“Not Guilty by Reason of Insanity”: Common Characteristics in Six Homicide Cases from Hatay, Turkey

Keywords: NGRI; Insanity; Homicide; Filicide; Hatay; Turkey

Abstract

Background: Not guilty by reason of insanity is a court verdict, meaning the defendant is not responsible for the crime because of his or her mental illness. In this article we aim to describe six not guilty by reason of insanity judged homicide cases in our province and discuss their features which are globally common.

Methods: We collected data from the crime court records of the Hatay province in Turkey concluded between 2009 and 2013 (both years included).

Results: Five of the victims were blood relatives and one was the spouse of the perpetrator. All victims were co-living with the perpetrator. None of the perpetrators used firearms. Three victims were children killed by their mothers.

Conclusion: Not guilty by the reason insanity is a specific and rare judgement in criminal courts, whereas there are some characteristics which are universally common and predominant.

Introduction

Not guilty by reason of insanity (NGRI) is a verdict issued in criminal cases whereby the defendant, is not held responsible for his or her criminal actions. The presence of mental illness is a necessity for the legal determinations of insanity. On the other hand the defendant might have a medically defined psychological disorder but still not be insane. Since it is a legal condition the defendant is evaluated by forensic mental health professionals with the appropriate tests according to the jurisdiction before the court’s decision [1]. Article 32 in the Turkish Criminal Code says: “A person lacking ability to perceive the legal meaning and consequences of the offense, or having considerably lost the capacity to control his actions due to insanity may not be subject to any punishment. However, security precautions are imposed for such individuals [2]. In Turkey, the decision is given according to the expert witness report of a committee of forensic psychiatrists and forensic medicine specialists who evaluates the defendant for several weeks in a health care institution.

Although NGRI verdict is not specific to any crime, it becomes more important in case of homicide, for judgment authorities, the case parties and also forensic mental health professionals. Today there are many studies on the associations between homicide and mental illnesses [3-6]. Most of the academic research and discussions on insanity defence are about homicides [7-11]. Therefore mental evaluation of a homicide defendant is a critical issue for forensic psychiatrists and forensic medicine specialists. Since NGRI is an uncommon verdict, even small series may constitute valuable information for experts. Our aim is to describe the six NGRI judged homicide cases in our province and discuss their common properties in reference to international literature.

Material and Methods

We collected our data retrospectively from the reasoned judgement records of criminal courts of Hatay a province of Turkey which were concluded between 2009 and 2013 both years included. Therefore the homicides were not necessarily committed in this period; but rather the courts gave their final decision. A total of 83 homicide cases were concluded in the period. Six verdicts (of total number of verdicts) were NGRI which were taken into the scope of this study. The psychiatric diagnoses had been made at a forensic psychiatric evaluation by psychiatrists and forensic medicine specialists after the crime.

Results

There were three male and three female victims between 2 months and 54 years of age. Three of five perpetrators were female and two of them were male. Median age of perpetrators was 27 (19-66). Details about age and genders, relation between victim and perpetrator, cause of death, place and description of the event, history of mental illness, treatment and documented diagnosis after psychiatric evaluation for each case are presented in Table 1.

Discussion

There are remarkable points that are common. In all of our cases, we see that the victim is a blood relative or spouse of the perpetrator. Besides one victim who stayed with the offender (his father) in regular periods although he has his own house, all victims shared the same houses with their killers. In a study in which 1136 psychiatric patients discharged from mental institutions were followed, violence was mostly documented to be targeted against family members or friends and mostly take place at home [12]. In another study comparing (a) people who committed homicide and judged NGRI versus (b) people who were convicted murderers, the insanity acquittees were more likely to be seen as psychotic at the time of the index offense.

and also were more likely to have killed their blood relatives [13]. None of the perpetrators used firearms in our group. According to a large group (n: 620) of homicidal autopsy series in Turkey 55% of the victims are killed by firearms [14]. The number is 74 % in America and 21% on average in Europe [15]. We believe a possible explanation for this discrepancy in weapons used in NGRI and non-NGRI cases could be that killing a person with a firearm often needs intention and planning, especially in countries where obtaining a fire arm is not easy.

Three cases of filicides committed by two young mothers are noticeable in our group. It is a significant cause of child mortality in many societies including wealthy industrialized nations [16-19]. Both our cases are associated with suicide. Resnick, who first classified child murders in 1969 put “filicide associated with suicide” under the classification of “altruistic filicides” [20]. In two cases there are similarities in testimonies of friends and relatives on the mother who committed the homicide. Psychiatric changes first appeared following the birth of their children. We know that postpartum

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### Table 1: Individual details of NGRI cases.

<table>
<thead>
<tr>
<th>Victim info.</th>
<th>Offender Information</th>
<th>Cause of death</th>
<th>Place</th>
<th>Description of the Event and Reasons</th>
<th>History of Mental Illness and Treatment</th>
<th>Documented diagnosis</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sex</td>
<td>Age</td>
<td>Sex</td>
<td>Age</td>
<td>Relation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>38 years</td>
<td>Male</td>
<td>66 years</td>
<td>Father of victim</td>
<td>Sharp force injury</td>
<td>House of the offender</td>
</tr>
<tr>
<td>Female</td>
<td>54 years</td>
<td>Male</td>
<td>53 years</td>
<td>Husband of victim</td>
<td>Head trauma and sharp force injury</td>
<td>Field</td>
</tr>
<tr>
<td>Female</td>
<td>28 years</td>
<td>Female</td>
<td>19 years</td>
<td>Sister of victim</td>
<td>Sharp force injury</td>
<td>Home of both the perpetrator and the victim</td>
</tr>
<tr>
<td>Male</td>
<td>4 months</td>
<td>Female</td>
<td>27 years</td>
<td>Mother of victim</td>
<td>Blunt force trauma</td>
<td>House they live together</td>
</tr>
<tr>
<td>Female</td>
<td>1 year</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>4 years</td>
<td>Female</td>
<td>21 years</td>
<td>Mother of victims</td>
<td>Asphyxia</td>
<td>House they live together</td>
</tr>
</tbody>
</table>

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depression and other postpartum mood disorders are important public health problems universally [21-25]. In our sample, symptoms were serious enough to cause both women to see a psychiatrist and medication was initiated. A recent study of filicides showed that 40% of perpetrators, mostly mothers rather than fathers, had a history of mental health problems [26]. Another study showed both parents are equally likely to be convicted of a homicide offence; however fathers were more likely to be jailed than mothers for committing filicide [17]. According to our samples, women are more prone to commit filicide under the effect of mental illness, so they are more likely to be judged as not guilty for the reason of insanity.

For a few decades, a similar verdict called “Guilty but Mentally Ill (GBMI)” has been issued in some American states GBMI means that, the defendant is guilty of an offense and was mentally ill at the time of that offense. However, the defendant was not legally insane at the time of the offense [27]. Although the GBMI verdict is allowed in only a minority of American states, it receives substantial press coverage and is the subject of much controversy [28,29]. Even though the GBMI verdict is not eligible in Turkey, if it were, in our opinion; those 6 cases would be judged legally insane at the time of their offense.

Conclusion

We have evaluated six cases of homicides committed by five people who were judged NGRI. All victims were blood relatives of the perpetrators except one, who was the wife of the perpetrator. All victims were sharing the same house with his or her perpetrator except one, who however stayed with his father (the perpetrator) for longer periods of time. None of the homicides were committed by firearm. Three child killing events committed by two mothers drew our attention to postpartum mental mood disorders of women. There were no men in our group who committed filicide.

References