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***PERPETRATORS OF INTIMATE FEMICIDE:***  
**A STUDY OF FORENSIC RECORDS**

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award of the Degree of Master of Clinical Psychology**

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## DECLARATION

This work has not been previously submitted in whole, or in part, for the award of any degree. It is my own work. Each significant contribution to, and quotation in, this dissertation from the work, or works, of other people has been attributed, and has been cited and referenced.

Signed by candidate

Victoria Jane Mayer

Date

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## **ABSTRACT**

Intimate femicide is prevalent in South Africa, and represents the lethal end of a continuum of male perpetrated intimate partner violence. For various reasons attention has only begun to be paid to intimate femicide in the last three decades. International research has established existing rates for intimate femicide, mostly in North America and the United Kingdom, and has confirmed that intimate femicide constitutes a unique form of homicide, which does not fit with the established patterns for other forms of homicide. South African studies have predominantly focused on establishing the rate of intimate femicide in the country. This study sought to examine a smaller number of intimate femicides (n=24) within a broader context in order to provide information, not only on the perpetrator and the victim, but also the state and status of their relationship, and to investigate how the perpetrator accounts for the event. The study was designed as a retrospective archival-based examination of the patient files of perpetrators who had been referred for observation to a psychiatric hospital as a result of criminal proceedings brought against them following the femicide. The information in the patient files was described, analyzed and interpreted using descriptive statistics, a thematic analysis of reported perpetrator accounts and the use of four illustrative case-studies. The results showed that a large proportion of perpetrators had a previous history of violence, and one fifth of perpetrators were employed in the police or defence services. They also confirmed that women were most at risk when attempting to end a relationship with the perpetrator. Most femicides took place in the victim's own home and just over one third were directly witnessed by children. An analysis of the accounts of the intimate femicides by the perpetrators revealed significant themes which appeared to be related to assumptions around male entitlement to control their female partners, and tendencies to commodify their partners, viewing them as their own property.

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# CHAPTER ONE

## INTRODUCTION

### 1.1 Background to the study

As women in South Africa we are made mindful of our vulnerability to violence. We are advised told not to talk to strangers, to go out in groups, to remember stranger-danger, to avoid deserted places and to lock the doors at night. The hazard is “out there” and once we are safely home we breathe a sigh of relief. But the notion of “safely home” is dangerously misleading for women who share their home with men, because it is *at home* where they are least safe from lethal violence. The likely threat is not from the villain lurking in the shadows, or from the psychopathic serial killer, or even from the boy-next-door; it’s from the man who shares their home.

The murder of women by their partners is the most extreme form of gender based violence and takes place in intimate relationships. In the context of domestic violence, cases of intimate *homicide* are only the tip of the iceberg; these are the severe cases where violence has caused a death which necessitates some level of scrutiny and investigation by outside agencies. However, for every murder, there are countless cases of physical violence and brutality against women by their partners, which remain on a sub-lethal level, and are obviously less reliably reported than a killing. Recent research in the USA has shown that 44% of women in the sample of over three thousand subjects reported having experienced intimate partner violence (Thompson, Bonomi, Anderson, Reid, Dimer, Carrell, et al., 2006). South African studies have found that 1 in 3 women attending antenatal health services were subject to abuse (Jewkes, Abrahams & Mvo, 1998) with rates as high as two in three for adolescent girls (Wood & Jewkes, 1998).

In South Africa, the effects of violence in intimate relationships have a significant impact on members of the family, the broader community, and on public health, justice and policing resources. The effects of lethal violence are similarly far-reaching, and leave a permanent impact. However, despite the alarming rates of intimate female homicide, there is relatively

little research on the subject, and it appears to be relatively unexplored as a phenomenon. Researchers, policy-makers and advocacy groups focus more readily on external issues such as streetlights or visible policing in order to increase protection for women, and ensure their safety when they leave their homes and families. It is ironic, and perhaps even disturbing that the myth of “safely home” obscures the source of real danger and threat.

The majority of women murdered in South Africa have been killed by their intimate male partners (Mathews, Abrahams, Martin, Vetten, van der Merwe, & Jewkes, 2004). An intimate male partner includes a husband, a co-habiting boyfriend, a boyfriend living elsewhere, an ex-husband or ex-boyfriend, and a putative boyfriend or rejected would-be lover. South Africa has the highest reported rate of female homicide by intimates: it is estimated that one woman is killed every six hours by her partner (Mathews et al., 2004). Recent research into this area in South Africa has described the rate and incidence of intimate homicide of women, and revealed certain broad demographic patterns regarding both victims and perpetrators, together with certain information about the crime itself (Mathews et al., 2004). These findings have been based on records obtained from mortuaries and the South African Police Service. Results emerging from this research have established the alarming rates of intimate homicide, and created much needed attention the issue.

This research sets out to examine a smaller number of homicides within their broader context. It seeks to profile the perpetrator and the victim, explore the state and status of their relationship, ascertain any sequential escalation of violence preceding the murder, and consider the events leading up to the homicide. From this information it will identify patterns around intimate homicide in the cases reviewed and further attempt to ascertain any significant determinants or precursors of this behaviour. It also examines the various accounts provided by the perpetrators of the murder.

The data for this study has been drawn psychiatric files of male perpetrators of intimate homicide referred to Valkenberg Psychiatric Hospital (Valkenberg) for observation. The observation seeks to determine whether perpetrators were of sound mind at the time of committing the offence, and are capable of understanding the legal proceedings against them. The perpetrators remain at Valkenberg for a period of 30 days, during which they are

interviewed and examined by a team of psychiatrists, psychologists and social workers. The psychiatric interviews focus on the details of the offence, as described by the perpetrator, in addition to information regarding the perpetrator's personal history, and relationship history. Accordingly, these files contain information about the perpetrators, their relationship with the victim, and the context in which the murder took place, in addition to revealing the perpetrator's view of the murder and their understanding of their intimate relationships.

This information extracted from 24 files, will be focused on identifying significant factors that may have been important in contributing to the perpetrator's behaviour at the time of the murder. The study focuses on intimate homicide between heterosexual couples, and does not include cases where the perpetrator has killed a partner, together with other family members – so called “family murders”. The sample is small, and is drawn from a specific population – those perpetrators referred for psychiatric observation. However, these archival hospital files contain detailed and accessible information regarding the situational factors in these murders, and an examination of these will begin to establish to what extent these patterns are similar to those in the international and South African research, or whether there are any specific trends in these cases.

This research project forms part of a larger long-term study being conducted into Intimate Partner Homicide in the Western Cape. This study is multidisciplinary, including the Forensic Psychiatry Unit, the Gender, Health and Justice Research Unit and the Division of Forensic Medicine and Toxicology, all of the Faculty of Health Sciences of the University of Cape Town. The information obtained from the Valkenberg files in this research study will, at a later stage, be combined with information obtained about the victims by forensic pathologists. Any significant factors identified in this study will then inform the second part of the project which will involve investigating new cases referred to the unit following a charge of homicide of an intimate partner. These factors will be investigated further together with any variables that are known to be associated with them.

It is hoped that this study, together with the broader project, will contribute in some way towards a greater understanding of the phenomenon of femicide, and the identification of risk factors of intimate homicide for South African women, and the development of more effective

intervention strategies to reduce rates of intimate femicide in our country, and levels of violence against women more generally.

## 1.2 Definitions

There are a number of terms which are used in the field of intimate partner violence. As this subject has been opened up to closer scrutiny and research, so the terminology has grown. The development of descriptive terms in the field of lethal violence in intimate relationships mirrors the growing understanding of the different dynamics associated with men killing women, as opposed to women who kill men, and the need to provide specific terms for this phenomenon. As a result the terminology has become appropriately more gender specific.

I have provided definitions of a full range of terms relevant to this field, in order to illustrate the increasing specificity in descriptive terms, and to define and differentiate between the various terminologies. I will also indicate which terms will be used in this thesis.

**Homicide:** The unlawful and intentional causing of death of a person.

**Intimate Homicide:** The unlawful and intentional causing of death of a male or female person by someone who is or was in an *intimate relationship* with them.

**Female Homicide:** The unlawful and intentional causing of death of a *female* person.

**Femicide:** The killing of a woman by a man *because she is female*, by any person. Most writers accept this term as the most appropriate to describe the murder of women generally.

**Non-Intimate Femicide:** The killing of a woman by someone other than an intimate partner.

**Intimate Female Homicide:** The unlawful and intentional causing of death of a *female* person by someone who is or was in an *intimate relationship* with them.

**Intimate Femicide:** The killing of a woman by any intimate partner, including a husband, cohabiting partner, boyfriend, lover, ex-husband / partner / boyfriend, same-sex partner, putative partner (rejected would-be lover). This term will be preferred in this research.

*Uxoricide*: The unlawful and intentional causing of death of a *wife* by her husband. This definition is obviously limited in that it excludes all relationships not legally defined by marriage.

Central to the context of intimate homicide is the relationship between victim and perpetrator. Both in the literature on the subject, and the discussion of the data for this study, distinctions are drawn between various types of relationships, most notably between those which are defined by marriage, and those which are not. In this thesis, married couples will be referred to as such, or individually as “*husband*” and “*wife*”. A co-habiting relationship not defined by marriage will be referred to as “*common-law relationship*” or “*common-law marriage*” although it is acknowledged that our legal system does not use this terminology to describe such relationships. The term “*partners*” will refer to men and women in common-law relationships. An intimate relationship in which the partners are not cohabiting will be referred to as a “*dating relationship*”, and the partners will be referred to as “*boyfriend*” and “*girlfriend*”.

I will refer to women who have been murdered by their intimate partners as “*victims*”. While the men in this sample were interviewed before they were found guilty of intimate femicide *beyond all reasonable doubt*, I have referred to them as “*perpetrators*” in line with most of the literature in this area, in which the term “*perpetrator*” or “*offender*” is used.

### **1.3 Structure of the thesis**

Chapter Two provides an overview of the development of literature relating to intimate femicide both internationally and nationally, and examines some of the broader social forces which have impacted on the phenomenon. It goes on to explore some of the theoretical positions on male violence against women, in addition to outlining some of the factors which have been found to be associated with intimate femicide in existing research.

Chapter Three includes an outline and discussion of the methodology employed to gain the descriptive and qualitative data, and provides an overview of the theory underpinning both the methodology, and the research endeavor as a whole.

Chapter Four presents the results, both of the descriptive data, and of the themes which emerged from an analysis of the perpetrator's accounts of the intimate femicide. In Chapter Five these results are explored, and pertinent issues are identified and discussed. The results are also compared to trends and patterns which have emerged in the existing literature.

Chapter Six concludes the research by highlighting the relevance and impact of the findings for the creation of a growing understanding of intimate femicide. Recommendations for both service providers working in the field of intimate violence, and for researchers are also made.

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## CHAPTER TWO

# LITERATURE REVIEW

### 2.1 Introduction

Violence is a pervasive aspect of life in South Africa. Historically there have been decades of extreme political violence and repression, and currently we have some of the highest recorded levels of violent crime (Crime Information Analysis Centre, 1998). Murder is one of the leading causes of death in South Africa, and our rate of homicide is considered to be one of the highest in the world (Mathews et al., 2004). To some extent, violence has become normalized in our country, leading some writers to describe ours as a “culture of violence” – a culture where violence is accepted and endorsed as a legitimate means of dispute resolution (Hamber, 1999).

One aspect of this “culture of violence” is widespread physical violence perpetrated by men against women. This gender-based violence is an insidious, and often under acknowledged component of the overall problem of unacceptable levels of violence in South Africa (Artz, 2001). Violence within intimate relationships constitutes the most commonly experienced form of gendered violence. A South African study of women in three provinces by Jewkes, Levin and Penn-Kekana (2002) estimated the life-time prevalence of women experiencing physical violence in an intimate relationship to be between 9 and 28%. This rate is higher in rural areas: a case study in the Southern Cape estimated that an average of 80% of rural women are victims of domestic violence (Artz, 2001).

To some extent, differences in rates may be linked to how intimate partner violence is defined in each study. The Centers for Disease Control and Prevention have developed a definition of intimate partner violence which seeks to include the many forms it can take, and the variety of relationships to which it applies. This definition includes physical violence, sexual violence, or both, or a threat of such violence, psychological abuse, emotional abuse, or coercive tactics where there has been prior abuse. While there may be some debate as to what constitutes

intimate partner violence, it is clear that the final and most extreme act of intimate gender-based violence is the killing of a woman by her intimate partner – intimate femicide.

Dobash and Dobash (1980) have long asserted that the roots and causes for domestic violence and intimate femicide are the same. Accordingly, intimate femicide is an extreme manifestation of the same basic conflicts that inspire sub-lethal marital violence on a much larger scale (Wilson, Daly & Wright, 1993). It can be assumed that for every woman who is killed by her partner, there are hundreds of others who are beaten, coerced and intimidated with less severity. Lewandowski, McFarlane, Campbell, Gary and Barenski (2004), considering intimate femicide in the USA, estimate that there are approximately three attempted femicides for every completed femicide.

Based on current available statistics, South Africa has the highest rate of intimate femicide in the world (Mathews et al., 2004). While statistics from other countries reveal a lower rate than in South Africa, their place in the overall homicide statistics, and the features regarding gender of perpetrator and victim are consonant with the South African picture; while men are most likely to be murdered by a stranger, women are more likely to be killed by an intimate partner (Mathews et al., 2004). Lewandowski, McFarlane, Campbell, Gary and Barenski (2004) reported that in the US almost half of all murdered women are murdered by their intimate partners. Using all available international data, the World Report on Violence and Health reported that between 40% and 70% of all female murders are perpetrated by a male intimate partner (Heise & Garcia-Morena, 2002).

When considering these rates, it is obvious that intimate femicide is an urgent problem, with significant social consequences and public health ramifications, and as such is an issue that demands attention. However, despite the obvious and significant risk of lethal violence to women from their intimate partners, there has until recently been surprisingly little research into this area, both nationally and internationally. In 1991, Stout noted that the phenomenon had received negligible attention both within the social sciences as a whole, and also within the field of scholarship focusing on violence against women. Most research in the field of gender-based violence has considered the many manifestations of non-lethal violence against women,

while there appeared to be a relative silence around its most extreme form – femicide. Grana (2001) notes that the empirical research on the intimate femicide is virtually nonexistent.

In the international literature there has been a growing acknowledgement that intimate femicide is an urgent social problem. Much of the recent literature has emerged from the fields of medicine which has identified the issue as a significant public health problem. It is ironic that both the historical and the existing research show a greater fascination with women who murder their intimate male partners, despite the fact that women-perpetrated cases account for only 30% of intimate homicides (Puzone, Saltzman, Kresnow, Thompson & Mercy, 2000). In South Africa, which has the highest recorded rate of intimate femicide, the mental health, forensic and legal outcomes of this phenomenon are under-researched. Comparatively little is known about the various contexts and circumstances of these killings, and whether there are any peculiar characteristics of intimate femicide in South Africa.

A practical reason for paucity of literature was that for many years, and to some extent still today, accurate figures for intimate femicide were difficult to obtain. Incidents of intimate femicide were subsumed into general figures for homicide. Where “domestic” homicides were disaggregated from general murder statistics, no differentiation was made between men killing women, and women killing men, thereby obscuring any patterns in terms of gender. In addition, there were often no categories to record and reflect a prior relationship between a perpetrator and a victim apart from “marriage”, and accordingly intimate femicides involving unmarried partners or ex-partners were not included in the statistics. Similarly, standard recording procedures regarding any apparent motive for a homicide often failed to reflect an underlying relationship between the parties, or that the murder may have taken place in the context of ongoing intimate violence (Radford, 1992).

The necessity of disaggregating homicide figures in terms of gender, as noted in the introductory chapter, has led to the development and use of a range of specific terminology. The use of the term “*femicide*” was first recorded at the 1976 International Tribunal on Crimes Against Women (Radford, 1992). The adoption of this term introduced awareness that the phenomenon of women killed by men is significantly different to that of men killed by men, or men killed by women. The term “*femicide*” is gender specific, and accordingly holds onto

these notable gender differences in homicide, allowing attention to be paid to the underlying patterns of gender and power which are obscured by gender neutral terminology such as “murder”, “homicide”, or even “intimate homicide”.

A further reason for the lack of attention to intimate femicide may be that it challenges some key myths or assumptions about risks of violence to women. These are the notions that the danger of violence is from an unidentified person “out there”, and that the home offers safety and protection. It also challenges firmly held sentimental beliefs about the nature of relationships and “love”; to consider intimate femicide means setting aside ideas about intimacy and caring in relationships, and revealing the underlying dynamics of power and violence which remain largely hidden. Gelles and Cornell (1990) commented that there is a reluctance to think of the family as society’s most violent social institution; there is much social and political investment in continuing to frame family life as warm, intimate, stress-reducing and the place that people flee to for safety. These issues may underlie the possible reluctance of researchers to have exposed violence in families previously. Recently, however, violence in family, including physical abuse, domestic violence, marital rape, child abuse and femicide have increasingly become the focus of scholarly enquiry.

## **2.2 International studies**

This section will track the major trends in the international literature on intimate femicide. Issues relating to an understanding of why intimate femicide takes place will be discussed later in the chapter, as will the various factors which have been found to be associated with intimate femicide.

The feminist movement of the 1970’s was instrumental in creating exposure to the issues of intimate partner violence (Dobash & Dobash, 1992). While the focus on domestic violence by mainstream scholarship may have been new, the practice of wife-beating had a much longer history. In 1878 Francis Cobbe, an English journalist, described the torture and killing of women by their husbands, providing one of the first detailed accounts of this phenomenon (Radford, 1992).

The fact that femicide did not exist as a discrete category of crime, together with its problematic inclusion into general statistics, were both complicit in keeping it out of the spotlight for many years after Francis Cobbe had drawn attention to it. However, there appears to have been an understanding of the dynamics of intimate femicide, almost as a sense of inherited wisdom. Stout (1993) refers to a statement made in 1948 by von Hentig in a USA publication: “when a man is found murdered we should look first for his acquaintances; when a woman is killed, for her relatives, mainly her husband and after that her paramour, present or past” (p. 82). Despite this insight there are no early studies which focus specifically on intimate femicide. Studies on intimate homicide in the USA used sample groups including men and women as perpetrators and victims. The first reference to women as a separate category of victims was in 1958 when an American study by Wolfgang found that 41% of female homicide victims were killed by their husbands (Stout, 1992).

In the last ten years intimate femicide has been receiving growing attention, with increasing scholarly focus since the 1990's (Puzone, Saltzman, Kresnow, Thompson, & Mercy, 2000). Most of the literature has emerged from developed countries, and particularly from the USA. Published papers include surveillance studies to establish rates of intimate femicide, case studies to deepen understanding of the issue and case control studies to identify risk factors (Mathews, 2005). Commentaries on statistics of intimate femicide which emerge from the USA have been careful to contextualize these figures within the country's comparatively high homicide rate, and take into account the greater access to weapons in the USA. However, as both of these factors – high homicide rates and ease of access to weapons – are issues which are also relevant to South Africa, this literature is relevant to our situation.

The existing literature confirms and reinforces the now generally acknowledged understanding that intimate femicide constitutes a unique form of homicide, which does not fit with established patterns for other forms of homicide (Frye & Wilt, 2001; Avakame, 1998). Surveillance studies have been relatively consistent in identifying the percentages of intimate homicides in relation to the overall homicide figures for men and women. Whereas only 3 – 6% of male homicide victims are killed by an intimate partner, this figure is between 30 – 55% for female victims (Campbell et al., 2003; Rennison, 2003; Puzone et al, 2000).

Retrospective surveillance studies have found that although there has been a steady decrease in the incidence of intimate homicide where the victim is a man, there has been far less improvement for women victims (Puzone et al., 2000; Rennison, 2003). Rennison (2003) also found that while the overall number of intimate femicides in the USA decreased from 1976 to 1996, there was an overall increase in the percentage of homicide victims that were victims of intimate femicide. The decline in the rate of intimate femicide, even if slight, has been linked to the increased availability of resources, assistance and choices for women, and to their enhanced socio-economic status (Nicolaidis, Curry, Ulrich, Sharps, McFarlane, Campbell, 2003).

The majority of these studies seek to establish the rate and incidence of intimate femicide, and emerge from North America, the United Kingdom, and to a lesser extent Australia and Israel (Mouzos, 1999; Landau & Rolef, 2001). Some of the studies identify risk factors associated with femicide, and these factors will be discussed more thoroughly later in this chapter. In addition, some writers have attempted to develop theoretical frameworks in order to better understand and explain the phenomenon of intimate femicide, and these theories will also be briefly reviewed in this chapter.

Other than southern Africa, the only literature emerging from a developing nation is Adinkrah's 1999 study on spousal homicide in Fiji, which explored the influence of factors such as sexual jealousy and infidelity which were found to be linked to the killings. Other writers have begun to explore how femicide manifests within specific cultural settings. Skilbeck (2001) examines femicide in Algeria where women are offered little legal protection, requiring permission from their husbands for most things, making domestic violence and femicide easier for men to commit. However, he does not examine the phenomenon of intimate femicide as a specific form of gendered violence. Similarly, the issue of female infanticide in China has been linked to domestic violence against adult women and intimate femicide (Hom, 2001). In India, bride burning is reported to be common, particularly in the slums and urban areas (Kelkar, 2002).

### 2.3 Southern African studies

While there is a range of literature focusing on different aspects of violence against women in the Southern African region, again there are few studies exploring intimate femicide as a specific phenomenon. In 1992, Graser published a pilot study which analyzed newspaper articles dealing with family murders between 1983 and 1985. In this study the category of “*family murder*” included cases of intimate femicide where the perpetrator committed suicide after the incident. He found these cases to be generally unplanned murders, motivated by jealousy, anger, possessiveness or resentment, as opposed to extended-family murders which were characterized by motivations of guilt, worthlessness, fear of suffering and inadequacy.

Vetten’s 1996 study focused specifically on intimate femicide, drawing data from inquest records and newspaper reports. This study was the first to reveal explicit statistics for intimate femicide in South Africa, and concluded that in Gauteng a woman is killed by an intimate partner every six days, and drew attention again to the fact that women are at greater risk from their partners than from strangers. The study also found that women with the highest risk of femicide were those who were estranged, separated or divorced, or those whose partners were policemen (Vetten, 1996).

Rude (1999) studied 150 cases of intimate femicide, and killings by male family members, in Zambia over a 23 year period. Her study found that 82% of the murders were perpetrated by husbands, boyfriends or ex-partners. She also drew attention to the fact that perpetrators were drawn from all classes of Zambian society, and ranged in age from 21 to 71 years of age. She hypothesized that the deviation from gender role expectations by Zambian women was a major risk factor for violence in intimate relationships, as it appeared to elicit hatred and rage in the perpetrators. Watts, Osam and Win (2001) drew together studies from Botswana, South Africa, Swaziland, Zambia and Zimbabwe. They demonstrated that the broad features of femicide in these countries are similar, in that between 40 and 60% are perpetrated by partners or previous partners. They also found that many of the intimate femicides were preceded by a history of partner violence, and that this violence, and the femicide were associated with the male perpetrator’s desire for power and control over their women.

The study conducted by Mathews et al. in 2004 was the first to establish a reliable incidence rate for intimate femicide in South Africa, and located it as the highest in the world. The study also provided some indication of the profiles of perpetrator and victim in the South African setting. Perpetrators were found to be between the ages of 30 and 39 years old, and most had been using alcohol prior to the murder. The study also found that women appear to be most at risk when they try to end relationship. Amongst the victims, 16% were sexually assaulted before being murdered, 20% of perpetrators used a firearm, most of which were legally owned. The study confirmed that intimate femicide most often takes place in the home, and mostly occurs over a weekend and that 14% of intimate femicides in South Africa are witnessed by children.

## **2.4 Overview of theoretical perspectives**

The phenomenon of intimate femicide is only one aspect of the greater phenomenon of intimate partner violence, differing only in the intensity and degree of violence perpetrated.

Accordingly, to determine why men kill those with whom they are intimate, use can be made of the writing and research which examines why men are violent to their intimate partners. The 1970's feminist movement argued emphatically against a consideration of violence per se in intimate partner violence, emphasizing that it was in essence a gendered event (Dobash & Dobash, 1992). Domestic violence is not an act of random family violence, but is perpetrated predominantly by a man on a woman (Boonzaaier, 2005). Accordingly, violence between intimate partners is a unique phenomenon and needs to be understood separately from other forms of violence (Avakame, 1998).

It is beyond the scope of this thesis to provide an exhaustive examination of all the theories which have been put forward to make sense of male perpetrated intimate partner violence. However, an overview of four main explanatory systems will be provided: essentialist theories, individual psychological factors, social learning theory and a feminist analysis.

### **2.4.1. Essentialist theories**

Essentialist theories view male aggression as an innate instinct or genetic predisposition, on the basis of men being more obviously and visibly aggressive. Historically, aggression has been

considered to derive from innate tendencies which are universal across our species; even Freud attributed aggression to a powerful internal death wish held by all human beings. Modern science combines these long-standing assumptions that men are somehow programmed for violence with current advances in brain anatomy and neurochemistry. These fields of study centralize brain dysfunction, chemical and hormonal functioning as producing lasting neurobiological changes that in turn contribute to the terror, fear, rage and violence in response to the threat of abandonment (Radford, 2004).

Similarly drive theory stresses the innate adaptive reaction to specific stimuli (Geen, 1990). As opposed to locating the problem of violence and aggression inside the individual, drive theories view aggression as a result of external conditions which arouse a motive to harm or injure others. The best known drive theory – the *frustration-aggression hypothesis* – held that frustration was the inevitable and only cause of aggression (Baron & Byrne, 2000). While this theory has been subsequently discredited for its reductionist assertions, there are other explanations of male violence in the home which fall into the broader category of drive theory. Stress Theory understands male domestic violence as a response to increasing stress, exploitation and pressure which men may experience outside of the home – at work or in other relationships (Straus, 1990). Drive theories underpin a common understanding of intimate femicide, and one which is readily described by perpetrators and accepted by the courts – the notion of a loss of control as a result of external stimuli, such as provocation.

However, these explanations provide a generalized description of an internal instinct to which all men are subject. This somewhat oversimplified position fails to address the vast range of within-sex differences: why do some men use violence and some do not? The same criticism can be applied to its generalization across different societies, traditions and customs. While essentialist theories explore an aspect of male aggression, they tend to underplay the central role of culture in human development. Criticisms of an essentialist approach associate its claims that biology sits at the root of violent male behaviour with an individualization of the problem of femicide (Radford, 2004). Other aspects of an individualized understanding are discussed next.

### **2.4.2. Individual psychological factors**

This approach positions the unique personality or pathology of a perpetrator of intimate femicide as being central to understanding why he killed his partner, and focuses on psychological traits, personality development and childhood histories of perpetrators. Focusing closely on the perpetrator's functioning and behaviour may reveal symptoms of depression, poor impulse control, addiction or mania, or indicate a personality disorder featuring issues around narcissism, dependency, control, jealousy or abandonment. The cause of these disorders may be either psychological or biological, but both explanations locate the problem within the perpetrator, and centralize the "*diagnosis*" or the "*pathology*" as the problematic issue. The research has revealed that men who are violent towards their partners tended to demonstrate insecure attachment styles, and that they tended to be more hostile, angry and aggressive (Boonzaaier, 2005).

While this approach may illuminate understanding in a few cases, it tends to de-contextualize the violence by focusing only on the factors in the specific case. This attention to individual factors is commonly utilized by both the media and the law. By its very nature the legal case-by-case approach individualizes violence: courts respond only to the matter before them, and then again to a single violent event of femicide. Similarly, the media tend to rely on two main stereotypes in their portrayal of the perpetrator: the villain, or the misunderstood "ordinary dad". News reports are generally voyeuristic, and dwell on any "*soap opera*" angle to boost a possible angle to reinforce the "*crime of passion*" position (Radford, 2004).

While this approach may offer some insight into a limited number of specific cases, it does not address the issue on a systemic level. It also fails to account for why some men suffering from the same problems do not act out violently. The approach also removes and isolates each occurrence of intimate femicide thereby avoiding the need to understand the issue as being a widespread and common phenomenon. Gelles and Cornell (1990) have claimed that while a consideration of individual factors may explain a few cases of intimate femicide, these amount to less than 10% of violent cases.

### ***2.4.3. Social Learning theory***

Social learning theory moves away from an understanding of aggression being biologically based to understanding it as a learned behaviour. Bandura (1977) first introduced the notion that behaviours are learned through mimicking the behaviour of significant care-givers in the environment. The basic premise is that boys observe domestic violence in their families of origin, and then acquire aggression and violence as both an attitude and a behaviour in their own personal relationships.

This moves away from the reductionism of the essentialist arguments. While the social learning approach acknowledges that nature provides capacity for violence, it positions the social world as determining the degree to which that capacity is actualized (Geen, 1990). This approach tempers the sometimes simplistic linear assertions of the essentialist position. Radford (2004) points out that even in the burgeoning brain sciences, steps have been taken towards moderating the claims made in the field: it is not that science can seek out and treat the dangerously femicidal and violent prone male, but rather that genetic, neurophysiologic and neurochemical factors, combined with upbringing and social and environmental variables can create within an individual a propensity towards violent behaviour.

Recent studies support social learning as an important perspective in marital violence (Mihalic & Elliott, 1997). International studies have found associations between growing up in a violent home and subsequent use of violence in intimate relationships (Kesner, Julian & McKenry, 1997). In South Africa, Abrahams, Jewkes, Hoffman and Laubsher (2002) conducted a study amongst male Cape Town municipal workers and found that those who perpetrated intimate partner violence were more likely to have been beaten by caregivers as children, or to have witnessed the abuse of their mothers.

In addition to modeled behaviour, social learning theory also draws attention to the broader aspects of socialization: the cultural and material rewards for aggressive behaviour, particularly in cultures which value machismo, and the role of the media in normalizing male violence and creating a sense that it is appropriate (Lorber, 1994). Perhaps most importantly, social learning emphasizes sex role theory in terms of which particular cultural beliefs and behaviours deemed

appropriate for males and females are inculcated into children as they grow up. Children mimic their gender role models, and while girls are rewarded for feminine behaviour, boys are rewarded for aggressive behaviour. Accordingly, boys come to associate male aggression with a sense of manliness.

Social learning theory provides a valuable insight into the possibility of repeated violence where perpetrators were either the victims or the witnesses of violence as children. However, it does not account for those cases where there was no early experience of violence, or where responses to violence in the home may have been different. Its reliance on sex role theory is also a strength, introducing the aspect of gender roles, but it does not explore the aspect of societal power attached to genders, which will be discussed in the following section.

#### **2.4.4. Feminist theory**

Feminist theory considers femicide to be the end point of a continuum of violence against women. As such it must be examined and understood through the lens of gender and power which is used to examine all acts of gender-based violence. The starting point is to recognize that women experience a different kind of violence to men, and that a central issue in all femicides is that women are assaulted and killed *because* they are women (Kelly, 1988). Locating femicide within the continuum of sexual violence against women prevents an atomized understanding of this phenomenon as a number of isolated, discrete or disconnected incidents (Caputi & Russell, 1992).

Male sexual violence has been identified as a defining characteristic of patriarchal societies (Kelly, 1988). Radford (1992) argues that sexual violence should be viewed broadly as an aspect of the male desire for power, dominance and control, thereby transcending specific debates around discrete legal categorizations, or around whether men are primarily motivated by aggression or sexual satisfaction. Locating femicide within the broader context of male sexual violence against women, allows it to be linked to other aspects of dominance and control around which many women's lives are structured: rape, harassment, verbal abuse, sexist language, child abuse, physical and emotional battery, stalking, genital mutilation, gorenography. A feminist analysis sees sexual violence as a tool for patriarchal control.

Cultural histories are littered with examples of violence against women: foot-binding, genital mutilation, witch-hunting, widow sacrifice, the Punch and Judy show. It is the latter example that illustrates a powerful assumption which allows violence against women to be normalized in intimate relationships: the belief that women are the property of their husbands or male partners. The law and religion support this assumption, thereby providing both legitimacy and acceptability to male control and domination of women (Wilson & Daly, 1992). The notion of a wife as the property of her husband permeates traditional understandings of marriage and family, and allows an uncontested provision of authority to the husband in the household.

Until recently, the South African legal system protected a husband's position as "head of the family", and a wife was unable to lay charges of rape against him, and our common law also recognized a right of reasonable chastisement by a man over his wife (Hahlo, 1985). While the notion of marriage as ownership of women is reflected in aspects such as name changes, and being "*given away*" at the altar, is also reflected in more brutish customs. The commonly used term "*rule of thumb*" refers to the judicial ruling in English law that a husband was entitled to use a stick no thicker than his thumb to chastise his wife (Edwards, in Wilson and Daly, 1992). Currently, our common law still includes legal actions for "*loss of consortium*" or "*alienation of affection*" which provide redress for a husband whose wife has been unfaithful, positioning a husband as having a proprietorial right over his wife and her sexuality. These legal principles mirror the entrenched patriarchal ideology that women are the sexual property of men, and that men can own, control and avenge this property in same way that our law allows one to shoot a trespasser one's land. Dobash and Dobash (1980) proposed that a man's use of violence towards his wife was a direct expression of his authority and power in the home and in society.

A further aspect of the male ownership of intimate partners, is the assumption (again reinforced by law and religion) that what happens in the family is private, therefore allowing intimate partner violence to go unseen and unchallenged. In many countries, law enforcement agencies are notorious for considering domestic violence to be a "private" matter, and failing to intervene (Wilson & Daly, 1992). Similarly, for many years courts have resisted intervening in domestic issues, reinforcing and perpetuating the notion that the home was a man's domain in order where he has discretion to deal with household problems in private. Dawson (2003)

traces how a legacy of patriarchal legal norms has given rise to what she describes as the “*household-threshold hypothesis*” in the attitude to and treatment of violence between partners. She shows that male perpetrators of domestic violence who assault or kill their wives, receive more lenient treatment if the couple lived together at the time of the incident, than if it occurs after they have become estranged. She argues that this lenient treatment is underpinned by the assumptions about a wife being the property of her husband, and how, accordingly, police, social services and the law are more sympathetic to a woman attacked by a stranger than a woman attacked by a husband or partner.

Wilson and Daly (1988) have written extensively on the role of masculinity in homicide, and particularly in intimate femicide. They also focus on the notion that women become the property of their male partners. They use the term “*sexual proprietariness*” to describe the tendency of men to consider women’s sexuality and reproductive capacity as their own property (Wilson & Daly, 1992). Sexual proprietariness is a significant symptom of patriarchal ideology, and as such appears to be a powerful trigger in activating lethal violence in intimate relationships. In attempting to identify possible “*motives*” for intimate femicides, certain broad areas have been described: these are (a) a suspicion of infidelity by the perpetrator, (b) the termination of the relationship by the victim, and (c) a sense from the perpetrator that he is unable to control the victim (Wilson & Daly, 1993). All of these are associated with notions of ownership and control

Sexual ownership and control has long been associated with intimate femicide. Although early studies into what was then termed “*domestic homicide*” did not distinguish between male and female perpetrators, these studies found that sexual proprietariness was central as a motivating factor. In 1955, a USA study examined motivation during interviews of 31 people who had killed their spouses, and found that sexual jealousy featured in 81% of the cases (Wilson & Daly, 1992). Stout (1992) writes of a 1978 study in the USA found that male sexual jealousy and sexual proprietariness were so dominant as motives in intimate homicides and attempted homicides that it introduced the notion of the “*Spousal Homicide Syndrome*”.

Although there are cross-cultural and historical variations in the manifestations of masculine ownership of women, Wilson and Daly (1993b) describe fatal and nonfatal violence as the

ubiquitous outcome of marital conflict over female autonomy across all cultures. A feminist understanding of domestic violence links it with notions of male superiority and female subservience which are deeply and firmly imbedded into society. These factors locate intimate femicide within the areas of gender and power, and distinguish these murders from other homicides (Dawson & Gartner, 1998).

More recent feminist accounts have begun to consider that violence against women, both sub-lethal and lethal violence takes place in a particular context. The way that the abuse and violence unfolds in each case, and the way each party makes meaning of that violence is determined not only by *patriarchal* oppression, but also by other forms of oppression relating to race, class, ability status, economic status, religion or sexuality. As Boonzaaier (2005) points out, it is not always possible to separate these multiple forms of oppression, as they often intersect and are mutually re-enforcing. In an effort to acknowledge the differences and complexities of different manifestations of gender-based violence, feminist approaches have moved from a single focus on gender inequity, patriarchy and male domination, to what Yllö and Bograd (1998) describes as an integrated, multi-systemic feminist perspective that recognizes the saliency of multiple sites of power and oppression.

## **2.5 Accounts of violence by perpetrators**

In addition to the theoretical approaches to understanding gender-based violence, and intimate femicide in particular, it is instructive to consider how the perpetrators themselves talk about and account for being violent towards their partners. While these accounts reflect the particular contexts and nuances of their identities and relationships, they also to some extent reflect certain social and cultural assumptions and practices. An understanding of these assumptions and practices and their impact on how men make sense of and understand their violent behaviour may help in developing our understanding of intimate femicide. Men are likely to interpret their perpetration of violence against intimate partners in different ways and an understanding of these acts can only be achieved by locating them within the broader context of attendant behaviour and gendered relationships in which they occur.

Macdougall (2000) interviewed five men convicted of intimate femicide in the Eastern Cape. Her findings revealed their inability or unwillingness to take responsibility for their crime, and their ongoing tendency to project blame for the murder onto the victim's actions or behaviour. She found that even after conviction and sentence for intimate femicide, the perpetrators continued to justify and rationalize what they had done, and failed to show remorse, or acknowledge the negative impact of the murder on their children.

Polk (1994) considered a large number of case-studies of men who had committed homicide in New South Wales, Australia, and focused separately on 96 cases of intimate femicides. He sought to examine the themes that ran through this particular scenario of masculine violence, looking at both perpetrators' accounts and supporting documentation. His findings emphasize the overriding theme of masculine control of women, and the use of violence to that end. Forming part of the broad category of control, were common instances of the perpetrator's being possessive of the victim, exceedingly jealous, or desiring to assert domination over the victim. Polk found that in a number of cases the levels of jealousy and control were so extreme that the perpetrators appeared to be almost delusional in their readiness to believe in their partner's infidelities.

Polk's research also established that separation, the threat of separation, or the perpetrator's inability to accept separation were central to many of the cases. While some of the scenarios represented an increasing pattern of rage against a backdrop of marital discord, physical violence and previous threats of separation by the victim, others were characterized by a sudden flaring up of violence as a result of a challenge by the victim to the perpetrators' dominance and control.

Boonzaaier (2005) interviewed men and women regarding the violence which took place in their relationships. While the violence in these cases had not exacerbated into cases of intimate femicide, it is interesting to note some of her findings. She reports how perpetrators described using violence as a means to exert authority and control over their partners. Many perpetrators explained their violence as an accumulation of frustration, attributing the core problem to some external factor such as the behaviour of the partner, or what he perceived as her failure to perform her duties according to traditional gender roles.

In Boonzaaier's study (2005) men spoke of their right to discipline their partners, especially when they felt the women were provoking them. This reference to provocation is a powerful example of how responsibility is shifted from the male perpetrator to the female victim. This shift of responsibility is not only made by the perpetrators in their accounts, but also in the legal system. Wilson and Daly (1992) point out the English common law accepts that the "reasonable man" cannot be held responsible for lethal violence following the revelation of infidelity, as this is considered to be extreme provocation on the part of the victim. This assumption forms part of an ongoing tendency to scrutinize the behaviour or pathology of a female victim of intimate violence, rather than focusing on the behaviour of the male perpetrator. The notion of women inciting violence also perpetuate patriarchal stereotypes about men and women: the "out-of-control" man, and the "provocative" woman (Rude, 1999).

A consideration of perpetrator's accounts of violence in intimate relationships provides a opportunity to assess various contextual factors, and weigh these against the developing theory for understanding the phenomenon. In addition to exploring the perpetrator's depiction of *why* intimate femicide happens, it is also important to examine the *where*, *when* and *how* in order to build a composite picture of how intimate femicide manifests in South Africa. The existing literature of some of these factors is explored below.

## 2.6 Factors associated with intimate femicide

A large proportion of the international literature has focused on various factors which have emerged from a number of surveillance studies as being associated with intimate femicide. While these factors are largely descriptive, some researchers have made attempts to integrate them into the developing theory addressing why these murders take place. They have also been used to develop risk profiles. A recent USA study has developed some of the most important data for risk analysis to date: Campbell et al (2003) made use of a multisite case-control design, obtaining information from women who had survived an attempted intimate femicide, and from proxy informants of women killed by intimate partners. The controls consisted of women who had reported intimate partner violence.

In addition to providing insight into other circumstantial aspects associated with intimate femicide, research into these aspects assist in the identification of risk factors associated with heightened risk of lethal violence from intimate partners. This is a crucial link between research and policy development; the development of clear risk factors will facilitate earlier and more appropriate intervention with a view to lowering the high rate of intimate femicide. Nicolaidis (2003) found that 50% of survivors of attempted intimate femicide had not realized that their lives had been in danger, and had been surprised by the attack. On the other hand, Campbell (2004) found that 50% of women, particularly estranged women, accurately perceive their risk of lethal violence. She recommends that a woman's perception of high risk should be considered as more important than any other factor in assessing the dangerousness of a given situation.

### ***2.6.1 Socio-demographic factors: perpetrator***

Various studies have attempted to establish a profile of a perpetrator of intimate femicide perpetrator; however, it is not possible to obtain a definitive profile as each study is limited by its sample, and results cannot be generalized to different contexts. In the multi-city USA sample in the Campbell et al. study (2003), the average age of the perpetrator was 37 years. In this sample, 57% of perpetrators were high school graduates and 45% were employed. In another article from the same study, Campbell et al (2003) identify the strongest socio demographic risk factor as the perpetrator's lack of employment; significantly, this study found that unemployment appeared to underlie increased risks often attributed to race or ethnicity in previous studies.

Other studies have included questions relating to family background. Stout (1993) interviewed 23 perpetrators and found that family background did not indicate levels of childhood abuse, but did show some family dysfunction. While this is only one study, its results present a significant challenge for theories which seek to understand intimate femicide from a social learning perspective; while some perpetrators reported experiencing family violence as children, the majority reported stable family backgrounds. Other demographic factors such as parental status have been explored. Campbell et al (2003) identified that where the victim's child from a previous relationship lived in the home, there was an increased risk of intimate

femicide. The complexities and potential conflicts associated with children from previous relationships, and the previous relationships themselves, frame this finding. However, a more general finding by Frye and Wilt (2001) was that living with children under the age of 18 years was a strong predictor for intimate femicide.

Various studies have examined the role of substance abuse by the perpetrator, predominantly the use or abuse of alcohol. The recorded rates of either severe or “problem” drinking on the part of the perpetrator range from 36 % (Campbell, 1995) to 70% (Smith, Moracco & Butts, 1998). Despite the differing rates in each study, what is clear is that alcohol use has emerged as a significant factor associated with lethal and near lethal violence (Sharps, Campbell, Campbell, Gary & Webster, 2001). This research by Sharps et al. (2001) found that problematic drinking by the perpetrator was associated with an eight fold increase in partner abuse, and a two fold increase in femicide or attempted femicide; where drinking is more severe, the risk for lethal violence increases.

### **2.6.2 Relationship factors**

When considering the various aspects of the relationship between the perpetrator and the victim, attention has been given to profiling the demographics of victims. Female victims have ranged in age from 16 to 91 years, but in most studies almost half the victims were under the age of 30 (Lewandowski et al., 2004; Stout, 1991; Wilson and Daly, 1993a). In the Campbell et al. (2003) preliminary findings the average age of the victim was 35 years, with 73% being high school graduates and 68% employed. In marriage relationships, younger women are more at risk, while in common-law relationships it is middle-aged women who are more at risk (Wilson and Daly, 1993a). On the whole, it is younger women who are most at risk; some writers have speculated that this may be related to men perceiving a greater risk of infidelity or desertion in younger partners (Wilson and Daly, 1993a). A large disparity in the ages of partners appears to increase the risk of intimate femicide (Wilson and Daly, 1993a; Smith, Moracco & Butts, 1998).

The nature of the relationship between the parties has been found to be relevant. Relationship state refers to whether partners in a relationship were together, separated or estranged; it refers

to the *currency* of the relationship. In the Campbell et al. (2003) findings 68% of intimate femicides involved current partners, and 32% involved estranged partners; in 46% of cases there had been at least one separation in the past year. This is important because it has been consistently found that estrangement increases the risk of lethal violence (Campbell et al, 2003; Nicolaidis et al., 2003; Dawson & Gartner, 1998; Stout, 1993). This scenario of the estranged wife hunted down and murdered is a common theme in film and literature, as well as police files (Wilson and Daly, 1992). This feature of intimate femicide resonates with theories which position male ownership and control of women as central to an understanding of why it takes place.

The Campbell et al. (2003) preliminary findings identify the strongest pre-incident risk factor to be where the victim has left for another partner or has asked her partner (the perpetrator) to leave. Campbell et al. (2003) found that estranged women accurately perceive their risk of violence from their ex-partners, although they do underestimate the severity of the violence. Wilson and Daly (1993a) found that the risk of intimate femicide is especially high in the first two months; their findings were that 47% of separated wives were killed during the first two months of separation, and that 91% were killed within a year of separation.

Dawson and Gartner (1998) established certain differences in intimate femicides of estranged partners as opposed to those in current relationships; an estranged perpetrator is significantly younger, more likely to use a gun and to kill the victim in a public place in front of witnesses, and is more likely to commit suicide after the killing. Both estranged perpetrators and victims are less likely to have used alcohol or drugs prior to the murder. These findings support previous research that found that estranged killing appeared more pre-meditated than those in current relationships (Rapaport, in Dawson & Gartner, 1998).

In addition to the relative health of a relationship, it appears that its legal status is also significant. Accordingly, relationship status refers to whether the perpetrator and victim were married, in a common-law relationship, or dating. Wilson and Daly (1993a) found a far greater rate of intimate femicide in common-law relationships than in marriage or dating relationships. Dawson and Gartner (1998) identified women in common-law relationships as tending to be younger, with less education and income, less likely to have children, and more likely to have

problems with alcohol; they point out that these factors are themselves associated with higher risks of violence. Perpetrators of intimate femicide in common-law relationships are more likely than married perpetrators to be unemployed, to have used drugs and alcohol before the killing, and more likely to sexually assault the victim prior to the murder (Dawson & Gartner, 1998).

Wilson and Daly (1993a) speculate that intimate femicide is more prevalent in common-law relationships because the perpetrators are less secure in the proprietary claims over their partners than those in marriages. Dawson and Gartner (1998) reflect instead on what they refer to as the “double dose” of problems in common-law relationships: the frustrations of a dating relationship, and the conflicts experienced by married couples. Both hypotheses are based on increased levels of stress and anxiety in the perpetrator. However, further findings in the Dawson and Gartner study – that perpetrators who are not married are more likely to sexually assault the victim – seem to suggest the possibility of perpetrators in common-law relationships enacting a form of sexual control and dominance over the victims.

It appears that the majority of intimate femicides take place in the context of a relationship already characterized by some level of interpersonal violence. Campbell et al. (2003) rank prior physical violence against the victim as the *primary* risk factor for intimate femicide. In their sample between 67% - 80% of victims were reported to have experienced physical abuse prior to the murder. Nicolaidis et al. (2003) conducted in depth interviews with 30 survivors of attempted intimate femicide, and found that while there was a wide range of intensity of previous violence, it was a ubiquitous aspect in all the relationships. This study also identified controlling behaviour as an additional risk factor, particularly when combined with violence, or threats of violence.

Campbell et al. (2003) have identified certain characteristics of intimate partner violence which are associated with an increased risk of intimate femicide: stalking, forced sex, abuse during pregnancy, strangulation and a pattern of escalating severity and frequency of violence. Lewandowski et al. (2004) estimate that 23% of the victims of intimate femicide had been beaten during pregnancy. Once again, this points to the fact that physical abuse and intimate

femicide are different aspects of the same problem and the cause of both lethal and non-lethal intimate violence are the same: possessiveness and sexual jealousy (Dobash and Dobash, 1992).

Stalking behaviour on the part of the perpetrator has been established as a risk factor for subsequent intimate femicide. McFarlane et al. (1999) established stalking as a definite correlate of lethal and near-lethal violence against women. McFarlane, Campbell & Watson (2002) examined stalking behaviour in the 12 months prior to actual femicide, to try and identify more specific behaviours associated with increased risk of lethality. They found that where the perpetrator followed or spied on the victim, she was twice as likely to be killed; where the perpetrator made threats to harm children if the victim left or did not return to the relationship were associated with a nine fold increase in risk. In the United Kingdom, attention to stalkers has revealed that the greatest danger of serious violence from stalkers is not from strangers or psychotics, but from non-psychotic ex-partners (Farnham, 2000). The preliminary findings in the Campbell et al. (2003) study found that stalking was a correlate of lethal and near-lethal violence against women, and when coupled with physical assault, is significantly associated with murder and attempted murder. The writers recommended that stalking must be considered a risk factor for both femicide and attempted femicide and abused women should be advised.

### ***2.6.3 Factors associated with the offence itself***

The most significant factor associated with the actual commission of the offence relate to the use of firearms. Approximately 67.9% of intimate femicides in the USA States are perpetrated using a firearm (Stout, 1993). Campbell et al. (2003) associated access to a gun with an increase in intimate femicide, and further established that the perpetrator's previous threat with a weapon amounted to a significant pre-incident risk factor. In the preliminary findings of the Campbell et al. (2003) study it was found that 83.2% of perpetrators owned a weapon.

There appears to be less attention paid to the perpetrator's behaviour after the offence, although there has been research into the rate of perpetrator suicides following the commission of an intimate femicide. It is estimated that approximately 9.4% of intimate femicide perpetrators commit suicide after the event (Dawson, 2005).

## 2.7 Femicide and the South African legal system

When considering the prosecution of intimate femicide in South Africa, it has been found that perpetrators tend to either plead not guilty on the basis of non-pathological criminal incapacity or insane automatism, or plead guilty but raise provocation relating most often to sexual infidelity to mitigate their sentences (Mills, 2001). However, it is reported that 70% of cases are perpetrators are acquitted because of a lack of evidence (Mathews et al., 2004). Where convictions are secured, sentencing tends to trivialize the act; the average sentence is ten years imprisonment.

Not only is the legal system appearing to fail in holding perpetrators to account for intimate femicide; it also appears to be failing to protect the victims. Research from the USA reveals that more than half of intimate femicide and attempted intimate femicide victims used the justice system in the twelve month period preceding the attempted murder or completed femicide (McFarlane, Campbell & Watson, 2001). The most frequent use of the justice system in this study was to report stalking behaviour by the perpetrator. It is not known what percentage of intimate femicide victims in South Africa have engaged with the legal system prior to their murder. Their most likely engagement would be to rely on a protection order in terms of the Domestic Violence Act (Act 116 of 1998). This legislation also requires police officials at the scene of a domestic violence incident to assist the victim, which may include arranging accommodation in a shelter or medical treatment, in addition to explaining available options to the victim. However, the functioning of this legislation is severely hampered by resource constraints, and it is questionable to what extent its provisions provide any protection to women suffering from domestic violence (Artz, 2001).

## 2.8 Conclusion

This chapter has tracked the increasing awareness of intimate femicide, both locally and internationally. Existing research has revealed that South Africa has the highest rate of intimate femicide in the world (Mathews et al., 2004). It appears that intimate femicide represents the end point of a continuum of domestic violence, and there appears to be growing interest and research into all aspects of intimate partner violence. In addition to determining that rates of

intimate femicide, the literature has begun to explore tentative theories around why it happens. These theories are linked to those addressing male violence and aggression more generally.

In South Africa, intimate femicide takes place in a context of high levels of crime and violence. However, international research has shown that as a phenomenon it is unrelated to rates of violent crime generally, and is not improved by increased numbers of police officers (Grana, 2001). I have made an argument for the necessity of using a feminist theory to understand intimate femicide. Other theories fail to address the issue on the vast systemic scale on which it presents itself. It is crucial that intimate femicide be understood as a systemic issue, with its roots and antecedents deeply embedded in prevailing assumptions and attitudes regarding men, women and power.

The chapter examined what current research has found regarding perpetrator's accounts and understandings of their crimes, as this will be an aspect of the current study. It also reviewed the various factors that the existing literature has found to be associated with intimate femicide. This goes some way to providing a context for these crimes, and also informs the focus for the data collection process.

## CHAPTER THREE

# METHODOLOGY

### 3.1 Introduction

This study was a retrospective exploration and descriptive analysis of data obtained from the clinical files of 24 perpetrators of intimate homicide who were referred to the Forensic Unit of Valkenberg for observation between January 2000 and December 2005. In this chapter I will discuss the research paradigm in more detail and provide an overview of the theoretical framework which informed both the process of the research, and the project as a whole. Thereafter I will set out the research design and methodology, and comment on the reliability and validity of the data, and the limitations of the study. Finally, I will set out how the results were generated and analyzed.

### 3.2 Research paradigm

This thesis is an exploration of archival data. It seeks to describe certain aspects of what has been recorded in the clinical files of a sample of perpetrators who have been under psychiatric observation at Valkenberg. These aspects include the characteristics of the perpetrators themselves, their relationships with the victim, features of the actual incident, and the perpetrators' accounts of and attitudes to the intimate femicide. While the primary objective of the thesis is to describe the sample, the patterns and themes which emerged from the data will be analyzed and discussed with a view to developing tentative theories on why intimate femicide takes place, and relating these themes and patterns to the literature which has been developed on the subject to date.

Surveillance studies have been crucial in establishing the vast number of intimate femicides which take place in South Africa. In addition to the alarming rate of incidence, these studies have established the “*who*”, “*when*”, “*where*” and “*how*” of intimate femicide in our country. While some contextual information is obtained in surveillance studies, a more detailed and nuanced exploration and description of these contexts is useful in amplifying what is already known. The relevant clinical files in the Valkenberg archives contain detailed and accessible

information regarding a range of situational factors associated with each intimate femicide. They enable both quantitative and qualitative aspects to be explored, allowing a more textured depiction of intimate femicide to be put forward. By using a wider lens, incorporating both context and prior history, it becomes possible to identify significant factors that may have been important in contributing to the perpetrator's behaviour at the time of the murder. Rubin and Babbie (2005) point out that exploratory studies rarely provide satisfactory answers in their area of research as they only hint at the answers. This research does not set out to answer questions, but to provide some tentative ideas around the formulation of possible "whys" of intimate femicide.

The clinical files contain a range of information encompassing both quantitative and qualitative categories; on one hand there is categorical information regarding the perpetrator, the relationship with the victim and the offence itself; on the other hand, the files contain written notes taken from the perpetrator's account of the femicide, in addition to previous statements and statements from witnesses to the offence. As one of the goals of this study is to provide a description of the sample, both quantitative and qualitative information were included and considered. Both data components are useful, and elicit different descriptive aspects according to their different emphases.

Quantitative data enabled the description of the sample in terms of statistics within each category: for example the ages of the perpetrators, whether there was a history of domestic violence, and the perpetrators' behaviour immediately after the offence. Qualitative data in the form of the perpetrator's account of both the femicide and events preceding it was subjected to a thematic analysis. In addition, four specific cases are described in full, in order to counterbalance the focus on patterns and similarities with an alternate focus on the uniqueness of each story. Both the quantitative and qualitative data combine to build a composite description of this particular sample of intimate femicide, including the perpetrators, his relationship with the victim, the crime itself, and his description of and attitude to the femicide.

This research is envisaged as a component of a larger, long-term prospective study of perpetrators of femicide. Significant factors found to be associated with intimate femicide in the results will be used to inform the investigations which take place in the prospective study,

which will involve investigating new cases referred to the unit following a charge of homicide of an intimate partner. These factors will be investigated further together with any variables that are known to be associated with them.

### **3.3 Theoretical underpinnings**

The conceptualization of this research project, the research process itself, and the researcher's own understanding have been informed by the principles of feminist methodology. In the interests of both transparency regarding research methodology, and an enrichment of the results and discussion I would like to set out the main tenets of this theoretical framework, and elaborate on its relevance.

Gergen (2001) points out that there is no essential feminist research methodology, but that it is the approach to and the aims and objectives of a research project which makes it feminist.

Gergen (2001) goes on to explore five key areas of the field of traditional psychology which a feminist approach tackles and attempts to modify:

- The notion that the scientific researcher is unbiased and uninvolved, and remains so;
- The suggestion that general laws of human behaviour are accessed through experimental methods;
- The tenet that research is value free;
- The emphasis on objectivity; and
- The assertion that the 'scientific' methods and truths are superior to other forms of knowledge.

A feminist methodology subverts these assumptions by placing an emphasis on the research relationship as a form of relatedness, and acknowledging that value implications enter into almost every phase of the research process. To address this, the researcher must be reflexive. Reinharz (1992) quotes the political scientist Naomi Black as stating that feminist research "insists on the value of subjectivity and personal experience (p. 3)." By acknowledging one's own subjectivity it becomes possible to in turn reflect upon how it shapes the research process.

In addition to addressing shortcomings in the traditional approach of social science, a key tenet of feminist research is that it is concerned with gender as its central focus. While this may appear simplistic, it constitutes a major challenge to the intrinsic male-centred focus of traditional psychology. This 'male-as-norm' bias operates both in terms of the subjects it seeks to give attention to, and in the way it makes universal generalizations based on a study of men's experience, and results in women being either ignored or misrepresented. Spender (1983) draws attention to one of the core insights of feminist methodology that there is no one objective method which leads to the production of knowledge, and its important premise that the experience of all human beings is valid.

Harding (1987) explores the three main epistemological strands of feminism which have emerged in response to the traditional paradigms: feminist standpoint theories, feminist postmodernism and feminist empiricism. Feminist standpoint theory argues for the uncovering of women's experiences which have been invisible and distorted, and values qualitative methods which explore women's lived realities (Gergen, 2001). However, this approach has been criticized for the flattening of differences amongst women, and "universalizing" what is often the experience of white, heterosexual, middle-class, educated and able-bodied women (Gergen, 2001). These differences in women's experiences are central to feminist postmodernism which defies any notion of an essential women's experience. Postmodernism is concerned with deconstructing all accepted meanings and categories, including that of "woman."

Feminist empiricism maintains that the problem lies not so much with the existing research methodologies, but with inattention to and marginalization of women's experiences (Reinharz, 1992). This position is less concerned with favouring qualitative approaches, and places value on quantitative research, as long as gender as a variable is not ignored in the analysis, and that the research results are not interpreted to the advantage of men (Gergen, 2001). This feminist empiricism has been subject to much criticism for retaining a positivistic research paradigm and for continuing to support the logic and values of traditional science, which are seen to reflect an androcentric bias (Harding, 1994). This criticism highlights what has become the gendered split between qualitative and quantitative methodologies, with the former being considered the terrain of democratic feminist research, and the latter the preserve of 'malestream' methods

(Oakley, 1998). However, Oakley (1998) argues convincingly for an emancipatory approach to research which is not impeded by having to retain this gendered split. She proposes “dissolving the dualism of quantitative and qualitative methods and adopting a feminist empiricist approach which is more likely to promote policy-relevant research ‘for’ women” (p. 708).

It is almost an irony in this research that a feminist methodology that entreats the researcher to pay attention to the formerly ignored women’s experiences is employed on a subject matter in which the women’s voices are completely and permanently removed. However, the absence of gender as a variable in the sample is illustrative of its absence in the broader subject under review: the victims of intimate femicide are dead and are unable to speak for themselves. By approaching the subject matter with a feminist mindset and by listening to the stories with a feminist ear it is hoped that the findings will contribute a small step towards the promotion of policy relevant to keeping these women’s voices alive in order that they may be heard.

### **3.4 Research design and methodology**

#### ***3.4.1 The research setting***

The research was based on the contents of a number of archival clinical files of men accused of murdering their intimate partners, and who had been referred for psychiatric observation to the Forensic Unit of Valkenberg. In terms of the Criminal Procedure Act (Act 51 of 1977), a court may commit an accused to a mental hospital for an enquiry into whether mental illness or defect renders him or her incapable of understanding the criminal proceedings them (section 77(1)), or whether mental illness or defect may have impacted on his or her criminal responsibility at the time of the offence (section 78(2)). Valkenberg is the designated institution for any such enquiries emanating from courts in the Western Cape and in the Northern Cape.

Referrals are commonly made in cases where the investigating officer, prosecutor or defence attorney suspect any kind of mental illness or defect which may impact on a perpetrator’s ability to appreciate the wrongfulness of their actions or to act in accordance with that appreciation. In some cases, the perpetrators formally claim ‘*non-pathological incapacity*’ asserting a lack of responsibility for his actions because external stressors were so severe that

he suffered an '*emotional storm*' that resulted in his loss of control. When this forms part of a not-guilty plea, a referral is often made to request an enquiry into this claim. The referral requires an enquiry and a report from the institution to which the person is committed, which must include a diagnosis of any mental condition, and a finding as to either the culpability or triability of the person referred (section 79(4)).

A referral is made for the period of a maximum of 30 days at a time. It is the practice at Valkenberg to keep those perpetrators referred for observation pursuant to a murder charge for the full 30 days<sup>1</sup>. The court making the referral will forward relevant documentation related to the offence, including the charge sheet, any existing statements or pleas made by the perpetrator, any witness statements, and any medical information regarding the perpetrator's mental health. Should the perpetrator be found fit to stand trial he will be referred back to court for prosecution; should he be found not to be fit to stand trial, he will be declared a state patient, and will be detained at Valkenberg Hospital for an indefinite period.

### 3.4.2 *Sample*

The study made use of purposive non-probability sampling focusing on data obtained from 24 clinical files of men referred for observation to Valkenberg having committed intimate femicide during the period 2000 to 2005. This sampling approach is often used in exploratory studies where the purpose of the research is to collect as much data as possible (Yin, 1993). The sample was limited to those cases in which the perpetrator was found to be criminally responsible and triable. There were three cases that were excluded on the basis that the perpetrator had been found to be lacking criminally responsibility and had been made state patients

Hospital folders are opened manually on admission to Valkenberg for the 30-day observation period. In addition to the accompanying documentation from the referring court which is stored in the folder, there is administrative information dealing with the personal particulars of the

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<sup>1</sup> Personal communication. Associate Professor S K Kaliski, Head of the Forensic Unit, Valkenberg Hospital (April 7, 2006).

patient<sup>2</sup>, and a standard form completed by the medical doctor performing the physical examination on admission. Thereafter all attendances on the patient by clinicians are reflected in hand-written notes in the patient's folder. There is a separate section where nursing staff make their notes. The majority of the background and contextual information regarding the perpetrator and the femicide is obtained during an initial interview with the patient, which is conducted by either a registrar psychiatrist or an intern psychologist. This follows the standard headings for psychiatric history taking, and includes identifying data, psychiatric history, previous forensic history, medical history, substance use, family history, personal history, psycho-sexual development, personality, mental status examination, and a differential diagnosis. In this forensic setting, a further two aspects are included: a summary of court proceedings and allegations against the patient, and the patient's account of the alleged offence.

In considering archival research, Hill (1993) highlights the need for the researcher to pay careful attention to cultural and material residue of the institutional processes, as archival projects are generally embedded in long-standing institutional patterns and practices. This is particularly relevant to the data contained in the hospital files of a forensic ward of a psychiatric hospital. Swartz (2005) points out that clinical records from psychiatric hospitals exist in the matrix of an institution with the power to detain and limit care; this inherent power is increasingly manifest in the context of an observation to determine criminal capacity in behalf of the court. The various types of documentation in the patient files, which formed the subject of analysis for this research, represents information which has already been powerfully shaped and framed by others.

Hill (1993) uses the concept of "sedimentation" to describe the general process of how data finds itself to be archival material. He writes:

When researchers open a box of archive materials, the particular concrete set of items in that box is the end product of an involved sedimentation process. The "sediment" in archives results directly from people defining certain materials – and not others – as "worth keeping" in archival situations (p. 9).

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<sup>2</sup> For the period of the observation at Valkenberg Hospital, the perpetrator is referred to as a "patient". In the criminal justice system, he is referred to as an "accused".

This concept of “sedimentation” is a useful entry into understanding the various filters through which the information which has been stored or recorded in each hospital file, has been passed. The nature and the extent of information in each file has been shaped initially by the referring court, which exercises a level of discretion regarding which supporting documentation to include with the referral of a perpetrator to Valkenberg. While some referrals may include a full set of witness statements, police records, notes regarding court appearances to date, and a post-mortem report, others may consist of only a brief statement by the prosecutor.

The second layer of sedimentation relates to the information which is provided by the perpetrator himself while under observation; the serious criminal consequences of a murder charge may motivate him to frame the description of the femicide, and the events leading up to it, in a way which minimizes his culpability. His account is a re-presentation of the reality, and as such may contain particular emphases or omissions. Even more significant is the third level of sedimentation: the mediating role of the interviewer him or herself who, in the actual act of recording the information, may privilege certain aspects, and exclude others. Swartz (2005) talks of how in the process of taking a history, the patient’s voice is filtered through the knowledges of the clinician, and how the clinician in turn can only hear what their training enables them to hear. This is relevant to the various histories in the sample as some have been recorded by intern psychologists, and some by registrar psychiatrists and the different trainings will to some extent inform what information is privileged through being recorded, and what is left out. While different training may privilege what parts of verbally provided information is recorded, both intern psychologists and registrar psychiatrists tend to privilege clinical observation over patient perspectives (Swartz, 1995). The so-called patient accounts are therefore distillations or co-creations of the events by the history taker.

### **3.4.3. Reflexivity**

This research makes use of both quantitative and qualitative research methodologies. Qualitative methodology recognizes that the subjectivity of the researcher is intimately involved in research. Banister, Burman, Parker, Taylor and Tindall (1995) define qualitative research as “the interpretative study of a special issue or problem in which the researcher is central to the sense that is made”. Moreover, a feminist methodology requires an

acknowledgement of relatedness and value implications, and positions this acknowledgement as central tenet of its philosophy.

Historically, this involvement in the research process has been the basis of criticism of the qualitative approach; its apparent proneness to the unwanted effects of interference and bias has meant that it has been considered a less reliable and valid source of knowledge (Oakley, 1998). However, a qualitative paradigm allows the exploration of the interpretative component to research, and acknowledges that representations of the world are always mediated by those doing the representing. A strength of a qualitative methodology is its ability to reflect on subjectivity and bias in the process.

Thus researchers need to reflect on the nature of their involvement at all stages of the research process, and how their own values, experiences, interests, beliefs, political commitments and social identities have shaped its outcomes. These aspects of subjectivity guide not only the choice of topic, but also the formulation of the research question, the selection of the methodology, issues which are highlighted in the data collection and most importantly, the interpretation of the data.

Accordingly, in adopting a qualitative reflexive approach, my own positioning is relevant to attempt an understanding of any involvement and prior assumptions which may have shaped both my understanding of the phenomenon of intimate femicide, and the way I have approached the research investigation. Before beginning my studies in clinical psychology I worked as a public-interest lawyer, with a special interest in gender-rights. I locate myself as a feminist, and as a social activist, and these attitudes informed my choice of topic, and laid the foundation for a feminist theoretical understanding of the topic, and a feminist methodology.

Reflexivity is particularly pertinent to the process of analyzing archival records. I have already shown how the archival data has been mediated and co-created by the initial interviewer who left records in the clinical file. In this research process, the material is once again mediated through my own lens, and I am complicit in the construction of meanings from the material. In this way, the perpetrator's accounts are reduced to a *further* process of sedimentation. Because the data is archival, I am unable to refer back to the participants regarding the clarity and

credibility of their accounts; because I am the only researcher there is no inter-coder process to enhance reliability. In all these ways, it is impossible for my values and assumptions to remain outside of the subject matter.

My own positioning as a feminist and an activist also informs the process of data analysis. My analytical decisions have been informed by this positioning, and by the theoretical stance I have used to understand intimate femicide. As I read the accounts, I am “listening with a feminist ear”. This feminist positioning became more powerful as the research progressed, as I was consistently struck by the complete silence of the victim’s voices in the data, and this in turn strengthened my own commitment to the production of policy-relevant research ‘for’ women (Oakley, 1998).

#### ***3.4.4 Data collection***

Based upon pertinent issues raised in the literature reviewed for this thesis, and on the research protocol for the larger project, I developed categories for data capture. These categories are set out in “Annexure A”. I collected the data on a computer spreadsheet, and then divided the data into three broad areas: the perpetrator, the relationship with the victim, and the circumstances of the offence.

Associate Professor Sean Kaliski, who is the Head of the Forensic Unit at Valkenberg Hospital provided access to his electronic database on which he has recorded all patients who have been referred to the forensic unit for observation since 2000. This database includes various fields of information, including the relevant criminal charges giving rise to the observation and, where necessary, the relationship between the perpetrator and the victim. From this database, I identified 33 cases which recorded charges of murder where the victim was an intimate partner of the perpetrator. Professor Kaliski arranged for me to have official access to the files which I had identified. Despite assistance from all members of staff in the forensic unit and elsewhere, I struggled to actually locate some of the files in Valkenberg. This appears to be the result of a change in the numbering system of patient files which was introduced during 2004, together with some confusion as to where files are stored once a patient has been discharged from the hospital; while the majority of these are held in the Registry, I located some of the more recent

files at the Medical Records Department. I was able to locate 30 of the 33 identified cases: I was unable to locate three of the case files.

On a closer examination, three of these cases were revealed to be the killing of someone other than an intimate partner, and were excluded. A further three cases involved perpetrators who had been declared to be state patients, and were excluded on the basis that they were not criminally responsible at the time of committing the femicide. Accordingly, data was obtained from 24 case files. Given that the files contained inconsistent levels of thoroughness in terms of collateral information supplied by the court, and recorded by the history taker, not all categories in the data capture form were completed for each file. The perpetrator's account of the intimate femicide as recorded by the history taker, and in some cases, again by another clinician, was recorded verbatim from the file in each case. These accounts ranged from six written pages of notes, to some as little as a few paragraphs.

In all of the files the language of record is English. Where the perpetrators were not English speaking, they were either interviewed in Afrikaans, and the records made in English, or alternatively they were interviewed using a translator. In many of the cases, the collateral documentation was in Afrikaans.

#### ***3.4.5 Ethical considerations***

Professor Sean Kaliski is head of the forensic unit at Valkenberg Hospital, and is a member of the research team. He arranged for permission from the Medical Superintendent of Valkenberg to have access to the files.

The thesis will not mention either the names or other identifying details of the perpetrators, as this is required to protect not only their privacy, but also that of other family members and friends. While I initially recorded information under surname of each perpetrator, at the end of the data collection process, these surnames were deleted from my records. In this research, the perpetrators will be referred to by pseudonyms, and other identifying data will be sanitized. The pseudonyms replaced the surnames in all other records associated with data capture.

### 3.5 Data analysis

There are two entry points for the analysis of the data in this research project. The first is a quantitative approach using descriptive statistics which sets up the framework for the second approach: a more detailed, complex and contextual interpretation of the data using a qualitative approach. The initial analysis involved statistics, and drew out commonalities and averages relating to the perpetrator, the relationship between the perpetrator and the victim, and the femicide itself. The next two levels of analysis were more flexible and sensitive to the social context of intimate femicide. On one hand a thematic analysis was conducted on the accounts of the crimes provided by the perpetrators, and on the other four specific incidents were selected to be presented as case-studies of intimate femicide.

Basic statistics were used to describe the data and present it in a manageable form. The information within each category was analyzed and then expressed as percentages, in addition to means, medians or modes where applicable. In reporting these results, the number of cases in each category will precede the percentage, given that the sample is small ( $n=24$ ). This quantitative description provided a framework for the more textured analysis which follows.

The first of the qualitative methods involved a thematic analysis of an aspect of the data. The hand-written records of the accounts provided by the perpetrators were transcribed in full and verbatim from each of the 24 files. The purpose of the thematic approach was to attempt to give prominence to the meaning brought to the event by each perpetrator, and to track any patterns and similarities in this regard. Taylor and Bogdan (1984) defines a theme as a unit derived from a pattern, such as a conversation topic, a specific form of vocabulary, a recurring activity, an emotion, a particular meaning, or even folk sayings or proverbs.

The transcribed records were read and re-read, with attention being given to the particular characteristics of each account. The themes in the accounts began to emerge as soon as the data collection process began; some of these were prompted by the issues which had emerged from the literature review, while others surfaced in the actual process of analysis. The various themes expanded, contracted and changed during the process; however, after a thorough and recurrent reading of the accounts, I distilled certain key themes that described the essence of the

accounts. From there I drew out sections according to the various thematic categories and combined and linked this data under these headings. In this way, the thematic analysis brings together components or fragments of ideas or experiences, which often are meaningless when viewed alone (Leininger, 1985). Themes that emerge from the perpetrators accounts are pieced together to form a comprehensive picture of their collective experience.

Leininger (1985) points out that the choice of themes, and the coherence of the ideas presented together rests with the analyst who has rigorously studied how different ideas or components fit together in a meaningful way when linked together. My choice of themes was predominantly informed by the existing literature on intimate femicide, both in South Africa, and internationally. Having reviewed the various studies on the subject, I brought this information to my reading of the accounts, which enabled me to make inferences from the data. In addition to looking for patterns and similarities in themes and counter-themes, I also tried to draw out any contrasts, paradoxes and irregularities in the various accounts. The thematic categories form the basis of the headings of the second part of the results reported in next chapter.

The quotations used in the presentation of the thematic categories have been chosen as those best supporting a particular point or theme, or as a unique expression of a particular issue. I have presented them as the direct quotes of the perpetrators, as this is generally how they are recorded by the clinician taking the histories, and, although mediated and co-created by the history-taker, there appears to be some effort on the part of the to interviewers to retain the wording, sense and style of the account by the perpetrator. This appears to be the result of the requirements of the Maudsley history format which informs history taking at Valkenberg, which requires that the exact words of the patient be recorded when exploring the “presenting problem” (which in the Forensic Unit is the “Perpetrator’s account of the offence”). The quotes are attributed to a pseudonym which was allocated to each set of data from a particular file. Pseudonyms were chosen with a view to being consonant with each perpetrator’s cultural and linguistic background.

A further component of a qualitative approach, and the final section of the data-analysis, is the presentation of four case-studies. The inclusion of these specific cases was to attempt to provide a sequential and holistic description of a range of specific incidents of intimate

femicide. Yin (1993) points out that while a thematic analysis focuses on those aspects which can be extracted and made subject to a pattern, other aspects of a phenomenon are deeply embedded within its context. Intimate femicide cannot easily be separated from the context within which it occurs, and this context thus becomes a critical aspect of understanding the issue. Any methodology must be able to take into account these contexts. While the thematic analysis fragments the various aspects of the 24 accounts, the focus on four descriptive case-studies attempt to cover the scope and depth of the occurrences. The four cases were selected as illustrative of three main variables which I identified as significant across the sample: rural / urban setting, cause of death, and state of the relationship. The case studies in the results are an important aspect of the overall descriptive analysis, as they provide a more nuanced portrayal of the broader context of lethal intimate violence.

Case studies are detailed investigations of individuals, groups, institutions or other social units. The researcher conducting a case study attempts to analyze the variables relevant to the subject under study (Yin, 1993). The principle difference between case studies and other research studies is that the focus of attention is the individual case and not the whole population of cases. Most studies search for what is common and pervasive. However, in the case study, the focus may not be on generalization but on understanding the particulars of that case in its complexity. A case study focuses on a bounded system, usually under natural conditions, so that the system can be understood in its own habitat (Stake, 1995).

### **3.6 Conclusion**

This chapter sets out the broad paradigm of this research project, and the theory which underpins the methodology. It describes and clarifies the data collection and the three forms of analysis which seek to combine to provide a rounded and nuanced description of the phenomenon of intimate femicide in South Africa, using both quantitative and qualitative approaches. These descriptions are hoped to be part of the ground work for further local investigation and research into the subject.

## CHAPTER FOUR

# RESULTS

### 4.1 Introduction

This chapter presents the descriptive data obtained from the clinical files of 24 perpetrators of intimate femicide. The information was collected according to the headings set out in the previous chapter, and the same headings will be used to structure the presentation of the findings. There are three levels of description. Firstly, categorical information regarding various aspects of the intimate femicides will be set out; these aspects relate to the perpetrator, to his relationship with the victim, and to the offence itself. Thereafter, the chapter will introduce the predominant themes which emerged from an analysis of the accounts of the intimate femicide itself, as recorded from the perpetrators while under observation. Finally, the chapter will focus on four full case-studies of intimate femicide, based on the perpetrator's account and supporting documentation to provide comprehensive illustrative examples of the different contexts and circumstances.

Owing to the small sample size ( $n=24$ ), the results will be presented as reflected both the actual number of cases, together with a percentage of the total sample. Where the sample is smaller, as a result of the relevant information being unavailable, this will be reflected.

### 4.2 Categorical information

#### 4.2.1 Perpetrator

##### Demographics

The average age of perpetrators across all files ( $n=24$ ) was 37 yrs. The median age was 36 years with a range of 26 years to 70 years; the modal ages were 30, 31 and 38 years. In the sample thirteen (54%) of the perpetrators were recorded as coloured<sup>3</sup>, eight (33%) as black and three (13%) as white. Five (21%) of the perpetrators were English speaking, eleven (46%)

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<sup>3</sup> The use of the terms "coloured" and "black" do not denote any endorsement of their legitimacy, but are used because of their historical currency in how they shaped social inequality, and access to resources, both of which are issues which are relevant to the sample in this thesis.

were Afrikaans speaking, four (16.5%) were Xhosa speaking and four (16.5%) were Tswana speaking.

Ten (42%) of the perpetrators lived in a rural setting while fourteen (58%) lived in an urban setting. The average number of years of education was six (representing the level of Grade 6 or Standard 4). In the sample, three (13%) perpetrators had no formal education and only two (8%) had education at the tertiary level. The median level of education was eight years (Grade 8 or Standard 6) with a range of 0 to 16 years; there were seven (29%) perpetrators with a matric. In terms of employment, fifteen (63%) of the perpetrators were employed, while six (25%) were unemployed; there were three (12.5%) perpetrators who received some form of social security in the form of a state pension or a disability grant. Considering previous employment and training, thirteen (54%) perpetrators could be described as being skilled while eleven (46%) were unskilled. Notably, five (21%) of the perpetrators were members of either the South African Police Service or the South African Defence Force.

### **Marital and parental status**

In the sample twelve (50%) of the perpetrators were married at the time of the offence. Except for one case, the victims of married perpetrators were their wives; the exception was a perpetrator whose wife lived elsewhere, and who killed his extra-marital girlfriend. In the balance of the sample, eight (33%) perpetrators were single at the time of committing femicide (33%) and four (17%) were divorced.

In terms of parenthood, twenty (83%) of the perpetrators had fathered children with their victims. Two of the perpetrators also had children from previous relationships. Two (8%) perpetrators had children from previous relationships but no children with the victim, and two (8%) perpetrators reported having no children at all. Among those perpetrators who had fathered children with the victim, ten (50%) had only one child.

### **Personal history**

Each perpetrator provided certain information regarding their early personal history. The degree of detail provided in each file varied considerably. There were two perpetrators from whom no personal history was obtained, and the rest varied between a few paragraphs and

several pages. These statistics are derived from the twenty-two personal histories which were obtained.

In some of the personal histories information regarding family size and placement was obtained. Of the eighteen perpetrators who provided information in this regard, ten (55%) were firstborns. More than half the personal histories (fifteen cases or 68%) described unstable early home environments; these were characterized by factors such as conflict between the parents, domestic violence, early trauma, abandonment by the parents or early loss of one or both parents. More specifically, eight (36%) of histories recorded that either one or both parents drank excessively or were alcoholics. In nine (40%) of the histories it was recorded that perpetrators grew up in conditions of extreme poverty.

In eight cases (36.5%) it is expressly recorded that the perpetrator had reported having been a witness to physical abuse between their care-givers, and having been a victim of physical abuse by care-givers.

### **Relationship history**

Details regarding the perpetrator's previous relationships were inconsistently recorded. In four files there was no information in this regard. However, where this information was obtained from the perpetrator, the following was found (n=20)

- In seven cases (35%) the victim was the perpetrator's 1<sup>st</sup> partner
- In six cases (30%) the victim was the perpetrator's 2<sup>nd</sup> or 3<sup>rd</sup> partner
- In four cases (20%) the perpetrator reported having had multiple partners, either before the relationship with the victim and / or during the relationship with the victim.

### **Psychiatric history**

In seven cases reference is made to the perpetrators having a psychiatric history (29%). In four cases the perpetrators reported having suffered from depression in the past; two of these perpetrators had received no treatment for depression, one had been prescribed anti-depressant medication by his general practitioner, and one had been on anti-depressant medication *and* had

been hospitalized in a private clinic for three days. In only three cases (13%) was there a significant psychiatric history involving admission and treatment. The diagnoses in these cases were schizophrenia, psychosis associated with alcohol withdrawal and a case in which there was a general finding of psychotic symptoms.

### **History of substance abuse**

A significant number of perpetrators reported having had a history of substance abuse; eleven (46%) described a history of abuse or dependence on alcohol, and a further seven (29%) abuse or dependence on other substances and alcohol. Only two perpetrators reported obtaining treatment for substance abuse. Nine (37.5%) of perpetrators stated that substance use and abuse had had a negative impact on their relationship with the victim; in many cases it was reported to increase violence and aggression, in addition to being a source of conflict between the parties.

### **Criminal record**

In fourteen cases (59%) the perpetrators had prior arrests and twelve (50%) had prior convictions. In nine cases (38%) the perpetrator had prior convictions for violent offences with six perpetrators having had multiple convictions for violence. A broader consideration of previous aggression and violence which was not limited to prior convictions revealed that seventeen (71%) perpetrators had had problems associated with violence; this was based on reports of fights at work, or perpetrator's recounting instances of disciplinary action taken against them for aggression, fights with friends, domestic violence, or charges of assault or murder which did not result in conviction.

## ***4.2.2 Relationship with victim***

### **Victim demographics**

Information regarding the victim's demographics was less consistently recorded in the hospital files. However, there are some descriptive aspects which emerge. The average age of the victim was 35 years (n=14). The median age was 31 years, with a range from 17 years to 69 years. In terms of race thirteen (54%) of victims were coloured, eight (33.5%) were black and three (12.5%) were white (n=24). These racial demographics mirror those of the perpetrators exactly, and are indicative that there were no inter-racial relationships in the sample.

The highest level of education was recorded in only five cases: three victims had nursing diplomas, one was studying at college and one was a scholar in high school. In terms of employment ten (50%) of victims were employed, seven (35%) were unemployed, and the balance were either pensioners or students (n=20). The victim's socio-economic dependence on the perpetrator was either expressly stated, or inferred from the circumstances. The majority of the victims, thirteen (68.5%), were financially dependent on the perpetrator (n=19). In twenty cases (83%) the victim had children with the perpetrator, and two women (8%) also had children from previous relationships. In two cases (4%), the victims only had children from previous relationships, and no children with the perpetrator. In three cases (13%) the victim had no children. One victim was pregnant when she was murdered.

In fourteen cases (58%) the perpetrator reported that the victim had a history of substance abuse. In some cases this was corroborated by witness statements, but in the majority of cases it was reported only by the perpetrator. Any uncorroborated assertions made by the perpetrator regarding negative or problematic behaviour on the part of the victim should be treated with caution, as a thematic analysis of the perpetrator accounts revealed a common theme of a tendency to shift responsibility for the killing onto the victim. This will be more fully explored later in this chapter.

### **Nature of relationship**

Amongst the victims, eleven (46%) were married to and cohabiting with the perpetrator at the time of the offence. A further eight (33%) were cohabiting with the perpetrators, and were unmarried. Amongst this 33% were two perpetrators who were living with the victims while married to someone else. In one case (4%), the victim and the perpetrator were in a dating relationship, but were not living together. In four cases (17%), the victims were either ex-wives or ex-girlfriends of the perpetrator.

In terms of the state of the relationship, sixteen (67%) couples were in a relationship at the time of the murder, while in four cases (16.5%) the relationship had been terminated. A further four (16.5%) couples were in the process of separating or terminating at the time of the murder.

The average length of intimate relationship was ten years. The median length was seven years, with a range of three months to 34 years.

### **Perpetrator's description of relationship**

The perpetrator's description of his relationship with the victim was recorded in all but three files (n=21). In four cases (19%) the perpetrator described their relationship with the victim as being "good", without qualifying this blanket description in any way. A further four perpetrators (19%) used the broad term "conflictual" to describe their relationship with the victim, but did not elaborate any further on the nature, cause or extent of the conflict. Similarly, in a further three cases (14%) perpetrators referred only to "arguments" between themselves and the victim. In eight cases (38%) the perpetrators described conflict in the relationship, ascribing this conflict to problems caused solely by the victim. Once again, this is an aspect of shifting responsibility for the violence onto the victim, and this theme will be explored more fully below. In only two cases (10%) was there any express reference made by the perpetrator to prior physical violence having taken place in the relationship before the intimate femicide. This is in direct contrast to the information obtained under the next heading which deals with prior violence. The perpetrator's omission of information regarding physical violence in the relationship can be understood as a desire to present a profile lacking in culpability, given that the observation period is directly associated with their criminal trial.

### **History of domestic violence**

In 17 cases (71%) the files reveal a history of threats and physical violence to the victim from the perpetrator. This information was most often contained in witness statements.

The study had sought to obtain information on the use that victim's had made of health care facilities prior to the intimate femicide. This has been an aspect of international surveillance studies, predominantly motivated by a need to assess whether there have been missed opportunities to intervene to assist women at risk from intimate femicide. However, this level of detail regarding the victim was only recorded in seven files, and is almost entirely gleaned from witness statements, as opposed to the perpetrator's account of the relationship. In these seven cases, four victims were reported to have attended at hospitals or clinics for medical attention for injuries sustained as a result of an assault by the perpetrator, one victim was being

treated for breast cancer, one for depression, and one had received medical attention associated with her pregnancy.

### **Previous use of remedies by victim**

In five cases (21%) reference is made to the victim having at some time obtained a protection order against the perpetrator, either by the perpetrator directly, or in witness statements. It is possible in some cases that this detail was not recorded in the files. Unfortunately, given that it is a civil remedy, the application for or granting of a protection order is not reflected in a formal criminal record, so information could not be obtained from that source. In the cases where reference is made to the victim seeking a protection order, these orders were all in force at the time of the femicide. The length of time for the protection order had been in force ranged from one month to two years.

Only three perpetrators stated that protection orders were active against them at the time of the murder. In one case, the perpetrator expressed bewilderment at why the victim required the protection order, while the two others expressed that the protection order had caused them to feel increased anger towards the victim.

In eight cases (34%) there are descriptions drawn predominantly from witness statements of other forms of help-seeking behaviour on the part of victims. These include having called the police to intervene during prior conflict, laying assault charges against the perpetrator, discussing the problem with friends, family or a priest, and (as mentioned above) attempting to separate from the perpetrator.

### **Previous separations**

In nine cases (38%) it is recorded that the victim had previously separated from or left the perpetrator. While in seven cases (29%) it is expressly recorded that there had been no previous separations between the couple, in almost half the files information on the history of the relationship between the perpetrator and the victim is brief, and may not have captured this amount of detail. Where a separation is noted, the length of separation ranges from a few days to two years. In three cases, reasons for the past separations are recorded mostly from witness

statements and include physical abuse by the perpetrator, his drinking or infidelity, his controlling behaviour, and his lack of financial support for the victim.

### **Stalking**

There are four cases (17%) where there was a report that the perpetrator had stalked the victim before the femicide. This information was obtained from witness statements; no perpetrator admitted to stalking behaviour.

### **4.2.3 Circumstances of the offence**

#### **Time and place**

There were two files (8%) in which the date of the offence was not recorded. Based on the balance of the sample, thirteen (59%) of the femicides took place between Friday evening and Sunday evening, while nine (41%) took place during week days or nights.

Of the twenty four cases, nineteen (79%) of the intimate femicides took place in the victim's home. In fifteen (62.5%) cases this was the home shared by the victim and the perpetrator, and in four cases (17%) it was the victim's home which was not shared with the perpetrator at the time of the offence. These figures include two cases (8%) which took place directly in front of the common home. A further two (8%) femicides took place at the victim's place of work; both of these cases involved perpetrators who were separated or divorced from the victim. Other locations include the victim's mother's house, the house of a victim's new boyfriend, and a local tavern.

#### **Cause of death**

In eight cases (33%) the victims were shot dead, and five (21%) died as a result of stab wounds. In the balance of the sample, eleven (46%) of the victims died as a result of a physical assault; five women (21%) were assaulted with weapons such as a hammer, a stick or a crowbar, four (17%) were beaten without a weapon and two (8%) died of strangulation. Of all the cases, eleven (46%) of the women died from injuries to the head, either from gun shot wounds, or blunt trauma. There was only one case (4%) in which a post-mortem report confirmed that sexual intercourse had taken place at the time of the femicide. However, there were two further cases (8%) where the police reports and witness statements taken together strongly suggest that

either sexual intercourse or rape had taken place at the time of the femicide. In these cases the victim's bodies were found without clothing, and witness accounts indicate rape or sexual intercourse, however there were no post-mortem reports to confirm this. In one case (4%), the perpetrator was discovered having sexual intercourse with the victim's body.

### **Emotional setting**

Based on the descriptions of the femicide provided by the perpetrators and, where available, the statements of witnesses, it appears that thirteen (54%) of the femicides were preceded by an argument between the parties. In five cases (21%), the perpetrator statement and / or witness statements report that the murder took place without any preceding conflict between the parties. In six cases (25%) it is unclear whether there was any disagreement preceding the killing.

In eighteen (75%) cases the killings appear to have been impulsive in nature. However, this has been inferred from the accounts provided by the perpetrators during interviews into their mental state at the time of the murder, and impulsivity is legally more forgiving than premeditation. In six cases (25%), the accounts reveal a clearly premeditated act. Based on the perpetrator's statements, twenty one (88%) of them describe being angry with the victim at the time of the offence, while two (8%) indicated that they were not angry at the time of the murder; in one case (4%) it was unclear what the emotional state of the perpetrator was as he did not provide an account, and the witness statements do not reveal his emotional state. Once again, where this information is available, it is inferred from narratives provided by the perpetrator in a context where his culpability for the crime was being assessed, and there may have been conscious or unconscious motivation to present a version in which overwhelming anger led to a spontaneous act, rather than a rational, premeditated deed. In almost all cases, the perpetrators articulated some level of provocation. This will be explored more fully in the thematic analysis of the perpetrator's accounts of the offence below.

The information recorded under this heading reflects a statistical reduction of what are obviously more complex and nuanced events which, despite their categorization, unfold in different ways. More detailed and textured information will be provided in the sections exploring the emerging themes, and in the illustrative scenarios, which will provide a background for the issues which can only be broadly intimated here.

**Behaviour immediately after femicide**

In seven of the cases (29%) the perpetrators attempted to flee after killing the victim, while seventeen (71%) remained with the victim. Of those that remained with the victim, nine (38%) attempted to assist the victim by attending to her injuries, or offering mouth to mouth resuscitation or calling for medical assistance. In three (13%) cases, the perpetrator attempted to commit suicide following the murder. In ten cases (42%), the perpetrator expressed remorse immediately following the killing, while thirteen (54%) perpetrators expressed no sorrow or regret; in one case (4%) there was insufficient information to make this assessment.

**Witnesses**

In 11 cases (46%) the femicides were directly witnessed by other people. In eight cases (34%), the witnesses were the minor children of the victim and perpetrator, ranging in age between two years and ten years.

**Substances**

In nine cases (38%) the perpetrators had been drinking before the murder, and described themselves as “drunk”. In four cases (17%) the perpetrator reported having used alcohol earlier in the day, but described feeling sober and aware of their actions at the time of the offence. There were ten cases (42%) where the perpetrator had not used any substances immediately prior to the murder, or at any time on the day in question. There were no apparent instances of illicit drug use being associated with the offence in the sample. In one case, no information regarding substance use at the time of the offence was recorded.

There were only ten cases (42%) where there was reference to the victim’s use of substances at the time of the femicide, and in these cases, the victims were described as drinking prior to the murder. This information was provided in most cases by the perpetrator, and once again, this information should be treated with caution given the apparent propensity amongst the perpetrators to shift blame for the killings onto the victim. In only three cases do witness accounts confirm any drinking by the victim, and only two cases reflect positive post mortem reports for victim’s blood-alcohol level. However, post-mortem reports were not consistently available in the hospital files.

#### **4.2.4 Forensic assessment**

All of the files were those of men who had been charged with murder. In two of the cases (4%) there were additional charges: one included a charge of rape, and the other a charge of incitement to rape together with aggravated robbery. There were a range of reasons for referral to Valkenberg, and in some cases there was more than one basis for referral. These reasons included:

- History of psychiatric illness: five cases (20.8%)
- Claims of amnesia for the events around the femicide: four cases (16.5%)
- Reports from private mental health professionals expressing the view that the person was not criminally responsible at the time of committing the offence: four cases (16.5%)
- Plea of temporary non-pathological insanity: three cases (12.5%)
- Behaviour during the femicide: three cases (12.5%)
- Subsequent head injuries: (12.5%)
- Symptoms of depression: 2 cases (8.25%)
- History of epilepsy: 2 cases (8.25%)

During interviews while in the period of observation, twelve (50%) perpetrators admitted to killing the victims, while four (17%) denied the killings, and eight (33%) claimed complete amnesia for the relevant period. Amongst those perpetrators who admitted the killing, there were four cases (16.5%) where the perpetrator claimed amnesia, but was able to provide a detailed account of the events. When questioned on what their plea would be in court, eleven (46%) perpetrators stated they intended to plead not-guilty, ten (42%) intended to plead guilty, and three (12%) claimed to be undecided.

The sample for this study consisted of perpetrators who had been found to be criminally responsible, and were accordingly fit to stand trial. It is interesting to note that during the five year period from which the sample was drawn, there were only three cases in which a perpetrator was found to lack criminal responsibility. This reflects a percentage of 11% of

perpetrators who were found to lack criminal capacity during this period<sup>4</sup>. Amongst the sample cases, there was one perpetrator who had previously been found unfit to stand trial as a result of cognitive problems associated with a head injury sustained after the femicide, but subsequently had recovered sufficiently to be declared fit for trial following a further observation period one year later.

The Axis I diagnoses were recorded in all the clinical files according to the Diagnostic and Statistical Manual of Mental Disorders (DSM). These diagnoses were (n=24):

- No diagnosis made / no mental illness: 12 cases (50%)
- Malingering: eight cases (33.5%)
- Major depressive episode (in remission): two cases (8.5%)
- Personality change consequent to head injury: one case (4%)
- Mild dementia<sup>5</sup>: one case (4%)

In certain files, reference is made to DSM Axis II traits or possible diagnoses of personality disorders; however, there appears to be a reluctance to make diagnoses on Axis II<sup>6</sup>. Where these diagnoses have been recorded, they are as follows (n=12):

- Narcissistic personality disorder (21%)
- Anti-social personality disorder (16.5%)
- Dependant personality disorder (12.5%)

### 4.3 Themes emerging from the perpetrator accounts

A thematic analysis of the twenty four perpetrator accounts of the events leading up to the femicide, the femicide itself, and the relationship with the victim uncover a number of threads which run through the various scenarios. While accepting that each case is unique, it is useful and instructive to explore certain patterns and similarities which seem to exist amongst them.

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<sup>4</sup> This percentage was calculated with n=27, i.e. including the three additional cases of intimate femicide where the hospital files could not be located for the purposes of this study.

<sup>5</sup> The level of dementia in this case was not found to impact on the perpetrator's ability to stand trial.

<sup>6</sup> This reluctance to make diagnoses of patients under observation was confirmed to me in a personal communication by Dr Sean Kaliski, head of the Forensic Unit at Valkenberg

In the following section, an attempt will be made to acknowledge the singular nature of the various scenarios of intimate femicide by providing a selection of case-illustrations.

The most obvious of the themes and patterns have been drawn out, and will be organized and discussed under four broad headings: justification, minimization, dissociation and denial. The chosen themes reflect both the perpetrator's retrospective understanding of the intimate femicide, and their engagement with the offence at the time of being interviewed. While each theme is explored separately here, they are closely related to each other and were often interlinked in the perpetrators' accounts.

It is important to locate these accounts in a specific context which in turn informs their interpretation. They exist as written records of a re-presentation of the intimate femicide made by each perpetrator while under observation for criminal capacity. Given the serious legal consequences for a conviction of murder, many of the perpetrators may have been motivated to construct an account which would underplay his culpability and represent him in a positive light. While the accounts may contain both accurate information and / or re-creations of the relevant events, both reveal significant assumptions and beliefs.

#### ***4.3.1 Justification***

The overriding theme which emerged from the perpetrator's accounts was a sense of the intimate femicide being a justified act. The justification was generally framed by describing the killing as a legitimate response to some external factor, most often the behaviour of the victim herself. This has the effect of shifting responsibility onto the victim, either because she directly provoked the fatal response, or because she was generally deserving of it. Inherent in this theme is the perpetrator's sense of entitlement to control the victim.

There are three core assertions which encapsulate the main mechanisms of justification, and which are drawn from quotations, or translations of quotations, drawn from the accounts themselves.

**“It’s her fault; she pushed me over the edge” (Ben)**

In this construction of intimate femicide the fault is squarely placed on the victim, either for a specific action on her part, or because of her general behaviour or temperament. With very few exceptions, the accounts portrayed the victims as being in whole or in part responsible for what happened to them. In some cases the blame is for *concrete* behaviour on the part of the victim. Six of the accounts refer to acting in self-defence against an act of violence by the victim. While this version appears obviously unlikely given the history of the relationship provided by witness statements, in others some act by the victim may have operated as a trigger for extreme retaliation.

Sy het my van agter gegryp en ek het op die vloer geval. Terwyl ek op die vloer gele het, het sy my op die kop met iets geklap. (Schalk)

*(She grabbed me from behind and I fell onto the floor. While I was lying on the floor she hit me on the head with something).*

I knew she would shoot me because I’d taught her how to use the gun. (Tebogo)

She must have hit me on the forehead because I had blood on my eyebrow. (Paul)

Another aspect of blame for a concrete behaviour was the perception of some of the perpetrators that the victim was taking something belonging to him without permission, or stealing from him, and that he acted in response to this. Understandably, this theme appeared in contexts of unemployment and apparent poverty.

Ek het haar geld vroer in die dag gegee om vir my kos to koop, en sy het nie vir my die inkopies gegee nie. (Andile)

*(I gave her money earlier that day to buy food, and she didn’t give me the shopping).*

She took my money and I threatened her to give it back. I was very angry. (Sipho)

Other aspects of blame centered on the temperament or stability of the victim. Broad statements such as “she was crazy” (Paul), or “she was manipulative and suicidal” (Hannes), or “she’d always been too too emotional” (Leboga), were used to describe the victim, creating a

sense that it was the victim's overall mental health that was the core problem. In other accounts, it was some ongoing aspect of the victim's behaviour that carried the blame for eliciting a lethal response in the perpetrator.

Sy was vir baie lank so. Aan en aan. Sy moes die danger signs in my gesien. Sy was really pushing me too far. (Ben)

*(She was like that for a long time. On and on. She should have seen the danger signs in me. She was really pushing me too far)*

Sy het te veel geskel. Sy het altyd te veel geskel, en dit het altyd vir my kwaad gemaak. (Xola)  
*(She nagged me too much. She always nagged too much and it always made me angry)*

The allocation of blame to the victim by the perpetrator operates powerfully to reinforce the overall notion inherent in these accounts that he is not a violent person, and that aggression or killing are not in his nature.

I didn't want to kill her. I could never do something like that. (Roy)

**“I needed to show her who is boss” (Sipho)**

Another important theme to emerge was a sense of justified response to an act of disobedience or independence on the part of the victim. Fourteen of the accounts make reference to some behaviour which appears to threaten the authority of the perpetrator, and his need to re-establish control of the situation and the relationship. This perceived insubordination ranges from a refusal to cook dinner, to moving out of the common home and finding remunerative work outside of the home, to a proposed separation or divorce. This links to an overarching premise: the perpetrator's need to control the victim, and justifying the act of violence as achieving this necessary end. In some cases the violence is punitive, while in others the perpetrator is clear that he only meant to frighten the victim.

They had been arguing about money, then (victim) said she wanted a divorce. He reached into his belt for his gun. (Victim) asked “why?”, and he said “sommer net” (eyewitness account, Leboga)

Ek wou net vir haar 'n skrik gee. Ek het vir haar gedreig, en het die mes in my hand gehou en dit voor haar gesig gewaai... (Willem)

*(I just wanted to give her a fright. I threatened her and held the knife in my hand and waived it in front of her face ...)*

In addition to re-establishing authority over the victim for perceived disobedience, dominance and control also needed to be asserted in cases where the perpetrator felt he was unable to meet the victim's needs, thereby failing in his role as provider and protector. Four of the accounts describe the frustration associated with the victim's unmet demands.

Ek het alles gedoen, maar dit was nooit genoeg nie. Sy was nooit gelukkig nie. (Jan)

*(I did everything but it was never enough. She was never happy)*

She was someone you could never make happy. (Paul)

#### **“If I can't have her no-one can” (David)**

Another important way that blame is allocated to the victim is holding her responsible for arousing jealousy, and associated suspicions of infidelity. Eleven of the accounts refer to a suspicion that the victim was having a relationship with someone else, some offering bald statements, and others basing their suspicions on flimsy reasoning. In two cases where the perpetrators provided minimal and vague information, they both clearly articulated that they believed the victim was having an affair. In couples who were estranged, it was the victim's commencement of a new relationship which appears to be associated with the perpetrator's actions.

I met a man on the road who told me she was at another man's house sleeping with him.

(Tebogo)

I went to the hospital where she works and confronted her (his ex-wife)... I asked if she was having an affair and she said – yes what of it, he can take better care of me. (David)

In two cases the perpetrator provides an account of finding the victim engaged in sexual intercourse which provokes him into violence, which accounts are directly contradicted by witness statements which refer to the perpetrator's unfounded accusations of infidelity.

In addition to jealousy, the issue of perceived rejection is a significant factor. In eight cases the perpetrator perceives rejection, either because he is confronted by the victim's plans to separate, her failure to reconcile, or he interprets an action on her part as rejection.

### 4.3.2 *Minimization*

An interesting aspect which surfaced in the accounts is the tendency to minimize the violence against the victim, despite the fact that the violence was lethal. Seven of the accounts contain an admission that an assault took place, but its description is not commensurate with the violence associated with a murder, or with the post-mortem reports, where these are available.

Ek wou nie haar steek nie. Ek het teen haar geswaai en per ongeluk in die bors gesteek.  
(Willem)

*(I did not intend to stab her. I swung at her and accidentally stabbed her in the chest.)*

Ek het haar net saggies op die nek gedruk. Ek het nie vir haar gechoke nie. Ek kan nie verstaan waarom sy gesterf het nie. Ek wou nie haar doodmaak nie. (Roy)

*(I just pushed her softly on the neck. I didn't choke her. I can't understand why she died. I didn't want to kill her).*

The following version was contradicted by the post-mortem report which detailed extensive injuries to the face, head and upper body, consistent with blunt trauma and dragging along the ground.

Ek het haar twee keer in die gesig geslaan. Tie val sy op die grond teen die boomstomp. (Pieter)  
*(I hit her twice in the face. Then she fell on the ground against the tree stump)*

Six accounts refer to the victim bumping her head against a tree, or a wall, or the ground, and appear to be diluting their own violence. This facet of minimization overlaps with both

blaming external factors and denial. Similarly, four accounts refer to the perpetrator's actions as an attempt to restrain or calm the victim who has become hysterical.

Minimization was also a feature of the perpetrator's descriptions of the history of their relationships with the victims. Only two perpetrators admitted to previous physical violence, while supporting documentation attested to previous violence in seventeen (71%) of the twenty four cases. Seven of the perpetrators used euphemisms to describe their relationship, such as "conflictual" or that there were "arguments" or "differences", and a further eight attributed the cause of any conflict to the victim. What can be presumed to be incidences of previous violence (based on witness statements) were described as "having a few words" (Andrew).

### 4.3.3 Dissociation

The perpetrator's accounts frequently described a series of events, but failed to account for the actual killing. Often this took the form of partial or complete amnesia for the relevant events, or a description which appears to remove any form of agency from the perpetrator.

Ek weet nie hoe die mes in my hand gekom het nie. (Schalk)

*(I don't know how the knife got into my hands.)*

Ek het na my hand gekyk en daar was geweer daarin. Ek weet nie hoe dit daar gekom het nie.

(Hannes)

*(The next thing I knew there was a gunshot. I looked at my hand and there was a gun in it. I don't know how it got there.)*

Everything went black in front of my eyes. (Kagiso)

Dissociation also took the form of description of the fatal violence as a complete loss of control, and a corresponding lack of agency.

I was so overcome with anger that I lost it. (John)

I only intended to talk to her, not to shoot her. I just went into a blind rage. (David)

In the same way that allocating blame to the victim removes the responsibility from the perpetrator, dissociation allows the perpetrator to admit that the femicide took place, without having to engage with his own culpability, maintaining the fiction that violence and aggression are not part of his nature.

This is also achieved by locating the blame on alcohol consumption. Once again, this appears to be an attempt to reinforce the notion that the perpetrator himself is incapable of carrying out any aggressive acts, and locating the responsibility externally.

Dit was nie ek wat haar doodgemaak het nie. Dit was die wyn. (Tiaan)

*(I did not kill her. It was the wine)*

#### **4.3.4 Denial**

A further theme which was common in the perpetrator accounts is that of denial. Denial was evident in both cases where there was a complete denial that a femicide had taken place and in cases where the perpetrator's account was significantly at odds with witness accounts, suggesting that the perpetrator was not wholly truthful in his version.

Of those denying the femicide, two perpetrators gave accounts which provided a completely different version of the events; in one, it was claimed that the victim had committed suicide, and in the other, the perpetrator had discovered her dead body and called the police. Another two perpetrators provided blanket denials. One of these denials was in contrast not only to witness statements, but also to the perpetrator's written statement acknowledging the killing made the day after the femicide.

I don't remember anything, but I couldn't have done it. I couldn't have killed her. (Xola)

I loved her dearly. I cannot believe I would ever have killed my wife, even if I was drunk. I would never have shot my wife. (Thabo)

Denial also appears to operate in conjunction with minimization, in particular with reference to those versions which admit to the use of small amount of violence which is not commensurate

with either the injuries or the outcome. In nine cases the denial appears to be conscious, and forms part of an attempt to cover-up culpability at the time of the offence. In several police reports it was noted that it appeared that someone had attempted to clean up evidence of a struggle; in one case the police noted that the body of the victim had been wiped clean of blood before the police attended the scene.

Similarly, denial is also an aspect of the descriptions of the relationships with the victim.

Ons was saam vir 15 jaar. Dit was 'n goei verhouding. Daar was nooit enige probleme tussen ons. (Frans)

*We were together for 15 years. It was a good relationship. There were never any problems between us.*

My relationship with her was happy. I loved her despite the fact that she drank and had relationships with other men. (Tebogo)

#### 4.4 Illustrative case studies

The following four illustrative cases provide a counterbalance to the previous two sections: while the latter was organized in terms of overarching categories, these selected illustrations represent complete and sequential accounts in four scenarios of intimate femicide. In a sense, the generalizations of statistics and of thematic categories can be misleading and inadequate, as they fail to take into account the astonishing variations in the stories of intimate femicide. Similarly, the search for patterns also obscures the central violence of the offences. Case-specific accounts highlight and amplify the nature of the offence, and it is important that both the themes and the variations be heard.

Case-studies also allow the exploration of the broader context within which violence occurs. I chose the following four scenarios not only to demonstrate the vastly different contexts and unfoldings of intimate femicide, but also to represent three other variables which emerged as notable from the results. These are: rural / urban setting, cause of death, and state of relationship. The rural / urban divide is significant in South Africa, and particularly so in the context of domestic violence. The literature has shown that women in rural areas endure a

higher rate of domestic violence (Wood & Jewkes, 1998; Artz, 2001). I wanted the case-studies to reflect any differences in this context. Earlier figures representing how the victim was killed do not properly represent the aggression, and in some cases, the brutality of the murders. I think it is important that this is represented. Given the significant number of perpetrators employed in the police service, I included one of these cases. Finally, I wanted to explore the issue of the differing states of relationship, as the victim's leaving or threatening to leave the relationship has been identified as a clear risk factor for intimate femicide.

These illustrative accounts are based predominantly on the perpetrator's narratives as provided during the observation period at Valkenberg, augmented by the contents of witness statements where these were available.

#### **4.4.1 Andrew**

Andrew was referred to Valkenberg for observation in the middle of his murder trial when he claimed amnesia for the relevant details of his actions, having been confronted with a written statement by an eye-witness setting out his culpable actions in great detail. In addition to information obtained directly from Andrew during the observation, the file also contained a number of witness statements, a full post-mortem report on the victim, photographs taken by the police at the crime scene, and Andrew's formal not-guilty plea on the basis of amnesia.

Andrew was middle-class, English-speaking 31 year old man who lived in Cape Town. He had been married to his wife, Sandra, for 12 years, and they had two children: an 11 year old girl and a six year old boy. Andrew was employed as an electrician, and Sandra, who was 30 years old, was employed as a clerk. He described their relationship as "sometimes difficult" and reported that there were "arguments". According to witness statements Andrew regularly assaulted Sandra, and she had obtained a protection order against him on two occasions, one of which was current at the time of the murder. Andrew had recently returned to the common home having moved out for three months in an attempt to stop using mandrax.

The events took place on Christmas day. Andrew remembers drinking and smoking mandrax with a friend at lunch time, after which he went to sleep. He woke later in the afternoon, and

Sandra said she was going out to visit friends nearby. He reports being unhappy with this as he did not want her to leave the house. He described them as “having a few words”. Statements from family members whom Sandra visited that afternoon, described her as afraid to return home. She had told them about a recent assault by Andrew during which he had thrown her against a wall, and which had left her with a bruise on her face. One witness stated that they were used to her having bruises, and that they knew that she was assaulted regularly by Andrew. This witness statement also said that Sandra had tried to leave Andrew in the past, and had also previously laid assault charges against him.

According to Andrew, he woke up at 7pm to find Sandra not at home. He asked his son to go and find her. He describes Sandra as “slinking into the house” shortly after he awoke, and going to the bathroom to bath. He said that he could tell that she was drunk, and that they again “had a few words”. Thereafter, he reports that she had followed him to the kitchen where he had confronted her about the example she was setting to the children. He describes her as then becoming hysterical, and lying on the floor kicking and screaming. He helped her into the bath, but became angry when he saw a mark on her face, and assumed that someone else – a man - had hit her before she became home.

I saw the mark on her forehead, and I realized someone had hit her. I became angry because she must have been with other men. She was still hysterical, screaming and crying. I lost it, and I hit her with an open hand across her face. She bumped her head against the wall behind the bath.

Andrew goes on to describe how a friend arrived, and he left Sandra in the bathroom, and went outside to smoke mandrax with his friend.

Andrew and Sandra’s son was present throughout the evening, and was assisted in providing a statement which materially contradicts his father’s version. According to his statement, the son opened the door for his mother at 8pm. He describes how his father shouted at his mother and accusing her of sleeping with other men, before he began to hit her. He reports that there was a lot of blood on his mother, and in the kitchen, where the assault was taking place. His father instructed him to run a bath for his mother. After doing so, he saw his father place his mother in

the bath, where he continued to assault her and hold her head under the water. When his father's friend arrived, he left the bathroom, and instructed his son to clean the blood in the kitchen.

Andrew reported that he had assumed that Sandra had fallen asleep in the bath. After smoking mandrax, and while his friend was still there, he took her out of the bath, dried her, dressed her, and put her in their bed. His friend stated that he had seen her lying quietly in bed, and had assumed she was asleep. He remembers Andrew hugging his wife as she lay there. Andrew's son stated that Andrew had thrown his wife's bloody clothes into the bath, and had asked him to clean the bathroom. The following morning, Andrew reported that he noticed that she felt cold, and he realized that she was dead. He asked his son to pack a bag, and took him to stay with his grandparents for a few days. Andrew did not return home after dropping his son. He went to stay with a friend, and confessed to the murder 2 days later, at which stage the body was discovered.

Despite claiming amnesia for the relevant events, Andrew provided a detailed exculpatory version during his observation. His case stands out for what appears to be a conscious denial of the femicide in the form of a version which is completely inconsistent with that of his son who witnessed his actions. What is also striking is Andrew's need to control Sandra and her movements, and his suspicions of her infidelity. While it is clear that his relationship with Sandra had a long history of violence, he also appeared to deny this, despite the existence of evidence from a range of witnesses.

#### **4.4.2 Pieter**

Pieter was referred for observation on the basis of the excessive violence he used against the victim. In addition to the clinical notes in the hospital file, there was also a statement from the ambulance driver who initially attended at the crime scene, in addition to police statements. There was also a copy of the post-mortem report on the victim. There were no witnesses to the actual femicide. Pieter admitted to assaulting his wife, and intended to plead guilty to the charge of murder.

Pieter was a 36 year old Afrikaans speaking farm worker who had been married to his wife Christel for 15 years. She was 34 years old, and was dependent on Pieter financially. They had 2 children, and lived on the farm where they worked. Pieter described their relationship as conflictual, and admitted to having been regularly physically violent towards Christel over the years.

Pieter recalled having spent the Sunday afternoon with Christel in a nearby shebeen. They had spent the time drinking steadily, but had not eaten anything. By the time they left, he reports that they were both very drunk. As they walked home he recalls that they began to argue, each shouting and swearing at the other. He said that they had not fought in the shebeen, but had only begun fighting as they returned home. He could not remember what they had been fighting about.

Pieter recalls that as they neared the entrance to their house they were standing under some trees. He recalls that Christel attacked him first, and that he started hitting her with his fists. He recalls using both hands; he was unsure about whether he hit her body, but was certain that he had hit her on the right side of the head. He recalls her falling down and hitting her head on the tree stump:

Toe slaan ek haar met die vuiste. Ek het haar twee keer in die gesig geslaan. Toe val sy op die grond teen die boomstomp. Toe staan sy nie weer op nie.

*(Then I hit her with my fists. I hit her twice on the face. Then she fell to the ground against the tree stump. After that she didn't stand up again)*

When Christel didn't get up, Pieter tried to talk to her and lift her up, but recalls that she did not answer him. He then ran to the nearby ambulance depot, as he knew where it was and it was the closest place he thought of to get help. He accompanied the ambulance, to show them where Christel was lying.

The statement from the ambulance and police officials on the scene describe many obvious wounds on Christel's head and body. They report Pieter being on the scene, and that he admitted to assaulting her, but also stated that she hit her head on the tree as she fell down.

They also noted that it appeared that someone had attempted to wash the blood off her face before they arrived on the scene. The post-mortem report revealed extensive injuries to Christel's head, face, upper arms and upper body, consonant with extensive dragging and blunt trauma. It was the nature and extent of the injuries which was the basis for Pieter's referral to Valkenberg Hospital for observation.

Pieter's case is a further example of the theme of denial. During observation he repeatedly denied beating Christel as severely as the post-mortem report indicated. He also employed minimization to dilute his agency in the killing, and was suspected of attempting to remove evidence of his violence from Christel's body. This case appears to be an example of the impulsive use of lethal violence.

#### **4.4.3 Hannes**

Hannes was referred for observation on the basis of a report from a private psychologist who outlined his lack of culpability on the basis that he was "easily overwhelmed by emotions". The hospital file included a number of witness statements, including that of an eye-witness to the shooting.

Hannes was a 28 year old policeman, who had lived with his girlfriend, Susan, for eight years. They had a four year old daughter together. At the time of the murder, his relationship with Susan had not been going well, as there had been conflict between them for several months. Hannes states that one of the problems was the fact that Susan was pregnant, and that the pregnancy has come as a surprise to both of them. He said that Susan did not want the baby, and had blamed him for the pregnancy. He also reported that he was continually worried about the possibility of Susan being unfaithful to him; earlier in the relationship she had worked in a massage parlour, and he described her as being very attractive. He also described her being unstable and manipulative, and that she had been suicidal in the past. He stated that he felt that she was always in control of the relationship emotionally.

On the day of the femicide he had made arrangements with Susan to collect her from home and accompany her for a scan at the hospital. There had been a bomb-scare at work which had

delayed him, and had been very stressful for him. He was feeling anxious because he was late for the scan, and he met Susan as she was leaving the hospital. He describes her as being sulky and unresponsive, and assumed that she was upset because he had missed the appointment. He had borrowed a car from work, and gave her a lift home. He remembers that she had been crying in the car, and had refused to talk to him. When they reached their home, she got out of the car and went inside. He followed her, and once inside they began arguing. He reports that Susan was shouting at him, accusing him of infidelity, and of not caring for the baby. He said “Ek gaan nie na dit luister nie” (*I’m not going to listen to this*) and left the house. As he climbed into the car, he asked one of his neighbours who was walking past to go into the house and try and talk to Susan because she was upset.

He then began to drive away, but turned the car around, having decided to sort things out before he returned to work. As he climbed out of the car, Susan came out of the house and shouted to him that he could get his keys from the neighbours when he returned later, as she was intending to leave. He remembers shouting back at her but cannot remember what he said. He entered the house, and was followed by his neighbour. Susan had locked herself in the bathroom, and was shouting through the door at him. He told her to stop shouting and said he wanted to sort things out. He said that she was accusing him of infidelity and was becoming hysterical. He threatened to kick down the door, because he was worried that she would hurt herself, as several years previously she had locked herself in the bathroom and tried to commit suicide. He managed to break the door open. He said that he tried to reach out his hand to calm her.

Sy was baie ontstelt. Ek het my hand uitgesteek om haar te probeer kalmeer. Die volgende ding wat ek geweet het was daar ‘n geweskoot. Ek het na my hand gekyk en daar was ‘n geweer daarin. Ek weet nie hoe dit daar gekom het nie. Ek het net na haar gekyk, en daar was bloed orals oor haar gesig. Ek het haar naam oor en oor geroep, maar sy het nie vir my geantwoord nie.

*(She was very upset. I tried to reach out my hand to calm her. The next thing I knew there was a gunshot. I looked at my hand and there was a gun in it. I don’t know how it got there. I stared down at her and there was blood on her face. I kept saying her name, but she didn’t answer me.)*

He remembers taking his four year old daughter out of the bathroom where she had been throughout the conflict. His friend was standing outside the house, and stated that Hannes handed his daughter to him with a shocked expression on his face. He asked Hannes what was wrong, and he replied that he'd just shot Susan.

According to the neighbour who followed him inside, Hannes had been shouting at her through the door, and kept asking her to open the door, repeating that there was something he wanted to say to her. Once he had forced the door open, there was more arguing and shouting and they were both trying to hit each other. She tried to get between them and kept shouting at them to stop, as she was worried about their daughter getting in the way. She was trying to pray for them, when she heard a loud gunshot. She looked up at Hannes, who was standing still and looking shocked. Susan's knees buckled, and she fell backwards into the bath. She had been shot on the right side of her face.

The police officer who was called to the scene reported that Hannes has been sitting in the kitchen looking shocked. His eyes were bloodshot, and he was very emotional. He asked the police officer to take his gun, and handed it over with shaking hands. He said "Iets het gebeur met my meisie. Sy is in die badkamer" (*Something has happened with my girlfriend. She's in the bathroom*).

Although Hannes admitted murdering his girlfriend, he claimed amnesia for the relevant period. His case is a good example of how lethal violence appears to be triggered by a rejection on the part of the victim. He also uses victim-blaming, describing her as unstable and needing to be restrained for her own safety. Hannes dissociates from the moment of the killing itself, although he has excellent recall for all other aspects of the event. The femicide appears to be impulsive; he claims that he had not been violent towards Susan at any time prior to the femicide; also, he had immediate access to his weapon as he was in uniform at the time.

#### **4.4.3 Kagiso**

Kagiso was referred for observation as a result of his claiming partial amnesia for events in question, and because of a medical history of epilepsy which had been brought to the attention

of the court by his employer during one of his initial appearances. In addition to police statements and the post-mortem reports, there were also statements from witnesses, including an eye-witness to the stabbing. Kagiso reported that he intended to plead guilty to the charge of murder.

Kagiso was a farm labourer who had been married to Lesedi for 11 years. About a year before the femicide, Lesedi had moved out of the common home on the farm where he worked, and was living in a house which he had rented for her in the nearby town. The couple had two children who were attending school in the town, and were living with Lesedi. Kagiso described Lesedi as headstrong and difficult, and that he never knew how to please her. According to him the relationship was always conflictual, but had become increasingly so after she had left to live in town. Witness statements report that the couple argued often, but no-one had been aware of any violence between them at any stage.

He described how he had tried to help her by renting the house, and had lent money to buy her a car, but that she was not satisfied.

We had lots of problems already. She was always unhappy. I don't know why, but she was always unhappy with me. It had been like that for about a year.

After work on a Friday, Kagiso had gone into town to visit her. She was not at her house, and he describes how this had annoyed him, as she never seemed to be there when he visited. He had been feeling frustrated and angry with her, and they had been arguing over the last few weeks about how she spent her days walking around and socializing, rather than staying at home. He eventually found her at her mother's house.

He came into the kitchen where she was sitting and asked her to come home with him, but she refused. He reports that although he had been angry earlier, he had begun to beg her to come home with him. She continued to refuse his request, and said that she was planning to find work, so she did not need him any longer. He remembers feeling very angry at that point.

I was speaking nicely to her, but she was not speaking nicely to me. She swore and shouted and said that she didn't want to be with me anymore.

While she was shouting, Kagiso remembers going to the bakkie to fetch his knife. He recalls that he wanted to frighten her. When he returned to the kitchen with the knife, he said that she had begun to shout even more loudly at him. He remembers saying "I'm going to mess with you" before he started stabbing her. While he remembers everything leading up to event clearly, he claimed to have amnesia for the actual stabbing, stating that "everything went black in front of my eyes."

Witnesses describe Kagiso as arriving at his mother-in-law's house in a calm and relaxed state. They all report that an argument took place between him and Lesedi over whether or not she would return home with him, and that she had said that she wanted to find work to support herself and her children as Kagiso did not provide enough financial support for them. During the argument, most people left the room, but Lesedi's mother remained, and reports that Kagiso had suddenly pulled a knife from his jacket, and shouted "Now I'm going to mess with you". He pushed Lesedi onto the floor, sat on top of her and began stabbing her all over her body. Initially Lesedi cried out "What are you doing? Why are you hurting me like this?" Lesedi's mother tried to pull him off her, and someone came into the room and removed his two year old daughter.

The post-mortem report describes that Lesedi's body had more than 38 stab wounds, reflecting intense violence by Kagiso. While he claims he only intended to frighten her, he also describes his growing anger and frustration at her increasing independence, and it appears that this anger fuelled the severe and extreme nature of the murder. Once again, a further step towards the ending of the relationship appears to be associated with the use of lethal violence.

#### **4.5 Conclusion**

This chapter has attempted to describe the sample of twenty four perpetrators of intimate femicide using three entry points: figures and statistics regarding the sample group as a whole; emerging themes and patterns drawn from the accounts provided by the perpetrators and recorded in the files, and specific examples of unfolding intimate femicides. It is hoped that the

three levels of description have combined to provide a thorough and comprehensive portrayal of the sample, in addition to holding the ongoing tension between an examination of both the commonalities and differences in the various cases.

The following chapter will draw out and discuss some of the significant aspects of these findings, in addition to providing some comparisons between the features of this sample and samples in the existing literature. In the discussion section an attempt is made to link some of the themes emerging from the perpetrator accounts of femicide to findings and theoretical positions put forth in the literature, and to explore any similarities and differences in this regard.

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## CHAPTER FIVE

# DISCUSSION

### 5.1 Introduction

This chapter sets out to develop some of the commentary on the results which was commenced in the previous chapter, particularly around the descriptive categories. In the first section, issues arising from the descriptive data will be discussed more fully. The next section will consider briefly the themes which emerged from the thematic analysis as these have already been comprehensively covered in the previous chapter. Similarly, significant aspects arising from the case studies will be discussed. Attention will be given to how these results might work towards developing an understanding of intimate femicide in a systemic way. The chapter will also identify limitations of the study, and will end with recommendations.

### 5.2 Insights from describing the sample

An analysis of the various categories of information regarding the perpetrator, the relationship between the parties, and the offence itself provided a broad description of the sample. Although the sample was small, some of the information was striking, and I will draw attention to certain key issues from the description. The descriptive categories are also usefully compared to findings in other studies.

#### 5.2.1 Perpetrators

Information on the perpetrator was consistently recorded in the files, and there was more descriptive information available on the perpetrators than on their relationships and on the offence. This is clearly a function of the fact that the focus of the clinical file, and the observation process it documents, was on the perpetrator.

The most striking aspect of the sample is the high number of perpetrators with previous histories of violence. Given that this may have been *under*-reported by the perpetrators, it is remarkable that the records revealed that 38% of perpetrators had previous convictions associated with violence, with a further 33% reporting previous problems or consequences

associated with violence. Perhaps it is obvious that a history of the problematic use of violence would be associated with increased rates of lethal violence in intimate relationships. In the South African context, this may be indicative of the level to which violence has been normalized, and endorsed as a legitimate means of dispute resolution, both in the public and private sphere (Hamber, 1999).

Another significant characteristic of the sample was that five perpetrators (21% of the sample) were employees of either the South African Police Services or the South African Defence Force. This feature raises a number of issues. Most apparent is the perpetrators ready access to firearms; all of these cases involved the use of the service weapon. Perhaps less obviously are the factors of the stress and pressure placed on police and military personnel. However, literature from the USA has highlighted that stress associated with unemployment affects family violence less than occupational stress (Straus, 1990). Looking more closely at the nature of the occupation may provide a lead. Both the police services and the defence force are work cultures where stereotypical characteristics of masculinity are encouraged and reinforced, such as machismo, not demonstrating emotion and being in control of a situation. It may be that these values influence or re-enforce dynamics of dominance and control in intimate relationships, which, in combination with access to a weapon, raise the risk factors.

Turning to more general characteristics of the sample, there are some areas of interest. The wide range of ages of perpetrator in the sample is indicative of the ubiquitous nature of intimate femicide in South Africa. Although intimate femicide appears to be committed by young and old men, the modal ages show a prevalence of perpetrator's in their 30's. This echoes the findings of the Johannesburg based study by Mathews et al. (2004) in which most perpetrators were found to be between the ages of 30 and 39. Similarly the preliminary findings of the USA Campbell et al. (2003) study found the average age of the perpetrator to be 37 years.

One can only speculate on why this age group is so significantly represented. Perhaps it related to another risk factor which has been found in studies from the USA: the presence of young children in the household. A perplexingly broad finding by Frye and Wilt (2005) in a long-term study in New York City was that living with children under the age of 18 years was a strong predictor for intimate femicide. Perpetrators in their 30's may be likely to have young children.

In this sample twenty two (91%) of the perpetrators had children, most of them (20 perpetrators, or 83% of the sample). It is easier to understand how a stepchild in the house may increase conflict between partners: another USA study found that having a stepchild living in the house presented risk factor for intimate femicide (Campbell et al., 2003).

The racial profile of the sample corresponds broadly with the population of the Western Cape, from where most of the referrals were made. Of the 24 perpetrators all but five were referred from the Western Cape. Considering these nineteen cases, the following comparisons emerged between the sample and existing demographic data (Paauw, 2005): 63% coloured perpetrators in sample vs. 59% coloured people in province; 21% vs. 22% black; 15% vs. 18% white. The five additional referrals came from the Northern Cape, and consisted of four black Tswana speaking perpetrators and one coloured Afrikaans speaking perpetrator. This represents a significant overrepresentation of black residents of the Northern Cape, where the racial profile of the population is 51.6% coloured, 35.7% black and 12.4% white (Statistics SA, 2005). It is important to bear in mind that these referrals relate to those perpetrators of intimate femicide referred for psychiatric observation; the statistics for the rates of intimate femicide generally in the Northern Cape are not known.

A noteworthy aspect of the sample was that only 29% of perpetrators had completed high school. This is significant given the findings of USA studies on risk factors. Campbell et al. (2003) established that higher levels of education were protective against femicide in the USA. This appears to be relevant to South Africa. The Campbell et al. study (2003) identified the strongest socio demographic risk factor for intimate femicide to be the perpetrator's lack of employment; however, while this sample had lower levels of education, the levels of employment were higher than those found in the Campbell et al. study. The significance of closely examining issues of education and employment amongst the perpetrators is that the Campbell et al. (2003) study found that unemployment and education were the factors that appeared to underlie increased risks often attributed to race or ethnicity in previous studies. Despite the higher levels of education in this sample, this finding may be applicable to the South African context. In South Africa, race and socio-economic status remain inextricably linked; being black or coloured means having, in most cases, greater barriers to accessing

education and training. In addition, low socio-economic status is linked to unemployment, or to manual labour, which is poorly remunerated.

Aspects relating to the perpetrator's early history and background were the most sensitive to variations in capture. Although inconsistently recorded by interviewers, where this data was captured it showed high levels of unstable early environments, and significant levels of extreme poverty in early life. This is a variable that requires more thorough and reliable measurement before any conclusions can be drawn.

There were certain aspects of the sample which are interesting in their absence of association with the offence. While 75% of perpetrators reported a history of substance abuse (mostly alcohol), which corresponds to findings in the international studies (Sharps et al., 2004), there were relatively few cases which involved the use of substances at the time of the offence. In only 38% of cases did perpetrators attribute their behaviour to substance use, or refer to substance use in contextualizing the incident. In the related context of intimate partner violence, Kantor and Straus (1990) point out that while there is a link between alcohol use and intimate partner abuse, it must be remembered that 80% of the heavy drinkers in their year-long study did not use any violence against their wives at all. These writers go on to de-bunk what they term the popular notion of the "drunken bum" as the prototypical wife beater.

Another aspect of the sample which did not reveal a clear association was the rural / urban location. Unsurprisingly, the international literature does not address this demographic, but it is an important aspect of South African society. The higher rates of gender-based violence in rural areas has already been pointed out (Wood & Jewkes, 1998; Artz, 2001); however, this sample showed no significant emphasis. There may be popularly held assumptions associating intimate femicide with stressful city-living, or alternatively as a function of isolated rural life; which assumption is held depends on the location of the assumer, as both assumptions operate to distance the phenomenon as happening "out there". As with the range of ages of perpetrators, this sample shows the ubiquitous nature of intimate femicide in South Africa.

### ***5.2.2 Relationships between perpetrators and victims***

The files contained less consistently recorded information regarding the victims, and the relationships between the perpetrators and the victims. In some files there was detail on the relationship provided by witnesses' statements, while in others the only information came from the perpetrator. This was particularly relevant to the history of prior physical violence. Where detail did exist, it was predominantly drawn from witness statements, and not from the interview with the perpetrator. Accordingly, these results lack validity, as they probably do not reflect the full extent to which victims of domestic violence seek assistance.

In the sample twelve (50%) involved couples in married relationships. The next most common relationship status was a cohabiting relationships, followed by estranged couples. This differs from the sample in the Mathews et al. (2004) study which found that 80% of intimate femicides in South Africa involved cohabiting couples, or dating couples, while only 18.4% involved married couples. These differing results suggest that intimate femicide in South Africa may not be associated with the status of the relationship; however, that state of the relationship appears to be significant, and this will be discussed below.

A significant finding in this area was that women carry a high risk of lethal violence from their intimate partners when they are in the process of ending the relationship. This sample revealed that in eight cases (33%) the parties had either already terminated the relationship, or were in the process of separating or terminating at the time of the murder. This is consonant with Campbell et al. (2003) who found that 32% of intimate femicides involved estranged partners. The ending of a relationship or the threat of its end may evoke in the perpetrator a sense not only of diminished ownership of his partner, but also a lessening of his control over her. His use of violence may be an attempt to re-establish his sense of title and command, and may also have a punitive component in response to evidence of her independence.

An interesting aspect relating to the relationship history of the perpetrators was that just over half the perpetrators committed intimate femicides on a partner who was either their first or second relationship. This may also be associated with the tendency on the part of the perpetrators to be controlling in their relationships, having started a relationship with someone,

they are unable to end the relationship or move on from it, as they fear losing the sense of proprietariness over the woman. This sense of proprietariness appears to operate regardless of marital status; in this sample only twelve couples (50%) were married. More significant than the bonds of marriage are the bonds of socio-economic dependence. Although this information was inconsistently recorded, where it was noted or could be inferred from the circumstances (n=19), it was found that thirteen (68.5%) of the victims were in some way economically dependent on the perpetrator. This dependency is a substantial facet of women's subordination that often intersects with gender inequity, and which is important to consider in all forms of intimate partner violence.

There were no inter-racial relationships in the sample. Dawson (2003) tracks an interesting argument around the generally lenient attitude towards intimate femicide which is related to this aspect. She writes that because intimate relationships tend to be established from among people of the same social and racial backgrounds, intimate femicide is viewed as a horizontal crime, and violence which does not disturb the boundaries of race and class is less threatening to the dominant social order than violence which does cross these boundaries. This is a relevant argument for the South African context where categories of race and class still operate as powerful signifiers. It is possible to speculate that, in the same way that the O J Simpson trial in the USA created a media frenzy, an incident of intimate femicide in South Africa which involved a couple from different race groups, or someone of elevated status, would attract far more attention than one which did not. Grana (2001) describing the position in the United States comments that the media generally ignores femicide. Radford (1992) observes that the media in the United Kingdom consistently fail to represent intimate femicide as a serious crime. Vetten (1996) found that only 25% of femicides were reported in the South African press.

A significant percentage of the sample (seventeen cases or 71% of the sample) involved cases where there had been a history of threats or physical violence to the victim from the perpetrator. Studies in the USA have identified prior physical violence as being a ubiquitous aspect in relationships where intimate femicide takes place (Nicolaidis, 2003) and rank it as the primary risk factor for intimate femicide (Campbell et al., 2003). While information regarding the victim, and any action taken by her was not well recorded in this sample, it did reveal that in five cases (21%) there were protection orders against the perpetrator in force. However, as has

been pointed out by commentators in the field of intimate partner violence, the safeguarding of a protection order depends largely on the infrastructure in place to enforce the order, and this has been identified as a shortcoming in South Africa (Artz, 2001).

While prior incidence of the perpetrator stalking the victim has been identified as a significant risk factor for subsequent lethal violence in a range of other studies (Campbell et al., 2003; Farnham et al., 2000), this sample revealed that stalking had taken place in four cases (17%). However, as has already been pointed out, this sample relied heavily on the statements of the perpetrators themselves, the full extent of any stalking behaviour may not have been captured.

### ***5.2.3 The offence itself***

The most significant aspect emerging from the sample about the actual incident related to the use of weapons. While only eight (33%) victims were shot, the majority of these were shot by police or military personnel who had ready access to their service weapons. It may be speculated that in the other cases in the sample where the victim was assaulted with other weapons, such as knives or blunt objects (ten cases or 42%), that should the perpetrator have had access to a weapon, that he would have used this to kill the victim. The Mathews et al. study (2004) found that 20% of perpetrators had used guns, most of which were legally owned.

The sample showed that where the information was available (n=22) thirteen (59%) intimate femicides had taken place over the weekend. This is probably related to standard working patterns, where weekends are times when both parties are at home, maximizing the opportunity for communication, and the possibility of conflict. Further, nineteen (79%) of the murders took place in the victim's own home. These findings concur with the Mathews et al. (2004) study which confirmed that intimate femicide most often takes place in the home, and mostly occurs over a weekend. The tendency for intimate femicide to take place at home feeds powerfully into the notions of the home as being a man's private domain where he has discretion to deal with household problems as he sees fit. The fact that women are most at risk in their own home presents a powerful challenge to the accepted ideology of the family as a safe and nurturing unit.

In this sample eight of the cases (34%) involved minor children as witnesses to the killings. This is an alarming figure. The statistics in the USA are similar: in the Campbell et al. (2003) preliminary findings, 32% of cases children are exposed to the incident, and a further 43% discover their mother's body after the incident. It is not surprising that some writers have referred to children as the "silent victims" of this phenomenon (Robertson & Donaldson, 1997). Lewandowski et al. (2004) found that most child witnesses in the USA were under the age of ten at the time of the murder, and received little or no follow-up or intervention after the event. Robertson and Donaldson (1997) writing about the fate of child witnesses in South Africa also highlight the extreme disruptions in their lives: aside from the trauma of witnessing one parent killing another, they lose one if not two parents, and they are uprooted from their homes, and may be parted from their siblings. While the USA study indicates that only 60% of children received counseling after the event (Lewandowski et al., 2004), there are no figures for South Africa. However, given the paucity of public mental health services it is predicted that the figure would be much lower (Dawes & Donald, 2000).

In addition to presenting a significant risk in terms of longer term mental health, these children are probably at risk before the intimate femicide takes place. Studies have found that children witnessing violence between their parents are also likely victims of violence from the perpetrator. Straus and Smith (1990) found in a national survey of over 6000 families in USA, that 50% of the men who frequently assaulted their wives also frequently abused their children. These figures point again to the necessity of addressing intimate femicide within the continuum of domestic violence, and highlight the urgency of developing effective and appropriate interventions in order to protect all vulnerable parties.

### **5.3 Insights from the themes in perpetrator's accounts**

The various themes emerging from the accounts of the intimate femicide recorded from the perpetrators were identified and explored in the previous chapter. In this section an attempt will be made to draw out the major implications of the themes. Boonzaaier (2005) points out in her analysis of men's accounts of physical violence against their intimates, that while each narrative describes an individual's experience, it also reflects culturally and socially produced and sustained practices of femininity and masculinity. Given the issues raised in the literature

review, and particularly the feminist approach to understanding intimate femicide, the nature of the themes emerging from the accounts are unsurprising.

In addition to accounts of minimization, dissociation and denial of both previous violence, and of the femicide, the perpetrators provided a range of justifications for their actions. It is these stories of *why* the killing took place that may provide some insight into the framework of understanding of both the perpetrators, and society at large. The primary justifications for their actions provided by the perpetrators involved three areas: a response to some act of perceived *provocation*, a need to *re-establish authority*, and the desire to *retain possession* of the victim as a partner.

This possessiveness is linked to jealousy: it appears that many of the perpetrators were too ready to believe that their partner had been unfaithful, at times to the point of delusional thinking, and to react with violence. In the accounts which a response to provocation by the victim, this provocation was generally linked to issues which evoked the need to establish authority or confirm possession. Often a challenge on sexual matters or some expression by the victim of separateness and independence was the spark for a sudden flaring of violence. In other cases these perceived provocations appeared to fit into an existing pattern of violence which is exacerbated to the point of intimate femicide.

The themes of authority and proprietariness appear to be bound up with strongly held beliefs around masculine and feminine roles, and traditional understandings of how gender is ranked in family life. Feminist understandings have long highlighted how intimate relationships foster a male sense of proprietariness over women. In South Africa, the ideology of patriarchy is deeply embedded; in 2003 Juan Miguel Petit, Special Rapporteur of the United Nations Commission on Human Rights, reported back to the Commission following his visit here stating that the high levels of sexual violence were related to the entrenched culture of patriarchy in our country (United Nations, 2002). As Vetten (2000) points out, it is patriarchal ideology that is one common factor across all of South Africa's cultural and ethnic groups.

The themes which emerged from the perpetrator's accounts illustrate the powerful operation of patriarchal norms which facilitate male authority and ownership over women both generally

and in intimate relationships. However, the accounts also demonstrate the related issue of how commonly and easily violence is used as a tool to establish authority and ownership. The accounts betray a sense of entitlement to resort to violence as a means to uphold male dominance, power and control. It is perhaps interesting that in each of the scenarios of intimate femicide - perceived provocation, the need to re-establish authority, and the need to confirm possession of the victim as a sexual partner- there is a common theme: each context presents some potential challenge or resistance to assumption of male domination.

The literature review explored how the male use of violence in intimate relationships takes place in a setting of societal condonation, and cultural acceptability of violent behaviour. This use of sexual violence is embedded in a broader context in South Africa where violence has become a legitimized form of conflict resolution. High levels of violence have become normalized, and in turn, there is a growing sense of imperviousness to the high levels of domestic violence.

In addition to examining lethal sexual violence in the broader context of normalized violence, the perpetrator's accounts present an illustration of current South African male identity. In this country masculine identity appears to carry strong links to aggression and violence. Current hegemonic ideas of what constitutes masculinity pervade the culture, either explicitly in institutions such as the military or the police force, or more implicitly in other spheres. Some of these ideas include the need to hide emotions, aggression, competitiveness, and hyper-heterosexuality. In the normalization of these qualities, male dominance and control are secured, and the ease with which violence becomes a tool of control is facilitated.

The links between male identity and violence in the South African setting can be traced far into the social history of the country. Brutal colonial systems developed into the structural violence and oppression of the Apartheid era; this in turn precipitated violent political protest, and ongoing civil and political violence, much of which continues today. This institutional history of violence, militarization and aggression has had a disproportionate impact on men, both as victims and perpetrators. The widespread use of violence in intimate relationships suggests the extent to which violence is powerfully associated with masculine identity.

#### **5.4 Insights from the case studies**

The various case studies were set out in detail in the previous chapter. They provide a useful opportunity to compare the different unfoldings of the stories of intimate femicide in a range of settings. The different contexts of each case also provide a useful illustration of the multiple issues which affect the relationships between the parties, and which ultimately have a lethal impact on the lives of women.

While the dynamics of the male need for dominance, control and ownership have been traced through the thematic analysis, the way these assumptions are embedded and acted upon changes from case to case, as they intersect with other determinants such as class, culture or religion. The broad dynamics may be similar, but the contexts shape the use and meaning of violence in each situation. However, while the purpose of including the case studies was to tease out the differences in context, what is most striking about the examples, are the similarities in each case. Examining a rurally-based intimate femicide to one which is urban-based reveals the same broad storyline, with different scripts and settings. The use of a weapon, or the cause of death, is just one aspect in this varying backdrop.

All the case-studies reveal some sense of the perpetrator's need to assert their authority in the face of perceived disobedience, or disagreement, or the victim's independence. The case-studies also reveal other aspects of gender identity roles, and the frustrations surrounding a sense of failure in this regard for men. Associated with the need for authority, is the male need to play the role of being a successful provider for his partner and family. In the accounts of both Hannes and Kagiso there is a sense of frustration in being thwarted in this role by their partners. Andrew's almost delusional ideas of his wife's infidelity show how powerful the need to retain sexual ownership of an intimate partner can be.

An outstanding feature in the four case-studies is the level of anger and rage contained in the assaults on the victims. In both Pieter and Kagiso's case, the injuries to the victim were excessive, and in Pieter's case formed the basis of his referral for observation. The level and intensity of the rage appears to eclipse any other sense of needing to protect children, or avoid witnesses to the incident.

### 5.5 Limitations of the study

The study is primarily limited by the small sample size, and by the use of a specific sub-population of perpetrators of intimate femicide – those referred for observation as part of the criminal justice proceedings against them.

The study design made use of existing archival records, and is therefore constrained by being limited to information only from each patient file. While in some cases, witness statements and police reports provided additional or alternative versions of the intimate femicide, these collateral sources were not consistently available across the sample.

In addition to the inconsistent availability of collateral information in each folder, the study is also constrained by the lack of uniformity in the quality and amount of information obtained from the perpetrators. This lack of uniformity is a factor of both the temperament and level of co-operation of the perpetrator, the different clinicians responsible for obtaining the information, and the different training of registrar psychiatrists and intern psychologists. A further significant factor influencing the nature and extent of information obtained from perpetrators is the question of language. While some perpetrators were interviewed in their own language, others used English or Afrikaans as a second language, or communicated through a translator. The versions obtained in these ways may be significantly compromised by the perpetrator not being able to communicate clearly in his language of choice.

### 5.7 Identified potential risk factors for intimate femicide

The limitations listed above notwithstanding, certain predominant risk factors for intimate femicide have been identified in the existing literature, and have been confirmed in this sample. For the purposes of clarity and attention, these are set out below:

- **Controlling behaviour** on the part of a male intimate partner, particularly when combined with violence, or threats of violence.
- A history of **violence in the relationship**, or the perpetrator's history of violence to others.
- A threat or indication of **separation** by the female partner, or an actual separation.

- The **access to a weapon** by a male partner.

The following risk factors were not relevant to the current study, but have been found to be consistently associated with an increased risk of intimate femicide in the literature:

- **Stalking** behaviour on the part of a male partner; this includes his following or spying, making unwanted contact, destroying property, making unwanted telephone calls, leaving threatening messages, or frightening other family members.
- The male partner's lack of **employment**.
- The male partner's previous **threat with a weapon**.

## 5.8 Conclusion

This thesis began by setting out that South Africa has the highest recorded rate of intimate femicide in the world (Mathews et al., 2004). One of the goals of this study was to provide some context to this rate by exploring more textured information about the perpetrators, their relationships and their accounts of the femicide using archival data for a small sample of perpetrators. The description and interpretation of the data from the sample reveals certain similarities and certain differences which have been explored, and which are useful in informing an understanding of intimate femicide in South Africa.

Holding in one hand the inevitable variations in perpetrators of intimate femicide and its context – variations in the use of alcohol, the setting, the early history of the perpetrator, his level of education, age, race or employment status – we must consider the similarities which are held in the other hand. The interpretation of the data in this study suggest that the issues of a masculine sense of entitlement to control and to “own” their intimate partners are key to understanding the dynamics that underpin intimate femicide. It appears that control and commodification are the mechanics behind stories of jealousy, suspicions of infidelity, provocation, and the separation or threat of separation. These themes reveal assumptions and practices which are associated with long-standing and deeply entrenched notions of male supremacy. Despite many legislative and rights-based changes in our country, these notions appear to be powerful and influential. Male violence, both sub-lethal and lethal is bound up

with culturally acceptable assumptions around men's right and entitlement to control women, and treat them as possessions.

The accounts reveal the various perpetrators readiness and willingness to use violence as a tool in the control of their partners. Daly and Wilson (1988) have argued that sexual jealousy and rivalry are the dominant motives in femicide, and coined the term "sexual proprietariness" to describe the dogged male inclination to control women. They understood this proprietary sense as inextricably bound up with the use or threat of violence in order to maintain sexual exclusivity and control. A feminist analysis sees gendered violence as a tool for patriarchal control. Bean (1992) described intimate femicide as the ultimate act of control: *Murder is the final irrevocable step, the ultimate expression of men's control over women. For some men, the need for control is not satisfied until this irrevocable step is taken (p.43).*

Intimate femicide represents the end point of a continuum of domestic violence, and both lethal and sub-lethal forms of violence demand a response. According to the South African Constitution and the United Nations Declaration on the Elimination of Violence against Women we are obliged to protect the rights of safety and security of women. A first step towards addressing the problem is to gather information regarding all aspects of intimate femicide, and to attempt to understand this phenomenon as one which stretches across societies and cultures.

Research is also crucial to motivating and advocating for resource allocation and legal reform. International research has shown that the implementation of effective legislation and the provision of appropriate social support for women bring the rate of intimate femicide down (Stout, 1992). Findings must work towards identifying missed opportunities to intervene and protect women from all forms of gender-based violence, and to develop more effective intervention strategies to reduce rates of intimate femicide in our country, and levels of violence against women more generally.

Research should work towards changing the entry point of enquiry from "why was she beaten, and why did she stay?" to "why does he hit her, and why is it allowed to continue?"

## 5.9 Recommendations

- Further research is required to explore the relationship dynamics preceding the use of, or attempted use of lethal violence, using information from both survivors of an attempted femicide and perpetrators.
- Protocols for those in a position to provide assistance to women in abusive relationships who confide that they are planning to leave their partners should carry guidelines to advise women not to confront their partners directly.
- Findings from existing research in South Africa into intimate femicide should be used to develop current and workable risk analyses to assess for intimate femicide in order to maximize any opportunities to intervene.

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## **Annexure A**

### **1. Descriptive information: perpetrator**

- Age
- Race
- HLOE
- Employment
- Marital status
- Number of children
- Rural / urban residence
- Religion
- Home language
- Salient features of personal history
- Relevant features of other intimate relationships
- Early family abuse?

## **2. Circumstances of the offence**

- Date
- Day of the week
- Place of homicide
- Method of homicide
- Cause of death
- Use of weapon
- Impulsive / premeditation
- Role of anger
- Role of provocation
- Attempts to run away
- Attempts to assist victim
- Attempted suicide following homicide
- Claiming amnesia?
- Witnesses
- Child witnesses - ages
- Victim: physical / mental health status
- Victim: use of substances

## **3. History of the relationship**

- Relationship status at time of homicide
- Previous relationship status
- Duration of relationship
- Perpetrator's perception of relationship
- Hx of threats of violence by perp
- Hx of abusive relationship / domestic violence
- Victim: previous attempts to leave/ remove children
- Victim: threat of separation
- Rejection / perceived rejection
- Lengths of previous separations if any
- Stalking behaviour prior to homicide

## **4. Characteristics of the victim:**

- Age

- Nature of relationship with the perpetrator
- Race
- HLOE
- Employment
- Soc-eco dependence on perp
- Children - paternity
- Use of health care prior to femicide
- Other help-seeking behaviour?
- Pregnant?
- Reasons for rejection
- Physical health status
- Mental health status
- Hx of substance abuse

#### **5. Previous use of legal remedies by victim**

- Previous protection orders
- Protection order at time of homicide
- Other legal remedies
- Previous police intervention
- Other help-seeking behaviour

#### **6. Impact of protection order**

- Protection order in place
- For what period prior to homicide
- Perpetrator's response to order / order as provocation

#### **7. Mental state at time of assessment**

- Level of cooperation
- Mood symptoms
- Psychotic symptoms
- Cognitive assessment
- Reliability
- Insight

#### **8. Evidence of psychiatric history**

- Hx of mental illness
- Depression?
- Previous admissions
- Years of first and last admission
- Previous diagnoses
- Number of years between onset of illness and crime

#### **9. Criminal record / criminal behaviours**

- Arrests
- Convictions
- Violent convictions
- Prior imprisonment

- Other Hx of violence

- 

#### **10. History / presence of alcohol and substance abuse and dependence**

- Hx of substance abuse
- Sought / obtained treatment
- Impact on relationship
- Substance abuse at time of homicide

#### **11. Clinical diagnosis**

- DSM diagnosis

#### **12. Forensic Assessment**

- Referred by
- At what point in the process?
- Awaiting trial? / On bail?
- Any plea
- Outcome of observation
- Length of time between offence and observation