INTERNATIONAL JOURNAL OF SOCIAL SCIENCES BULLETIN
ISSN: (E) 3007-1917 (P) 3007-1909
Volume 4, Issue 2, 2026

THE EVOLUTION OF LEGAL INSANITY: FROM M'NAGHTEN RULES TO SECTION 84 PPC

Ashraf Ali[1], Salman Khan[*2], Aftab Haider[3]

[1]*Associate Professor, Dept of Law, Abdul Wali khan University, Mardan*
[*2]*LLM scholar Dept of Law, Abdul Wali khan University, Mardan*
[3]*Mr Aftab Haider is PhD Scholar in International Law at Southwest University of Political Science and Law, China*

[1]ashrafali@awkum.edu.pk, [*2]salmankhan93@hotmail.com, [3]aftabhaider516@gmail.com

Corresponding Author: *
Salman Khan
DOI: https://doi.org/10.5281/zenodo.18534052

Received	Accepted	Published
10 December 2025	25 January 2026	09 February 2026

ABSTRACT

This article studies the clash between old 19th-century laws and modern psychiatric reality in Pakistan's criminal justice system. The main thesis argues that Section 84 of the Pakistan Penal Code (PPC) has become an archaic relic, relying on a rigid all-or-nothing cognitive test that ignores the complexities of the human brain. By focusing strictly on whether an accused knew their act was wrong, the law fails to account for volitional impairments where a person understands the law but is biologically unable to control their actions. The study utilizes a qualitative methodology, deconstructing the historical M'Naghten Rules and analyzing Pakistani jurisprudence to reveal a long-standing "tradition of skepticism" toward mental illness. Through an analysis of cases like Muhammad Iqbal vs. The State, which first grappled with the identification of schizophrenia, and Abdullah v. The State, which established a nearly impossible evidentiary burden, the paper illustrates a history of judicial denialism. This reached a peak in the Imdad Ali case, where the court initially dismissed schizophrenia as a recoverable disease to avoid granting a medical excuse. The objective is to advocate for a transition into the Safia Bano era–a move toward reformative justice that integrates mandatory medical assessments and recognizes the continuum of mental health.

Keywords: *Section 84 PPC, M'Naghten Rules, Legal vs. Medical Insanity, Mens Rea, Reformative Justice*

INTRODUCTION

The intersection of mental health and criminal law is one of the most fraught areas of modern jurisprudence, particularly in Pakistan, where the legal framework remains anchored in the 19th century. The evolution of the insanity defense is a journey that begins with the philosophical foundations of choice and criminal responsibility, tracing back to the Victorian-era M'Naghten Rules of 1843 (O'Sullivan & Simpson, 2025). This discussion is not just about laws. It is about how society can keep people safe while also caring for people whose minds have been badly affected by illness. This article explores the progression from these historical roots to the current application of Section 84 of the Pakistan Penal Code (PPC), arguing that the law has reached a critical impasse (Ahmed et al., 2025a).

The core thesis of this research is that Section 84 of the PPC has become an archaic relic that no longer serves the interests of justice in a modern

world. While contemporary science views mental health as a fluid continuum, the Pakistani legal system continues to rely on a rigid, binary "all-or-nothing" approach established nearly two centuries ago. By focusing almost exclusively on cognition—the mere act of "knowing"—and ignoring volition, which involves the capacity for self-control, the law creates a "cognitive prison". This narrow interpretation often leads to a "snapshot fallacy," where the state ignores a patient's medical history to focus solely on their state of mind at the exact moment a crime occurred. Consequently, the law often punishes an individual's biology under the guise of punishing their intent (Bagaric, 2025).

To understand this legal landscape, we must define the foundational concepts that govern the "guilty mind." The doctrine of *Mens Rea* implies that a person is only responsible if they chose to engage in an act with a guilty mind, while *Actus Reus* refers to the physical act itself (Bhati, 2023). When a mind is incapable of such a choice, the doctrine of *Non compos mentis*—literally meaning "not of sound mind"—comes into play. Historically, the law has oscillated between two broad paths of justice: Retribution and Reformation. Retribution follows the "eye for an eye" philosophy, which fails when applied to the mentally ill because it treats those who lack moral agency as cold-blooded criminals. In contrast, Reformative justice views the offender as a patient who requires a doctor rather than a prison guard, aiming to heal the sick while keeping society safe.

The methodology of this paper involves a qualitative and comparative analysis of statutory law and judicial history (Haider et al., 2025). We begin by deconstructing the five propositions of the M'Naghten Rules, which established the "Right-Wrong Test" used to determine if a defendant understood the nature of their act. We then move to a critical parsing of Section 84 PPC, examining why the legislature shunned the word "insanity" in favor of the broader, yet more legally taxing, "unsoundness of mind". Furthermore, the study utilizes case study analysis, looking at landmark early rulings such as *Muhammad Iqbal vs. The State* and *Abdullah v. The State*. These cases highlight the "skepticism tradition" in Pakistani courts, where judges historically feared "fake" pleas of insanity and placed an nearly impossible burden of proof on the most vulnerable defendants.

The objectives of this article are to highlight the widening rift between medical reality and legal fiction and to advocate for a science-based evolution of Pakistani law. By exploring the limitations of the current system, this paper seeks to demonstrate how the "Expert vs. Judge" conflict has allowed the state to execute individuals confirmed by physicians to be ill. Ultimately, the goal is to show that while the recent *Safia Bano* judgment has introduced a sense of warmth and humanity to the courts, the statute itself requires urgent reform. We must move toward a system that incorporates reduced responsibility, volitional tests, and mandatory medical integration, ensuring the law reflects a modern understanding of what it truly means to be human.

2.1. Philosophical Underpinnings of Criminal Responsibility

2.1.1. The Doctrine of Non-Compos Mentis and the Requirement of Mens Rea

The concept of choice is the foundation of any criminal justice system (Haider, 2024). When examining a crime, we consider two key aspects: the physical act and the state of mind. This is Actus Reus and Mens Rea in legal terms. The law has long been guided by a simple rule: an act does not render a person guilty unless his mind is guilty (Stasi, 2021). It is here that the concept of Mens Rea comes in. It is the "guilty mind." It implies that the individual was aware of what they were doing and chose to engage in it. But what about the situation when the mind cannot make a choice? Here, the doctrine of Non compos mentis comes in. The term literally translates to not being of sound mind. The law has historically treated people in this state differently. When one is not able to see the distinction between a gun and a toy, a human being and a shadow, can we say that he or she intended to kill? Logic says no. An individual who is severely mentally ill is usually out of touch with reality. They do not act out of malice or a wish to violate the law. Rather, they are motivated by a shattered worldview. Such an individual is lacking the engine of a crime, intent, in the eyes of the law (Haider, Raza, et al., 2023).

Without intent, there can be no criminal responsibility (Morse, 2004). Consider it in the following way: we do not punish a tree because it fell on a car. We do not punish a toddler who starts a fire by mistake. Why? They are not able to comprehend the rules or the consequences. The Non compos mentis doctrine states that an individual who is in the state of a psychotic break is in the same situation. They are physically there, but their guilty mind is not. To punish them like a cold-blooded criminal is a failure of logic. It disregards the fact of the human brain.

2.1.2. Retributive vs. Reformative Justice of the Mentally Ill

When we realize that intent is lacking, we must question: What is the purpose of the law? (Haider, Yousaf, et al., 2024) Why are we incarcerating people or putting them on death row? We tend to take two broad roads: Retribution or Reformation. The oldest form of justice is retribution. It is the philosophy of an eye for an eye. It implies that when you hurt someone, you have to be hurt too. It is concerning the scales of morality. But retribution is only effective when the offender is a moral agent. A moral agent knows the rules and decides to violate them (Roche, 2013).

The reasoning fails when we subject the mentally ill to retribution. You cannot blame a person who does not know why he is being blamed. When an individual believes that he is killing a demon to save the world, he believes that he is doing good. Their punishment does not even the score of justice since they did not rebel in their heart. It is an empty exercise of cruelty instead of a serious exercise of justice (Haider, Ahmad, et al., 2023). It is merely the state causing pain to an individual who is already diseased. This leads to Reformative justice. This opinion is far more contemporary and scientific. It implies that the law should aim at repairing the broken (Haider, Ali, et al., 2024). When an individual engages in a violent act due to a chemical imbalance in his brain, the answer is not a prison guard but a doctor. Reformative justice, in the context of the insanity defense, proposes treatment instead of torture. It implies that the person ought to be taken to a safe mental institution. In this case, the aim is two-fold: to keep society safe and to cure the illness of the person (Haider, Ali, et al., 2023). This is a much better use of state money. When a person with schizophrenia is put in a regular prison, their condition usually gets worse. It causes increased violence and increased suffering. However, their treatment recognizes their humanity. It acknowledges that the criminal is a patient (Strang & Sherman, 2003).

It is a common argument by critics that the insanity defense allows individuals to get away with murder. However, the philosophy of criminal responsibility is not about releasing people. It is concerning putting them in the correct system. An individual who is declared not guilty due to insanity is normally held longer than a normal criminal. The distinction is the character of the detention. It is a hospital, not a dungeon. The aim is to make sure that the person is no longer dangerous. This fulfills the desire of the people to be safe without contravening the philosophical demand of intent. By reformation rather than retribution, the law remains faithful to its essence: it punishes the wicked, but it heals the sick. This debate is still developing in the context of Pakistan. The courts were long inclined to a severe, vindictive form. They disregarded medical science and followed strict, outdated rules. As we enter the Safia Bano era, the law is finally taking a more reform-focused path. We are beginning to realize that a civilized society is judged by how it treats its most vulnerable people—even when they have done terrible things (Jamshed et al., 2023).

3. The M'Naghten Rules (1843): The Foundations of Legal Insanity

If Section 2.1 was the philosophical why of the insanity defense, the M'Naghten Rules are the historical how. In 1843, Daniel M'Naghten, a man, shot and killed Edward Drummond, the secretary to the British Prime Minister. M'Naghten felt that he was being persecuted by a political party. He was found not guilty due to insanity, which led to a huge outcry from the people, including Queen Victoria herself. The House of Lords responded by sitting down to answer five questions. Their responses formed the M'Naghten Rules (Aitken & Aitken, 2009). These regulations spread throughout the British Empire and later became the foundation of Section 84 of the

Pakistan Penal Code (Ahmed et al., 2025b). However, almost 200 years later, we must question: Is it possible to describe the complexity of the human mind with a rule of the Victorian era?

3.1 The Five Propositions of the M'Naghten Case

The Lords made five proposals, but the rule can be summed up in one well-known sentence. To prove a defense on the ground of insanity, it must be clearly shown that: At the time of the commission of the act, the party charged was acting under such a defect of reason, by disease of the mind, as not to know the nature and quality of the act he was performing; or, that he did know it, that he did not know he was performing what was wrong. We can logically deconstruct this.

Proposition 1: The Presumption of Sanity

The law begins by presupposing that all people are sane. Why? Since the legal system would fail in case the state had to demonstrate the sanity of every person individually. The defendant has the burden of proving. They must demonstrate that they were insane at the time of the crime.

Proposition 2: Disease of the Mind

It is a legal, not a medical term. What a doctor may call it is irrelevant; what is important is whether it influenced the reason of the person. This left a loophole between law and medicine that persists to date.

Proposition 3: The Character and Nature of the Act

Is the individual aware of what they are physically doing? When a man believes he is slicing a loaf of bread, when he is really slicing the throat of a person, he is not aware of the nature of his action.

Proposition 4: The Knowledge of Wrongfulness

This is the most debated part. Do they know that it is wrong even when the individual is aware that he or she is killing someone? The M'Naghten rules define wrong as wrong in the eyes of the law (Thomas & Ball, 2022). You are guilty, in case you knew that the law forbade it, though you may have thought God commanded you to do it.

Proposition 5: Delusions in part

The Lords claimed that when a person is partially delusional, he or she should be treated as though the delusion were real. As an illustration, you may be excused in case you kill someone because you (falsely) think that he/she is going to kill you in self-defense. However, when you kill someone because you (falsely) believe that they offended your family, you would still be guilty, since even in the case that it was true, the law does not permit you to kill someone because they offended your family.

3.2 The Right-Wrong Test and Its Limitations in Contemporary Psychiatry

The M'Naghten rules established what we refer to as the Right-Wrong Test (Mason, 2021). It is purely cognitive. It poses the question: Did you know what you were doing? and "Did you know it was wrong?" However, this is the logical fallacy: what happens when you are aware that it is wrong, but you simply cannot help yourself?

The Problem of Volition vs. Cognition

Contemporary psychiatry informs us that mental illness is not merely a matter of knowing. It's also about "control." Such disorders as impulse control disorders or extreme manic episodes may leave an individual aware that he or she is doing something wrong, but physically and mentally incapable of resisting the urge to do it. This is totally disregarded by the M'Naghten rules. They suppose that the human mind is a mere computer–when the data is right, the action must be right (Al-Ghifari et al., 2024). However, the mind is more like a car; you may have an ideal GPS (knowledge), but when the brakes are cut (volition), you will still crash (Beck, 2020).

The "Black and White" Fallacy

Psychology now understands mental health as a continuum. People are not just labeled “sane” or “insane” — there’s a large, unclear area in between. M'Naghten, however, is a binary switch. It requires a complete lack of reason. This compels the courts in Pakistan and other countries to make unattainable decisions. When an individual is 70% out of touch with reality, the M'Naghten rules tend to consider them 100% sane.

The Expert vs. The Judge

The test is so strict that it tends to create conflict between the judges and doctors. A psychiatrist may encounter a patient with obvious schizophrenia who understands that it is illegal to kill, but he hears voices telling him to kill. The physician observes an ill individual; the law of M'Naghten observes a criminal who knows what is right and what is wrong. This is the foundation of our present Section 84 PPC. It is a 19th-century answer to a 21st-century conception of the brain. It was created at a time when physicians still believed in phrenology (measuring bumps on the head). It is like attempting to do heart surgery with a stone tool today. It may have been effective at one time, but we now have more effective tools. The challenge to our legal system is: are we courageous enough to revise the rules?

4. Section 84 of the Pakistan Penal Code (PPC): Statutory Critique

Although the M'Naghten Rules gave the blueprint, Section 84 of the PPC is the wall we are currently confronted with in Pakistani courts. It is the sole door by which a mentally ill individual can be mercied. But, when we take a closer look at the words the law employs–and the words it does not employ–we start to realize that this gate is frequently locked on the inside (Haq & Zafar, 2019).

4.1 Parsing Unsoundness of Mind: Why the Legislature Shunned the Word Insanity

The initial observation we make about Section 84 is its wording. Let us have a look at the wording of it: " Nothing is an offence which is done by a person who, at the time of doing it, by reason of unsoundness of mind, is incapable of knowing the nature of the act, or that he is doing what is either wrong or contrary to law" (Raj, 2022). It does not refer to the term insanity. Rather, it is called unsoundness of mind. This may appear as a minor detail on the surface, but in law, details matter.

The Logic of Vague Terminology

Why not use the term insanity by the authors of the code? This is likely due to the weight of absolute insanity. It means a person who is totally mad or crazy in the opinion of the people. The law established a wider, yet more exasperating, umbrella by employing the unsoundness of mind. It is not a medical word; you will not read it in a psychiatric textbook. It is a legal net that is meant to snare anything that appears to be a mental defect.

The Trap of the Permanent State

An enormous logical question here is: Is unsoundness necessarily permanent? Pakistani courts did so over decades. Unless you were sound daily, the law was reluctant to defend you. This created a paradox. It is a fact of science that mental illness is usually in waves. One may be functional on Monday and totally psychotic on Tuesday. The legislature left the decision of what is unsound to the judges by employing a broad term such as unsoundness. Regrettably, long enough, judges preferred to use this room to lock out anyone who did not resemble a classic madman.

4.2 The Rigid Interpretation of the Incapability of Knowing the Nature of the Act

Section 84 states that the individual should be unable to know the character of the act. This is a very high standard to reach. It is an impossible bar in most instances (Farrukh & Samejo, 2024).

The "Cognitive Prison"

Consider a woman who has a delusion that her child is possessed by a demon. She murders the child to redeem its soul. Is she aware of the nature of the act? Legally, yes. She is aware that she is holding a knife. She knows she is cutting. She is aware that the child will cease breathing. Since she is aware of these physical facts, a strict judge may declare her to be capable and hence guilty. This is a limited perspective of the human experience. It ignores the why. When her mind is so shattered that she cannot tell the difference between a child and a demon, can we say that she knows what she is doing? The law is concerned with the hand, but not with the eye that sees and the brain that interprets. This inflexibility transforms the trial into a checklist instead of an investigation of justice.

The "All-or-Nothing" Mistake

The wording implies that you are either 100% able or 0% able. The diminished responsibility that we observe in more modern legal systems has no place. This is the greatest obstacle in Section 84: this all-or-nothing logic. It does not explain the twilight zone of mental health, where an individual is aware of what they are doing but has lost the moral compass that informs them that it is wrong.

4.3 The difference between Medical Insanity and Legal Insanity in Pakistani Courts

This brings us to the most exasperating rift in our legal history, the war between the doctor's office and the courtroom.

Medical Reality vs. Legal Fiction

A physician examines a patient and observes a diagnosis of schizophrenia, bipolar disorder with psychosis, or severe dementia. This individual is insane or mentally ill, according to a doctor. Their state is a medical reality. But a Pakistani judge can examine the same individual, read the report of the doctor, and still pronounce him or her legally sane. How is this possible? Since Section 84 is not about health, it is about liability. The law has invented its own form of insanity, which has little to do with contemporary medicine. Legal insanity involves a complete loss of reason at the exact time of the crime. When a physician states that he has been schizophrenic for ten years, the judge may respond, but did he know the knife was sharp at 10:15 PM on Tuesday?

The Conclusion: A Science-Denying System

This difference enables the state to execute individuals who are medically confirmed to be sick. This was evident in the Imdad Ali case, where the court initially argued that schizophrenia was not a permanent disability but rather a recoverable disease. This was a legal fiction to avoid a medical fact. The issue is that the law is skeptical of science. Judges are afraid that by listening too much to psychiatrists, all criminals will say that they are sick. They cling to the rigid, 19th-century language of Section 84 to keep the floodgates closed. However, in the process, they establish a system where an individual can be ill in a hospital and sane on the gallows (Ranjha & Fatima, 2022).

Section 84 is outdated. It was written when we knew very little about how the brain works. It uses vague language and creates unrealistic expectations. It has enabled the Pakistani justice system to turn a blind eye to the plight of the mentally ill by separating legal insanity and medical insanity. To have a system that is truly representative of the truth, we need to cease the pretence that a legal definition by a judge is more real than a medical diagnosis by a doctor.

5. Case Study: Early Jurisprudence in Pakistan

In order to see the current state of the law, we must go back to the initial rulings that established the direction of Pakistani courts. The judiciary was long after 1947 effectively finding its feet with the Pakistan Penal Code. The English Common Law shadow was long, and judges were reluctant to deviate from the strict course that had been established in the 1800s. In this part, we examine two landmark cases that demonstrate the difficulty in balancing medical reality and a highly demanding legal standard.

5.1 Muhammad Iqbal vs. The State: Early Identification of Schizophrenia

The case of Muhammad Iqbal vs. The State is an interesting point of departure. To establish the plea of insanity, the standard of evidence is the preponderance of probabilities rather than the standard of beyond a reasonable doubt (Ajmal et al., 2022). During the initial years of the legal history of Pakistan, mental illness was treated with a lot of suspicion. Judges were always concerned with the concept of malingering–the notion that a criminal would just pretend to be mad to avoid the gallows. But Muhammad Iqbal is one of the first occasions when the court had to stare schizophrenia in the face.

The Identification of a Splintered Mind

The most misconceived condition in Section 84 history is probably schizophrenia. The court in this case was forced to contend with a defendant who was not the typical raving lunatic. He was silent, reserved, and apparently out of touch with the

world. The defense claimed that he was in a state where he could not comprehend the seriousness of his actions. The critical part of this case is that the court did not simply reject the plea. They recognized that schizophrenia is not merely being confused; it is a fundamental disruption of the brain in its processing of reality. This was a giant leap. It was the first time that a Pakistani court was leaving the Wild Beast test (the notion that you have to be as mindless as an animal to be insane) and going towards a more medical conception.

The Dilemma of Mitigation vs. Acquittal

However, there was a catch. Although the court was aware of the illness, they were at a loss as to what to do with it. In Section 84, you are guilty or not. There is no middle ground. In the said case, we find the court applying schizophrenia as a mitigating factor rather than a complete defense. This brings up a profound logical question: When someone is ill enough that their illness is a mitigating factor to their crime, are they not ill enough to be absolved of it altogether? The court was caught in a trap. They were aware that the man was sick, yet they feared that a complete acquittal would send the wrong signal to society. This case established a precedent of mercy, but it did not offer justice in the sense of a clear legal excuse. It demonstrated that the court could observe the disease, but it was not yet aware of how to apply the law to it without appearing to be letting a murderer loose.

5.2 Abdullah v. The State: Establishing the Evidentiary Standard

In case Muhammad Iqbal was about the what (the disease), then Abdullah v. The State was concerning the how (the evidence). This case is the so-called instruction manual that Pakistani trial courts relied on over the years to determine the amount of evidence that a defendant must produce.

The Heavy Burden of Section 105

In Pakistan, the law presumes that you are sane. When you say that you are insane, the onus is on you. In Abdullah v. State, the court has prescribed precisely the weight of that burden, which is imposed by the State. They relied on Section 105 of the Evidence Act (since replaced by the Qanun-e-Shahadat Order). The reasoning was easy and savage: the defendant had to demonstrate his insanity beyond a reasonable doubt, or at least, by a preponderance of probability. This poses an enormous challenge. Consider the reasoning behind this: an individual is in court because his or her mind is shattered. They probably do not have money, no access to high-end doctors, and no recollection of the incident. However, the law requires them to give technical, medical, and historical evidence of their own mental condition at the very moment the crime occurred. Abdullah v. The State strengthened this uphill struggle.

The "Momentary Insanity" Trap

The court in Abdullah pointed out that the unsoundness must be present during the act. This formed what I refer to as the Snapshot Fallacy. It does not matter whether you were screaming at shadows ten minutes before the crime or ten minutes after. The law desires a picture of the brain when the trigger was pulled. This cannot be logically demonstrated by a doctor years later in a trial. The Abdullah case effectively rendered Section 84 a dead letter for many years by establishing this evidentiary standard so high. It informed the accused: We think insanity is a defense, but we will render it almost impossible to prove it.

5.3 Critical Analysis: A Skepticism Tradition

When we consider these two cases jointly, we get a clear and somewhat dark picture of early Pakistani jurisprudence.

The Fear of the "Fake" Plea

The fear behind these early cases is that there would be fear that the insanity defense would be a get out of jail free card. This fear caused judges to develop a system that was more concerned with catching fakers than with protecting the truly sick. The reasoning was: It was better to kill a sick man than to allow a sane murderer to pass as a mad man. This is the complete opposite of the common law principle that it is preferable to release ten guilty individuals than to convict one innocent individual.

The Silence of the Medical Expert

During these initial years, the medical professionals were regarded as second-class citizens in the courtroom. In cases such as Abdullah, judges tended to believe that their legal common sense was better than a medical diagnosis by a psychiatrist. They would examine the conduct of a defendant--whether he attempted to conceal the body or to flee–and decide that he was sane because he exhibited guilt. However, contemporary science informs us that an individual may be psychotic and still possess a primitive survival instinct. Escaping does not imply that you are sane; it only implies that you are frightened. By overlooking this, the primitive courts remained in a very primitive conception of human behavior.

The Foundation of "Denialism"

These initial cases formed the basis of the denialism that we witnessed in the Imdad Ali case much later. The early judiciary, by setting the precedent that insanity was extremely difficult to establish and that the law could not rely on doctors too much, established a culture of guilty until proven insane.

New Vision: The Structural Injustice

Another new perspective on this is to view it as a structural failure. The British wrote the law (Section 84) in a narrow way. The evidence rules (Section 105) were drafted to be hard. And the Pakistani judges of the early days, who must have felt the necessity of being tough on crime in a new country, put these two together and made them nearly impossible to scale. The problem with early case law is that it recognized schizophrenia in Iqbal, but then built strict evidence rules in Abdullah that made it almost impossible for anyone to actually rely on that recognition. It was a regime of theoretical benevolence and practical inhumanity (Narasimhan, 1998).

Final Thought on Early Cases

These instances teach us that the law is not merely a matter of words on a page; it is a matter of the attitude of the individual reading those words. Section 84 was read with a suspicious eye by early Pakistani judges. They did not view the mentally ill as individuals who needed assistance, but as possible liars. Decades of human rights activism and a change in medical knowledge around the world finally overcame the so-called skepticism that cases such as Abdullah and Iqbal left behind. We cannot appreciate the warmth and humanity which the Safia Bano judgment ultimately introduced into the system without knowing this early coldness of the law. It took us the dark ages of inflexible evidence before we could arrive at the enlightenment of medical-legal cooperation.

6. Critical Synopsis: Is Section 84 an Archaic Relic?

When we end this chapter, we have to pose the last, most challenging question: Is Section 84 of the Pakistan Penal Code (PPC) an outdated relic that no longer serves the interests of justice? To respond to this, we must go outside the text and examine the logical friction between a 19th-century law and a 21st-century concept of human consciousness. Section 84 was written in a world that was unaware of what a neurotransmitter was. It was authored at a time when mental illness was commonly viewed in a moral perspective as opposed to a biological perspective. The Pakistani legal system has effectively preserved its knowledge of the human brain since 1860 by leaving this section virtually unchanged for over 160 years. This produces a time capsule effect in which judges must use Victorian reasoning to diagnose psychiatric cases in the present day. A law that refuses to expand with the science it regulates is not merely old, but it is a hindrance to the truth.

The most outdated part of Section 84 is its obsession with cognition—just the act of knowing. It assumes that if a person knows that a knife is a knife, then he or she is legally sane. But modern psychology tells us that knowing is just a little bit of the way we behave (Broadbent, 2014). We are motivated by feelings, urges, and chemical messages that we are not always in control of. Section 84 disregards the volitional aspect of mental illness. An individual may be aware that an action is illegal and physically and mentally unable to prevent it because of a serious psychotic episode. In disregarding this, the law applies a very primitive, binary reasoning: you either possess a broken GPS (no knowledge) or you are a criminal

(choice). It does not leave any chance to the so-called broken brakes (loss of control), which is a fact for millions of people with mental health disorders. The law is incomplete in this sense.

The difference between legal insanity and medical insanity, as discussed in the above sections, has turned out to be a state defense. This is, perhaps, the oldest aspect of our system. It enables the law to disregard doctors whenever their results are inconvenient. When the law is meant to discover the truth, then it is a self-defeating tactic to disregard the experts who study the brain. Section 84 builds a parallel universe in which a person can be ill in a hospital bed and sane in a courtroom by holding onto a definition of the law that is inconsistent with the medical reality. To refer to Section 84 as an archaic relic is not to say that it is worthless. It was a revolutionary effort to bring mercy to the law in the 1800s. But a relic is in a museum, not the middle of a death penalty case. The law should be changed to incorporate:

Reduced Responsibility: Recognizing that a person can be partially responsible.

1. Volitional Tests: It is important to understand that a loss of control is as legitimate as a loss of knowledge.
2. Mandatory Medical Integration: Requiring psychiatric assessments to be the basis of the trial, rather than a mere side-note that a judge may disregard.

Section 84 is a relic in its present form. It is a hard, intellectual examination that belongs to a less advanced age. It does not consider the continuum of mental health, it imposes an unrealistic burden of proof on the most vulnerable, and it builds a barrier between law and science. Although the Safia Bano judgment has begun to break this wall, the statute itself is a relic of the colonial past. To proceed, Pakistan needs to rephrase Section 84 not only using better words, but also with a better idea of what it is to be human. In the absence of this update, the law will still be punishing the biology of an individual in the name of punishing his or her intent.

Conclusion

The evolution of the insanity defense in Pakistan reflects a slow, painful awakening to the realities of human biology. For over a century, the justice system operated under the shadow of the M'Naghten Rules, treating mental illness through a lens of suspicion rather than science. This reliance on Section 84 of the PPC has historically forced judges to ignore medical facts in favor of a "snapshot" of the accused's mind at the exact moment of the crime. From the early identification of schizophrenia in Muhammad Iqbal to the rigid evidentiary barriers in Abdullah, the courts long preferred a "guilty until proven insane" culture to prevent what they feared were "fake" pleas. However, the era of "denialism" seen in the Imdad Ali case is finally giving way to the enlightenment of the Safia Bano judgment. It is no longer acceptable to treat a medical patient as a cold-blooded criminal or to use a Victorian-era "stone tool" to perform modern legal surgery. To truly progress, Pakistan must reform Section 84 to include volitional tests and mandatory medical integration. The law must stop punishing the biology of the vulnerable and instead embrace a system that punishes the wicked while healing the sick.

Acknowledgment:

This article has been derived from the thesis of Salman Khan, titled "The Law of Insanity Defense in Criminal Law: An Analysis of Well-Known Cases in Pakistan," submitted to Abdul Wali Khan University, Mardan, in partial fulfillment of the requirements for the degree of LLM under the supervision of Dr Ashraf Ali and the further assistance of Aftab Haider.

References

Ahmed, S. S., Javed, M. T., & Shabbir, S. (2025a). Reassessing The Insanity Defense In Pakistan: A Comparative Study Of Section 84 Ppc With International Jurisdictions And Its Procedural And Evidentiary Challenges. *Competitive Research Journal Archive*, *3*(03), 144–152. https://www.researchgate.net/profile/Syed-Shaharyar-Ahmed-2/publication/394730284_REASSESSING_THE_INSANITY_DEFENSE_IN_PAKISTAN_A_COMPARATIVE_STUDY_OF_SECTION_84_PPC_WITH_INTERNATIONAL_JURISDICTIONS_AND_ITS_PROCEDURAL_AND_EVIDENTIARY_CHALLENGES/links/68a573a02c7d3e0029b20a51/REASSESSING-THE-INSANITY-DEFENSE-IN-PAKISTAN-A-COMPARATIVE-STUDY-OF-SECTION-84-PPC-WITH-INTERNATIONAL-JURISDICTIONS-AND-ITS-PROCEDURAL-AND-EVIDENTIARY-CHALLENGES.pdf

Ahmed, S. S., Javed, M. T., & Shabbir, S. (2025b). Reassessing The Insanity Defense In Pakistan: A Comparative Study Of Section 84 Ppc With International Jurisdictions And Its Procedural And Evidentiary Challenges. *Competitive Research Journal Archive*, *3*(03), 144–152. http://thecrja.com/index.php/Journal/article/view/164

Aitken, R., & Aitken, M. (2009). The M'Naghten Case: The Queen Was Not Amused. *Litig.*, *36*, 53. https://heinonline.org/hol-cgi-bin/get_pdf.cgi?handle=hein.journals/laba36&section=69

Ajmal, A., Niazi, F. U., & Rasool, F. (2022). Insanity Defense in. *Global Legal Studies Review*, *VII*, 11–16. https://www.humapub.com/admin/alljournals/glsr/papers/YPAo5N7Cnt.pdf

Al-Ghifari, D. H., Huda, M. M., & Haider, A. (2024). Traditional Authority of Kyai and Its Impact on Religious Moderation in East Java Pesantren. *IJIBS*, *2*(2), 129–144. https://ijibs.uinkhas.ac.id/index.php/ijibs/article/view/47

Bagaric, M. (2025). *Punishment and sentencing: A rational approach*. Taylor & Francis. https://books.google.com/books?hl=en&lr=&id=cHQ_EQAAQBAJ&oi=fnd&pg=PP17&dq=the+law+often+punishes+an+individual%E2%80%99s+biology+under+the+guise+of+punishing+their+intent.&ots=9WLriXQP5w&sig=HaRuIknN0fZbo0rvSp8QKF8nqzM

Beck, T. J. (2020). *Cybernetic psychology and mental health: A circular logic of control beyond the individual*. Routledge. https://www.taylorfrancis.com/books/mono/10.4324/9780429287046/cybernetic-psychology-mental-health-timothy-beck

Bhati, M. (2023). Concept of Liability in Jurisprudence. *Issue 2 Indian JL & Legal Rsch.*, *5*, 1. https://heinonline.org/hol-cgi-bin/get_pdf.cgi?handle=hein.journals/injlolw11&section=173

Broadbent, D. E. (2014). *Behaviour (Psychology Revivals)*. Psychology Press. https://www.taylorfrancis.com/books/mono/10.4324/9781315797410/behaviour-psychology-revivals-broadbent

Farrukh, T., & Samejo, I. A. (2024). Mental Health and Criminal Responsibility: A Critical Analysis of the Insanity Defense. *Siazga Research Journal*, *3*(2), 203–211. https://journals-uoli.com/index.php/SRJ/article/view/81

Haider, A. (2024). Application of the United Nation Convention against Transnational Organized Crime: An Analysis. *Available at SSRN 4686710*. https://papers.ssrn.com/sol3/papers.cfm?abstract_id=4686710

Haider, A., Ahmad, I., & Gohar, M. (2023). Analyzing International Human Rights Law: Global Enforcement and Treaties. *INTERNATIONAL JOURNAL OF HUMAN AND SOCIETY*, *3*, 229–236. https://scholar.google.com/scholar?cluster=17065946018534265802&hl=en&oi=scholarr

Haider, A., Ali, A., & Zeb, B. (2024). *Broken laws, broken lives: When organized crime shreds human rights*. https://papers.ssrn.com/sol3/papers.cfm?abstract_id=4751333

Haider, A., Ali, A., & Zubair, M. (2023). Chasing Dragons in the Dragon's Land: A Convoluted Struggle with Drugs and Deviance in Modern China. *Asketik J. Agama Dan Perubahan Sos*, *7*(2), 322–343. https://www.researchgate.net/profile/Aftab-Haider-3/publication/378365788_Chasing_Dragons_in_the_Dragon's_Land_A_Convoluted_Struggle_with_Drugs_and_Deviance_in_Modern_China/links/65d64a51adf2362b634b161d/Chasing-Dragons-in-the-Dragons-Land-A-Convoluted-Struggle-with-Drugs-and-Deviance-in-Modern-China.pdf

Haider, A., Mathlouthi, N., Rahal, M. S., & Afzal, J. (2025). Can Islamic Law and Secular Law Coexist Without Conflict. *Al-Istinbath: Jurnal Hukum Islam*, *10*(2), 485–512. https://journal.iaincurup.ac.id/index.php/alistinbath/article/view/11331

Haider, A., Raza, S., & Khan, B. Z. (2023). Organized Crime and the Objectives of the Islamic Penal System. *Al-Qamar*, *6*(2), 63–82. https://www.alqamarjournal.net/index.php/alqamar/article/view/1269

Haider, A., Yousaf, U., Shah, N. H., & Azeem, W. (2024). UNTOC's Role in Combating Transnational Organized Crime: An International Response. *Pakistan JL Analysis & Wisdom*, *3*, 178. https://heinonline.org/hol-cgi-bin/get_pdf.cgi?handle=hein.journals/pknjlolw3&section=183

Haq, M., & Zafar, N. N. (2019). Mentally ill prisoners in Pakistan's criminal justice system: Analysing fair trial & due process standards. *Editor's Note*, *5*(1), 1–43. https://humanrightsreviewpakistan.wordpress.com/wp-content/uploads/2018/03/human-rights-review-vol-54.pdf#page=6

Jamshed, J., Jan, J., Muhammad, A. A., & Baig, K. (2023). Mental illness and criminal justice system of Pakistan: Analysis of the landmark judgment in safia bano case. *Pakistan Journal of Humanities and Social Sciences*, *11*(1), 102–112. https://www.researchgate.net/profile/Junaid-Jan-3/publication/368543193_Mental_Illness_and_Criminal_Justice_System_of_Pakistan_Analysis_of_the_Landmark_Judgment_in_Safia_Bano_Case/links/63edd80e2958d64a5cd33e30/Mental-Illness-and-Criminal-Justice-System-of-Pakistan-Analysis-of-the-Landmark-Judgment-in-Safia-Bano-Case.pdf

Mason, J. (2021). What's Wrong with Wrongfulness? Reconsidering the Wrongness Limb of the Insanity Defence. *Journal of Crime and Criminal Behavior*, *1*(1), 21–51. https://www.researchgate.net/profile/James-Mason-24/publication/355025164_What's_Wrong_with_Wrongfulness_Reconsidering_the_Wrongness_Limb_of_the_Insanity_Defence/links/61586352a6fae644fbc25fc9/Whats-Wrong-with-Wrongfulness-Reconsidering-the-Wrongness-Limb-of-the-Insanity-Defence.pdf

Morse, S. J. (2004). Reason, results, and criminal responsibility. *U. Ill. L. Rev.*, 363. https://heinonline.org/hol-cgi-bin/get_pdf.cgi?handle=hein.journals/unillr2004&section=23

Narasimhan, G. (1998). Revisiting S. 105 of the Indian Evidence Act, 1872. *Student Advoc.*, *10*, 52. https://heinonline.org/hol-cgi-bin/get_pdf.cgi?handle=hein.journals/nlsind10&section=10

O'Sullivan, O. P., & Simpson, A. I. (2025). Trial by Medicine: A landmark interdisciplinary exploration of legal insanity and criminal responsibility in Victorian Britain. *BJPsych Advances*, 1–3. https://www.cambridge.org/core/journals/bjpsych-advances/article/trial-by-medicine-a-landmark-interdisciplinary-

exploration-of-legal-insanity-and-criminal-responsibility-in-victorian-britain/AC8695D37F748144B2B91C4C204674E2

Raj, V. (2022). Does Insanity Come within the Ambit of Unsoundness of Mind?: An Analysis of Section 84 IPC, 1860. *Issue 6 Indian JL & Legal Rsch.*, *4*, 1. https://heinonline.org/hol-cgi-bin/get_pdf.cgi?handle=hein.journals/injlolw9&section=135

Ranjha, M. U. A., & Fatima, A. (2022). The Death Penalty and Mental Illness in Pakistan's Courts: A Critical Analysis. *LUMS LJ*, *9*, 118. https://heinonline.org/hol-cgi-bin/get_pdf.cgi?handle=hein.journals/lumslj9&section=12

Roche, D. (2013). Retribution and restorative justice. In *Handbook of restorative justice* (pp. 75–90). Willan. https://api.taylorfrancis.com/content/chapters/edit/download?identifierName=doi&identifierValue=10.4324/9781843926191-6&type=chapterpdf

Stasi, A. (2021). Actus Reus and Mens Rea. In A. Stasi, *General Principles of Thai Criminal Law* (pp. 25–30). Springer Singapore. https://doi.org/10.1007/978-981-15-8708-5_3

Strang, H., & Sherman, L. W. (2003). Repairing the harm: Victims and restorative justice. *Utah L. Rev.*, 15. https://heinonline.org/hol-cgi-bin/get_pdf.cgi?handle=hein.journals/utahlr2003&section=9

Thomas, M., & Ball, J. J. (2022). Morality and Command Delusions: Reviewing the Requirement of Wrongdoing in the M'Naghten Rules: R v Keal [2022] EWCA Crim 341,[2022] 4 WLR 41. *J. Crim. L.*, *86*, 130. https://heinonline.org/hol-cgi-bin/get_pdf.cgi?handle=hein.journals/jcriml86&section=17