

A STUDY ON INSANITY RELATED HOMICIDE

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SUMMARY

This is a study involving 15 prisoners referred for opinion and mental abnormality. Retrospective analysis of the crime and the situation prevailing helped to develop insight into the homicidal act. In the insanity related homicide, the significant differences were absence of malice aforethought, application of excessive violence, presence of impulsivity and lack of meticulous planning. Murder by the psychotic was invariably a lonely passive affair, the actor lacking guilt feeling, insight, judgement in and towards the criminal situation.

Murder is legally defined as the act of killing a person with malice aforethought. If death is caused but no malice aforethought is present, the crime turns to culpable homicide not amounting to murder. Malice aforethought is defined in common law as the intention to kill, seriously harm or perform an act which is likely to cause death.

Few mentally ill commit homicide as a result of their illness. 'Plea of Insanity' is often presented to minimise sentence turning murder to 'culpable homicide not amounting to murder and elicit the verdict' guilty but insane. The relationship between criminal responsibility and mental disorder defines legal insanity. There is need for study in the field of forensic psychiatry in such a background (Sethi, 1984).

The present study involves 15 prisoners committing homicide where psychiatric opinion was called for.

MATERIAL AND METHODS

- (1) All court referrals involving murderers suspected to suffer from mental abnormality were recorded.
- (2) The relevant, possible and available informations about the case and defendant was considered.
- (3) Behaviour observed at indoors on various occasions, each time atleast for

15 days at a stretch, on at least two occasions.

- (4) Defendants history of illness, mental status at present and before the time of offence and scenerio projected with data obtained to analyse murder.
- (5) Each murder was subjected to analysis regarding motive, gain, intention for primary or secondary gain, revenge, sex, jealousy or political advantage.
- (6) Diagnosis of each who was referred for abnormal behaviour in present setting was done as per ICD-9.
- (7) Comparison with similar number of non-psychotic murders noted at random selection was done as per verification of principal differences, such as malice afore thought, 'Mens-real', preparation and execution of crime.

OBSERVATION

Of the 15 referrals, 13 were psychotics, one was found to be suffering from depression, reactive to the act related, guilt feelings while the other was malingering mental symptoms for advantages.

Amongst the psychotics, schizophrenia was found in 5, drug related psychosis in 3, epilepsy in 1, affective psychosis (depression) in 1, mental subnormality in 1 and paranoid illness in 2.

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Age of psychotics ranged from 20 to 29 years and that of non-psychotic group from 15 to 69 years.

Male:female ratio in psychotic population was 10 : 3 and in non-psychotic group it was 12:1.

In the 13 psychotic patients, 7 had murdered family relations 3 had killed acquaintances and other three total strangers. More family members were victim of non-psychotic murders.

Excessive violence was used by all the thirteen patients, which was in the form of beheading with heavy cutting weapons and repeated chopping, manual strangulation, crushing head with heavy stones, clubs etc.

Excessive violence was found in only 4 of non-psychotic situations of crime. More exact forms like using ropes, sticks for strangulation, stabbing, non mutating form like poisoning etc. were found in non-psychotic murders.

No external provocation was present to stimulate crime in 11 of psychotics, compared to 4 in non-psychotic situations. No prior thought of murdering was found in 11 of 13 murders committed by psychotics whereas in non-psychotic group 9 of the murderers had prior thought of murdering.

No guilt feeling or hostility towards victims was associated in any of the psychotic murders. 3 of the 13 believed the victims to be only sleeping and were never dead and still communicated verbally with them. All of them expressed the events elaborately. One of the lady murderer, aged 62, described the scene as if others are doing it, while doing herself and watching it. She later had committed suicide in jail premises. Six had guilt feelings amongst nonpsychotics after committing the act whereas 7 had expressed satisfaction over the act.

Multiple murders were committed by 3 of the psychotics. These were instantaneous, occurred in a series as if the person had gone "Amok". In one patient of epilepsy, repea-

tion of crime was observed. Addiction in form of chronic cannabis and alcohol abuse were related to murder in 3 subjects.

Four non-psychotic murderers had accomplices and had attacked the victim in unison. One non-psychotic murderer had attempted to murder a person who also was in the jail as an undertrial prisoner.

Amongst non-psychotics, three of the murderers had attempted suicide in post event period while one committed after he got convicted for life imprisonment. Thus, significant differences were the absence of malice aforethought and excessive violence in non psychotic control group whereas no accomplices and absence of guilt feelings whatsoever in psychotic crimes.

One of the psychotic murderer, was mentally subnormal who had killed her child. Mental subnormality in her had played significant role. Amongst non-psychotic cases, property dispute (6 cases), monetary gain (2 cases), sexual jealousy (4 cases) and murder as part of suicide (1 case) were found as contributory factor for committing crime.

DISCUSSION

Majority of psychotic patients were in the age group of 20 to 39 in the present study (9 out of 13, 68.5%). It is in agreement with the findings of Kishore et al. (1970).

In Indian setting, a large number of non-psychotic murders are result of family feuds (45%) and sexual motives (33.5%) (Somasundram, 1970). In the present study sexual motives accounted for 30.7% and in 46% was due to family feuds and can be grouped as domestic crimes. The observation in present series is in accordance with that of Somasundaram (1970) in the non-psychotic group. However, the psychotic-homicide can not be generalised as domestic crimes.

The present study does not agree fully with the view that schizophrenics rarely kill and their motive is often not discovered (Gilles, 1965). Also that they tend to arise out

of difficulty in relationship rather than arising from thought disorder. Five out of thirteen subjects studied were schizophrenics and homicide had direct relationship to their thought content.

With reference to premorbid state of the individual the present study is retrospective and the data available was not sufficient, however, in analysis of criminal situation the study has been to a large extent objective.

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