29 patients who are the employer. The number of patients who work for third parties on wages is 73 patients out of 102 patients, which constitutes more than 71% of the sample size, while the number of patients who are employers is 29 patients out of 102 patients by about 28%. This gives an indication that perhaps when a person is an employer, he is less likely to suffer from mental illness, while a person who works for others may be exposed to some pressure at work because he is not an employer, which may increase the likelihood of mental illness.

**By studying the economic characteristics of psychopaths, we have found that:**

Low income was a predominant feature of the patients in the study sample, and the unemployment rate, which reached 30% of the sample, is rather high.

Since the lesson is in the level of income more than employment and unemployment, the human being may be a factor, but this work is not enough as a result of the low return from this work, this may give an indication that the low level of economic may be one of the factors contributing to the spread of mental illnesses. The researcher believes that this is normal, as the low level of income with the high level of dependency will undoubtedly lead to the concentration of most of the human income in meeting his basic needs such as food and drink and neglecting perhaps the rest of the needs, especially those related to the health aspect, all of this may lead to an increase in the likelihood of low-income people suffering from various diseases, including mental illnesses.

Working in the service and industrial fields and working for third parties for wages was a predominant feature among the patients in the study sample. This may give an indication that working in the service and industrial fields and working for third parties for wages is one of the factors contributing to the spread of mental illnesses. The researcher believes that working for others may not achieve the individual physical, psychological, social and economic independence,

and this may lead to the possibility of the individual being exposed to various diseases, especially psychological ones, and work in the service field, which is characterized by dealing with a large number of people, and work in the industrial field, which is characterized by dealing with raw materials and many stages of commodity production, all of which may give an indication that work in these two areas makes the individual more vulnerable to mental illness.

#### **Fifth: Social Characteristics of Psychiatric Patients:**

We will review the social characteristics of psychiatric patients, as the form provided to patients showed the following data.

**Table (5): Social Characteristics of Psychiatric Patients**

<b>Variable</b>	<b>Groups</b>	<b>frequencies</b>	<b>Percentage %</b>
<b>Education</b>	My mother	25	17.12%
	Basic stage of education	49	33.56%
	Secondary School Certificate	43	29.45%
	Higher than high school diploma (institute or college)	29	19.86%
	<b>Total</b>	146	100.00%
<b>Place of residence</b>	Country	34	23.29%
	City	112	76.71%
	<b>Total</b>	<b>146</b>	<b>100.00%</b>
<b>Displacement status</b>	Yes	124	84.93%
	No	22	15.07%
	<b>Total</b>	<b>146</b>	<b>100.00%</b>
<b>Total victims Boys</b>	I don't have kids.	49	33.56%
	From 1 to 3children	43	29.45%
	From 4 to 6children	38	26.03%
	More than 6children.	16	10.96%
	<b>Total</b>	<b>146</b>	<b>100.00%</b>

**Source:** Prepared by the researcher, based on the questionnaire provided.

❖ **Education level of study sample patients?**

The previous table No. (5) shows that the number of illiterate patients is 25 patients, while there were 49 patients with basic education and 43 patients with a secondary certificate, while only 29 patients hold a post-secondary certificate (institute – college). The number of patients with low education (illiterate - basic) reached 74 patients out of 146 patients by nearly 50%, while 43 patients hold secondary education by about 30%, while 29 patients by about 20% hold higher degrees than secondary education (college – institute). The above shows that about half of the patients in the study sample have a low level of education (basic or less) may give an indication that a low level of education may increase the likelihood of mental illness, and as we note, the higher the level of education, the lower the incidence of mental illness from 30% for the high school campaign to 20% for those with post-secondary degrees. This may be due to the fact that people with high education are probably more keen to follow up on their health status than those with low education.

❖ **Place of Residence for Patients Study Sample**

The previous table (5) shows that the number of patients residing in the countryside is 34 patients, while there were 112 patients residing in the city. The number of patients residing in the countryside is 34 patients, or about 23%, while 112 patients, or 77%, reside in the city. The above may give an indication that staying in the city increases the likelihood of mental illness, while staying in the countryside reduces the likelihood of mental illness. This may be due to the fact that life in the countryside may seem simpler and less complicated than life in the city, and the lifestyle in general is healthier in the countryside than the city, especially with regard to air quality, pollution, noise and others.

❖ **Displacement status of study sample patients?**

The previous table No. (5) shows that the number of patients who were displaced by the war is 124 patients compared to 22 patients who were not displaced from their homes. The number of patients displaced from their homes by the war is 124 patients, or about 85%, while 22 patients, or 15%, have not been displaced from their homes. The above may give an indication that the displacement situation may have contributed to an increased risk of mental illness with significant negative effects on the individual.

❖ **Number of children of patients in the study sample**

The previous table No. (5) shows that the number of patients who do not have children is 49 patients, while 43 patients have from one to three children, while 38 patients had from 4 to 6 children, and 16 patients had more than 6 children. The number of patients who do not have children is 49 patients out of 146 patients, which is about 34%. The number of patients who have 1-3 children is 43 patients, which is about 29% of the sample size. The number of patients who have 4-6 children is 38 patients, which is about 26% of the sample size. The number of patients who have more than 6 children is 16 patients, which is 11% of the sample size. We note that the higher the number of children, the lower the number of patients relative to the sample size, and therefore we can conclude that the increase in the number of children reduces the likelihood of a person suffering from mental illness, and that the decrease in the number of children, especially without children, increases the likelihood of human suffering from mental illness, perhaps the only person who does not have children aggravates his general mood and makes him more susceptible to these diseases.

**By studying the social characteristics of psychopaths, we have found that:**

The low level of education was a predominant feature of the patients in the study sample. This may give an indication that the low level of education may be one of the factors contributing to the spread of mental illnesses.

The researcher believes that this is normal, as the low level of education may be accompanied by a lack of attention and awareness of the health aspects of the individual, which may lead to an increase in the likelihood of people with low education to develop various diseases, including mental illnesses.

Residence in the city was a predominant feature of the patients in the study sample, this may give an indication that residence may be one of the contributing factors to the spread of mental illness.

The researcher believes that this is normal, as staying in the city with its complexities and the increase in the population and the spread of noise, exhaust, pollution and others compared to the countryside, all of this may lead to an increase in the likelihood of infection of residents of the city with various diseases, including mental illnesses.

Displacement was a predominant feature of the patients in the study sample, this may give an indication that the displacement incident may be one of the contributing factors to the spread of mental illness.

The researcher believes that this is normal, as displacement has significant negative effects on all psychological, economic and social levels with an increase in the level of exposure of the individual to psychological pressure, all of which may lead to an increase in the likelihood of the displaced and those exposed to many psychological pressures to develop mental illnesses.

The low number of children for psychiatric patients was a predominant feature of the patients in the study sample, and this may give an indication that the low number of children may be one of the contributing factors to the spread of mental illness.

The researcher believes that this is normal, as the presence of children may feel a kind of joy and reassurance and the desire to secure a better life for his children, all of this may lead to a decrease in the likelihood of the individual suffering from mental illness with the increase in the number of children.

#### ❖ **Results:**

Based on the above, the research has reached the following results:

1. Males are more susceptible to various mental illnesses than females, mental illnesses often affect young people, and married couples are more susceptible to mental illnesses than other social groups.
2. A low economic level may be one of the contributing factors to the spread of mental illness.
3. Working in the service and industrial fields and working for third parties for wages may be one of the factors contributing to the spread of mental illnesses.
4. A low level of education may be one of the contributing factors to the spread of mental illness.
5. Staying in the city may be one of the contributing factors to the prevalence of mental illness compared to living in the countryside.
6. Displacement and high exposure to psychological stress may be one of the contributing factors to the spread of mental illness

7. A low number of boys may be one of the contributing factors to the spread of mental illness.

**Suggestions:**

After the previous review of the reality of mental illness in the city of Aleppo, and in light of the findings, the researcher proposes the following:

1. Highlighting the reality of mental illness by activating the role of the psychosocial counselor not only in schools but also in universities and various social events.
2. Directing the media to highlight mental illnesses as diseases that are not shameful but are diseases that may affect any individual like other physical diseases.
3. Provide patients with the necessary support to enable them to recover and return to their normal role in life.

**References:**

1. Alan S. Bellack and Michel Hersen. Behavioral Assessment: A Practical Handbook (New York: Oxford, Paragon Press, 2008), p. 18-31
2. Prevention of Mental Disorders, Report of the World Health Organization, Middle East Regional Office, Cairo, 2005, p. 15.
3. Nasser Mohammed Jawdat, Psychiatric Diseases and Their Effect on Functional Behavior, Journal of Human Sciences, Mohammed Khader University Biskra, Issue 10, 2006, p. 8.