

# Study of Profile of Homicidal Deaths in South Chennai- A Retrospective Study

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## Abstract

Killing of an individual is the highest level of aggression found in all cultures. The overall risk of suffering a violent death as a result of intentional homicide has been declining steadily for a quarter of a century. In 2017, there were 6.1 homicide victims per 100,000 population worldwide, compared with a rate of 7.4 in 1993. The present study is a retrospective study conducted in Department of Forensic Medicine, Government Kilpauk Medical college in the period Jan 2017 to march 2019. A total of 70 homicidal death cases were analysed retrospectively. In analysing religion 61(87.14%) cases belong to Hindu religion, 33 (47.14%) cases were labourers, 68 (97.14%) belong to nuclear family, Some sort of quarrel or oral arguments was seen in 19 (27.14%) cases, place of death 28 (40%) cases seen in the victim own house. Cause of death is Shock and haemorrhage due to multiple cut injuries was seen in 22 (31.42%) cases. Head is the most common part of the body with injuries seen in 37 (52.85%) cases. Defence wounds seen in 20 (28%) of cases.

Strengthening the rule of law is central to reducing homicide levels. Policies aimed at tackling homicide should address drivers of homicide both at the individual level (such as the age and sex of a person) and at the macro level (such as unemployment, inequality, absence of the rule of law, the prevalence of gender stereotypes in society and the presence of organized crime). Targeted and efficient interventions require a comprehensive understanding of the scale of homicide and its various drivers, which is essential for ensuring that Sustainable Development Goal targets related to violence can be met by 2030

**Key words:** Homicide, Autopsy, Injuries

## Introduction

The overall risk of suffering a violent death as a result of intentional homicide has been declining steadily for a quarter of a century. In 2017, there were 6.1 homicide victims per 100,000 population worldwide, compared with a rate of 7.4 in 1993. While gaps still remain in terms of the quality and availability of national

data, these estimates are based on the latest and most comprehensive data submitted by Member States to UNODC up to 2017. According 2018 data of National Crime Record Bureau , 29017 homicidal deaths reported in India. In Tamilnadu 1569 cases reported. Maximum number of cases noted in Uttar Pradesh 4018<sup>(1)</sup>

The International Classification of Crime for Statistical Purposes (ICCS), developed by the United Nations Office on Drugs and Crime (UNODC), provides a framework for the definition and classification of unlawful killings, both in conflict and non-conflict situations. Homicide is defined in ICCS as “unlawful death inflicted upon a person with the intent to cause death or serious injury”. This statistical definition

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contains three elements that characterize the killing of a person as “intentional homicide”: 1. The killing of a person by another person (objective element) 2. The intent of the perpetrator to kill or seriously injure the victim (subjective element) 3. The unlawfulness of the killing (legal element)<sup>(2)</sup>

**Materials and Methods**

The present study is a retrospective study conducted in Department of Forensic Medicine, Kilpauk Medical college in the period Jan 2017 to march 2019. All cases brought by police with alleged history of homicide included in the study. All the documents pertaining to the deceased such as history of the case, accident register, inquest report, First Information Report, post-mortem certificate, viscera report, Histopathology reports.

**Inclusion criteria:**

1. All cases brought for autopsy under section 302 IPC.
2. Cases brought under 174 CrPC, but turned to be homicide after autopsy.

**Exclusion criteria:**

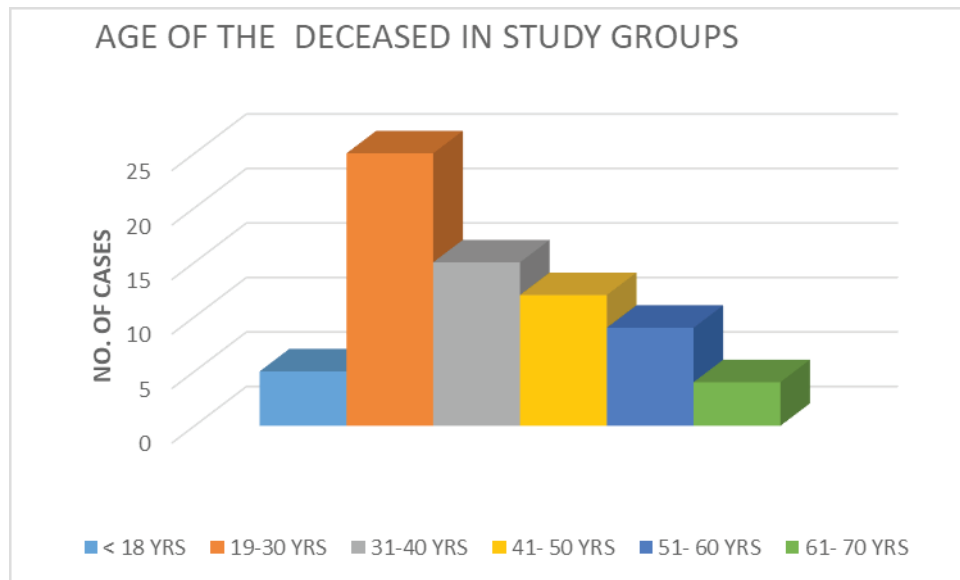
1. Custodial deaths were excluded from the study.

**Results and Discussion**

Total of 70 cases were analysed, 47(67.14%) cases deceased was males and in 23 (32.85%) cases females. This is in consistent with the most of the studies conducted in India<sup>(3),(4),(7)</sup> . In analysing religion 61(87.14%) cases belong to Hindu religion, 5 (7.14%)cases belong to Muslim religion and 3(4.28%) cases belong to Christian religion. In one (1.42%) case religion not known.

In analysing occupation of the deceased, 33 (47.14%) cases were labourers, 16 ( %) were self employed, 9(12.85%) were house wife. 7(10%) cases were students, 3(4.28%) were professional. One (1.42%) was unemployed, and occupation was not known in one (1.42%) case

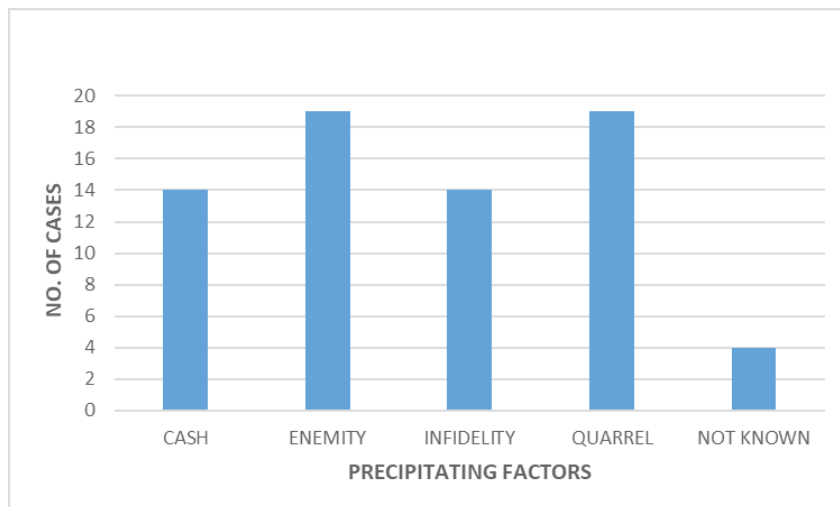
In analysing age of the deceased 25 (35.71%) cases was seen in age group of 19- 30 years. This is consistent with the study conducted by Hugar *et. all* <sup>(3)</sup> <sup>(10)</sup> <sup>(11)</sup>. The high incidence in this age group, the victim may be due to person in this age group are more aggressive, short tempered, and least tolerant. There is a male predominance in most of the age groups<sup>(4)</sup>. In age group of 31- 40 years 15 (21.42%) cases was seen, In age group of 41- 50 years 12 (17.14%) cases was seen, In age group of 51- 60 years 9 (12.85%) cases was seen. In age group of 61- 70 years 4 (5.71%) cases was seen. Fig:1.



**Fig: 1. Distribution of cases among the age groups.**

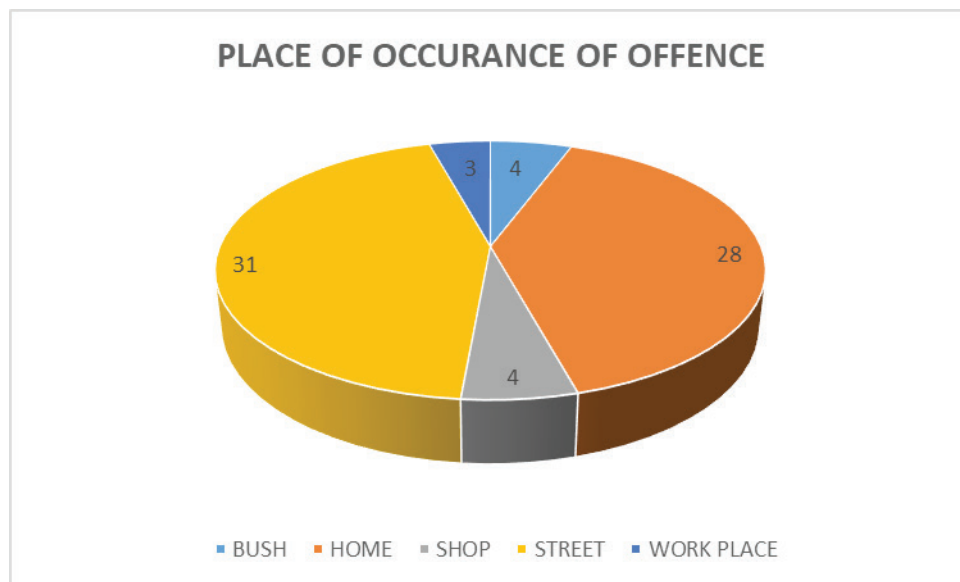
In analysing type of family of the deceased 68(97.14%) belong to nuclear family, one(1.42%) case belong to joined family and one (1.42%) case not known.

In analysing the precipitating factors, dispute related to cash was seen in 14 (20%) cases, previous enemy was seen in 19 (27.14%) cases. Infidelity was seen in 14 (20%) cases. Some sort of quarrel or oral arguments was seen in 19 (%) cases. And in 4 (5.714%) cases precipitating factors was not seen. Fig: 2.



**Fig: 2 Distribution of precipitating factors among the cases**

In analysing place of death 28 (40%) cases seen in the victim own house and this is in consistent with the study conducted by Lee-Germon *et.al* (6). However in studies conducted in other parts of India most of the homicide occurred in open place(7)(8). In this study 31 (44.28%) cases in street. This in consistent with study conducted by Mevarak, M(5) in which (33.2%)cases were in public place. In 4(5.71%) cases seen in bush and 3(4.28%) cases in work place. Inside commercial shop 4 (5.71%) cases was seen. Fig:3.

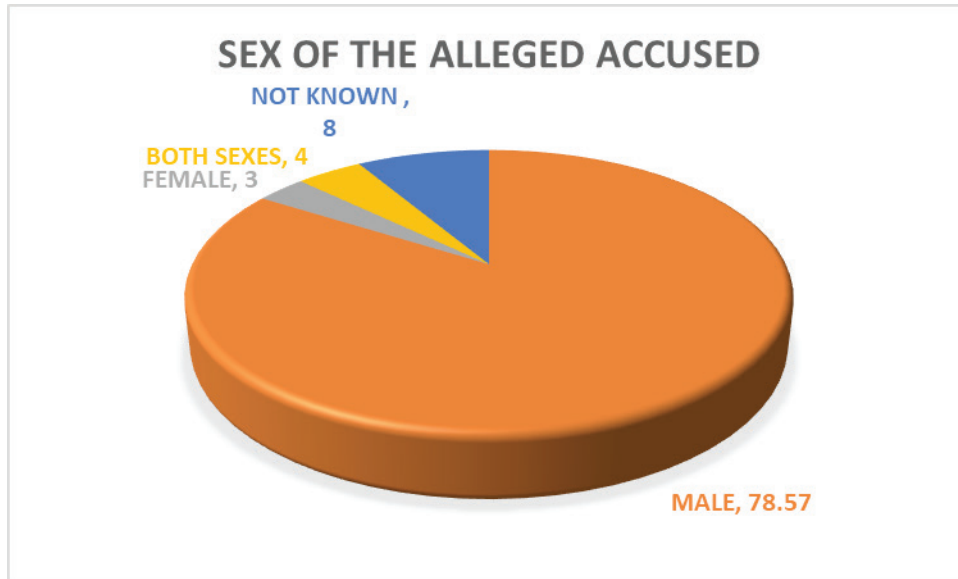


**Fig: 3. Place of occurrence of offence**

In analysing addiction status of the deceased alcohol consumption was seen in 12 (17.13%) cases. Both alcohol and tobacco was seen in 22(31.42%) cases. No addiction was seen in 35 (50%) of cases and not known in 1 (1.42%) case.

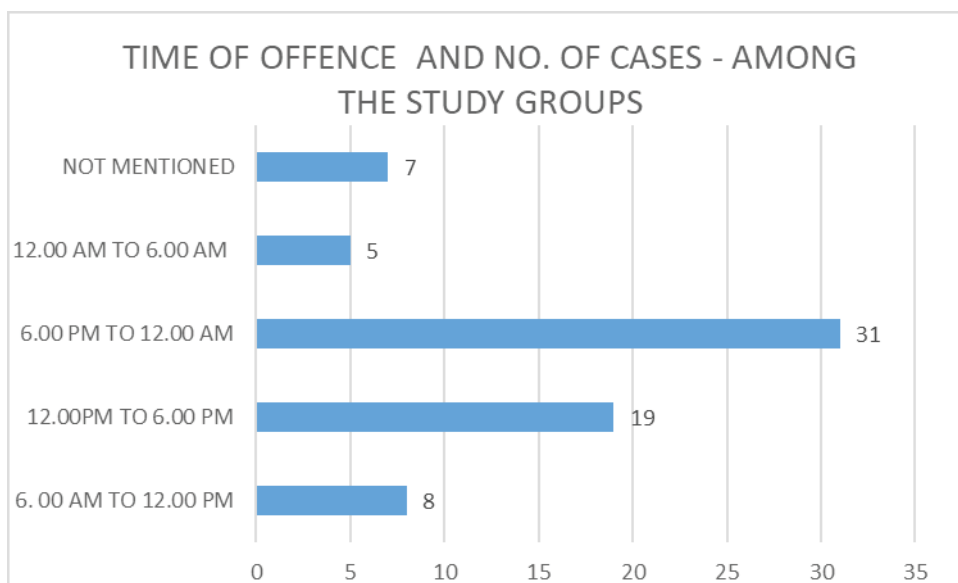
In analysing number of accused persons involved, one person is involved in 28 (40%) of cases, two persons were involved in 8 (11.42%) cases, three persons were involved in 4 (5.71%) cases, four persons were involved in 9 (12.85%) cases five persons were involved in 6 (8.57%) cases, six persons were involved in 2 (2.85 %) cases seven persons were involved in 3 (4.28%) cases and in 10 (14.28%) cases no of assailants not known.

In analysing sex of the assailants male sex was seen in 55 (78.57%) of cases, female sex was seen in 3 (4.28%) cases and both the sexes were seen in 4 (5.71%) cases. Fig: 4



**Fig: 4. Sex of the alleged accused**

In analysing time of occurrence of the incidence 31(44.28%) cases was seen in 6.00 pm to 12.00 AM this is consistent with the study conducted by Mada et. al<sup>(11)</sup> whereas this is contrast with the study conducted by Sakulsaengrapha et al<sup>(12)</sup>. where majority of homicide occurred (33.6%) between 12.00 AM to 6.00 PM. In 19 (27.14%) cases was seen in 12.00 PM to 6.00 AM. In time interval 6.00 AM to 12.00 PM, 8 (11.42%) cases was seen. In time interval of 12.00 AM to 6.00 PM, 5 (7.14%)cases seen. In 7(10%) cases time of offence not mentioned in the reports. Fig: 5.



**Fig: 5. Time of occurrence of the offence among the study group**

In analysing cause of death 23(32.85%) cases were females. In this 23 (32.85%) female cases stab injury to the neck is seen in 3 (4.28%) cases, asphyxia due to throttling is seen in 4 (5.71%) cases. Asphyxia due to strangulation seen in 4 (5.71%) cases. Smothering in one (1.42%) case. Two female cases of drowning were seen, In which the deceased age was four and five years. Blunt injury to the head seen in 3(4.28%) cases.

In analysing cause of death in both sexes, 15 (21.42%) cases died of blunt injury to the head. Shock and haemorrhage due to multiple cut injuries was seen in 22 (31.42%) cases. Shock and haemorrhage due to multiple stab injuries as cause of death was seen in 6 (8.57%) cases. Shock and haemorrhage due to cut injury to head and neck as a cause of death was seen in 10 (14.28%) cases. Asphyxia due to throttling as cause of death seen in 5 (7.14%) cases. Asphyxia due to drowning was seen in 2 (2.85 %) cases **Table: 1**

**Table:1 Cause of death among study group**

S.NO	CAUSE OF DEATH	NO. OF CASES		TOTAL
		Male	Female	
1	Blunt injury to the head	12( 17.14%)	3(4.28 %)	15 (21.42%)
2	Shock and haemorrhage due to multiple cut injuries	18( 25.71%)	4(5.71 %)	22 (31.42%)
3	Shock and haemorrhage due to multiple Stab injury	3(4.28%)	3(4.28 %)	6 (8.57%)
4	Shock and haemorrhage due to cut injury to head and neck	9(12.85%)	1( 1.42%)	10 (14.28%)
5	Asphyxia due to throttling	1( 1.42%)	4( 5.71%)	5 (7.14 %)
6	Asphyxia due to strangulation	1( 1.42%)	4( 5.71%)	5 (7.14%)
7	Shock and haemorrhage due to gunshot	1(1.42 %)	Nil	1 (1.42%)
8	Poison ingestion	1(1.42 %)	Nil	1 (1.42%)
9	Combined asphyxia due to external compression of the neck and head injury	1(1.42%)	1(1.42%)	2(2.85 %)
10	Asphyxia due to Drowning	Nil	2(2.85 %)	2( 2.85%)
11	Smothering	Nil	1(1.42%)	1( 1.42%)
TOTAL		47	23	70

Defence wounds seen in 20 (28.57%) of cases. This is consistent with the study conducted by Sachidananda Mohanty et al (9). Mostly situated in outer aspects of forearm, wrist and back of fingers. None of the defence injuries seen in lower limbs. In 50 (71.42%) cases defence injury was not seen.

Head is the most common part of the body with injuries seen in 37 (52.85%) cases. This in contrast to the study conducted by Jhaveri S *et.al* (3) where neck (16.8%) is the common part of the body were injuries

seen followed by head (15.9%)

The drivers of homicide are manifold, and socioeconomic factors such as inequality, unemployment and political instability can create environments that are conducive to lethal violence. Demographic characteristics, such as the sex and age of an individual, may act as either drivers of, or protective factors against, homicide. The rapid growth of cities and the consequent mass movement of people from rural to urban areas have frequently been cited as possible drivers of homicide.

However, UNODC analysis of data<sup>(2)</sup> from 68 cities suggests that there is no positive correlation between urban growth and increases in homicide rates. In fact, the population in the sample cities grew by 9 per cent between 2005 and 2016, but the number of homicides decreased by 26 per cent. This relationship holds for all regions, with the strongest diverging trends in Asia, followed by Europe. On the basis of this analysis it can be concluded that cities and rapid urban growth are not risk factors for rising levels of homicide

### Conclusion

ongterm investment in education policies is associated with a drop in the homicide rate. Income inequality is more strongly linked to homicide than other aspects of development. Long term investment in educational policies is associated with drop in homicide rates. Strengthening the rule of law is central to reducing homicide levels. Policies aimed at tackling homicide should address drivers of homicide both at the individual level (such as the age and sex of a person) and at the macro level (such as unemployment, inequality, absence of the rule of law, the prevalence of gender stereotypes in society and the presence of organized crime). Targeted and efficient interventions require a comprehensive understanding of the scale of homicide and its various drivers, which is essential for ensuring that Sustainable Development Goal targets related to violence can be met by 2030. Comprehensive data and information about mechanisms that facilitate homicide perpetration can guide policymakers in devising more effective, targeted interventions.

**Conflict of Intrest:** Nil

**Ethical Clearance:** Nil

**Source of Funding:** Nil

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