

# The Prevalence of Psychological Disorders in Governance: Implications for Political Decision-Making

**Amirali R. Davoudpour**

**Iranian Canon of Medicine and Law, Administrative Wing of Law and Healing association,  
Iranian Watchdog of Medicine and Law, Tehran-Iran**

Email of the corresponding author: [davoudpour@canmedlaw.org](mailto:davoudpour@canmedlaw.org)

Accepted and published July, 2024

---

## **Abstract**

This research article explores the intersection of psychological disorders and political decision-making, with a particular focus on the Jewish community and Israeli governance. Scientific advancements, such as the discovery of a gene linked to schizophrenia, schizoaffective disorder, and bipolar disorder among Ashkenazi Jews, have profound implications for understanding the role of mental health in governance. This gene increases the likelihood of these disorders by approximately 40% in Ashkenazi Jews and 15% in the general population, raising ethical, social, and political considerations (Lencz et al., 2013). The article examines historical and contemporary cases of political leaders with psychological disorders, including Winston Churchill, Richard Nixon, Abraham Lincoln, and Adolf Hitler, to illustrate the impact of mental health on leadership and decision-making. It emphasizes the need for comprehensive mental health support and ethical frameworks for the use of genetic information in governance to prevent stigmatization and promote public health. The prevalence of psychological disorders within the Jewish community, influenced by both genetic predispositions and socio-cultural factors, underscores the importance of targeted mental health strategies. Through this analysis, the article aims to contribute to a nuanced understanding of the complex relationship between psychological disorders and political leadership, advocating for informed and ethical approaches to mental health in governance.

Keywords: Bio-politics, Psychological Disorders, Governance

---

## **Introduction**

In recent years, scientific advancements have questioned the authenticity of public governance and increasingly intersected with political decision-making. One notable example is the discovery by Israeli and American scientists of a gene prevalent among Ashkenazi Jews that increases the likelihood of developing schizophrenia, schizoaffective disorder, and bipolar disorder. According to a study published in *Nature Communications*, this gene raises the risk of these disorders by approximately 40% in Ashkenazi Jews and 15% in the general population (Lencz et al., 2013). These findings have significant implications for the Israeli government, particularly in its political decision-making and its role in shaping socio-political narratives concerning Jewish identity and history.

### **The Intersection of Genetics and Politics**

The intersection of genetics and politics is not a new phenomenon. Historically, various regimes have sought to use scientific findings to justify political agendas. The advent of modern genetic research, however, has introduced new dimensions to this dynamic. The discovery of genetic predispositions to mental health disorders among specific populations, such as Ashkenazi Jews, raises profound questions about the implications for governance and decision-making processes (Phelan et al., 2013).

### **Genetic Findings and Their Political Implications**

The identification of a gene linked to schizophrenia, schizoaffective disorder, and bipolar disorder in Ashkenazi Jews presents unique challenges. In a politically charged environment, such findings can be misused to further discriminatory policies or to stigmatize certain groups. The Israeli government must navigate these waters carefully to avoid reinforcing harmful stereotypes while addressing public health needs (Weiss, 2015).

### **Psychological Disorders and Political Decision-Making**

The prevalence of psychological disorders among political leaders is a topic of considerable debate. While mental health issues can affect anyone, their presence in individuals holding significant power can have far-reaching consequences. The stress and pressures associated with political roles can exacerbate underlying conditions, potentially impacting decision-making processes and policy outcomes (Davidson et al., 2006).

## **Historical Cases and Contemporary Concerns**

There are numerous historical examples where the mental health of leaders has influenced governance. For instance, the mental health struggles of Winston Churchill, who famously referred to his depression as his "black dog," have been well-documented. While Churchill's leadership during World War II is often praised, his mental health challenges also affected his governance style and decisions (Kumar, 2006).

In contemporary politics, the mental health of leaders remains a sensitive issue. The discovery of genetic predispositions to mental health disorders among specific populations, such as Ashkenazi Jews, adds another layer to this complexity. It raises questions about how such information should be integrated into political and public health strategies without leading to stigmatization or discrimination (Raz, 2013).

### **Richard Nixon and Paranoia**

Richard Nixon's presidency is another example where psychological issues impacted political decision-making. Nixon's paranoia and distrust of others were central to the Watergate scandal, which ultimately led to his resignation. Nixon's behavior has been analyzed through the lens of psychological disorders, with some historians suggesting that his paranoia and anxiety significantly influenced his governance style (Emery, 2013).

### **Abraham Lincoln and Depression**

Abraham Lincoln, one of the most revered presidents in American history, also struggled with severe depression. Historical accounts describe Lincoln's bouts of melancholy, which were severe enough to be considered clinical depression by modern standards. Despite, or perhaps because of, his mental health challenges, Lincoln's empathetic and contemplative nature profoundly impacted his leadership during the Civil War (Shenk, 2005).

### **Adolf Hitler and Narcissistic Personality Disorder**

Adolf Hitler's psychological profile has been the subject of extensive study. Many historians and psychologists have suggested that Hitler exhibited traits of narcissistic personality disorder and paranoia. His grandiose self-perception, need for admiration, and lack of empathy were key elements of his personality that influenced his policies and actions, leading to one of the most tragic periods in modern history (Waite, 1993).

### **Ethical and Social Considerations**

The use of genetic information in political decision-making necessitates careful ethical consideration. There are significant risks associated with the potential misuse of such data. Historical precedents, such as the eugenics movement, highlight the dangers of using genetic information to justify social and political agendas. Contemporary governance must ensure that genetic research is used to promote public health and well-being rather than to further discriminatory practices (Weiss, 2015).

### **Privacy and Consent**

Ethical considerations also extend to issues of privacy and consent. The collection and use of genetic data must be governed by strict regulations to protect individuals' rights. Informed consent is crucial to ensuring that individuals understand how their genetic information will be used and the potential implications (Phelan et al., 2013).

### **Stigmatization and Discrimination**

There is a risk that genetic information could be used to stigmatize or discriminate against individuals or groups. For instance, the identification of a genetic predisposition to mental health disorders among Ashkenazi Jews could be misused to reinforce negative stereotypes or justify exclusionary policies. It is essential that policies are in place to prevent such misuse and to promote an inclusive approach to public health and governance (Lemke, 2004).

## **Case Studies: Mental Health and Political Leadership**

### **Winston Churchill: The "Black Dog" of Depression**

Winston Churchill's struggles with depression, which he referred to as his "black dog," were well-documented. Despite his mental health challenges, Churchill's leadership during World War II is often

celebrated. His ability to confront his depressive episodes and continue his political duties provides a nuanced understanding of how mental health issues can coexist with effective leadership (Kumar, 2006). Churchill's experience underscores the importance of addressing mental health openly and providing support for leaders facing similar challenges.

### **Richard Nixon: Paranoia and the Watergate Scandal**

Richard Nixon's presidency ended in scandal, partly due to his paranoia and distrust of others. Nixon's psychological profile has been analyzed to understand how his mental state influenced his actions and decisions, particularly during the Watergate scandal. Nixon's behavior exemplifies how unchecked psychological issues can lead to governance failures and ethical breaches (Emery, 2013).

### **Abraham Lincoln: Depression and Empathy in Leadership**

Abraham Lincoln is another historical figure whose mental health has been scrutinized. Lincoln's severe bouts of depression are well-documented, and his melancholy nature is often seen as contributing to his empathetic and thoughtful approach to leadership. Lincoln's ability to manage his depression while leading the country through the Civil War offers insights into the complex relationship between mental health and effective leadership (Shenk, 2005).

### **Adolf Hitler: Narcissism and Paranoia**

Adolf Hitler's psychological profile has been extensively studied, with many historians and psychologists suggesting that he exhibited traits of narcissistic personality disorder and paranoia. Hitler's grandiose self-perception, need for admiration, and lack of empathy were key elements of his personality that influenced his policies and actions, leading to one of the most tragic periods in modern history. The examination of Hitler's mental state provides a stark warning of the dangers posed by leaders with severe psychological disorders (Waite, 1993).

### **The Role of Mental Health Support in Governance**

The importance of mental health support for political leaders cannot be overstated. Providing access to mental health resources and reducing the stigma associated with mental health issues are crucial steps in ensuring that leaders can perform their duties effectively. Governments should prioritize the mental well-being of their leaders, recognizing that their mental health directly impacts their decision-making and, by extension, the well-being of the public (Davidson et al., 2006).

### **Implementing Mental Health Policies**

Implementing comprehensive mental health policies within governance structures can help mitigate the risks associated with psychological disorders among political leaders. These policies should include regular mental health assessments, access to counseling services, and the promotion of a culture that values mental health. By proactively addressing mental health, governments can support their leaders and enhance overall governance quality (Puri et al., 2009).

### **Ethical Frameworks for Genetic Information**

As genetic research continues to advance, it is essential to develop ethical frameworks that guide the use of genetic information in governance. These frameworks should prioritize privacy, consent, and the prevention of discrimination. Ensuring that genetic information is used ethically will help protect individuals' rights and promote a more just and equitable society (Lemke, 2004).

## Prevalence of Psychological Disorders in the Israeli and Jewish Community

The prevalence of psychological disorders within the Israeli and broader Jewish community has been a subject of considerable research, reflecting both genetic and socio-environmental factors. Studies have indicated that certain psychological disorders, such as schizophrenia, bipolar disorder, and depression, appear at higher rates in the Jewish population, particularly among Ashkenazi Jews. For instance, research has shown that Ashkenazi Jews have a 40% higher likelihood of developing schizophrenia compared to a 15% increase in the general population, attributed to a specific gene variant (Lencz et al., 2013). Additionally, the Israeli Ministry of Health reports that mental health issues such as anxiety and depression are prevalent, with approximately 17% of the Israeli population experiencing some form of mental disorder annually. These findings underscore the need for targeted mental health interventions and policies within these communities to address the unique genetic predispositions and the broader socio-cultural pressures that contribute to these elevated rates of psychological disorders (Levav et al., 2007).

## Conclusion

The intersection of genetics and politics presents complex challenges and opportunities. The discovery of a gene linked to mental health disorders among Ashkenazi Jews exemplifies the potential implications for governance and decision-making. As scientific advancements continue to unveil new genetic insights, it is imperative that political leaders and policymakers approach these findings with ethical rigor and a commitment to promoting public health without perpetuating discrimination. The prevalence of psychological disorders in governance underscores the need for comprehensive mental health strategies that support leaders while safeguarding the interests of the public.

---

## References

- Davidson, J., Connor, K. M., Swartz, M., & Campbell, D. W. (2006). Mental Health of World Leaders. *Journal of Nervous and Mental Disease, 194*(1), 1-6.
- Emery, F. E. (2013). *Nixon's Shadow: The History of an Image*. New York Times Books.
- Kumar, S. (2006). The Black Dog: Churchill's Depression and Its Role in His Leadership. *The Psychiatrist, 30*(4), 141-143.
- Levav, I., Kohn, R., Golding, J. M., & Weissman, M. M. (2007). Vulnerability of Jews to affective disorders. *American Journal of Psychiatry, 154*(1), 94-100.
- Lencz, T., Guha, S., Liu, C., Rosenfeld, J., Mukherjee, S., DeRosse, P., ... & Malhotra, A. K. (2013). Genome-wide association study implicates NDST3 in schizophrenia and bipolar disorder. *Nature Communications, 4*(1), 2739. <https://doi.org/10.1038/ncomms3739>

Lemke, T. (2004). Genetic testing, eugenics, and risk. *Critical Public Health*, 14(3), 265-281.

Phelan, J. C., Link, B. G., & Feldman, N. M. (2013). The genomic revolution and beliefs about essential racial differences: A backdoor to eugenics? *American Sociological Review*, 78(2), 167-191.

Puri, B. K., Treasaden, I. H., & Hodgkinson, S. A. (2009). The Psychiatry of Politics: An Introduction. *Psychiatry, Psychology and Law*, 16(3), 365-373.

Raz, A. E. (2013). *Community Genetics and Genetic Alliances: Eugenics, Carrier Testing, and Networks of Risk*. Routledge.

Shenk, J. W. (2005). Lincoln's Melancholy: How Depression Challenged a President and Fueled His Greatness. *Houghton Mifflin Harcourt*.

Waite, R. G. (1993). *The Psychopathic God: Adolf Hitler*. Da Capo Press.

Weiss, M. E. (2015). *The Genealogy of a Gene: Patents, HIV/AIDS, and Race*. University of Chicago Press.