Homicide

1 in a series of 8 resource papers:

- Child Abuse and Neglect
- Elder Abuse
- Homicide
- Human Trafficking
- Identity Theft
- Impaired Driving
- Intimate Partner Violence
- Sexual Assault
Homicide*

Homicide profoundly affects the mental, physical and often financial well-being of family members and friends of the murdered victim. The “homicide differential” clearly establishes the unique and often devastating impact of a homicide on co-victims. This paper describes the scope of homicide in the United States, the homicide differential, the extent of trauma experienced by family members and friends of the deceased victim, and effective strategies for victim assistance and justice system responses to co-victims of homicide. It offers guidelines for addressing victim advocacy and support, and collaborative responses to homicide co-victims.

Statistics

The following statistics come from the “Crime Victimization in the United States Statistical Overviews” produced by the Office for Victims of Crime for National Crime Victims’ Rights Week, 2012:

- An estimated 14,748 persons were murdered nationwide in 2010, a 4.2 percent decline from 2009.¹
- In 2010, for homicides in which the age of the victim was known, 9.9 percent of murder victims were under 18; 32.9 percent were between the ages of 20 and 29; 20.4 percent were between the ages of 30 and 39; 13.4 percent were between 40 and 49; 11.6 percent were between 50 and 64; and 4.6 percent were ages 65 and older.²
- For homicides in which the age of the victim was known, teenagers (ages 13 to 19) accounted for 12.4 percent of murder victims in 2010.³
- In 2010, 77.4 percent of murder victims were male and 22.5 percent female.⁴
- The sex of the offender was known in 73.2 percent of homicide cases in 2010. Among those cases, 90.3 percent of offenders were male and 9.7 percent were female.⁵
- In the majority of homicide cases in 2010 in which the age of the offender was known, most offenders (92%) were 18 or older.⁶

¹This resource paper was originally authored in 2007 by Anne Seymour, Justice Solutions, Inc., Washington, D.C., and reviewed and edited by Mario Gaboury, Ph.D., University of New Haven. Jeffrey Dion, National Center for Victims of Crime, reviewed and updated the content in 2009. Dianne Barker Harrold, Unified Solutions Tribal Community Development Group, reviewed and updated the content in 2012.
In 2010, 46.5 percent of homicide victims were white and 49.8 percent were black. For 3.7 percent of victims, race was classified as “other” or “unknown.”

In 2010, homicide was generally intra-racial where the race of the victim and offender was known: white offenders murdered 83 percent of white victims, and black offenders murdered 90 percent of black victims.

In 2010, for homicides in which the type of weapon was specified, 68 percent of the offenses were committed with firearms.

Knives or cutting instruments were used in 13 percent of murders, and personal weapons (e.g., hands, fists, feet, etc.) were used in approximately six percent of murders.

In 2010, where the victim-offender relationship was known, 37.4 percent of homicide victims were killed by an acquaintance; 8.4 percent were killed by an intimate partner (husband, wife, boyfriend, or girlfriend); 15 percent were killed by a family member; and 5.5 percent were killed by a friend. Another 22.2 percent were killed by a stranger.

In 2010, homicides occurred in connection with another felony (such as rape, robbery, or arson) in at least 14.8 percent of incidents.

At least six percent of murder victims in 2010 were robbed in conjunction with being killed.

During 2008, 1,740 children died due to child abuse or neglect. More than three-quarters (80%) of these children were younger than 4 years of age.

Law enforcement cleared (by arrest or exceptional means) 64.8 percent of the murders that occurred nationwide in 2010.

In 2009, 48 law enforcement officers were feloniously killed in the line of duty; 47 were male and one was female.

Of the 48 officers feloniously killed in 2009, 15 of the slain officers were ambushed; eight were involved in arrest situations; eight were performing traffic stops; six were answering disturbance calls; five were involved in tactical situations (e.g., high-risk entry); four were investigating suspicious persons/circumstances; and two were handling, transporting, or maintaining custody of prisoners.
Definitions

Spousal homicide: The killing of a spouse, life partner, or other significant individual of the same or opposite sex with whom one has lived for some time and formed a stable relationship.

Child homicide: The killing of a person under the age of 18.

Shaken baby syndrome: The violent shaking of a young child that causes permanent brain injury and/or death.

Parricide: The killing of one’s parent.

Stranger homicide: The killing of a person or persons by an individual unknown to the victim.

Mass murders: The murder of several victims within a few moments or hours of each other.

Serial killing: The violent acts of an offender who kills over time. They usually have at least three to four victims, and their killing is characterized by a pattern in the type of the victims selected, or the method or motives used in the killings.

Capital case: A murder case for which a possible sentence is the death penalty.

Unique Impact/Effects on Co-Victims of Homicide

What compels an individual to take the life of another? Eric Hickey, editor of the Encyclopedia of Murder and Violent Crime, explains:18

Learning more about how individuals develop their motivations and working toward treating, eliminating, or making those motivators less enticing before homicidal actions occur could help reduce the frequency of such violent acts. The following is a list of some of the most common motives for committing murder: abandonment/rejection, altruism, alcohol and drugs, escape, fame/celebrity, fatal abuse, protection of self or others, greed, hate/resentment, honor, insanity/mental illness, media influence, murder suicide, power/control, political ideals, rage, religion, rivalry/jealousy, and unwanted children.

Homicide includes all deaths caused by willful murder and non-negligent manslaughter. Most singularly, homicide devastates and unhinges the lives of family members, friends, neighbors, coworkers, and acquaintances of the murdered victim. Family members and individuals who had special ties of kinship and connection with murdered victims experience a complex and complicated range of reactions to the deplorable act of
homicide. While the term “survivor” describes the circumstances that family members and friends enter following a homicidal death of a loved one, the term “co-victims” of homicide is generally used to describe the level and intensity of their reactions.

Homicide is very different from other types of death. Dr. Edward K. Rynearson of Separation and Loss Services at the Virginia Mason Medical Center in Seattle, Washington, explains “the uniqueness of unnatural dying:”

When someone close dies, it is natural to mourn their loss – to think of them with sorrow and miss their presence in your life. If they died from a natural death (from disease or old age), then the dying would be understandable. One could understand what was going wrong in their body and why they couldn’t be saved – and if the natural dying went on for weeks, months or years, you would have time to adjust to what was happening and could begin to say goodbye.

This is not the case with unnatural dying; when someone close dies an unnatural death, you not only mourn their loss but are forced to adjust to the unnatural way that they died. It is a double blow: not only have they died, but the way they died is senseless. Unnatural dying is abrupt and traumatic. There is no time for goodbye.19

Rynearson also identifies three unique dimensions that make unnatural dying different from natural dying:

1. **Violence:** The dying is injurious and often mutilating.
2. **Violation:** The dying is transgressive. Except for suicide, unnatural dying is forced upon the deceased, who has no choice in avoiding or preventing it.
3. **Volition:** The dying is a human act of intention (in the case of homicide or suicide) or involves some degree of negligence or fault in the case of an accident.20

In 1996, Carroll Ann Ellis, then-director of victim services for the Fairfax County, Virginia, Police Department, elaborated on these dimensions by describing what is called “the homicide differential:”

We have come to recognize that family members and individuals who had special ties of kinship with murder victims experience a complex and complicated range of reactions to the deplorable act of homicide. These reactions include shock, trauma, denial, disbelief and anger at the sudden, unexpected and devastating loss. For homicide co-victims who do not receive support or mental health counseling, these reactions do not go away, and often intensify with time.

In order to understand the breadth and depth of criminal homicide, it is necessary to recognize that (1) death by homicide differs from other types of death; and (2) cultural attitudes toward death and spirituality influence societal perceptions of homicide. This is called the “homicide differential.” Just as there are unique physical,
mental, emotional, social and financial components to every sudden death, there are
spiritual ramifications as well. Those who have never thought much about God before
will often do so after a loved one has died under traumatic circumstances. Persons of
faith, for example, who assume that what happens to them is “God’s will” are forced
to reshape their faith positions to incorporate the fact that bad things do, indeed,
happen to good people.21

Specific, unique elements of the homicide differential include the following:

- **The intent to harm.** One of the most important factors distinguishing death caused by
criminal means and other forms of dying is the intent of the murderer to harm the
victim. Co-victims must deal with the anger, rage, and violence that have been
inflicted upon someone they love.

- **Stigma.** Society sometimes places blame on murder victims for their own death,
which imputes blame to the victim’s family when it is believed that they should have
helped control the behavior that led to the death. As a result, “co-victims of homicide
often feel abandoned, ashamed, powerless and vulnerable.”22

- **Isolation.** The murder of a loved one can lead to isolation of surviving family
members. The isolation may be self-imposed by co-victims who do not wish to
discuss their loss with others or may feel that no one could understand their grief.
This isolation may facilitate victims who seek to avoid their feelings, thus delaying
the victims’ grief process and, thus, delaying their recovery. Other co-victims may
suffer from isolation unwillingly when friends stop calling because they are unsure of
what to say or how to help. Months after the murder friends may grow uncomfortable
with the co-victim continually talking about the loss or the deceased. Other
acquaintances may find that spending time with the co-victim is a painful reminder of
their own personal vulnerability.

- **Media and public view.** Co-victims are thrust quickly into public view and can
become the subjects of media stories. While some journalists exercise consideration
and objectivity in their reporting of homicide cases, the degree of intrusion into the
lives of co-victims constitutes a major difference between criminal homicide and
deaths resulting from accidents or other causes.

- **Criminal or juvenile justice system.** Unlike family members of individuals who die
natural deaths, co-victims of homicide are thrust into a complex system of legal
players and jargon. Co-victims must quickly become acquainted with a world of
crime scenes, evidence, and autopsies. Co-victims of homicide have much to learn
about the investigative, prosecutorial, and judiciary branches of the criminal or
juvenile justice system in a very short time. They are often expected to quickly
comprehend a system that may in some instances be insensitive and specifically
designed to protect the rights of the accused, with little regard for the victim.
Bereavement. As early as 1983, Rynearson determined that intense bereavement after homicide is so prevalent that it deserves clinical attention. His clinical studies revealed that the psychological reactions of the family members of murder victims differed significantly from previously experienced forms of bereavement following the natural death of a relative. Rynearson’s research forms the basis of the shift from viewing co-victims’ grief issues separately from the impact of trauma associated with the death of a family member.

Traumatic grief. Traumatic grief following a homicide is distinctive from other forms of grief because of the overlap of symptoms created by the co-victims’ inability to move through the grief process because of a preoccupation with the trauma itself. Homicidal deaths are sudden, unexplainable, and unjust, involve violence, and therefore inflict trauma. Co-victims struggle with two distinct processes: (1) the grief associated with the loss of a loved one; and (2) wounding of the spirit created by the trauma. Both processes impose a tremendous psychological burden.

In capital murder cases, the homicide differential can be exacerbated by issues related to personal feelings about the death penalty. Co-victims often feel that they must consider the deceased victim’s feelings about the death penalty, if such feelings are known, and, if not, family members’ perspectives of what those feelings were may differ. Co-victims must consider their own feelings as well. Yet such considerations are not always accepted by courts. California victim advocate Sharon English, whose mother, Chloe English, was murdered by a parolee she had met through a prison ministry, believes that “most often, we never think about what the victim would want.” In her case, her mother opposed the death penalty. English observed that “we wouldn’t want to put doubt in the jury’s mind about what the victim wants.”

Reactions of Homicide Co-Victims

Although many emotional responses are shared by family members when a loved one is murdered, each surviving family member will have his or her own distinct response. After the sudden, violent death of a loved one, co-victims may experience additional stress if the deceased was subjected to acts of torture, sexual assault, or other intrusive, heinous acts. They may have a constant need to be reassured that the death was quick and painless and that suffering was minimal. If the death was one of torture or of long duration, they may become emotionally fixated on what the victim must have felt and the terror experienced. They may fixate on the race of the offender to try to understand the motive behind the murder, and may develop a biased view of a certain race or culture based on the actions of the offender. If the offender was a family member or friend, co-victims may experience additional intrafamilial discord as family members choose sides for support.

People working with homicide co-victims often hear this one comment—“all I want is my [friend or family member] back”—which is an impossibility, of course, but exhibits the insurmountable loss they have suffered. The one question that law enforcement and
prosecutors hear is “Why did this happen to my [friend or loved one]?” In the justice system, we can answer the how a person was killed but the why is not easily explained. It is difficult to explain why anyone takes the life of another human; there are hundreds of examples of homicides committed for no valid or justifiable reason. Taking a human life is the ultimate act of violence, an act that is irreversible.

Victim advocates should be prepared to respond to these types of difficult comments and questions by offering support and referrals for other interventions and support persons such as spiritual support, counselors, or assistance that is culturally appropriate.

Co-victims themselves provide the most accurate information regarding their experiences during this period. They become experts in explaining their problems and needs. In addition to personal trauma, Parents of Murdered Children, Inc. lists eight additional problem areas co-victims must navigate:

1. **Financial considerations.** Expenses related to funeral, burial, medical treatment, psychiatric care for family members, and other costs are all part of the aftermath experienced by co-victims. These considerations are grave and contribute in a major way to the continuing distress experienced.

2. **The criminal or juvenile justice system.** Co-victims of homicide have a vested interest in participating in the criminal or juvenile justice system and understanding the complex issues of a cumbersome legal system.

When members of a homicide support group (Fairfax Peer Survivors Group) in Fairfax, Virginia, were polled about their needs during the legal process, the single most important issue for them was their ability to obtain information from the prosecutors, detectives, and other professionals. They—

- Wanted to know exactly how, when, and why their loved one was murdered and who committed the murder.
- Wanted to know if their loved one suffered.
- Wanted to know the truth about the events of the death and elements needed to support the charge.
- Expected to feel better if the case was successfully prosecuted.

Minimizing the family’s contribution to a case discounts the pain of their victimization. Co-victims feel devalued when they are not allowed input into plea decisions and when they are barred from criminal or juvenile justice proceedings. They are distraught when the imposition of a technical rule—e.g., the court’s sequestration of witnesses, which may conflict with a victim’s right to attend the trial—may eliminate their last opportunity to do something for their loved one.
3. **Employment.** A co-victim’s ability to function and perform on the job is diminished. Motivation is sometimes altered. They experience emotional bursts of crying or losing their tempers. They are impatient with trivia. Having to explain or apologize can create additional stress. Some co-victims use work as an escape to avoid working through their grief. They resist dealing directly with their pain by placing it on hold while at work.

4. **Marriage.** It is common for marital partners to have difficulty relating, and they may even separate after a death due to homicide. (Divorces, however, are not as common as once believed.) Each partner may grieve differently. They may blame each other for the loss, particularly in the case of the death of a child. They may each wish to turn away from the memories that the other partner evokes. They are sometimes unable to help each other because they cannot help themselves.

5. **Children.** Parents often fail to communicate with their children by either ignoring them when they are preoccupied with their own issues or hoping to protect them from unnecessary trauma. The children, in turn, fear adding to their parent’s pain and simply withdraw. Children who witness the killing of someone they love experience profound emotional trauma, including posttraumatic stress disorder, and may not readily receive adequate intervention.

Furthermore, young people who report having to perform tasks associated with the fatal injury, such as telephoning for police or emergency medical services, or responding to the immediate needs of the injured person or the perpetrator, are often traumatized. When the issue of blame or accountability for the death is not resolved through police investigation, children may re-examine their behavior, believing that if they had done something differently, they could have prevented the death. Without support and an opportunity to explore the feasibility of such alternatives, children often continue to blame themselves unnecessarily.

6. **Religious faith.** Questions for, anger at, and challenges to God surface regarding the reason for the death. How could a loving God allow it to happen? Where is the loved one? Some conclude, at least for a while, that “if there were a God, then God would not have let this happen. Since it happened, there must not be a God.” Other victims find their faith to be a source of strength, comfort, and resilience. Each victim must decide for himself or herself which beliefs will assist their recovery. Past religious beliefs may be insufficient to address the challenges faced in the aftermath of the homicide. Faithful co-victims seeking to understand sometimes look for answers from unorthodox sources. Over-simplistic comments and “answers” from clergy and church members sometimes are confusing or hurtful for co-victims who take their spiritual pilgrimage seriously and are seeking insight or solace from their faith.

7. **The media.** Many homicide co-victims are subjected to the intrusion of what they perceive to be an insensitive media. The competitive quest for sensational, fast-breaking news items may override the need for privacy of anguishing families, who
may be experiencing prolonged scrutiny, inaccurate reporting, and gruesome reminders of the violence associated with the death.

8. **Professionals who do not understand.** Co-victims report that too many professionals (police, court personnel, hospital personnel, funeral directors, clergy, school personnel, psychologists, and psychiatrists) demonstrate by their comments and actions that they do not fully understand the impact of death by homicide upon the remaining family members.

### Effective Responses for Victim Support and Advocacy, Medical and Mental Health Treatment, and Advocacy for Justice System Participation

It is essential that sensitive and effective support for co-victims of homicide begins from the moment the body of the homicide victim is discovered. The crime scene investigation should include respect and regard for the body of the deceased. Shielding and protecting the scene from onlookers and the media creates at best a modicum of privacy. Co-victims should be spared the sensationalism of the exposed body of their loved one being viewed by a rash of strangers before an official identification has been made. Frequently, homicide detectives charged with investigating homicidal deaths have as an early responsibility the task of eliminating family members as suspects in some cases. This is a delicate process that requires extreme sensitivity to the co-victim’s position of pain and anguish at the same time having to be eliminated as a suspect in the death of their beloved child, parent, spouse, relative and/or dearest friend.

### Victim Support and Advocacy

Victim service providers can—

- Help co-victims by responding to their needs as rapidly as possible through whatever mechanism exists for the immediate and direct provision of victim services.

- Be a conduit for the provision of information to co-victims.

- Be instrumental in ensuring that co-victims are kept abreast of the status of the investigation by law enforcement.

- Ensure that co-victims are afforded information about the investigation and criminal or juvenile justice process. Please note that although most victims will want to know even the smallest detail, not all victims will want this information. Find out the victim’s desire for this type of information and act accordingly. It is helpful to identify one family member who will disseminate information throughout the family, but be aware that all family members will need your time and attention.
Recognize that co-victims should be allowed to—

- Grieve in whatever manner they wish and for as long as they wish.
- Cry freely. Crying and other forms of sadness can be a healthy expression of grief and release of tension.
- Personalize the deceased. Ask the family to tell you stories or show you pictures. Ask about the victim’s hobbies, dreams, and desires. Allow the co-victim(s) to criticize the victim and to talk about the good times and the bad times.
- Be unhampered and free from any pressure to meet expectations from others to forgive or feel compassion or regret for the offender’s position or plight.

Reassure the co-victims that the murder was neither their fault nor the victim’s fault.

Openly express condolences and sorrow regarding the murder when meeting with co-victims.

Determine the co-victim’s need for contact. Some co-victims will require constant contact, while others will want minimal intervention. Temper your need to help if help is not needed or wanted.

Determine if co-victims need help with funeral arrangements or other family-notification responsibilities. If yes, offer to help.

Let the co-victims know you remember, too, by remembering them at holiday times, on the anniversary date of the murder, and the victim’s birthday. Provide them with guidance about how to cope with the holidays.

Let co-victims know that you care about them and will remain available and responsive to their needs.

Protect co-victims from unwanted media attention but assist those victims who wish to speak to the media. The Dart Center for Journalism and Trauma provides tips to journalists who cover murder cases; this information can also be beneficial to victim service providers. It can be accessed at www.dartcenter.org/topic/homicide.

Provide co-victims with information regarding mental health counselors, grief therapists, support groups, and local and national organizations well versed in supporting the needs of co-victims of homicide.

Be aware that coping with the trauma of homicide can lead to substance abuse problems for co-victims. Make appropriate referrals, when indicated, to qualified mental health professionals who specialize in the assessment of substance abuse problems.
Victim service providers can also—

- Allow co-victims to express anger openly at the criminal or juvenile justice system, the murderer, the victim, or simply the unfairness of life. Anger needs to be expressed.

- Learn as much as possible about the case before speaking with the family. If the information is not flattering to the deceased but may affect the investigation of the case, alert the family to these facts as tactfully and sensitively as possible. Prepare them for media reporting of such information.

- Alert the prosecutor or law enforcement representative of any co-victim’s concerns for safety, or other emotional or physical concerns.

- Realize that financial considerations are paramount in any murder case, but especially those in which the victim contributed significantly to the family’s support. Help co-victims file for insurance benefits, crime victim compensation, co-victims’ benefits under Social Security or the Veterans Administration, etc. Help them seek restitution orders through victim impact statements and presentencing investigation reports.

- Inform co-victims of their rights to file civil suits against the offender or third parties, where applicable. Co-victims have a limited amount of time to file these claims. Failing to inform them of potential civil remedies may cause co-victims to forfeit their right to be compensated. Co-victims should seek legal advice from experienced, sensitive crime victim civil attorneys.\(^\text{28}\)

- Review, as necessary, all autopsy and/or murder scene photographs to determine the suitability of family members remaining in the courtroom. Some co-victims will want to remain no matter how graphic the evidence is. Remember, the final decision is up to the co-victim.

- Consider using a family friend or distant relative to identify the victim in any court proceedings if using an immediate family member will disqualify him or her from remaining in the courtroom throughout the trial. Check beforehand with the prosecutor concerning state laws or court rules allowing this.

- Provide all court services to co-victims that are available to victims of other crimes, such as accompanying them to court or arranging secure waiting rooms. Assist in preparing victim impact statements, documenting restitution, or completing presentencing investigation reports, as appropriate.

- Set realistic expectations for co-victims about the impact of the justice system on their recovery. Many look to the resolution of the justice process for resolution of their grief. They expect that everything will get better once the trial is over or once the murderer is executed, yet once those events transpire many co-victims are frustrated to find that their suffering has not been relieved.
- Prepare co-victims for the impact of anniversaries and other triggers. Some survivors are surprised to find how quickly an occurrence—such as a news event or even the unexpected death of the perpetrator—can rekindle those sensations of grief even decades after the murder took place.

- Give co-victims as much written information as possible, especially at times when they may be overwhelmed with information or events.

- Ensure that co-victims know their rights regarding parole release hearings (in applicable cases). These rights include notification of parole consideration hearings; victim protection to address real and perceived fears; restitution and other financial/legal obligations; the provision of victim impact statements (including both a record of the victim impact statement at sentencing as well as oral, written, videotaped, or audiotaped victim impact statement at parole hearings); and information and referrals to community support services.

- Determine if surviving family members have any desire to meet face-to-face with the criminal who murdered their loved one. While this concept may seem much too painful to some people, the State of Texas has over 300 surviving family members of homicide victims who want to meet with the murderers of their loved ones through its highly structured victim-offender mediation program. It is the co-victim’s choice, and if the opportunity is available, it is important to offer co-victims this option.

- For surviving family members who have reached a point of reconstructing their lives in the aftermath of homicide, determine if they would like to participate in programs such as victim impact panels. Some of the most powerful speakers about victim trauma and the injustices victims endure, for both convicted offenders and justice professionals, are people who have suffered the immeasurable loss of a loved one through violent means. Many co-victims feel empowered by reasserting their control over their lives and taking positive action in response to their loved one’s murder.

- Be sensitive to cultural issues. Throughout the country, whether a homicide occurs in a large city or metropolitan area, a rural area or an area predominately occupied by a specific ethnic group, cultural considerations should be a part of victim advocacy. Cultural and spiritual support can be an important part of the healing process for co-victims of homicide. Cultural competence is defined as the ability to function effectively in the context of cultural differences. Service providers should ensure that the following five elements of cultural competence are addressed:
  1. Awareness, acceptance and valuing of cultural differences.
  2. Awareness of one’s own culture and values.
  3. Understanding the range of dynamics that result from the interaction between people of different cultures.
4. Developing cultural knowledge of the particular community served or accessing cultural brokers who may have that knowledge.

5. Ability to adapt individual interventions, programs, and policies to fit the cultural context of the individual, family, or community.

In cases involving convictions with a penalty of death—

- Be prepared to provide long-term victim assistance. Help co-victims understand the appellate process and provide guidance through any and all appeals that the convicted murderer may file. Be prepared to coordinate appellate-level activities, death penalty, and execution activities with the state attorney general and Department of Corrections’ victim services program.

- Determine if co-victims have the right to witness the execution and, if so, coordinate this sensitive service with the state Department of Corrections and its victim services program. Most states provide specialized services and separate viewing areas for co-victims. It is also important to provide follow-on supportive services, such as accompaniment to the cemetery in which the victim is buried and media intervention on the co-victim’s behalf.

### Mental Health Issues

In “Recovery from Unnatural Death,” Rynearson addresses both individual psychotherapy and family therapy, along with key issues for mental health professionals to consider, in response to co-victims in the aftermath of a homicide:

Some individuals remain distressed for several months after the death and are more comfortable in individual counseling. Finding an appropriate individual therapist may be challenging. A minority of therapists have been trained to help co-victims recover from a complicated, unnatural death. A knowledgeable therapist will recognize that trauma distress leads to more dysfunction than separation distress. The presence of recurrent re-enactment imagery and feelings of intense fear are strongly associated with the need for treatment. Once treatment begins, it is this trauma distress that takes priority in management. If the individual therapist is unaware of this need, therapy may reach a sudden impasse of heightened frustration, resistance, and termination.

The unnatural death of a family member may have significant impact on the relationships among family members. Since the family system is a primary source of support during recovery, it may be helpful to have one or several family sessions. The objective of these sessions will be supportive, allowing family members to clarify how they are dealing with this tragedy and reinforcing the acceptance and respect for individual differences. The entire family will be traumatized by the death. This is not the time to deal with longstanding issues of conflict. An inexperienced family therapist may create the same scenario of heightened frustration, resistance, and termination if they fail to deal directly with the shared traumatic distress.
Many jurisdictions sponsor victim support groups specific to homicide co-victims. Some groups are facilitated by a mental health professional or victim service provider, while others are facilitated by actual co-victims of homicide. Generally, support groups provide a regularly scheduled forum for participants to—

- Share their personal experiences, trauma, and grief with others who can understand their pain.
- Become aware that they are not alone and that they can learn from the experiences of other co-victims.
- Better understand and be able to exercise their rights as victims of crime.
- Receive guidance about how to deal with the justice system and the news media.
- Receive information about and referrals to support services that can help them in the aftermath of a homicide.

Information about support groups for co-victims is available from the National Office of Parents of Murdered Children (www.pomc.org), or from prosecutor-based victim assistance programs in most jurisdictions.

**Advocacy for Justice System Participation**

In *Homicide, Bereavement, and the Criminal Justice System Final Report*, authors Goodrum and Stafford identified homicide co-victims’ most common frustrations with and expectations of criminal justice officials. Co-victims in this study described three main law enforcement policies as presenting obstacles to their grief:

- Taking possession of their deceased loved one’s corpse (many co-victims express an interest in viewing their deceased loved one’s body).
- Controlling information about the death and the investigation (co-victims wanted detectives to consider information about the cause of death, which is often dismissed; not providing enough information about the way their loved one died and/or the status of the case).
- Prioritizing some cases over others.

Goodrum and Stafford also identified co-victims’ two main frustrations with district attorneys offices: timing and turnover. The time delay from indictment to trial appears to delay co-victims from moving forward in their bereavement and from getting answers to their questions. In addition, decisions to move a prosecutor from one case to another gives co-victims the impression that their case and thus their loved one are not valued within the agency.
The co-authors also offer a summary of key trial issues that affect homicide co-victims:

The trial is a ritual that reaffirms the criminal justice system’s beliefs, and it upholds the distinction between the sacred (legal) and the profane (illegal) …. When the defendant or defense attorney’s behavior at trial does not uphold the sacred nature of the ritual, the bereaved become upset. When a jury’s decision does not reflect the bereaved’s understanding of the murder or the weight of their loss, they feel that the ritual and the system are illegitimate. The perception that there is no justice for you or your loved one is unsettling for bereaved.


Information is critical. The research cited above offers insights into the importance of providing timely, accurate information to co-victims regarding the status of the case and, in cases involving an arrest, the status of the alleged or convicted offender. All co-victims need information about their rights and the criminal justice process. Co-victim information begins with the death notification and continues throughout the justice process, including information about—

- The facts of the murder (if they are known by justice officials).
- Where the body of the victim is and how it can be viewed (upon request from co-victims) and recovered for funeral proceedings.
- Crime victim compensation, which can provide remuneration to eligible co-victims for funeral expenses, costs associated with attending any trial, and loss of financial support from the deceased victim.
- The autopsy and how to obtain a copy of the autopsy report from law enforcement or the medical examiner.
- How any belongings of the victim can be recovered, cleaned (if necessary), and returned to the family.
- How the co-victims can contribute any information they believe is relevant to the case to the proper authorities.
- How to contact key justice officials involved in the case.
- Why a case may be reassigned to a different official, i.e., police investigator or prosecutor.
- Any delays in the case, including an explanation for why they are occurring.
- Whether or not co-victims may be called as witnesses by the prosecutor or defense.
It is important for advocates to establish a good working relationship with law enforcement and to educate law enforcement about victim services. It is also important for advocates to understand the issues involved at crime scenes and investigations of homicides to be able to explain how crimes scene investigations are conducted and other post investigation issues. For example, if a friend or family member initially discovers the body, once law enforcement and investigators arrive, that friend or family member is then barred from re-entering the crime scene. Those that discovered the body generally become upset that they are not allowed to be near their loved one. Advocates can help co-victims understand the purpose of preserving crime scenes and limiting access to only law enforcement and medical examiners.

Autopsy issues are also a concern for co-victims. Many families do not want an autopsy to be performed, but an autopsy is necessary to determine cause of death and other forensic issues. The length of time to complete an autopsy can affect funeral arrangements. Autopsies can raise healing issues for those co-victims and cultural issues if their culture requires burial within a certain time frame.

Advocates who are well versed in investigation issues in homicide cases are able to properly convey these explanations to co-victims and avoid co-victim distrust of the justice system as they become more knowledgeable of law enforcement procedures. It is not uncommon for homicide co-victims to have many questions about what happened to their loved ones, to be suspicious of the justice system (especially if they feel that information is being kept from them), and be angry or cast blame on law enforcement for lack of knowledge.

A common term used among law enforcement and prosecutors as they process a case is the “CSI effect.” The CSI effect (or “CSI syndrome”) is a reference to the phenomenon of popular television shows such as the CSI franchise raising crime victims’ and jury members’ expectations of real-world forensic science, especially crime scene investigation and DNA testing. Much of the concern stems from the dramatic license writers take with forensic science on television, glamorizing the field, overstating the accuracy of forensic techniques, and exaggerating the abilities of forensic science. This is said to have changed the way many trials are presented today, in that prosecutors are pressured to deliver more forensic evidence in court.33

Advocates who have knowledge and understanding of the justice system from investigation to prosecution can help to respond to victims who have unrealistic expectations of how investigations are actually conducted and cases are prosecuted.

Co-victims of homicide report that the way they were informed about the homicidal death of their loved one affected their relationships within the justice system, and affected their lives in profound ways from that moment on. The most effective death notifications involve a critical partnership between a law enforcement official and a victim service provider in order to provide notification of the death that is timely and in keeping with a protocol of sensitivity, compassion, and delivery of correct information.
In 1996, OVC helped Mothers Against Drunk Driving (MADD) develop a curriculum entitled “Trauma, Death, and Death Notification.” It includes guidance on planning, delivering, and following up on a death notification, and also addresses stress and vicarious trauma for those delivering the notification. This important resource can help law enforcement and victim assistance agencies develop a comprehensive, sensitive protocol for notifications of death in homicide cases. The MADD curriculum can be ordered at: www.ncjrs.gov/app/Search/Abstracts.aspx?id=162360.

**Collaborative Responses and Resources**

Fatality review teams (FRTs) have been established in most states to review suspicious deaths and collect important information to help prevent future fatalities. Some FRTs are specialized and address fatalities involving children, domestic violence victims, and vulnerable adults, while others address *all* fatalities. Membership on FRTs varies depending on the team’s mission and focus, but generally includes representation from—

- Medical examiner’s office.
- Law enforcement agencies.
- Prosecution.
- Emergency medical services.
- Social services.
- Mental health.
- Medical doctors.
- Crime victim services.
- Protective service agencies for specialized FRTs (such as adult or child protective services).

A nationally recognized partnership among justice agencies and a faith-based victim assistance program helps homicide co-victims in Memphis, Tennessee. Victims to Victory (VTV), an affiliate ministry of the Memphis Leadership Foundation, collaborates with the Homicide Division within the police department and the district attorney’s office to provide support to survivors. VTV sends a letter to the victim’s family offering services, makes followup calls and a home visit, and sponsors a homicide grief support group. Two full-time homicide specialists provide grief counseling upon request, and VTV staff serve on the city’s Fatality Review Team and partner with the county victim
assistance agency to host an annual remembrance retreat for survivors. Additional information about VTV can be accessed at: http://victimstovictory.org.

Multidisciplinary collaborations such as homicide response teams work well to serve crime victims and co-victims of homicide. A homicide response team that includes a victim advocate can provide great benefits to co-victims as well as law enforcement. Advocacy services may be provided by community based advocates that are usually nonprofit agencies, advocates in prosecutors’ offices, and advocates based within law enforcement agencies. Having a trained and fully informed victim advocate on-scene can free law enforcement to focus on their investigative tasks while advocates immediately respond to co-victims who may be present. It is not unusual for friends and family to come to crime scenes or they may already be there if they were the ones to discover the crime. This team approach assists law enforcement without delaying advocates’ contact with the co-victims. Advocates establish who the co-victims are, relay how they can maintain contact with advocates, provide information regarding the case and victim compensation, and help meet the immediate physical and emotional needs of co-victims, such as bringing in clergy or spiritual or cultural healers. An effective homicide response team provides a consistent person who will focus solely on the needs of co-victims and represent them throughout the entire process from beginning to end.

Challenges for Advocates

Social Media Issues

Social media outlets such as Facebook and Twitter can pose difficulties with co-victims. Someone at the crime scene could take photos and post them on the social media outlets or other Internet sites. These postings could include photos of the body if the body was in a public area possibly taken by the person who discovered the body, photos of co-victims at the crime scene, or postings that could convey inaccurate information. Co-victims should be cautioned about posting items on the Internet or media outlets which could affect the investigation. For example, if law enforcement shares a fact about the case and then the family posts it, if the perpetrator has not yet been identified or apprehended, this could give the perpetrator inside information. If others post items on the Internet, possibly derogatory things about the deceased, this could also upset co-victims.

Media

Co-victims should be advised not to believe everything in a television stories or newspaper articles regarding the homicide. Victims need to be assured that they will have access to any information that will not jeopardize investigations or prosecutions and that not everything in the print and video media is accurate. If the media is present at the homicide scene and advocates are there as well, advocates should discourage co-victims from speaking to the media so that facts of the case are not disclosed until law
enforcement and prosecutors are prepared to share that information as appropriate. Also, if the media and advocates are present at the crime scene, advocates should try to keep the co-victims and possible witnesses in an area away from the media so that law enforcement has the opportunity to interview and meet with them at some point and the media does not add to the stress, grief, and emotions that co-victims are experiencing.

**Establishing Who is the Official Co-Victim Contact**

It is important to establish who is the official co-victim contact or representative for the victim. Challenges can occur when the victim is a child and the parents of the child are estranged, divorced, or have a volatile relationship. If the perpetrator is a family member, this also can create conflicts over who the official contact person may be. Usually it is the official next of kin but advocates and law enforcement may have to determine who to contact with case information.

**Crime Scene Photos**

The devastation that gunshots, stabbings, beatings, and any other manner of homicide can cause to a human body is very hard to view for those who routinely investigate homicides. It is much more difficult and emotional for co-victims of homicide, and yet it is not uncommon for them to request to view the photos. This may be up to the prosecutor to make this decision. However, it may be important to make this offer if the photos are introduced at trial and could be seen by trial spectators. While advocates do not usually have immediate access to these photos since they are evidence gathered by investigators and then turned over to the prosecution, advocates may want to work with prosecutors to establish a policy on how to respond to this request from co-victims.

**When Does the Advocacy End?**

Closure is a term that can be offensive to co-victims of homicide. Losing a person to any type of death is a loss and creates an empty place in co-victims’ lives. However, when the loss is the result of a violent act, the shock and loss are even more emotional and overwhelming. While victims move on in their lives, the loss remains with them in some form and closure out of reach. For advocates, it is difficult to have a time frame to end advocacy for each homicide case. Sometimes, cases take time to go to trial so advocates continue to communicate and respond to co-victims. However, after a trial, there will be appeals, and sometimes cases are remanded back for a new trial or further court proceedings. In some instances, occasionally there may be the possibility of parole so parole hearings are held while the perpetrator is serving his or her sentence.

In working with co-victims of homicide, advocates need to be mindful that each time there is a court hearing, trial, parole hearing, appeal, news stories in the media, or other events, this reopens a wound that will never truly heal. Even after the trial or conviction, it is not unusual for co-victims to maintain contact with advocates, call advocates on the anniversary date of the homicide or their loved one’s birthdays or other significant dates.
Another issue is that there are times when a perpetrator is never identified so the case remains unresolved within the justice system and for co-victims who are likely to continue to call to get an update on the case. Each case is as unique as was the individual who died. Advocates must approach each case on an individual basis in deciding when the advocacy ends since healing and recovery is a process and a very individual journey for each co-victim of homicide.
Endnotes


3 Ibid.


6 Ibid.


10 Ibid.


13 Ibid.


17 Ibid.


20 Ibid.


31 See note 19 above, Rynearson, n.d., “Recovery from Unnatural Death.”
