

Behavioral Characteristics of Maternal Filicide: A Case Study

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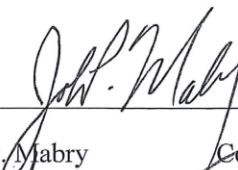
Behavioral Characteristics of Maternal Filicide: A Case Study

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Table of Contents

Acknowledgments.....	5
Abstract.....	6
List of Tables	7
Introduction.....	8
Problem Statement	10
Research Questions	13
Purpose of the Study	13
Significance of Study.....	14
Limitations of Study	15
Definition of Terms.....	15
Review of Literature	17
Filicide	17
Motivational Factors	20
Maternal Filicide and Paternal Filicide.....	29
Childhood Factors.....	32
Deficiencies in Literature.....	34
Methods.....	35
Sample/Participants.....	35
Data and Procedures.....	36

Data Analysis.....	37
Results.....	38
Case Overviews.....	38
Overview of Major Themes.....	50
Research Questions.....	57
Validity of Findings.....	59
Discussion.....	60
Discussion of Research Questions.....	60
Limitations.....	66
Recommendations for Future Research.....	68
Conclusion.....	69
References.....	70
Appendices.....	74

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Abstract

The purpose of this study is to identify the history and behavioral trends of maternal filicide in the United States. This study examines six cases of filicide that were highly publicized by the media. The media tends to overdramatize certain aspects of cases, which then leads to the overshadowing of actual facts. The data was gathered from court records, police reports, televised offender interviews, and records of psychiatric assessments. The cases that were reviewed were homicides that took place between 1997 and 2005. The study examined the childhood, mental history, prior criminal history, motives and the family-of-origin for each of the filicidal women. The mean age of the mothers at the time they committed the offense was 29.83 years. The women ranged in age from 18 to 38 years. The six women in the study killed a combined total of 17 children (16 males and 1 female). Males were overrepresented as victims in this study compared to other research involving maternal filicide.

List of Tables

Table	Page
1. Offender Demographics/Background.....	52
2. Offender Childhood and Family-of-Origin.....	52
3. Characteristics of Mother Prior to Offense.....	53
4. Expressed Offender Motive	54
5. Offender Motive- Researcher's Opinion.....	54
6. Characteristics of Offense.....	56

Behavioral Characteristics of Maternal Filicide: A Case Study

Most people would find it very difficult to comprehend the act of a mother taking the life of her own child. In fact, a mother killing her child goes against the natural and sacred mother-child bond. A mother is seen as nurturing, loving, and willing to do anything to protect their own, but what happens when she turns from protector to murderer? Lives are shattered and the media has a sensational field day. Maternal filicide is defined as the act of a biological mother or step-mother killing her own child. Maternal filicide is increasing around the globe and at astounding rates. The United States and other developed nations are not immune from these heinous crimes. Most Americans have heard the name Andrea Yates and know the tragic story of how she systematically drowned all five of her young children. Unfortunately, Andrea Yates does not stand alone in the filicidal category. Females have been found to commit filicide just as frequently as their male counterparts (Friedman, Horwitz & Resnick, 2005). This is surprising because filicide is one of the only categories where women commit an offense with the same frequency as men. The abominable circumstances of filicide have caused society and the media to become equally enthralled with the subject of maternal filicide. Women aren't the usual suspects in cases of murder, but filicide is transforming the image of the stereotypical murderer.

The U.S. Department of Health and Human Services has focused on the prevention of child abuse and neglect in the United States. The National Child Abuse and Neglect Data System (NCANDS) collect data on child abuse, maltreatment and neglect. The data is analyzed and published in the *Child Maltreatment Manual* (Child Maltreatment, 2010). In 2005 there were approximately four deaths a day due to child abuse and neglect (Child Maltreatment, 2010). Each year the numbers have slightly increased; the most current data by NCANDS demonstrates that the number of child deaths due to abuse and neglect rose to 5+ children a day in 2010. If

this rate stays constant, by 2015 it is projected that there will be 6 child fatalities a day in the United States. These statistics are not a representation of strangers that are abusing and neglecting the children of loving parents. In our society there is a misconception that children are at high risk and in danger due to strangers, but in reality the biggest threat to the children are their own parents.

The *Child Maltreatment* manual revealed that approximately eighty percent of child fatalities were caused by one or both of the parents (2010). This data suggests the numbers of deaths of children will continue to increase within the United States if changes are not made to address the problem. Unfortunately, statistics have not clearly defined the number of deaths due specifically to filicide. However, Dr. Marie Mugavin confirmed the high statistics and commented, “Approximately 1,460 child abuse fatalities occurred in 2005, although that number is also thought to be underestimated due to inconsistencies in definition and detection” (Mugavin, 2008). It is probable that the numbers of deaths related to filicide are actually higher than what experts speculate. This occurrence may be due to equivocal death situations, in which the true cause of death is unknown or mistaken. Sudden Infant Death Syndrome (SIDS) may be a reason for the underestimation of filicide cases in the United States. SIDS occurs when an autopsy does not reveal an explainable cause of death and therefore is described to be due to natural causes (Stanton & Simpson, 2001). A thorough behavioral profile and investigative protocol for filicide could reveal that some SIDS cases can be explained and are the direct cause of parents committing filicide.

Filicide is not a new revelation in the United States or any other country for that matter. It is quite difficult to determine when filicide first occurred, but we do know that it has been around for a significant amount of time. The United States ranks the highest out of developed

nations in maternal filicide (Friedman et al., 2005). Phillip Resnick was among the first to emphasize the importance of studying filicide. Males dominate the numbers in violent crimes in the United States, however Friedman, Horwitz, and Resnick found that, "Among children under age 5 years in the United States who were murdered in the last quarter of the 20th century, 61% were killed by their own parents: 30% were killed by their mothers, and 31% by their fathers" (Friedman et al., 2005). These statistics highlight how there are in fact similar frequencies between men and women that kill their own children. The sixty-one percent is an indicator of the seriousness of filicide in the United States. Due to the provocative nature of filicide it tends to receive an enormous amount of media attention; however these accounts do not always portray accurate facts and therefore lead to misconceptions of filicide.

Even with all the media attention that filicide receives, there are still a lot of unknowns. The predictors of filicide are a key area where the knowledge and research is lacking. Although the literature is increasing, there is still much to be learned about filicide. There is little to no information of childhood factors of the women who kill their children. Studies have not undertaken the task of determining the differences in a woman that methodically murders all of her children versus the mother that murders only one of her children. Research to date tends to focus more heavily on the mother's adult psychological state leading up to the crime. Research has given some attention to the comparisons of filicide between male and female perpetrators.

Problem Statement

The literature on filicide is inadequate to determine relevant risk factors for maternal filicide. Due to the research placing such a huge emphasis on the psychological state of the mother, other factors tend to be overshadowed. An in-depth analysis and case study of maternal

filicide would examine dynamics that could be predictors for prevention of filicide. Research has failed to examine childhood dynamics of the filicidal mothers. The absence of information in this area is seen through the current literature.

Previous research has focused primarily on psychological history and motivational factors. However, a deficiency within psychological history is that it tends to focus on only a few years before the crime is committed. Most of the psychological background is not accounted for during the mother's childhood or adolescence. There is also no literature that discusses if childhood factors play a role in filicide. There is a substantial amount of research from areas outside the United States. This is surprising because the United States ranks so high in filicide among developed nations. Literature also tends to focus on the different circumstances between male and female offenders that commit filicide. It is evident that the research is lacking concerning filicide in general.

The current research also states that it is believed that there is an underestimation of filicide. Possible underestimation might be due to misidentification as Sudden Infant Death Syndrome (SIDS), newborn killings, and negligence (Leveillee, Marleau, & Dube, 2007). Filicide might be overlooked as a possibility when an autopsy reveals no findings; often leading to a default conclusion of SIDS. If a mother has several factors in her background that would put her at higher risk for filicide, then these might be indications that the cause of death was not SIDS.

Another underestimation could be possible due to undetected neonaticides. The killing of a newborn could account for an underestimation because in certain cases people are unaware that a mother had given birth to a child (Leveillee et al., 2007). Often, young mothers who commit

neonaticide are in complete denial that they are pregnant (Beyer, Mack & Shelton, 2008). These types of women will ignore the signs of pregnancy and convince themselves that they are not pregnant. A woman that is scared and does not want a child may feel compelled to conceal the pregnancy from friends and family. If people are unaware of a child ever existing, then the child would not be missed. This may sound impossible that a woman could be pregnant unbeknownst to her family and friends, but then again Melissa Drexler did it. Melissa Drexler was at her senior prom when she gave birth to a child in the bathroom stall. Drexler wrapped the child in several garbage bags and disposed of the child in the garbage can before returning to her prom. This crime was so unimaginable and it was inconceivable that a young girl was capable of disposing of a child in this manner. This is a neonaticide that fortunately was detected. Melissa Drexler was tried, convicted, and served time in prison for the heinous crime.

The other factor that may lead to an underestimation in filicide is negligence. Negligence may impact the underestimation of filicide because there might not be enough evidence to prove that the mother had criminal intent (Leveillee et al., 2007). A child that dies as a result of being left in a car on a hot summer day would prove difficult in determining whether it was due to the mothers' negligence or whether there was criminal intent involved. Another scenario in which it would be difficult to prove criminal intent would be a young child that drowned in the bathtub. A parent could easily stage this as an accident that occurred when she stepped out of the room for a few minutes. It would be unproblematic to prove that the parent neglected the child, but it would be difficult to prove that the mother intentionally drowned her child. In this instance it would be challenging to prove that the parent deliberately and unlawfully murdered her child, therefore resulting in a charge of neglect instead of homicide. From a legal perspective, filicide requires intent.

Research Questions

1. What are motivational factors for maternal filicide?
2. Are there common childhood factors shared by the filicidal women?
3. What precipitating factors indicate that a mother might be at risk?
4. Do significant common behavioral characteristics exist to formulate a maternal filicide profile?
5. What are the differentiating factors between filicidal women found not guilty by reason of insanity and filicidal women that are found guilty?

Purpose of the study

This thesis examined behavioral characteristics of mothers who have killed or attempted to kill one or more of their children. Specifically, the research examined filicide cases that have been sensationalized by the media. The study included well-known cases that have occurred in the United States. Although, the media has broadened our understanding of filicide, it sometimes creates an unrealistic picture. This research gave an in-depth analysis of the facts of each case. In addition, each filicide case was examined to give a historical overview of the case. This study aimed to provide an in-depth analysis of the mental history, childhood factors, prior criminal history, and family-of-origin for each case. Finally, comparative analysis was undertaken to identify any significant common behavioral characteristics between offenders from which to formulate a profile.

The purpose of this study was to determine if there are common characteristics that filicidal women share. I am proposing a behavioral assessment and profile of filicidal women because there is no current profile for these women. The goal of the study was to see if there is a relationship between these factors and the women that commit these horrific crimes. I examined what factors play a role in the actions of filicidal women. The primary focus of this study was to increase the understanding of filicide and provide a more in-depth analysis of risk indicators that lead to maternal filicide.

Significance of study

Although filicide has intrigued the media, there is still a lack of research in the area. The media has placed focus on certain aspects of the crime and focuses less on others aspects, which often lead to misconceptions by the public. This research provides a more in-depth analysis into the lives of the women who murder their own children. The cases of filicide were examined to show the history and behavioral trends of filicide in the United States. This study could provide the groundwork for a profile of females that are at risk of committing filicide. By exploring the childhood of the women, it might be possible to explore different motivational factors that lead up to the crimes. The research examined the demographics of the women, weapons used, stress factors, and much more. Certain risk factors would possibly be identified that could assist with determining if a woman and her family are at higher risk than they are aware of. Furthermore, creation of a model showing the relevant risk factors for filicide could help decrease the child death rate in the United States and abroad. Even a small decrease in this type of heinous crime would be an improvement. The profile would also assist authorities in determining if the death of a child was from natural causes or if foul play might have been involved. This study provides

a better understanding of how life circumstances can play a role in mothers who murder their own children.

Limitations of Study

This study was an exploratory study of filicidal cases. The study was thoroughly prepared but also had some unavoidable limitations. The sample size is undoubtedly a shortcoming within the study. Unfortunately, the sample size was extremely small because of the difficulty in gaining access to sensitive records pertaining to the filicidal mothers. Due to the study being for academic purposes and the sensitive nature of the information, it was difficult to access the mental health and law enforcement records of the filicidal women. The small sample size made it impossible to evaluate certain variables within the study. Research on larger sample sizes of filicidal women would improve the understanding and help to create a more thorough behavioral profile for maternal filicide. Perhaps as more these types of cases are played out in courts of law, the records will be more readily available for future incorporation.

Definitions of Terms

The following terms are defined for the purpose of this study and will be used throughout the study:

Filicide - the act of a parent murdering their own child (Krischer, Stone, Sevecke, Steinmeyer, 2007).

Maternal filicide - the act in which a mother kills her own child by purposeful actions intended to harm the child (Friedman et al., 2005).

Postpartum depression - depression that occurs between the time frame of delivery and up to one year later (Kauppi, Kumpulainen, Vanamo, Merikanto, & Karkola, 2008).

Altruistic filicide - the act of a mother killing her child because she perceives that is in the best interest of the child (Friedman & Resnick, 2007).

Accidental filicide - an unintentional death that is the result of accumulative abuse or maltreatment (Friedman & Resnick, 2007).

Neonaticide - the homicide of a child within the first 24 hours of their life (Beyer, Mack & Shelton, 2008).

Infanticide - homicide of a child that is between the ages of one day and 12 months.

Review of Literature

Filicide

Filicide is a phenomenon that receives worldwide media attention. Although considered a rare event, the numbers have actually increased in recent years. A child homicide must be committed by a biological or adoptive parent to be considered a filicide. My study focused only on biological parents that have committed filicide. It is feasible to hypothesize that different factors come into play when a filicide is committed by an adoptive parent as opposed to a biological parent. The relationship between a child and a biological parent is different than that of the relationship between a child and their adoptive parent. Research suggests that infanticide and filicide display differences in offender characteristics, behavioral factors, life circumstances, and motives.

Filicidal women that commit neonaticide and infanticide have often been found to have the component of postpartum depression. Hormones, biological factors, and psychosocial stressors can influence postpartum depression (Kauppi et al., 2008). Although men may also be the perpetrators in neonaticides, the category has predominantly been made up of women (Beyer et al., 2008). There are variations within the literature that suggest how prevalent postpartum depression is in maternal filicide. One study suggests that approximately 10%-13% of women suffer from postpartum depression (O'Hara & Swain, 1996). This number is a representation of all women and not just those that commit filicide. However, a study in Finland had a high percentage of women suffering from depression. This study examined ten cases of maternal filicide. All ten of the women had altruistic motives for killing their children and suffered from depression (Kauppi et al., 2008). However, only one out of ten of the women suffered from

postpartum depression (Kauppi et al., 2008). Postpartum depression is a serious mental issue that has been linked to filicide. The literature does demonstrate that there is in fact a relationship between depression and killing one's offspring. However, as is the case for most areas in filicide, there is still not sufficient information on the linkage between the two areas. There are also many other factors that have an influence on filicide. Indeed there are many women who suffer from postpartum depression who never kill or injure their children. Women are thought to be at higher risk of experiencing depression when they are postpartum (Whiffen & Gotlib, 1993). The severity of postpartum depression could also be influential on the likelihood that a mother might harm her child. A woman suffering from severe depression is possibly a higher risk of committing filicide than a woman only suffering from mild depression. The degree to which postpartum depression is found in maternal filicide cases certainly makes it a viable risk factor for consideration.

Research has placed an emphasis on many components that may have a correlation with mothers who kill their children. *Child Murder by Mothers: Patterns and Prevention* is a review of the literature on maternal filicide. The study seeks to point out patterns that are common among women from different parts of the world. The article points out that the women commonly had full responsibility of the children, were sometimes victims of abuse, suffered from depression, were poor, and socially isolated (Friedman & Resnick, 2007). These were the findings from the general population of literature on maternal filicide. Differences were recognized in women that were in the general population as opposed to those that were in the correctional or psychiatric population. The common findings among the women in the correctional facilities were: unmarried, abuse victims, unemployed, limited education, and lower intellect (Friedman & Resnick, 2007). Stressors in both the general population and the

correctional population were also noted. The correctional population stressors included: economic, various types of abuse, issues with rearing the child, and problems with their partner (Friedman & Resnick, 2007).

Maternal filicide-suicide is another dimension of filicide that the research has investigated. The women that carry out such acts are usually severely mentally ill. Resnick and Friedman found that women that commit suicide along with filicide tend to kill older children (2007). Altruism and psychotic motives were common findings among filicide-suicides. *Filicide-Suicide: Common Factors in Parents Who Kill Their Children and Themselves* was a phenomenological study which identified differences in motives, differences between men and women, and age of the children for filicide-suicide. The literature indicated that as much as thirty percent of mothers and as much as sixty percent of fathers commit suicide along with filicide (Friedman, Hrouda, Holden, Noffsinger & Resnick, 2005). The study concluded that women were less likely than men to commit filicide-suicide. The study also agreed with Resnick that the children were older and less likely to be infants (Friedman et al., 2005). The sample size for the study consisted of ten mothers and twenty fathers. There were twice as many men in the study than women; this may reemphasize the idea that men were more likely than women to commit filicide-suicide. A surprising finding was that over half of the males had military background, but none of the women had military backgrounds (Friedman et al., 2005). There was also a difference in occupational status at the time the crime was committed between the two groups. The study indicated that women were not as likely as men to have a full time job. This is not too surprising since society places emphasis on the mother being the primary caregiver and therefore more likely to be the stay-at-home parent.

It is important to remember that humans are not the only mammals that are susceptible to kill their offspring. Many other species have been known to kill their young. This may suggest that there are underlying biological factors and environmental issues that transcend species boundaries. Dr. Sarah Hrdy, an anthropologist, studied infanticide among langur populations. Primarily found in South Asia, the langur is a leaf eating species of monkey. The research indicated that there are five main explanations for infanticide among animals. The five categories described by Dr. Hrdy are: exploitation, resource competition, parental manipulation, social pathology, and sexual selection (Hrdy, 1979). Similarly, another study focused on infanticide among monkey populations. The moustached tamarin is a species of monkey that have been known to kill their own offspring in certain circumstances. The death rate of infant tamarins was higher when there were fewer males available to help with the rearing of the infant (Culot, Lledo-Ferrer, Hoelscher, Lazo, Huynen & Heyman, 2011). This finding is interesting because filicide studies have also found that women that commit filicide were commonly the primary caregiver of the children (Friedman & Resnick, 2007). This observation might be indicative that women that do not have a good support system from their husband are at a higher risk of committing filicide.

Motivational Factors

The first question that comes to mind when people learn that a mother committed the heinous crime of killing her own child is “why?” How is it possible for a mother to kill a child that she carried and protected for nine months and then gave birth to? People want to understand what would change a woman from being a protective and nurturing mother to a cold blooded killer. Motivational factors are helpful in determining the thought process of the mother and the reasoning behind why the crime was committed. Within murder there are many motivational

factors that can influence the offender and it can be difficult to distinguish one clear motive due to the complexity of murder. Many researchers have attempted to answer the question of what motivates a woman to kill her child. The thought process of a killer is difficult to understand and comprehend. It is important to understand the difference between motive and intent. Michael Rosenberg described motive as, “that motive refers not to intended consequences, but to the reason those consequences are desirable to the actor” (2008). Merriam-Webster defines intent as, “the state of mind with which an act is done” (2013). For the purposes of this study, the women’s motive for filicide will be analyzed.

Phillip Resnick was among the first to analyze the motivational factors associated with filicide. Resnick used motivational factors as a means to classify filicides. Several other classifications systems have also been created by researchers to assist in better understanding filicide. However, the majority of research uses Resnick’s classification system in regards to filicide. Resnick concluded that there are primarily five motivational factors for parents that kill their offspring. The five motivational factors are: altruism, acute psychosis, unwanted children, accidental, and spousal revenge (Resnick, 1969; West, 2007). These five categories are widely accepted as the leading motivational factors for filicide. Accidental filicide is sometimes excluded from the list of motivation factors in research. The reasoning some researchers exclude accidental filicide and believe it should not be considered a motivational factor is because the intention of the parent was not to kill the child. However, the parent is purposely and willfully harming the child and when the end result is death, it should be considered a homicide committed by the parent. The result remains the same in that the parent did in-fact kill the child, which constitutes it being classified as a filicide. It is still controversial as to whether accidental

should be considered a motivational factor. For the purposes of this study it will be considered a motivational factor.

The first motivational factor listed by Resnick is acute psychosis. Acute psychosis is a mental disorder that affects the mind in which a person is not in contact with reality and can be accompanied by delusions (Lewis & Bunce, 2003). Multiple studies believe that psychosis plays a role in filicide. A 2003 study by Catherine F. Lewis and Scott C. Bunce analyzed filicidal mothers to determine the number of women who experienced psychotic symptoms at the time of the crime. The purpose of the study was to compare and contrast the behavior of the women who were found to be psychotic and those that were not psychotic. The study examined three main categories. Demographic characteristics, offense patterns, and the history of the filicidal mothers were examined in the patients (Lewis & Bunce, 2003). The research focused on 55 women that had been committed to a psychiatric hospital. Each of these women was found to have killed at least one of their biological children. The conclusion of the study found startling differences between the psychotic women and the women who were not psychotic. Nonpsychotic women were less likely than psychotic women to murder more than one child; more likely to confess after the crime; indicate to family that they were worried about their children's wellbeing; more educated; unemployed; and to be found not competent to go to trial (Lewis & Bunce, 2003).

The research indicates that there are significant differences between psychotic women and nonpsychotic women. The study failed to mention if there were childhood issues that might have played a role in psychosis. However, the study is helpful in showing how motivational factors, such as psychosis can influence filicide. There are differences in behavioral factors present in the cases of Susan Vaughan Smith and Andrea Pia Yates. One obvious difference is

how the two women reacted after the crime was committed. Smith made an alibi for herself and concocted a story so that she would look like a victim. Smith was aware of the consequences of her actions and knew what she did was wrong. Smith went to great lengths to conceal her involvement in the deaths of her children. Smith was not thought to be suffering from psychosis at the time that she killed her two children. However, Yates was suffering from psychosis at the time she murdered her five children. Yates behaved very irrationally and believed that her children were possessed. Yates contacted the police and her husband immediately after she committed the crime and confessed to everything. This is just one small example of how a filicidal woman suffering from psychosis may act as opposed to a filicidal woman not suffering from psychosis.

A study by Krischer, Stone, Sevecke, and Steinmeyer compared the difference in women who committed filicide as opposed to those who committed neonaticide. The comparison dealt with whether filicidal mothers were less likely than neonaticidal mothers to experience psychosis at the time the crime was committed. The sample included 57 women that were from the New York area. The women ranged in age of 16 to 54 years old (Krischer et al., 2007). The study concluded that there were significant differences in motivational factors between the two categories. Women that committed filicide were in fact less likely to suffer from psychosis as opposed to the neonaticide mothers (Krischer et al., 2007). These females were much more likely to be considered severely depressed than the neonaticide mothers (Krischer et al., 2007). The research revealed that there are differences in the two categories of child murder including: social problems, medical history, personality types, and motivational factors that lead to killing ones offspring.

Spousal revenge is one of the least common driving forces for a parent to kill their child. This occurs when a person seeks to retaliate against their partner by killing a child. Resnick concluded that this category included, “parents who killed their offspring in a deliberate attempt to make their spouse suffer” (2006). The article, *Convicted Women Who Have Killed Children: A Self-psychology Perspective*, coins the term Medea Syndrome (Crimmins, Langley, Brownstein, & Spunt, 1997). The Medea Syndrome refers to a story from Greek mythology. Euripides produced the play in 431 B.C. (Crimmins et al., 1997). The play is still quite popular and is commonly cited among filicide literature. In the story Medea kills her two sons in order to get revenge on her husband. This story indicates the length a person is willing to go in order to seek revenge. The time frame for this play is also a good indication as to how long filicide has been around. There is no authoritative answer as to when the first parent murdered their child, but this does give an insight that it was recognized as far back as 431 B.C. It is known that England passed laws in 1922 and in 1938 that sought to punish women for infanticide (Resnick, 2006). Many countries base their filicide laws on England’s law, but this is not the case for the United States (Resnick, 2006). One study reports that spousal revenge only occurs in approximately two percent of maternal filicides (Stanton & Simpson, 2002). Spousal revenge is a more common motive in paternal filicide.

Resnick identifies two main personality types that have appeared in women that meet the requirements for a spousal revenge filicide. Borderline personality and dependent personality have been attributes of women that fall under retaliation (Resnick, 2006). Although, most articles recognize that retaliation is a motivational factor for filicide, there is very limited in-depth research on the subject. The phenomenon is difficult to study because there are so few maternal filicides cases that occur due to spousal revenge.

The third category of motivational factors for filicide is altruism. Altruism focuses on the idea that a mother would murder her child because she believes it to be in the child's best interest. This concept is difficult for most to understand because we don't usually think that wanting what is best for somebody and murdering them are synonymous. Andrea Yates is a prime example of an altruistic filicide case. Yates believed that she was a bad mother and that her children suffered due to her lack of mothering skills. In altruistic filicide the mother has a fear that the child is suffering. However, the suffering is not always real and might be quite irrational; in fact the suffering can be a figment of the mother's imagination (Resnick, 2006). This type of filicide is also a type of mercy killing (d'Orban, 1979). Raising a child can be extremely stressful; most women would say that at one point they questioned whether they had made the right decision while caring for their child. However, most women do not murder the child because they are worried that they have made bad parenting choices. American culture adds a tremendous amount of stress to mothers because they are supposed to be a "super mom". The standards that have been placed on women in society are making it difficult for women to achieve those goals. Dr. Marie Mugavin defines "good mother stress" as, "the pressure of trying to be a good mother although lacking sufficient validation, experiencing feelings of social devaluation, or lacking an appropriate maternal role model" (2008).

An unwanted child filicide is the next category that Resnick lists as being a motivational factor. The media places a lot of focus on this category because of the alarming details that begin to surface within this category. Nobody forgets the story about a woman putting her baby in a dumpster, or the story where a young girl repeatedly stabs her infant and then joins her family for dinner as if nothing had ever happened. The young girl's family is unaware the whole time that there is a deceased baby upstairs and that their daughter was ever pregnant. For this

reason, neonaticide tends to fall under the unwanted child filicide. It is possible that filicide is actually underrepresented in this category because women are able to hide the pregnancy and then dispose of the child without detection. This may sound unrealistic but unfortunately it does occur. Sudden Infant Death Syndrome (SIDS) also has the possibility of increasing the filicide rate (Lewis & Bunce, 2003). A woman could smother her child and the blame might be misplaced on SIDS. Further research could help breach the surface on whether or not there is a relationship between SIDS and neonaticide.

This category also includes women that see the children as a burden and believe they would be better off if the children were no longer living. Susan Smith falls into this particular category of filicide. Susan Smith was in a relationship with a man that did not want to raise her two children because they were not biologically his. Smith concluded that to move forward with her boyfriend she must rid herself of her children. Smith murdered her two young children because she no longer wanted them and felt that they were a hindrance to her relationship with her boyfriend. A cover-up was also created by Smith to misdirect the police from discovering she was the one who was responsible for the deaths of her children. Women that fall into this characterization of unwanted child filicide tend to deny the fact that they are even pregnant. There have been many studies that have examined whether there is a difference in motivational factors for women that commit filicide and women that commit neonaticide. It has been found that it is much more difficult to narrow down certain behavioral aspects of women who murder their infant children (West, 2007). Women in this category are often viewed as the most cold-blooded and selfish of the categories.

Accidental is the fifth and final category that Resnick lists as being a motivational factor for filicide. Accidental filicide, also known as fatal maltreatment filicide, occurs primarily when

a parent intentionally beats their child, but doesn't intend to actually kill the child (West, 2007).

Neglect that results in the death of a child also falls under the category of accidental filicide.

This category may relate to the mothers that kill only one of their children. In a fit of rage the woman strikes her child repeatedly and before she knows it, she has actually killed her child. It was not the intent of the mother to actually kill the child in this instance. In the United States, fatal maltreatment ranks the highest as causes of child homicide (Resnick, 2006). This emphasizes that a child is at greater risk to be murdered by their parent than by anybody else. Parents shouldn't be in fear for their child because of strangers, but from their own actions. This section focuses on the belief that the murder usually occurs from aggregate beatings (Friedman & Resnick, 2007). Neglect often falls into the classification of accidental filicide.

Munchausen Syndrome by Proxy (MSBP) is a rare abnormality that occurs within the filicide realm. Christopher Boos defined Munchausen Syndrome by Proxy as, "a situation in which one person fabricates an illness in a second person and presents the second person to a doctor (Boos, 2003). MSBP can be complete fabrications of an illness or the parent can purposely harm the child to make real symptoms occur in the child, for example by poisoning the child. A common motive for women that suffer from MSBP is to gain the attention of family, friends, and medical staff. In extreme cases of Munchausen Syndrome by Proxy cases, the illness results in intentional or accidental death to the child. MSBP that results in accidental death is when the mother intends to hurt the child but does not intend for the child to die.

Marybeth Tinning is one of the most notorious women for Munchausen Syndrome by Proxy. Time after time Tinning would bring one of her children into the emergency room due to various problems. In a fourteen year period, nine of Tinning's children passed away for no obvious reason (Owens, 1998). The children ranged in age from a couple of months to four

years old at the time of death. Many of the children did not live long enough to see their first birthday. SIDS was blamed for the cause of death in multiple of the Tinning children but it could not explain why children that were out of the risk age for SIDS were also dying. In the beginning people felt extreme sorrow for Tinning but that changed once multiple children had passed away. Many people were suspicious that these children were not dying of natural causes, but at the hand of Tinning. Tinning ultimately confessed to smothering three of her children, but denied harming the others. Tinning would later retract her confession to authorities. Tinning was convicted in 1987 of second-degree murder of just one of her children. Unfortunately, there was not enough evidence to prosecute Tinning for the deaths of her other eight children. Although this type of case is extremely rare, there are recent cases of Munchausen Syndrome by Proxy.

Altruism, acute psychosis, spousal revenge, unwanted children, and accidental are the five major motivational factors (Friedman & Resnick, 2007). However, these are not the only motivational factors that play a hand in neonaticide, infanticide, and filicide. Motivational factors will differ among cases, but usually there will be an overlap at some point. In essence filicidal women can experience dual motivations that influence her desire to kill her children. The current research focuses little attention on the smaller categories of motivational factors for filicide. This deficiency should be researched further to enable a better understanding of filicide and expand the categories of motivational factors.

Philip Resnick created the five motivational factors as a way to classify filicide. However, Resnick's is not the only classification system that was created to better understand filicide. A classification system created in 1973 by forensic psychiatrist P.D. Scott focused on paternal filicide. Scott's classification system focuses on the impulse to kill as opposed to the

motive to kill (West, 2007). This classification system being based on the impulse to kill may indicate that the murder was not premeditated. The categories within the system are elimination of an unwanted child by assault or neglect, victim as stimulus, stimulus arising outside of the victim, gross mental pathology, and mercy killing (West, 2007). D'Orban based her classification system off of Scott's classification system. The six categories for maternal filicide created by D'Orban are; battering mothers, mentally ill mothers, neonaticides, retaliating women, unwanted children, and mercy killing (Stanton & Simpson, 2002). The classification systems by Resnick, D'Orban, and Scott have many differences but also have overlapping categories. However, Resnick's classification system has been more widely accepted by researchers in the field. Also, important to note is that these types of classification systems are subjective and rely heavily on opinions as opposed to raw data (Lewis & Bunce, 2003). For this reason, some researchers try to avoid using classification systems like these in their studies. Oftentimes new cases arise in which the offender does not fall neatly into existing classifications.

Maternal Filicide and Paternal Filicide

Studies on filicide have examined the differences and similarities of maternal filicide versus paternal filicide. The research examines the different life circumstances, motivational factors, and triggers that play a role in homicides of children committed by their parents. Males and females commit filicide with similar frequencies; however, there are obvious differences between the two groups. Men are much more likely than women to be imprisoned for the same act of filicide (Kauppi et al., 2010). This is possibly due to aggravating factors or maybe just the fact that our society has more sympathy for women.

When comparing paternal versus maternal filicide, a common theme emerged in regards to the age of the victim(s) murdered. Women were much more likely to murder younger children than men (Kauppi et al., 2010; Liem & Koenraadt, 2008). It is likely this is due to the fact that women spend more time with the younger children because they are the main caretakers when the children are young. Men are not the primary caregivers of young children; therefore they have limited access to commit a crime against young children. Cases of neonaticide are almost always committed by females (Resnick, 1970). The differences in motivational factors are important in showing why women are more likely than men to kill a child within the first twenty-four hours of the child's life.

The motivation for a neonaticide is commonly found to be because the mother did not want the child (Resnick, 1970). In some cases the mother concealed her pregnancy and then murdered the child following the birth. For this reason, women are more likely to be the perpetrator of neonaticides. Altruism was a common motive for filicidal women, but much less likely for men (Leveille et al., 2007; Stanton & Simpson, 2002). Men were more likely to commit filicide due to two motivational factors; accidental filicide from physical abuse or due to spousal revenge (Leveille et al., 2007). These two motivational factors were less common for women.

Some studies show that there is a correlation between the sex of the victim and the sex of the perpetrator. Male perpetrators are more likely to kill males, whereas female perpetrators are more likely to kill females (Resnick, 1970; Bourget & Labelle, 1992; Wilczynski, 1997). However, a study by Liem and Koenraadt stands in opposition, stating that there is no significant correlation between the sex of the victim and the sex of the perpetrator (2008). Throughout

history in many societies parents are more likely to kill their daughters rather than their sons (Laporte, Tzoumakis, Marleau & Allaire, 2005).

Research shows that there is a difference in the methods of filicide between maternal and paternal offenders. Males were more likely than females to use a weapon in the commission of their crime (Liem & Koenraadt, 2008; Koenen & Thompson, 2008). In the study by Liem and Koenraadt, they identified that women were more likely than men to use strangulation as the method of homicide. Even more surprising is that half of the 82 female perpetrators used strangulation to commit filicide, but the percentage was significantly lower at approximately 25 percent for males (Liem & Koenraadt, 2008). However, Koenen and Thompson stated, “men tend to commit filicide using more violent and active methods than do women” (Koenen & Thompson, 2008). The method of killing was not the only differences found between male and female offenders. Mental health, triggers, offender characteristics, and substance abuse also varied between the two groups. Dr. Marie Mugavin’s research uncovered that the most common triggers associated with filicide are; religiosity, substance abuse, desperation, revenge, lack of interest in parenting, mercy killing, inability to parent, and stress to be a good parent (2008).

Women tend to feel pressure of the unobtainable expectations that society places on women to be a do-it-all super mom (Kauppi, Kumpulainen, Karkola, Vanamo, Merikanto, 2010; Liem, Koenraadt, 2008). Men are more likely than women to have a criminal history, be employed, and had less education (Wilczynski, 1997). Mental health also differed between male and female perpetrators. One study found that approximately 75 percent of women who killed their children suffered from mental health issues; men were significantly lower with only ten percent suffering from mental health issues (Kauppi et al., 2010). Men might have a lower diagnosis of mental health issues because they are less likely than women to seek help.

However, a study by Liem and Koenraadt found that there was no significant difference in depressive disorders (Liem & Koenraadt, 2008). Several studies also identified that there was a mean age difference; filicidal women were younger in age than filicidal men (Liem & Koenraadt, 2008; Kauppi et al., 2010).

Childhood Factors

A study by Suzanne Tallichet and Christopher Hensley examined 261 inmates in order to determine if there is a relationship between people who commit violent crime and if they were cruel to animals in their childhood. The study found that people convicted of violent crimes frequently had a past history of animal cruelty (Tallichet & Hensley, 2004). This further suggests that there is a possible connection between issues in childhood and those that commit violent offenses in later life.

The research has suggested that childhood factors may be predictors for violent crime. This might also be true for women that commit filicide. A study by Jaana Haapasalo and Sonja Petaja suggests that there are several factors in a filicidal mother's childhood that might be indicators that could help predict filicidal risk. Childhood abuse and family of origin problems in the mother's childhood have been common characteristics of women that murder their children (Haapasalo & Petaja, 1999). Childhood abuse experienced by filicidal women included: neglect, physical abuse, psychological abuse, and sexual abuse. Problems with family of origin in childhood included: financial difficulties, parental alcohol abuse, parental mental health problems, and parental criminality (Haapasalo & Petaja, 1999). Mental state examinations were given to 48 mothers to determine if the childhood abuse or problems in the family of origin may have influenced their childhood. Haapasalo and Petaja stated the results as: "Thirty out of 48

mothers had experienced some form of maltreatment in their childhood. . . .among the mothers who had killed/attempted to kill an older child, psychological (49%), physical (27%), and sexual abuse (9%), and neglect (15%) were evident in the MSE reports” (Haapasalo & Petaja, 1999). The study also found that problems in family of origin were not as prevalent as they had hypothesized. However, women in the study did experience problems with family of origin.

A study by Susan Friedman and Phillip Resnick suggested that filicidal mothers experienced domestic violence in childhood. Phenotypic vulnerabilities were also suggested to be part of a filicide theoretical framework that suggests trauma in childhood can have an impact later in life (Mugavin, 2008). Mugavin described the significance of phenotypic vulnerabilities as, “an individual may be predisposed to certain behaviors and perceptions as a result of exposure to specific environmental and genetic factors” (Mugavin, 2008). It is difficult to say to what degree environmental and genetic factors may influence filicidal women. Social environment, history of exposure to sexual abuse, and predisposition to mental illness are examples of phenotypic vulnerabilities that may indicate a mother at risk of committing filicide (Mugavin, 2008). Persistent crying was also found to be prevalent problem during childhood for some of the women (Friedman & Resnick 2007).

Research has also suggested that filicidal mothers experienced negative relationships with their own mothers. During childhood some of these mothers experienced very demanding parents, or parents that were distant and rejecting, and a lack of emotional support (Kauppi et al., 2008). The literature illustrates that there are common childhood factors between filicidal mothers. Although there is some literature about the childhoods of the women, pertinent details are still lacking. There are no studies to date that compare the childhood of the group of women that murders all of her children versus the mother that only murders some of her children.

Deficiencies in Literature

The research on filicide is bereft and should be studied more in depth. The literature that is out there is limited and places more focus on psychological issues that occur right before the crime was committed. Childhood factors are given very little attention and there should be a larger emphasis given to trauma in the mother's childhood. The focus of my research project attempted to fill the gaps in the present literature. This study analyzed childhood experiences associated with abuse and family-of-origin.

Methods

This study used a qualitative approach to better understand the mindset of women that commit filicide. The qualitative methodology will assisted in gaining a better understanding of human behavior and why certain actions were taken. This type of research is beneficial in determining behavioral characteristics that are associated with maternal filicide. The data was analyzed to determine if common themes emerge among the women that commit filicide. The data looked for themes and patterns in motivational factors, childhood factors, precipitating factors that may indicate an at-risk mother, and behavioral characteristics. The qualitative study was helpful because it allows the public to view the experience through the eyes of the women that committed the crimes. This allowed rich insight on why the women acted on their urge to harm their children. This is essential to the field because this is a relative new area in filicide that social and behavioral scientists have little knowledge on.

Sample/Participants

This research utilized case studies of women that have committed filicide. The case studies served to help understand the complex issue of maternal filicide. The participants were not selected at random because of the qualitative nature of the study and the limited information on filicide. Therefore, I used a purposive sample because of the specific criteria the women had to meet to be in the study. The sample size consisted of six women from the United States that met the criteria for maternal filicide. These women were also selected because they were highly publicized by the media. The women were chosen because they met the standards of a filicide. The inclusion criteria for the research included women from the United States that acted alone and killed one or more of their biological children. Women that have committed neonaticide

were not included in the sample. The purpose was to explore the childhood factors, criminal history, and medical history, problems with the family-of-origin, motivational factors, and other behavioral characteristics of the filicidal mothers that may influence a woman to commit filicide. Data was collected on each of the six cases and then compared. Records were obtained from four different states in the United States. Each filicide case includes a brief case overview detailing the events and facts of the case. These factors may then lead to the mother killing her child.

The group of women chosen for the study had a mean age of 29.83 years. Four of the women in the sample were Caucasian and the remaining two women were African American. All the women in the study were born in the United States.

Data and Procedures

After, assessing the female offenders that met the criteria for the study, records were requested from the appropriate agencies. The Freedom of Information Act (FOIA) and state variations thereof were utilized to gain necessary information on women that committed filicide. The government records assisted in understanding the behaviors of filicidal women. Records were obtained of the four women that were tried in court proceedings. Each state in the United States has a variation of the federal Freedom of Information Act, which allows the public to gain access to public records. Although, the statutes vary by state, most requests can be made through a letter or Open Records Act form. Freedom of Information Act request letters were sent out to the investigating agencies, court clerks of the courthouse that the offender was tried in, and in some cases to the district attorney. Case material included court transcripts, medical interviews, police interviews, police interrogations, police investigative reports, and medical records. The

data were collected from the FOIA's, publicly available court records, and interviews that were accessible online. The data collection took place over a 12 month period. Although the information is public record, access to information from the research will be limited to those that have authorized access. Protection of confidential information is important in the research design.

Data Analysis

The data was analyzed to look for common themes and childhood factors among the women. The information that I observed were: (1) motivational factors that lead up to the crime (2) influencing factors as an adult (3) did the woman experience childhood abuse (4) did the woman have problems with family of origin as a child, (5) medical history (6) substance abuse and (7) criminal history. Information regarding age at the time the crime was committed, number of children, offender background and marital status are useful for better understanding of filicide.

The documents that were used in the research were loaded into ATLAS.ti 7. ATLAS.ti 7 is a qualitative data analysis software. The software was utilized to code the data and look for common patterns and themes. ATLAS.ti 7 was crucial in allowing multiple documents containing data to be viewed and analyzed simultaneously. The software allows for complex relationships to be viewed through network views and code linkage. All data was thoroughly examined and coded by the researcher to determine if there are common characteristics between the filicidal mothers. ATLAS.ti 7 is also beneficial in creating frequency tables of the codes. This information was helpful to better understand why women commit filicide and in formulating risk factors.

Results

Case Overviews

The women chosen for the study were analyzed to identify if precipitating factors exist that might be indicators that a mother is at risk of committing filicide. By examining the background of the women we are able to establish circumstances that would influence these women to kill their children. Each of the women in the study are listed below with a brief overview of family-or-origin, education history, occupation history, dating and marital history, prior criminal history, substance abuse before offense, medical history, and the facts of the offense.

Case 1-Susan Eubanks

Susan Eubanks was born Susan Diane Stanley in Texas on June 26, 1964 to Bill and Linda Stanley. Bill and Linda had four children together; Susan Eubanks was the youngest of the four children. Eubanks childhood was less than ideal. Both parents were raging alcoholics and were physically and verbally abusive to their children (People v. Eubanks, 2007). Linda and Bill also fought constantly in front of the children. Bill Stanley worked only sporadically causing financial difficulties within the family. Linda and Bill eventually separated. Susan lived with her mother, where the abuse continued (People v. Eubanks, 2007). It was common for Linda to drag young Susan around the house by her hair. Another instance was reported that Linda slapped Susan across the face when she was just a baby (People v. Eubanks, 2007). The financial difficulties only worsened after the divorce of Susan's parents. Linda frequently had men coming in and out of the house, setting an example that would later be mimicked by Susan.

The house that Linda and her children were living in burned down when Susan was eight years old. Not only was Susan's house destroyed but her mother also lost her life in the fire.

After the death of Linda, Susan and her siblings were sent to live with their grandparents. However, shortly after Bill uprooted the children and forced them to live with his sister. Eubank's aunt abused alcohol, drugs, and the now seven children she had living in her house. The children were tortured with physical and verbal abuse. The children were again uprooted and lived with their father for a period of time. The cycle of physical abuse and alcohol abuse continued while living with their father in Florida. Susan Eubanks was raised in a home by alcoholics and drug addicts that had no morals or values. There was a lack of structure and stability in the childrens' lives. Eubanks also stated that she was molested by her father when she was a child (People v. Eubanks, 2007). Eubank's immediate family had a history of drug and alcohol abuse (People v. Eubanks, 2007).

After completing high school, Eubanks attended classes to become a medical assistant. Eubanks worked at Palomar Medical Center as a medical assistant until she was forced to take leave for a herniated disk. After having surgery she was able to return to work. However, she hurt her neck and again took time off work. Subsequently, Eubanks never returned to work. Eubanks was unemployed at the time of the offense. Eubanks had a history of sporadic relationships. Eubanks was married twice and had affairs throughout her marriages (People v Eubanks, 2008). The offender also had children outside of wedlock.

Court documents showed that the sheriff's department had been dispatched to Eubanks house on several occasions for domestic disturbance calls. Court documents stated that Eubanks routinely got physical with her boyfriend, Rene Dodson. Eubanks routinely slapped Dodson in

the face and threatened to tell the police that he had raped her (People v. Eubanks, 2007). There are no records proving that Dodson or Eric Eubanks raped Susan Eubanks. Court document also indicate an incident where Eubanks held a gun to a boyfriend's head and threatened to kill him and attacked her boyfriend's female friend. Eubanks began to use prescription drugs proscribed by her doctor after she injured herself on the job. Eventually, Eubanks became dependent on the prescription drugs and began abusing them. Eubanks also started drinking heavily and frequenting bars. Court documents indicate that Eubanks was involved in approximately five accidents with her minivan (People v. Eubanks, 2007). Eric Eubanks stated that the incidents were most likely due to the combination of medication and alcohol (People v. Eubanks, 2007). Eubanks had been prescribed medicine for back pain and anxiety attacks (People v. Eubanks, 2007).

On October 26, 1997 Eubanks murdered her four children. On the day of the offense Eubanks and her boyfriend Dodson were out drinking at the local bar. The couple were involved in a verbal confrontation and decided to leave the bar (People v. Eubanks, 2007). While driving to the next bar, Eubanks became enraged and slapped Dodson several times. Dodson decided that they would go home instead of to another bar. Eubanks again became aggravated and yanked the keys out of the ignition. A struggle ensued, Dodson gained control of the keys and drove back to the house. Once at the house Dodson tried to gather his things and leave. However, Eubanks refused to let Dodson walk out on her. Eubank's oldest son called his friends mother to come pick him and his brothers up.

After Dodson left, Eubanks called her ex-husband and left him a message stating "Say good-bye". Eric then called 911 and deputies were dispatched to the Eubank's residence. Eubanks had approached Brandon in the living room while he was eating a bowl of cereal and

watching television. Eubanks shot Brandon once in the temple and in the back of his neck. Next, Eubanks made her way into the younger boy's bedroom. Eubanks shot Austin while he was sitting on the top bunk. The next child killed was Brigham, who was shot twice. Finally Eubanks shot Matthew. At some point while in the young boy's bedroom Eubanks had to reload her revolver. Eubanks removed the expended shell casings and placed them in trash can. She reloaded her revolver and finished shooting her children (People v. Eubanks, 2007). Eubanks did not shoot her nephew who was in the room with her youngest children. At some point, Eubanks shot herself in the abdomen. Matthew was the only child that was still alive when the deputies arrived at the residence. Matthew died the next morning in the hospital. The deputies heard moaning from inside the residence. Inside the residence the deputies discovered that a shooting had taken place. Eubanks and her four boys had all been shot. Eubanks had written suicide notes that indicated she had killed her children for revenge against men that had done her wrong (People v. Eubanks, 2007). Eubanks was under the influence of alcohol, Prozac, and Valium at the time of the killings (People v. Eubanks, 2007).

Case 2-Lakeisha Adams

Lakeisha Adams is a Louisiana woman that was 18 years old on the day that she murdered her three month old son. Court documents indicate that Adams had a history of unstable relationships (Louisiana v. Adams, 2010). Adams lived with her grandmother at the time of the offense. Adams was the primary caregiver to both of her children. Adams had two children out of wedlock by the time she was 18 years old. The offender received little support from the children's father. Court documents indicated a history of depression within Adam's family (Louisiana v. Adams, 2010). Adams also suffered from post-partum depression and PTSD. Adams was taking medication at the time of the offense for back pain and depression.

The PTSD was brought on by an incident that involved an altercation with Adams and another female (Louisiana v. Adams, 2010). Adams was stabbed in the incident that involved the other woman. The altercation was due to the fact that both women were seeing the same man and both had children from him. Adams had been involved in several confrontations with this particular woman. Adams also indicated that she had attempted suicide prior to killing her son.

Adams was unemployed at the time of the offense and a senior in high school. According to one of Adam's high school teachers, Adams was contemplating dropping out of school to find a job (Louisiana v. Adams, 2010). Friends and family of the offender described her as a good mother (Louisiana v. Adams, 2010). Friends and family also described the offender as paranoid, jealous, delusional, withdrawn and suffering from hallucinations.

On December 5, 2005 Lakeisha Adams placed her young son in the dryer and turned the machine on in attempts to quiet him (Bogalusa Police Dept., 2005). Adams had been arguing with the child's father prior to placing the child in the dryer. After placing her son in the dryer, Adams went back to watching a movie with her daughter. Adams discovered that her son was deceased and removed him from the dryer. Adams then redressed her son and called the child's father. Next, Adams placed a phone call to emergency services. The 911 transcript indicates that Adams told authorities that a man had come into in her house and placed her son in the dryer while she was outside of the home (Bogalusa Police Dept., 2005). Law enforcement arrived on the scene and found the child to be deceased. Adam's told the authorities the same fictitious story about a masked man locking her out of the house and placing her baby in the dryer (Bogalusa Police Dept., 2005). The story Adams gave to the police didn't quite add up, so with a little prying from investigators they were able to elicit a confession. Adams was then taken into

custody by law enforcement. Adams also confessed that she had placed her son in the dryer one other time prior to the offense.

Case 3-Leslie Demeniuk

Leslie Demeniuk was born in Charlottesville, Virginia on April 24, 1969 to John and Katherine Ewing (Swindell, 2008). The Ewing's had three daughters, Leslie was the oldest. The family moved to Maryland shortly after the birth of Leslie. When Leslie was twelve years old her parents divorced. The two youngest daughters lived with their mother, while Leslie lived with her father. Leslie experimented with recreational drugs while in high school and admitted trying Marijuana, LSD, and cocaine.

Demeniuk is very intelligent, with an approximate IQ of 117 (Swindell, 2008). After graduating high school Demeniuk did a study abroad program and then attended college. However, after only one year Demeniuk dropped out of college. After the birth of her sons, Demeniuk began taking online classes at a community college.

In March 1996 Leslie met Tommy Demeniuk, a naval officer, at a local bar in Florida. After dating for several months, Leslie became pregnant. When Tommy returned from deployment the couple married at the local courthouse (Swindell, 2008). A couple months later Demeniuk gave birth to twin boys. Demeniuk would be left at home for months at a time while Tommy was deployed at sea. The young couple began to struggle and frequently argued. In December 1999 Demeniuk asked Tommy for a divorce. Demeniuk moved into her father's home for financial and emotional support. Tommy and Demeniuk had a difficult custody battle over the twins. Demeniuk began to become depressed after finding out her husband also wanted custody of the twins. While going through the divorce with Tommy, Demeniuk became

depressed and had trouble sleeping. Demeniuk went to her local physician and was prescribed Zoloft and Xanax. Zoloft and Xanax are selective serotonin reuptake inhibitors (SSRIs) that are designed to control depression by affecting chemicals in the brain (Mayo Clinic, 2010). In March 2001 Demeniuk told her boyfriend that she had thought about committing suicide (Swindell, 2008). Demeniuk told her nurse that she had been having suicidal thoughts so the nurse proscribed Paxil and told her to discontinue using Zoloft. Demeniuk was ultimately awarded custody of the twins.

After Leslie and Tommy divorced, Leslie began dating Anthony Ortiz. On March 16, Demeniuk got physical with her Ortiz when he questioned whether she was taking the proper dosage of her medicine. Ortiz claimed that Demeniuk becoming physical was completely uncharacteristic. On March 17, 2001, Demeniuk was under the influence of alcohol and a combination of her prescription medication, Paxil and Zoloft (Swindell, 2008). Demeniuk called her ex-husband to see if he could watch the children but he was unable to. Demeniuk called her boyfriend and relayed the news. When the phone conversation ended, Demeniuk went into her father's room and retrieved the gun from his closet. Next, she loaded the .357 and walked into the bedroom where the twins were watching television (Swindell, 2008). Demeniuk put the gun up to James head and shot him. Johnny tried to flee the bedroom to escape his mother. Demeniuk pulled the trigger but missed. Demeniuk fired the gun again at Johnny. The bullet grazes Johnny's head and Demeniuk was able to catch Johnny and pin him down. Demeniuk placed the gun to the side of his head and pulled the trigger (Swindell, 2008). After shooting the twins, Demeniuk immediately called her Ortiz and admitted to killing her twins. Ortiz drove to Demeniuk's father's house and discovered a horrendous scene. When police arrived on the scene, Leslie confessed to murdering the twins. Demeniuk was taken by ambulance to a nearby

hospital. Demeniuk admitted to the paramedics that she had killed her children. Leslie Demeniuk claimed that the use of Zoloft, Xanax, and Paxil caused her to consume a large amount of alcohol (Demeniuk v. Florida, 2004). The defense claimed that the use of the prescribed SSRIs caused an inner restlessness and agitation causing Demeniuk to self-medicate with alcohol (Demeniuk v. Florida, 2004). Demeniuk was under the influence of alcohol, Zoloft, Paxil, Xanax at the time of the killings (Demeniuk v. Florida, 2004).

Case 4-Deanna Laney

Deanna Laney was 38 years old at the time that she murdered two of her children and severely injured her third child. Laney was born in a small Texas town to Floyd and Lanell Boatright. Laney was one of three daughters of Floyd and Lanell Boatright. Records did not reveal a history of mental illness in the Boatright family. Laney transferred to John Tyler High School her senior year because of an incident that involved alcohol (Smith County Sheriff's Office, 2003). Laney graduated from high school and did not attend college (SCSO, 2003).

Laney married Keith Laney on October 13, 1984 in Smith County, Texas. The couple had three boys during their marriage. Police records indicate that Deanna Laney had not previously had contact with a physician concerning depression or psychotic thoughts (SCSO, 2003). Deanna Laney was a stay-at-home mom who homeschooled her young children. Laney was extremely religious and appeared to have a loving marriage with her husband. Friends and family described Laney as the perfect mother (SCSO, 2003). In the weeks leading up to the crime, Laney had trouble sleeping, had become withdrawn and had lost a significant amount of weight (SCSO, 2003).

In the early hours of May 10, 2003 a 911 call came in from Deanna Laney. Laney told the operator that she had just murdered her children. Laney claimed that she had heard voices in the days leading up to the crimes (SCSO, 2003). The 911 transcript indicated that Laney felt that God had told her to kill her children (SCSO, 2003). Laney hit her youngest son in the head with a rock in his bedroom. Police were dispatched to the offender's home. Laney's husband was unaware that the situation that had just occurred. The child was discovered by police with a massive head wound and had been covered with a pillow (SCSO, 2003). The older two boys were taken outside one at a time by Laney. Laney repeatedly hit each boy in the head with large rocks. The children were found by authorities with massive head wounds (SCSO, 2003). Both boys were found near a large rock garden and were deceased when police arrived on the scene. It was noted that both boys had large rocks on top of their bodies. The youngest boy was still breathing when police arrived and was airlifted to a nearby hospital (SCSO, 2003). The offender was covered in blood spatter from her three young children. Laney was taken into custody by the Smith County Sheriff's Department.

Case 5-Lashaun Harris

Lashaun Harris is a California woman who was 23 years old on the day that she murdered her three young sons. Harris became pregnant at the age of 15. Harris was the primary caregiver of her three children. The father of the children did not offer financial or emotional support to the children. Harris and her children were physically and verbally abused by the children's father. She dropped out of high school voluntarily during her junior year of high school. Court documents reveal that Harris had a very low IQ of 70, indicating she was within the borderline range of retardation (People v. Harris, 2010). Court documents did not indicate if there was a history of mental illness within the offender's family.

Harris had been hospitalized on several occasions due to mental illness. One hospitalization was due to her trying to climb out of an upstairs window (People v. Harris, 2010). She had suffered psychotic thoughts and was prescribed medication for this reason. Harris was diagnosed to be suffering from paranoid schizophrenia (People v. Harris, 2010). Harris also suffered from delusional thoughts and auditory hallucinations (People v. Harris, 2010). At the time of the offense, Harris was unemployed and living in a Salvation Army family shelter (People v. Harris, 2010). Harris had made comments to family member prior to killing her children that she had thought of harming the children. The same day that Harris killed her children, she indicated to her cousin what she planned to do so (People v. Harris, 2010).

On October 19, 2005 Harris boarded the Bay Area Rapid Transit to San Francisco, where she planned to throw her children from the pier into the water (People v. Harris, 2010). Harris had been experiencing auditory hallucinations telling her to kill her children in this manner. Upon arrival in San Francisco she walked around with her children. Harris bought the children hotdogs and allowed them to play before taking them to Pier 7. While at Pier 7, Harris heard voices from God telling her to murder her children. Harris began to try and undress her oldest son, but he put up a fight. Ultimately, Harris was able to undress her son and throw him into the water. Harris repeated the same sequence with her two remaining sons. A man witnessed Harris throwing her children over the pier and called police. Police arrived on the scene and made contact with Harris. Harris initially misled police and told them that the children were with their father. However, minutes later she admitted to throwing her children into the ocean. Harris was then taken into custody for questioning by San Francisco police officers. The murders of the Harris children were pre-mediated by Lashaun Harris. Harris went to great lengths to carry out a plan that she believed came from God.

Case 6-Andrea Yates

Andrea Yates was 33 years old at the time that she methodically murdered her five children. Andrea Yates was born Andrea Pia Kennedy on July 2, 1964 to Andrew and Keren Kennedy. Yates was the youngest of five children. Yates was born and raised in Houston, Texas. Several members of the Yate's family suffered from mental illness. Direct family members of Andrea Yate's had suffered from depression and Bipolar Disorder (Dietz, 2002).

Forensic Psychiatrist, Phillip Resnick described Andrea Yates as an overachiever in everything she did (Resnick, 2011). Yates ranked first academically in her high school class of 608 students. She was also the President of the National Honor Society. Yates also excelled in sports in high school. Yates was awarded her Bachelors of Science in Nursing at the age of 21. Yates IQ was in the 120 range (Resnick, 2011). Yates began her nursing career at M.D. Anderson Hospital and Tumor Institute in 1986. In 1989 Yates married Rusty Yates (Dietz, 2002). In 1994 Yates resigned as a nurse clinician after the birth of her first child (Dietz, 2002). Yates would never return to work outside of the home again. Andrea became pregnant a couple months after their wedding. Rusty and Andrea had four boys and one girl. The Yates family lived in a comfortable three bedroom house before moving into an RV trailer. The move into the RV trailer was prompted by their religious views and belief that it would bring the family closer together (Dietz, 2002). Next, the family moved into a bus that had been converted into living quarters. This move was also due to their religious beliefs. The Yates family followed the views of the Warneckis, a family that travels and teaches the word of Christ (Dietz, 2002). Yates was a fulltime stay-at-home mother to her five children and also homeschooled the children.

According to court documents, Yates did not have a prior history of criminality or substance and alcohol abuse (Dietz, 2002). Yates had made several attempts at suicide prior to the murder of her children. The first attempt of suicide was by overdose of sleeping pills and the second attempt was with a knife (Dietz, 2002). Subsequently, Yates was admitted several times to psychiatric hospitals and was prescribed medication for depression and anti-psychotics.

On June 20, 2001 Andrea Yates committed the most unimaginable crime. Yates, against the advice of her doctor, was left at home with her five young children. Shortly after Rusty left for work, Andrea filled a bathtub with water. Andrea placed her son, Paul, face down in the water. After Yates drowned Paul, she then placed him on her bed. Next, she would force Luke and John to suffer the same fate. Luke and John were also placed in the bed next to Paul. Yates then submerged her six month old daughter, Mary, in the water. Mary was left floating in the water (Dietz, 2002). Noah, the oldest child, was called into the bathroom by his mother. At the age of seven, Noah could sense something was not right when he saw his sister in the bathtub. Noah ran from the bathroom in fear of his life. Yates was able to catch Noah and drag him back into the bathroom. Noah would put up the greatest fight, but ultimately would succumb to his much stronger attacker. Yates placed Mary in the bed with three of her brothers and covered them with a sheet. Authorities would find the lifeless body of Noah still in the bathtub where he was murdered. A possible reason that Noah was not transported from the bathtub to the bed was due to his size and the physical exertion it required to kill him. Yates experienced to kill him. After murdering the children Yates then placed a phone call to authorities stating that she had just murdered her children. Yates also called her husband, Rusty Yates, and informed him that he needed to come home (Dietz, 2002). Andrea Yates had a

premeditated plan to murder her children. The offender waited until an opportune time to act out what she had visualized repeatedly in her head. Yates was taken into custody by authorities.

Overview of Major Themes

An analysis of the data from police investigative reports, court transcripts, medical records, lectures, and police interviews revealed several common themes and patterns among the offenders. The first theme that appeared from the data was that all six of the women that committed filicide fully confessed to the crime. With the exception of one case, all women confessed immediately when confronted by law enforcement personnel.

Being the primary caregiver of the children was also a common denominator among the women. In all six cases, friends and family testified that the offender was a “good mom”. This was an interesting finding being that all six women were the reason that the children were no longer living, and two of the women had previously abused their children.

Characteristics of Perpetrators

The study consisted of seventeen children that were murdered between 1996 and 2005 by six females (mean age, 29.83 years; age ranging from 18-38 years). Two of the women in the study were African American, the remaining four women were Caucasian. Of the six women, four had graduated from high school. With the exception of one, all of the women were unemployed at the time of the offense. Employment was undetermined on the final perpetrator. The majority of the women (5/6, 83.33 %) suffered hallucinations prior to or during the offense. Only two of the women had been hospitalized due to psychiatric reasons before committing filicide. Documents revealed that only half of the women had been prescribed medication for depression. Two of the six women suffered from post-partum depression at the time of the

offense. Also, the data revealed that half of the women had previously worked in the medical field. Two of the women home-schooled, two of the women allowed the children to go to public schools, and two of the women had children that were not of school age. One third (2/6) of the women had physically abused their children prior to the filicide. Two of the six women indicated to family and friends that they experiencing homicidal thoughts toward their children. Only one of the six women attempted suicide after committing the homicides. Records did not indicate that the women had criminal history prior to the filicides. However, several of the women experienced physical altercations or had the police dispatched to their home for domestics disputes.

The tables listed on the following three pages display the offender demographics/background, childhood and family-of-origin, characteristics before offense, expressed motive and the offender's motive from the researcher's point of view.

Table 1 Offender Demographics/Background

Demographics/ Background	Offender						Percentage or mean
	EUBANKS	ADAMS	DEMENIUUK	LANEY	HARRIS	YATES	
Age	33	18	31	38	23	36	29.83
Female	+	+	+	+	+	+	100%
Married				+		+	33.33%
Divorced	+		+				33.33%
Never Married		+			+		33.3%
Ethnicity-White	+		+	+		+	66.66%
Ethnicity-Black		+			+		33.33%
High School Graduate	+		+	+		+	66.66%
College Graduate						+	16.66%
Unemployed	+	+		+	+	+	83.33%

Table 2 Offender Childhood and Family-of-origin

Demographics/ Background	Offender						Percentage or mean
	EUBANKS	ADAMS	DEMENIUUK	LANEY	HARRIS	YATES	
Physically Abused	+						16.66%
Sexually Abused	+						16.66%
Parents Divorced	+		+				33.33%
Parents Married				+		+	33.33%
Financial Hardship	+				+		33.33%
Neglect	+						16.66%
Parental alcohol abuse	+						16.66%
Family mental health problems		+				+	33.33%

Table 3 Characteristics of Mother Prior to Offense

Demographics/ Background	Offender						Percentage or mean
	EUBANKS	ADAMS	DEMENIUK	LANEY	HARRIS	YATES	
Suicide Thoughts	+	+	+		+	+	83.33%
Attempted Suicide		+			+	+	50%
Threats on children	+				+		33.33%
Psych. Hospitalized					+	+	33.33%
Depression		+	+		+	+	66.66%
Prescribed medicine for depression		+	+			+	50%
Prescribed medicine anti-psychotic					+	+	33.33%
PPD		+				+	33.33%
PTSD		+					16.66%
Hallucinations		+	+	+	+	+	83.33%
Paranoid					+	+	33.33%
Anxiety	+		+			+	50%
Alcohol Abuse	+		+				33.33%
Sub. Abuse	+		+				33.33%
Eating Disorders						+	16.66%

Table 4 Expressed Offender Motive

Demographics/ Background	Offender						Percentage or mean
	EUBANKS	ADAMS	DEMENIUK	LANEY	HARRIS	YATES	
Altruistic				+	+	+	50%
Accidental		+					16.6%
Revenge	+						16.6%
Unwanted Child							0%
Acutely Psychotic			+				16.6%
Altruistic & Acutely Psychotic							0%

Table 5 Offender Motive-Researcher’s Opinion

Demographics/ Background	Offender						Percentage or mean
	EUBANKS	ADAMS	DEMENIUK	LANEY	HARRIS	YATES	
Altruistic							0%
Accidental							0%
Revenge	+	+					33.3%
Unwanted Child			+				16.6%
Acutely Psychotic							0%
Altruistic & Acutely Psychotic				+	+	+	50%

Characteristic of Victims

Of the 17 victims that were murdered, 16 were male and 1 was female. Males were overly represented in the sample. The youngest victim was three months old and the oldest was 14 years old. The average age of the children victims that were murdered was 4.69 years. There was also a surviving victim that survived the attacks of his mother. All of the cases involved multiple victims except for the case involving Lakeisha Adams. Three of the 17 victims tried to physically escape from their mother's attack. The remaining children were either too young to fight back, were submissive to their mother's demands, or did not have enough time to react to the situation. There were no outstanding findings in the children victims.

Characteristics of Offenses

The homicides occurred more frequently at the home of the perpetrator (5/6, 83.33 %). The instance that occurred outside of the offender's home was the case of a mother who was living in a homeless shelter. Half of the crimes transpired during the weekend and the other half during a weekday. Four different methods of filicide were used by the six women; drowning (2/6), use of a firearm (2/6), stoning (1/6), and the use of an appliance (1/6). In all of the cases but one (5/6, 83.33%) the mother killed multiple children. In half of the cases the women called their partner or ex-partner and made references to the commission of filicide. In half of the cases, the offender fought with a boyfriend or husband directly before the filicide occurred. The prior stressor of fighting with a partner could be considered a trigger mechanism for filicide. The trigger facilitates the filicide to occur. This type of prior stressor has also been reported in other violent crimes such as homicide and rape. All three of the mothers that fought with their significant other or estranged partner on the day of the crime were found guilty in court. All of

the women but one murdered or attempted to murder all of their children. One child survived the attack from his mother.

Table 6 Characteristics of Offense

Demographics/ Background	Offender						Percentage or mean
	EUBANKS	ADAMS	DEMENIUK	LANEY	HARRIS	YATES	
Location-Residence	+	+	+	+		+	83.33%
Location-Not at Residence					+		16.66%
Weekday		+			+	+	50.00%
Weekend	+		+	+			50.00%
Time-AM				+		+	33.33%
Time-PM	+	+	+		+		66.66%
Method-Firearm	+		+				33.33%
Method-Drowning					+	+	33.33%
Method-Stoning				+			16.66%
Method-Appliance		+					16.66%

Research Questions

What are motivational factors for maternal filicide?

There were several different motivational factors for committing filicide expressed by the women. The most common motivational motive expressed by the offenders was an Altruistic motive (3/6, 50%). Accidental, revenge, and acute psychosis were each represented by one filicidal woman.

Are there common childhood factors shared by the filicidal women?

The study revealed very little commonalities of childhood factors among the women. Five out of six of the women appeared to have a normal childhood with nothing significant to report. Half of the women in the study were teenagers when they became pregnant for the first time.

What precipitating factors indicate that a mother might be at risk?

The research indicated that there were common factors experienced by the women that committed filicide. Hallucinations were experienced in five of the six women in the study. Depression was indicated in over half of the women (4/6), although this might actually be higher due to it not being discussed in court documents. Four of the six women became pregnant out of wedlock. All of the women in study were the primary caregiver for the children. Five of the six women had a strained relationship with the victim's father. The majority of the women had experienced thoughts of suicide prior to the offense (5/6, 83.33%). The data revealed a prior stressor was experienced by 50 % of the women. The prior stressor was an argument with their significant other or estranged partner. Unemployment at the time of the offense was found in the

majority of the women (5/6). I would like to note that I was unable to determine the employment status of the remaining offender.

Do significant common behavioral characteristics exist to formulate a maternal filicide profile?

It would be difficult to create a complete profile for a filicidal woman, however the factors listed above as precipitating factors would be a good starting point. Factors that could be included in a profile would be primary caregiver, experienced depression, suicidal thoughts, prior stressors, strained relationship with victim's father, and unemployment at time of offense. I would also include that a woman that commits filicide is likely to confess as was the cases with all the women in this study (6/6).

What are the differentiating factors between filicidal women found not guilty by reason of insanity and filicidal women that are found guilty?

All three women that were found NGRI were found to be delusional leading up to or on the day of the crime. Only one woman that was found guilty experienced delusions. The most interesting theme was one hundred percent of the women that were found NGRI had actually committed premeditated murder. Interestingly all three of the offenders that were found guilty had fought with their partner or ex-partner on the day the murders were committed. All of the women in the NGRI category experienced extreme religiosity and felt that God commanded them to kill her children; this occurred in none of the women in the guilty category. Altruism as the expressed motive by offender was found in the entire NGRI category, and found in only one of the guilty category. All three guilty women had pregnancies out of wedlock; this occurred in one of the NGRI category.

Validity of Findings-

The size of the subject population directly impacts the validity of the study. The small sample size made it difficult to determine whether the findings can be generalized to the larger population. However, the study strived to include a sample that is representative of women that commit filicide. The results of this study reinforced findings within other filicidal studies. Indicating that the study could be generalized to the larger population of filicidal women. The subjects in the study were not chosen at random, because of the specific phenomenon that was being observed. Bias is always a concern when using a non-random sample. The study eliminated the amount of bias by not allowing selection bias to occur within the study. Women that met the criteria for filicide were only eliminated from the study if there was not enough data to analyze.

Discussion

Filicide is a phenomenon that transcends gender, species, and national boundaries. No country big or small is immune from filicide. The United States has one of the highest rates of filicide in the advanced countries (Friedman et al., 2005). Filicide has been around since the beginning of time and will likely exist until the end of time. We are not likely to end filicide all together, but by studying the phenomenon we may be able to identify warning signs that could help prevent filicide. Various studies have attempted to rationalize and understand what can cause a loving and nurturing mother to become a cold-blooded killer. This study investigated the phenomenon of filicide by analyzing in-depth characteristics and behaviors of six women that killed their children.

Discussion of Research Questions

What are motivational factors for maternal filicide?

There were several different motivational factors for committing filicide expressed by the women. The most common motivational motive expressed by the offenders was an Altruistic motive (3/6, 50%). Resnick initially identified five motivational factors for filicide (Resnick, 1969). The five factors described by Resnick are the most widely accepted among the literature. However, the motivational factor idea is actually quite problematic. Many women might not fit neatly into the black and white five motivational factors found by Phillip Resnick. Several women in this study were found to have several motivations behind the filicide. Also, the motivation offered by the offender may not be the actual motive behind the filicide. For this reason, I made two separate categorization systems for motivational factors; expressed motive by offender and offender motive-researcher's opinion.

Three of the women stated their motivational was altruistic; I agreed with this finding but also placed them in the category of acutely psychotic. Their actions at the time and leading up to the offense and their medical history lead me to believe that they were acutely psychotic at the time of the offense. One offenders expressed motive was revenge, which I also agreed to be the motive. Another offender claimed her motive was acute psychosis because she had an inability to control her urge to drink due to side effects from the medication she was prescribed. However, I believe the argument that occurred directly preceding the crime appears to favor the revenge motive. The offender was angry with her ex-husband and therefore shot her children to get back at him. The prosecutors argued in this case that the motive was unwanted children. This is also a very reasonable possibility because the children didn't seem to fit with her lifestyle. The final offender claimed that her motive for killing her child was accidental. This is the aforementioned case of Lakeisha Adams where I found that there were three possible motives- revenge, accidental or unwanted child. It is obviously very difficult to fit a woman into one motivational category due to complex factors that influence a person's actions. It is possible that there is multiple motive overlap in maternal filicide.

Are there common childhood factors shared by the filicidal women?

The six women in the study came from various backgrounds. I was hoping one strong theme would emerge but this was not the case. For some of the women I was unable to obtain sufficient childhood background information. Most of the records that I had access to didn't discuss the childhood of the women. It is difficult to determine if the lack of reference to the women's childhood was due to nothing significant being found or just a lack of reporting on the subject. However, it was apparent that the women came from both sides on the family-of-origin spectrum. For instance Andrea Yates came from a very loving and supporting home, but Susan

Eubanks came from a very dysfunctional and abusive home. The records on Eubanks revealed the most childhood details out of all of the women in the study. The records that I analyzed indicate that the majority of women that committed filicide experienced a relatively normal childhood. The data revealed that the women varied in education, family-of-origin, and substance abuse in adolescence.

What precipitating factors indicate that a mother might be at risk?

Thoughts of suicide, pre-marital pregnancy, depression, hallucinations, prior stressor as a trigger, unemployment, a strained relationship with the children's father and being the primary caregiver were the main factors that suggest a woman might be at risk of committing filicide. These factors were indicative because they occurred with a higher frequency among the women. A prior stressor should be considered a warning sign because it is a common denominator in other offenders that commit serious crimes. Three of the women experienced a significant stressor directly preceding the filicide. One of the more important precipitating factors was being the primary caregiver. The research indicated that all of the women in the study were the children's primary caregiver, which could be considered a risk factor. A correlation can be found between these women and the female moustached tamarin. The correlation being, females that do not receive adequate spousal/mate support could be at higher risk to commit filicide. I had anticipated that depression and suicidal thoughts might be common among the women, but was surprised to see some of the other factors that prevailed. In the early stages of the study, I anticipated post-partum depression would be a big factor in filicide. However, the women that were included in the study primarily had children over the age of one. For this reason, even if they were suffering from depression they would not fall into the category of post-partum because

they were out of the required time frame. A woman that suffers from multiple of the precipitating factors should be considered high-risk for committing filicide.

Do significant common behavioral characteristics exist to formulate a maternal filicide profile?

Maternal filicide is one of the homicidal categories for which it is difficult to create a cookie cutter type of profile. Women that commit filicide come from different backgrounds and have different socioeconomic factors that contribute to a woman being at risk to commit filicide. I am unable to create a profile based off of my research. A profile based off of my research would be too broad to be of use for investigative purposes. However, in the majority of the women in this study, there were obvious signs that something was wrong and at the very least the woman was portraying signs of suicidal ideation if not signs of homicidal ideation. In several of the cases, friends and family of the women stated that they were concerned about the women prior to the offense. However, in the case of Deanna Laney, family and friends indicated that they were completely unaware of any signs that indicated that Laney was homicidal.

While the findings did not support a maternal filicide profile, the frequency for some common behavioral characteristics did suggest the feasibility of a maternal filicide risk factor checklist (found on page 73). The aforementioned factors in questions three were included in the maternal filicide checklist. The risk factor assessment checklist consists of 16 questions that should be considered by investigators. It is suggested that eight or more “yes” responses would indicate that a mother is at risk of committing filicide. The women in this study averaged a score on the risk factor checklist of 10.16 out of 16 (6, 10, 10, 10, 11, and 14, respectively). This number is 2.16 points higher than the recommended score that indicates a mother at risk of

committing filicide. The recommended score of 8 is based off prior literature on filicide and the risk factors scores of the women analyzed. The score of 8 was chosen because it allows for differences in the skill level of investigating agencies and the amount of details that are available in each situation.

Two women in the study scored considerably different on the maternal filicide risk factor checklist than the other women in the study. Lakeisha Adams scored a 14/16 on the checklist. Adams was also the only woman in the study that had attempted to conceal her involvement in the homicide of a child. The checklist would be beneficial in this scenario because the investigators could use it to focus their interview questions and also to probe for behavioral evidence against Adams. Fortunately, this case involved very skilled investigators that were able to elicit a confession from Adams without the assistance of a risk factor checklist. However, this is not always the case in every investigation and the maternal filicide risk factor checklist could be advantageous as an investigative tool. Deanna Laney scored only a 6/16 on the checklist. This number is not surprising because she was also the only woman that had friends and family that were oblivious that she was homicidal. It is also important to note that even though Laney had a lower score than what is recommended by the checklist, she immediately called authorities and confessed to the murders.

The checklist could assist in determining if a mother might be at risk for committing filicide. The checklist is to be used as an investigative tool and would not be a substitute for a quality police investigation. For example, if a police department has an equivocal death case involving a child and they have yet to rule out the mother as a suspect, they could use a checklist as one of their investigative tools to determine whether it would be pertinent to pursue the mother as a suspect. A reasonable assessment of the mother's culpability could be measured by the use of

the risk factor checklist. The checklist could also serve as a useful tool for structuring interview questions. A law enforcement agency could use the checklist to shape their questions for interviewing of the mother and friends and family of the mother. This would also assist investigators in exploring other plausible theories concerning the death and the involvement of others.

A filicide checklist could also be a preventive measure against filicide. Physician and counselors could utilize the checklist when counseling mothers that are suffering from depression. A mother that is portraying multiple items on the checklist should be considered high-risk for committing filicide. The physician would need to take the appropriate action to insure that the mother receives the help she needs to prevent a tragedy from occurring. A mother that is contemplating suicide should be considered a filicide high-risk.

What are the differentiating factors between filicidal women found not guilty by reason of insanity and filicidal women that are found guilty?

This question was created after the data had been analyzed through ATLAS.ti 7. The reason for creation of this question was because a theme emerged between the women that were found guilty and the women that were found not guilty by reason of insanity (NGRI). Previous studies have compared women that have experienced psychosis and women that did not experience psychosis when they committed filicide. This question is similar in that the majority of women who are found not guilty by reason of insanity would have been found to be psychotic at the time of the murders. I had to make a determination regarding which category Lashaun Harris would fit into because of the type of trial and outcome. Lashaun Harris went through a bifurcated trial; in the guilt phase Harris was found guilty but in the sanity phase she was found not guilty by

reason of insanity. Harris, Yates, and Laney were placed in the category of not guilty by reason of insanity. All three women lacked the capacity to recognize that their actions were wrong during the commission of the crime. Harris, Eubanks, and Demeniuk were placed in the category of guilty. I found it interesting that the women that were found NGRI had actually deliberately planned to murder their children. All three of the women that were found guilty had not committed premeditated murder. The guilty women acted more in the heat of the moment. The research also found that all three women that fought with a spouse or ex-spouse on the day of the crime were found guilty. Also an indicator that the women who were found guilty experienced a prior stressor but this was not the case for the women found NGRI. The women that were found NGRI had not argued with their spouse on the day they murdered their children. It was riveting to discover the major differences between the women found guilty and the women found NGRI.

Limitations

The study was able to discover detailed insight into the lives and backgrounds of women that commit filicide. However, there were several limitations to the study. The small sample size was the first limitation of the study. The small sample size makes it difficult to determine if the trends of the women in the study can be generalized to the rest of the maternal filicide community. Although, it would have been ideal to have a larger sample of women, the sensitive nature of the cases made it difficult to obtain a larger sample pool. Law enforcement agencies were reluctant or restricted by law in releasing information pertaining to homicides of young children outside official law enforcement channels. With that being said, the records that were received did not contain as much detail as hoped for. Unfortunately, several of the cases did not provide the same depth or research as the other cases of filicide. Also of importance to note, is

that some of the data was gathered from descriptions given by the offender. The offender is obviously going to want to minimize their negative actions and emphasize information that will give them sympathy. It might even be possible that the offender felt compelled to lie or over exaggerate mitigating factors to enhance their chances in court. These limitations had an impact on the external validity of the research.

Filicide and the parallel between humans and other species

Research has focused on humans that have committed filicide and also on different species outside of the human race that commit filicide. However, to my knowledge there has been little focus on the parallels between humans and other species that commit filicide. As previously stated, there are commonly five motives for filicide among animals. The five categories are: exploitation, resource competition, parental manipulation, social pathology, and sexual selection (Hrdy, 1979). Resource competition is seen in the langur monkey in instances where there are not enough resources for the entire troop. In some cases the langur monkey will actually commit filial cannibalism. This solves two problems: there is one less mouth to feed and the infant is of nutritional value to the mother. Several women in my study were young mothers that were lacking resources needed to care for their children and subsequently committed filicide. For instance, Lashaun Harris and her children were living in a homeless shelter at the time of homicides. It is safe to say that Harris was lacking resources to provide for her children. Harris indicated that her motive for the filicide was altruistic; this may signify that she felt the children would be better off dead because she was unable to provide the essential resources. The study conducted by Culot et al. found that the moustached tamarin infanticide rate was higher when there were fewer males to help with the rearing of the child (2011). This finding is similar to the scenarios of the women in my study. All of the women in this study

were found to be the primary caregiver of the children. The women were socially isolated and received little help from their spouse in rearing the children. Interestingly the women in this study and the two species of monkeys shared similar behavioral characteristics that led to filicide. This indicates that there are commonalities between different species that commit filicide. This may suggest that filicide is the result of a physiological response when a species feels that their survival is being threatened.

Recommendations for future research

Based, on the findings of this research, there are several recommendations for future research on filicide. First, I would recommend the use of a larger sample pool to allow for generalizability. Having a larger sample size will allow for a better understanding of traits associated with filicide. Interviews and questionnaires would be advantageous in gaining more detailed insight from women who have committed filicide. Also, to date there is no research comparing women who kill all of their children versus the women that only murder one of their children. Future studies could give a better insight on behavioral characteristics of women that commit filicide. Behavioral units associated with law enforcement, such as the FBI Behavioral Analysis Units, would have access to law enforcement sensitive information and may be able to address questions based on information unavailable to this research.

Future research could involve analysis of the reliability and validity of the maternal filicide risk factor checklist that was created in this study. It would be advantageous for a researcher to use a larger sample of women that have committed filicide and score each woman using the checklist. Additional research could examine the effectiveness of the checklist and whether there are any necessary adjustments for improvement.

Conclusion

The research yielded behavioral characteristics of mothers that commit filicide. There were themes that became noticeable between the women found not guilty by reason of insanity and the group of women that were found guilty. This was an unintended finding, but is beneficial in understanding factors that influence the outcome of a filicide trial. The majority of the women experienced suicidal thoughts and delusions prior to committing filicide. The research did not reveal significant factors in the childhood of the women that committed filicide. I was unable to create a maternal filicide profile based off of my results. However, I did create a maternal filicide risk factors checklist that could be beneficial for law enforcement agencies, counselors, and physicians. The risk factor checklist is advantageous as a preventive measure against filicide and as an investigative tool. The checklist that was created is a starting point for assessing women that might be at risk of committing filicide.

Interestingly, all of the women had family and friends that testified that they were a good mother before committing the crime. This is an indication that the women truly loved their children, despite murdering them. The study made strides in the correct direction on maternal filicide research. Additionally this study reinforced the findings of preceding research on filicide. The more research that is conducted on filicide will increase the likelihood of better understanding and prevention of filicide.

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APPENDICIES

**MATERNAL FILICIDE
RISK FACTOR CHECKLIST**

Several risk factors have been associated with maternal filicide. This checklist is to be used as an investigative tool for maternal filicide. This checklist is intended to assist investigators in determining whether a mother committed filicide. It is in no way to be used as a substitute for conventional investigative techniques. A total of 8 or more "yes" responses indicates that a mother is high-risk for committing filicide.

Mark yes for the following that apply.

- 1. Is the mother the primary caregiver?
- 2. Is the mother currently unemployed?
- 3. Has the mother suffered from hallucinations or is she currently suffering from hallucinations?
- 4. Has the mother suffered from delusions?
- 5. Is the mother currently suffering from depression?
- 6. Has the mother experienced thoughts of suicide?
- 7. Has the mother attempted suicide?
- 8. Is the relationship between the mother and father of the child strained?
- 9. Did the mother suffer a prior stressor directly prior to the death of the child?
- 10. Did the mother have an argument directly prior to the death of the child?
- 11. Did the child die in the home?
- 12. Did the mother experience a pre-marital pregnancy?
- 13. Did the mother suffer good mother stress? (pressure associated with being a good mother)
- 14. Did friends and family claim that the mother became withdrawn or isolated prior to the offense?
- 15. Has the mother made previous threats to harm children?
- 16. Has the mother been involved in physical altercations prior to the death of the child?

- Total "Yes" answers



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Smith County Sheriff's Office
Administrative Division- Records
227 N. Spring Street
Tyler, Texas 75702

Re: Texas Open Records Law Request- Fee waiver requested

Dear Custodian of Records:

Pursuant to the Federal Freedom of Information Act, I am requesting copies of reports pertaining to Deanna Laney and the May 2003 murders of Luke and Joshua Laney. I am requesting copies of incident reports, investigative reports, prosecution reports, background information, psychological assessments, crime scene reports, competency to stand trial reports, mental state examinations, and any other documentation concerning Deanna Laney.

Please waive any applicable fees. In order to help to determine my status for the purpose of determining applicable fees, you should know that I am affiliated with an educational scientific institution, and this request is made for a scholarly or scientific purpose and is not for commercial use. I am currently a graduate student at the University of Central Oklahoma, Forensic Science Institute, and am conducting research concerning maternal filicide in the United States. Release of this information is in the public interest because it will contribute significantly to public understanding and to law enforcement agencies.

If my request is denied in whole or part, I ask that you justify all deletions by reference to specific exemptions of the act. I will also expect you to release all segregable portions of otherwise exempt material. I, of course, reserve the right to appeal your decision to withhold any information or to deny a waiver of fees.

As I am making this request as a scholar and this information is to timely value, I would appreciate your communicating with me by telephone, rather than by mail, if you have questions regarding this request.

Thank you for your assistance.

Sincerely,
Jessica Shouse