Profile & Pattern of Fabricated injuries by Mechanical Violence in G.G.S. Medical College, Faridkot (Punjab)

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Abstract
From times immemorial, man has been attempting to subjugate fellow human beings. Over the centuries and along with the growth of civilization, there has been increased use of violence, abuse and torture to twist and turn people around. Earlier, the main purpose of torture was to get information or confession, to punish or to terrorise and accordingly it has been defined by "U.N. Convention Against Torture and Other Cruel, Inhumane or Degrading Treatment or Punishment" as "Any act by which severe pain or suffering whether physical or mental, is intentionally inflicted on a person for such purpose as obtaining from him or third person, information or a confession, punishing him for an act he or a third person has committed or is suspected of having committed...." and this does not include physical pain or suffering in the form of fabricated injuries caused to self by application of mechanical violence to support a false charge of assault against the alleged accused or by the injured persons having been sustained minor injuries in assault cases who inflict fabricated injuries on self to enhance gravity of crime and penal punishment against the accused causing mechanical violence. Out of 200 cases of mechanical injuries resulting from assault and examined by the author in GGS Medical College Faridkot (Punjab), 26 cases were diagnosed as being fabricated or were strongly suspected to be fabricated injury cases sustained to support a false charge of assault. Profile and pattern of such fabricated injuries by mechanical violence and the corrective and preventive measures to check self-harm and penal punishment to those against whom such injuries are caused, are discussed in this paper.

Key Words: Fabricated injuries, Torture, Assault, Grievous hurt, Dangerous weapons, Police custody, Human rights, Right to life.

Introduction:
Fabricated injuries are the type of medico legal injuries inflicted with some motive. These are superficial injuries, mostly self-inflicted or occasionally inflicted with the help of another person. When self-inflicted, these are on the approachable parts of the body. When inflicted with the help of another person these may be placed elsewhere. When incised wounds are produced by oneself then the injuries bear all the features of self-inflicted incised wounds. But it is unlikely that, bruises, lacerations or deep stab wounds will be fabricated in nature. The motives for producing fabricated injuries are to bring a false charge of assault against an enemy, to alter the appearance of a simple injury to attract more attention and severer punishment for the alleged accused, by an assailant to establish a ground of self defense, by prisoners to bring a charge of atrocity against a jail or police official or by policemen, soldiers or factory workers to avoid duty. [1] Self-inflicted wounds are several superficial cuts or scratches made with a knife, razor or some pointed instrument. They are often parallel with straight regular margins and their direction varies according to site. [2] Modern Criminal Investigation is teamwork of several experts working in close collaboration with law enforcement agencies with common objectives to arrive at the truth. The role of forensic expert is to help in the administration of justice. The qualities needed in Forensic expert is qualification, training and experience to identify the problem with their professional knowledge, observe accurately and interpret the results properly so as to form a scientific conclusion and to furnish opinion on his findings. [3] Medico legal examination was practically, until a few years, a ritual or a formality. Unlike in the past, it is not always intended to seek justice but for variety of other reasons which might be to bring a false charge to harass someone or for pushing someone into litigation or to get him arrested or to create psychological pressure to withdraw some case. The increasing criminal behavior of the injured, the easy access to courts, as well as the easy availability of legal assistance has brought new dimensions to the medico legal work and the legal expectations from a medical man, therefore, have also changed in equal proportions. [4]

Observations:
1. Incidence:
Out of 200 cases of mechanical injuries resulting from assault and examined in GGS Medical College Faridkot (Punjab), 26 cases were diagnosed as
being fabricated or were strongly suspected to be fabricated injury cases sustained to support a false charge of assault with incidence of such injuries to be 13 percent in this part of the state of Punjab.

2. **Age Wise Distribution of cases (Table No. 1)**
   a. 0-20 YEARS: 3 (11.54 %)
   b. 21-40 YEARS: 15 (57.7%)
   c. 41-60 YEARS: 7 (26.9%)
   d. Above 60 years: 1 (3.8%)

Maximun number of cases were reported in the younger age group of 21-40 years followed by middle aged generation and minimum incidence in the persons aged above 60 years.

3. **Sex Wise Distribution of cases (Table no.2)**
   A. Male: 22 (84.6%)
   B. Female: 4 (15.4%)

The incidence was more than five times in males compared to females.

4. **Rural / Urban Distribution of cases (Table No. 3)**
   A. Rural: 16 (61.5%)
   B. Urban: 10 (38.5%)

Rural urban ratio of cases was 1.6:1 meaning rural population was involved 1.6 times more in fabricated injuries than urban population.

5. **Occupation Wise Distribution of cases (Table No. 4)**
   A. Agriculture: 8 (30.8%)
   B. Labourers: 8 (30.8%)
   C. Housewives: 4 (15.4%)
   D. Students: 3 (11.5%)
   E. Business Class: 2 (7.8 %)
   F. Others: 1 (3.8%)

Persons involved in agriculture and labour were equally involved in crime both groups forming more than sixty percent of the total cases followed by housewives and students. Business class persons were reported to be involved minimum.

All the female cases reporting with fabricated injuries were housewives.

6. **Time of Examination of cases (Table no. 5)**
   a. Day Time (Morning & Evening): 15 (57.7)
   b. Night Time: 11 (42.3%)
   c. Afternoon & Night Hours (E+N): 21 (80.8%)

Maximum number of cases was reported in the evening and night hours.

7. **Nature of Injuries (Table no. 6)**
   a. Simple: 17 (65.4%)
   b. Grievous: 7 (26.9%)
   c. Both: 2 (7.8%)

The ratio between cases with simple and grievous injuries was 2.4:1.00 meaning incidence of simple injuries compared to grievous injuries was more than twice and in 7.8 percent of cases injuries were of mixed nature.

8. **Number of cases with Simple Injuries (Table no. 7)**
   a. One Injury: 10 (52.6%)
   b. More Than One: 9 (47.4%)

The number of cases with one and more than one simple injuries was almost equal with ratio of 1:1.00.

9. **Parts of Body in Simple Injury Cases (Table no. 8)**
   a. Upper Limb: 28 (Lt. 16, Rt. 12) (80%)
   b. Back: 4 (11.4%)
   c. Lower Limb: 2 (Lt. 1, Rt.1) (5.7%)
   d. Chest: 1 (2.9%)

In majority of cases (80 percent) simple injuries were inflicted on the upper limbs only followed by injuries on the back and lower limbs. In one case injuries were also detected on the chest.

10. **Type of weapon used:**
In all the 26 cases the type of weapon used was sharp or heavy sharp type. The linear abrasions were inflicted with pointed end of the sharp weapons. The incised wounds were from sharp weapons and the amputation of the parts of the body especially fingers resulting in grievous injuries were the result of the use of sharp heavy weapons.

**Discussion:**
Of the offences affecting the human body in relation to life and hurts, under the Indian Penal Code, 1860 (Act No.45 of 1860) Chapter XVI, different offences with penal punishments are defined. Sections 319 to 338 define hurt or grievous hurt caused to another person with simple or dangerous weapons or means with motives like to extort money, to constraint to an illegal act, to compel for restoration of property, deter public servant from his duty, on provocation or causing hurt or grievous hurt endangering life or personal safety of others. Sections 299 to 311 define offences and punishments related to killing or attempt to kill others and abetment or attempt to commit suicide or self-killing. Similarly Sections 349 to 358 define offences with criminal force and assaults on provocation or otherwise. Under these sections of law there is no mention of punishments for persons involved in self-harm by infliction of fabricated or fictitious injuries to support a false charge against others. Under Section 182 of Indian Penal Code, 1860, whoever gives to any public servant any information, which he knows to be false, intending thereby to cause, or knowing it to be likely that he will thereby cause, such public servant (a) to do or omit anything which such public servant ought not to do or omit if the true state of facts respecting which such information is given were known by him, or (b) to use the lawful power of such public servant to the injury or annoyance of any person, shall be
punished with imprisonment of either description for a term which may extend to six months, or with fine which may extend to one thousand rupees, or with both [5] This section of law can be used to punish the person causing self-harm with mechanical violence to support false charge against others but the punishment described here is only six months in contrast to the minimum punishment under Section 324 IPC with punishment of minimum of three years for causing hurt to others by dangerous weapons or means, meaning the alleged accused in fabricated injury cases if unable to prove his innocence may be subjected to punishment of three years of imprisonment. The alleged injured is involved in triple crime first harming self, attempt to level false charges of causing injuries against an innocent alleged accused or enhance gravity of crime against the accused who might not have used any dangerous weapon in the case and giving false information to the public servant punishable under Section 182 IPC thus indicating an urgent need to amend law to suitably punish the guilty involved in the crime of fabricated injuries.

It has been noticed that most of the times the cases by the investigating authorities are registered against the alleged accused on the statement of the complaint or the injured persons with fabricated injuries and on the basis of the findings of the medico legal injury reports prepared by the medical professionals and later on the investigation is started when occurrence of the false injuries is brought to the notice of investigating authorities by the alleged accused. The doctors who are not specialists in forensic medicine prepare the medico legal reports in majority of cases and the preliminary opinions by them in the injury reports include the nature of injuries, the probable duration of injuries, the type of weapon and the medico legal investigations of the case. As the doctor is not witness to the crime, he may not be able to comment most of the times whether a particular injury is of homicidal nature or self suffered or self sustained. He may even not like to comment on it due to more than one reason although he is in a position to comment authentically from his medical and or forensic knowledge that a particular injury is of fabricated nature. In the course of natural justice, he is desired to use his medical knowledge to ascertain the facts and help the investigating authorities for some logical conclusions related to the case. There need be clear cut guidelines to register cases under 324 and 326 IPC after through investigation of the matter in suspected fabricated injury cases with comments of the medical professional in the injury report whether these are homicidal injuries or suspected to be otherwise. In the eyes of law, the eyewitnesses are given much significance but they may not be acting as independent witnesses and the medical professional who has examined the injured can be more useful to the justice system as he is acting as an independent as well as expert witness commenting on the facts on scientific basis if he is a trained medico legal professional.

Most of the authors have commented that fabricated injuries are superficial injuries but the findings in the present study show the nature of injuries in nearly thirty percent cases examined to be grievous in nature in this part of the country being caused by sharp heavy weapons an indicator that the scenario in respects of pattern of fabricated injuries is different in the areas of study than other parts of the country having mention of studies on fabricated injuries. There was hearsay from the eminent persons of some localities under study that majority of the population in one or the other village especially male persons are living with amputated fingers meaning involvement in the crime at one or the other time in their life. Presence of incised wounds, indicates an intentional act, in the United Kingdom, fatal cases are usually suicidal. The pattern of injury is of great importance in determining whether the wound is self-inflicted or not. Self-inflicted wounds show obvious deliberation and although they are occasionally inflicted in an attempt to achieve publicity, their pattern will be similar to that seen in deliberate attempts at self-destruction. [6]

Unraveling of the fact or the confession by the injured that the injuries were self-inflicted or self-suffered brings to the light following questions

1. Whether the doctor is guilty of any offence under IPC or not. In other words how does one know that medico legal examination was done by sheer ignorance and not by indulging in criminalisation deliberately?

2. Can he be prosecuted for participation in the conspiracy of an offence?

3. If the doctor suspected an injury to be self-suffered why did he not deny the examination and advised him to come through police.

When the injured confesses in the police custody that the injuries were self-suffered or self-inflicted who would rely that the doctor was unaware of the design of the conspiracy. Every medical man is entitled to draw his conclusions from the type and appearance of the injuries and by the account given for causation of an injury. Medico legal examination in these cases where neither there is police request u / s s 53 of Cr.P.C., court order u / s 54 Cr.P.C. nor there is any kind of emergency necessitating immediate medical intervention, if done directly on the request of the injured, has the risk of being
blamed for working in collusion with the injured. If one has or should have a reason to be convinced about the intention of the injured to falsely implicate someone why not medico legal examination be denied without the court order or police request. U.N. Convention Against Torture and Other Cruel, Inhumane or Degrading Treatment or Punishment" under its definition of torture, does not include physical pain or suffering in the form of fabricated injuries caused to self by application of mechanical violence to support a false charge of assault against the alleged accused or by the injured persons having been sustained minor injuries in assault cases who inflict fabricated injuries on self to enhance gravity of crime and penal punishment against the accused causing mechanical violence. In recent years ‘ health and human rights’ is becoming a major issue of concern to medical profession throughout the globe. Diverse social and medical issues are emerging as important public health issues that need bio-ethical teaching e.g. International and domestic human rights issues, professionals’ role in torture intervention, ethnic health care, minority health, gender issues in health provision etc. Health professional must be aware against the political abuse of medicine [7] and must not be instrumental, either directly or peripherally, in the perpetuation of torture and must hold their ethical obligation to resist and oppose all types of torture. An ethical physician must resist the pressure of any force to assume neutrality in the presence of human rights violation and trauma of torture affecting his patients [8] and must not involve himself in causation of injuries to persons to support a false charge against some innocent. The Article 21 of the Constitution of India provides that "No person shall be deprived of his life and liberty except according to procedure established by law." “Right to life” in Article 21 of the Constitution of India means something more than survival or animal existence. It includes right to live with dignity and all those aspects of life, which go to make a man’s life meaningful, complete, and worth living. Torture of person by self or others is degrading and in utter violation of his dignity. Thus torture adversely affects one’s right to life and therefore it comes within the ambit of Article 21. Under Article 20(3) of the Constitution of India no person accused of any offence shall be compelled to be a witness against himself. [9] Often members of medical profession come across situations during discharge of their professional duties where the laws of land are at loggerheads with medical ethics and vice-versa. During such situations the doctors face dilemmas about their duty and ultimately yield for the demands of the law ignoring the medical ethics. The lawmakers and medical council thus place the doctors in not only embarrassing positions but also causing mental torture [10]

**Recommendations:**

1. The doctors dealing with medico legal injury cases should be able to differentiate between fabricated and other varieties of injuries.
2. Law should be suitable amended to punish those involved in self-harm against the spirit of the constitution.
3. Investigating authorities should registrar cases against the alleged accused persons of injuries causing grievous injuries only after thorough investigation of the case taking into consideration the medico legal opinion in detail.
4. Combined efforts can prevent self-torture.
5. Torture is a global problem and affects people worldwide. Opinion of doctors in certifying various types of torture is very significant. Meticulous examination is desirable in order to prove guilt or innocence.

**References:**

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