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## Letter to Editor

# Navigating the intersection of psychiatry and law: Insights into insanity defense and fitness to stand trial in the Indian legal system

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## ABSTRACT

In the complex landscape of forensic psychiatry, the intersection of mental health and the legal system presents challenges that demand clear guidelines for effective navigation. This letter delves into the pivotal roles psychiatrists play in assessing the insanity defense and determining fitness to stand trial, crucial aspects intertwined with the principles of justice and human rights.

Moreover, we elucidate the nuanced interpretation of Section 22 of Bhartiya Nyaya Sanhita (previously Section 84 of the Indian Penal Code), which delineates the criteria for absolving individuals of criminal responsibility due to mental illness. Comparisons with McNaughten's rule highlight subtle differences in legal frameworks and their implications for verdicts of "not guilty by reason of insanity."

Furthermore, our article emphasizes the importance of interdisciplinary collaboration between psychiatry and forensic medicine to enhance comprehension of legal complexities thereby improving the management of forensic patients. With a visual aid we will facilitate understanding of the multifaceted concepts discussed herein. By fostering dialogue and collaboration, we aim to contribute to a more informed and equitable legal approach to individuals with mental health concerns within the criminal justice system. Top of Form

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## 1. Introduction

During our academic program, we explored the topic of "Insanity defense and fitness to stand trial." We realized that in forensic psychiatry, we often seek clear guidelines to navigate the complexities of the legal system. We cannot understand the procedures if we do not know the basic principles of penology, which focus on deterrence, rehabilitation, protection of civilians, and retribution from criminals. The following discussion attempts at obtaining a holistic view of the steps and procedures for a mentally ill person to reach the stands of the court and the possibility of incarceration.

## 2. Fitness to Stand Trial

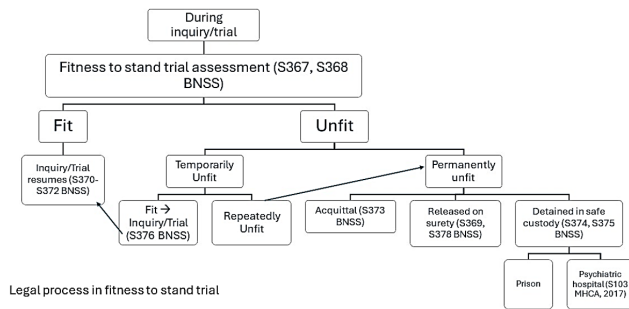
Forensic Psychiatry intersects with law in various ways, such as serving as expert witnesses or assessing the mental state of individuals involved in legal proceedings. The Mental Healthcare Act of 2017 emphasizes a rights-based approach, aligning with the judiciary's aim to protect the rights of vulnerable individuals.<sup>1</sup> However, forensic psychiatrists encounter challenges in balancing legal and healthcare responsibilities, notably in determining fitness to stand trial, which involves assessing the defendant's psychiatric state and ability to participate in legal proceedings. Where they not only have to be free of mental illness but also have to possess the ability to comprehend and be able to provide evidence to support their lawyers, those fighting in their defense.

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Chapter 27 of the Bharatiya Nagrik Suraksha Sanhita (previously chapter 25 of CrPC) addresses this issue, focusing on the defendant’s understanding and participation in legal proceedings.<sup>2</sup> This evaluation is crucial for ensuring the accuracy of the criminal process and preserving the defendant’s autonomy and dignity. However, navigating the legal complexities and understanding patients’ experiences can be challenging for forensic psychiatrists. Interdisciplinary collaboration is essential in addressing these challenges.

We have outlined the steps in Figure 1 to provide a visual guide for understanding this concept. We hope this will aid in comprehension and serve as a useful tool.



**Figure 1:** Sections of Chapter 27 of BNSS and their application in the process of bringing a mentally ill defender to court

### 3. Criminal Responsibility

In the realm of justice, psychiatrists also play a role in determining criminal responsibility, which involves assessing mental capacity at the time of the alleged incident. While most medicos who write NEET PG exam are aware of McNaughten’s Rules and that it applies to a mentally ill person who has committed a crime. But most do not know that it comprises of the following points:

1. Every man is to be presumed to be sane and to possess a sufficient degree of reason to be responsible for his crimes, until the contrary be proved.
2. An insane person is punishable “if he knows” at the time of crime.
3. To establish a defense on insanity, the accused, by defect of reason or disease of mind, is not in a position to know the nature and consequences.
4. The insane person must be considered in the same situation as to responsibility as if the facts with respect to which the delusion exists were real.
5. It was the jury’s role to decide whether the defendant was insane.<sup>3</sup>

Section 22 of the Bharatiya Nyay Sanhita (previously section 84 IPC) is particularly relevant, stating that an act committed by a person due to mental illness, rendering

them incapable of understanding the nature of the act or its wrongfulness, is not considered an offense.<sup>4</sup> This section, derived from McNaughten’s rule, differs subtly from it. While McNaughten’s rule allows for the acknowledgment of an offense, Section 22 of BNS completely absolves individuals lacking mental capacity from guilt, resulting in a verdict of "not guilty by reason of insanity" rather than "guilty but mentally ill."

Discussions in our seminar room also addressed concerns about the fate of mentally ill individuals accused of murder, especially when they don’t fit under McNaughten’s rules. This led to debates about the distinctions between culpable homicide and murder, the only place where Indian laws consider the concept of diminished responsibility, resulting in reduced sentences based on the individual’s mental state (Table 1).

**Table 1:** Differences between culpable homicide and murder: subtle use of doctrine of diminished responsibility

Culpable homicide	Murder
1. Section 100 BNS (previously Section 299 IPC)	1. Section 101 BNS (previously Section 300 IPC)
2. Killing without specific intent to cause death.	2. Killing with clear intent to cause death.
3. Punishment: a. Intent +, knowledge + : life +/-fine b. Intent +, knowledge + : life +/-fine	3. Punishment: a. Intent +, knowledge + : life +/-fine b. Death +/- fine
4. No premeditation	4. Premeditation present
5. Sudden provocation	5. Involves malice aforethought

Although the Indian Criminal Manual is complex, collaborative study with psychiatry faculties and students can enhance the ability to apply the laws and improve practical management forensic patients.

### 4. Conclusion

The Mental Healthcare Act of 2017 and Chapter 27 of the Bharatiya Nagrik Suraksha Sanhita stress the significance of protecting the rights and dignity of individuals with mental illness, ensuring they can comprehend and actively engage in legal proceedings. Regarding criminal responsibility, Section 22 of the Bharatiya Nyay Sanhita acknowledges mental illness and its impact on legal accountability, fully absolving affected individuals of guilt. Our discussions highlighted the importance of diminished responsibility and suitable sentencing, particularly for cases that don’t fit in the above mentioned niche for example, culpable homicide and murder.

There is a necessity for continuous education and collaboration between legal and psychiatric fields. By delving deeper into these legal structures and their practical

implications, we can more effectively address the challenges of managing forensic patients, thereby ensuring justice and proper care for individuals with mental illness within the criminal justice system.

## 5. Sources of Funding

None.

## 6. Conflict of Interest

None.

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