

HOMICIDE AND MENTAL ILLNESS IN SINGAPORE

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SYNOPSIS

Contrary to the myth that homicide is often committed by the mentally insane, this study of homicide in Singapore indicates that only 10.9% of those accused were associated with mental abnormality. Of the 64 accused studied, there were 61 men and 3 women. Fifty per cent belonged to the younger age group (15-24 years). In a quarter of the cases there was evidence of alcohol intoxication. The commonest method of killing was with sharp instruments (eg. knife, axe or chopper). Seventy-five per cent of victims of normal accused were strangers but 6 out of the 9 victims of abnormal accused were known to them.

INTRODUCTION

In Dostoevsky's celebrated novel, 'Crime and Punishment' a question was raised, "So ... who then ... committed the murder."

It is a popular misconception that homicide is perpetrated mainly by those who are mentally insane. Driver, West and Faulk (1) examined 66 persons found guilty of murder or manslaughter in England and diagnosed mental disorder in 41%. The west of Scotland survey by Gillies (2) showed that 82% of men and 55% of women accused of homicide were mentally normal.

The term homicide encompasses the offences of murder, manslaughter and infanticide. The psychiatric illness commonly associated with homicide is schizophrenia. A fatal assault by a schizophrenic patient may occur in response to an auditory hallucination or delusion of persecution, and disturbance of interpersonal relationship often triggers violence (3). In this group, paranoid symptomatology is common and sometimes associated with morbid jealousy (delusion of infidelity of spouse). In the study by Mowat (4), morbid jealousy accounted for 12% of insane male murderers and 3% of insane female murderers.

Another psychiatric disorder associated with homicide is the 'psychopathic' personality. This is a nebulous term and the existence of this behaviour as an 'illness' is disputed. It describes a person as rebellious, emotionally immature, lacking foresight (5)

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with a propensity to be socially irresponsible and physically aggressive. Wootton (6) suggested that it "makes nonsense of every attempt to distinguish the sick from the healthy delinquent" because "mental abnormality is inferred from antisocial behaviour while antisocial behaviour is explained by mental abnormality."

West had reported homicide by depressed patients (7) - the psychoanalytical view of depression is an inhibition of aggressive responses to frustration. There is a phenomenological relationship between suicide and homicide and they not infrequently occur together.

Mentally subnormal patients rarely exhibit aggressive behaviour and epileptics are no more violent than the rest of the population (8) but may commit criminal offence during the post ictal confusional state (9, 10). Gillies noted only 2 cases of epilepsy in 400 murders (2). Alcohol is commonly associated with violence and Virkkunen observed that in 79% of homicide, alcohol was detected in either the murderer or the victim (3).

The aim of this study is to examine the pattern of homicide in Singapore and the relationship with mental illness.

MATERIALS AND METHOD

All individuals charged with homicide in Singapore are remanded in custody at Changi Prison and examined by a psychiatrist from Woodbridge Hospital. They are assessed for any evidence of mental illness, whether or not responsibility was substantially diminished from psychiatric causes and fitness to stand trial. The case notes are kept in Woodbridge Hospital and in this survey we were only able to trace the records of 64 persons accused of homicide in 1980-82.

In the context of this survey the broad term 'mental illness' includes psychosis, neurosis and mental subnormality but excludes personality disorder.

RESULTS

There were 64 accused in the study (Table 1) with 61 men and 3 women. Psychiatric illness was diagnosed in 7 (10.9%) and this included 2 women (one had puerperal depression and the other suffered from schizophrenia). Of the 5 abnormal male accused there were 2 with schizophrenia, an epileptic with mental subnormality, a case of transient psychosis (probably drug induced) and another with depressive illness. The majority of the accused (78.1%) were below the age of 35 years and 50% were from the age group of 15-24 years (Table 2).

TABLE 1 PSYCHIATRIC DIAGNOSIS OF ACCUSED

Psychiatric diagnosis	No
Normal	57
Schizophrenia	3
Mental subnormality	1
Depressive illness	2
Drug-induced psychosis	1
TOTAL	64

TABLE 2 AGE DISTRIBUTION OF ACCUSED

Years	Abnormal	Normal	Total	Percentage
15 - 24	1	31	32	50.0
25 - 34	4	14	18	28.1
35 - 44	1	5	6	9.4
45 - 54	1	2	3	4.7
55 & over	-	5	5	7.8
TOTAL	7	57	64	100.0

Alcohol intoxication was evident in 16 of the cases - all of whom were without any mental illness. The methods of killing included sharp instruments (eg. knife, axe and chopper) in 50% of homicide, blunt instruments (eg. wood, pipe) in 20% and strangulation in 15%. Two victims were drowned, a child was battered to death and only one victim died of gunshot wound.

Twenty-seven victims (75%) of normal accused were strangers and 9 (25%) were either friends or neighbours (Table 3). Only 3 of the 9 victims of abnormal accused were strangers and the majority were known to them. A wife was killed by a schizophrenic husband and another slain by a husband with depressive illness. The young man with drug-induced psychosis stabbed the daughter and brother of a close friend; and a mother with puerperal depression killed her baby boy. There were 5 victims below the age of 15 years and the oldest victim was a 64 year-old watchman.

TABLE 3 RELATIONSHIP OF VICTIMS TO ACCUSED

	Victims of abnormal accused	Victims of normal accused
Relatives		
Wife	2	-
Son	1	-
Friends/ Neighbours	3	9
Strangers	3	27
TOTAL	9	36

DISCUSSION

Konrad Lorenz (11) viewed aggression as inherent in human nature but the behavioural scientist sees it as a response to frustration that reduces internal tension. Violence is an expression of aggressive feeling but there is little evidence to support the popular belief that all dangerous offenders are mentally ill (12). Whereas rates of most major mental illnesses had neither increased nor decreased in the last 100 years in the USA, the rates of violent crimes had shown a steady increase (13).

Homicide is predominantly a male activity and particularly amongst the younger age group. In our study the sex ratio is 20.3 males : 1 female; and 78.1% of the offenders were below 35 years - many of whom were members of secret societies.

The frequency of psychiatric abnormality in the sample is only 10.9%, which is lower than the west of Scotland survey (2). This is mainly because the vague category of 'personality disorder' was included in the latter study. Two patients with schizophrenia were found to be of unsound mind at the time of the crime and the third was convicted. The mentally subnormal accused was unfit to plead; the mother charged with infanticide was admitted to Woodbridge Hospital and the young man with drug-induced psychosis is still awaiting trial.

Alcohol intoxication and homicide is more often seen in the West than in Singapore (2, 3). Physically assaultive behaviour is frequently encountered in drinking places or the adjoining neighbourhood (14). This pattern is observed even in Singapore where in many incidents, death ensued after a brawl in the bar.

Sharp instrument is the popular weapon and shooting is very uncommon - this is because of the strict law on possession of firearms. Homicide in the west has a higher incidence of shooting (2, 15) and the pattern in Singapore is similar to that of Hong Kong (16).

The victim of a psychiatric patient is often a relative, friend or someone known to him. The normal accused is often associated with the death of a stranger - this is well illustrated in the results. Men kill their wives more commonly than vice versa. Sexual homicide usually occurs in a panic during the commission of the offence - there was a single case of rape-cum-murder. Fottrell (14) suggested that victims might play a considerable role consciously or subconsciously in provoking an attack. Victims of alcohol-intoxicated offenders are commonly found to have consumed alcohol themselves.

ACKNOWLEDGEMENT

The authors acknowledge the support of Dr Teo Seng Hock, Officiating Director of Woodbridge Hospital

and the indefatigable assistance of the staff in the Medical Records Office.

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