

# Borderline Personality Disorder and Filicide: A case report. Trastorno Límite de la Personalidad y Filicidio: Discusión de caso.

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## **ABSTRACT**

*Violence against children is a very important concern in the public health system. Filicide is a deliberate act of a mother or father killing their own child. The objective of this study is to describe a case of filicide associated with the presence of borderline personality disorder, discussing the assessment of criminal imputability related to this case, using the biopsychological criterion. Child protection measures should be actively offered when parents present stress and lack of emotional balance, while they need to take care of children.*

**Keywords:** Homicide, murder, aggression, mental disorder, personality disorder.

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## INTRODUCTION

Filicide is the murder of children by parents. Despite the relatively low incidence of these crimes, forensic mental health professionals are often asked by the courts to answer several legal questions: insanity, competence, diminished capacity and criminal responsibility. The filicidal acts result in a brutal rupture in family functioning, with transgression of the bonds of filiation considered sacred in our society.

When we revise the aggressor-victim (parent-child) relationship, we have the following definitions from the international literature, present in the pioneering article by Resnick<sup>1</sup> (1969): neonaticide, murder of a newborn within the first 24 hours of life; filicide, murder of an older child. Infanticide, on the other hand, is a general term used for the murder of children<sup>1</sup>.

In a recent systematic review<sup>2</sup>, the incidence of neonaticide ranged from 0.07 (Finland, 1980-2000) to 8.5 per 100,000 births (Austria, 1975-2001). High incidences were also found in Lithuania and Estonia (above five neonaticides per 100,000 births). Research on this topic in Tanzania (Africa) showed great variation in relation to European countries: 27.7 neonaticides per 100,000 births. Sociocultural factors such as stigma and religion influence differences between countries.

Resnick<sup>(1)</sup> examined the psychiatric literature in relation to the murder of children, studying 131 cases of filicide. The data was collected through a variety of sources and countries over centuries (1751-1967). He described five categories, which remain cited to this day: 1) altruistic filicide, in which the individual believes that the child or family is going through a situation from which it is not possible to escape or an imminent damnation. The mental disorders most associated with this group are depression, including psychotic depression, and schizophrenia<sup>(3,2)</sup> Filicide associated with acute psychosis, which involves the murder of children by parents suffering from severe mental disorders at the time of the offense. The main characteristic of this group is the absence of a rational or understandable reason (punishment, revenge or secondary gain); 2) Filicide of an unwanted child, often caused by illegitimacy, or the child being conceived through an extramarital relationship; 4)

Accidental filicide, which may be due to abuse or negligence. The death of the child comes as the consequence of a beating, and in many cases the parents had no intention of murdering the child; 5) Filicide related to revenge or retaliation against the other spouse. This group is characterized by severe personality disorders, chaotic marital relationships, and a previous history of self-injury<sup>(4)</sup>.

Biological parents are the authors of most cases of filicide, in contrast to the popular belief that tends to indicate stepmothers and stepfathers as the main perpetrators. In a retrospective study in Finland, 59% of filicides were committed by mothers, 39% by fathers and only 2% by stepfathers<sup>(5)</sup>. In addition, fathers and mothers who kill their children have higher rates of serious and successful suicide attempts, with indications that women who commit this type of homicide are more likely to commit suicide after the act than men<sup>6</sup>.

The objective of this study is to describe a case of filicide associated with the presence of personality disorder, discussing the evaluation of criminal imputability related to it. The psychiatric diagnosis of the case was established according to the DSM-IV criteria for mental disorders<sup>(7)</sup> and personality disorders<sup>(8)</sup>.

### Case report

E, woman, 28 years old, incomplete high school education, saleswoman, residing with a partner at the time of the crime. She was accused of poisoning her two-year-old son with rat poison she had in her home. In the criminal case, there is a report of the crime was committed as revenge against the boy's father, in retaliation for the fact that he broke up with her and had a relationship with another woman.

It was reported alcohol and cocaine use by her. She had several short-term jobs, but she always disagreed with bosses and thought she was harmed by them. History of two previous suicide attempts, ingesting medication, after break-ups of previous relationships, always unstable and turbulent.

In the psychiatric examination, she presented irritable mood, sometimes referring feelings of emptiness, sometimes feelings of extreme anger towards the former companion and for being imprisoned. She mentioned that she thought about committing suicide, shortly after killing her son,

because she was desperate, after being abandoned by her partner. No delusions or hallucinations.

Affective instability and mood reactivity, pattern of unstable relationships, recurrent suicide attempts and impulsivity pointed to the psychiatric diagnosis of Borderline Personality Disorder.

### Discussion

In Brazil, the criterion adopted by the penal code<sup>9</sup> for the evaluation of criminal liability is the biopsychological one: responsibility is only excluded if the agent, due to mental illness or delayed mental development, was, at the time of the crime, incapable of understanding (knowing the unlawfulness of the act) and determination (being free to choose whether or not to commit the crime). The biopsychological method requires the verification of the existence of a causal link between the abnormal mental state and the crime committed, that is, that this state, contemporary to the conduct, has partially or completely deprived the agent of any of the aforementioned psychological capacities (whether intellectual or volitional). Forensic psychiatric examination is indispensable whenever there are doubts regarding the mental health of the accused.

Personality disorders have been seen in parricidal offenders, but only in specific samples. In an study by Liettu, *et al.*<sup>10</sup>, the researchers retrospectively reviewed the cases of 86 men who were matricidal and 106 men who were patricidal in Finland, from 1973 to 2004, to determine the presence of mental disorders in these offenders. They found that patricidal offenders were less likely to have a psychotic disorder but more likely to have a personality disorder, especially borderline personality disorder. These men reported, as the reason for the crime, a previous conflict with the victim and were less often found not responsible, compared to the matricidal killers. Other studies have found a higher risk of violent behavior in individuals with borderline personality disorder, followed up for one year, especially towards close people or family members<sup>11</sup>.

Regarding the case, E was considered semi-imputable. The psychiatric expert considered that there was a loss of the patient's volition and

inability to control aggressive impulses. She was also involuntarily hospitalized. A study<sup>12</sup> found that filicidal mothers, compared to fathers, receive more sentences of involuntary hospitalization than detention, which is illustrated by this case.

There are few studies in the literature on the association between borderline personality disorder and filicide. In a case series study<sup>13</sup> of 10 filicidal parents, the main diagnoses found were mood disorders. There were, however, four cases of borderline personality disorder in this sample.

Kauppi *et al.*<sup>(5)</sup> conducted a retrospective study, finding 65 filicides of older children. Psychosis or psychotic depression was diagnosed in 51% of maternal filicides and 20% of paternal filicides. Personality disorders, most often found, with borderline characteristics, including the presence of immaturity, impulsivity and poor emotional control, being the most frequently found, as the only diagnosis or in comorbidity with depression and alcoholism, in 67% of paternal filicides and 41% of maternal filicides. Some cases of personality disorder in this sample had reduced criminal liability. Mental stress caused by marital conflict preceding the aggression was reported by 74% of these mothers. The child was a boy in 58% of the cases. It has been suggested<sup>14</sup> that filicidal mothers more frequently kill boys, who are over-represented among the older filicide victims. The case of E illustrates several of these aspects.

It is important that social support and mental health services to be available to families. Child protection measures should be actively offered when parents present stress and lack of emotional balance, while they need to take care of children. Access to hospitalization when indicated, and to alternative homes (sheltered homes, therapeutic communities) for individuals with mental disorders, when necessary, could help reduce the incidence of filicide cases and improve the quality of life of parents and children in many of these families.

The determination of criminal responsibility is essential for the proper referral of people in any criminal law system, thus protecting human rights and referring to psychiatric treatment those who need it.

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