



# Homicides in Western Norway, 1985–2009, time trends, age and gender differences



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## ABSTRACT

This retrospective study from Western Norway is based on the cases of 196 homicide victims from 1985 to 2009. The median age of the victims was 35 years, in both genders. Within the cases, 113 of the victims were male and 83 female, 28 victims were under the age of 18, and 19 victims were not native Norwegians.

Ethanol was detected in the blood of a higher proportion of male compared to female victims, whereas a higher proportion of female compared to male victims had both illegal/legal drugs detected in their blood. Most perpetrators were male. Men were most often killed by an acquaintance, women by their present or former intimate partner. In 14 cases of intimate partner homicide the perpetrator committed suicide after killing their female partner. The dominant scene of crime was private homes. Most victims were killed by blunt force, sharp force or gunshot. The head was the body region most often injured in the homicide victims. Female victims were more often killed by manual strangulation than male victims.

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## 1. Introduction

This study was undertaken to identify the characteristics of homicides in Western Norway. We expected our results to be quite similar to those seen in other Scandinavian studies, but to differ in comparison to studies from other parts of the world.

All available data of homicide victims was analyzed, but with little data available regarding the perpetrators, partly due to Norway's strict ethical rules and privacy policies.

The aim was to identify differences relating to age and gender, as well as time changes over 5-year periods. We also wanted to explore the circumstances in which the victims were murdered, as well as the victim/perpetrator relationship.

This study differs from other Scandinavian homicide studies in the sense that it focuses more on intimate partner homicides (IPH). Identifying characteristics of these homicides can contribute to important background data that may be used by the Government, health and social services, as well as the police. We believe that the number of IPH can be reduced due to the fact that these homicides

most often are committed after a long list of warning signs, such as threatening, battering and stalking. It is society's responsibility to take these warning signs seriously and take necessary measures to try to prevent future events of IPH.

## 2. Materials and methods

The forensic unit at the Gade Laboratory for Pathology, University of Bergen, is located in the city of Bergen on the west coast of Norway. Post mortem examinations are performed on victims of death from unnatural and unexpected causes, including homicides that are brought in from the four counties Rogaland, Hordaland, Sogn and Fjordane, and the southern part of Møre and Romsdal. This covers a population of 1,245,439 (in 2009) [1–4]. The homicide rate was defined as the number of homicides per 100,000 population.

Data was obtained and analyzed retrospectively from post-mortem reports of examinations performed between 1985 and 2009. Toxicological screening was done in nearly all cases.

Intimate partner was defined as a present or past partner or boy/girl friend. Foege et al. defined homicides as fatal injuries inflicted by another person with intent to injure or kill, by any means [5]. We included all known premeditated murders and intentional manslaughters. Cases where death was caused by

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another person through negligence, traffic accidents and similar incidents, defined as involuntary manslaughter by Norwegian law, were excluded from the study. We defined victims under the age of 18 years as child homicide victims.

The material was divided into 5-year periods to facilitate comparison of time periods. Tests of statistical significance by Chi squared tests were performed using SPSS PAWS Statistics, version 18, and later version 20. Diagrams were created in Excel: Mac, version 2008.

### 3. Results

#### 3.1. Homicide rates

Among 9374 post mortem examinations during the 25-year period, 196 (2.1%) were homicides. The homicide rate in Norway decreased from 0.99 in 1990 to 0.68 in 2009 [1–4,6,7]. The homicide rate in Western Norway fluctuated more than the national homicide rate. During the first 10 years the homicide rate in Western Norway was lower than in the country as a whole. In 1990–1994 the homicide rate in Western Norway was slightly higher than in the rest of the country. From 1995 to 2009 both the national rate and the rate of Western Norway decreased, but the decrease was most pronounced in the latter (Fig. 1).

#### 3.2. Victims – age, gender and BMI

The median ages of male and female homicide victims were 35 (0–88) and 35 (0–85) years, respectively. The age distributions were constant in the 5-year periods examined. Sixteen percent of the victims were older than 60 years.

In the total material 58% of the victims were male, 42% female. Between 1985 and 1994 two out of three victims were males. However, after 1995 the number of male victims decreased and that of female victims increased. Hence, the percentage of male and female victims became more equal ( $\chi^2 = 8.3, df = 4, p = 0.08$ ) (Fig. 2).

Most victims were of average stature, the median body mass index was 23.7 (10.7–39.3) and 22.6 (10.7–35.0) in males and females, respectively.

#### 3.3. Homicide victims under the age of 18 years

Twenty-eight victims were under the age of 18 years, 11 of which had not reached the age of 1 year (Fig. 3). Opposite to the homicide rate in the total population, the number of child victims

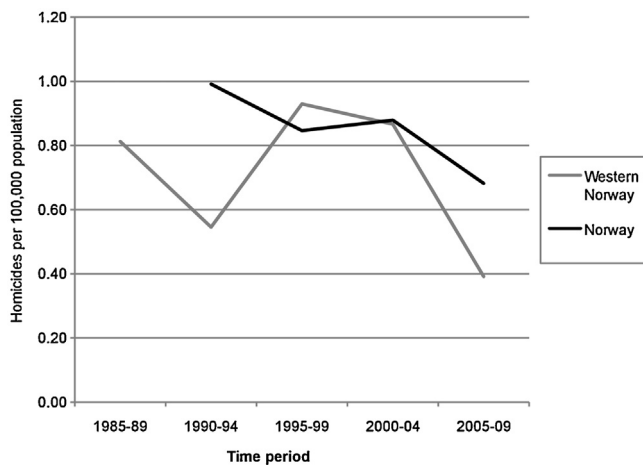


Fig. 1. The homicide rate in Western Norway compared to the national Norwegian homicide rate, between 1985 and 2009. National data was not available between 1985 and 1989.



Fig. 2. The homicide rate in both genders in Western Norway, between 1985 and 2009.

did not decrease during the period examined. Thirteen children were killed by their father, 5 by their mother, 6 by strangers, 2 by boyfriends and 2 by family acquaintances. Six infants (children under the age of one year) died from blunt force, 3 from smothering, 1 from ligature strangulation and 1 from sharp force injuries.

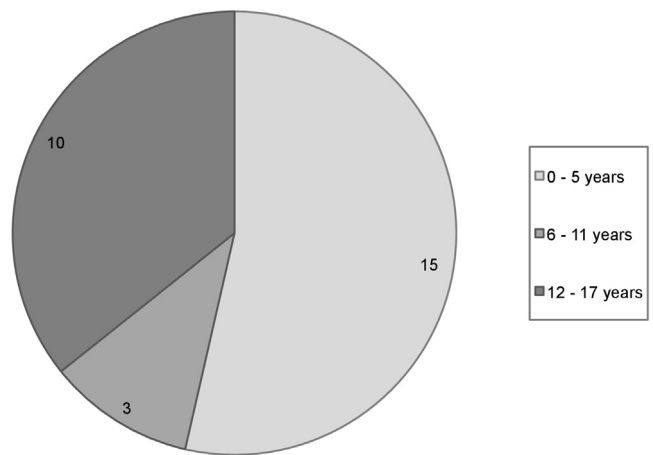
#### 3.4. Nationality of victims

Eighteen victims were nonethnic Norwegians; these cases were evenly distributed in each 5-year period. As the total number of victims decreased during the 25-year study period, the proportion of nonethnic Norwegian victims increased from 5% between 1985 and 1989 to 21% between 2005 and 2009.

#### 3.5. Ethanol and drugs in victims

Samples from blood, urine, muscle or vitreous fluid were unavailable in only 3 out of 196 cases. In 77 victims, 55 men and 22 women, ethanol was detected in the blood. In 60 victims, 42 men and 18 women, ethanol was detected in the urine. Fewer female victims had ethanol detected in their blood than male victims for the whole period ( $\chi^2 = 10.3, df = 2, p = 0.006$ ).

In 45 victims, 23 men and 22 women, drugs were detected in the blood. Benzodiazepines were the most common legal drugs



Homicide victims under the age of 18 years

Fig. 3. Number of homicide victims under the age of 18 years.

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