Samurais and psychiatry

Monday the 18th August 2008. Another South African teen murder, at school. A sensational public execution of one pupil by another, using a Samurai sword, grabbed the media's attention and shocked the nation. The murder was a tragedy, for all. The incident in question, related to one pupil killing another, is not unique in South Africa, nor is the issue of violence at schools something new. In recent times there has been extensive media coverage of knife related teen homicide in England as well as pronouncements on the phenomenon from their government. Further, the use of Samurai swords is not uncommon as a weapon of murder. However, the incident in question does appear to be the first such instance where a killing of this nature took place on school grounds in South Africa, evoking such killings that have occurred all too frequently in North America e.g. Columbine. Regarding Columbine, it was the music of Marilyn Manson that was implicated there whereas in this instance the perpetrator claimed the influence of the music of the band Slipknot. Initially the band declined to comment on the incident in question but subsequently issued a statement to the effect that they were not responsible for anything other than creating music. Subsequent to his arrest the perpetrator was sent for psychiatric evaluation, having claimed that "ghosts" in some way influenced him to turn to Satan which led to the murder.

It goes without saying that the extent of violent crime in South Africa is such that as a society we should not be surprised at what took place, and maybe it is only the more sensational aspects of the incident that caught the media's attention and thus led to this editorial. That being the case, it is appropriate to acknowledge the countless other faceless victims that have been murdered in South Africa.

Acts, such as the one under consideration, appear to be endpoints of a complex interaction that fundamentally involve the individual and their environment. The emphasis is really on the complexity of the issue given the inevitable quest for an answer or answers. In considering the incident it appears prudent to explore certain concerns which might be more emotion driven than factually accurate i.e. the relative roles of music and Satan, as well as the role of Psychiatry.

Speaking of environmental influences, once again the debate raged about the influence of certain types of music on adolescent behaviour as well as the influence of Satan. More specifically, the influence of music and Satan on violent, murderous adolescent behaviour. Whilst these issues tended to dominate, the role of parents and the education authorities are critical elements, with concerns related to quality of parenting, bullying, access to and screening for weapons all in some way part of the complexity. The list could go on.

The relationship between music and adolescent behaviour is probably more appropriately viewed within the context of an association rather than causation. Specifically that certain adolescents, with specific behavioural inclinations, are drawn to certain types of music which rather than cause them to behave in certain ways (homicidal or self destructive) provide more of a background soundtrack to their actions. Further, that over and above the music, to consider that the lyrics which rather than place ideas are potentially interpreted so as to provide justification for acts that are violent. These distinctions are critical insofar as issues of accountability and responsibility are raised which have implications for courses of action from both authorities and society.

Satanism is often claimed as the basis for anti-social acts yet Satanism per se is not a homogenous entity in that there are both philosophical elements (that go beyond simply being anti-Christ etc.) and more ritualistic ones, the latter being more commonly associated

with anti-social acts/behaviour. It does seem that there are links between childhood abuse and Satanism as well as the inclination of more troubled youth to dabble in and explore Satanism; possibly those who are more disaffected and alienated. At a personal level, in my experience of working with troubled adolescents, an interest in Satanism is generally a phase that reflects a search for meaningful affiliation or in fact simple curiosity and exploration. However it is understandable that there are concerns and certainly where such involvement exists it should be explored and addressed.

One of the more difficult aspects of Psychiatry is the relative inability of psychiatrists to accurately predict either homicide or suicide, despite the awareness of risk factors that might predispose an individual to either. Moreover, the inclination to attribute violent acts to mental illness needs to be tempered as it creates an erroneous impression that all mentally patients are violent and further that perpetrators of such acts need psychiatric intervention. Generally speaking, past behaviour tends to predict future behaviour. Most recently the issue of violence amongst schizophrenic patients was the focus of a study attempting to determine whether older antipsychotic agents are inferior to newer agents in diminishing violent acts in this population. They weren't. However, of interest was that those schizophrenics who committed violent acts despite being on medication compared to those whose violent behaviour was reduced by medication had a history of childhood anti-social conduct.² Hence it does appear that within the psychiatric population, suffering from schizophrenia, there is an emerging understanding of why certain patients might commit violent acts despite adequate medication. By implication, adherence to medication by those schizophrenics without a history of childhood anti-social behaviour was certainly associated with a reduction in violent acts. Hence within the context of known psychiatric patients, we do indeed have some knowledge of predictors of violence, specifically in relation to a specific diagnosis, past history and current medication.

The reality is that the perpetrator¹ may well turn out to be mentally ill and incapable of having acted in accordance with an appreciation of the wrongfulness of their act. It may be that this is not the case.* Neither outcome will diminish the tragedy of lives lost but it is possible that the incident will serve to highlight, once again, the national (South African) epidemic of violent crime with a sober exploration of how we create an environment where the sanctity of life is not simply a constitutional requirement but a societal reality. Psychiatry as a discipline has a role to play not only in the forensic sense but also in terms of sharing our understanding of violence in psychiatric populations as well as potentially contributing to knowledge regarding social factors and their impact on emotional functioning and ultimately human behaviour.

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* Subsequent to the writing of this editorial, Morne Harmse has been deemed fit to stand trial.

References

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