



The Relationship Between Kleptomania and Social Responsibility as a Citizen

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ARTICLE INFO	ABSTRACT
<p>Article History: Submitted/Received March 03, 2024 First Revised April 12, 2024 Accepted May 20, 2024 First Available online June 01, 2024 Publication Date June 05, 2024</p> <p>Keyword: Criminal law, Impulse control disorders, Kleptomania, Social responsibility,</p>	<p>Kleptomania is generally understood clinically as an impulse control disorder as classified in the Diagnostic and Statistical Manual of Mental Disorders (DSM-5). However, an excessive focus on the pathological aspect creates a gap in the understanding of kleptomania in relation to the social responsibility and criminal liability of individuals as citizens. This study aims to analyze the capacity for social responsibility of kleptomaniacs and the construction of criminal liability in the Indonesian legal system. This study shows that kleptomaniacs, in principle, still have social obligations, but their capacity for criminal liability can be reduced if there is a significant impairment in impulse control and awareness of their actions. Therefore, the application of criminal law to kleptomaniacs cannot be equated with that of ordinary thieves, but rather requires a proportionate approach through psychiatric assessment, medical rehabilitation, and restorative justice mechanisms. This approach is expected to maintain a balance between protecting the interests of society and restoring the sufferer as a legal subject.</p>

1. INTRODUCTION

Personal Social Responsibility (PSR) is understood as an individual's commitment to act ethically and responsibly in everyday life, both towards themselves and the community around them. PSR emphasizes that every individual has a moral role to consider the social consequences of their actions, demonstrate concern for others, and contribute to social harmony. This concept stems from the view that human behavior

always has social impacts, therefore, wise, conscious, and ethical actions constitute a form of personal responsibility for the common good. (Agnieszka Zak, Piotr Sedlak, Monika Sady., 2023)

PSR has three core components: responsibility for one's own behavior, concern for the social environment, and a proactive drive to contribute to the common good. Individuals with a high PSR typically possess a strong moral conscience, are able to control their actions, and consider the long-term impacts of their decisions. Furthermore, PSR is closely linked to social sustainability efforts, as it encourages individuals to consider how their actions can impact the lives of others and the future of society. (Agnieszka Zak, Piotr Sedlak, Monika Sady., 2023) Overall, PSR is presented as a fundamental moral value that every individual must possess to build an ethical, caring, and well-being-oriented society.

The psychological disorder of kleptomania has been developing since the early 2000s, when research classified it as a subset of impulsive control disorders. Much of the early research focused on clinical characteristics, such as a study by Grant & Kim (2002) that showed that kleptomaniacs have a high comorbidity rate with anxiety and depression. In recent years, research has shown that this phenomenon is increasingly relevant to social issues, particularly as kleptomania is increasingly understood as a disorder requiring ongoing clinical intervention, rather than a purely punitive approach (Grant, 2020).

Overall, the development of studies on kleptomania over the years shows a shift. Initially, this condition was viewed as deviant behavior, so individuals experiencing it were considered criminals rather than individuals with mental disorders. This change began to be seen after kleptomania was classified as an impulse control disorder in the DSM-III and maintained that position until the DSM-5, which emphasized that unnecessary stealing is part of an inability to control internal urges (American Psychiatric Association, 2013). Furthermore, recent findings indicate that kleptomaniacs experience impairments in inhibitory control and decision-making (Chamberlain et al., 2016). Kleptomania is also increasingly understood as a medical condition requiring psychological intervention due to the presence of persistent compulsive urges (Grant, 2020).

Data shows that theft is one of the most common forms of crime in society. The Indonesian National Police (2023) reported that there were 137,419 cases of crime in Indonesia between January and April 2023. The types of theft include: simple theft; aggravated theft; Petty Theft; Theft with Violence (Alya et al., 2024). Furthermore, according to the 2023 BPS Crime Statistics data, BPS presents a macro overview of crime in Indonesia, using a perpetrator, victim, and regional perspective. The publication states that theft is one of the most frequently reported crimes. This data provides important background: although theft is common, not all thieves commit their acts for economic reasons; a small percentage may be influenced by psychological factors such as kleptomania.

The prevalence of kleptomania in the general population is estimated at around 0.6–0.8% (Kohn et al., 2022). However, there is no definitive data on the number of kleptomania sufferers in Indonesia, or even globally. This is because sufferers often

conceal their condition and only seek help when they are in conflict with the law. In the United States, epidemiological surveys indicate a theft prevalence of around 11.3%, and the estimated prevalence of kleptomania in the thief population is between 3.8 and 24%. Several studies have shown that the majority of kleptomaniacs are women, with a ratio of 3:1 between women and men. The average age of perpetrators is young adulthood (30s), but there are reports of the onset of stealing behavior starting at as young as 4 years old and as old as 77 years old (Levani et al., 2019).

Repeated stealing can impact social trust, which is closely related to civic responsibility. To date, research linking social responsibility to kleptomania is very limited, as most studies focus solely on psychopathology and impulse control. Nevertheless, understanding the relationship between social responsibility and kleptomania is crucial in understanding how psychological conditions can influence social obligations and individual behavior in society. (Linda Wang, 2025)

The limited research on this relationship highlights the urgency of understanding the relationship between kleptomania and civic responsibility. Most previous research has focused solely on one aspect of the relationship: the clinical and social responsibility aspects. Therefore, this study is expected to contribute to understanding both aspects of social responsibility in individuals with psychological disorders such as kleptomania.

In Wang's (2025) research, kleptomania is defined as an impulse control disorder. Wang's (2025) research explains that kleptomania is not simply a simple act of stealing, but rather a complex psychological condition influenced by biological, psychological, and social factors. One frequently associated factor is ADHD, with approximately 15% of individuals with kleptomania also having ADHD symptoms. Dopamine imbalances and high impulsivity make sufferers more susceptible to impulsive theft. ADHD medications, such as methylphenidate, can reduce the frequency of stealing in some cases.

In terms of treatment, Wang's (2025) research examines three main forms of intervention. First, **Pharmacotherapy**, such as SSRIs and especially **Naltrexone**, has been shown to suppress the pleasurable or rewarding effects of stealing. Second, **Cognitive Behavioral Therapy (CBT)**, which helps individuals identify erroneous thought patterns, address triggering emotions, and prevent relapse.

2. METHODS

The research method used is bibliometric analysis. Bibliometric analysis is a method used to analyze publications in books, articles, or other forms of publication. This method is used by researchers to determine the impact on a specific field and analyze collaboration networks through keywords listed in the results of previous scientific research explorations. The first stage is a data search using Harzing Publish or Perish, software used to search for related journals that match the research keywords, namely "Kleptomania with social responsibility." The journals used by the researchers are those published between 2015 and 2025. The collected data will then be analyzed using VOSviewer software, which will build and visualize the bibliometric network.

Furthermore, the method used in compiling this article is qualitative with a Library Research design. As explained by Nursalam (2020), this method relies on data collection from various credible reference sources, such as national and international journals,

textbooks, and relevant scientific articles. The analysis focuses on a comparative study of literature that discusses the psychological dynamics of people with kleptomania in public life. The analysis focuses on comparing perspectives across sources, particularly those related to social conditions in Indonesia. The diverse views within this literature will then be synthesized to produce systematic research conclusions, particularly regarding the relationship between the psychology of kleptomania and citizens' social responsibility in carrying out public life in Indonesia.

3. RESULTS AND DISCUSSION

Kleptomania is a form of mental disorder characterized by repeated stealing. This behavior is accompanied by a strong urge that is difficult to control. Kleptomania can be associated with mental disorders such as depression, alcohol addiction, anxiety disorders, and obsessive-compulsive disorder. Kleptomania shares similar symptoms with addictions, such as intense pressure before achieving the desire, a decrease in desire immediately after the act, and a feeling of pleasure after the act. Kleptomania can also be associated with mood swings. Diagnostic criteria for kleptomania, according to the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders, include repeated stealing behavior where the sufferer is unable to control the urge. The stolen items are usually unnecessary for the patient and are not intended for sale. (Yelvi Levani, Aldo Dwi Prastya, Safira Nur Ramadhan, 2019)

Regarding theft, the Unitary State of the Republic of Indonesia (NKRI) is a state based on law, as stated in Article 1 paragraph (3), which states, "Indonesia is a state based on the rule of law." The existence of law in Indonesia serves to regulate people's behavior to avoid behavior that is detrimental to themselves or others (Sutriani et al., 2022). One form of violation of the legal provisions in the Criminal Code (KUHP) is theft. Theft is categorized as a crime against property. Generally, perpetrators are convicted for knowingly taking another person's property for their own needs. However, not all thefts are motivated by criminal motives. Several cases indicate that perpetrators of theft are motivated by psychological conditions, such as kleptomania. This is where the perpetrator takes another person's property for non-personal gain (Kusumaningsih, 2025).

In the Indonesian criminal law system, the requirements for criminal responsibility are awareness and will to act. However, when the perpetrator is mentally ill, there is an exception for individuals who commit criminal acts while unable to account for their actions due to their psychological condition (KUHP Article 44). However, in social reality, in judicial practice, several studies show that perpetrators of criminal acts with mild mental disorders such as kleptomania often do not receive different treatment from ordinary criminals, especially if there is no convincing psychiatric evidence (Herdaetha, 2015). This can lead to injustice, because people with impulse control disorders such as kleptomania do not have full awareness or control over their actions (Kusumaningsih, 2025).

3.1. Clinical Emphasis on Kleptomania and Lack of Individual Responsibility Studies

Kleptomania is described as one of the disorders that underwent a significant shift in position in the transition from DSM-IV-TR to DSM-5 (Lucero Munguía, et al., 2025). In DSM-IV-TR, kleptomania was included in the impulse control disorder not elsewhere classified category, a residual category that accommodated various impulsive disorders that did not have a specific place in the current classification system. However, research developments over the past two decades have shown that kleptomania, along with other impulsive disorders, has clearer clinical characteristics and a higher prevalence than previously assumed. These developments formed the basis for the DSM-5 reorganization of the classification, moving kleptomania into the new category of disruptive, impulse-control, and conduct disorders (Prof. Dr. Lut TAMAM., 2015).

This change indicates that kleptomania is now viewed as a disorder with broader self-control problems, particularly in regulating one's emotions and behavior. This new category emphasizes that disorders like kleptomania share a commonality of inability to control impulses and the potential for behavior that violates social norms. On the other hand, (Prof. Dr. Lut TAMAM., 2015) also highlights concerns that despite the more structured DSM-5 classification, kleptomania may remain under-researched because it must be placed in a broad category alongside more common disorders such as ODD and conduct disorder. Even in the ICD-11 discussions, the working group emphasized the need to maintain a specific group of impulse control disorders, including kleptomania, to allow for more specific research. According to some reports, people with kleptomania are thought to have low serotonin levels, resulting in a strong, uncontrollable tendency to steal. Feeling compelled to cheat can cause tension. When they steal, this anxiety disappears and is replaced by feelings of joy, relaxation, and happiness. These emotions are what drive someone to engage in kleptomania repeatedly (Birnabas & Klainheisler, 2021).

Clinical research presented (S. D. Rihana et al., 2019) indicates that kleptomania is not uncommon. Various clinical samples report rates of kleptomania symptoms ranging from 7–9% in psychiatric inpatients and adolescents with psychiatric disorders. Comorbidity is also very high: many individuals with kleptomania have a history of mood disorders, substance addiction, other impulse control disorders, and certain personality traits such as paranoid, borderline, or schizoid. Several tools exist to diagnose kleptomania, including the Yale Brown Obsessive Compulsive Scale Modified for Kleptomania (K-YBOCS) and the Kleptomania Symptom Assessment Scale (K-SAS). The K-YBOCS is a tool to measure the severity of kleptomania symptoms. Pharmacological therapies include Selective serotonin reuptake inhibitors (SSRIs), a class of antidepressants that work by increasing serotonin levels in the brain, and naltrexone, a medication therapy for alcohol addiction. Some psychotherapies commonly used for kleptomania sufferers include Cognitive Behavioral Therapy (CBT), cognitive psychotherapy, systemic desensitization, and aversion therapy. These psychotherapies aim to change the sufferer's perception of stealing and redirect their interests to other activities (Pelvi Levani, Aldo Dwi Prastya, Safira Nur Ramadhani, 2019).

The synthesis of these findings confirms a literature gap. While clinical literature has extensively understood kleptomania from a psychopathological perspective, aspects of social behavior and civic responsibility have been largely ignored. This gap underscores the urgency of research that balances clinical and social perspectives to achieve a more holistic understanding of kleptomania, not just as a medical disorder but also as a social phenomenon that impacts society. Our analysis of the reviewers found that research on kleptomania between 2015 and 2025 focused primarily on clinical aspects such as impulse control disorders, obsessive-compulsive disorder, drug therapy, and serotonin uptake inhibitors. This finding is reinforced by findings from the journals analyzed, such as Tamam (2015), which discusses kleptomania entirely within the DSM classification framework, and Rihana et al. (2019), which highlights symptoms, comorbidities, and therapy, without examining the social dimension or individual responsibility. The analysis displays keywords such as crime, forensic psychiatry, theft, and responsibility, which illustrate the relationship between kleptomania and the legal and social responsibility domains. However, compared to the overall network, the cluster in the Vosviewer we analyzed is one of the clusters with a relatively small number of words and relatively low relationship strength. This comparison indicates that discussions of kleptomania in the scientific literature emphasize clinical aspects more than social responsibility or citizenship.

No.	Author	Title	Findings
1.	Prof. Dr. Lut TAMAM (2015)	Impulse Control Disorders: DSM-5 and Beyond	The discussion focuses entirely on the DSM classification and clinical aspects of kleptomania as an impulse control disorder. There is no discussion of social behavior or individual social responsibility, suggesting that previous research has focused more on the medical side of diagnosis.
2.	S. D. Rihana, T. Sandeep, Ch. Sharmi Prakash, G. Naveen, B. Bala Naganna (2019)	Kleptomania Inventory Stealing Disorder	Describes kleptomania from a clinical perspective through an explanation of the symptoms of impulse stealing, psychiatric comorbidities, and the neurobiological factors underlying the disorder.
3.	Birnabas Buzsik, Klainheisler Foila (2021)	The Emergence of Kleptomania in Children and How to Cope with Therapy	This journal found that kleptomania in children is an impulse control disorder related to brain chemistry imbalances and is often comorbid with depression and obsessive-compulsive disorder (OCD). It can be treated through parental involvement, psychological therapy (Rational Emotive

			Therapy/CBT), religious support, and medical intervention, if necessary.
4.	Yelvi Levani, Aldo Dwi Prasty, Safira Nur Ramadhani (2019)	Kleptomania: <i>Manifestasi Klinis dan Pilihan Terapi</i>	The diagnostic criteria for kleptomania, according to the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders, include repeated stealing behaviors, with the sufferer unable to control the urge. Several tools are available to diagnose kleptomania, including the Yale Brown Obsessive-Compulsive Scale Modified for Kleptomania (K-YBOCS) and the Kleptomania Symptom Assessment Scale (K-SAS). The K-YBOCS is a measure of the severity of kleptomania symptoms.
5.	Lucero Munguía, et al (2025)	Clinical and Therapeutic Considerations For Women	The KM-only group was diagnosed using DSM-5 criteria and through a face-to-face clinical interview. Eating disorders were diagnosed through a face-to-face semi-structured clinical interview based on DSM-5 criteria, and accompanying KM was self-reported by the patient. Psychopathology, impulsivity, and personality traits were assessed. The clinical group received cognitive behavioral treatment.

3.2. Social Responsibility Capacity in Kleptomania Sufferers

All Indonesian citizens have an obligation to fulfill their social responsibilities in society. This obligation is stipulated in Article 27 paragraph (1) of the 1945 Constitution, which states, "All citizens are equal before the law and government and are obliged to uphold the law and government without exception." Therefore, normatively, every citizen has an obligation to follow the law and maintain order as part of their social responsibility. In this context, kleptomania, as a mental disorder, can affect the legal accountability of perpetrators of theft (Reza, 2025). Essentially, kleptomaniacs still have the same social responsibilities as other citizens, but their capacity for criminal responsibility can be reduced if there is evidence of significant impairment in the ability to control their behavior or understand the consequences of their actions (Mumu et al., 2024).

Kleptomania disorder describes a condition in which individuals have difficulty controlling their behavior (WHO, 2019). Some dangerous kleptomaniac behaviors include persistent failure to resist the urge to steal, initial anxiety before feeling happy and satisfied (Sutriani et al., 2022). However, kleptomaniacs are still considered to have civic obligations. Their social responsibilities are not simply diminished but can be assessed based on the level of impaired self-control (Mumu et al., 2024). Furthermore, theft caused by kleptomania continues to create discomfort for society, requiring the state to uphold legal norms as a form of social protection (Mumu et al., 2024). This is because serious action is needed against perpetrators of crimes, especially those involving theft of property (Arief, 2020).

The condition of impulse control disorders that conflict with norms requires a more humane approach by combining psychological understanding with socio-legal assessment (Chamberlain et al., 2018). Therefore, the extent to which kleptomaniacs maintain social responsibility depends on the individual's ability to maintain impulse control, awareness of the impact of their actions, and legal assessment of the disorder's influence on their capacity to act consciously. While social responsibility persists for kleptomaniacs, the intensity of accountability can be adjusted based on the level of psychological disturbance (Mumu et al., 2024). Therefore, treatment needs to be tailored to balance social protection and psychological support, allowing sufferers to return to their roles as responsible citizens (Chamberlain & Grant, 2018).

No.	Author	Title	Findings
1.	Mumu, G.R.P. et al. (2024)	<i>Pertanggungjawaban Pidana Pencurian terhadap Penderita Kleptomania</i>	This article explains that kleptomaniacs who commit theft still have a responsibility to comply with applicable laws. However, there is a reduction in criminal liability for kleptomaniacs who are proven to have a psychological disorder.
2.	Chamberlain, S.R. & Grant, J.E. (2018)	Symptom Severity and It's Clinical Correlates in Kleptomania	This article emphasizes that understanding kleptomania requires a blend of psychological and socio-legal perspectives. Although kleptomaniacs have impaired control over their impulsive impulses, they still possess a certain capacity to maintain social functioning without completely eliminating individual responsibility.
3.	World Health Organization (2019)	International Classification of Diseases 11th Revision (ICD-11)	ICD-11 classifies Kleptomania as an "Impulse Control Disorder", which is a disorder characterized by the inability

			to resist the urge to engage in harmful behavior.
4.	Reza, A. (2025)	<i>Pertanggungjawaban Pidana Pelaku Tindak Pidana Pencurian yang Menderita Gangguan Kejiwaan Kleptomania</i>	This article examines the Sleman District Court Decision No. 142/Pid.B/2021/PN.Smn, in which a defendant suffering from kleptomania was sentenced to one year in prison for committing the crime of theft. Although the defendant had undergone a psychiatric diagnosis, the judge did not consider the perpetrator's mental condition in the considerations that should have eliminated criminal responsibility according to Article 44 paragraph (1) of the Criminal Code (KUHP).
5.	Sutriani, K. et al. (2022)	<i>Pertanggungjawaban Tindak Pidana Pencurian yang Dilakukan oleh Seorang Kleptomania</i>	This article states that there are several cases of theft frequently caused by kleptomaniacs. Therefore, this research is structured as a normative legal study with a case and statutory approach. The findings of this research reveal that cases such as this are regulated in Article 44 paragraph (1) of the Criminal Code (KUHP).
6.	Arief, M.Z. (2020)	<i>Tanggung Jawab Pidana terhadap Pelaku Tindak Pidana Perampasan Harta Benda Seseorang (Begal)</i>	This article examines the victims of the crime of property robbery and analyzes the sanctions against perpetrators of property robbery. The researcher uses a problem-solving approach by examining laws and regulations regarding criminal liability for perpetrators of property robbery (begal).

3.3 Harmony of Obligations and the Concept of Social Responsibility in Kleptomania Sufferers

Considering the existing social issues, kleptomania sufferers are clearly in the current situation, where kleptomania is classified as a mental disorder (Impulse Control Disorder) according to the DSM-V. Generally speaking, sufferers have a different concept of responsibility and cannot be equated with the actions of thieves committed by mentally

healthy individuals. The legal treatment applicable to sufferers who commit unlawful acts, especially theft, will certainly receive different legal sanctions than those of normal individuals. According to Article 44 of the Criminal Code, the actions of sufferers do not require mens rea (evil intent), unlike those of typical thieves who steal for personal gain.

However, judges have another option, stipulated in another article (Article 44 paragraph 2), which mandates that those with kleptomania be admitted to a mental hospital for rehabilitation. The concept of restorative justice is also included in the courts, based on Prosecutor's Regulation No. 15 of 2020. If the autopsy results prove that the suspect has a mental disorder and has caused small-scale losses (under 2.5 million rupiah), the prosecutor can seek to discontinue the prosecution under the following conditions: a. the suspect returns the goods or compensates the damages; b. reconciliation if the victim forgives; c. responsibility in the form of a guarantee that the suspect's family will receive treatment. Alvianto (2021) emphasized that judges lack medical competence to determine the perpetrator's mental disorder. Therefore, a *Visum et Repertum Psychiatricum* is the absolute evidence required by the court.

This document serves to determine whether the impulse to steal is purely due to clinical symptoms that negate legal obligations (liability) or is simply a general criminal act. According to Sutriani et al. (2022), the application of Article 44 is often debated. Kleptomaniacs often have "partial responsibility" or limited self-control. They are unable to fully control themselves. Therefore, if the law only sees black and white, or in other words, whether they are convicted or acquitted, a sense of justice for society is not met. Treatment for this impulsive disorder is a form of civic duty. Judging from the root of the problem, if the sufferer is unable to control their impulses, it is certain that the person will commit acts, namely stealing. According to Kurniawan, A., & Setyawan, D. (2024), the treatment of kleptomania is relevant to the context of religious communities in Indonesia.

This study integrates Cognitive Behavioral Therapy (CBT) with Islamic spiritual values. Its main findings indicate that instilling the concept of *muraqabah*, the full awareness that one is being watched by God, serves as an effective "cognitive brake." When the urge to steal arises, this spiritual awareness works faster than fear of formal law, helping patients to cancel the impulse within themselves. In addition to CBT, there is Covert Sensitization, where patients are trained to imagine themselves stealing, and then immediately imagine the negative consequences they will experience. Family support plays a vital role in recovery, but families are often at a loss for what to do when symptoms arise.

The Recovery Village (2022) guide emphasizes that moral support alone is not enough; a technical strategy called a Relapse Prevention Plan is needed. This is a written document mutually agreed upon by the patient and family, containing a step-by-step protocol for when the urge to steal arises, from whom to contact to what diversional activities to undertake immediately.

This way, alignment between legal obligations and medical conditions can be achieved. The penalty for kleptomaniacs is mandatory rehabilitation. This is a fair compromise that creates a sense of security for the community, as perpetrators of kleptomania are protected by being placed in rehabilitation for treatment, and perpetrators receive their rights as patients to mental recovery, not just physical

punishment. This approach also aligns with the principle of restorative justice, which has recently been increasingly discussed by legal experts (Zhou, 2024), where the goal is to restore the situation, not simply to seek revenge on the perpetrator.

No.	Author	Title	Findings
1.	Kurniawan, A., & Setyawan, D. (2024).	<i>Penanggulangan Kleptomania Melalui Pendekatan Terapi Perilaku Kognitif Dalam Perspektif Al-Qur'an</i> . Edukasiana: Journal of Islamic Education.	Spiritual strengthening to deal with Kleptomania, the system of which is almost the same as CBT
2.	Alvianto (2021)	<i>Penilaian Medis dalam Pertanggungjawaban Pidana Kleptomania</i>	Visum et Repertum Psychiatricum is a certificate from a mental health expert made by a psychiatrist at the request of the police for court purposes
3.	Sadock, B. J., Sadock, V. A., & Ruiz, P. (2015)	Kaplan & Sadock's Synopsis of Psychiatry: Behavioral Sciences/Clinical Psychiatry (11th ed.)	Covert Sensitization treatment that makes patients imagine the consequences of the act of stealing they have committed
4.	Sutriani, et al. (2022)	<i>Pertanggungjawaban Tindak Pidana Pencurian yang Dilakukan oleh Seorang Kleptomania</i>	The dilemma of Article 44 of the Criminal Code (KUHP) for kleptomania sufferers
5.	American Psychiatric Association. (2013)	Diagnostic and Statistical Manual of Mental Disorders (5th ed.)	Diagnosis of kleptomania which is a mental disorder
6.	The Recovery Village. (2022)	How to overcome kleptomania: A guide for families. The Recovery Village Drug and Alcohol Rehab	Family guidelines for handling relatives who suffer from kleptomania
7.	Kitab Undang-Undang Hukum Pidana (KUHP)	<i>Pasal 44 ayat (1) dan (2)</i>	People with mental disorders need special treatment
8.	Zhou (2024)	Impulse control disorders and moral responsibilities: A systematic review	Moral obligations undertaken by people with mental disorders.

3.4 VosViewer Image

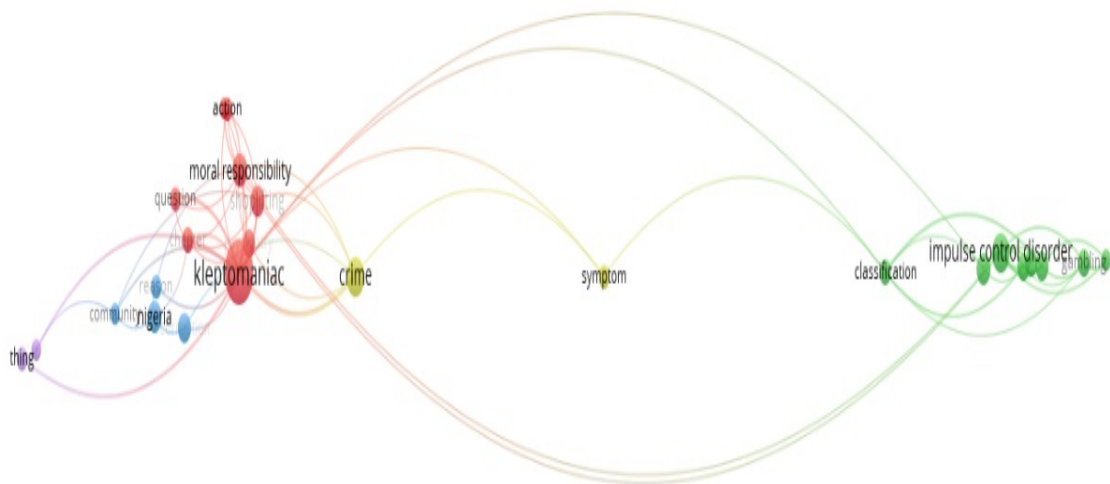


Image 3.3.1

3.5 Bibliometric Analysis Results

A bibliometric analysis of 51 keywords on kleptomania shows that research in this area remains largely focused on medical and psychiatric aspects. Clusters 1 and 2 are dominated by terms related to demographic characteristics and clinical conditions, such as "adult," "female," "male," "impulse control disorders," and "obsessive-compulsive disorder," indicating that the literature primarily addresses patient profiles, comorbidities, and therapeutic treatments. Meanwhile, issues related to social and legal behavior emerge primarily in Cluster 3, which contains keywords such as "crime," "forensic psychiatry," "jurisprudence," "law," "responsibility," and "social behavior." However, the strength of the relationship between the term "responsibility" and the term "social responsibility" does not appear at all. This situation indicates that discussions of responsibility, both legal and social, still occupy a less prominent position than the medical focus.

Based on bibliometric results conducted using relevant journals, research on kleptomania and social responsibility tends to be polarized into two dominant clusters. Namely, the cluster in terms of psychological aspects with criminal aspects. A very strong relationship, depicted by a thick line, exists between the keyword "Kleptomania" and criminal activities, namely theft. Therefore, it can be said that kleptomaniacs have a strong connection to criminal acts, which are actions that deviate from general human norms. However, researchers found that the relationship between kleptomania and social responsibility is still very weak in the VOSviewer diagram. This means that the issue of social responsibility for kleptomaniacs appears to have not been discussed in depth.

Furthermore, a publication timeline analysis shows that terms related to law and responsibility in Cluster 3 largely come from older research (1970s–1980s), while more recent research tends to focus on neurobiological aspects grouped in Cluster 4, such as

brain, genetics, and pathophysiology. This finding indicates a gap in the literature: although kleptomania has a direct impact on society through theft, the aspect of social responsibility as a citizen has not been adequately addressed. Therefore, an updated study is needed that positions kleptomania not only as a clinical disorder but also as a social phenomenon that demands a balance between medical understanding and the fulfillment of individual responsibilities in community life.

4. CONCLUSION

The articles compiled by researchers indicate that discussions on kleptomania are largely clinically focused. This is consistent with the results of bibliometric analysis, which found numerous terms related to demographic characteristics and clinical conditions, such as "adult," "female," "male," "impulse control disorders," and "obsessive-compulsive disorder," indicating that the literature focuses more on patient profiles, comorbidities, and therapeutic management. These results confirmed that there is a dominant cluster of keywords in the existing literature, specifically clinical terms, compared to discussions on social responsibility for kleptomaniacs. Thus, there is a gap in understanding, considering that kleptomania can be viewed not only from a clinical perspective but also from other aspects that significantly impact society through theft.

According to the law, all Indonesian citizens have a social responsibility to comply with applicable norms, as stipulated in Article 27 paragraph (1) of the 1945 Constitution. Like citizens in general, kleptomaniacs still have an obligation to fulfill their social responsibilities. However, there are differences in their capacity to fulfill these obligations because kleptomaniacs have less stable self-control than normal. As stipulated in Article 44 of the Criminal Code, consideration must be given to the mental state of the perpetrator. However, in practice, kleptomaniacs are still treated the same as ordinary criminals if there is no strong evidence of a disorder. This article emphasizes that social responsibility remains for kleptomaniacs, but the legal provisions must be understood in accordance with the level of disorder experienced by the perpetrator.

Overall, this article emphasizes the urgency of developing a framework that views kleptomania not only as a medical disorder but also as a social phenomenon related to social responsibility as Indonesian citizens. To achieve harmony between legal obligations and psychological conditions, an approach is needed that connects clinical understanding, such as Cognitive Behavioral Therapy (CBT), with Islamic spiritual values (*muraqabah*), covert sensitization, and family support through a Relapse Prevention Plan. An interdisciplinary approach is crucial not only for individual recovery but also for reducing the social risks posed by kleptomania. This understanding is necessary for more equitable law enforcement policies and practices in supporting kleptomaniacs while maintaining order in society.

6. CONFESSION

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7. AUTHOR'S NOTE

The author declares no conflict of interest regarding the publication of this article. The author confirms that this paper is plagiarism-free.

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