

Psychiatry & Behaviorial Sciences Section – 2003

I12 A Transcultural-Forensic Psychiatric Analysis of a Filicidal Hispanic Man

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After attending this presentation, the participant will understand the value and utility of a biopsychsociocultutal approach in forensic psychiatric evaluations.

Filicide is the homicide of a child by his or her parent. Homicides of children committed by parental figures, such as non-biological stepparents or other equivalent parental figures, are often similar to those committed by the biological parent, so that a class of filicidal-type homicide is defined. There is a considerable amount of literature on filicidal or filicidal-type killing, which is first surveyed. Several investigators have attempted to provide a classification system for filicidal or filicidal-type behavior. Of particular note has been the evolution of a multisystemic approach. A little over two decades ago, the biopsychosocial model was proposed. This model has since enjoyed widespread endorsement. Although cultural factors can arguably be subsumed under the social component, cultural factors in many cases exert the greatest degree of influence upon the thinking and behavior of an individual or social unit (e.g., family). The latest diagnostic nosology as promulgated by the Diagnostic and Statistical Manual of Mental Disorder, Fourth Edition (DSM-IV) has underscored the potential relevance of cultural factors and has introduced to American psychiatry a tool called the cultural formulation. Previously utilized was a biopsychosociocultural approach based in part on the cultural formulation tool to explore another case of filicial-type behavior. This approach increases the likelihood of a sytematic and comphrehensive assessment of cases, i.e., there is a clear advantage of a biopsychosociocultural approach over schemes searching for classification by motives only. In particular, the richness of the biopsychosociocultural approach increases the likelihood that all relevant factors receive consideration.

To illustrate the biopsychosociocultural approach, the authors describe the case of Mr. B. Mr. B had who killed his stepchild. Mr. B is a 27-year-old male from El Salvador who became unemployed three months prior to the death of the child victim. Several weeks after losing his job, he had become increasingly irritable, hostile, and depressed. As a Latino male, Mr. B experienced a significant loss of face and selfesteem when he found himself in the reversed social role where he was forced to take care of the children while his wife worked full-time outside of their home to financially support the family unit. It was in this situation in which Mr. B acted aggressively with culmination in the homicide of his stepdaughter. Mr. B also experienced longstanding symptoms of depression and anxiety originating in psychological and physical abuse that he experienced as a child when he lived with his parents, as well as by army superiors after he was inducted in the Salvadoran Army.

Given that female parents more frequently kill their children, the index case provides a look at the less often encountered filicidal parental male. The case of Mr. B is classified in accordance with motivational factors potentially relevant to filicidal or filicidal-type behavior. From a biological viewpoint, neurobiological factors may specifically affect a given organism to engage in this type of homicidal behavior. In addition, evolutionary considerations have also been raised as potential influences. Socioecological factors, independent of psychosociocultual issues can also play a pivotal role. However, an in-depth exploration of psychosociocultural issues is utilized to arrive at a more comprehensive explanation of the causes of filicidal activity. The cultural formulation of DSM-IV is used to evaluate relevant psychosocial factors and it is composed of five sections. These sections are: 1) The cultural identity of the individual where the person's cultural and ethnic reference groups are explored; 2) The cultural explanations of the individual illness; 3) The cultural factors associated with the psychosocial environment and levels of functioning; 4) The relationship between the (treating) clinician and the patient; and 5) The development of the cultural assessment with its diagnostic, therapeutic, and social objectives. Each of these sections receives exploration. In the case of Mr. B, the social component also encompasses legal considerations.

In the final part of the presentation, current needs for improved methods aimed at assessing and classifying parental child killing behaviors from an integrated, comprehensive perspective are discussed. **Homicide, Filicide, Forensic Psychiatry**