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Statistical Compilation

Investigating the Verdicts of Mass Murder Cases in Which the Prosecutors Sought the Death Penalty and Criminal Responsibility Became the Focus: The Change of Psychiatric Evaluations and Criminal Responsibility Judgements in Serious Cases

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Abstract

After having been in charge of a psychiatric evaluation in a death penalty case, the authors conducted an investigation of verdicts in past cases where the death penalty was sought by the prosecution and where criminal responsibility became the focus. The study examined the details of 11 cases from between January 1, 1980, and February 28, 2019, in which there were 3 or more victims (deceased) outside of the family, and in which the verdict recognized such psychotic symptoms as hallucinations and delusions as having related to the criminal act. The results showed that while in past cases, where diminished responsibility was recognized the accused would avoid the death penalty and be sentenced to life imprisonment, more recently it has become less likely for courts to recognize diminished responsibility or insanity, or to allow a reduction in punishment in light of extenuating circumstances. Thus, the death penalty has continually been awarded on the grounds of full criminal responsibility. Previously, judgments of diminished responsibility were handed down in cases where delusions deriving from mental disorders played a part in the motivation for the crime and then doubts remained about the accused's ability to understand the situation they were in

and to control their behavior. More recently, death penalties have been awarded in consideration of the separation between "motivation" and "the criminal act itself," so that although in cases where a mental disorder did influence the motivation, the criminal act itself is seen as one of normal psychology, and so on. Moreover, while in the past emphasis was placed on diagnosis following the criminal act, with diagnoses of schizophrenia having a significant effect and the influence of agnosticism presumed to remain, more recently there has been a growing tendency for gnosticism, in which the influences and mechanisms of mental disorders and normal psychology on the criminal act are analyzed in detail, and the defendant's capacities and lack of mental illness are more likely to be highlighted. The contributing factors are thought to be the shift to gnosticism (1984-) and the spread of the seven focal points (2006-), the introduction of the victim participating system (2008) and lay judge trials (2009), the trend toward severe punishment, and the normalization of people with mental disorders. When the social impact of the crime is significant-for example, when there are many victims and they are not family members-it is less likely for diminished responsibility or insanity to be recognized and the death penalty will follow. Finally, beyond the diagnosis, we suggest visually illustrating the influence of illness and other factors on the criminal act in a way that is easy to understand through case formulation and making a life chart to increase the scientificness and transparency of a psychiatric evaluation.

Keywords: psychiatric evaluation, death penalty, agnosticism, criminal responsibility, lay judge trial

Introduction.

The authors studied the sentences of cases in which the defendant was sentenced to death in a jury trial in which they had conducted a psychiatric evaluation and an expert witness examination. As a result, I have come to question whether the death penalty continues to be imposed in cases where

there are three or more victims (the deceased) and the victims are not family members, because recently it has become more difficult to reduce the sentence due to deprivation of mind, insanity, or extenuating circumstances, even in cases where psychotic symptoms such as delusions influenced

the motive for the crime 13). We also discussed the factors behind this.

Although 142 countries worldwide do not use the death penalty and only a small number of countries, including Japan, have the death penalty 1), there is much debate worldwide about the ethical issues of the death penalty, including post-conviction treatment, assessment of competency to receive the death penalty, methods of execution, and the death penalty itself. The United Nations Commission on Human Rights has called for the abolition of the death penalty 23), and there are many academic statements, reports and opinions expressed in internationally renowned medical journals 3-5)11)15)17)18)22). The World Medical Association has stated that it is unethical for physicians to be involved in the death penalty in any way or at any stage of the execution process 25), and the World Psychiatric Association has stated in its Madrid Declaration that under no circumstances should psychiatrists be involved in legally authorized executions or in the assessment of competence for executions. The Lancet wrote an article in 2009 criticizing Japan's execution of the mentally ill 6). On the other hand, as far as the author has been able to find, there are few reports or opinions on the involvement of psychiatrists prior to the death

penalty, i.e., the assessment of competency in cases in which the death penalty is sought, such as statements by academic societies or reports in medical journals.

A part of this paper has been reported in a Perspective Paper in *Frontiers in Psychiatry* as a part of the general discussion on death penalty and psychiatric evaluation in Japan 13). A part of this paper was also presented at the 15th Annual Meeting of the Japanese Association of Judicial Psychiatry (June 7, 2019).

I. Method

The cases were collected mainly from court judgments provided by the online service of the TKC Law Library, which collects judgments in a database and provides them for a fee for academic use. Although the judgments are not subject to copyright under Article 13 of the Copyright Act, written permission was obtained from TKC Law Library in order to cite the judgments. In addition, the reference number of the LEX/DB database is attached to the judgment.

We set the time period from January 1, 1980 to February 28, 2019, and searched by entering "death penalty" and "responsible capacity". We selected cases in which there were three or more victims (deaths) and in which psychotic symptoms such as hallucinations and delusions were found in the judgment to

be related to the crime, and examined them in detail.

It should be noted, however, that the data do not include cases in which the prosecutor did not prosecute, cases in which the death penalty was not sought, and cases in which no competency evaluation was conducted.

Since this paper is based only on the text of the judgment, it is considered to fall under the exceptions to the scope of application in section 3, "Scope of Application", 1, "Applicable Research", of the Ethical Guidelines for Medical Research Involving Human Subjects, c. 1) "Materials and information that have already established academic value, are widely used for research, and are generally available. However, from the perspective of protecting the privacy of research subjects, in accordance with the "Guidelines for the Protection of Privacy in Medical Papers and Conference Presentations, Including Case Reports" and "Guidelines Q & A" of the Japanese Society of Psychiatry and Neurology, and the "Handling and Consideration of Personal Information in Academic Society Activities" of the Japanese Federation of Medical Societies In this paper, the date of the case, the name of the court, and the date of judgment are partially omitted, and the outline of the case and the motive are simplified to the extent that they do not affect the argument.

II. Results

A search of the TKC Law Library for the period from January 1, 1980 to February 28, 2019, using the terms "death penalty" and "culpability", yielded 238 results, including 33 cases of single offenders with three or more victims (fatalities). Among them, there were 33 cases of single crimes with three or more victims (fatalities), excluding three cases in which family members were victims. The three cases in which family members were victims (four, three, and five victims, respectively) all avoided the death penalty and resulted in life imprisonment (LDX/DB25402780 in 1988, LDX/DB28025011 in 1996, and LDX/DB25440492 in 2009). Among the remaining 30 cases, we selected 11 cases in which psychotic symptoms such as hallucinations and delusions were found to be related to the crime. Table 1 summarizes the details of the 11 cases, including the motive, diagnosis, relationship between the mental disorder and the crime, and the basis for the judgment of culpability. In the gray area, there is a chronology of the start of new laws and systems, Supreme Court decisions, and historical cases. The last three cases are under appeal at the time of writing, and there is a possibility that the decisions will be overturned in the future. As shown in Table 1, from 1982

to 2006, the death penalty was averted by the finding of insanity, and life imprisonment was awarded.

III. Discussion

In the case of three or more victims other than family members, in the 1980s, if the motive for the crime was influenced by delusions caused by mental disorders, it was judged that the victim was insane and the death penalty could be avoided. In recent years, there has been a tendency to separate the "motive" from the "crime", and to conclude that the crime itself can be explained by normal psychology even if the motive is influenced by hallucinations and delusions, or to analyze the influence of mental disorders and other normal factors on the crime.

In 1983, the Supreme Court decided that whether or not the defendant's mental state constitutes insanity or diminished mental capacity as defined in Article 39 of the Penal Code is a matter for legal judgment and should be left exclusively to the court. In 1984, the Supreme Court issued a decision that created a trend from the agnostic theory to the knowable theory. Agnosticism is the view that it is impossible to know the mechanism of the influence of mental disorder on the crime, and a diagnosis of schizophrenia tends to weaken the defendant's responsibility.

The existence and degree of the defendant's responsibility should be judged by taking into consideration the defendant's medical condition at the time of the crime, the state of his life before the crime, and the motive and manner of the crime" (The Supreme Court, July 3, 1984, Penal Code, Vol. 38, No. 8, p. 2783). Since 2006, the "Seven Points of View" have become popular. These "Seven Points of View" are a list of questions that are often asked to psychiatrists by legal experts, and were organized to prepare theories for expert witness examinations in advance. The "seven points of focus" include: (1) understandability/unreadability of motive, (2) premeditation, suddenness, contingency, and impulsiveness of the offense, (3) recognition of the meaning, nature, immorality, and illegality of the act, (4) recognition of the possibility of immunity due to mental disorder, (5) heterogeneity/affinity of the offense with the original or ordinary personality, and (6) Consistency, congruency, and non-congruency of the offense, (7) Self-protection and crisis-avoidance behavior after the offense. For example, purposefulness is always found in the commission of a crime, even if the crime is dominated by delusion, but if psychiatrists provide legal professionals with explanations that overestimate the likelihood of understanding, purposefulness, and planning, it would

mean that competence was maintained in almost all cases. Because of this criticism, the use of the seven points of view was initially positioned as a "recommendation" for psychiatric examiners in the guide for preparing psychiatric reports, but now it is said that the seven points of view should be used only as a "reference" and should not be treated as a "standard" but rather as a "viewpoint". In addition, in 2008, it was revised to "Reference". In addition, in 2008, it was stated that in view of the fact that the diagnosis of the existence and degree of mental disorder as a biological factor and the existence and degree of its impact on psychological factors is the main task of clinical psychiatry, if the opinion of an expert psychiatrist is used as evidence in the form of an expert opinion, the fairness and competence of the expert witness may be questioned. In 2009, a decision of the Supreme Court stated that the court should give full respect to the opinion of the expert psychiatrist. In 2009, the Supreme Court decided that even in cases where a part of the opinion of a specific psychiatric expert is adopted, the court may judge the existence and degree of responsibility of the defendant by taking into consideration the defendant's medical condition at the time of the crime, the state of life before the crime, the motive and manner of the crime, and other

factors, without being bound by the other parts of the opinion. (The Supreme Court, December 8, 2009, Penal Code, Vol. 63, No. 11, p. 2829). In summary, today, while basically respecting the opinions of expert witnesses, judgments of responsibility are left exclusively to the court, and even if the court adopts some of the opinions of the psychiatric expert, it is not bound by other parts of the opinions, and can make judgments based on the totality of the medical condition at the time of the crime, the state of life before the crime, the motive and manner of the crime, and other factors (theory of knowability). In addition, in 2008, a report was published by the Ministry of Justice. In addition, the victim participation system was introduced in 2008, and jury trials were started in 2009.

1. Increase in the number of sentences in which the "motive" and the "crime itself" are considered separately

(1) In the case of 1982 (District Court) (see Table 1 below), while it was recognized that the crime was planned and purposeful, that he was aware of the immorality of the crime, that his personality was preserved, and that he still had the power to choose his own actions, he was diagnosed as having a mental disorder due to hallucinations and delusions caused by the effects of

stimulants added to psychogenic delusions. The court judged him to be in a state of mental deprivation because the hallucinations and delusions played an important role in the formation of his motive for committing the crime and significantly restricted his ability to reason and act accordingly. (4) In the 1984 case (District Court), the motive for this crime was to clear his indignation against the world in general, and not to fight back directly against the social welfare organization that was pursuing and persecuting him based on his anger. While it is admitted that the defendant accurately carried out various complex behaviors during and after this offense, it is considered that there is an essentially important relationship between the mental disorder of victimization and delusion of pursuit and the formation of the motive for this offense. The 1984 (High Court) decision was that the defendant's ability to discern right from wrong and to act accordingly was significantly impaired. (5) In the 1984 case (High Court), although it was admitted that the defendant was not completely controlled by delusion, it was said that it was caused by delusion of harm and persecution, and it was admitted that at the time of the crime, the defendant's ability to understand the normative meaning of his actions and to control his actions according to that understanding

was significantly weakened. He was judged to be in a state of mental deprivation.

Thus, in the judgments of the 1980s, if hallucinations and delusions played an important role in the formation of motivation, they were considered to be insanity.

On the other hand, in contrast to these judgments, in the case of the arson of the pachinko parlor in 2010 (district court), although the court acknowledged the connection between the stimulant psychosis and the crime, saying that the crime was indeed triggered by the mental illness and that the mental illness had influenced the defendant to fall into this kind of thinking, the court stated, "The question of whether and how to clear the resentment is for the defendant to decide for himself. He admitted that his mental illness was the reason why he fell into this kind of thinking. (9) In the case of 2016 (High Court), the court stated, "Although the delusion affected the formation process of the motive for the crime, the defendant chose whether and how to retaliate based on his original personality", and "The sense of values regarding the degree of retaliation is not determined by delusional disorder (disease), but by each individual. It is said that the value of the degree of retaliation is not determined by delusional disorder (disease) but by

each individual and full responsibility is recognized. Thus, while mental disorders are said to influence the process of motive formation, it is also said that whether and in what form a grudge is to be redressed, whether to retaliate, and the degree of retaliation are determined by the personality and personal values of the person. Furthermore, in the case (10) of 2017 (district court), while acknowledging that the premise of the motive for the crime, that the victims' family members were agents and that the perception that the accused was under attack, was delusional, and that there was an influence of drug-induced psychosis, the court stated that in the thought process that led to the decision to go to the extent of killing, the accused's worldview was used as the premise for the exaggeration. In addition, the court acknowledged that the defendant's perception was delusional and that there was an influence of drug-induced psychosis. Furthermore, in the case of (11), 2018 (district court), the court stated that without the existence of the delusions in question, the defendant would not have been trapped by the loss of the money in his possession, nor would he have decided to obtain the money and goods even through criminal acts, and it is certainly possible to consider that the mental disorder affected the formation of the criminal

intent for each crime. The possibility that he killed the victims because he considered them to be his pursuers based on his delusion can be excluded, and it is admitted that he killed the victims in order to achieve his goal of obtaining the money and goods without resistance from the family members, or he killed the victims on the occasion of robbery. All of these can be understood as the normal psychology of the offender without the presence of the pathological experience of mental disorder", and full responsibility is recognized.

In the recent judgments since 2010, there are some sentences that separate the "motive" from the "crime itself" in the sense that the crime itself was based on the defendant's own normal mind, although delusions influenced the process of forming the motive. In the past, if the motive was influenced by delusions caused by mental disorders, the defendant was judged to be mentally weak, as it was suspected that his ability to discriminate and control his behavior was significantly impaired. Recently, however, some judges have ruled that the crime itself was based on normal psychology because, although the mental disorder affected the formation of the motive, the crime itself was based on the influence of personality and values, the degree of retaliation depended on the individual, and the crime did not create a sense of

imminent danger to life, and there were other options. In addition, there are some judgments that say that the crime itself was based on normal psychology. The author works in a Medical Treatment and Supervision Act ward, and when he reads the psychiatric evaluation reports of those who were admitted to the Medical Treatment and Supervision Act ward after being found not guilty, not guilty, or not prosecuted for insanity or diminished responsibility, he does not find that the above method of judging responsibility is common. As for the inconsistency that the judgment of competency can change depending on the time period and the social impact of the case, the following sentence from a 2009 court decision may partially convince us. "The substance of culpability lies in the blameworthiness of the perpetrator, and this blameworthiness should be taken normatively from the perspective of maintaining order in a community, considering the acceptability of the community or the general public. Therefore, it is not appropriate to take it as fixed or absolute, but should be considered as something that may change with the transition of the times and the flow of society, and (abbreviated) the significance of seeking the opinion of judges on the issue of responsibility under the jury system exists in this respect. (Tokyo High Court,

May 25, 2009, LDX/DB25451513). If this is the case, do we have to accept that the impact and significance of psychiatric evaluation will be relatively reduced in cases with a large social impact?

2. The Impact of the Shift from Agnosticism to Agnosticism on the Sentencing of Death Penalty Cases

In the 1983 case, the defendant was said to be in a good state of remission, and it was judged that the crime was not directly based on hallucinations, auditory hallucinations, delusions, or experiences of artifice. What is characteristic of this appraisal and judgment is that the results of the post-crime examination and diagnosis are emphasized, even though the patient was considered to be in remission at the time of the crime. Nowadays, the mental state after the crime tends to be carefully evaluated because it may be modified by symptoms that were not present at the time of the crime, such as detention reactions. However, at that time, the diagnosis of schizophrenia was emphasized, and even if the patient was in a state of remission, he was judged to be mentally weak. In the 1984 case (High Court), one of the expert witnesses stated that the collapse of the personality was very slight, the person responded in a mild and sensible manner in a mild environment, there

were no hallucinations, there were almost no disorders of thought, and superficially and formally there appeared to be no significant disturbance in daily life. It is also said to refer to the culpability of the mentally ill for the crime. However, based on the words and actions in the medical examination scene, the diagnosis of monomorphic schizophrenia was adopted, and it was judged that he was insane, even though it appeared that a normal state of mind still dominated in a wide area of his life.

Thus, in the 1980s, the results of post-crime medical examinations were emphasized, and the diagnosis of schizophrenia itself had a significant impact, and it can be inferred that the influence of agnosticism remained. In contrast, as mentioned above, in recent years, the tendency of agnosticism, which analyzes in detail the influence and mechanism of mental disorders and normal parts on the crime, has increased, and the normal parts are more easily emphasized, and a tendency to lean toward full responsibility can be seen 13).

It should be noted that the number of cases in this study is small (11) and the diagnoses of the cases are diverse, so it is necessary to be cautious in concluding that there has been a change in attitudes toward responsibility. This is a limitation of the research in this paper.

3. Others

(1) Relationship between the number of victims (deaths) and death penalty sentences

In one case, the death penalty was sought and the defendant was found fully responsible, but the death penalty was avoided and the defendant was sentenced to life imprisonment. The summary of the case was the indiscriminate stabbing and murder of two people in the downtown area in broad daylight. The diagnosis was methamphetamine poisoning sequelae. His motive was that he had no job, was alienated from his relatives, and had stopped taking his medication. He had thought of committing suicide, but he could not die, and was thinking of being executed. In the background, there was a systematized paranoia. At the first trial, he was sentenced to death on the basis of full responsibility, but on appeal in 2017, although full responsibility was maintained, the death penalty was avoided and he was sentenced to life imprisonment. The reasons given for the decision to avoid the death penalty were the low level of premeditation, the influence of mental disorders, the fact that there were two victims, and the fact that he was remorseful (High Court of Justice LEX/DB25448570, 2017).

As for the relationship between the number of victims and death sentences, according to a research report by the

Judicial Research and Training Institute of the Supreme Court, of 346 cases (193 death sentences and 153 life imprisonment sentences) in which the death penalty was sought and the death sentence or life imprisonment was confirmed between 1970 and 2009, the percentage of cases in which the death penalty was confirmed was 32% when one victim died, 59% when two victims died, and 79% when three or more victims died. The researchers concluded that there is a strong correlation between the number of victims and the death penalty sentences.

(2) Relationship between the type of victim and the death penalty

As mentioned earlier, in all three cases between January 1, 1980 and February 28, 2019, in which three or more people were murdered and family members were the victims, the death penalty was avoided and life imprisonment was imposed. In all three cases, the death penalty was avoided due to extenuating circumstances, although full culpability was found.

In Japan, the Medical Treatment and Supervision Act, which is a law to provide specialized treatment for the mentally ill, has been in effect since 2005, and as of 2018, 33 wards with 833 beds have been established as designated inpatient facilities, and 601 hospitals (including clinics) have been

established as designated outpatient facilities 14). The Medical Treatment and Supervision Act allows prosecutors to apply for the Medical Treatment and Supervision Act for those who have committed serious harmful acts such as murder, injury, arson, robbery, forced sexual intercourse, and indecent assault, and who were judged to be in a state of insanity or deprivation of mind due to mental disorders at the time of the crime, and were not prosecuted or were given a deferred prosecution, acquittal, or suspended sentence. In the case of a person who is judged to be in a state of deprivation and is sentenced to non-prosecution, deferred prosecution, acquittal, or suspended sentence, the public prosecutor can file a petition for the Medical Treatment and Supervision Act, which opens the way to compulsory psychiatric treatment 13). According to the statistics in the White Paper on Crime by the Ministry of Justice, in 2016, prosecutors filed 350 petitions for the Medical Treatment and Supervision Act (313 were dropped, 3 were acquitted, and 34 were sentenced with probation), of which 238 were hospitalization decisions and 36 were outpatient decisions 9). Of these, 238 were decided to be hospitalized under the Medical Treatment and Supervision Act and 36 were decided to be hospitalized 9). Thus, in many cases, the cases that were treated under the Medical Treatment

and Supervision Act were not prosecuted after a psychiatric evaluation was conducted during the prosecution investigation. In 2016, the total number of arrests for homicide was 816, of which 121 were mentally disabled or suspected to be mentally disabled 8). Of these, 96 were referred to the Medical Treatment and Supervision Act by the prosecutors (87 were not prosecuted, 1 was acquitted, and 8 were sentenced to probation), of which 69 were decided to be hospitalized under the Medical Treatment and Supervision Act, and 10 were sentenced to hospitalization under the Medical Treatment and Supervision Act. Of these, 69 were admitted to the hospital under the Medical Treatment and Supervision Act and 10 were admitted to the hospital under the Medical Care Law 9). Under this law, a large number of persons with mental disorders, such as schizophrenia and delusional disorder, have received treatment and returned to society. Among the cases admitted to the Medical Treatment and Supervision Act ward (66 beds) where the authors work, which was opened for the first time in Japan 13 years ago, there were seven cases in which two or more people were killed, and in six of the seven cases, the victims were family members. The remaining case was an arson attack on a group home, and the victim was a resident of the group home.

(3) The trend toward harsher punishment and the cultural background of public opinion polls

The trend toward harsher penalties has also been pointed out 20). The percentage of public opinion polls showing that the death penalty should be abolished peaked at 20.7% in 1975 and has continued to decline, reaching 5.7% in 2009 20). It has been pointed out that the series of Aum Shinrikyō incidents from 1988 to 1995 are behind this decline 20).

In addition to the normalization of the mentally disabled, the victim participation system introduced in 2008 and the jury trial enacted in 2009 may have had an impact on the background of the continued death sentences for the mentally disabled in Japan 13). In a 2014 public opinion survey by the Cabinet Office, 80.3% of respondents approved the death penalty as "unavoidable" and 9.7% rejected it as should be abolished. The most common reason (multiple responses) for approval of the death penalty was that the feelings of the victims and their families are not appeased" (53.4%), followed by "heinous crimes should be atoned for with life" (52.9%) and "there is a risk of committing similar crimes again if left alive" (47.4%) 16). In the case of the mentally disabled, it is difficult for

them to feel remorse due to delusion and thought disorder, and it is difficult for them to understand the situation and imagine the feelings of others due to the pathology of intellectual disability and autism spectrum disorder. In a jury trial, the victim's family's feelings may be hurt, which may affect the judgment of the judge 13). In jury trials, a victim participation system has been introduced. In the case of the 2017 (district court), the defendant has not only never apologized to the victims in court, but also has not shown any remorse, insulting them by calling them terrorists and justifying his crimes by saying "Tenchu". Although the defendant has no criminal record, it must be said that he has little potential for rehabilitation. In addition to this attitude of the accused, the fact that the lives of his family members were taken away by the horrific manner of the crime described above, it is only natural that the bereaved families of the victims feel grief and anger and demand the maximum punishment for the accused with extremely severe feelings of punishment. From the standpoint of a psychiatrist, it is natural to think that the defendant's comments were made because he was unable to judge right from wrong under the influence of paranoia. In this way, we cannot ignore the influence of

Japanese culture, which places importance on the existence of remorse and the feelings of the bereaved families of the victims 13). This also leads to the difficulty of presentation in jury trials.

(4) Difficulties in presentation in jury trials

It is difficult for a psychiatrist to make a presentation at a jury trial in a case with three or more victims (deceased) and non-family members, where the social impact of the case is so great that it is difficult to recognize the presence or absence of insanity even if there is a mental disorder. In this context, it is difficult for psychiatrists to give presentations at jury trials 13). It is difficult for judges to visualize mental disorders (how sick they are) and to understand the difficult mechanism of the relationship between mental disorders and criminal acts 13). In most cases, it is difficult for judges to have an image of treatment and social rehabilitation. As a problem for psychiatrists, there is a danger that expressions such as "the crime can be explained by the normal personality" or "the crime itself is based on a normal psychology" will be taken for granted.

IV. Outlook

The following is a summary of the issues confronting psychiatrists; (1) the

ethical problems of being involved in the psychiatric evaluation of a death penalty case, (2) the judgment (psychiatric evaluation results) that considered the "motive" and the "crime itself" separately, (3) the inconsistency of the diagnosis, (4) the difficulty of getting the judges to understand the importance of mental disorders, treatment, and rehabilitation, (5) the sentence does not mention the possibility of treatment or the reasonable possibility of rehabilitation, and (6) Difficulty in explaining the defendant's words and actions in court (due to the influence of paranoia, thought disorder, autism spectrum disorder, and intellectual disability, it is difficult for the defendant to reflect and apologize, and his words and actions may further hurt the feelings of the victim and the bereaved family). The following are the authors' suggestions and hopes for solutions to these issues.

(1) Although there have been statements and reports worldwide on ethical issues related to the competency and treatment of death row inmates and the execution of death sentences, there have been few reports on the role and ethical issues of psychiatrists in the trial of death penalty cases. However, it is necessary to be aware of the ethical issues that may arise after the defendant is

sentenced to death, as well as the negative effects of the results of the appraisal, the theory of knowability, the seven points of view, and other theories and models used. It is also important to be aware that changes in diagnostic and expert opinion methods may affect the likelihood of a death sentence, even if not directly.

(2) Recently, there have been a number of court decisions in which the "motive" and the "crime itself" were considered separately, and the court ruled that although the mental disorder affected the motive, the "crime itself" was based on normal psychology. A well-balanced description of the mental disorder such as schizophrenia and other influencing factors, as well as an easy-to-understand illustration, can prevent words from walking alone and may contribute to a more rational judgment. The figure shows an example of case formulation 7). Thus, it would be effective to conduct case formulation in such a way that the influence of schizophrenia and the influence of other factors can be visually understood. In addition, showing the basis for these analyses by means of a life chart can contribute to enhancing the scientificity and transparency of the appraisal and to improving the quality of the appraisal. Table 2 is an example of a life chart 7). The important thing is to describe the

subjective complaints (statements by the suspect), objective facts (statements by others and behavioral observations), and the evaluation by the psychiatrist separately 7). This makes it possible to verify the results later. The use of life charts and case formulations based on life charts has the advantage of making it easier to understand the influence of mental disorders on criminal behavior, but it also has the risk of leading to superficial understanding and over- or underestimation of specific factors. It is necessary to be aware of the strengths and dangers of the tools and theories used. Furthermore, since the personal experiences and theories of experts are not highly valid, it is advisable to hold appraisal conferences, seek the opinions of other psychiatrists, and conduct repeated case conferences.

(3) Regarding the inconsistency of diagnosis, there are often differences in diagnosis between doctors, especially between schizophrenia and substance-induced psychosis such as stimulants, delusional disorder and personality disorder, and schizophrenia and delusional disorder. The fundamental problem is that psychiatric diagnosis is not reproducible and has not yet been scientifically established. In addition to the use of operative diagnostic criteria, it may be useful to discuss these criteria with other psychiatrists at

appraisal conferences.

(4) The authors believe that an in-depth explanation of treatment responsiveness and the roadmap to reintegration into society would be more understandable and easier to visualize. However, this is controversial, and some argue that the fairness of the appraisal will be lost if we go into treatment. However, we would like to inform society about successful treatment cases.

(5) As in the case of punishment, treatment should be provided to those who need it, and I would like to see the sentence mention what possibilities there are for treatment and what can be done about it. I would also like to see more reasonable predictors of rehabilitation and social reintegration. In past sentences, it is noticeable that the presence or absence of remorse is the only predictor of the possibility of rehabilitation, but isn't this prehistoric? Recently, research has been conducted not only on risk factors for future violence, such as past history of violence and substance use problems 24), but also on "protective factors" for violence risk, focusing on the strengths of the individual that reduce the risk of future violence, such as life goals, work, leisure activities, social networks, medication, and coping skills 2). In this paper, we will focus on the "protective factors" of violence risk.

(6) I would like to improve my skills in explaining in an easy-to-understand manner to judges and jurors the pathology behind the tendency of defendants to fail to express remorse or apologize in court, to give a negative impression to those around them, and to further harm victims and bereaved families.

Conclusion.

Since the arson of a pachinko parlor in 2010, there has been a series of death sentences in which the "motive" and the "crime itself" are considered separately, for example, the motive was influenced by mental disorder, but the crime itself was based on normal psychology. The background was thought to be the change to agnosticism (1984-), the spread of the seven points of view (2006-), the victim participation system (2008), the start of jury trials (2009), the trend toward harsher punishment, and the normalization of the mentally ill. When the social impact of the crime is large, such as many deaths and victims who are not family members, it is difficult to recognize insanity or deprivation of mind, and death sentences continue to be imposed. Finally, we proposed to go beyond diagnosis and use case formulations to visually illustrate the impact of the illness and other factors on the crime, and life charts to increase

the scientificity and transparency of appraisals.

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No	Summary of events	Motive	Diagnosis Relationship between mental disorders and criminal behavior	Responsibility Capability Reasons for Liability	Judgment Other
㊦ District Court in 1982	On the street, she stabbed and wounded six passersby, including a woman (deceased) who was passing by with her then one-year-old (deceased) and three-year-old (deceased) in a baby carriage, with a willow-blade kitchen knife, killing four of them. Afterwards, she held a passerby by the neck and held a kitchen knife to his throat while she went into the back of a store and threatened to cut his back, and when she was holed up, she made him write on a piece of paper that was there, "Bring me the family of the official who is hugging you on the airwaves immediately.	After a series of layoffs that made his life difficult, he became convinced that the reason he had fallen into such a situation was that a high-ranking official was behind it, sending radio waves to his head, playing his voice on tape, and pressuring his bosses at work and his parents and siblings to say bad things about him and to systematically fire him. He became convinced that it was because the mastermind was playing his voice on the tape, pressuring his boss and his parents and siblings to say bad things about him, and systematically getting him fired, thereby making him suffer.	Diagnosis: Mental disorder due to hallucinatory and delusional state caused by psychogenic delusions based on abnormal personality and the effects of methamphetamine use. Relationship between the mental disorder and the crime: The defendant is recognized as an abnormal personality with the main characteristics of explosiveness, lack of emotion, lack of will, self-exposure, and lack of self-confidence (sensitivity). After the crime, phenylmethyaminopropene was detected in the defendant's urine, and it is recognized that the defendant used methamphetamine just before the crime. There were auditory hallucinations, sensory hallucinations (abnormal body hallucinations), relational delusions, delusional perceptions, and artifice experiences, and a delusional system had been constructed. After his release from prison, he was abandoned by his family, repeatedly lost his job, and had little money. It is most natural to assume that he used methamphetamine three times in a situation where he was trapped, and that his impulsiveness to clear his delusional grudge by committing a serious crime was strengthened. If this is the case, it is reasonable to conclude that the hallucinatory delusional state at the time of the crime was not based on schizophrenia, but was caused by psychogenic delusions based on an abnormal personality, plus the effects of	Loss of mind Reason: Although the defendant had been suffering from hallucinations and delusions until just before the crime, he had not lost the sense to continue his social life and the ability to control his actions. He had prepared for the crime and acted purposefully, carefully responding to the situation around him. The defendant was aware of the seriousness of the social repercussions of this crime and the gravity of his criminal responsibility. The defendant's personality had not undergone a significant change, and he had almost maintained his sense of integrity. It is difficult to recognize that this crime was committed under the direct and total control of hallucinations and delusions, and the defendant still had the power to choose his own actions, i.e., the power to avoid a serious crime by lawful means. The hallucinations and delusions played an important role in the formation of the motive for the crime in question, and severely restricted the defendant's ability to discern the facts and act accordingly, but they did not have enough influence to cause him to lose this ability.	life imprisonment

			methamphetamine use.		
⑨High Court in 1983	Disguised as a piece of wood, he cut the telephone wire during the crime, and after the crime, he buried the iron bar in the sand at the beach and threw away the coat he was wearing.	He was rejected for marriage by a woman he liked, and he resented her and her family because they were revolutionaries and their principles were incompatible.	Diagnosis: Catatonic schizophrenia Relationship between the mental disorder and the crime: According to the expert report, the defendant was in a state of remission during treatment at the time of the crime, and was able to lead a social life, and his condition was not considered to be worsening. According to the expert witness, the defendant's mental state at the time of the crime in question was in a state of remission from catatonia, but the motive for the crime in question was incomprehensible and formed on the basis of delusion, the crime was committed impulsively, and during the course of the crime, it is presumed that mental inactivity and psychomotor excitement appeared, and the defendant was in an emotionless state after the crime. However, the defendant is said to have been in a good state of remission, and the crime was not based on artificial experiences such as hallucinations, auditory hallucinations, or delusions.	Insanity Reasons: The defendant was working at a company as a construction worker and was leading a normal social life. As a result of the diagnosis, the defendant continued to take the necessary medication, and his relatives and acquaintances who came into contact with him did not find his behavior to be particularly abnormal. However, considering the defendant's medical condition at the time of the crime and the manner in which he committed the crime as recognized by these expert reports and records, it should be said that the defendant was in a state in which his ability to discern the right and wrong of an act or to act in accordance with that discernment was significantly reduced due to the effects of schizophrenia at the time of the crime.	Life imprisonment Other: In the first trial, he was sentenced to death for full responsibility. The case was the basis of the Supreme Court decision that set the trend toward the theory of knowability.
⑩District Court in 1984	He stabbed his wife and neighbors with a stabbing knife, killing four people and injuring his son and three neighbors.	He was awakened by a voice saying "audio tape." Thinking it was a cassette tape of harassment and talking, he asked his wife about it, but she gave him a curt reply and he assumed that she had handed it over to someone	Diagnosis: Mental disorder caused by chronic methamphetamine addiction (delusional state) combined with acute intoxication. Relationship between the mental disorder and the crime: He had been in a state of chronic methamphetamine addiction (delusional state) due to long-term methamphetamine abuse, and as a symptom of acute addiction to methamphetamine, which	Diminished mental capacity Reason: Although there was no significant impairment in his ability to discriminate between the right and wrong of an act, his ability to act in accordance with the right discrimination was significantly impaired due to a mental disorder caused by chronic stimulant intoxication (delusional state) resulting from long-term stimulant abuse, combined with altered perception and hypersensitivity as symptoms of acute intoxication from the	life imprisonment

		<p>else. He thought that the neighbors were working together to harass him, and that his wife and children had betrayed him and were complicit.</p>	<p>he continued to use regularly at the time, he was extremely sensitive to noises and voices in the neighborhood. He had a paranoid delusion that people involved in methamphetamine were working together to harass his neighbors and gang members. The paranoia was exacerbated by hypersensitivity and alteration of perception, creating a solid and systematic system of paranoid delusions. I was motivated by these highly convincing paranoid delusions. On the other hand, the core of his personality has not been affected, and he has no thought disorder, emotional dullness, or devastation. There are no hallucinations or auditory hallucinations, no phantom voices ordering or directing him to commit the crime, and no situation in which he could think that he would be killed if he did not. He did not act reflexively under the pressure of an imminent crisis situation. It was an act of personality affinity in which his original abnormal personality (especially his lack of emotion and explosiveness) played the biggest role.</p>	<p>stimulants he was using at the time.</p>	
<p>㊦ District Court in 1984</p>	<p>He sprinkled gasoline on a bus and set it on fire, killing five bus passengers and injuring 12 others. He had left the gasoline he had purchased in a plant a few days before. On the day of the crime, he filled a</p>	<p>He felt that he was being treated as a vagrant and ridiculed by passersby, and his resentment toward the world grew so strong that he decided to surprise the world by lighting a fire with gasoline somewhere, and hid the gasoline in a</p>	<p>Diagnosis: Psychogenic reactive paranoia and delusion of pursuit based on low intelligence (IQ 69) Intoxication Relationship between the mental disorder and the crime: The defendant is mentally retarded (IQ 69), has inferior mental maturity, has paranoia and delusions of pursuit (that he is being pursued and persecuted by social welfare agencies), and was drunk and intoxicated at the time of the crime, if not</p>	<p>Loss of mind Reason: There is an essentially important relationship between the mental disorder of victimization and delusion of pursuit and the formation of the motive for this crime. The emotional excitement on the right side of his mind was exacerbated by the drunkenness of alcohol, and had a strong influence on the defendant, who was mentally inferior to him, which led him to commit this crime. On the other hand, the motive for this offense was to relieve</p>	<p>Life imprisonment Other: The high court also ruled that he was insane and sentenced him to life imprisonment.</p>

	<p>bucket he found with gasoline and said, "You idiot! You're such an idiot! He then sprinkled the gasoline in the bucket around the newspaper and set it on fire, causing the bus to explode in flames.</p>	<p>plant. A few days later, while he was feeling uncomfortable after being warned by the locals, he found an expired coin-operated locker with his belongings missing, which made him feel "ridiculed," and he decided to vent his resentment against the world.</p>	<p>significantly so. The motive for this crime was that he felt that he had been ridiculed because of the coin locker incident that he had encountered just before the crime, and the series of unpleasant events that had occurred before also came to mind. Because the defendant had delusions of harm and pursuit, he perceived the words and actions of others as more harmful than a person who did not have delusions of harm and pursuit would feel, and a series of unpleasant events that he experienced made him feel "ridiculed. The main reason for this is that they feel that they have been ridiculed and are upset, and have feelings of resentment and anger toward the world.</p>	<p>her resentment toward the world in general, and not to directly fight back against the social welfare organization that was pursuing and persecuting her based on her anger. In light of this, the defendant's ability to make independent decisions was not completely lost at the time of this crime. I'm not sure.</p>	
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1984. 7.3 Supreme Court Decision: Agnosticism → Knowability
The presence or absence of liability should be judged by considering the defendant's medical condition at the time of the crime, the state of life before the crime, and the motive and manner of the crime.

<p>High Court in 1984</p>	<p>They killed six neighbors and seriously injured two others with their hunting rifles. He was conducting a shooting exercise. He decided to commit the crime when the wind and rain became stronger. They systematically attacked the houses one after the other, starting from those located downwind to avoid hearing the gunshots.</p>	<p>He felt inferior because of his unsocial and introverted personality, and avoided socializing with others to the utmost extent, which further aggravated his personality. As she grew more and more disgusted and desperate with her own character, her adoptive mother repeatedly told her, "The neighbors are creeping you out, you should at least say hello.</p>	<p>Diagnosis: schizophrenia, monomorphic or paranoid Relationship between mental disorder and offense: Personality was extremely eccentric and developed into "severe depressive personality disorder (synonymous with psychopathy). In light of the schizophrenic personality changes and the fact that witnesses at the trial admitted to symptoms that do not appear in paranoia, such as blank laughter, monologue, humming, and bizarre behavior during interviews with the defendant, the diagnosis of schizophrenia (monomorphic or delusional) at the time of the crime was adopted. The collapse of his personality is very mild, he responds in a mild and sensible manner in a mild</p>	<p>Loss of mind Reason: The defendant's actions were caused by delusions of harm and persecution, but he was not completely under the control of delusions.</p>	<p>Life imprisonment Other: At the first trial, he was found not guilty by reason of insanity. The psychiatric evaluation divided the diagnosis into delusional disorder and schizophrenia.</p>
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			<p>environment, he has no hallucinations, there is almost no disturbance in his thought process, superficially and formally there seems to be no noticeable disturbance in his daily life, and he mentions the culpability of crimes committed by mentally disabled people. Outwardly, cognizance of one's own actions and freedom of will are present. On the other hand, the mind is a single entity, and if something abnormal dominates it, even if something normal is added to it, it is conventionally understood that the whole personality is pathological.</p>		
<p>1988–1995 <i>A series of Aum Shinrikyo incidents (1995 sarin gas attack)</i> 2000 <i>"Crime Victims' Association (later renamed National Crime Victims' Association) formed.</i> 2004 <i>Basic Law for Victims of Crime, etc.</i> 2005– <i>Enforcement of the Medical Treatment and Supervision Act</i></p>					
©High Court in 2006	<p>The accused, who was homeless and living in a hut on the riverbed, murdered three homeless people in total: a homeless man of his acquaintance who visited his hut, and a homeless man who also lived in a hut nearby, and stabbed a homeless man he knew whom he encountered on the street in a residential area. The bodies of the three murdered persons were dumped into</p>	<p>He killed V1 because he "got into an argument over fetching water and lost his temper"; he killed V2 because he "thought he was making a fool of himself on a regular basis"; and he killed V3 because "he was always sending out radio waves".</p>	<p>Diagnosis: Methamphetamine dependence, methamphetamine psychosis, antisocial personality tendency Relationship between the mental disorder and the crime: The defendant suffered from methamphetamine dependence and methamphetamine psychosis due to his long-time use of methamphetamine. He fell into a state of delirium due to the effects of using a large amount of methamphetamine in a short period of time, and committed murder and attempted murder under the hallucinations and delusions that all the homeless people around him were his enemies and that they were either police officers or agents of the police. Even after his excommunication from the gang, he was imprisoned twice for</p>	<p>Diminished mental capacity Reason: It must be said that there is room for reasonable doubt that the defendant had full responsibility for his mental state at the time of each crime. In light of the fact that the defendant's memory has been preserved for a significant portion of the crimes, and that the defendant acted accordingly at the time of the crimes, the defendant did not lack all the abilities to discriminate between right and wrong and to control his own behavior according to the discrimination.</p>	<p>Life imprisonment Other: Death penalty on full responsibility in the first trial.</p>

	the water of the O River. Prior to these crimes, he used methamphetamine.		repeated theft, etc., and even after his final parole, he did not get a regular job, but resumed the use of methamphetamine and engaged in illegal activities such as shoplifting and sleep theft with his homeless friends to earn his living.		
<p>2006–2008 <i>Dissemination of the Seven Points of View (A Guide to Preparing a Mental Capacity Report on Criminal Responsibility)</i> 2008.12.1– <i>Victim participation system</i> 2009.8.3– <i>lay judge</i> 2009.12.8 <i>Supreme Court decision</i></p> <p><i>"Even if the court adopts part of the opinion of a particular psychiatric expert, it may determine the existence and degree of responsibility by taking into consideration the defendant's medical condition at the time of the crime, the state of life before the crime, and the motive and manner of the crime, without being bound by the other parts of the opinion."</i></p>					
⑦ District Court in 2010	He came up with an idea to kill customers and employees in a pachinko parlor by spreading gasoline on the floor and setting fire to the parlor.	He believed that the inconvenient things that happened around him were caused by the harassment of the psychic "B" who possessed him and the group of "C" who were behind him, and that the people of the world knew this and were helping "B" and others by turning a blind eye. He decided to carry out the indiscriminate murder, thinking that the public would find out that the incident was caused by the harassment of "B" and others, and that the public would have a strong feeling against "B" and others, and might	<p>Diagnosis: Methamphetamine psychosis Relationship between mental disorder and the crime: Indeed, the beginning of the crime was brought about by mental disorder. The defendant believed in the existence of "B" as a psychic, and thought that the inconvenient things that happened around him were the work of "B" and others. He also thought that people in the world and his family were neglecting the activities of "B" and others and helping them, and came to have resentment not only against "B" but also against the world. He shifted his dissatisfaction with his own circumstances to "B" and others and the world, and made them the object of his resentment. This kind of thinking was influenced by his mental illness. On the other hand, the defendant has been leading a normal life for more than 10 years since 1998, when the phantom voice of "B" occurred. Even after he started to vaguely think about indiscriminate murder, he</p>	<p>Full Responsibility Reason: The defendant committed the crime because he fully understood that the crime was a very serious crime deserving of the death penalty, and he thought that it would be more worthwhile to take revenge on "B" and others and the world than to live an unfulfilling life with no prospects. The question of whether and in what form the defendant would seek to redress his grudge was one that the defendant decided on his own. The accused finally chose to commit this crime after considering all the possible benefits and disadvantages. He acted in an extremely rational manner in order to ensure that he carried out what he had decided. There is no abnormality in her behavior after the crime. It is clear that the defendant, despite his delusions, was able to make independent judgments and act independently without being influenced by them at the time of the crime. The influence of mental illness is only indirect and not significant.</p>	<p>Death penalty Other: death penalty confirmed by the Supreme Court in 2016. Diagnosis was split between methamphetamine psychosis and paranoid schizophrenia.</p>

		refrain from their activities.	did not think about it as something concrete and did not carry it out while he was working and had an income. The defendant has lived his life for many years, following the rules of society, while trying to reconcile his delusions with the real world. On the day of the crime, the defendant did not seem to have fallen into a particularly different mental state from before, ignored the phantom voice of "B" that he had not heard in a long time, made careful preparations as planned, and calmly committed the crime with more care than a normal person in order to realize mass indiscriminate murder and ensure his own physical safety.		
©High Court in 2013	He killed seven neighbors by beating them with a gennou or stabbing them with a bone-cutting knife. Not wanting his dilapidated house to be shown on TV, he sprayed gasoline and set fire to his house and bakery. Thinking he had to commit suicide, he crashed his car into a road wall and set fire to the passenger seat.	Against the backdrop of the considerable and longstanding feud that preceded them, they continued to be vigilant and thought of retaliating at any opportunity, as they believed that there were disputes over extensions and renovations, dog feces and yapping, watering of the garden, etc., and that the well-wishers were spreading rumors that included bad words about the accused and his family, and felt that many of the neighbors looked down	Diagnosis: Delusional disorder Relationship between the mental disorder and the crime: It is admitted that the defendant had secondary delusions or delusional thoughts about the behavior of the victims. However, given the circumstances in which the defendant was placed, such as the fact that he had a serious conflict with his relatives and neighbors for a long period of time, it is possible to understand a significant part of it, and there are not many parts that are far removed from reality. (3) The defendant's personality is characterized by the following characteristics: (a) paranoid, (b) cautious, (c) easily perceived as a victim, (d) easily accumulates and sustains emotional stress.	Full responsibility Reason: The influence of the defendant's mental disorder on the crimes in question is small, as the circumstances of his strong sense of victimization and the motive for the crimes are fully understandable. Even if the defendant is diagnosed as suffering from delusional disorder at that time as a result of the fact that secondary delusions or delusional-like thoughts fall under delusions, which is the criterion for the operative diagnosis of delusional disorder, considering the actual condition and degree of delusions as described above as well as the defendant's personality tendencies, it cannot be admitted that the above-mentioned pathological disorder had a significant influence on the defendant's ability to reason and control his behavior during the commission of these crimes.	Death penalty Other: Death penalty confirmed by the Supreme Court in 2015. Psychiatric evaluation revealed a split diagnosis between delusional disorder and emotionally unstable/anxious (avoidant) personality disorder.

		on the accused and treated him and his family as a hindrance and would continue to harass them in various ways.			
©High Court in 2016 In Appeal	During the night and the following morning, they murdered a total of five people in four houses of nearby residents, and set fire to two of the houses, burning them down. He used wooden sticks to kill the victims one after another, and unplugged their telephones. He went into the aforementioned mountains with the intention of committing suicide, and recorded on an IC recorder a statement in which he apologized to his family and asked them to take care of his dog while he was dying.	The accused believed that he was being gossiped about, provoked and harassed by each of the victims living in the vicinity of his house, and he wanted to retaliate against each of them.	Diagnosis: Delusional disorder Relationship between the mental disorder and the crime: The defendant had been living while taking care of his parents, but about 10 years before his father's death, he began to have delusions that his neighbors were gossiping about him, provoking him, and harassing him, and he began to think about retaliating against them. In a sense, the only delusion in this case is the one about the physical damage caused by the poisoning of the curry made by the defendant, but the defendant did not take this delusion to mean that his life was in danger, but rather that someone was trying to provoke him. The fact that the defendant chose to retaliate in the form of murder or arson was due to his character, not due to any delusional reason. Even if the emotions generated by this delusion contributed to the increase in the defendant's violent behavior, it is difficult to imagine that it narrowed down his choice of actions. Although this delusion influenced the formation process of the motive for the crime, the defendant chose whether and how to retaliate based on his original personality.	Full Responsibility Reason: The delusion did not create a sense of imminent danger to life, and the defendant was not only fully aware that his actions were criminal, but also fully capable of recognizing that his actions were not in accordance with the rules of society, and was convinced in his own mind that his actions were not unbalanced compared to the damage he believed he had suffered. He was only convinced in his own mind that there was no need for balance compared to the damage he believed he had suffered. The value of the degree of retaliation is not determined by the delusional disorder, but by each individual.	Death penalty Other: 2015 district court ruling (full responsibility -> death penalty) upheld.
	He stabbed the neighbors with a survival knife, killing five of them.	"He came to believe that the Japanese government and its sympathizing	Diagnosis: Ritalin-induced drug-induced psychosis Relationship between the mental disorder and the crime: He had experiential	Full responsibility Reason: At the time of each crime, he was not in a state of imminent fear, nor was he experiencing hallucinations, delusions, or other symptoms	Death penalty Others: "The defendant has

<p>⑩ District Court in 2017 pending</p>	<p>In the voice recorder at the time of the crime, the voice of the accused stated that the accused was still being attacked by the agents at that time, said "kill the agents" because he was "frustrated," and said "my grandfathers' men," "you tortured me," and "with electromagnetic weapons" at the moment of the killing.</p>	<p>agents were working in unison to use electromagnetic and psychological weapons to attack individuals, in other words, a 'psychological engineering war. He began to have the delusion that the victims' families were agents who were attacking them. Therefore, he decided to kill the victims and their families for the purpose of retaliation against them and to reveal the existence of the state-sponsored war on mental engineering at the trial.</p>	<p>hallucinations, delusional thoughts, delusional perceptions, etc. While investigating the causes of these symptoms, he came to have a worldview that he was engaged in "(abbreviated) 'psycho-engineering warfare'" through knowledge gained from the Internet and books, etc. (abbreviated) The victim's family and others were agents of the above, and the defendant and his family were He recognized that the victims' family members were the above-mentioned agents, and that the defendant and his family had been attacked by electromagnetic and psycho-engineering weapons for many years. These perceptions were recognized as delusions related to pathological experiences such as the defendant's thoughts being read when passing the victims on the street (knowing private information about the defendant that others should not know) and the voices of the victims being transmitted into the defendant's brain. Judging from the condition of the defendant's life before the crimes and his calm behavior at the time of arrest, his medical condition at the time of the crimes had not deteriorated much, and the symptoms of his illness did not have a significant impact on the process of his decision-making and actions to kill the victims.</p>	<p>that would have directly prompted him to kill. He was aware that his actions would be criminalized as murder and that he would be arrested and tried. The perception that the victims' family members were agents and that the defendant was being attacked, which was the premise of the motive for the crime, was a delusion, which was influenced by the drug-induced psychosis. However, in the thought process that led to the decision to kill, the defendant's own normal psychology, such as a sense of pride, a sense of justice, and bad feelings toward the victim and their family, which were based on the defendant's worldview, were in effect, and the influence of the illness was small. The influence of the illness on the execution of the murder is also minimal.</p>	<p>shown no remorse for his crimes, as he continues to insult the victims by calling them terrorists, and justifies his crimes by calling them "Tenchu". The defendant has little potential for rehabilitation.</p>
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<p>Ⓜ District Court in 2018 pending</p>	<p>He killed six people by stabbing them with a kitchen knife. Breaking and entering, robbery and murder, and dumping a corpse. Obtained cash and car keys, and ate and drank. They put the bodies in a bathtub and covered them with a lid, or moved them into a closet and covered them with a blanket. In addition, he cut the crotch of the shorts and underwear and removed them, and smeared semen on the underwear. When the police officer called out to the defendant, "Let's go together," the defendant said, "But, Polis, yakuza. After the defendant self-injured himself by cutting his own arm with a kitchen knife in his hand (he also gestured to make a cross with his hand back and forth), he fell from the window in a</p>	<p>At the police station, he called his own sister, told her that he was going to be killed, and suddenly started crying. He fled the police station by himself, leaving all his valuables behind, and lost all his money at the same time.</p>	<p>Diagnosis: Schizophrenia Relationship between the mental disorder and the crimes: In the background of the defendant's behavioral patterns and actions prior to each crime, there was a paranoid delusion that he would be harmed by people in his workplace or people he had sent to harm him, and a delusion that he was being pursued by people who wanted to harm him or his relatives. The delusions extended to the belief that the pursuers had already reached the homes of his relatives and that the pursuers were connected to the police organization. He was also characterized by impulsive and spontaneous behavior due to false conviction (e.g., getting off in a hurry while being driven to the station, running away from the police station leaving his valuables). According to the expert testimony, with regard to whether and how the mental disorder affected the crimes, it was explained that each crime was committed in the course of a series of actions, such as escaping and rushing to the relatives in a state of paranoia and mental unrest as a symptom of schizophrenia, in which he felt that his life and the lives of his relatives were being threatened, and that there was a high probability that such paranoia and mental unrest affected the overall behavior of the home invasion and murder. On the other hand, each of the crimes does not appear to have been directly controlled by pathological experiences caused by schizophrenia (e.g., attacking a man in a suit who fits the image of the pursuer based on the</p>	<p>Full Responsibility Reason: Without the existence of these delusions, the defendant would not have been trapped by the loss of his money, nor would he have decided to obtain money or goods through criminal acts. On the other hand, if we look only at the situation immediately prior to the crimes, we can fully understand the motive of the defendant, who was in dire need of money, to decide to commit break-in theft and robbery based on his realistic desire to obtain money and goods quickly. In addition, as mentioned above, the possibility that the defendant killed the victims because he regarded them as his pursuers based on his delusions can be ruled out. All of them can be understood as the normal psychology of criminals without the presence of pathological experiences due to mental disorders. (2) The defendant committed the crimes for the purpose of covering up his tracks after committing a serious crime, which is naturally understandable. At the time of each of the crimes, the defendant did not commit the crimes due to the overwhelming influence of his mental disorder. Even though he was under the influence of his mental disorder, at the time of the decision to commit each specific crime and the scene of the execution of the crime, he could have chosen other means based on his own judgment based on his remaining normal mental functions, but he dared to commit each crime even though he knew it would be a crime.</p>	<p>death penalty</p>
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	half-conscious state and suffered serious injuries including head trauma.		delusions in question, or attacking a police officer, etc., which can be easily connected to the contents of the delusions). (For example, attacking a man in a suit who fits the image of the pursuer based on the delusions in this case, or attacking a police officer.		
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Table 1: Death penalty cases in which competency was an issue and chronological table - Cases with three or more victims (deceased) (non-family members)

(Note 1) The number and the year of judgment are written in the number column. (Note 2) Cases (9), (10), and (11) are under appeal, appeal, and appeal, respectively, as of February 28, 2019.

(Note 2) Cases (9), (10), and (11) have been appealed, appealed, and appealed as of February 28, 2019, respectively.

(Note 3) In cases where there was a diagnostic discrepancy in the multiple psychiatric evaluations conducted, the name of the diagnosis finally adopted in the judgment is stated. (Note 4) All the tables in this paper were prepared based on the judgment, and the psychiatric evaluation report was not obtained.

(Note 5) Bibliography: : ①地判昭和 57 年刑事裁判月報 14 卷 11・12 号 829 頁 地判昭和 57 年 LEX/DB27922217 ②高判昭和 58 年 LEX/DB24005982 地判昭和 45 年 LEX/DB24005513 ③地判昭和 59 年判タ 535 号 312 頁 地判昭和 59 年 LEX/DB27921922 ④地判昭和 59 年刑事裁判月報 16 卷 3・4 号 313 頁 地判昭和 59 年 LEX/DB27917096 ⑤高判昭和 59 年判タ 545 号 305 頁 高判昭和 59 年 LEX/DB27921929 ⑥高判平成 18 年高裁刑裁速報集 (平 18) 号 103 頁 高判平成 18 年 LEX/DB28145069 ⑦地判平成 23 年判タ 1397 号 104 頁 地判平成 23 年 LEX/DB25472813 ⑧高判平成 25 年 LEX/DB25540670 ⑨高判平成 28 年 LEX/DB25543809 地判平成 27 年判時 2285 号 137 頁 地判平成 27 年 LEX/DB25540922 ⑩地判平成 29 年 LEX/DB 25448600 ⑪地判平成 30 年 LEX/DB25560015

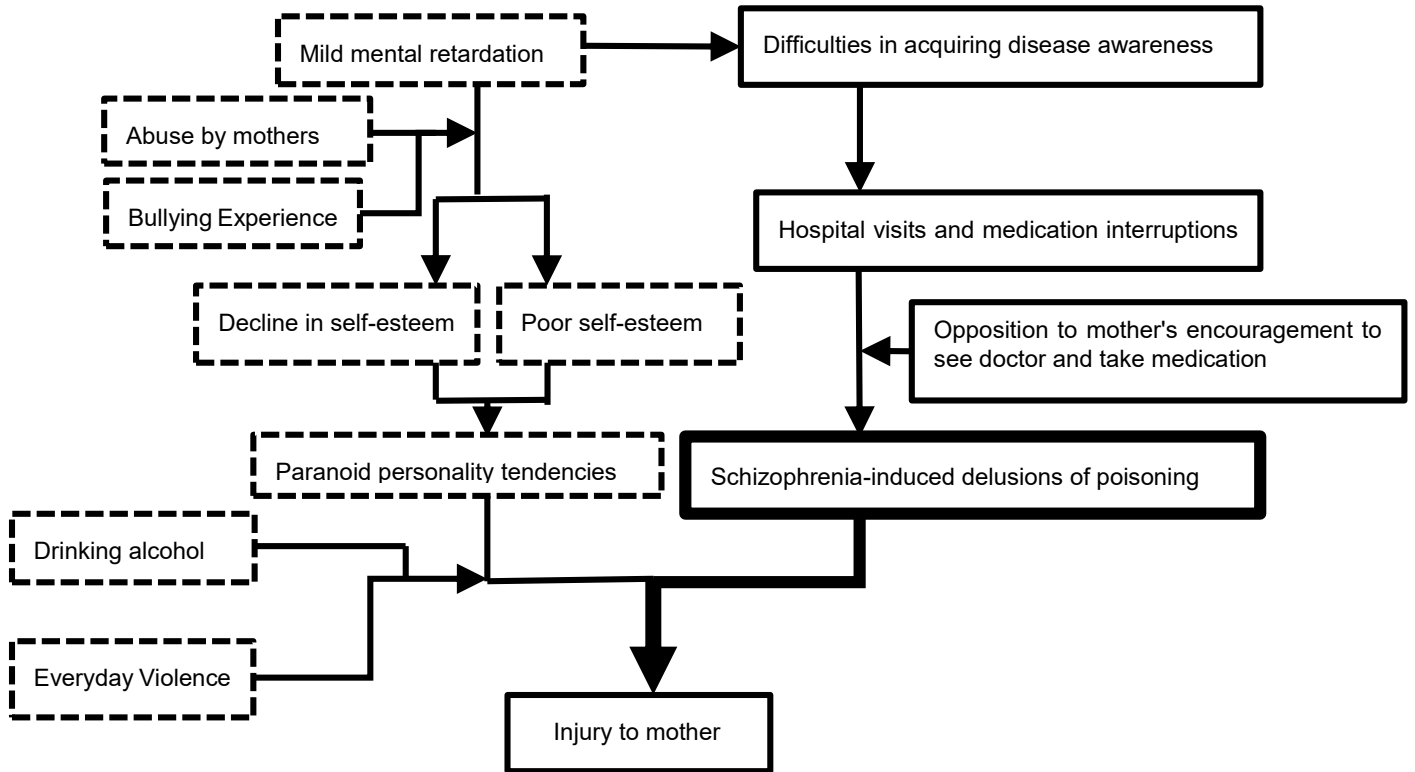


Figure An example of case formulation (taken from Ref. 7)

Date and time	Upbringing and life history	Current medical history	Subjective appeal (Statement of the suspect)	Objective facts (statements of others, observation of behavior)	Valuation by appraiser
Year ____ Month ____ Day	Birth to ____. My father was a civil servant				

	No developmental abnormalities noted.				
	<ul style="list-style-type: none"> ○ ○ Elementary school ○ ○ Junior high school Graduated from ○ ○ High School 			<p>Normal grades</p> <p>No bullying</p> <p>Meticulous</p> <p>Serious student</p>	
<p>Year _____</p> <p>Month _____</p> <p>Day _____</p> <p>(age ○)</p>	Started a part-time job, but quit after a month.	I quit when people at my part-time job harass me.	"I'm getting hacked on my phone."	<p>He never comes out of his room.</p> <p>Room is littered with garbage</p> <p>Not taking a bath or washing up</p>	<p>Appearance of paranoia</p> <p>Decline in life skills</p>
<p>Year _____</p> <p>Month _____</p> <p>Since around _____</p> <p>(age ○)</p>			"He told me to die. He told me to kill him."	<p>Attempting suicide, breaking things, talking loudly</p>	<p>Auditory hallucinations</p> <p>Increased impulsivity</p>
<p>Year _____</p> <p>Month _____</p> <p>Since around _____</p> <p>(age ○)</p>		My parents took me to see a psychiatric hospital.	"They gave me medicine when I wasn't sick."	<p>There was no hospital visit.</p> <p>The prescription medication was still in the room.</p>	<p>Lack of awareness of disease</p> <p>Treatment interruption</p>
<p>Year _____</p>		He was arrested for assault	"My father used electromagnetic	With aluminum foil wrapped around	Affected experience

Month ____ Day Since around (age ○)		ng his father.	waves to inflict pain on me, to implant ideas in me, to make my body move on its own.	himself, he struck his father several times with an iron rod.	Thought blowing action experience
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Table 2 An example of life chart

(Based on Reference 7; only the first row is cited)