



Original communication

How could she? Psychosocial analysis of ten homicide cases committed by women



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ABSTRACT

Objective: Ten percent of all homicide perpetrators are female and homicidal acts committed by women are mostly a result of interpersonal conflicts. We carried out a retrospective psychosocial analysis of ten homicide cases committed by women with an urban mid-European background. We evaluated characteristic determinants regarding 1) deed circumstances and motives, 2) the perpetrators, and 3) the victims. Results were compared with the literature on female and male homicides.

Method: Autopsy records of the Institute of Legal Medicine of the University Hospital of Düsseldorf, Germany, during the time period from 2006 to 2011 were searched for homicides committed by female perpetrators. Prosecution files were reviewed for further information.

Results: The sample comprised N = 10 female homicide perpetrators and eleven victims. The mentioned determinants of the homicide were fairly consistent. All deeds occurred in the domestic context; they were mostly unplanned. All perpetrators were socially isolated and faced socially challenging situations. Most perpetrators were of low socioeconomic status. Furthermore, all victims were helpless and/or dependent on the perpetrator. The presence of a major psychiatric disorder was uncommon and, in contrast to male perpetrators, most women had no previous convictions.

Discussion: The potential value of these core findings in our sample regarding prevention is discussed.

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1. Introduction

Homicide is the most extreme act of physical violence. Aggression is traditionally regarded as a masculine trait and women in general are considered to be less criminal than men.¹ Women tend to deal with life stressors in rather noncriminal ways compared to men and female offenders constitute only approximately 10% to the entity of arrested homicide perpetrators.^{2,3} It has been argued that women tend to internalize negative affects using inward compensatory strategies, such as becoming depressed, misusing substances, or feeling guilty rather than externalizing their anger.^{2,4} Homicidal acts by women have been found to result to a great extent from interpersonal conflicts, and to be specifically directed at persons with whom they have intimate or emotional relationships.⁵

Whereas in Germany the proportion of women among all criminal offences increased since the 1970s (from appr. 13% to appr. 23% at present), the proportion of female perpetrators in homicide offences slightly decreased in the same period of time.⁶ From 1953 to 1969 a total of 29 499 homicides occurred in the Federal Republic of Germany of which 4080 (13.8%) were committed by female offenders.⁷ In the year 2000 3196 persons were suspected for homicide, of which 349 (12.3%) were female.⁶ In comparison to any other type of offences that were committed in Germany the crime clearing rate for murder (94.7% in 2000) is the highest.⁶ However, for infanticide, in particular neonaticide, a high number of unreported cases are presumed.⁸

Family members, especially male partners are the most common victims of female homicide offenders.^{5,9–11} Extreme acts of lethal violence by women seem to be born out of extreme life conditions¹² and are often unplanned.^{9,10} Even though spousal homicide perpetrators are much more likely to be men than women,¹³ the spouse is the most common target of female perpetrators, followed by other family members, including children.¹⁴

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Hereby, filicide is a general term describing the act of a parent or an adoptive parent killing their child.^{15,16} Neonaticide describes the killing of the newborn during the first day of life.¹⁷ Parricide, the murder of a parent by an offspring or stepchild, is one of the least frequent forms of fatal domestic violence.¹⁸ It constitutes only 2% to all murders in the USA.^{19,20} Most of the literature on matricide consists of killings by adult sons.^{20,21} D'Orbán and O'Connor¹¹ analysed 17 cases of female parricides in Great Britain committed in 1980–1988. He showed that the included 14 matricides were committed predominantly by women in mid-life who killed their elderly mothers. The social situation of these women was characterized by marked isolation.

It is currently uncertain how far mental illness is a risk factor in the offence of women and data varies also in terms of the different victim-group. Women who commit filicide seem to suffer more often from depression and psychotic illnesses^{22,23} while most female spousal homicide offenders were not depressed at the time of the deed.¹³ In addition, both most of the female perpetrators of spousal homicides and their victims tend to have a history of substance abuse, especially alcohol dependency.¹³ Flynn and colleagues²⁴ compared male and female offenders and found that 17.9% of the women and 9.5% of the men who committed a homicide were suffering from mental disorders at the time of the offence. In addition 50.4% of their female and 29.6% of their male subjects had a lifetime history of mental illness. Putkonen and colleagues²⁵ found high prevalences of personality disorders (72%), alcoholism (43.9%), and psychotic illnesses (28%) in their investigated female offenders. Regardless from gender, people with anti-social personality disorder or predominant personality traits such as impulsivity as characteristic of cluster B disorders are significantly overrepresented among homicidal offenders.^{12,26} A relationship between violence and cluster A (paranoid, schizoid, schizotypal) and cluster C (anxious-avoidant, dependent, obsessive-compulsive) disorders is less clear.²⁷

Homicidal women are often socially isolated and socioeconomically disadvantaged; they have often experienced domestic violence by themselves and need to care for dependent family members, e.g. children or elderlies.^{9,10,14,28,29}

The objective of the present study was the psychosocial analysis of ten cases of homicides committed by women with an urban mid-European background. We evaluated characteristic features regarding 1) the perpetrator, 2) the circumstances of the homicidal act, and 3) the victim with special emphasis on the relationship between perpetrator and victim. Determinants of these three aspects were extracted and are proposed as a model which may provide a possible toehold for future measures of prevention. Furthermore the current literature on homicides carried out by women was reviewed and is both compared to the described cases and to homicides committed by male perpetrators.

2. Materials and methods

This retrospective study was carried out by reviewing the archives of the Institute of Legal Medicine of the University Hospital Düsseldorf, Germany. All autopsy files of suspected killing cases during the period of time from 2006 to 2011 committed by women were included in the examinations. Further information was collected by reviewing the prosecution files after the files had been closed. This study was approved by state authorities and was conducted under the auspices of the involved prosecution offices.

Information on the age of the perpetrator, her marital status, her educational level, employment and socioeconomic status, her migrant background, her nationality and her religion as well as the relationship of offender and victim, the gender and the age of the victim, the killing method and the crime scene were collected. The

collected data was evaluated descriptively. Furthermore possible psychodynamic determinants which might have led to the killings were analysed. Information about the perpetrators psychiatric status was based on our own evaluation, of testimonies, recorded interrogations by the police and the court, as well as personal documents of the perpetrators contained in the provided files and forensic-psychiatric expert reports (available in cases 1, 2, 3, 5, 7, 9 and 10). In case 2, the perpetrator had declined an exploration by the forensic psychiatrist. In case 5, two different forensic psychiatric expert reports existed because of the prosecutor's appeal against the sentence. However, we have taken into account our own experience and assessment of the material in all cases to draw our conclusions. Furthermore, we took into account the perpetrator's legal responsibility.

3. Results

The search revealed 11 autopsies of victims which were assumably killed by 10 different women. In case 10, the issue was a double killing in which a woman killed her two children. It turned out to be a case of attempted homicide-suicide with the mother surviving. Demographic information of individual offenders is presented in Table 2. Demographic information of the victim and the relationship between offender and victim are presented in Table 1.

3.1. Age

The age of the female offenders ranged from 18 to 64 years, with a median age of 37 years. The age of the victims ranged from 0 (2 cases of neonaticide, one death of a 6 days old child) to 89 years, with a median age of 6.5 years.

3.2. Social class indicators

Six women finished high school. At the time of the crime, one woman visited a German high school as a foreign exchange student and only one woman was regularly employed. She worked below her qualification (foreign language correspondent) as an assembly line worker. Three women lived together with their husbands (case 3, 4 and 9). Two women lived together with their parents and siblings (case 5 and 8). One woman (exchange student) was staying with her host parents (case 6). Two women inhabited a flat together with their mothers (case 1 and 2). One woman lived alone (case 7). All women lived more or less socially and/or culturally isolated or presented a lack of support.

3.3. Religion

Three women were Christians (one Protestant, two Roman-Catholics). Five women had other confessions (one free church, one Kimbanguistic, one Mormon, two Muslims).

3.4. Nationality

Six women were German nationals with three of them having a migration background (Kazakhstan, South Africa, former Yugoslavia). Two women possessed a double citizenship (German/Moroccan, German/Palestinian). One woman was Congolese and one woman was a native U.S. American.

3.5. Place and method of homicide

The place of the murder and the homicidal method are presented in Table 1. All the assaults occurred at home. All non-spouse

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