



I32 **Maternal Filicide: A Descriptive and Follow-Up Study of 17 Women Hospitalized in a French Secure Unit Over a 23-Year Period**

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Learning Overview: The goal of this presentation is to provide an analysis of maternal filicide and to specify the psycho-criminological profile of mentally ill filicidal mothers.

Impact on the Forensic Science Community: This presentation will impact the forensic science community by improving the understanding of maternal filicide associated with mental illness.

Background and Goal: Maternal filicide is defined as child murder by the mother. Many classification systems have been proposed, based on underlying motives such as altruism, mental pathology (often acute psychosis), an unwanted child, fatal maltreatment, and spousal revenge. Pathological filicide refers to cases in which the perpetrator has a major psychiatric illness. Related literature is sparse, especially concerning the evolution of offenders. The present work seeks to identify the main characteristics of mentally ill filicidal mothers and to assess their socio-clinical evolution after the filicide.

Method: Studied first was the sociodemographic, clinical, and forensic characteristics of all filicidal mothers admitted to France's Henri Colin secure unit between 1996 and 2018 (17 patients). The evolution of these patients was assessed after discharge from the secure unit, using questionnaires sent to the prisons or the psychiatric hospitals where the patients were transferred.

Results: Most filicidal mothers had a dysfunctional childhood, marked by emotional neglect, intra-familial violence, or social isolation. They were mostly married, with a mean age of 32 years. There was a history of abusing their own children in one-third of the cases. The victims' mean age was 6.2 years, and in several cases, multiple siblings were murdered. Half of the filicidal mothers had a history of psychiatric disorder. Three different diagnoses were found in this study: a mood disorder (41.2%), schizophrenia (41.2%), or a personality disorder (17.6%). The analysis of the act allows us to distinguish two subgroups of motivational profiles. In the first group, filicide is a defensive reaction to a perceived threat: the murder is committed under the influence of hallucinations or delirium. In the second group, filicide is linked to a context of separation, real or imagined. Several forensic and psychopathologic features associated to each profile are detailed. Concerning the evolution of these patients, this study underlines the suicidal risk (even years after the offense), therefore requiring long-term supervision.

Conclusion: The results of the present study on 17 mentally ill filicidal mothers are consistent with the literature. Two psychopathologic profiles are described. Several biases in this study disallow the generalization of these findings, and further studies are needed.

Filicide, Infanticide, Forensic Psychiatry