

**Case Report** 

# **Repeated maternal filicide: Importance of relationship between personality disorders** and malingering in criminal responsibility evaluation-a case report from forensic psychiatric perspective in Türkiye

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### Abstract

Maternal filicide is the homicide of a child by the mother, it is defined as maternal filicide that multifaceted phenomenon and is often the subject of forensic psychiatric evaluation. A woman 32 years old is on trial for the homicide of her 3 years and 8 months old daughter by throwing her off the balcony. Investigation of her judicial file; 3 years and 5 months old son had also died in 3 years ago, falling from the 6th floor balcony and she had also been investigated in this regard. In her medical history, there is outpatient follow-ups and drug prescriptions with the diagnosis of 'behavioral disorders'. Psychiatric examination of the person in our department, she was in a simulation effort and was decided in presence of personality disorder rather than mental illness and reported as having full criminal responsibility. It should be kept in mind that malingering may occur as a component of personality disorders and the person should be taken under observation and an opinion should be given with attitudes and behaviours during hospitalisation and repeated examinations.

Keywords: Agression, homicide, filicide, maternal filicide, mental disorders, personality disorder, malingering, criminal responsibility

## **INTRODUCTION**

'Filicide' is an umbrella term which is parent kills his / her own child. When the event occurs in first 24 hour the term 'neonaticide', in a first year 'Infanticide' used. Filicide behaviour includes non-intentional (such as abandonment or neglect) or intentional act of killing, to fatal ways (such as suffocation, strangulation, and stabbing) overt child homicide. If the perpetrator is father; 'paternal filicide' and mother; 'maternal filicide' is called [1-5].

According to Resnick's maternal filicide motivation categorization [6]; (1) Homicides committed out of love for the child in order to protect him/her from imaginary or real suffering. (2) Homicides associated with acute psychotic exacerbations, epileptic attacks or delusions. (3) Homicides in which an unwanted child is killed to remove the mother from the mother's life. (4) Homicides involving children who die as a result of accidental or negligent deaths without a clear homicidal intention. (5) Homicides in which a child is killed to inflict pain on a spouse out of revenge.

Orban's categorization tipology of maternal filicide perpetrators [7]; (1) mothers who beat their children (sudden and impulsive anger); (2) mothers with mental illness (diagnosed with psychosis or major depression); (3) neonatal homicide (identifies infants killed in the first 24 hours of life); (4) women motivated by revenge (aggression against a partner is projected onto the child); (5) unwanted children (children killed by neglect or deliberate killing); (6) mercy killings (killings in which the mother has nothing to gain but is motivated to end the child's suffering).

#### CITATION

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Both categories included items describing situations in which maternal filicide occurred because of an acute exacerbation of psychosis, but other motivations were also identified. Some of these motivations were associated with personality disorders [7,8]. Personality disorders generally defines as impairment or dysfunction is an integral feature of whether extreme personality traits or behaviors. For example, Diagnostic and Statistical Manual of Mental Disorders (DSM) states that only "when personality traits are inflexible and maladaptive and cause significant functional impairment or subjective distress do they constitute Personality Disorders" [9].

It is a known fact that people with personality disorders, especially antisocial personality disorder, are more likely to be involved in crime and are prone to manipulation. In this context, they are frequently subjected to criminal responsibility assessment. Since they use their manipulation skills in these evaluations, it has been determined that they are often in simulation efforts. Simulation also named malingering is defined under some conditions the falsification or fabrication of observable and mental symptoms to gain desirable outcome. This includes the physical or mental benefits like leave from duty, tax/insurance settlement or fleeing from crime. Assessment of malingering in forensic context places great demands on the clinician, in addition to the definition above, the DSM-5 provides four factors, any combination of which is intended to prompt the clinician to "strongly suspect" malingering. Paraphrased, the factors are (1) medicolegal context of the presentation; (2) presence of Antisocial Personality Disorder (ASPD) in the subject; (3) subject who is uncooperative with evaluation and/or treatment; and a (4) marked discrepancy between the subjectively claimed symptoms and the objective findings and observations [10-13].

To sum up, maternal filicide is a tragic and complex crime despite the relatively low incidence of these offences, forensic mental health professionals are frequently confronted with various legal questions such as 'insanity, competence to stand trial, diminished capacity and criminal responsibility', although on a different basis in each country [14]. Important to find mental disorders, particularly personality disorders, to evaluate the criminal responsibility of the perpetrator. This article explores a case involving repeated incidents of maternal filicide, shedding light on the importance of assessing personality disorders and considering the possibility of malingering during forensic psychiatric evaluations.

## CASE

32 years-old- female is on trial for the murder of her 3 years old boy and 8 months old daughter by throwing them off the balcony and the court sent to our department for the evaluation of criminal responsibility in accordance with Article 32 (\*Turkish Penal Code, Article 32 (1) A person lacking ability to perceive the legal meaning and consequences of the offense, or having considerably lost the capacity to control his/her actions due to insanity may not be subject to any punishment. However, security precautions are imposed for such individuals (2). Even if not to such an extent stated in the first subsection, a person lacking ability to control or direct his/her actions in respect of offense committed by him/her is sentenced to twenty five years imprisonment instead of heavy life imprisonment and to twenty years imprisonment instead of life imprisonment) of the Turkish Penal Code (The Turkish Penal Code (TPC, Law No. 5237) has been enacted in 2004 and is in force since 2005) [15,16].

In the examination of the judicial documents; according to witness statements (neighbours and relatives) she's arguing with her neighbours continuosly and neglect her child, she avoids giving care, couldn't afford it. According to her husband she's withdrawn, asocial, didn't talk much, sometimes had sudden temper tantrums. although the defendant stated in her statement that child fell spontaneously and that she did not throw her, it was determined that the person threw the child out of the window when the cameras that saw the scene were examined. When the judicial history of the person was evaluated, it was determined that her 3 years and 5 months old son had also died 3 years ago falling from the 6th floor balcony and that the person had undergone an investigation in this regard. In addition, in the statement of one of the witnesses, it was encountered that the defendant, with whom they had met at the funeral ceremony of the previous child, stated "say to my husband don't make me angry, I will throw this child out of the window too".

In the medical history of the patient, a medical board report on disability with the diagnosis of 'mild mental retardation' in a training and research hospital 3 years ago, outpatient follow-ups with the diagnosis codes 'non-organic psychotic disorders', 'generalised anxiety disorders', 'bipolar affective disorder', 'behavioural disorders' and 'depressive seizure' and 'Risperidone, There are drug prescriptions for the active substances 'Duloxetine, Quetiapine Fumarate, Sodium Valproate', there is also a report that criminal responsibility was evaluated in a training and research hospital and that the criminal responsibility was reduced with the diagnosis of 'behavioural disorders due to mild mental retardation' regarding this incident. The person did not comply with the Rorschach test and Kent EGY intelligence tests applied by us due to her negativist attitude, and her Intelligence Quotient (IQ) was determined as 61 in the SD Porteus Labyrinths test, again taking into account her low compliance. The diagnosis of 'behavioural disorders' that our case had received in the past and the fact that he was in simulation effort in the psychiatric examination and psychometric test studies were evaluated in the direction of personality disorder (mixt) and borderline intellectual functioning rather than mental disorder, and it was reported as full criminal responsibility.

Although maternal filicide cases are frequently encountered in the literature, its recurrent form as seen in our case was found to be rare, and our study was found valuable in this respect. It was aimed to raise awareness about the concept of filicide, which causes emotional reactions in the society, by discussing the case of a mother who was involved in the murder of her two children by falling from apart.

#### DISCUSSION

The case presented leads us to suggest that it is necessary to consider a more complex series of vulnerability factors, characteristics of the couples' relationships, and feared or imminent loss of the relationship [17]. These factors should be explored in addition to the usually discussed issues of relationship of the parents and child [18]. These factors may interact to become a toxic mix resulting in the fatal outcomes. Understanding of cases of maternal filicide, especially involving battering, retaliating or mentally ill women [19]. The issue of feared or actual loss of the spouse relationship has not been considered as a specific factor before [20]. The original 'Medea complex' formulation of Stern [21] related maternal violence to displaced anger from the husband, a theme continued in the 'retaliating mothers' as a revenge homicide subgroup in the later typologies of Resnick and d'Orban. The issue of anger towards to husband is obvious in this case [22].

Revenge type maternal filicide found tightly associated with personality disorders, especially antisocial personality disorders [23,24]. Our case was also evaluated in this subtype in accordance with the literature and personality disorder was found in the patient. In the light of the fact that people with personality disorders, especially antisocial personality disorder, are prone to manipulation [25] and are in an effort to malingering, our case was also in an effort to malingering during our criminal responsibility assessment examinations. We think that the report of reduced criminal responsibility with a diagnosis of mild mental retardation in a training and research hospital, which constituted a contradiction and caused the case to be sent to us, was a defence of insanity obtained by malingering due to the personality disorder of the person [26].

On the other hand thinking about our case's former diagnosis of 'depressive seizures' the treatment of depression may empower the mother. But if the mother feels helpless and tired, empowerment and treatment may activate her without changing the stress and may lead to suicidal and filicidal behavior19. Clinicians should pay attention to depressed mothers especially suicidal or even filicidal ideations. Because of that besides the treatment of depression should be advised stress diminished such as help taking care of child [27].

Unlike mental health clinicians who work in collaboration with patients and accept what they say as true in advance, professionals working in the field of forensic psychiatry [28], who try to determine criminal responsibility with the meticulousness of a detective, reveal their responsibilities in differentiating situations such as mental illness and personality disorders in people who commit maternal filicide offences, as in this case, in which we issued a report stating that criminal responsibility is complete.

## CONCLUSION

The crime of maternal filicide involves a significant tragedy for families and communities, especially when this crime becomes recurrent, leading to psychological trauma that can reach irreparable dimensions. Therefore, it is crucial for mothers who commit filicide to be placed under close monitoring and undergo more frequent psychiatric follow-ups. Additionally, considering the high association of revenge-type maternal filicide cases with personality disorders, ensuring the early diagnosis and treatment of these personality disorders can prevent the recurrence of the crime. However, it is considered important to conduct psychometric tests (MMPI-Minnesota Multiphasic Personality Inventory-etc.) and forensic psychiatric examinations to assess the criminal responsibility of individuals involved in this crime, given their manipulation skills and simulation efforts, which are components of personality disorders. It is even recommended to use tests such as M-FAST (The Miller Forensic Assessment of Symptoms Test) [29], RMT (Rey 15-Item Memory Test) [30-32] and WMT (Word Memory Test) [33] etc. that measure this propensity.

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#### **Conflict of Interests**

The authors declare that there is no conflict of interest in the study.

#### **Financial Disclosure**

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#### **Patient Informed Consent**

Informed consent has been obtained.

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