

HOMICIDE IN ABBOTTABAD

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Background: Homicide is one of the oldest crimes in human history. Although a large number of dimensions have been added to this crime, the age-old factors like revenge, rage, jealousy and honour persist even today. This study was conducted jointly at the attached hospitals of Women Medical College and Ayub Medical College, Abbottabad to know the various dimensions of the victims of homicide. **Methods:** The present study encompasses all 40 cases of homicide, which presented for autopsy at DHQ hospital and Ayub Medical Complex Abbottabad during the year 2002. The manner of death was categorized as homicide on the basis of police inquest and the autopsy findings. **Results:** The homicide rate in Abbottabad was found to be 4.22/100,000 per year. Males were the primary targets usually in their prime of youth with 40% victims between 20–29 years. Firearms formed the major weapon of offence. Most victims died before reaching the hospital. Deaths were more common during the daytime and in summer months. **Conclusion:** Homicide rate is on the lower side in Abbottabad amongst places where firearm possession is not strictly controlled, but can be further reduced. Limiting firearm possession alone can go a long way in this goal.

Key Words: Homicide, age, daytime, Firearms, Abbottabad.

INTRODUCTION

Homicide is the death of one human being as the result of conduct of another.¹ Homicide rates vary greatly in different parts of the world, being low in places like Egypt, Greece, England and high in countries like Mexico, Columbia,² and Russia.³ Victims of this crime are usually in the prime years of life.⁴⁻¹⁰ Males greatly outnumber female victims.⁴⁻¹¹ The methods of killing have changed over time. With recent advances, weapons like knives and daggers are becoming outdated and are being replaced by firearms as the most common weapon.^{4,11-13} The head and chest are the commonest sites of fatal injury.¹⁴ The summer season shows an increased incidence of violent deaths.^{4,14,15} The daytime has been reported to have a higher preponderance of homicide.⁴ Factors related to homicides are day to day tension, intolerance, joblessness, drug addiction and terrorism. In addition emotional factors like lust, rage, jealousy and revenge are other factors behind homicide.

Data on patterns of homicide from some cities in Pakistan has started to emerge.^{4-7,14,15} However no data for Abbottabad has so far been reported. This study was conducted to know the various parameters of homicidal deaths, as knowing a problem is a prelude to tackling a problem.

MATERIAL AND METHODS

The study was undertaken in the departments of Forensic Medicine and Toxicology, Women Medical College Abbottabad and Ayub Medical Complex for the period of one year from 1-1-2002 to 31-12-2002. The study included all the medico legal autopsies carried at both the attached hospitals (the only autopsy centers for the entire region), which were labelled as homicide on the basis of the autopsy and police inquest. The study parameters were age, sex, type of weapon, manner of death, part of body involved, seasons, time of day, whether hospitalised or not. They were further divided into sub-groups for analysis.

RESULTS

There were a total of 40 cases consisting of 35 males and 5 females. The male to female ratio was 7:1. The victims belonging to commonest age group fell under 20-29 years (40%) followed by 30-39 years (22.5%). The sex and age distribution are shown in Tables 1 and 2.

Table-1: Sex distribution of homicide victims

Sex	Number of Victims
Male	35 (87.5 %)
Female	5 (12.5%)

Table-2: Age distribution of homicide victims

Age group (in years)	Number of Victims
0-9	Nil
10-19	7 (17.5%)
20-29	16 (40%)
30-39	9 (22.5%)
40-49	4 (10%)
50-50	2 (5%)
60-69	2 (5%)
Above 70	Nil

Firearms (62.5%) were the most common method of offence, with rifles on the top of list (57.5%) followed by use of blunt methods (22.5%), as shown in table-3

Table-3: Method of offence

Type of Weapon	No. of cases (%)
Firearms	23 (57.5%)
Shotgun	2 (5%)
Blunt Force	9 (22.5%)
Sharp Force	2 (5%)
Poisoning	1 (2.5%)
Asphyxia	3 (7.5%)

Table-4 gives the part of body involved commonly. Commonest was head (42.5%) followed by chest (42.5%).

Table-4: Part of body involved

Part of Body	Number of Cases (n=40)
Head	17 (42.5%)
Chest	17 (42.5%)
Neck	3 (7.5%)
Abdomen	7 (17.5%)
Upper Limb	1 (2.5%)
Lower Limb	Nil

Two or more parts were involved in a few cases

Out of 40 cases 22.5% of cases were hospitalized only, rest of 77.5 % died without hospitalization as shown in table 5.

Table-5: Hospitalization

Hospitalization	Number of cases
Yes	9 (22.5%)
No	31 (77.5%)

The maximum number of victims died during the day time (60%) table 6 and in months of May (17.5%) followed by September (15%) as shown in table 7.

Table-6: Time of homicide

Time	Number of Cases
6 am to 6 pm	24 (60%)
6 pm to 6 am	16 (40%)

DISCUSSION

With a population of 9,461,64 in the year 2002, the homicide rate for Abbottabad is 4.22/100,000. This is higher as compared to countries like Egypt, Greece, Japan and England¹⁶, but lower as compared to USA Mexico and Columbia where rates up to more than 15/100,000 have been reported.² Rates between 31-124/100,000 have been reported in metropolitan cities.^{8,10,17} The reason for this low incidence could be the low level of urbanization and industrialization and a rather high literacy rate (75% in males) in this city.

A male preponderance of victims is in accordance with other studies in Pakistan⁴⁻⁷ and other parts of world^{9,18-21} this is because of the extrovert nature of males and males dominating nature of society in Abbottabad.

Table-7: Month-wise Variation

Month	Number of Cases
January	1 (2.5%)
February	4 (10%)
March	1 (2.5%)
April	2 (5 %)
May	7 (17.5%)
June	4 (10%)
July	4 (10%)
August	3 (7.5 %)
September	6 (15%)
October	3 (7.5%)
November	1(2.5%)
December	4 (10%)

The age of predilection of the victims in our study is in accordance with that reported in other studies in Pakistan.^{4-7,14}

Firearms were the major weapon of offence (62.5%) consistent with other studies in Pakistan^{4-7,14} and in countries with a high level of firearms possession.^{8-13,22}

The head and chest as the primary targets is in accordance with other studies^{7,15} and these areas are targeted due to knowledge that vital areas are situated here. In addition victims hit in these areas are most likely to succumb to such injuries and therefore become a part of study such as the present one.

60% of homicides occurred during the daytime as also reported from Lahore.⁴ This is the time when contact and quarrels more often take place. The same reason could be forwarded for the increased occurrence of homicide between May and September as these are months having highest temperatures in Abbottabad with a resultant heat in the emotions of people.

About 80% of victims died before hospitalization. This is because of the increasing use of firearms in which multiple injuries usually occur. In addition the emergency services in Abbottabad as in most places of the country are very poor thereby losing valuable minutes which become of prime importance in critically injured victim especially from a weapon such as a firearm.

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