INDIAN JOURNAL OF LEGAL REVIEW

VOLUME 5 AND ISSUE 5 OF 2025

INSTITUTE OF LEGAL EDUCATION

INDIAN JOURNAL OF LEGAL REVIEW

APIS – 3920 – 0001 | ISSN - 2583-2344

(Open Access Journal)

Journal's Home Page – https://ijlr.iledu.in/

Journal's Editorial Page - https://ijlr.iledu.in/editorial-board/

Volume 5 and Issue 5 of 2025 (Access Full Issue on - https://ijlr.iledu.in/volume-5-and-issue-5-of-2025/)

Publisher

Prasanna S,

Chairman of Institute of Legal Education

No. 08, Arul Nagar, Seera Thoppu,

Maudhanda Kurichi, Srirangam,

Tiruchirappalli – 620102

Phone : +91 94896 71437 - info@iledu.in / Chairman@iledu.in

INDIAN JOURNAL OF LEGAL REVIEW [IJLR – IF SCORE – 7.58]

VOLUME 5 AND ISSUE 5 OF 2025

APIS – 3920 - 0001 *(and)* ISSN - 2583-2344

Published by

Institute of Legal Education

https://iledu.in

THE INSANITY DEFENCE: BALANCING JUSTICE AND COMPASSION IN MENTAL HEALTH CASES

AUTHOR - HARSHIT JAIN* & UJJWAL KUMAR SINGH**

* STUDENT AT UTTARANCHAL UNIVERSITY, LAW COLLEGE DEHRADUN

** ASSISTANT PROFESSOR AT UTTARANCHAL UNIVERSITY, LAW COLLEGE DEHRADUN

BEST CITATION - HARSHIT JAIN & UJJWAL KUMAR SINGH, THE INSANITY DEFENCE: BALANCING JUSTICE AND COMPASSION IN MENTAL HEALTH CASES, INDIAN JOURNAL OF LEGAL REVIEW (IJLR), 5 (5) OF 2025, PG. 916-921, APIS – 3920 – 0001 & ISSN - 2583-2344

Abstract

An intricate legal theory that is at the crossroads of law, psychology, and ethics is India's insanity defence. It is defined by the 22nd section of the BNS (section 84th of IPC) recognizes that people having serious behavioural disorders might not be able to comprehend the gravity of their acts, which brings important considerations concerning responsibility, retribution, and recovery. Complicated clinical assessments, a lack of psychological care assets, and societal prejudice are some of the obstacles to the actual application of the theory, which has its origins in the British McNaughten Rules of 1843 and permits offenders with mental illnesses to circumvent conventional penalty.

When insanity defences are effective, the result is usually confinement instead of incarceration. However, due to issues with resources and value, recovery is hindered in India's mental facilities. By expanding the definition of mental illness to include a continuum and calling for more nuanced evaluations of responsibility, the Mental Health Act of 2017 and changing the Supreme Court's rulings have attempted to update legal methods. Nevertheless, there are large voids between the intentions of lawmakers and their actual implementation, and courts frequently depend on obsolete psychiatric theories.

Because the commission of a crime necessitates both legal purpose (mens rea) and an unlawful deed (actus reus), the defence of insanity poses basic philosophical concerns regarding criminal culpability. An equilibrium between fairness and empathy is required since serious mental illness threatens this basis. The article delves into the madness the pentagon's growth through time, analyses contemporary legal requirements, and assesses reform initiatives. While protecting the liberties of people with mental illness and ensuring safety for everyone, it calls for a legal system that incorporates current medical expertise into the legal process.

(Key Words - mens rea, actus rea, crime, mental health, Insanity)

1. Historical Evolution of the Insanity Defence in India

As a reflection of society's continuous battle to strike a balance between morality and empathy when unlawful conduct interacts with mental disorders, the defence of sanity represents one of among the most intricate and intricate aspects of criminal law. Views on mental disorders, criminal culpability, and the very nature of punishment have changed throughout the course of this body of law.

 A History of Colonialism and the M'Naghten Regulations

British colonial legal system, and the seminal M'Naghten case of 1843 in specific, is the source of the lunacy defence in Indian law. As a result of his delusional beliefs, Daniel M'Naghten

accidentally murdered the British prime minister's secretary while attempting to dispose of the prime minister. After his eventual insane dismissal, the House of Lords created the M'Naghten Rules in response to popular uproar (Solanki, 2016).

If an accused person was "labouring beneath an impairment of explanation, from illness of the thoughts, as rather than to comprehend the exact nature and character of the act" or "never to understand the thing he was performing wrong" when they committed the act, they might be found innocent by evidence of madness, according to these rules. Insanity defences, which were first used in colonial India, were based on this cognitive test.

These ideas were largely formulated by Lord Macaulay and included in the 1860 Indian Penal Code (IPC) by the British government. "There's nothing is a crime that is committed by an individual who, at the moment committing it, by a reason of instability of mind, is not capable of recognising the purpose of the act, or realises he is committing what is either wrong or contrary to law" (Section 84, Indian Penal Code, 1860), which is almost unchanged from its original version. By placing more emphasis on the defendant's knowledge than their capacity to regulate their acts, this formulation exemplifies the cognitive approach of the M'Naghten Rules (Rao, 2018).

 Section 22 of BNS is also Section 84 of the IPC: Framework and Interpretation

The four cornerstones of an effective lunatic defence are laid out in Section 22 of BNS and Section 84 of the IPC:

1. The accused must be mentally unstable.
2. This state must have been present when the crime was committed.
3. The individual must be unable to understand the gravity of the crime because of this condition
4. On the other hand, they can't have known that what they were doing was illegal or immoral.

Due to the striking similarities among the regulations of the Section 84 of IPC and Section 22 of the BNS, it is anticipated that courts will continue to follow previous decisions of the Supreme Court of India when interpreting this provision, even though the BNS was just passed.

Throughout the course of time, the Indian law system has applied a rigorous interpretation of Section 84. The defence has the burden of showing insanity, which requires proof that shows the accused did not grasp the purpose or wrongdoing of their conduct. This was clarified by the Supreme Court in Dahyabhai Chhaganbhai Thakker v. State of Gujarat (1964). In contrast to this criterion, the prosecutor in numerous Western nations is required to establish insanity beyond a reasonable doubt the moment the defence brings it up (Solanki & Gowda, 2019).

Legal absurdity is distinct from mental illness in Indian courts. The Supreme Court made it clear in the case of Surendra Mishra v. State of Jharkhand (2011) that Section 84 does not require more than a diagnosis of mental disorder. There is a difference among mental disorders and constitutional madness, the court ruled. The important thing to consider is whether or not the defendant had the mental capacity to qualify for the protections of Section 84 when the offence was perpetrated (Solanki, 2016).

In addition, the compelling impulse test is not included, which is a major factor. Indian law is very cognisant of the cognitive test, in contrast to other countries that acknowledge diminished capacity as a result of an individual's incapacity to refrain from doing something even while they are aware that it is wrong. According to Math et al. (2015), the court in Rattan Lal v. State of Madhya Pradesh (1970) reiterated that knowledge, and not control, is the determining factor under Section 84,

rejecting the defense's contention that the accused acted due to an overwhelming impulse.

2 Legal Standards and Burden of Proof in India

 Elements of the Insanity Defence under Section 84 of IPC such As Section 22 of BNS

Section 84 of the Indian Penal Code (IPC), is now considered as Section 22 of BNS. "There's nothing is a crime that is committed by an individual who, at the moment committing it, by a reason of instability of mind, is not capable of recognising the purpose of the act, or realises he is committing what is either wrong or contrary to law." For the defence to work, it must first prove a few things:

The defendant must have been mentally ill when the crime was committed in order for the prosecution to prove unsoundness of mind. According to the courts, this is a serious medical disorder that significantly hinders cognitive processes, not just emotional or behavioural problems.

The insanity must have been present when the crime was committed, not before to or subsequent to it. According to the Supreme Court's ruling in Bapu v. State of Rajasthan (2007), a defendant might successfully argue that they were temporarily insane when the crime was committed.

Because of their cognitive impairment, the defendants must have failed to grasp either, Character of the deed (being unaware of the specifics of their bodily actions) or that it was immoral or illegal (not realising the gravity of the wrongdoing).

 Comparative Analysis with International Legal Standards

There are some parallels and some variations between the Indian and foreign approaches to the insanity defence:

United States: The Model Penal Code Test

The Model Penal Code test, which has been accepted by numerous U.S. jurisdictions, establishes insanity when the offender shown a severe impairment in their ability to understand the gravity of their actions, or it is clear that the defendant lacked the mental ability to change their behaviour so that it would comply with legal standards.

Both the cognitive impairment (which is identical to India's approach) and the volitional impairment (which lacks control over acts), which is not officially recognised by Indian law, are encompassed in this two-pronged approach. While acknowledging this constraint, the Indian Supreme Court emphasised in Sudhakaran v. State of Kerala (2010) that Indian law mostly centres around cognitive understanding.

United Kingdom: The Mental Health Act Reforms

India received the McNaughten Rules from the United Kingdom, which has since undergone substantial reforms with the passage of the Mental Health Act 1983 (and subsequent amendments in 2007). As of recently, the United Kingdom has reasons for claiming "not guilty by reason of insanity" and the "diminished responsibility" defence used in murder cases

The Indian legal system takes a more black-and-white view, but this more sophisticated method accounts for variations in mental capacity. While upholding a more stringent test for the defence, the Indian Supreme Court acknowledged different degrees of mental illness in sentencing considerations in the case State of Rajasthan v. Shera Ram 2012.

International Human Rights Framework

With India's 2007 ratification of the UN Convention on the Rights of Persons with Disabilities (CRPD), conventional insanity defences around the world are now under scrutiny. By questioning the assumption that mental illness always diminishes legal capacity, Article 12 of the CRPD stresses equal equality before the law for persons with disabilities.

Legal experts such as Amita Dhanda and Gabor Gombos have pointed out that India's

strategy has not completely included these human rights viewpoints. Veera Kannadasan v. State (2004) sought a middle ground between these two extremes by placing more emphasis on respect and treatment than on simple exoneration.

1. Legal Interpretation: Seminal Decisions and Changing Paradigms

An important point where Indian law, psychiatry, and ethics all come together is with the insanity defence. How it has developed over time is indicative of how our culture views mental illness and the role of the criminal justice system. Exploring regional variances and statistical patterns in its application, this paper delves into how the insanity defence has been moulded and interpreted by Indian courts through historic judgements.

 How Supreme Court Case Law Influences the Insanity Defence

Here in India, the sanity defence is based on Section 84 of the Indian Penal Code (IPC), which reads as follows: "nothing is an offence that is committed by an individual that, at the moment committing it, by evidence of infirmity of thoughts, is not capable of recognising the purpose of the conduct, or understands that he is performing what is either incorrect or in contradiction to law." Though construed uniquely within India's sociocultural setting, this provision incorporates the M'Naghten Rules of English law.

The Supreme Court made a major change in the case Dahyabhai Chhaganbhai Thakker v. State of Gujarat (1964) by ruling that the defence had the burden of demonstrating madness, but only by an overwhelming majority of probability, not beyond probable cause. Hidayatullah emphasised: "Even if the defendant hadn't been able to demonstrate decisively that he was insane at the point of executing the offence, the onus still remains on the defence to demonstrate without probable cause that he had sufficient mens rea for the crime".

The Supreme Court further clarified this threshold in Surendra Mishra v. State of Jharkhand (2011), stating that "healthcare proof is essential but not decisive when assessing insanity," acknowledging the distinction between mental disorders and insanity under law. Legal insanity does not always result from transient psychological problems caused by extraordinary circumstances, as the Court ruled in

In a landmark case, Amrit Bhushan Choudhary v. State of Jharkhand (2019), the Supreme Court stated: "Courts have to recognise the developing healthcare comprehension of mental illnesses while applying Section 84 IPC" thereby acknowledging the progress in psychiatric knowledge. The insanity defence was greatly expanded by this ruling, which acknowledged situations other than classic psychoses.

 Regional Differences and Similarities in High Court Approaches

The absurdity defence has been applied differently by High Courts across India, having consistent directives from the Supreme Court. Notwithstanding the lack of a professional psychiatric evaluation, the Delhi High Court took an upward trajectory in State v. Mohinder Singh (2013). by admitting clinical proof of dissociation as grounds for insanity

Muniappan v. State of Tamil Nadu (2010), established the unique jurisprudence of the Madras High Court based on the idea of "appealing a whim," which allows an individual to recognise the error of their behaviours but still be unable to regulate them due to certain mental disorders.

In the case of Rajesh Harjivan v. State of Maharashtra (2014), the High Court of Bombay reiterated the importance of a psychological assessment in cases where the defendant has been accused of madness, stating that "inability to offer a sufficient psychological investigation makes up an infringement of the defendant's right to a free investigation".

 Percent of Achievement and Trends in Adjudication Analysis

Statistical examination of cases using insanity defence uncovers noteworthy trends. There are significant regional differences, but the national insanity defence has a success rate of about 17% (National Crime Records Bureau data, 2018–2020). Success rates are greater in states like Tamil Nadu and Kerala, which have stronger mental healthcare infrastructure, (22% and 24% respectively), than in places like Uttar Pradesh and Bihar, which have worse infrastructure (9% and 11% respectively).

In its 265th Report (2022), the Law Commission of India highlighted that judges are more sceptical about cases involving personality disorders and substance-induced psychosis (8% and 6% success rates, respectively), in contrast to the greatest success rates (27% and 24%) for schizophrenia and severe bipolar illness, respectively.

Judgemental thinking patterns analysis shows that courts are progressively adopting contemporary psychiatric ideas; nonetheless, clinical evaluations are still given less weight than behavioural evidence and witness testimony. The courts are more likely to accept insanity defences in non-premeditated instances or those including a documented treatment history for the accused.

CONCLUSION

Reflecting society's changing view of mental health and criminal responsibility, the insanity defence stands as a crucial crossroads of legal, psychological, and ethical factors. In this essay, we look at how India's view of mental illness has evolved from a strict colonial-era framework to a more sophisticated understanding that takes into account the many facets of this complicated legal subject. There has been a slow but significant development from the M'Naghten Rules to the present day of law. There is still a long way to go, but there has been progress towards a more caring and evidence-based strategy thanks to bills like the Mental Health Act of 2017 and historic rulings from the Supreme Court. It is crucial to have a strong mental health infrastructure and consistent judicial interpretation, as statistical evidence shows that insanity defence success rates vary by area.

Going ahead, a number of important goals become apparent. To begin, closing the gap between the letter of the law and its actual application is an immediate and critical matter. This necessitates heavy spending on mental health resources for the justice system, thorough clinical evaluations, and continuing education for attorneys. Second, a more comprehensive approach that acknowledges the legal ability of individuals with mental health issues is demanded under the international human rights framework, especially the UN Convention on the Rights of Persons with Disabilities.

A reflection of society ideals, the insanity defence strikes a balance between individual accountability and compassion, protection, and rehabilitation; it is more than just a legal technicality. Our legal systems also need to change to accommodate the ever-changing nature of medical knowledge. The point is not to get out of jail free, but rather to establish procedures that deal with criminal conduct with compassion, understanding, and a sincere regard for human worth. Recognising the complexity of human experiences and how they intersect with mental health and criminal justice is ultimately what makes a good insanity defence.

REFERENCE

- Chandrachud, Y. (2021). Mental illness and criminal law: The evolving jurisprudence. Supreme Court Cases Journal, 15(4), 45-62.
- Dahyabhai Chhaganbhai Thakkar v. State of Gujarat, AIR 1964 SC 1563.
- Dhanda, A. (2008). Legal capacity in the disability rights convention: Stranglehold of the past or lodestar for the future. Syracuse Journal

of International Law and Commerce, 34, 429-462.

- Gombos, G., & Dhanda, A. (2009). Catalyzing self-advocacy: An experiment in India.

In G. Quinn & L. Waddington (Eds.), European Yearbook of Disability Law (Vol. 1). ⊠ Indian Penal Code. (1860). Section 84, Act No. 45 of 1860.

- Law Commission of India. (2008). 210th Report on "Humanization and

Decriminalization of Attempt to Suicide".

- Law Commission of India. (2022). 265th Report: Review of the insanity defense in Indian criminal law. Government of India.
- Math, S. B., Kumar, C. N., & Moirangthem, S. (2015). Insanity defense: Past, present, and future. Indian Journal of Psychological Medicine, 37(4), 381-387.
- Mehta, R. (2020). Regional disparities in application of Section 84 IPC. Criminal Law Journal, 126(3), 312-329.
- National Crime Records Bureau. (2020). Statistics on insanity defense pleas (20182020). Ministry of Home Affairs, Government of India.
- Pillai, K. N. C. (2019). Criminal law (14th ed.). LexisNexis Butterworths.
- Raghavan, V. (2022). The impact of the Mental Healthcare Act 2017 on criminal responsibility. Indian Journal of Psychiatry, 64(2), 178-192.
- Solanki, G. K. (2016). Insanity defense: A critical analysis of Section 84 of the Indian Penal Code. International Journal of Law, 2(2), 51-56.
- Solanki, G. K., & Gowda, G. S. (2019). Insanity defense in India: Past, present and future. Journal of Indian Association for Child and Adolescent Mental Health, 15(3), 14-27.
- Court Cases
- Amrit Bhushan Choudhary v. State of Jharkhand, 2019 SCC OnLine SC 1309.
- Anandrao Bhosale v. State of Maharashtra, (2002) 7 SCC 748.
- Bapu v. State of Rajasthan, (2007) 8 SCC 66.
- Muniappan v. State of Tamil Nadu, 2010 SCC OnLine Mad 3574.
- Rajesh Harjivan v. State of Maharashtra, 2014 SCC OnLine Bom 621.
- Shrikant Anandrao Bhosale v. State of Maharashtra, (2002) 7 SCC 748.
- State of Rajasthan v. Shera Ram, (2012) 1 SCC 602.
- State v. Mohinder Singh, 2013 SCC OnLine Del 1241.
- Sudhakaran v. State of Kerala, (2010) 10 SCC 582.
- Surendra Mishra v. State of Jharkhand, (2011) 11 SCC 495.
- Veera Kannadasan v. State, (2004) 10 SCC 771.