

Dying with parents: an extreme form of child abuse

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Background: Filicide is the tragic crime of murdering one's own child. This report aims to summarize all such cases involving filicide with suicide and analyze possible risk factors pertinent to the city of Hong Kong.

Methods: All cases involving filicide with suicide between 1998 and 2010 were reviewed and possible risk factors pertinent to the city of Hong Kong were analyzed.

Results: During the study period, there were 14 cases of parents committing suicide and filicide in Hong Kong. Sixteen victims (9 boys and 7 girls, ages range from 2 months to 33 years) and a three-month fetus were involved; only two survived. The parents (12 mothers and 3 fathers, ages range from 25 years to 64 years) all died. The majority of perpetrators ($n=7$) had alleged history of psychiatric illness or post-puerperal depression. The majority jumped from heights ($n=11$ off tall buildings, $n=1$ off a bridge), one father used town-gas, and one couple burned charcoal (carbon monoxide poisoning).

Conclusions: These rare but tragic cases involved children of both sexes and all ages. Although psychosocial risk factors may be clues for interventions, the rarity of these incidents and the impulsiveness of the act make preventive measures virtually impossible in a city full of high-rise buildings.

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Introduction

Suicides are tragic events. Unfortunately, desperate or depressed parents might take the lives of their children with their suicidal attempts. Filicide,

an extreme form of child abuse, is the tragic crime of murdering one's own child.^[1-9] There were five cases that hit head news in the first 5 months of 2010 in Hong Kong. Hong Kong is full of high-rise buildings and jumping off buildings is a relatively common mode of suicide. The author has followed the subject matter closely over the past decade. The purpose of this report is to summarize all such cases involving filicide with suicide and analyze possible risk factors pertinent to the city of Hong Kong.

Methods

All cases involving filicide with suicide as reported in media were reviewed and possible risk factors pertinent to the city of Hong Kong were analyzed, including age and gender of perpetrators and victims, mode of filicide and suicide, history of psychiatric illness and acute psychosocial stressors.

Results

Thirteen cases of parents committing suicide and filicide in the busy city of Hong Kong hit the head news between October 1998 and May 2010 in Hong Kong (Table). The details of each case were well covered by local news reports and media. Sixteen children (9 boys and 7 girls; median age 4.0 years, interquartile range IQR 0.8-8.5 years, range 2 months to 33 years, $P=0.2$ between genders) and a three-month fetus were involved and only one survived. The parents (12 mothers and 3 fathers; median age 36 years, IQR 31-40, range from 25 years to 64 years, $P=0.6$ between genders) all died. The majority of perpetrators [$n=7$ (47%)] had a history of psychiatric illness or post-puerperal depression. The majority jumped from heights ($n=11$ off tall buildings, $n=1$ off a bridge). One father used town-gas and one couple burned charcoal (carbon monoxide poisoning).

There were two survivors. A 41-year-old mother threw her 4-year-old daughter off the 7th floor in a shopping mall and jumped to her death after quarrelling with her husband over trivial matter. The daughter was fortunately saved by the mall's safety net and survived unharmed. Another 4-year-old girl was tightly embraced

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by her mother as she jumped off the 17th-floor apartment. Hong Kong comprises of the Hong Kong Island, Kowloon Peninsula and the New Territories. Twelve cases occurred in the New Territories and one case in the Kowloon Peninsula. There was no difference in the risk factors or mortality patterns on comparing male versus female perpetrators, infants versus older victims, gender or age.

Discussion

These rare but tragic cases involved young children of both sexes and all ages. In the month of February 2010 which was the month of the Lunar Chinese New Year, three consecutive cases occurred. It appears that there are some months of the year that no such tragic cases occurred. The small number of cases, however, precludes speculation of the effects of festivals. Nearly all cases

Table. Demography: filicides in Hong Kong

| Date | Perpetrator | Sex | Age | Incident | Outcome | Remarks |
|-----------|---|--------|------------------------------|--|--|--|
| Oct 1998 | 41-y mother Husband had affair | M M | 6 y 10 y | Threw children off building, then suicidal jump | All dead | New Territories |
| Apr 2002 | 33-y mother 40-y father Financial problems | F | 3 y | Burned charcoal in an apartment | All dead, including unborn 3-mon fetus | New Territories |
| Apr 2002 | 25-y mother Psychiatric illness Post-puerperal depression | M | 3 mon | Threw children off 38th floor building, then suicidal jump | Both dead | New Territories 27-y father |
| Sept 2002 | 39-y single mother Deserted by boyfriend Hospitalized for suicidal attempt but escaped to commit the crime | M | 3.5 y | Jumped off 15th floor building with child | Both dead | New Territories |
| Jan 2003 | 29-y mother Post-puerperal depression | M | 8 mon | Jumped off 28th floor building with child | Both dead | New Territories |
| Sept 2004 | 37-y mother Psychiatric illness | M | 4 mon | Jumped with baby from 25th floor | Both dead | New Territories Father an university associate professor |
| July 2007 | 34-y father Psychiatric illness Wife remarked that he was "useless" during quarrel | F | 6 y | Threw victim off 19th floor, then suicidal jump | Both dead | New Territories Mother 27-y |
| Oct 2007 | 36-y mother Depression Tired of caring for her ill husband | F | 12 y 9 y | Tied and threw children off 24th floor building, then suicidal jump | All dead | New Territories 47-y father with nasopharyngeal cancer in hospital |
| May 2008 | 31-y mother Suspected husband having an affair Became upset one day before Mother's day | M | 14 mon | Poisoned daughter and then jumped off 37th floor apartment with victim | Both dead | New Territories |
| Feb 2010 | 31-y mother Post-puerperal depression | F | 2 mon | Jumped off 11th floor building with baby | Both dead | New Territories |
| Feb 2010 | 41-y mother Quarreled with husband | M | 4 y | Threw victim off 7th floor in a shopping mall, and suicidal jump | Girl saved by safety net but mother died | Kowloon |
| Feb 2010 | 38-y single mother Psychiatric disease Received negative remarks from relatives during the Lunar New Year | F M | 7 y | Jumped off 26-meter bridge | Both drowned | New Territories On comprehensive social security assistance Social work service follow up |
| Mar 2010 | 64-y father Retired for 2 years No apparent financial/psychiatric problems | F | 33 y mentally retarded | Towngas poisoning in home toilet | Both dead | New Territories Wife 57-y |
| May 2010 | 32-y mother Financial problems | F | 4 y | Jumped off 17th floor building with child embraced | Mother died, child fractured leg and kidney injury | New Territories On comprehensive social security assistance 27-y father investigated for theft |

M: male; F: female.

occurred in the New Territories. Citizens residing in the New Territories are generally of lower socio-economic status. Financial factors could have negative effects. As the majority of cases involved jumping off tall buildings, the chances of survival was dismal. Only one case of survival was reported. Unfortunately, the safety net in the shopping mall could not bear the force of the mother's weight to save the mother.

Our epidemiologic data are comparable with those of Finland and Austria in some aspects, namely that the victims were predominantly boys, median age of the victims was less than 5 years, more perpetrators were mothers, the median age of perpetrators was 36 years, and psychiatric risk factors may be present among the perpetrators.^[8,10] Nevertheless, there were some dissimilarities in that all perpetrators and nearly all victims died, and jumping from heights is the predominant mode of suicide and filicide. Charcoal burning is a relatively popular mode of suicide in Hong Kong. There was only one such case in this series which involved the lives of the whole family and the unborn fetus. Conversely, suffocation or shooting was often used in Finland or Austria.^[8] Unlike many cities that guns and pistols are readily available, there has been no gunshot injury involving childhood accidents in Hong Kong.^[11]

A small retrospective US study showed a different pattern in that twice as many fathers as mothers committed filicide-suicide during the study period, and older children were more often victims than infants. Their records indicated that parents frequently showed evidence of depression or psychosis and had prior mental health care.^[5]

The limitation of this paper is that data are obtained from reviewing reports from the media because they are not directly available for analysis. Nevertheless, only such principal demographic data as gender, age, month of year, and mode of filicide-suicide which are unlikely erroneous were used. It is definitely advantageous to have a register-based, comprehensive, and nationwide prospective database as in Austria and Finland covering all filicides.^[8]

As prevention implies the recognition of causes involved in particular situations, a better understanding of potentially fatal parental/familial dynamics leading to filicide could facilitate the identification of risk and enable effective intervention strategies.^[7] Psychosocial risk factors are present in many of these cases, notably depression and post-puerperal depression.^[4,7,8] In one report, mental illness, substance abuse and intellectual impairment have been associated with the perpetrators.^[4] Prevention should also involve the use of a multidisciplinary approach in considering the multiple causes and solutions to this problem.^[6] As a community, citizens might be taught

to become more aware about the symptomatology of psychiatric illness so that at-risk cases might potentially be more readily recognized by relatives, friends, neighbors and health care workers and help offered sooner.

The majority of perpetrators had alleged history of psychiatric illness or post-puerperal depression. This might provide an opportunity for prevention. Physicians, paramedical professionals and social workers may be more proactive in offering help and supports to the at-risk families at the earliest possible stages when filicide/suicide intention is sensed or detected. At a society level, surveillance cameras may be installed at some of the buildings in the community. Nevertheless, the rarity of these incidents and the impulsiveness of the act make preventive measures virtually impossible in a city full of high-rise buildings.

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