MRC Policy brief
No. 5, June 2004

"Every six hours a woman is killed by her intimate partner":

A National Study of Female Homicide in South Africa

Shanaaz Mathews[1], Naeemah Abrahams[1], Lorna J Martin[2], Lisa Vetten[3], Lize van der Merwe[4] and Rachel Jewkes[1]

[1]Gender and Health Research Group, Medical Research Council, PO Box 19070, Tygerberg, 7505. Tel.: (021) 938-0445, fax: (021) 938-0310, e-mail: naeema.abrahams@mrc.ac.za; smathews@mrc.ac.za
[2]Division of Forensic Medicine and Toxicology, University of Cape Town
[3]Centre for the Study of Violence and Reconciliation
[4]Biostatistics Unit, Medical Research Council

Background

The killing of women by intimate partners (also known as intimate female homicide or intimate femicide) is the most extreme form and consequence of violence against women. Globally, gender differences are found in homicide patterns. Men are at greater risk of being killed than women and this is mainly done by other men. Women, on the other hand, are primarily killed by the opposite gender (Goetting, 1988). The murder of women by an intimate partner accounts for between 40 – 70% of all female homicides (Dahlberg & Krug, 2002). This form of violence has received very little attention and the few studies that have been conducted have been mainly in developed countries. The only previous study conducted in South Africa was a pilot study in the Gauteng region. This study found that a woman is killed every six days in Gauteng by an intimate partner (Vetten 1996). Despite its limitations this research finding has been used extensively in advocacy campaigns.

Not much is known about who kills South African women and under which circumstances. International studies reveal that intimate femicide is linked to a history of domestic violence, with the risk increasing at the threat of separation or actual separation (Wilson & Daly 1993; Campbell et al 2003). Given the high levels of gender-based violence and the excessive rates of homicide in South Africa, it is critical for us to establish the size of the problem and the pattern of intimate femicide in South Africa. This policy brief reports on the findings of the first national female homicide study. We hope the findings will contribute to the development of appropriate interventions strategies to reduce intimate femicide.

Methodology
In a nutshell:

This study was retrospective, with data collected on female homicides of women aged 14 and over in South Africa in 1999. Data were collected from a national representative sample of 25 Medico-Legal laboratories (referred to here as mortuaries). This enabled the statistics to be weighted in order to estimate the national intimate femicide rate and factors associated with the murders and case outcomes.

Female homicides were identified from the death registers at the mortuaries. Cases were followed up via their police case number to their investigating officer and docket. Information on the cases was recorded from these sources as well as the post-mortem reports onto a standard data capture form. Cases were determined to be intimate, non-intimate or unknown based on all information available on the case and a common sense classification based on a balance of probabilities. Cases were classified as having a known perpetrator when:

- cases have gone to trial and convicted
- the perpetrator had been charged but not convicted for reasons other than his innocence; or
- if there was some certainty that he had committed the murder, but the case did not progress.

Definition of terms

Intimate femicide: The killing of a female person by an intimate partner (i.e. her current or ex- -husband or boyfriend, same sex partner or a rejected would-be lover)
Non-intimate femicide: The killing of a woman by someone other than an intimate partner.
Female homicide: Intimate and non-intimate femicide

Detailed methods:

Mortuaries (public and private) operating in 1999 were divided into three strata based on the number of post mortems done per annum. Large mortuaries performed more than 1500 post mortems per annum; medium mortuaries performed 500-1499 post mortems per annum; and small mortuaries performed less than 500 post mortems per annum. A proportionate random sample of mortuaries was drawn per strata – giving a sample of 25 mortuaries. Cases that were obviously suicides, train and motor vehicle accidents and other accidents were excluded at the mortuary collection phase.

Data were collected from March 2002 to December 2003. We hoped that most of the 1999 cases would have been processed through the courts by this time. A standardised pre-tested data capture sheet was used to record information. Initial data was captured from mortuary records. A telephonic or a face-to-face interview with the investigating officer/commanding officer or a review of police dockets followed to gather victim and perpetrator information. This included demographic details, victim-perpetrator relationship and relationship status, circumstances around the homicide, previous history of violence and legal outcome of the case. A final section abstracted from post-mortem reports by a forensic pathologist included information on the pathology of the case and an assessment of adequacy of the post-mortem report. Based on this sample the researcher was able to collect data on 905 female homicide cases. Survey sampling techniques were used to analyse the data. The modelling was done by multiple and ordered logistic regression and the risk factors for the different outcomes listed are those found to be independently associated after adjusting for the other factors in the model. All statistics presented here are estimates for the year 1999 in South Africa

Results

Data were collected from all sampled mortuaries. Complete data were only found for 86.7% of the women murdered. In 18.6% of the female murders, the victim-perpetrator relationship could not be established from the police sources. Police case numbers were not traced for 6.9% of women murdered and in 6.4% of cases no dockets could be found (see Figure 1). The analysis presented in this brief is based on the cases where the perpetrator was established i.e. excluding unknowns.

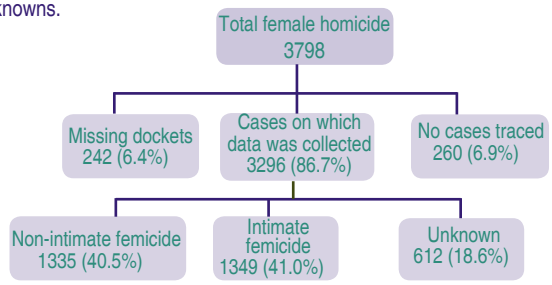

Figure 1: Estimated number of female homicides for 1999

Of the cases where relationship status could be established, 50.3% of the women were killed by an intimate partner. We estimate that 1349 women were murdered by an intimate partner nationally in 1999.

Table 1: Rates of intimate femicide by race for women 14 years & older

White	2.8 per 100 000
Coloured	18.3 per 100 000
Indian	7.5 per 100 000
African	8.9 per 100 000
Overall	8.8 per 100 000

The intimate femicide fatality rate by race group is shown in Table 1. The rate for Coloured women was more than double (18.3/100 000) the rate of African women (8.9/100 000) and more than six times that of White women. Perpetrators of intimate femicide were overwhelmingly male. Cohabiting partners were the most common perpetrators, followed by boyfriends and husbands (Table 2).

Table 2: Relationship status in intimate femicide cases

Relationship	Proportion
Cohabiting partner	50.1%
Boyfriend	29.9%
Husband (include traditional marriages)	18.4%
Incest Perpetrator	0.7%
Same Sex Partner	0.6%
Rejected person proposing love	0.3%

FINDINGS IN A NUTSHELL

- In South Africa 8.8 per 100 000 women 14years and older were killed by an intimate partner in 1999
- This amounts to 4 women killed per day by an intimate partner, or
- 1 woman is killed every 6 hours by an intimate partner
- 1 in every 2 women killed by a known perpetrator is killed by an intimate partner

Age, racial distribution and job occupation:

Women killed by intimates were on average significantly younger than women killed by non-intimates. The mean ages were 30.4 years and 41.2 years respectively (see Figure 2).

A significant difference in the age of perpetrators was found. Men who killed their partners were older than men that killed non-partners (see Table 3). On average perpetrators of intimate femicide were 4 years older than their victims while the perpetrators of non-intimate femicide were on average 9 years younger.

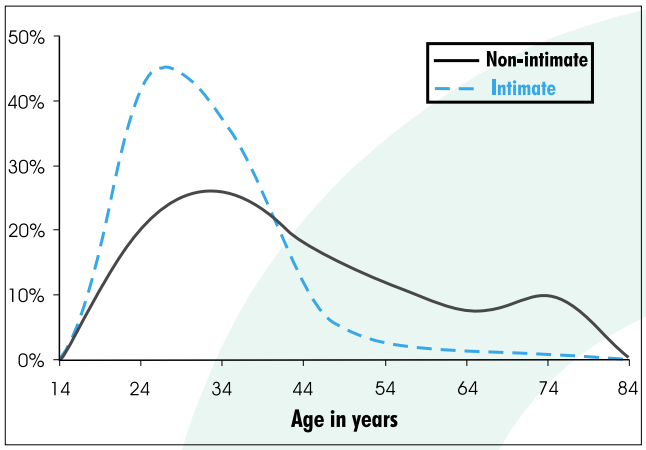

Figure 2: Age comparison of victim by type of female homicide

Table 3: Perpetrator age by type of female homicide

Years	Non- intimate Femicides	Intimate Femicides	All
<20	12.2 %	0.1 %	5.0 %
20 – 29	44.1 %	34.0 %	38.1 %
30 – 39	26.9 %	40.5 %	34.9 %
40 – 49	11.7 %	16.1 %	14.3 %
50 – 59	2.4 %	6.5 %	2.1 %
60+	4.2 %	2.7 %	1.1 %

The racial distribution of perpetrators is presented in Table 4 and is compared to the total population.

Table 4: Perpetrator race by type of female homicide

Race	Non-intimate Femicides	Intimate Femicides	SA Population*
African	68.3 %	76.4 %	76.6 %
Coloured	13.2 %	17.7 %	8.8 %
White	2.6 %	3.9 %	10.9 %
Indian	0.3 %	2.0 %	2.6 %
Unknown	15.6 %	0.0 %	0.9 %

***Statistics South Africa, 1998**

The comparison of the occupations between the two groups shows that perpetrators of intimate femicides were more likely to be blue collar workers, farm workers and security workers while perpetrators of non-intimates femicides were more likely to be unemployed, students, self employed or their occupation was unknown.

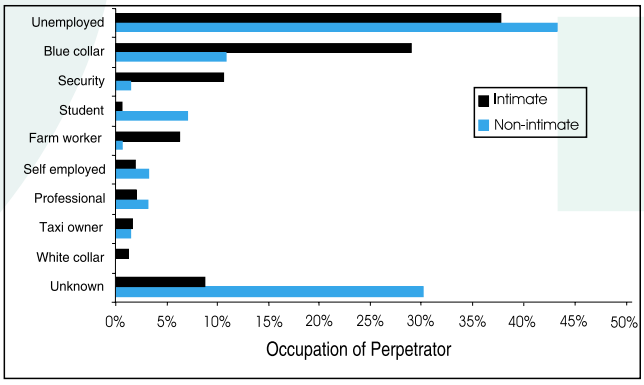

Figure 3: Perpetrator occupation by type of female homicide

Guns and alcohol

A significant difference in the proportion of possession of legal firearms and alcohol problems among perpetrators were found between the two groups. One in every five of the perpetrators of intimate femicide (20,6%) had a legal firearm compared to 3.5% of perpetrators of non-intimate femicide. More than a third (34.2%) of the perpetrators of intimate femicides had alcohol use problems compared to 12.5% of the perpetrators of non-intimate femicides.

How do intimate femicides differ from non-intimate femicides?

Women killed by intimates compared to women killed by non-intimates were more likely to

- be killed in their home
- be younger
- work as domestic workers
- be killed by a legal firearm
- be killed by blunt force
- to be killed by perpetrators that have a problem with alcohol.

Pensioners were more likely to be victims of non-intimate femicide.

Outcome of cases

Only 37.3% of the female homicides resulted in convictions (Table 5). Lack of evidence was the reason given in 69.9% of those that were acquitted.

Table 5: Legal and non-legal outcomes by type of female homicide

Outcomes	Non-Intimate Femicides	Intimate Femicides	All
Convicted	39.8%	35.1%	37.3%
Acquitted	16.2%	10.2%	12.9%
Charges withdrawn	12.0%	11.9%	11.9%
Trial in progress	0.8%	0.6%	0.8%
Charged awaiting trial	9.6%	8.8%	9.2%
Insane	0.3%	0.1%	0.3%
Suicide	3.8%	16.6%	9.9%
Homicide/natural	2.9%	5.6%	3.9%
Strongly suspected	0.9%	4.5%	2.9%
Never arrested	13.7%	6.6%	9.8%

Risk factors for being convicted of any female homicide:

Conviction less likely if

- women killed by intimate partner
- victim died of a gunshot wound
- victim was a domestic worker

Conviction more likely if

- there was a history of intimate partner violence
- the perpetrators were blue-collar workers and farm workers
- the race of the victim was White
- weapon was found

Risk factors for being convicted for intimate femicide

Conviction more likely if

- there was a history of intimate partner violence
- weapon was found
- perpetrator was a farm worker

Risk factors for being convicted for non-intimate femicide:

Conviction more likely if

- a weapon was found

Conviction less likely if

- the victim was an African women

Sentencing

A significant difference in the average sentences for perpetrators between the two groups was found. The average sentence handed down for perpetrators of intimate femicide was 10.7 years in comparison to 12.4 years for perpetrators of non-intimate femicide (see Figure 4).

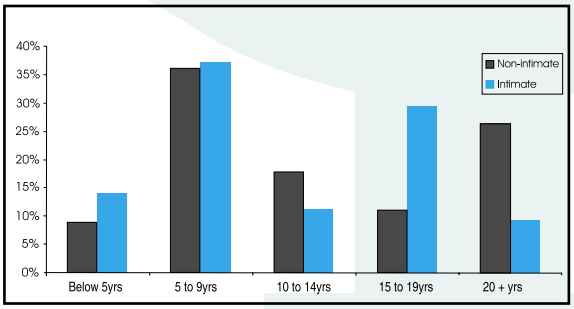

Figure 4: Jail time served by type of female homicide

Risk factors for longer jail term for any female homicide was:
Longer jail sentence given if :

- perpetrator found with a legal or an illegal gun
- DNA specimens taken
- evidence of sexual violence
- victim was White

Risk factors for sentencing for intimate femicide:
Longer jail term if :

- perpetrator was found with a legal gun
- evidence of sexual violence

Risk factors for sentencing for non-intimate femicide
A longer jail sentence given if:

- victim was White
- perpetrator was found with a legal gun

Medico-legal findings

Almost 2% of the all the female murder victims were pregnant. In 15.3% of cases, the female victims had been sexually assaulted. Samples were sent for DNA analysis in only 3.5 % of the intimate femicide cases. In 21.2% of cases that had evidence of sexual assault, a genital swab was not taken.

Overall the assessment of the quality of postmortem reports found that 39% were below adequate. The quality of post mortems was least satisfactory at the smaller mortuaries, where 67.6% of the reports were found to be below adequate.

Weaknesses in the medical and legal management of female murder cases highlighted by this study

- **In a considerable proportion of cases the relationship between victim and perpetrator could not be established.** Therefore the rate of intimate femicide estimated from this study is likely to be a conservative estimate of the true level of this crime.

- **Police cases not opened or investigations incomplete:** In 6.9% of probable homicides identified at mortuaries there was no police case number. This conclusion was drawn after many months of exhaustive searching. There was thus no evidence of a police investigation. Attempts to find these numbers revealed that victims of homicide could not be traced via their names or ID numbers in the SAPS computerised database, even when these are known. This results in cases with wrong or missing CAS numbers not being successfully traced. Dockets frequently revealed that cases had not been properly investigated and leads had been inadequately followed up.

- **Weaknesses in police filing systems:** In 6.4% of cases dockets were missing at police stations. Some dockets were incomplete and 2.7% lacked post-mortem reports. Records of the whereabouts of the movement of missing dockets were not adequately kept. There is no back-up information system if dockets were lost. Some police stations have no organised docket filing system or room.

- **Weaknesses in mortuary information systems:** Death registers or similar case record systems were found to be absent or incomplete at some mortuaries.

• **Weaknesses in police station information systems:** The lack of a book with chronological recording of case numbers and allocated investigating officers prevented these details being ascertained in some stations and information on murdered women traced.

• **Material information on the state of the relationship prior to the murder was not collected:** The history of previous intimate partner violence was very important for convictions but it was not known for 66% of the cases of intimate femicide. This information should be routinely collected by police and may provide clues to the possible perpetrator. It should be possible to use this as evidence in court to establish that the homicide is the culmination of a pattern of violence behaviour towards the partner. There are no police guidelines on investigating female murders, these could be helpful and should include establishing the nature of current or previous relationships.

• **Inadequate conviction rate:** The study revealed many cases that had not been closed because witnesses had 'disappeared', perpetrators were released after confessing to the crime and were not rearrested, identified suspects were not arrested and cases were dropped when suspects did not appear in court.

Conclusion

A woman is killed by her intimate partner in South Africa every six hours. This is the highest rate (8.8 per 100 000 female population 14 years and more) that has ever been reported in research anywhere in the world.

The role of legal guns in the murder of women by their intimate partners is revealing and point to the need for better gun control and the seriousness of implementing the new Firearms Control Act.

The study findings confirm the role of alcohol in intimate partner violence and points to the need for dedicated prevention intervention with young people.

The examination of post-mortem reports reveals a number of weaknesses in pathology services, especially in smaller mortuaries which tended to be in rural areas. Addressing these should be part of the current restructuring of medico-legal services.

Specimens are infrequently sent for DNA analysis yet it played an important role in the sentencing of cases that reached conviction. It is recommended that evidence collection be reformed by augmenting the current emphasis placed on physical evidence with a similar emphasis on scientific and biological evidence. Forensic laboratories need to have the resources to adequately analyse DNA samples from homicide cases and re-examine their priorities so that homicide is given the priority it rightly deserves.

The findings of the legal outcome of cases point to the likelihood that there is unreasonable bias in conviction and sentencing. Conviction was more likely and sentences were longer if white women were victims or perpetrators had certain occupations. This needs further investigation, it may indicate lower quality of legal representation of poor men and suggests that the life of a White woman is still considered to be worth more than that of others.

The study showed the value of research on crime and has highlighted the benefits of a public crime database which could be used for analysis and communication with stakeholders. This could be assisted with a centralised crime register for female murders ensuring collection and analysis of data to improve management and processing of female murder cases in South Africa.
The history of partner violence in the relationship was important in the conviction of cases. Female homicide is different from other crimes and information on the women's relationship must be collected in the investigation of cases. It is thus important for the development of guidelines for training officers in the investigation of female murders.

This study has highlighted a number of weaknesses in the management of female homicides and possible homicides by the police and judicial system. Addressing needs of the police is a priority whether through building the capacity of officers to investigate female homicides, looking at staffing levels or introducing case investigation guidelines.

Homicide is the most serious of all crimes in our crime-ridden society and intimate femicide is the most serious form and consequence of domestic violence and gender inequity. Combating these crimes requires there to be built a common understanding that it is not primarily a matter of death but one of the quality and value placed on women's lives.

References

Campbell, J. C., Webster, D., Kozoil-Mclain, J., Block, C., Campbell, D., et al. 2003, "Risk factors for femicide in abusive relationships: Results from a multi-site case control study", Am J Public Health, vol. 93, no. 7, pp. 1089-1097.
Dahlberg, L. L. & Krug, E. G. 2002, "Violence - a global public health problem.," in World report on violence and health., E. G. Krug et al., eds., World Health Organization, Geneva, pp. 3-21.
Department of Health. 2002. South African Demographic and Health Survey 1998. Department of Health.
Goetting, A. 1988, "Patterns of Homicide among Women", J Int Viol, vol. 3, no1 p3-19.
Vetten, L. "Man shoots wife": Intimate femicide in Gauteng, South Africa. Internet Journal. 6-1-1996.
Wilson, M. & Daly, M. 1993, "Spousal Homicide Risk and Estrangement", Viol and Victims, vol. 8, no. 1, pp. 3-16.
Matzopoulos R. 2002. A profile of fatal injuries in South Africa. Third Annual report of the National Injury Mortality Surveillance System. Crime Violence & Injury Lead Programme, Medical Research Council.
Statistic South Africa. 1998. The people of South Africa: Population Census, 1996. Census in brief. Statistics South Africa, Pretoria.

We recommend that:

- A public crime data-base be established
- Investigating Officers be trained in the handling of female murders
- Guidelines for the investigation of female murders be developed for training
- Guidelines be developed for the integrated management of cases between police, prosecutors and pathologists
- Homicide dockets be monitored by police and prosecutors after they come into police stations to ensure that the investigation is thorough and timeous
- Laws of evidence be reformed to allow a previous history of domestic violence to be introduced in court to establish that the homicide is the culmination of a pattern of violence towards the partner
- Further efforts be made to improve mortuary and police information systems
- Specimens of DNA are collected and used more often in evidence
- The Department of Health improve post mortem services especially in rural areas
- Gun control be vigorously reinforced
- Further measures be taken to reduce substance abuse
- Efforts to reduce domestic violence be prioritised