

The relationship between maternal filicide psychology essay



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The purpose of this paper is to investigate and identify the common factors that influence maternal filicide, and its relationship to mental/psychological disorders within the perpetrators. Filicide has been defined as the intentional act of a parent/guardian killing her or his own child (Putkonen, Amon, Almiron, Cederwall, Eronen, Klier, Kjelsberg, Weizmann-Henelius, 2009).

There are two subcategories that branch from filicide which include infanticide and neonaticide. Infanticide is best described as the murder of a one's own child that is younger than one year. Whereas, neonaticide is the killing of a child that has been born not more than 24 hours earlier (Putkonen, et al, 2009). Surprisingly, this act is not uncommon and has been reported to take place all around the world. Previous studies have found that filicide has taken place in 3rd world countries such as Bolivia in under developed communities (Hilari, Condori, Dearden, 2009), and also in countries such as England, China and France (McKee, 2006). Although this act is practiced around the globe, there is very little information and research recorded about the topic. Filicide is a very sensitive issue and is difficult for most to have an open discussion about the subject. Past studies include Putkonen et al. (2009), and their research on filicide in Austria and Finland. The purpose of their study was to examine the common traits between filicide perpetrators and if these individuals shared any psychological disorders. In order to conduct this study the researchers had to gather all filicide cases that occur between 1995 and 2005. They examined factors such as motive, method of offence, relationship between perpetrator and victim, and mental health treatment of the perpetrator. They also took into account the intoxication of the executor during the filicide act. Other research in this area included the work by Kauppi, Kumpulainen, Vanamo, <https://assignbuster.com/the-relationship-between-maternal-filicide-psychology-essay/>

Merikanto, and Karkola (2007) where 10 mothers that committed filicide were examined to see the relationship between filicide and maternal depression. In all cases, mothers showed signs of irritability, crying for long periods of time without cause or reason, fatigue, anxiety among other symptoms that are common in depression. The researchers did not interview the women however were able to investigate the similarities that lead to the murder and the common factors after the act was committed. These two research studies were examined in Finland and Austria. Hilari, Condori, and Dearden (2009), also looked at parents that committed filicide however examined the practice in Bolivia. They explored two communities within Bolivia and found that unlike the past studies the reasons for filicide were often due to biological defects of the child or social factors within the community. Their research looked at how the indigenous people of Bolivia justified the killing of children. Most often, the murder of a child went unnoticed as the child's life was taken within 24 hours of birth. Oberman and Meyer (2009) studies the social economic well being of women that have committed filicide. They interviewed women that have been convicted with the crime and found similarities in social environment, family history, and education level. Their research brings to light a world that is unknown to most other individuals. The purpose of their study was to take the reader into the minds of these women and to see what the rationale was when deciding to commit the act of filicide. Their findings revealed that most women that performed filicide are not doing it out of hatred for the child; rather it was due to confusion and a sense of not being able to provide for the child.

This paper intends to investigate each article in further detail and determine if there are commonalities between the subjects and their mental state, their socio-economic environment, educational levels, and family history. This paper will also suggest other practices and resources that can be attempted by women who find themselves in this type of situation as all forms of filicide should be avoided.

Obeman and Meyer (2009) wrote a book that discussed maternal filicide and different interviews that were made in prison on mothers who were convicted of this crime. The authors explained how most of these women felt uncomfortable and would not want to discuss it in general. Obeman et al.'s (2009) conducted face-to-face interviews at the Ohio State Reformatory. They explained how the presumptions' that were made of these women murdering their children were not always accurate. Their options based on their social and familial systems were very restricted and limited. The authors explained how most of these women expressed themselves as not having a place that should feel safe, when it was suppose to feel like home (Obeman et al., 2009). Many common factors were attributed to these women such as; fear, economic deprivation, isolation and lack of financial support. The mothers usually indicated a lack of education, emotion and very minimal medical support (Obeman et al., 2009). Physical, mental, and emotional abuse were usually early symptoms that these individuals experienced prior and after the filicide were committed. Obeman et al.'s (2009) identified history of abuse in the family that factored these women's behaviour throughout their lives. The book explained how these women struggled against the odds of being good mothers to protect themselves and

their children. In addition, the mothers usually fought back against the power of abuse they were experiencing with their partner (Obeman et al., 2009).

Most of the time, for some of these women they thought that giving up was safer than fighting back. The authors identified some external support that came from caring others. This

usually gave them a self-awareness of their own strength (Obeman et al., 2009). The mothers were usually isolated by fear of their own partner.

Most of them were also affected with mental illnesses (Obeman et al., 2009).

The book explains how the U. S justice system strictly relies more on retribution oppose to rehabilitation. In addition, there appears to be more of a wide variety of shelters for animals than there is for people (Obeman et al., 2009). They explained how these women travel on a painful process to accept who they are, and what they have done. Many of the issues that the mothers faced was not knowing where to find help, how to access it, and whom to trust (Obeman et al., 2009).

Kauppi, Kumpulainen, Vanamo, Merikanto, Karkola (2008) also conducted research on mothers that committed filicide. There were unable to interview the women in their study however were able to retrieve data on their mental health after child birth, and family history which included abusive parents being surrounded in an alcoholic environment. They were also able to obtain information on the children that were murdered.

Their study provided information that indicated that none of the births were unwanted. When the babies were born, all showed good health and had no

signs of disorders or deformities. It was stated that the motive behind all
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filicide cases examined were not of selfish nature. Majority of the mothers believed that the world was a bad place and that it was not the place for a child to be raised. Six out of the ten women in this study tried to commit suicide after murdering their child. An important factor that was discovered in this study was that in most cases the person responsible for the death of the child had a difficult childhood with demanding parents and a lack of emotional support (Kauppi et. al, 2008). The investigators of this study also found that more than 50% of the women were abandoned by their own mothers during their childhood. In the examination phase, in four cases the mothers were diagnosed with some kind of depression such as; postpartum depression, major depression and psychotic depression (Kauppi et. al, 2008). Keeping in mind, none of these women were convicted in the court. In most cases, the mothers never wanted to be left alone with their babies as it would cause symptoms to increase in severity. Other symptoms developed when the child was left alone with mother which included but are not limited to hallucinations and anxiety (Kauppi et. al, 2008).

Another book review written by Mckee (2006), examined the gender differences within the filicide population. Statistics showed that within the population forty seven percent of mothers were the perpetrator and fifty three percent of fathers committed the act of filicide. Mckee (2006) found that children under 1 year old were more vulnerable to filicide than children over the age of one. In the United Kingdom, future research suggest approximately 10 to 20 maternal filicide cases will be committed yearly (Mckee, 2006). The United States averages 256 filicide cases per year. Reasons for this high amount of filicide cases in developed countries include

economic deprivation, lower educational levels and a lack of resources that guide and help young mothers when faced with postpartum depression (Oberman, Meyer, 2009). Mckee`s (2006) book discusses prevalence rates and previous research completed on maternal filicide. In addition, risk assessments and management strategies are also analysed for this particular area homicide. Mckee (2006) discovered five broad categories of maternal filicide. These categories include rejection, mental illness, unintended, antisocial, and retaliation. By using case examples, Mckee explains his “ Maternal Filicide Risk Matrix“. This explains the association of the mother`s unprotected cell and protective factors based on two dimensions. These dimensions are known as stage and domain. This tool must include risk intervention points for each stage of motherhood and pregnancy. Unfortunately, the assessment is not empirically validated. The author also discusses different principles and their strengths and weakness of the “ Maternal Filicide Risk Matrix“. He also argues the amount of abandoned children who are never found and problem defining the cause of death may be the prevalence of mother who kills. The last article in this review, written by Hilari, Condori, Dearden (2009) took a different approach to investigate filicide cases. Their study took place in Bolivia where they examined the indigenous people of two areas. The first area is Qaqachaka and had 38 communities participate in the study. In the second area is Ancoraimes which had 28 communities in the study. The reasons why these areas were chosen are due to the surveillance systems that have been installed by the government to monitor the communities. The purpose of their study was to investigate why families partake in filicide acts. Unlike previous literature examined in this review, the main causes for filicide are <https://assignbuster.com/the-relationship-between-maternal-filicide-psychology-essay/>

due to biological and social factors. Examples of biological factors include physical deformities and twin ship. In this culture, when a mother gives birth to male and female twins, it is seen as evil and is socially accepted to destroy both genders. As for the social factors, the communities rarely excuse the murderer; however the life of the child is taken within 24 hours after birth and is never recorded. Often there is no disciplinary action as the murder has gone unnoticed. Individual interviews and focus groups were also utilized to gain data. Findings indicated that female filicide were higher in both areas, for example Qaqachaka had 14 deaths in total, 13 in which were female. Qaqachaka also recorded 20 times higher than neonatal mortality rate, compared to national rural average. Some drawbacks to Hilari et al. (2009), research are that the communities surveillance under reported births as camera`s were not set up in individual`s homes.

Also, information gathered from informants could have been bias as many stated that they did not partake or witness the filicide rather heard about it through word of mouth.

Discussion In most cases of filicide, in general often occur with young women that come from a deprived childhood and low socio-economic status. Often these women lack the education to acknowledge the consequences of their actions. In most of these cases, there was a limited amount of resources and access to seek help. For mothers in these areas, there should be social workers that are readily accessible to detect and refer early symptoms of postpartum depression and psychological/ behavioural disorders. Many of the limitations that were common in these studies were the lack of empirical evidence, and how many women did not want to discuss the traumatic
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event. The finances to bring psychologists and psychiatrists into these lower income communities are unfortunately not available. Weekly follow ups by the mother's family physician would be a positive approach to identifying certain behaviours that may lead to mood disorders, which may result to filicidal acts. Understanding each stage of the mother's pregnancy and parenthood, these are the ideal phases to seek important patterns. To conclude, this research has been fairly new and different theories have been developed to better understand the rationale of these homicidal offenders. Future research should obtain different methods and gather more information from past perpetrators to analyze and investigate and develop proactive measures to prevent the act of maternal filicide.

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