Crime Profiling Report: Examining Child Homicide

Edson Kieu, Nanyang Technological University
Crime Profiling Report

Examining Child Homicide

Kieu L. H. Edson (U1130878H)
4/18/2014
Preface

This report is prepared by a third year student majoring in Sociology (Bachelor of Arts) and second majoring in Psychology at Nanyang Technological University (NTU). The writer has exposure to the current module of Forensic Psychology of Crime, Terrorism and Disasters. Relevant training in Psychology includes abnormal psychology, cognitive psychology, personality psychology, industrial-organizational psychology and psychometrics.

Due to the writer’s competence level in the field of forensic psychology, caution should be taken in the usage of the research but nonetheless are dutifully examined to present the research findings with best efforts. This report should not be distributed beyond the circle of the investigative team and will not be suitable for use by law authorities as a form of evidence.
# Table of Contents

1. Introduction  
   2.1 Legal and Local Issues Relating to the Crime  
   2.2 Investigation and Operational Considerations  
   2.3 Criminalistics and Forensic Science Considerations  
   2.4 Psychological and Behavioural Considerations  
3. General Nomothetic Crime Profile  
4. Local Case Study (PP v AFR)  
5. Possible Preventive Measures of Homicide Prevention  
6. Summary Chart  
7. Bibliography  
8. Appendix A  
9. Appendix B  
10. Appendix C
This paper will review the general instances of child homicide, breakdown and examine the various typologies specific to filicide which is a generic term referring to the killing of children by their parents or step-parents. This term encompasses neonaticide and infanticide which is commonly defined as killing newborn infant of less than a month old and killing of a child within 24 hours of the child’s birth respectively but for analytical purposes, these terms will be kept distinct. World Health Organization has an estimated global rate of 2.4 per 100 000. Based on the contextual variations of filicide in across cultures, this paper will be focused on Anglo-American legalities and statistics which are comparable to Singapore, based on the similarities of current levels of societal values, norms and legal developments. The term ‘child’ is this paper refers to ‘minors’ under the law.

Historically Anglo-American began the historical treatment of infanticide beginning of the 16th century in England. Originally, infanticide was characterized as a female crime which was at that time seen to be a state intrusion into ‘personal’ spaces. Yet increased social instability related to large numbers of vagabonds brought about a necessity to regulate births and the Poor Law enacted by the state legitimized the rational incentive to eliminate ‘bastardly’ children (Hoffer & Hull, 1981; Jackson, 1996; Meyer and Oberman, 2001; Wrightson, 1982). However, in 1624 infanticide was formally legislated against on any infant’s death and the mother is presumed guilty unless proven it was stillborn, setting societal moral precedence (Gurevich, 2009). Today’s modern Offences Against Person Act began in Britain in 1803 that repealed 1624 infanticide law that considers maternal destruction of a new-borns as a murder (Gurevich, 2009). Following that, British Infanticide Act of 1922 established infanticide solely as a female offense (Rose, 1986; Ward, 2002; Williams, 1978) due to baby farms that were brought about by mothers who were unable to care for their children which often resulted in neglect and death; an indirect form of infanticide (Arnot, 1994; Badinter, 1981).

Following the moral shifts in Anglo-American laws, we can note that under the criminal justice system, child (minor) abuse and homicide/infanticide is a relatively new construct. Child ill-treatment, physical abuse and murder often overlap in legal terminologies. In the US, notions of “family pathology” begun to surface and advance in the discovery of cruelty to children and subsequent neglect (Costin et al, 1996; Gordon, 1988), wherein the last several decades till now child protection has been developing. However, children’s abuses and homicide are difficult to prosecute and convict due to its private nature and are often reduced to lesser crimes in the US (USDHHS, 1995). Noting the issues, multidisciplinary approaches have sprung up reviewing social
and psychological issues in gathering required forensic evidences to aid in such cases (Gurevich, 2009).

With laws setting the basis of moral code in relation to children’s welfare, it is thus vital to look at the figures of the prevalence of child homicide in contrast to other age-groups.

In relation to Figure 1 above, child homicide for those under 14 years old are relatively rare in comparison to other age groups, with a peak of 2.2 homicides/100,000 and remained at 1.5 homicides/100,000 (US Department of Justice, 2011). While the figures may be low, if we cross reference this to Figure 2 below, we can discern the importance of reviewing crime-related murders of children. Based on the figures as highlighted in red, it is seen that family members causing death on minors under 18 years of age accounts for 19.3% of deaths with 50.5% of offenders aged 18-34. In addition, offenders who caused the death of infants are overwhelming caused by the age group of 18-34 years old, accounting for 81.2%.

In the case of Singapore, child homicide is likewise a rare phenomenon and even more so for cases related to filicide whereby the offenders are the parents themselves. Notably, there are three recent cases, where one involved a 31 year old woman charged with murder of her 9 year old son Gabriel Loh Zhen Jie. Another case is related to a 44 year old woman who has been charged with murder of her 17 month old son. Both cases happened in 2013 and 2014 respectively but have yet to proceed to court hearing. A particular case which will be the focus of this paper will be PP v AFR case with Sallehan Alauddin, a 27 year old male accused of murdering his 23-month-old daughter, Natalie Nikie Alisyia Sallehan, on 6th of January 2009.
As such, the focus of this paper will utilize the 2-step C.L.I.P. approach utilizing 4 angle considerations towards a holistic crime profiling and considerations, consisting of criminalistics and forensic science, legal, investigation and operations as well as psychological and behavioural considerations covering filicide and its variants. Filicide is an area for concern as intervention by the state and community could prevent tragedies such as child homicide. Violent filicide and child abuses leading to fatalistic neglect will be considered separately due to the vast differences in the nature of homicide.

2.1 Legal and Local Issues Relating to the Crime

Filicide is not differentiated from murder and culpable homicide in Singapore’s law with reference to 
PP v AFR who was charged with murder, although the accused may still be acquitted of any criminal charge if he is able make a defence on mistaken facts, accident or unsoundness of mind.

The penal code chapter 226, under section 299, states culpable homicide as “Whoever causes death by doing an act with the intention of causing death, or with the intention of causing such bodily injury as is likely to cause death, or with the knowledge that he is likely by such act to cause death,
commits the offence of culpable homicide.” Two forms of homicide are directly linked to the state of mind to which ego-syntonic homicide refers to a homicidal act that is rational and goal-directed. Ego-dys tonic homicide on the other hand is in reference to an altered state of consciousness and conflict that is maintained primarily on the unconscious level (Woon, 1985). Murder under section 300 as “except in the cases hereinafter excepted culpable homicide is murder — (a) if the act by which the death is caused is done with the intention of causing death; (b) if it is done with the intention of causing such bodily injury as the offender knows to be likely to cause the death of the person to whom the harm is caused; (c) if it is done with the intention of causing bodily injury to any person, and the bodily injury intended to be inflicted is sufficient in the ordinary course of nature to cause death; or (d) if the person committing the act knows that it is so imminently dangerous that it must in all probability cause death, or such bodily injury as is likely to cause death, and commits such act without any excuse for incurring the risk of causing death, or such injury as aforesaid.” Unlike culpable homicide, section 300 of the Penal Code explicitly refers to the state of mind utilizing terms such as “intention” and “knowledge”. The lack of intention for paternal filicide cases due to impulsive rage will be a determining criterion for a lower charge. However, Singapore’s laws with regard to child homicide and infanticide have similar penalties as culpable homicide (Chapter 226, Section 312 to 318) with imprisonment of up to ten years.

2.2 Investigation and Operational Considerations

Child murder is rare and accounts for 0.6 per 100,000 children under 15 years old in Sweden and 2.5 children per 100,000 under 18 in the United States of America (US) (Jason, Gilliland and Tyler, 1983), but despite its low figures, it is nevertheless a leading cause of child death in developed nations (Jason, 1983). Based on Singapore’s historical records by Woon (1985) on homicides, we are able to view that those victims under 14 accounts for only 6.3% of all homicide cases (Table 1 in Appendix A). A deeper review of the familial relationships highlights that parents-child homicide accounts for 18.5% of all intra-family homicide cases (Table 2 and 3 Appendix A). Understanding the nature of relationship between the offender and victim is vital as motives are embroiled in the relationships and the act of killing can be deemed as a form of catharsis from emotional strains and tensions of inter-personal relationships. Hence, the likelihood of reoffending is unlikely where the roots of child homicidal cases are found related to psychosocial and structural aspects of poverty, dysfunctional relationships and lack of social support.

Based on a review by Friedman et al. (2005), suggests that women engage in such crimes are often drastically different from men. Men often perpetrate these murders based on the need to exert
power over their family and women often act out of helplessness, fear of abuse and psychiatric episodes. As a family, both genders are found to be from the lower socio-economic groups (Harris et al, 2006; Schwartz and Isser, 2007). Hence, child homicides are often acted out based on altered mental state of the offender, albeit temporary and on impulse from men and long-term issues from women. Violent child homicide cases can be classified as lacking in mens reas whereby a lack of planning is observed and attack tools are primarily by battery and blunt objects or stabbing which is commonly available in the home. However, this does not include infanticide and neoanticide which is often based on child neglect bringing about death. Figures from Table 4 indicate that the more intimate the offender is to the victim, the higher likelihood that homicide will occur in the home and vice versa, the more distant the relationship, the killing will be in public places. Most of the violent child homicide cases are seen to be carried out in the homes and a majority of cases seems to be carried in one location without secondary crime scenes.

A study by Mathews et al (2013) saw child homicide causes radically different relating to the victim’s gender. Male victims often stem from interpersonal violence but infant abandonment is more likely attributed to girls. Teenage males are five times more likely to be victims of homicide than females during confrontations whereby physical violence as a parenting practice is a culturally accepted practice; a possible contributor to fatal child abuses. Notably, children under the age of 5 are most likely to be victimized and girls are more likely than boys to die as a result of neglect (76%). Male victims between the ages of 15 to 17 are more likely to be victims from their fathers (52.9%) by stab wounds. Based on data, sexual assault along with child homicide does not correlate strongly (Mathews, 2013). Furthermore, the study have shown that the perpetrator is more likely to be the mother and if there are both parents caring for the child in the point of death, homicide is less likely to happen. Amongst the various causes of death, top three cases lies in stab wounds (26.2%), blunt force trauma (23.5%) and infant abandonment (15.9%). Prior child abuses accounts for 44.5% of the cases, suggesting that half of the homicide cases could be violent outbursts from either parents (Mathews et al, 2013) (Table 5 Appendix A).

Based on the above information, investigations carried out by the police should first of all identify family as suspects. Through interviews, the police should look out for long-drawn unresolved issues for mothers and the mental state of fathers at the point of killing which is mostly based on momentary rage.
2.3 Criminalistics and Forensic Science Considerations

Evidences gathered on violent crimes are generally disorganized and are often not premeditated and acted out of impulse. Child abuse on the other hand is related to ongoing long-term neglect of the child, which is drastically different from the former. Hence, the following section will review filicide in terms of two broad categories of violent filicide and child abuses amounting to fatal neglect.

2.3.1 Violent Filicide or Infanticide (Not Exhaustive)

**Skull and Spinal Fractures**: Inflicted skull fractures needs to be differentiated from accidental injury. Fractures to the skull which is intentional may be more complex but being able to positively differentiate between inflicted or accidental is difficult (Picture 1 Appendix B). Spinal fractures are easier to detect foul play where accidents involving spinal fracture often occur with multiple injuries and direct impact to the spine and fractures would suggest inflicted harm.

**Subdural Haemorrhages**: Acute subdural haemorrhages (Picture 2 Appendix B) seem to be a sign of inflicted injury, referring to rupture of veins in the brain due to trauma, while this can be mistaken as “shaken baby syndrome” where simply shaking the infant could lead to head trauma. However, inflicted head trauma will reflect older bleeding and hypoxicischemic damage with varying degrees of traumatic axonal injury (Reichard et al, 2003; Stoodley et al 2002).

**Strangulation**: Presence of abrasions on the neck along with fingertip bruises would be found on the jawline and cheeks (Picture 3 Appendix B). Thyroid hormones are higher from inflicted strangulation by mechanical compression (Griest, 2010). Large cerebral infarction within vascular territories without visible head trauma would also suggest filicide (Bird et al, 1987).

**Cardiac Contusions and Lacerations**: Evidences of chest trauma can be gleaned from elevated cardiac enzymes that could detect cardiac injury. Elevated levels of Cardiac troponin I would be an indicator of myocardial contusion (Griest, 2010).

**Abdominal Injuries**: Mesenteric avulsion highlights blunt force abdominal trauma where whipping and tear will affect the small intestinal perforations.

2.3.2 Child Abuse and Fatal Neglect (Not Exhaustive)

**Cutaneous Injuries** (Griest, 2010): Most common forms of abuses that includes bruises, crushing tissue, blood vessel ruptures, abrasion and scratches. Infants that are not mobile and have bruises is an indicator of abuse while location of bruises such as the neck, back and abdomen are also contributing indicators. Children who are not abused frequent bruises away from bony areas and...
more often on soft parts of the body. Dating bruises will be vital to identify that there is more than a single episode of injury. Bruising of genitalia and ears are also symptomatic of abuse as these areas are rarely inured accidentally (Picture 4 Appendix B). Reviewing shapes of bruises will also shed light on the object that was used to inflict hurt.

**Lethal Neglect** (Griest, 2010): Usually brought about by starvation, malnutrition and dehydration. Active neglect refers to the caregiver intentionally withholding essential necessities whereas passive neglect is due to the caregiver’s focus of attention located elsewhere. This neglect will manifest itself in decreased subcutaneous adipose tissue and atrophy of musculature and decreased water in tissues. Visible traits can be viewed from scalp hair which will be dry and brittle with hairs falling off easily.

While there may be no simple findings to conclude homicide and neglect from accidents, medical technologies today can determine homicide from diseases and accidents from inflicted injuries.

### 2.4 Psychological and Behavioural Considerations

There are multiple motivations towards domestic violence against a child leading to death (Ewing, 1997). Some of the motivations cited are based on infuriating the other parent and in some cases, some offenders may not have lived up to their expected gender role and therefore being overwhelmed with shame and domination, the perpetrator threaten and aims to reinstate that through homicidal violence. Children could be harmed by intervening between conflicts between both parents that brought about harm to themselves (Jaffe et al, 2012; Jaffe and Joudis, 2006). In addition, Oberman and Meyer (2008) found that women committed such acts were often victims of neglect during their childhood of significant other and postpartum depression is also a contributing factor.

Other researches have reviewed that preconceived beliefs linking between mental illness and child homicide may not necessarily be reflective of offender’s motives. Implicitly, based on cultural norms, parents are deemed as caregivers for children and killings are often identified as mental illnesses. “Extended suicide” surfaces where an individual kills a member of his/her family in order to save the child from suffering; which is interpreted as an altruistic action. Psychopathology is often linked to women based on their gender stereotypes due to their nurturing role as mothers and hence, terms such as postpartum psychosis and post-natal abortive motives anchors filicide discourse for women to which they are more likely to be labelled as mentally ill (US Department of Justice, 2001). Various
typologies of motives and actions are seen below in Table 6.

<table>
<thead>
<tr>
<th>Classification</th>
<th>Motive/Reasons</th>
<th>Frequency of Motive/Reason</th>
<th>Behavioural Antagonists</th>
<th>Frequency of Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maternal Filicide</td>
<td>Altruistic filicide</td>
<td>56</td>
<td>Battering mothers</td>
<td>40.4</td>
</tr>
<tr>
<td></td>
<td>Acutely psychotic filicide</td>
<td>24</td>
<td>Mentally ill mothers</td>
<td>27</td>
</tr>
<tr>
<td></td>
<td>Unwanted child</td>
<td>11</td>
<td>Neonaticides</td>
<td>12.4</td>
</tr>
<tr>
<td></td>
<td>Accidental or fatal battered child syndrome</td>
<td>7</td>
<td>Retaliating women</td>
<td>10.1</td>
</tr>
<tr>
<td></td>
<td>Spouse revenge</td>
<td>2</td>
<td>Unwanted children</td>
<td>9</td>
</tr>
<tr>
<td></td>
<td>Mercy killing</td>
<td>1.1</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>Paternal Filicide</td>
<td>Misinterpretation of child’s behaviour</td>
<td>N.A</td>
<td>High environmental stress</td>
<td>N.A</td>
</tr>
<tr>
<td></td>
<td>Not altruism-related</td>
<td>N.A</td>
<td>No Mental disorders but with personality disorders</td>
<td>N.A</td>
</tr>
<tr>
<td></td>
<td>Emotional outbursts and disciplinary measures</td>
<td>N.A</td>
<td>Not biological fathers</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Impulse</td>
<td>N.A</td>
<td>Alcohol abuse</td>
<td>N.A</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Battery</td>
<td>N.A</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Fatal child abuse</td>
<td>84</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Previous Criminality</td>
<td>N.A.</td>
</tr>
</tbody>
</table>

(Complied figures from numerous studies. Adapted from Mathews et al (2013). The epidemiology of child homicides in South Africa)

Despite the lack of descriptive statistics pertaining to paternal filicide, Table 6 highlights that paternal filicide has correspondingly lower instances of mental illness and homicides are often brought about due to attribution errors as opposed to altruism than maternal filicide.

Mathews (2013) posited that serotonin plays a function in filicidal behaviour. Researches on animals
have illustrated that disruptions in serotonergic systems in people can result in a range of mental conditions which include personality disturbances, violence and suicide. Filicidal parents often have lesser exposure to their children and psychotic tendencies reflect higher possibilities of using weapons. Secondly in reference to sex hormones, males who have artificially raised testosterone levels could increase filicidal behaviours. Mothers are more likely to be mentally ill and use less violence than fathers.

3. General Nomothetic Crime Profile

Many researches have pointed to similar motives and differences between paternal and maternal filicide with a large degree of consensus. However, there are still discrepancies in research findings especially with regard to the method of killing and causes of death from both paternal and maternal filicide as well as the atypical crime scene.

Review of CLIP approach, a likely perpetrator of child homicide will be mothers aged 18-34 who come from a lower socio-economic status within society, facing social structural issues such as poverty, dysfunctional relationships and lack social support from family, friends and the state. These mothers may be found to be suffering from mental illnesses such as postpartum depression and are possibly victims of neglect during their childhood. Homicide will occur out of helplessness, a fear of abuse and psychiatric episodes. The motive behind the action taken will be out of altruistic filicide, with aims to ‘protect’ the child from further harm and therefore killing the child. The victim, most likely under the age of 5 will be killed by battery or fatalistic neglect depending on the child’s gender. While there are contradictory findings as to the location to which child homicide occurs, we can be certain that a significant proportion of homicide will occur at home. Homicide in public places will be second. Nonetheless, notion of mentally ill mothers may be attributed to cultural stereotypes of mothers as nurturing and hence, actions such as homicide runs counter to that notion resulting in a label for psychotic behaviour.

Paternal filicide on the other hand will be related lesser to mental illnesses and altruism and more towards violent outbursts and impulses. Violent behaviour often stems from the lack of ability to maintain gender role domination over the family and hence, homicide occurs when the fathers aims to reinstate control through disciplinary measures. Fatalistic child abuse will therefore lead to the death of the child and the mode of killing will most likely be stabbing. The socio-economic background and age group is similar to female offenders.
Examining Child Homicide; C.L.I.P Analysis

Under Singapore’s laws, such cases will be charged with murder section 300 of Penal code with possibility of a lowered charge of culpable homicide section 304(b) of the Penal Code where intention and knowledge will have to be proven not present and psychologically altered mental states will need to be proven which could range from violent aggression catharsis or long-term disruptions in the serotogenic systems; bringing about long-term issues of depression, personality disturbances, suicide and violent tendencies.

4. Local Case Study (PP v AFR)

The accused Sallehan Alauddin, 27, a cleaner caused death to his daughter aged 1 year and 11 months and is charged on the 11th of August 2010 for Murder which was then acquitted and convicted of culpable homicide under section 299 of the Penal Code. He killed his daughter in an impulse for playing with his cigarettes.

Investigation and Operational

Sallehan Alauddin, 27 years old is from the lower socio-economic strata in Singapore, working as a cleaner and is the family’s sole bread-winner (The Newpaper 2009). In consideration of his age and the victim’s age, this would be an atypical case of paternal filicide. Based on the excessive use of violence to discipline the child, and the method of causing death by heavy blows onto the victim’s back, head and arms will be indicative of an impulsive act based on momentous rage that brought about the homicidal behaviour. The act was carried out at the home which is a likely scenario for the primary crime scene. However, based on the offender’s gender and age, it is not typical that exerts such force on his daughter but would have been more likely to act upon teenage sons aged 15 to 18.

Criminalistics and Forensic Science

The victim died due to a rupture to her inferior vena cava (IVC) that functions to carry de-oxygenated bloody from the bottom half of the body towards the heart. Despite multiple blows on the victim, there were no fracture to the ribs but it caused bleeding in the left lung and caecum along with IVC (PP v AFR). The beating dealt tremendous blows such that bruises to skin, muscle and lungs were contused.

Inflicted injury on young infants like the deceased on the neck, head and back will definitely be a result of child abuse as non-abused children would not have injury on bony areas. Furthermore, this
fatalistic abuse sees common feature and forms of causing rupturing blood vessels such as IVC as indicated above.

**Psychological and Behavioural Considerations**

On the day of the offense, the offender had actually bought his daughter a gift. However, he was confronted by a mess created by her playing with his cigarettes. Only two days earlier, he had warned her not to do so. Hence, on the 6th of January, he decided to discipline her. In the statements, he did not start out by hitting her but was verbally scolding the victim. However she cried which became more intense when he began to slap her. Based on long standing frustrations of his inability to support his family, lack of respect towards him from both his immediate and extended family, he decided to become harsh to reinstate his manhood through violence (PP v AFR).

Based on the details of the court, the offender’s actions are in line with the psychological motives of paternal filicide. Often, paternal filicide acted upon to regain control over the family and during the impulsive episode, manifests itself through violence on their children. Failure to live up to their gender role expectations therefore saw violence as an alternative bringing about death to a family member.

**Legal and Local Issues**

Initial charge of murder under section 300 of the Penal Code was eventually reduced to a charge of culpable homicide, punishable under the Penal Code 304(b) with a maximum sentence of ten years, with fine or caning or a combination. Sallehan Alauddin was sentenced to six years’ imprisonment effective from his date of arrest and based on the facts of the case; the offender was not given any fine nor caning. The decision by the court to rule thus was brought about by the offender’s love for his child but his failure to take into account his strength and got carried away was unintended and therefore not liable for mens reas.

**5. Possible Preventive Measures of Homicide Prevention**

**5.1 Three Step Approaches (Woon, 1985):**

**5.1.1. Primary intervention of violent behaviours:** Violent tendencies can be reduced if there are proper socialization programmes that educate and prevents damaging childhood upbringing. There needs to be adequate state support for families from lower socio-economic status and programmes that resolves problems associated with family life and child-rearing will enhance intra-family functioning such that the child will be able to socialize and develop healthy psychological mind-set.
Social work and attention to the needs and strains of these low SES families to provide adequate support will be essential to prevent child homicide not only for this generation but for future generations by preventing inculcation of maladaptive destructive behaviours.

5.1.2. **Secondary intervention of violent behaviours**: Identify problematic behaviours with violent tendencies at an early stage such that cognitive-behavioural changes can be made through psychological adjustments. Aggressive gratification needs to be recognized and how to handle such aggression needs to be sublimated in a socially desirable manner. Expressions of emotions could take on new forms through competitive sports as a means to discharge and attain catharsis from such repressive energies, preventing acts of filicide with motives towards spousal revenge. The education system will play a large part in enabling current and future generations to be more tolerable towards diverse views and behaviour, minimizing violent occurrences. Centres for counselling will play an important state-citizen role in the provision of social support and would be especially effective for familial disputes and tensions with the introduction of an intermediary third-party. Volunteerism and community service from social workers or para-professionals will arguably be a way to bridge the manpower gaps and the provision of state support.

5.1.3. **Tertiary intervention of violent behaviours**: Adequate rehabilitation and treatment of offenders. Every ex-offender should be taken as an individual case based on their social situation and personality. Treatment and rehabilitation should take place both inside and outside of correctional facilities and violent offenders should be taught how to sublimate their aggressive needs. Furthermore, jobs should be available to them where triggers of violent behaviours are minimized at the workplace.

5.2 **Preventive Measures Specific Mental Illnesses Leading to Filicide Risks**

Psychiatric or psychological services should be aware of mothers who suffer from mental illnesses ranging from personality disorders or substance abuses that could possibly lead to child neglect and filicide. Early identification of such risks will prevent such acts and cognitive-behavioural therapy and assessments will be essential of the preventive incarceration of at-risk-mothers, separation of mothers from their children. With current research knowledge about how postpartum psychosis leads contributes to filicide, services that screen mothers antenatally and postnatally will be a big leap forward. Furthermore, child protective agencies or volunteer groups can lend aid to child abuse cases especially of mothers are diagnosed with Munchausen syndrome (Friedman and Resnick, 2007).
Evidences collected are dependent on the method of causing harm.

**Violent Filicide or Infanticide**
- Skull and Spinal Fractures
- Subdural Haemorrhages
- Strangulation
- Cardiac Contusions and Lacerations
- Abdominal Injuries

**Child Abuse and Fatal Neglect**
- Cutaneous Injuries
- Lethal Neglect

Singapour’s law and Penal Code is modelled after Anglo-American humanistic developments. However, the current Penal Code in Singapore does not differentiate between filicide and murder or culpable homicide. Therefore, crimes related to filicide will be charged with murder but may subsequently be lowered to culpable homicide.

Evidences that are gathered will be similar to disorganized murder and violent crimes as child homicides are often not premeditated and acted out of desperation or violent outbursts

**Offender:**
Low Socio-economic status
Likelihood to occur at home
No secondary crime scenes
Females act out of helplessness, fear of abuse and psychiatric episodes

**Victims:**
Victims aged 5 and below as most likely group to be victims to filicide. Teenage male victims ages 15-17 most likely to be victims of stab wounds by fathers.

**Top three attack methods:**
Stab wounds
Blunt force trauma
Infant abandonment

**Motives:**
Maternal Filicide
- Altruistic filicide
- Acutely psychotic filicide
- Unwanted child
- Fatal battered child syndrome
- Spouse revenge

Paternal Filicide
- High environmental stresses
- No Mental disorders but with personality disorders
- Not biological fathers
- Alcohol abuse
- Battery
- Fatal child abuse
- Previous Criminality

**Behavioural Antagonists:**
Maternal Filicide
- Battering mothers
- Mentally ill mothers
- Neonaticides
- Retaliating women
- Unwanted children
- Mercy killing

Paternal Filicide
- No Mental disorders but with personality disorders
- Not biological fathers
- Alcohol abuse
- Battery
- Fatal child abuse
- Previous Criminality
Bibliography


Griest, Karen (2010). Pediatric Homicide: Medical Investigation. Taylor and Francis Group LLC. US.


### Table 1

<table>
<thead>
<tr>
<th>Age</th>
<th>Offender</th>
<th></th>
<th>Victim</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>No.</td>
<td>%</td>
<td>No.</td>
<td>%</td>
</tr>
<tr>
<td>Under 10</td>
<td>0</td>
<td>0</td>
<td>6</td>
<td>3.8</td>
</tr>
<tr>
<td>10—14</td>
<td>5</td>
<td>3.2</td>
<td>4</td>
<td>2.5</td>
</tr>
<tr>
<td>15—19</td>
<td>28</td>
<td>17.8</td>
<td>31</td>
<td>19.7</td>
</tr>
<tr>
<td>20—24</td>
<td>42</td>
<td>26.7</td>
<td>38</td>
<td>24.2</td>
</tr>
<tr>
<td>25—29</td>
<td>38</td>
<td>24.2</td>
<td>18</td>
<td>11.4</td>
</tr>
<tr>
<td>30—34</td>
<td>9</td>
<td>5.7</td>
<td>13</td>
<td>8.3</td>
</tr>
<tr>
<td>35—39</td>
<td>10</td>
<td>6.4</td>
<td>10</td>
<td>6.4</td>
</tr>
<tr>
<td>40—44</td>
<td>11</td>
<td>7.0</td>
<td>11</td>
<td>7.0</td>
</tr>
<tr>
<td>45—49</td>
<td>2</td>
<td>1.3</td>
<td>7</td>
<td>4.5</td>
</tr>
<tr>
<td>50—54</td>
<td>3</td>
<td>1.9</td>
<td>8</td>
<td>5.1</td>
</tr>
<tr>
<td>55—59</td>
<td>4</td>
<td>2.5</td>
<td>4</td>
<td>2.5</td>
</tr>
<tr>
<td>60 &amp; above</td>
<td>2</td>
<td>1.3</td>
<td>7</td>
<td>4.5</td>
</tr>
<tr>
<td>Unknown</td>
<td>3</td>
<td>1.9</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>157</td>
<td>100.0</td>
<td>157</td>
<td>100.0</td>
</tr>
</tbody>
</table>


### Table 2

<table>
<thead>
<tr>
<th>Relationship</th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family Members</td>
<td>27</td>
<td>17.2</td>
</tr>
<tr>
<td>Close Friends</td>
<td>23</td>
<td>14.6</td>
</tr>
<tr>
<td>Acquaintances</td>
<td>44</td>
<td>28.0</td>
</tr>
<tr>
<td>Enemies</td>
<td>20</td>
<td>12.8</td>
</tr>
<tr>
<td>Strangers</td>
<td>41</td>
<td>26.1</td>
</tr>
<tr>
<td>Unknown</td>
<td>2</td>
<td>1.3</td>
</tr>
<tr>
<td>Total</td>
<td>157</td>
<td>100.0</td>
</tr>
</tbody>
</table>


### Table 3

<table>
<thead>
<tr>
<th>Type</th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Husband/Wife</td>
<td>12</td>
<td>44.5</td>
</tr>
<tr>
<td>Parent/Child</td>
<td>5</td>
<td>18.5</td>
</tr>
<tr>
<td>Siblings</td>
<td>6</td>
<td>22.2</td>
</tr>
<tr>
<td>Others</td>
<td>4</td>
<td>14.8</td>
</tr>
</tbody>
</table>

Table 4

<table>
<thead>
<tr>
<th>Place</th>
<th>Family</th>
<th>Friends</th>
<th>Acquaintances</th>
<th>Enemies</th>
<th>Strangers</th>
<th>Unknown</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>No. %</td>
<td>No. %</td>
<td>No. %</td>
<td>No. %</td>
<td>No. %</td>
<td>No. %</td>
<td>No. %</td>
</tr>
<tr>
<td>Home</td>
<td>20</td>
<td>33.9</td>
<td>15</td>
<td>24.5</td>
<td>14</td>
<td>23.7</td>
<td>3</td>
</tr>
<tr>
<td>Neighbourhood</td>
<td>1</td>
<td>3.2</td>
<td>2</td>
<td>6.4</td>
<td>4</td>
<td>12.9</td>
<td>11</td>
</tr>
<tr>
<td>Place of Work</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>2</td>
<td>15.4</td>
<td>8</td>
<td>61.5</td>
</tr>
<tr>
<td>Street</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>6.25</td>
<td>9</td>
<td>56.3</td>
</tr>
<tr>
<td>Public Place</td>
<td>5</td>
<td>23.8</td>
<td>1</td>
<td>4.8</td>
<td>6</td>
<td>23.8</td>
<td>2</td>
</tr>
<tr>
<td>Bar, Restaurant etc.</td>
<td>1</td>
<td>12.5</td>
<td>2</td>
<td>25.0</td>
<td>3</td>
<td>37.5</td>
<td>0</td>
</tr>
</tbody>
</table>


Table 5

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>All (n=1018) %</th>
<th>Males (n=651) %</th>
<th>Females (n=363) %</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>&lt;5</td>
<td>39.6</td>
<td>29.7</td>
<td>57.2</td>
</tr>
<tr>
<td>5–9</td>
<td>8.6</td>
<td>6.5</td>
<td>12.3</td>
</tr>
<tr>
<td>10–14</td>
<td>10.9</td>
<td>11.0</td>
<td>10.8</td>
</tr>
<tr>
<td>15–17</td>
<td>41.0</td>
<td>52.9</td>
<td>19.7</td>
</tr>
<tr>
<td><strong>Scene of injury</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Own home</td>
<td>34.0</td>
<td>28.1</td>
<td>44.0</td>
</tr>
<tr>
<td>Other home</td>
<td>14.2</td>
<td>16.5</td>
<td>10.0</td>
</tr>
<tr>
<td>Public space</td>
<td>45.9</td>
<td>49.4</td>
<td>39.6</td>
</tr>
<tr>
<td>Place unknown</td>
<td>6.2</td>
<td>6.0</td>
<td>6.5</td>
</tr>
<tr>
<td><strong>Carer at time of death</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Both parents</td>
<td>29.8</td>
<td>30.6</td>
<td>28.9</td>
</tr>
<tr>
<td>Mother</td>
<td>42.8</td>
<td>39.8</td>
<td>48.1</td>
</tr>
<tr>
<td>Father</td>
<td>4.6</td>
<td>5.5</td>
<td>3.0</td>
</tr>
<tr>
<td>Other</td>
<td>13.6</td>
<td>14.1</td>
<td>12.7</td>
</tr>
<tr>
<td>None</td>
<td>1.9</td>
<td>3.0</td>
<td>0</td>
</tr>
<tr>
<td>Unknown</td>
<td>7.2</td>
<td>7.1</td>
<td>7.2</td>
</tr>
<tr>
<td><strong>Perpetrator</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mother</td>
<td>30.0</td>
<td>21.3</td>
<td>45.4</td>
</tr>
<tr>
<td>Father</td>
<td>5.8</td>
<td>4.9</td>
<td>7.3</td>
</tr>
</tbody>
</table>
Examining Child Homicide; C.L.I.P Analysis

<table>
<thead>
<tr>
<th>Other relative</th>
<th>7.8</th>
<th>8.7</th>
<th>6.3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stepmother/Stepfather</td>
<td>3.0</td>
<td>2.0</td>
<td>4.7</td>
</tr>
<tr>
<td>Intimate partner of victim</td>
<td>2.6</td>
<td>1.2</td>
<td>5.1</td>
</tr>
<tr>
<td>Acquaintance</td>
<td>35.5</td>
<td>44.9</td>
<td>18.9</td>
</tr>
<tr>
<td>Stranger</td>
<td>3.8</td>
<td>4.0</td>
<td>3.5</td>
</tr>
<tr>
<td>Unknown</td>
<td>11.5</td>
<td>13.0</td>
<td>8.9</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Cause of Death</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Gunshot wounds</td>
<td>11.5</td>
<td>13.6</td>
<td>7.6</td>
</tr>
<tr>
<td>Stab wounds</td>
<td>26.2</td>
<td>33.6</td>
<td>13.0</td>
</tr>
<tr>
<td>Blunt force trauma</td>
<td>23.5</td>
<td>24.0</td>
<td>22.7</td>
</tr>
<tr>
<td>Strangulation/asphyxiation</td>
<td>11.7</td>
<td>7.2</td>
<td>19.8</td>
</tr>
<tr>
<td>Fire</td>
<td>2.1</td>
<td>1.8</td>
<td>2.7</td>
</tr>
<tr>
<td>Drowning</td>
<td>0.4</td>
<td>0.3</td>
<td>0.7</td>
</tr>
<tr>
<td>Multiple injuries</td>
<td>1.2</td>
<td>1.1</td>
<td>1.4</td>
</tr>
<tr>
<td>Infant abandonment</td>
<td>15.9</td>
<td>11.1</td>
<td>24.4</td>
</tr>
<tr>
<td>Other</td>
<td>5.1</td>
<td>6.3</td>
<td>2.8</td>
</tr>
<tr>
<td>Undetermined</td>
<td>2.5</td>
<td>1.1</td>
<td>5.1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Child abuse and neglect</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>44.5</td>
<td>26.8</td>
<td>76.0</td>
</tr>
<tr>
<td>No</td>
<td>55.6</td>
<td>73.2</td>
<td>24.0</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Sexual Assault</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>10.0</td>
<td>1.5</td>
<td>25.3</td>
</tr>
<tr>
<td>No</td>
<td>90.0</td>
<td>98.5</td>
<td>74.7</td>
</tr>
</tbody>
</table>

(Multifaceted statistics on filicide conducted in South Africa. Adapted from Mathews et al (2013). The epidemiology of child homicides in South Africa )
Appendix B

Picture 1

(Complex skull fracture in a 2-year-old child hit against a wall. Courtesy of Griest (2010). Pediatric Homicide: Medical Investigation)

Picture 2

(Brain and dura showing a thin film of subdural hemorrhage in a 2-month-old. (Courtesy of Dr. W. Squier.) Adapted from: Griest (2010). Pediatric Homicide: Medical Investigation)
Picture 3

(Patterned injury on the neck related to ligature strangulation. Adapted from: Griest (2010). Pediatric Homicide: Medical Investigation)

Picture 4

(Petechial hemorrhages of the ear, a case of child abuse. Adapted from: Griest (2010). Pediatric Homicide: Medical Investigation)
Appendix C

Murder

300. Except in the cases hereinafter excepted culpable homicide is murder —

(a) if the act by which the death is caused is done with the intention of causing death;

(b) if it is done with the intention of causing such bodily injury as the offender knows to be likely to cause the death of the person to whom the harm is caused;

(c) if it is done with the intention of causing bodily injury to any person, and the bodily injury intended to be inflicted is sufficient in the ordinary course of nature to cause death; or

(d) if the person committing the act knows that it is so imminently dangerous that it must in all probability cause death, or such bodily injury as is likely to cause death, and commits such act without any excuse for incurring the risk of causing death, or such injury as aforesaid.

When culpable homicide is not murder

Exception 1.—Culpable homicide is not murder if the offender whilst deprived of the power of self-control by grave and sudden provocation, causes the death of the person who gave the provocation, or causes the death of any other person by mistake or accident.

Exception.—The above exception is subject to the following provisos:

(a) that the provocation is not sought or voluntarily provoked by the offender as an excuse for killing or doing harm to any person;

(b) that the provocation is not given by anything done in obedience to the law, or by a public servant in the lawful exercise of the powers of such public servant;

(c) that the provocation is not given by anything done in the lawful exercise of the right of private defence.

Explanation.—Whether the provocation was grave and sudden enough to prevent the offence from amounting to murder is a question of fact.
Culpable homicide by causing the death of a person other than the person whose death was intended

301. If a person, by doing anything which he intends or knows to be likely to cause death, commits culpable homicide by causing the death of any person whose death he neither intends nor knows himself to be likely to cause, the culpable homicide committed by the offender is of the description of which it would have been if he had caused the death of the person whose death he intended or knew himself to be likely to cause.

[Indian PC 1860, s. 301]

Punishment for murder

302.

—(1) Whoever commits murder within the meaning of section 300(a) shall be punished with death.

(2) Whoever commits murder within the meaning of section 300(b), (c) or (d) shall be punished with death or imprisonment for life and shall, if he is not punished with death, also be liable to caning.

[Act 32 of 2012 wef 01/01/2013]

Punishment for culpable homicide not amounting to murder

304. Whoever commits culpable homicide not amounting to murder shall —

(a) if the act by which death is caused is done with the intention of causing death, or of causing such bodily injury as is likely to cause death, be punished with —

(i) imprisonment for life, and shall also be liable to caning; or

(ii) imprisonment for a term which may extend to 20 years, and shall also be liable to fine or to caning; or

(b) if the act is done with the knowledge that it is likely to cause death, but without any intention to cause death, or to cause such bodily injury as is likely to cause death, be punished with imprisonment for a term which may extend to 10 years, or with fine, or with caning, or with any combination of such punishments.

[Act 32 of 2012 wef 01/01/2013]
Causing death by rash or negligent act

304A. Whoever causes the death of any person by doing any rash or negligent act not amounting to culpable homicide, shall be punished —

(a) in the case of a rash act, with imprisonment for a term which may extend to 5 years, or with fine, or with both; or

(b) in the case of a negligent act, with imprisonment for a term which may extend to 2 years, or with fine, or with both.

[Indian PC 1860, s. 304A]

Abetment of suicide of child or insane person

305. If any person under 18 years of age, any insane person, any delirious person, any idiot, or any person in a state of intoxication, commits suicide, whoever abets the commission of such suicide shall be punished with death or imprisonment for life, or with imprisonment for a term not exceeding 10 years, and shall also be liable to fine.

[Indian PC 1860, s. 305]

Abetment of suicide

306. If any person commits suicide, whoever abets the commission of such suicide shall be punished with imprisonment for a term which may extend to 10 years, and shall also be liable to fine.

[Indian PC 1860, s. 306]

Attempt to murder

307.

—(1) Whoever does any act with such intention or knowledge and under such circumstances that if he by that act caused death he would be guilty of murder, shall be punished with imprisonment for a term which may extend to 15 years, and shall also be liable to fine; and if hurt is caused to any person by such act, the offender shall be liable either to imprisonment for life, or to imprisonment for a term which may extend to 20 years, and shall also be liable to caning or fine or both.

[62/73; 51/2007]
Other offences by convicts

(2) When any person offending under this section is under sentence of imprisonment for life, he may, if hurt is caused, be punished with death.

[Indian PC 1860, s. 307]

Attempt to commit culpable homicide

308. Whoever does any act with such intention or knowledge and under such circumstances that if he by that act caused death he would be guilty of culpable homicide not amounting to murder, shall be punished with imprisonment for a term which may extend to 7 years, or with fine, or with both; and if hurt is caused to any person by such act, the offender shall be punished with imprisonment for a term which may extend to 15 years, or with fine, or with caning, or with any combination of such punishments.

[51/2007]

Illustration

A, on grave and sudden provocation, fires a pistol at Z, under such circumstances that if he thereby caused death he would be guilty of culpable homicide not amounting to murder. A has committed the offence defined in this section.

[Indian PC 1860, s. 308]

Attempt to commit suicide

309. Whoever attempts to commit suicide, and does any act towards the commission of such offence, shall be punished with imprisonment for a term which may extend to one year, or with fine, or with both.

[Indian PC 1860, s. 309]

Infanticide

310. When any woman by any wilful act or omission causes the death of her child being a child under the age of 12 months, but at the time of the act or omission the balance of her mind was disturbed by reason of her not having fully recovered from the effect of giving birth to the child or by reason of the effect of lactation consequent upon the birth of the child, she shall, notwithstanding that the circumstances were such that but for this section the offence would have amounted to murder, be guilty of the offence of infanticide.

Punishment for infanticide
311. Whoever commits the offence of infanticide shall be punished at the discretion of the court with imprisonment for life, or with imprisonment for a term which may extend to 10 years, and shall also be liable to fine.

_Causing miscarriage; injuries to unborn children; exposure of infants; and concealment of births_

_Causing miscarriage_

312. Subject to the provisions of the Termination of Pregnancy Act (Cap. 324), whoever voluntarily causes a woman with child to miscarry, shall be punished with imprisonment for a term which may extend to 3 years, or with fine, or with both; and if the woman is quick with child, shall be punished with imprisonment for a term which may extend to 7 years, and shall also be liable to fine.

**Explanation**—A woman who causes herself to miscarry is within the meaning of this section.

_[Indian PC 1860, s. 312]_

_Causing miscarriage without woman’s consent_

313. Whoever commits the offence defined in section 312, without the consent of the woman, whether the woman is quick with child or not, shall be punished with imprisonment for life, or with imprisonment for a term which may extend to 10 years, and shall also be liable to fine.

_[Indian PC 1860, s. 313]_

_Death caused by act done with intent to cause miscarriage_

314. Subject to the provisions of the Termination of Pregnancy Act (Cap. 324), whoever with intent to cause the miscarriage of a woman with child does any act which causes the death of such woman, shall be punished with imprisonment for a term which may extend to 10 years, and shall also be liable to fine; and if the act is done without the consent of the woman, shall be punished either with imprisonment for life, or with the punishment above-mentioned.

**Explanation**—It is not essential to this offence that the offender should know that the act is likely to cause death.

_[Indian PC 1860, s. 314]_

_Child destruction before, at or immediately after birth_

315.

—(1) Subject to the provisions of the Termination of Pregnancy Act, whoever, with intent to destroy the life of a child capable of being born alive, by any wilful act causes a child to die before it
has an existence independent of its mother or by such act causes the child to die after its birth, shall, unless such act is immediately necessary to save the life of the mother, be punished with imprisonment for a term not exceeding 10 years, or with fine, or with both.

[32/80; 51/2007]

(2) For the purposes of this section, evidence that a woman had at any material time been pregnant for a period of 28 weeks or more shall be prima facie evidence that she was at that time pregnant of a child capable of being born alive.

[Indian PC 1860, s. 315]

Causing death of a quick unborn child by an act amounting to culpable homicide

316. Whoever does any act under such circumstances that if he thereby caused death he would be guilty of culpable homicide, and does by such act cause the death of a quick unborn child, shall be punished with imprisonment for a term which may extend to 10 years, and shall also be liable to fine.

Illustration

A, knowing that he is likely to cause the death of a pregnant woman, does an act which, if it caused the death of the woman, would amount to culpable homicide. The woman is injured, but does not die; but the death of an unborn quick child with which she is pregnant is thereby caused. A is guilty of the offence defined in this section.

[Indian PC 1860, s. 316]

Exposure and abandonment of a child under 12 years by parent or person having care of it

317. Whoever, being the father or mother of a child under the age of 12 years, or having the care of such child, exposes or leaves such child in any place with the intention of wholly abandoning such child shall be punished with imprisonment for a term which may extend to 7 years, or with fine, or with both.

Explanation—This section is not intended to prevent the trial of the offender for murder or culpable homicide as the case may be, if the child dies in consequence of the exposure.

Concealment of birth by secret disposal of dead body

318. Whoever by secretly burying or otherwise disposing of the dead body of a child, whether such child dies before or after or during its birth, intentionally conceals or endeavours to conceal the birth of such child shall be punished with imprisonment for a term which may extend to 2 years, or with fine, or with both.

[Indian PC 1860, s. 318]
THE END