



Universiteit
Leiden

The Netherlands

Homicide-Suicide in the Netherlands: A Newspaper Surveillance Study

Liem, M.C.A.; Koenraadt, F.

Citation

Liem, M. C. A., & Koenraadt, F. (2007). Homicide-Suicide in the Netherlands: A Newspaper Surveillance Study. *Journal Of Forensic Psychiatry And Psychology*, 18. Retrieved from <https://hdl.handle.net/1887/15567>

Version: Not Applicable (or Unknown)

License: [Leiden University Non-exclusive license](#)

Downloaded from: <https://hdl.handle.net/1887/15567>

Note: To cite this publication please use the final published version (if applicable).

Homicide-suicide in the Netherlands: A study of newspaper reports, 1992–2005

M. C. A. LIEM¹ & F. KOENRAADT^{1,2}

¹*Utrecht University, the Netherlands, and* ²*Pieter Baan Centre, Utrecht, the Netherlands*

Abstract

Background: Homicides followed by the suicide of the perpetrator are a rare yet very serious form of interpersonal violence which occurs mainly in partnerships and families. It typically leads to widespread public interest and unease. No systematic research on homicide suicide has ever been conducted in the Netherlands.

Aim: The aim of this study is to describe the nature and incidence of homicide suicide in the Netherlands in the period 1992–2005, using cases reported in both national and regional newspapers.

Results: On the basis of newspaper accounts, homicide suicide occurred on average seven times per year during this time period. Spousal/consortial homicide suicide was predominant, followed by homicide suicide involving the perpetrator's own children and familicide suicide. The perpetrators across all categories of homicide suicide were predominantly male; the victims were predominantly women and children. Firearms were used in the majority of the homicides and subsequent suicides.

Conclusion: The domestic nature of homicide suicide events is discussed. Future research should aim to incorporate multiple methods in order to assess accurately the epidemiology of homicide suicide in the Netherlands.

Keywords: *Homicide-suicide, murder-suicide, family homicide, extended suicide, media reporting, newspaper surveillance*

Introduction

Homicide-suicide is a generic term referring to a homicide and the subsequent suicide of the perpetrator. While homicide and suicide are two well-defined entities, there is no standard legal description of the homicide-suicide phenomenon (Palermo, 1994) because cases typically do not

Correspondence: Utrecht University, Forensic Psychiatry and Psychology Section, Law Department, Janskerkhof 16, 3512 BM Utrecht, the Netherlands. E-mail: m.liem@law.uu.nl or f.koenraad@law.uu.nl

result in a criminal charge or trial (Felthous & Hempel, 1995). Although homicide-suicide is often referred to as murder-suicide, 'murder' denotes the legal aspect of intentional homicide, whereas 'homicide' includes both murder and manslaughter and is therefore the preferred, more encompassing, term.

The prevalence of homicide-suicides ranges from as few as 1.5% of homicides in the United States (Berman, 1979) to 42% of all recorded homicides in Denmark (West, 1965). Overall, homicide-suicide is a relatively rare event. A recent study in the United Kingdom estimated homicide-suicide levels to be 1% of all homicides (Barraclough & Clare Harris, 2002).

In the Netherlands, there has been no systematic research into the homicide-suicide phenomenon. As these acts are not recorded in official crime statistics, not even the yearly number of events and victims is known. Until recently, homicide events were not systematically recorded by a central institution; in order to analyze these grave crimes, researchers have resorted to newspaper analysis (e.g., Leistra & Nieuwebeerta, 2003). Homicide-suicide cases, however, have not been subject to these analyses. Consequently, there is much uncertainty surrounding these events. Homicide-suicides are an emerging public health concern, victimizing not only those directly involved in the act but also relatives, friends, and acquaintances. Given the fact that multiple victims are involved, the degree of secondary victimization is considerable. Homicide-suicides lead to shock and incomprehension in society at large. It is the aim of this study to shed light on the nature and incidence of homicide-suicide events in the Netherlands.

Method

In order to map the types and prevalence of homicide-suicide, a newspaper analysis was conducted. Printed media have proven useful in estimating the number of intentional injuries, including homicide-suicide (Aderibigbe, 1997; Danson & Soothill, 1996a, 1996b; Malphurs & Cohen, 2002).

In the Netherlands, all articles from six national newspapers from 1992 onwards are indexed in the online computer database LexisNexis. Given the fact that homicide-suicides are not always reported at the national level, a regional newspaper database, the Wegener Archive, was also searched. This archive contains seven regional newspapers. These newspapers cover mainly rural areas. Both databases were searched using keyword searches.

A homicide-suicide was classified as such if one or more person(s) had committed a homicide and then made a suicide attempt, in which they either failed or succeeded. Some have pointed out that researchers

should consider examining homicide-suicides in which the suicide was unsuccessful, as these cases may help to shed light on completed homicide-suicides (Berman, 1996; Brett, 2002). Therefore, cases in which the suicide attempt was unsuccessful were included here. The criterion was that the suicide or suicide attempt of the perpetrator must have taken place within one week of the preceding homicide.

Following Aderibigbe (1997), Marzuk, Tardiff, and Hirsch's (1992) classification of homicide-suicides was applied to our data. This typology is based both on the relationship between victim and offender and on the primary motive underlying the offence. A spousal relationship is defined as a continuing or previous relationship between the perpetrator and his/her partner. A consortial relationship includes (ex-)boyfriends and (ex-)girlfriends. When the perpetrator killed multiple victims, the relationship with the primary victim was coded. For example, cases in which a spouse and a stranger were killed were categorized as spousal/consortial homicide-suicides rather than extrafamilial homicide-suicides. The main types of homicide-suicide described by Marzuk et al. (1992) are spousal homicide-suicide, in which the perpetrator is primarily motivated by amorous jealousy, and spousal homicide-suicide motivated by the ailing health of at least one of the partners. Other categories are filicide-suicide, familicide-suicide, and, finally, extrafamilial homicide-suicide.

Results

In the period 1992–2005, based on these sources, 95 homicide-suicide events¹ took place, involving 202 deaths. On the basis of newspaper reports alone, homicide-suicide occurred on average seven times per year. A total of 22 perpetrators (23%) did not succeed in their suicide attempt. These failed suicides were equally distributed across the different homicide-suicide categories.

The majority of the events were classified as spousal and consortial homicide-suicides motivated by amorous jealousy (44%), followed by homicide-suicides involving children (27%) (see Table I). The third most prevalent category was made up of familicide-suicides (12%) and 'other' homicide-suicides (13%), which included cases in which the primary motive was a conflict between victim and perpetrator which could not be captured by the other categories. Spousal/consortial homicide-suicides were prevalent in most years studied, except 1993, 1996, and 1998, when both filicide-suicides and familicide-suicides prevailed, and 2005, when familicide-suicides were predominant (see Figure 1).

The perpetrators of spousal/consortial homicide-suicide were almost exclusively male, except one. Those who killed both their spouse and their children were all male. Men also predominated in filicide-suicide. Table II shows the relationships between victims and perpetrators.

Table I. Types of homicide-suicide in the Netherlands, 1992–2005.

Type of homicide-suicide	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	Average
Spousal/consortial ² homicide-suicide	3	-	3	7	3	3	-	3	4	3	4	6	4	1	3
Filicide-suicide	2	2	-	2	6	1	2	3	2	1	-	-	3	2	2
Familicide-suicide	-	-	1	1	-	1	2	1	-	1	-	1	1	2	1
Extrafamilial homicide-suicide	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-
Other	-	-	1	1	1	-	1	-	3	2	-	-	1	3	1
Total number of events	5	2	5	11	10	5	5	7	10	7	4	7	9	8	7

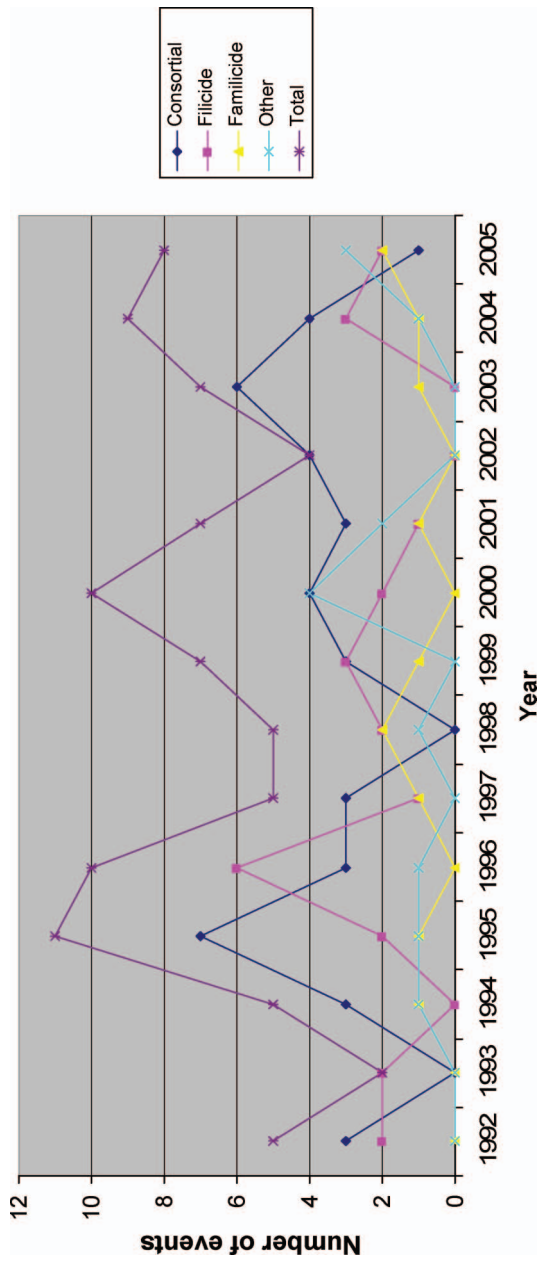


Figure 1. Homicide-suicide in the Netherlands, 1992 – 2005.⁴

Table II. Types of relationship between victim and perpetrator.³

Type of relationship	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	Average
Spousal/consortial	3	-	5	8	4	4	3	4	6	6	4	7	6	4	5
Spouse	3	-	2	4	1	2	3	4	3	5	3	4	3	3	3
Consort	-	-	3	4	3	2	-	-	3	1	1	3	3	1	2
Familial	2	2	-	3	6	1	2	3	3	1	-	-	3	4	2
Mother	2	-	-	1	1	-	2	2	-	-	-	-	1	1	1
Father	-	2	-	1	5	1	-	1	2	1	-	-	2	1	1
Other adult family member	-	-	-	1	-	-	-	-	1	-	-	-	-	2	-
Extrafamilial	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-
Total	5	2	5	11	10	5	5	7	10	7	4	7	9	8	7

Overall, the most frequently used method for the homicide was a firearm, followed by a knife and strangulation. Spousal and consortial homicide-suicides were most frequently committed with a firearm (56%), whereas filicide-suicides were most often committed by strangulation (36%). Pointed weapons were prevalent in familicide-suicides (44%). The suicide of the perpetrator was typically committed by firearm, by hanging, or by taking an overdose.

Some of these homicide-suicide cases were only reported on by the regional press, whereas others were also covered by the national press. No cases were covered by the national press only. Regarding the different categories of homicide-suicide: 52% of the spousal homicide-suicides, 69% of the filicide-suicides, 72% of the familicide-suicides, and 50% of the 'other' homicide-suicides were reported on by both national and regional newspapers.

Discussion

Selection bias

This is the first systematic examination of homicide-suicide in the Netherlands. As we searched both national and regional newspapers, the homicide-suicides committed during this time period in the Netherlands are likely to have been encountered and included in our analysis. Malphurs and Cohen (2002) have pointed out that newspaper surveillance using database search engines is dependent on the number of newspapers included in the searches, and on variability in editorial decisions to publish and post homicide-suicide stories. Therefore, the conclusions that can be drawn from these data must be treated with caution.

In approximately one-quarter of the homicide-suicide events included in this study, the perpetrator did not succeed in his/her suicide attempt. Thus the incidence of homicide-suicide would have been somewhat lower had we only included those events resulting in a fatal suicide attempt. Future research should aim to assess the differences between failed and successful suicide attempts following a homicide.

An unwritten journalistic code in the Netherlands prohibits reporting on suicide cases, out of fear of imitation as well as out of decency and respect. Additionally, a suicide has less sensational news value than, for example, a homicide. These factors might provide an explanation for the relatively low number of reports of spousal/consortial homicide-suicides motivated by the ill health of one of the partners. Such a homicide-suicide is likely to be interpreted as a suicide pact, where it is assumed that two people – usually of the same age – have resolved to die together (Cohen, 1961), rather than one coercing the other (e.g., Fishbain, D'Achille, Barskey, & Aldrich, 1984; Rosenbaum, 1983, 1990), and as a result the media might be less likely to report on these events.

On the other hand, homicide-suicides involving children have high sensation value, and are therefore reported more often and more extensively than, for example, partner killings followed by suicide. This was particularly the case in 1996, when several filicides took place within a relatively short period of time. The media and 'experts' spoke of an 'epidemic' of child murder, and it was postulated that parents would be triggered to do the same when they read stories of others who killed their children. Some even called for a media silence (for a discussion, see Brants & Koenraadt, 1998). Although this media silence was not officially adopted, the upheaval might have caused newspapers to withhold reports of filicides and filicide-suicides in the subsequent period.

Generally, the familicide and filicide cases were covered by both the national and regional press; spousal homicide-suicides and extrafamilial homicide-suicides in the regional press, however, were less frequently reported at the national level. This difference in coverage possibly reflects underlying public sentiments that determine what is reported: when a vulnerable individual such as a child becomes the victim of a homicide, feelings of powerlessness and anger prevail among the public. Consequently, much attention is devoted to how such a case could have been prevented. The authors believe that such concern is not expressed in the case of spousal homicide-suicides.

Domestic homicide

Almost all the homicide victims in this sample were (possibly estranged) partners, lovers, and children, thereby underlining the domestic nature of such events. The primary motive for the majority of homicide-suicide cases in this sample was amorous jealousy – a finding consistent with other studies using a similar method (e.g., Malphurs & Cohen, 2002; Marzuk et al., 1992). Typically, the male in a couple develops suspicions that his partner is being unfaithful, becomes enraged, murders her, and then commits suicide, sometimes killing the rival lover as well (Marzuk et al., 1992). In other cases, he feels rejected by his partner when she threatens to leave him. The perpetrator directs his aggression towards the object causing his anger, resulting in a homicide. Some suggest that the perpetrator commits suicide out of a moral sense of guilt (e.g., Henry & Short, 1954). It could be argued that the suicide following the homicide arises out of desire to be reunited with the victim: the perpetrator was dependent on the victim in life, and remains dependent on her in death. Dependence is a theme often encountered in males who have killed their (ex-)partners (Koenraadt, 1999).

Cases of filicide-suicide, on the other hand, seem to be primarily suicidal rather than primarily homicidal: the perpetrator plans to do away with his own life and, considering the child better off dead, he takes the child with

him in a so-called 'extended suicide'. The self of the parent is, as it were, integrated with that of the child (e.g., Dettling, Althaus, & Haffner, 2003; Haapasalo & Petäjä, 1999; Harder, 1967). Others have suggested that a child might be in danger as regards filicide-suicide when the offender's primary aggression is directed towards the spouse, and that children have been killed in a deliberate attempt to make the spouse suffer (Holden, Burland, & Lemmen, 1996; Wilson, Daly, & Daniele, 1995). This has been referred to as the 'Medea complex' – in ancient myth Medea sought to hurt her estranged husband Jason by killing their children. Contradicting the literature (e.g., Barraclough & Harris, 2002; Goldney, 1977; Palmer & Humphrey, 1980; West, 1965), the majority of the filicide-suicide parents in our sample were male.

Familicide-suicides seem to share characteristics with filicide-suicide and with spousal/consortial homicide-suicide. Most research on familicide indicates that perpetrators are motivated by a loss of control over their family (Daly & Wilson, 1988; Wilson et al., 1995). If a woman threatens withdrawal or estrangement, the partner may respond with lethal violence: the primary object of the man's aggression is the spouse rather than the children. In other cases, however, altruistic thinking such as in filicide-suicides seems to be of great influence. When the familicidal man is confronted with the closing down of economic dreams, he does not see any other option but to 'protect' his family from the fate that would befall them without his support (e.g., Goldney, 1977; Polk, 1994).

In summary, in the present sample there seemed to be two types of homicide-suicide perpetrators; Frazier (1975) describes these as the 'murder by proxy' type and the 'suicide by proxy' type.

The 'murder by proxy' type chooses victims identified with the primary target against whom revenge is sought: in revenge against an (estranged) spouse or partner, a rival and/or children are killed. These perpetrators' homicidal qualities are often reflected in the suicide method employed: firearms, hanging, and taking an overdose were the most common suicide methods in this sample, whereas the main methods employed by those 'only' killing themselves are hanging, taking an overdose, or jumping in front of a train (Centraal Bureau voor de Statistiek, 2006). In the current sample, approximately 40% of the events could be classified as 'murder by proxy'.

The 'suicide by proxy' type is usually the father and husband who feels despondent over the fate of his family. He takes the life of his child(ren) and/or his spouse in order to protect them from pain and suffering to come. In the present sample, approximately 25% of the events were categorized as primarily suicide-oriented.

In the remaining cases, the information given in the newspaper reports was limited and we were unable to draw any definite conclusions regarding perpetrator motive.

Future directions

Future research should focus on demographic, situational, and psychopathological factors to increase our understanding of this understudied phenomenon. These details are not available through newspaper articles.

The unwritten journalistic code which generally prohibits reporting on suicides, upheavals in the media, and editorial bias in the selection of stories for publication all combine to make the publication of homicide-suicide events subject to great bias. In order to assess the extent of under-reporting by the media and possible distortion in media coverage, future research should attempt to compare the objective nature and frequency of homicide-suicide events with that reported by the media. Such a study would require access to a national database of all homicide-suicide events (Postulart & Nieuwbeerta, 2007). In addition, studies should examine which specific features of homicide-suicide seem to produce journalistic interest. In this way, possible media distortions are likely to be detected.

Finally, further research should combine several methods in order to estimate more accurately the annual incidence and nature of these events. For example, medical files and police files could be analysed in addition to newspaper articles. Marzuk et al. (1992) suggested that a national monitoring centre should be established for homicide-suicides: this would facilitate the validation of these cases, increase our understanding of them, and, accordingly, assist in prevention.

Acknowledgements

The authors thank Lucien van de Horn for collecting and supplying newspaper articles about homicide-suicide. This research has been made possible by the Gispen Fund.

Notes

- 1 In the remainder of this article, 'homicide-suicide' indicates the number of events, rather than the number of perpetrators or victims, unless otherwise mentioned.
- 2 Marzuk et al. (1992) included a fourth subcategory in which the perpetrator is a child under the age of 16. Because no perpetrator in the sample fulfilled this criterion, this category has been omitted.
- 3 In all the years under study, all spousal/consortial homicide-suicides were classified as motivated by amorous jealousy, except for the years 1997 and 2002; in each of these years one case of homicide-suicide motivated by ill health was found.
- 4 For the sake of clarity, the categories 'other' and 'extrafamilial' were grouped together.

References

- Aderibigbe, Y. A. (1997). Violence in America: A survey of suicide linked to homicides. *Journal of Forensic Sciences*, 42, 662-665.
- BarracloUGH, B. M., & Clare Harris, E. (2002). Suicide preceded by murder: The epidemiology of homicide suicide in England and Wales 1988-92. *Psychological Medicine*, 32, 577-584.
- Berman, A. L. (1979). Dyadic death: Homicide suicide. *Suicide and Life Threatening Behaviour*, 9, 15-23.
- Berman, A. L. (1996). Dyadic death: A typology. *Suicide and Life Threatening Behaviour*, 26, 342-350.
- Brants, C. H., & Koenraadt, F. (1998). Criminaliteit en media hype: Een terugblik op de publieke beeldvorming rond kindermoord. [Crime and media hype: A retrospective of public imaging of child homicide.] *Delikt en Delinkwent*, 6, 542-564.
- Brett, A. (2002). Murder parasuicide: A case series in Western Australia. *Psychiatry, Psychology and Law*, 9, 96-99.
- Brown, M., & BarracloUGH, B. M. (2002). Suicide preceded by murder: The epidemiology of homicide suicide in England and Wales 1988-92. *Psychological Medicine*, 32, 577-584.
- CBS. (2006). *Niet natuurlijke dood naar diverse kenmerken*. Voorburg, Netherlands: Centraal Bureau voor de Statistiek.
- Cohen, J. (1961). A study of suicide pacts. *Medico Legal Journal*, 29, 144-151.
- Daly, M., & Wilson, M. (1988). *Homicide*. New York: Aldine de Gruyter.
- Danson, L., & Soothill, K. (1996a). Murder followed by suicide: A study of the reporting of murder followed by suicide in *The Times* (1887-1990). *Journal of Forensic Psychiatry*, 7, 310-322.
- Danson, L., & Soothill, K. (1996b). Child murder and the media: A study of the reporting of child murder in *The Times* (1887-1990). *Journal of Forensic Psychiatry*, 7, 495-503.
- Detting, A., Althaus, L., & Haffner, H. T. (2003). Criteria for homicide and suicide on victims of extended suicide due to sharp force injury. *Forensic Science International*, 134, 142-146.
- Felthous, A. R., & Hempel, A. G. (1995). Combined homicide suicides: A review. *Journal of Forensic Sciences*, 40, 846-857.
- Fishbain, D. A., D'Achille, L., Barskey, S., & Aldrich, T. E. (1984). A controlled study of suicide pacts. *Journal of Clinical Psychiatry*, 4, 154-157.
- Frazier, S. H. (1975). Violence and social impact. In J. C. Schooler & C. M. Gaitz (Eds.), *Research and the psychiatric patient*. New York: Brunner and Mazel.
- Goldney, R. D. (1977). Family murder followed by suicide. *Forensic Science*, 3, 219-228.
- Haapasalo, J., & Petäjä, S. (1999). Mothers who killed or attempted to kill their child: Life circumstances, childhood abuse and types of killing. *Violence and Victims*, 14, 219-239.
- Harder, T. (1967). The psychopathology of infanticide. *Acta Psychiatrica Scandinavica*, 43, 196-245.
- Henry, A., & Short, J. (1954). *Suicide and homicide*. Glencoe, Illinois: The Free Press.
- Holden, C. E., Burland, A. S., & Lemmen, C. A. (1996). Insanity and filicide: Women who murder their children. *New Directions for Mental Health Services*, 69, 25-34.
- Koenraadt, F. (1999). Mannen die doden in het eigen gezin. In F. Bakker, F. Koenraadt, & A. Mooij (Eds.), *Om ernstige zaken* (pp. 47-56). Gouda, Netherlands: Quint.
- Leistra, G., & Nieuwbeerta, P. (2003). *Moord en doodslag in Nederland 1992-2001*. Amsterdam: Prometheus.
- Malphurs, J. E., & Cohen, D. (2002). A newspaper surveillance study of homicide suicide in the United States. *The American Journal of Forensic Medicine and Pathology*, 23, 142-148.
- Marzuk, P. M., Tardiff, K., & Hirsch, C. S. (1992). The epidemiology of murder suicide. *Journal of the American Medical Association*, 267, 3179-3183.

- Palermo, G. B. (1994). Murder suicide: An extended suicide. *International Journal of Offender Therapy and Comparative Criminology*, 38, 205-216.
- Palmer, S., & Humphrey, J. A. (1980). Offender-victim relationship in criminal homicide followed by offender's suicide: North Carolina, 1972-1977. *Suicide and Life-Threatening Behaviour*, 10, 106-118.
- Polk, K. (1994). *When men kill: Scenarios of masculine violence*. Cambridge, UK: Cambridge University Press.
- Postulart, M., & Nieuwbeerta, P. (2007). *Homicide Suicide 1992-2006. Codebook and documentation*. Leiden: NSCR. Internal Publication.
- Rosenbaum, M. (1983). Crime and punishment: The suicide pact. *Archives of General Psychiatry*, 40, 979-982.
- Rosenbaum, M. (1990). The role of depression in couples involved in murder suicide and homicide. *American Journal of Psychiatry*, 147, 1036-1039.
- West, D. J. (1965). *Murder followed by suicide*. Cambridge, MA: Harvard University Press.
- Wilson, M., Daly, M., & Daniele, A. (1995). Familicide: The killing of spouse and children. *Aggressive Behavior*, 21, 275-291.