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Domestic Homicide in the Youth Population

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DOMESTIC HOMICIDE IN THE YOUTH POPULATION

Abstract

Homicide perpetrated by a dating partner is a tragic and disturbing event. Risk factors for domestic homicide have been well established for the adult population; however very little research has been conducted on domestic homicide in the youth population. It is important that this population is explored further as female youth (ages 15-24) are at the highest risk for experiencing dating violence. This study analyzed cases of domestic homicide that occurred in Ontario from 2003-2014. The data for this study were provided by the Ontario Domestic Violence Death Review Committee (DVDRC). A total of 18 youth domestic homicide cases (ages 15-24) and 18 adult domestic homicide cases (ages 30-50) were examined. The youth cases were compared to the adult cases to uncover specific risk factors and themes present in youth domestic homicide. Results revealed that youth domestic homicides display similar risk factors to the adult population. However, youth victims were less likely to engage in counselling prior to the homicidal incident and youth perpetrators were found to have more contact with the criminal justice system. Finally, information from case summaries revealed that youth tend to disclose concerns about dating violence to their peers. This study provides several recommendations for interventions regarding youth dating violence and domestic homicides.

Keywords: dating violence, domestic homicide, youth, risk factors, relationships, peer disclosure, dating violence interventions
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Dating violence is a serious issue that affects many young women throughout Canada (Learning Network, 2013). The risk factors and outcomes associated with dating violence in the youth stage of life have been well established. One of the most extreme outcomes of this type of relationship violence, is the potential for homicide (Johnson & Colpitts, n.d.). While dating violence among youth couples has been extensively studied by researchers, there is a significant gap within the literature on the severe cases of dating violence that result in the homicide of a dating partner. Risk factors for domestic homicide between adult intimate partners and spouses have been well documented. However, little is known about the risk factors that are present during cases of domestic homicide between youth dating partners. Dating violence is most likely to begin in youth (between the ages of 15 and 24), and has been found to persist into college years and adult relationships (Hinduja & Patchin, 2011; Exner-Cortens, Eckenrode, Bunge, & Rothman, 2017; Johnson & Colpitts, n.d.; Silverman, Raj, Mucci, & Hathaway, 2001). There is also a tendency for dating violence to increase in severity (Offenhauer & Buchalter, 2011), which is why uncovering the risk factors associated with cases of domestic homicide in youth is vital. Knowledge of these risk factors will help improve risk assessment and risk management strategies that are currently used to prevent homicides between youth dating couples.

**Violence Against Girls and Women**

Violence against women and girls is a global issue that affects women of all cultures, ages, and socio-economic status. Types of violence perpetrated against women range from intimate to non-intimate partner violence and sexual assault, and extends to practices of female genital mutilation and forcing a marriage against one's will (Ellsberg et al., 2015). Global estimates of violence against women show that 1 in 3, or approximately 35% of women worldwide, have experienced either physical or sexual violence in their lifetime (World Health
Most of this violence is committed in an intimate partner context, with 30% of women and girls reporting they have experienced physical or sexual violence from an intimate partner (World Health Organization, 2016).

Unfortunately, prevalence rates of violence against women in Canada reflect the global statistics. According to Statistics Canada, (2013) violence perpetrated by an intimate partner was the most common form of violence against women. In 2011, Statistics Canada reported 97,500 cases of intimate partner violence and approximately 80% of these cases were committed towards females. Sinha (2013b) echoes that intimate partner violence is the most common form of violence perpetrated against women and girls. It appears that violence within an intimate partner relationship might begin in adolescence or early adulthood. While police reported rates of intimate partner violence were highest for women in their late 20’s and early 30’s, such violence was almost equally evident among younger women between the ages of 15 and 24 years (Sinha, 2013a). These prevalence rates of intimate partner violence would suggest that it is important to consider the youth of the couple when examining this phenomenon.

**Dating Violence**

Oftentimes violence perpetrated by an intimate partner is referred to as *intimate partner violence* - which refers to verbal, emotional, physical, and sexual violence or homicide committed within an intimate relationship by a current or former spouse or dating partner (Sinha, 2013b; Statistics Canada, 2015) – or as *domestic violence*, defined as a pattern of coercive behaviors, including physical, sexual, and psychological acts, and/or economic coercion, that perpetrators use against intimate partners (Child Welfare Information Gateway, 2013). However, the term *dating violence* is also applied when describing acts of violence that occur in romantic relationships. The meaning of dating has evolved and can be thought of as a subjective practice
that varies between individuals. Some view dating to be a trial period that includes multiple partners at one time and is casual and informal, while others associate dating with greater commitment or exclusivity. For most people, key ideas of dating involve romantic feelings, intimacy (sexual or non-sexual), and an ongoing relationship where two people spend time individually or in groups with friends (loveisrespect.org, n.d).

Dating relationships can share similar characteristics with couples who are married or cohabitating. Therefore, dating violence can be understood as a subcategory of domestic violence and intimate partner violence. Specifically, dating violence is violence committed by a current or former boyfriend or girlfriend, or by a person with whom the victim had a sexual relationship, but who was not considered the victim’s boyfriend or girlfriend (Statistics Canada, 2015). The nature of dating violence includes instances of physical, psychological, or sexual aggression perpetrated by an intimate partner (Coker et al., 2014). Recently, acts that constitute dating violence have expanded to include stalking and cyber dating abuse – which refers to controlling or harassing one’s dating partner via technology and social media (Zweig, Lachman, Yahner, & Dank, 2014). Victims of dating violence can be between the ages of 15 to 89 (Statistics Canada, 2015), but oftentimes this term is associated with a younger population.

Research shows that youth (ages 15-24) are the fastest growing population at risk for dating violence, accounting for approximately 43% of dating violence victims (Archer, 2000; Brown, 2013; Statistics Canada, 2008). This is concerning, as dating violence has been linked with a multitude of serious physical and mental health effects for youth that can be both pervasive and lasting. Dating violence has been associated with increased rates of depression, anxiety, substance use, suicide ideations, eating disorders, early pregnancy, risk sexual behaviours, serious injuries that require medical intervention, and re-victimization in college and
adult relationships (Barter, McCarry, Berridge, & Evans, 2009; Exner-Cortens, Eckenrode, Bunge, & Rothman, 2017; Exner-Cortens, Eckenrode, & Rothman, 2013; Lutwak, Dill, & Saliba, 2013; Vagi et al., 2013). Romantic relationships that are formed in youth offer a place for young adults to learn relationship dynamics and patterns that will likely be internalized beyond the youth stage of life (Wincentak, Connolly, & Card, 2016). This notion suggests that violence perpetrated and experienced in youth has the potential to escalate as they mature into adulthood (Williams, Connolly, Pepler, Craig & Laporte, 2008). It is important to gain an understanding of couples that may be at risk for experiencing youth dating violence in order to prevent this violence from continuing.

**Risk Factors of Dating Violence in Youth**

Risk factors can serve as red flags or predictors of individuals who have a higher likelihood of experiencing a particular phenomenon. In regards to the issue of dating violence, a risk factor can be defined as any variable that is reported more frequently among individuals who perpetrate and experience dating violence compared to those who do not (Gutman, Sameroff, Eccles, 2002; Vagi et al., 2013). It is important to study risk factors for youth dating violence because findings can help inform risk assessment, risk management, and safety planning strategies. *Risk assessment* refers to evaluating the level of risk of harm a victim may be facing including the likelihood of repeated violence or lethal violence, based on a professional’s judgment and/or a structured interview and/or a tool that may include a checklist of risk factors (Campbell, Hilton, Kropp, Dawson, & Jaffe, 2016). *Risk management* can be defined as strategies to reduce the risk presented by a perpetrator of domestic violence such as close monitoring or supervision, counselling to address the violence and/or related issues such as mental health and addictions (Campbell et al., 2016). Lastly, *safety planning* refers to strategies
that protect the victim by actions such as a change in residence, an alarm for a higher priority police response, a different work arrangement and/or readily accessible items needed to leave home in an emergency including contact information about local dating violence resources (Campbell et al., 2016). Research on risk factors for youth dating violence provides a greater understanding of which individuals may be experiencing dating violence in their relationships, as well as the best methods to assist those individuals. Previous literature has cited a wide range of risk factors that have been correlated with dating violence.

**Gender.** Being female is a risk factor for experiencing dating violence victimization. It is important to note that female youth (ages 15-19) are at a particularly high risk for dating violence. According to police reported statistics, females between 15-19 years of age experienced ten times more violence in dating relationships than young men (Statistics Canada, 2008). Some studies have uncovered similar rates of boys’ and girls’ experiences of dating violence and claim that the violence in youth relationships is bidirectional, meaning that males and females equally perpetrate violence (Bonomi et al., 2012; Ybarra, Espelage, Langhinrichsen-Rohling, Korchmaros, & Boyd, 2016). However, other studies have found that young women report more repeated instances of physical, psychological, and sexual victimization, as well as greater long term negative impacts from dating violence (Ackard, Eisenberg, & Neumark-Sztainer, 2007; Barter et al., 2009; Coker et al., 2014; Molidor, Tolman, & Kober, 2000).

**Exposure to Family Violence.** Experiencing violence in one’s childhood has been found to be another risk factor of dating violence. This can include being the victim of physical, sexual, or psychological abuse, as well as being exposed to domestic violence or parental violence in the home (Karlsson, Temple, Weston, & Le, 2016; Maas, Fleming, Herrenkohl, & Catalano, 2010). Foshee, and colleagues (2004) found that experiencing physical parental violence from an adult
was the most consistent predictor of youth dating violence. The study also uncovered that being hit by an adult with the intention of harm was a significant predictor of female dating violence victimization (Foshee et al., 2004).

Other Violent Behaviours. Exposure to violence by the means of media sources or specific violent cultures has also been investigated as a risk factor. Much of the literature has focused on the link between dating violence and consuming aggressive or sexually explicit material. Friedlander, Connolly, Pepler, & Craig (2013) found that regularly using aggressive media over a three-year period was predictive of dating violence for both perpetration and victimization. For example, pornography is a media type that is easily accessible for youth and often depicts extreme behaviours that are degrading to females and reinforce violence and against women and girls. Consuming pornography has been examined in relation to dating violence and has been found to be correlated with high perpetration rates (Raiford, Wingood, & Diclemente, 2007). Researchers point out that youth are early in their development and often look to the media for guidance on how to behave with peers or potential romantic partners, however, continually viewing extremely violent media can lead to distortions in youth’s attitudes toward dating (Friedlander et al., 2013).

Further, some research suggests that a relationship exists between perpetration of dating violence and having a criminal record. A longitudinal study that followed 1,354 serious juvenile offenders found that having a criminal history was predictive of perpetrating dating violence, particularly emotional dating violence (Sweeten, Larson, & Piquero, 2016). This relationship has also been observed among the university population, with college students demonstrating that possessing a criminal history poses a greater risk of assaulting one’s dating partner (Straus, & Ramirez, 2004). Violent cultures such as gangs and drug cultures have also been linked with
dating violence. A study by Brown (2013) uncovered that young women who become romantically involved with male gang members or drug dealers are at an increased risk of being victimized by their partner.

**Peer Influence.** Peers are a strong agent in navigating social experiences for youth. Youth is characterized in an increase in social relationships when many youth prioritize their peers in order to be liked and to belong (Foshee et al., 2013). Young adults often turn to peers for guidance and validation, and especially for support with romantic relationships to learn expectations and rules for dating (Garthe, Sullivan, & McDaniel, 2017). Research has demonstrated that a correlation exists between dating violence and peer influence. A review by Leen and colleagues (2013) cites peer influence as one of the most evidenced risk factors for dating violence within the literature. Peer influence includes associating with peers who; perpetrate dating violence, are victimized by dating violence, and are aggressive in general (Leen et al., 2013).

It appears that youth may model the violent behaviour they observe from their friends and classmates. Much of the literature has found that youth are more likely to engage in dating violence when they connect with peers who also perpetrate or experience violence in their romantic relationships (Barter et al., 2009; Foshee et al., 2013; Garthe et al., 2017; Raiford et al., 2007; Vagi et al., 2013). Youth may also be more likely to become involved in violent dating relationships when they regularly interact with violent peer groups. Both boys and girls who spent time with delinquent peers reported more physical aggression towards their dating partner (Miller, Gorman-Smith, Sullivan, Orpinas, & Simon, 2009). Finally, rejection from one’s peer group has been associated with an increased risk of dating violence. It has been shown that being
a bully and being a victim of bullying have both been found to correlate with dating violence perpetration. This relationship seems to be particularly apparent in boys (Niolon et al., 2015).

**Attitudes Toward Dating Violence.** Youth’s beliefs about dating violence has been extensively studied within the literature and may be one of the strongest predictors of dating violence (Friedlander et al., 2013; Leen et al., 2013). Research has demonstrated that many youth who engage in violent dating relationships have a general acceptance of dating violence norms. Such norms include, traditional gender role beliefs that involve exerting power and control over the victim, jealousy related to unfaithfulness, anger, hostility, the belief that dating violence is an acceptable conflict resolution tactic, and the belief that dating violence is acceptable to use on a partner who has acted “badly” (Adams & Williams, 2014; Friedlander et al., 2013; Karlseen et al., 2015; Jouriles, Grych, Rosenfield, McDonald, & Dodson, 2011; Smith Darden, Kernsmith, Reidy, & Cortina, 2016). It should be noted that attitudes toward acceptance of dating violence have also been associated with exposure to interparental violence and perpetration of dating violence among peers (Karlseen et al., 2015). Beliefs that condone dating violence can be applied to both the perpetrator and the victim; the perpetrator might use violence as a way to gain control or dominate his partner (Wincentak, Connolly, & Card, 2016), and the victim may adopt attitudes of acceptance as a way to justify what happened to her, especially when she chooses to remain with the violent partner (Karlseen et al, 2015). This notion may help explain why previous experiences of dating violence have been correlated with re-victimization in future relationships and in adulthood (Ackard et al, 2007; Exner-Cortens et al., 2013; Lutwak et al., 2013; Wincentak et al., 2016).

**Defining the Term Youth**
The Mental Health Commission of Canada (MHCC; 2015) recognizes that young adults are in a transitional stage to adulthood that is characterized by an increase in responsibilities and independence. Due to the continuous development young adults undergo during this life stage, it can be difficult to define where the stage of youth begins and ends. The MHCC uses the term *emerging adults* (for individuals aged 16-25 years old) to demonstrate that youth is a dynamic process of growth and change, and not a fixed span of time categorized by age (Arnett, 2000; Carver et al., 2015). Emerging adulthood is the period that occurs between adolescence and adulthood; adolescence can be thought of as the point in development when individuals are approximately between the ages of 12-17 years old (Arnett, 2000). During the emerging adulthood phase, developmental competencies that have started forming in adolescence continue as individuals explore various roles and life possibilities (Arnett, 2000; Carver et al, 2015).

Although emerging adulthood encompasses youth between the ages of 16 and 25, there are many different age categories that are used throughout the literature to conceptualize the youth population. Some researchers use a much lower starting point of 11 years old (Coyne-Beasley, Moracco, & Casteel, 2003), while others begin their mark of youth at an older age of 18 years old (Glass, Laughon, Rutto, Bevacqua, & Campbell, 2008). Much of the research has used the 15-24 years of age bracket to report findings on the youth population (Sinah, 2013; Statistics Canada, 2008; Statistics Canada, 2015; Carver et al., 2015). Therefore, the present study has selected the 15-24 age category to represent youth. It should also be noted that several other terms have been used throughout the literature to compliment the word youth (e.g. young adult, teen(ager), adolescent, emerging adult). For the purpose of clarity and simplicity, the present study consistently refers to the uses the term youth to refer to the 15-24 year age bracket.

**The Erratic Nature of Modern Youth Dating Practices**

It is not surprising that relationships among youth tend to be casual and brief. Oftentimes youth will loosely commit to their dating relationships; they may date multiple partners at one time and/or they may incorporate sexual relationships within friendships (Ackard et al., 2007; Davies, & Windle, 2000). However, many times the emotions experienced in these relationships are strong and deeply passionate, which results in confusion and frustration when the relationship ends. The combination of these intense emotions with the youth stage of development might contribute to the instability that is evident in some youth relationships. Research has found that relationships among youth are less stable compared to adult relationships (Carver, Joyner, & Udry, 2003; Statistics Canada, 2015). In their study exploring aggressive events that occur in instances of youth dating violence, Draucker and colleagues (2010) uncovered a tumultuous typology. Tumultuous events that led up to the violent incident were disorderly, difficult to follow, and were categorized by chaos and drama (Draucker et al., 2010) illustrating the instability present in many violent youth relationships. Instability may be viewed as typical or expected within the youth dating culture, however, it is concerning when evidence of dating violence exists in conjunction with a tumultuous youth relationship.

Jealously can be another dangerous aspect of youth relationships as it has been linked with physical partner violence (Boivin, Lavoie, Hébert, & Gagné, 2012). Adams and Williams’ (2014) study of Mexican American youth describes this link as an escalation from jealousy, to anger, to dating violence perpetration, and it appears that jealousy is a pervasive component of the youth culture. The researchers use the phrase “a peer culture of jealousy” to refer to the romantic jealousy that was found to exist across groups of youth. Jealously ensues most often from instances of infidelity or from a youth’s dating partner engaging in contact with members of the opposite sex. Infidelity seems to be quite common among youth; however, despite youths’
tendency to engage in multiple relations at once, what they ultimately desire is commitment in their relationships (Adams & Williams, 2014). This may be why youth have increasingly begun to monitor their romantic partner’s actions. Oftentimes youth will enlist the help of other peers to monitor their partner’s behaviour, and will also utilize social media sites and technology to assist in overseeing their partner’s activities (Adams & Williams, 2014). The researchers explain that partner monitoring works to legitimize and maintain a peer culture of jealousy among youth.

Many youth use technology to participate in several relatively new dating habits. An article by Pemberton (n.d) discusses how technology has diminished the privacy component to dating and created a more public culture of romance for youth that she refers to as “crowd dating.” Cell phones and social media networks give youth more options to accelerate or spoil their dating relationships. Youth are able to contact new partners, end relationships, and broadcast romance, fights, and hookups without actually having to speak to anyone personally (Pemberton, n.d). It seems that the features of modern youth relationships can make the process of finding a romantic partner challenging and unpredictable. The erratic characteristics present within some youth dating relationships suggests that there may be a greater number of risk factors present in cases of youth dating violence and domestic homicide.

Although youth development has been characterized with both high turmoil and conflicts (Smith-Darden et al., 2016), according to Carver and colleagues (2015) youth is also an ideal prevention period. The MHCC urges that mental health is acknowledged and prioritized during youth so that young individuals can flourish to be successful adults of the future. Youth may require improved interventions that focus on supporting them during typical developmental challenges, such as financial living independence, taking responsibility for oneself, managing impulsive and risky behaviours, and independent decision making (Carver et al., 2015).
Increased knowledge regarding high risk behaviours during the transitional stages of youth, such as dating violence, could help guide youth when they are most vulnerable, and progress into adulthood safely.

**Domestic Homicide**

There are many serious impacts of dating violence, including sustaining severe injuries that require medical attention or that lead to fatality (Jouriles et al., 2011). The most serious consequence of dating violence is death. Domestic homicide can be defined as the killing of one’s intimate partner, which may include a current or former dating partner, common-law partner, same-sex partner, spouse, or ex-spouse (Carcach & James, 1998). Within the criminology literature homicides are considered rare events, however regardless of rarity, the effects of domestic homicides are lasting and extend beyond the couple to other friends and family members (Roberts, 2009; Sheehan, Murphy, Moynihan, Dudley-Fennessey, & Stapleton, 2015; Smith, Fowler, & Niolon, 2014). Globally, 38% of female homicides are committed by a male intimate partners (World Health Organization, 2016), and in Canada there were 960 domestic homicides reported between the years 2003 and 2013. Of these, 747 were committed against a female victim, representing more than three quarters of homicides against an intimate partner (Statistics Canada, 2015). In Ontario between the years 2002-2014, there have been approximately 28 cases of domestic homicide committed each year (DVDRC, 2015). In 2012, a decrease in the number of domestic homicide victims was observed (Statistics Canada, 2015). Despite this decrease, the issue of domestic homicide is still evident in Canada and in other parts of the world. Risk factors need to be explored further so that this trend can continue to reduce worldwide.
Gender. While it is possible for males to be victims of domestic homicide, extensive literature has shown females to be at a greater risk. Stockl and colleagues (2013) conducted a systematic review examining global rates of domestic homicide. Their findings indicated that victim rates for a homicide perpetrated by an intimate partner were six times higher for females than males. It was also found that, across countries, women were at the highest risk of being killed by their intimate partners (Stockl et al., 2013). This result has been echoed among other researchers (Campbell et al., 2003; Dobash, Dobash, Cavanagh, & Medina-Ariza, 2007; Juodis, Starzomski, Porter, & Woodworth, 2014; Liem, & Roberts, 2009; Sheehan et al, 2015), making intimate partners one of the most dangerous potential perpetrators of homicide for women.

A History of Domestic Violence. Research has cited a variety of risk factors that have been established to be strong predictors of domestic homicides. The Ontario Domestic Violence Death Review Committee (DVDRC, 2015) has generated 39 risk factors that have been found to be repeatedly present within domestic homicide cases committed in Ontario from 2003-2014. Some of these risk factors include, mental health problems for the perpetrator, previous threats to kill the victim, access or possession of firearms, and substance abuse issues for the perpetrator (DVDRC, 2015). However, it appears that one of the most significant predictors of domestic homicides is a history of domestic violence within the relationship (Campbell, Glass, Sharps, Laughon, & Bloom, 2007; Smith et al., 2014). Recall that, although similar to dating violence, the terms domestic violence or intimate partner violence are often used to refer to couples in the adult population (ages 30 and above). When repeated acts of domestic violence are present in an intimate partner relationship, the risk for homicide increases (DVDRC, 2015; Dobash et al., 2007; Stockl, & Devries, 2013; Sheehan et al., 2015). Some of the literature has cited a history of criminal related violence to be predictive of domestic homicide perpetration. It has been found
that homicide perpetrators are more likely to have prior criminal involvement and be arrested for crimes against persons (Bailey, Kellerman, Somes, Banton, Rivara, & Rushford, 1997; Liem & Roberts, 2009). However, previous violence against a female intimate partner remains one of the strongest predictors for homicide (Campbell, Webster, & Glass, 2009). More concerningly, Juodis, et al. (2014) state that when the violence increases in severity, the risk for domestic homicide also increases.

**Separation.** When female victims of domestic violence are experiencing increasing levels of abuse, they are often encouraged to leave their intimate partner, however one of the most dangerous times for domestic homicide to occur is in the context of a woman separating from her abusive partner (Toronto DVDRC, 2008). Previous or pending separation, as well as a woman’s attempt to leave a violent relationship are commonly cited as risk factors among domestic homicide cases (Campbell et al., 2007, Dobash et al., 2007; Johnson & Hotton, 2003; Salari & Sillito, 2016). Liem and Roberts (2009) posit that risk may increase for a woman during this period due to possessive and jealous attitudes from her male partner. The researchers state that the homicide may be motivated by the perpetrator’s “narcissistic rage” that follows his feelings of hurt and rejection from his partner leaving him. This rage can be intensified if the female victim separates from her male partner for a new partner, or if she acquires a new partner after leaving him. Instances of infidelity, whether real or perceived by the perpetrator, often heighten the perpetrator’s feelings of jealousy and possessiveness, and can put the woman at a greater risk of domestic homicide (Dobash et al., 2007; Dobash & Dobash, 2011; DVDRC, 2015).

**Perpetrator Behaviour.** Finally, a change in the perpetrator’s behaviour has also been noted in reports of domestic homicide. In a qualitative study that interviewed friends and
relatives of individuals involved in domestic homicide cases, participants reported they noticed 
behavioural changes in the perpetrator prior to the homicidal event. Such changes included 
increased substance use and more frequent instances of arguing (Sheehan, et al. 2015). Findings 
such as these are valuable for domestic homicide research because they indicate that domestic 
homicides are preventable crimes.

Several tools have been developed to aid in the detection of risk for severity of violence 
within a relationship, as well as for the risk of homicide. For example, the Danger Assessment 
Scale (DA; Campbell et al. 2009) is a risk assessment tool that is used to assess the risk of 
homicide for a woman in a violent relationship. The DA examines areas such as, male 
dominance/proprietariness, jealousy, a woman leaving the relationship, a woman having a new 
such as the DA contrast previous notions that state domestic homicides are randomly and 
uncontrollably inflicted. Perpetrators of domestic homicide have often been portrayed as having 
conventional life course experiences and minor or no criminal histories (Dobash, Dobash, & 
Cavanagh, 2009). Existing research suggests, however, that these horrible acts are not committed 
“out of the blue.” Juodis and colleagues (2014) used the DA to support their findings that 
domestic homicides are carried out with intention and elements of planning, and that perpetrators 
may display a typology or a homogeneity. Research on perpetrator behaviour is important 
because results may aid in detecting this typology through risk assessment tools and studying 
domestic homicide risk factors.

**Domestic Homicide in the Youth Population**

Among the youth population, a history of serious dating violence can lead to homicide 
(Smith & Donnelly, 2001). According to the Georgia Fatality Review Project (2014), half of the
victims in the reviewed cases of domestic homicide began their relationship with their perpetrators when they were between the ages of 13-24 years of age, and 25% of the victims began their relationships when they were between the ages of 13-19 years of age. Although many of the homicides within the Georgia review actually occurred when the victim was between the 35-44 years, these statistics highlight the importance of early youth dating violence prevention. Greater knowledge about the risk factors associated with youth dating violence will aid in preventing cases of this violence from escalating to homicide.

In Ontario from 2001 to 2011, there were 18.8 domestic homicides for one million women aged 15 to 24 (Sinha, 2013b). According to Sinha (2013b) women ages 15-24 are most at risk for this type of homicide. The rate for domestic homicides drops to 10.3 homicides per million women aged 25 to 34, and 7.5 homicides per million women aged 35 to 44 (Sinha, 2013b), highlighting the vulnerability of the 15-24 year age bracket for young women. The youth of the couple as a risk factor has also been noted within the literature (DVDRC, 2015; Smith & Donnelly, 2001). Younger, reproductive age women may be at a greater risk of being killed by their male partner, due to younger men possibly being more violent or vulnerable (Shackelford, Buss, & Peters, 2000). It is important to obtain a better understanding of how and why these instances occur. However, there is currently a limited amount of research that exists on the relationship between youth dating violence and domestic homicide and a scant number of studies that have explored risk factors of domestic homicide for youth couples.

To the researcher’s knowledge, there have been only two studies that have investigated domestic homicide in youth relationships. Both studies use the term femicide to refer to the homicidal incident, which is a term used to describe the killing of girls and women. A study by Coyne-Beasley, Moracco, and Casteel, (2003) examined all records of femicide victims, aged 11-
18 years that occurred between 1990 and 1995 in North Carolina. There were 90 cases of femicide examined in total. Police interviews were conducted to determine the context and criminal history of these cases, as the cases within this study contained instances of females who had been murdered by family members, as well as intimate partners. The researchers separated the cases into two groups according to age; younger adolescents were considered ages 11-14 \((n = 27)\), and older adolescents were considered ages 15-18 \((n = 63)\). It was found that the younger adolescents were more likely to be killed by a family member, while older adolescents were more likely to be killed by an intimate partner. Current and former intimate partners made up the largest category of perpetrators.

Several risk factors were uncovered from the results of this study. Most of the adolescent femicide cases in this study occurred in the victim’s residence and the majority of these cases were committed with a firearm. The study found that eight of the femicide incidents occurred when the female victim had separated from their male perpetrator, or when the victim would not participate in a desired relationship. The researchers termed these, “broken relationships,” possibly because the youth couples were not legally married or bound by common-law. Of these eight cases, three of the perpetrators killed themselves after they killed the victim. The study notes that many of the victims were engaged in high risk behaviours that included, dropping out of school, using drugs, dating much older perpetrators with criminal records, and high-risk sexual behaviours. Based on the results of this study, it may be that factors such as engaging in risky behaviours, substance use, and older perpetrators with criminal records are more apparent in cases of youth domestic homicide.

An exploratory study conducted by Glass, Laughon, Rutto, Bevacqua, and Campbell, (2008) sought to identify risk factors for youth femicide by comparing cases of femicide to
abused female youth, as well as to cases of older adult femicide. The researchers examined records of femicide cases that occurred in eleven American cities. Of the 310 cases collected, 23 contained individuals who were between the ages of 18 and 20 years old. The women in the femicide group were compared to a group of 53 abused women who were also between the ages of 18 and 20 years old. A woman was considered abused if she had been physically assaulted (e.g., punched, choked, hit, kicked, etc.) or if she was forced to have sex by a partner or an ex-partner within the past two years. The DA was used to analyze risk factors for each of the groups and it was found that the women in the femicide cases scored higher than the abused women on almost every DA risk factor. Some of these risk factors included, age difference between perpetrator and victims, perpetrator threatened to kill victim, and victim abused while pregnant. The study found that the victims in the femicide cases had significantly older male intimate partners and these male partners were also more likely to be a current partner compared to the women in the abused group.

Glass and colleagues (2008), also found differences between femicide in the youth population and the older adult population. Their study considered older adults to be femicide victims who were aged 21 or older. It was found that the younger female victims of homicide were more likely to experience controlling behaviour from their partner (e.g. extreme jealousy) than older victims. According to the authors, female youth may normalize such behaviour from their partners, viewing it instead as acts of true love and commitment. However, results from their study revealed that jealous and controlling behaviors by a male partner approximately doubled the risk of femicide for female youth when compared to older adult females. It was also found that young women were more likely to be killed by an ex-partner, and this partner was more likely to be unemployed. The researchers state that these specific risk factors appear to be
more important predictors for lethal violence for younger women than for older adult women (Glass et al., 2008). This suggests that jealous and controlling behaviours, perpetrator unemployment, and the perpetrator being an ex-partner may be salient risk factors for youth. The studies by Coyne-Beasley et al (2003) and Glass et al (2008) are important contributions to the area of domestic homicide research, however further replications are required in order to gain a better understanding of homicide in the context of youth couples.

**Purpose of the Current Study**

The literature has demonstrated that female youth (ages 15-24) are at the highest risk of experiencing dating violence. Research also confirms that a history of violence within a dating relationship is a strong and consistent predictor of domestic homicide. It is, therefore, critical to examine the youth population more closely. Currently, there is a significant gap in the literature regarding domestic homicide in youth dating relationships. While some risk factors seem to be present in both youth and adult violent relationships, previous research suggests that youth domestic homicides may present some unique predictive factors that are different from the emerged adult population. The present study aims to provide a better understanding of the risk factors associated with domestic homicide in cases involving youth.

Specifically, this study seeks to expand on previous research by uncovering whether domestic homicides in the youth population are different from cases in the adult population, and if so, how youth cases differ from adult cases in terms of risk factors. Results from this study can be used to improve risk assessment and risk management procedures that are currently implemented in the detection of dating violence and domestic homicides, as well as enhance safety planning and preventative efforts for youth who are in dangerous dating relationships.

**Hypotheses**
Based on the current literature, the following are the expected findings of this study:

1. It is predicted that youth domestic homicide cases will display a greater number of risk factors than adult domestic homicide cases.

2. Some risk factors, such as substance use, perpetrator unemployment, and jealous and controlling behaviours will be more prominent in the youth population.

3. Some variables, such as separation and a history of violence, will be present in both age populations.

Method

Data

All data for this study were collected from the Domestic Violence Death Review Committee (DVDRC) of the Office of the Chief Coroner of Ontario. The aim of the DVDRC is to provide a comprehensive analysis of each case of domestic homicide that is committed annually in Ontario. The committee was established in 2003 and has since reviewed a total of 267 cases involving 376 deaths (DVDRC, 2015). The dataset for this study was developed by the Ontario DVDRC in collaboration with the Coroner’s Office in Ontario and is based on a coding form used by the DVDRC (see Appendix A). Experts from a variety of fields have made contributions to the DVDRC, including professionals in health care, social services, and law enforcement. These experts review the domestic homicide cases after investigations and court procedures have finished to create a comprehensive narrative of the events leading up to the homicide. The narratives include information regarding the history of the relationship, as well as background information on both the victim and the perpetrator. The reviewers derive information for the narratives from reports from coroners, police, courts, counselling professionals, and witnesses (DVDRC, 2014). Each case is also accompanied by a description that outlines detailed
information about the homicidal incident, such as personal characteristics of the couple, community services utilized by the couple, file information from health professionals and law enforcement, and reports from family, friends, co-workers, and neighbours. Risk factors are totaled and listed at the end of the case descriptions. By examining risk factors and common themes of domestic homicide cases, the DVDRC hopes to provide recommendations for more effective intervention strategies to prevent future homicides from occurring (DVDRC, 2015).

Participants

In order to be included in the dataset, the case must have resulted in a homicide or a homicide-suicide, which occurs when the perpetrator takes his own life after taking the life of his partner. The homicide also had to have been committed in a heterosexual relationship context (e.g., current intimate partner, former intimate partner, common law partner etc.). Homicides between other domestic relationships, such as parents, children, siblings, or relatives were not relevant to this study and were not examined in the analysis. The cases also had to involve a male perpetrator and a female victim, therefore all female victims are deceased and the male perpetrators are either incarcerated or deceased if the case was a homicide-suicide. Future research may consider domestic homicide in same-sex relationship contexts or female-perpetrated incidents; however, the sample size of these cases in the DVDRC was too small to be analyzed. There were no restrictions on ethnicity or socio-economic status for the individuals involved in the cases.

Procedure

Two groups were created in order to compare youth couples and adult couples. Within the 180 domestic homicide cases in the DVDRC database, a total of 18 cases met the criteria for a youth couple; that is, the couple was between the ages of 15-24. Both the perpetrator and the
DOMESTIC HOMICIDE IN THE YOUTH POPULATION

victim had to be within the 15-24 age range to be included in the youth sample. The 18 youth cases were extracted from the pre-existing DVDRC database and compared to a sample of 18 adult cases. A random number generator was used to obtain the sample of 18 cases from the adult population. Adult couples were cases where the couple was between 30-50 years of age. Again, both partners in the adult cases had to be between 30-50 years of age to be included. A gap of 5 years was left between the two age groups to ensure a meaningful difference in youth age and adult stage of development. The unknown variables within the dataset were not removed when reporting demographic characteristics, however all unknown variables were removed before conducting analyses.

Analyses

A total of 36 cases were analyzed to compare risk factors of domestic homicide in younger couples ($n = 18$) to adult couples ($n = 18$). Examples of risk factors include depression, unemployment, jealous and controlling behaviour, and substance use. Case contacts for both groups were also examined. The contacts were the individuals or services that the couple was in contact with prior to the homicide (e.g., physicians, psychologists, nursing home staff, social workers, and law enforcement). These were examined to gain information about the help seeking behaviour of youth and adults during the events leading up to a domestic homicide.

Demographic information pertaining to the couple (e.g., rural versus urban area, socioeconomic status, number of children) was gathered through descriptive statistics. Specific analyses included chi-square tests, which were used to determine the differences in risk factors and case contacts between the youth population and the adult population. A t-test was also conducted to determine the number of risk factors present within the cases. A significance level
of $\alpha = 0.05$ was used for comparisons with a priori hypothesis. Finally, case descriptions were examined qualitatively in order to identify common themes between the two groups.

**Ethical Considerations**

Ethics approval was obtained from Western University’s Ethics Review Board (see Appendix B). Upon receiving approval from ethics, the researcher took an oath of confidentiality. To ensure that identifying information regarding the cases was not released, each case was assigned a numerical code and stored on an encrypted computer. The researchers involved in the project referred to each case by its case number. Any identifying information about the couples in the dataset was stored on a separate master list.

**Results**

**Demographic Characteristics**

Demographic characteristics of both the victims and the perpetrators were examined (see Tables 1 and 2). Youth victims had an average age of 20 years ($M = 19.72; SD = 2.63$), and adult victims had an average age of 42 years ($M = 41.67; SD = 5.09$). Perpetrators in the youth sample had an average age of 21 years ($M = 20.94; SD = 2.49$), and perpetrators in the adult sample had an average age of 43 years ($M = 42.78; SD = 4.70$).

There were a greater number of older youth in the sample. Both the victims ($n = 10; 55.6\%$) and the perpetrators ($n = 14; 77.8\%$) in the youth population were more likely to be in the 20-24 years of age category. Adults were also older with most of the victims falling in the 40-44 years of age category ($n = 6; 33.3\%$), and the majority of adult perpetrators being within 45-50 years of age ($n = 10; 55.6\%$).

The most common citizenship status within the sample was Canadian. The victims were comprised of $88.9\%$ ($n = 16$) youth and $72.2\%$ ($n = 13$) adults with Canadian citizenship. Youth
DOMESTIC HOMICIDE IN THE YOUTH POPULATION

Perpetrators accounted for 88.9% \((n = 16)\) of Canadians in the sample, and adult perpetrators accounted for 66.7% \((n = 12)\). Youth victims tended to be employed \((n = 8; 44.4\%)\), however youth perpetrators were more likely to be unemployed \((n = 8; 44.4\%)\).

Relationship status was also examined (see Table 3). More than half of the couples were separated or estranged from one another \((N = 21; 55.6\%)\), and 14 \((77.8\%)\) of the youth couples were separated. It is important to note that 29.4% of youth had relationships that lasted less than 1 year, whereas none of the adult couples were in relationships that were less than 1 year in duration \((0.0\%)\).

Table 1.

*Victim Demographic Characteristics of the Youth and Adult Populations*

<table>
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Table 2.

*Perpetrator Demographic Characteristics of the Youth and Adult Populations*
DOMESTIC HOMICIDE IN THE YOUTH POPULATION

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Table 3.

Relationship Status of Youth and Adult Populations

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Risk Factors

This study examined a wide variety of risk factors between the youth and adult samples of domestic homicide cases. The Ontario DVDRC (2015) has identified 39 common risk factors
for cases of domestic homicide (see Appendix B). Chi-square analyses were conducted with 30 of these risk factors (see Appendix C). Several variables were not relevant to the current study and were, therefore, omitted from the analysis. Omitted variables referred to the couple’s age; examples include youth of the couple and age disparity of couple (age difference of 9 or more years).

**Total Number of Risk Factors.** The total number of risk factors in each case was examined and results did not indicate a significant relationship. A t-test was conducted to determine whether there was a difference in the amount of risk factors present in the youth and adult age groups. The analysis showed that there was not a significant difference in the number of risk factors for the youth population, \( M = 14.06; \ SD = 6.78 \) and the adult population, \( M = 12.22; \ SD = 5.45 \) \( \tau(34) = .894, \ p > .05 \).

Results did not indicate a significant relationship for any of the specific risk factors (see Table 4), however, a secondary analysis was conducted with system involvement and there were significant relationships for two variables.

**Prior Counselling for Victim.** There was a significant difference between the age groups and prior counselling received for the victim. Results revealed, \( \chi^2(1, \ N = 22) = 8.25, \ p = .004 \). Specifically, \( (0.0%, \ n = 0) \) of victims in the youth population engaged in counselling prior to the homicidal incident, compared to \( (54.5%, \ n = 6) \) of adult victims. This finding suggests that youth victims of domestic homicide may be less likely to seek counselling services.

**Perpetrator Contact with Defense Counsel.** A significant difference was found between the two populations and perpetrator involvement with defense counsel. A chi-square comparison demonstrated, \( \chi^2(2, \ N = 31) = 6.13, \ p = .047 \). Of the couples in the youth population, 29.4% \( (n = 5) \) had come in contact with a defense council, and in the adult population, 0% \( (n = \)
had a history. This result indicates that youth perpetrators of domestic homicide may tend to have more contact with the courts than adult perpetrators.

**Variables Related to the Hypotheses**

Several variables were hypothesized to be significant among age groups. These variables included: substance use, perpetrator unemployment, and jealous and controlling behaviours. None of the variables were found to be statistically significant (see Table 4). It was also predicted that some of the variables would not display a difference between populations.

**History of Domestic Violence.** This relationship was found to be non-significant. Analyses revealed, $\chi^2(1, N = 29) = 1.00, p = .316$. Results also showed that 80% ($n = 12$) and 92.9% of adults experienced previous violence in their relationships. This demonstrates that a history of domestic violence is likely present in both the youth and the adult domestic homicide cases.

**Separation.** The separation status of the couple was also found to be not significant. A chi-square analysis showed, $\chi^2(1, N = 32) = .112, p = .737$. There were 82.4% ($n = 14$) of youth couples who were separated at the time of the homicide, and 86.7% ($n = 13$) of adult couples who were separated. This finding suggests that youth and adult domestic homicides occur in situations of relationship separation.

Table 4.

<table>
<thead>
<tr>
<th>Top Ten Risk Factors from the Ontario DVDRC (2013-14)</th>
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<tbody>
<tr>
<td>Youth Population</td>
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<tr>
<td></td>
</tr>
<tr>
<td>Total</td>
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<tr>
<td>History of Domestic Violence</td>
</tr>
<tr>
<td>Actual or Pending Separation</td>
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<tr>
<td>Obsessive Behaviour</td>
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<tr>
<td>Depression Evident</td>
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Descriptive Analyses

Peer Disclosure of Dating Violence. Descriptive analyses revealed that disclosure of dating violence to peers among the youth population was a prominent theme within the 18 youth homicide cases. This theme was present in 15 of the 18 youth domestic homicide cases. While evidence of peer disclosure among the adult population did exist, it was only present within a few of the 18 adult cases (n = 5). Disclosure of violence to peers was observed in three different forms; victims disclosed dating violence to friends (n = 10), friends observed the violence and were aware that violence within the relationship was occurring (n = 2), and perpetrator disclosed homicidal plan to peers (n = 3). In 3 of the 15 cases, youth disclosed their relationship violence exclusively to peers, and not to any family members or community agencies.

Discussion

The purpose of this study was to explore risk factors present in cases of youth domestic homicides and compare them to risk factors that exist in adult domestic homicide cases. The data for this study was derived from a pre-existing database that contained cases of domestic homicides, reviewed by the Ontario DVDRC (2015) committee. Cases of homicide that occurred between current or former intimate partners were examined for specific risk factors. The youth cases were extracted from the database and a randomized sample of adult cases was generated. A total of 36 cases were examined altogether; 18 youth and 18 adult cases. The cases were separated into two age groups, (15-24 years of age and 30-50 years of age) and investigated for common risk factors, as well as common themes.
Previous literature guided several hypotheses for this study. First, it was predicted that cases of youth domestic homicide would contain a greater number of risk factors than the adult population. It was expected that particular risk factors would be associated with the youth population, specifically, substance use, perpetrator unemployment, and jealous and controlling behaviours. It was hypothesized that there would be differences between the youth population and the adult population in terms of risk factors for domestic homicides. Finally, it was expected that some variables would be present in both age populations, particularly, a history of domestic violence within the relationship and separation or an unwanted breakup. Although the results did not support all the study hypotheses, there were some findings of interest that have implications for prevention.

Dating violence and domestic homicide have been commonly studied; however, there is a large gap in the literature regarding domestic homicide within the youth population. It is important that this area of research is further explored, given that youth are currently at a high risk for dating violence and are also at an increasingly high risk for domestic homicide (Smith & Donnelly, 2001; Sinha, 2013b). Understanding the unique risk factors of domestic homicide within youth individuals will enhance strategies currently used for risk management, and also suggest more specific preventive measures.

**Study Findings in Relation to Previous Research**

**Risk Factors Between Age Groups.** Much of the literature on youth development indicates that the issue of dating violence can be attributed to a lack of maturity and coping skills (Brown, 2013). This lack of maturity seems to be reflected in the practices youth engage in when selecting romantic partners and due to the tumultuous nature of some youth dating relationships, it was expected that youth domestic homicides would display a greater number of risk factors.
However, the results of the current study did not support this finding and a similar number of risk factors was found in cases of youth and adult domestic homicides.

Based on previous studies that examined domestic homicide in youth, it was predicted that there would be differences in risk factors for youth domestic homicides. Specifically, research on youth femicide found that the cases were characterized by higher substance use, jealous and controlling behaviours by the perpetrator, the victim having an unemployed partner with a criminal record, and greater involvement in high risk behaviours (Coyne-Beasley et al., 2003; Glass et al., 2008). However, none of these specific variables were found to be significant. It was also expected that the youth and adult populations would display some overlapping risk factors for domestic homicide, as some risk factors that have been uncovered among the general domestic homicide research, were also evidenced in the studies conducted on youth and domestic homicide. When considering the findings of the present study, it appears that many of the domestic homicide risk factors that have been established for adults also overlap with the youth population, suggesting that cases of youth domestic homicide display similar risk factors to cases of adult domestic homicide.

Results from analyses with system involvement did indicate two significant differences between the youth and adult populations. It was found that youth perpetrators of domestic homicide were more likely to be involved with the criminal justice system than their adult counterparts. This result is consistent with previous research on domestic homicide that has found a link between criminal activity and perpetration (Bailey et al., 1997; Liem & Roberts, 2009), and also aligns with previous studies that perpetrators of dating violence are more likely to be associated with other aggressive behaviours and cultures, such as a history with the law (Straus, & Ramirez, 2004; Sweeten, et al., 2016). The current study also found that youth victims
of domestic homicide were less likely to seek counselling services than adult victims. This finding, in particular, reveals important information about who youth turn to when faced with the issue of dating violence.

**Theme of Disclosing to Peers.** Peers provide significant guidance for youth seeking advice on dating relationships (Garthe et al., 2017), and this idea was supported through the findings from case summaries. Detailed case descriptions from the DVDRC (2015) were investigated qualitatively to determine existing themes. There was a total of 18 domestic homicides from the youth population within the DVDRC database, and the majority of these cases contained evidence of youth disclosing their relationship violence to their peers. It seemed that in many instances, adult friends did have knowledge of the victim’s violent relationship, however adults tended to disclose to family members, relatives, and/or co-workers more often. Peer disclosure involved youth victims revealing to their peers that they were experiencing violence in their relationship, that they were unsure how to end the relationship due to their partner’s abusive behaviour, and/or that they were fearful for their lives. Disclosure was observed by three forms; victims disclosed dating violence to friends, friends observed the violence and were aware that violence within the relationship was occurring, and perpetrator disclosed homicidal plan to peers. These forms of peer disclosure have important implications for the help seeking behaviour of youth experiencing dating violence.

**Implications**

**Common Risk Factors.** The results of the current study showed few significant differences between risk factors for youth and adult domestic homicide cases. This indicates that it is possible youth relationships have similar dynamics to adult relationships. Brown (2013) has explored this concept and claims that teenage dating violence experiences are identical to adult
domestic violence experiences in many ways. She explains that there is a tendency to criticize youth dating violence as acts of immaturity and attribute perpetration to development, however both youth and adult victims experience jealousy, control, and separation violence from the perpetrator (Brown, 2013). She adds that victims from both populations are likely too fearful to leave their abuser (Brown, 2013). If it is true that cases of youth domestic homicide closely resemble adult cases, it implies that youth dating violence should be treated with the same urgency as adult cases and should not be minimized by factors like age level and lack of maturity.

System Involvement. Findings from analyses conducted with system involvement reveal important implications for risk assessment procedures. Youth perpetrators’ involvement with the criminal justice system indicates that male youth with criminal histories should be assessed for risk of dating violence, both lethal and non-lethal, so that they can be directed to appropriate resources and interventions. In addition, the finding that female youth are less likely to seek formal counselling for concerns about dating violence is useful for current risk management and safety planning strategies. It implies that there should be increased education on help seeking options for youth who are experiencing violence in their relationships.

Youth Help Seeking for Dating Violence. Results from this study suggest that youth choose to disclose their dating violence experiences to friends and peers, and potentially do not seek other resources, such as counselling services, when they feel worried for their safety. This notion has been echoed in the literature. Brown (2013) stated that youth victims of dating violence will usually confide and report abuse to other teens who are unlikely to tell an adult. This can be dangerous for youth who are at risk of domestic homicide in their relationships, because peers are unable to provide the required support that youth in desperate dating situations
would need. However, youth are limited in their options of reporting as help seeking methods for young adults are almost non-existent and generally ineffective (Brown, 2013). Barter et al (2009) discovered that peer help seeking behaviour was one of the most consistent findings across all three forms of dating violence. Their research corroborates that youth responses to other youth in such situations are not helpful due to a lack of maturity and knowledge on the topic of dating violence (Barter et al., 2009). It seems that peers readily rely on one another as experts during serious situations such as relationship problems and dating violence. However, using peers as the primary or, in some cases the only, source of support for dating violence can be extremely problematic, especially for youth who are experiencing serious violence in their relationships.

Almost half of all female youth believe that their physician should be responsible for discussing the topic of physical and sexual abuse (Ackard et al., 2007). However, many youth do not believe their health care professionals are sufficiently asking them about dating violence (Barter et al., 2009). It is unlikely that youth will independently seek help from their physicians or other adults, for fear of not being taken seriously or having options taken away from them. Therefore, youth turn to friends, possibly assuming someone who is facing similar life obstacles will better understand them. The current study found that youth victims of domestic homicide are less likely to seek counselling, but are more likely to enlist guidance from their peers. Within the reviewed case descriptions for this study, peers had knowledge about the dating violence when victims disclosed dating violence to friends, when friends observed the violence, or when the perpetrator chose to reveal his plans of the homicide to friends. The following excerpts were extracted from annual reports of Ontario Domestic Violence Death Review Committees. It should be noted that more detailed reports were used to investigate themes, however the details of these reports could not be released for confidentiality purposes. For complete summaries of
the case excerpts, see Appendix E. This excerpt from one of the youth case descriptions illustrates an example of a youth disclosing concerns about the violence in her relationship to some of her school peers (DVDRC, 2005):

**Example 1. Victim discloses concerns about dating violence to peers.** One day before the homicide, the victim confided her concerns to tutors at school, but they were unable to provide any information to her regarding helpful domestic assault contact services prior to her death.

The majority of the youth case descriptions contained instances of peer disclosures that were similar in nature to the ones described in Example 1. However, some of the narratives contained examples of peer involvement that were exhibited in slightly different forms. In a few of the cases, friends observed dating violence via the physical marks on the victim’s body or knowledge that the victim and the perpetrator were fighting (DVDRC, 2005).

**Example 2. Friends were aware of dating violence.** In one such incident several months prior to the homicide in early May 2002, while the victim was at a club with friends, the perpetrator grabbed her by the arm and told her if he ever saw her talking to his friends again he’d kill her, “you’re done, your life is over.”

Lastly, peer disclosure was apparent in the disclosures that some of the youth perpetrators made to friends regarding their intentions to commit the homicidal act. This is demonstrated in the following example (DVDRC, 2003):

**Example 3. Perpetrator discloses intentions of homicide to peers.** The perpetrator’s recent behaviour and statements suggested he was contemplating ending his own life. He had declared to his friends that he was moving away, but he would not tell anyone where he was moving. He had quit his job. When it was suggested to him that he transfer to another store, he
said there were none where he was going. He had given up his apartment and set about selling his possessions. Several days before the homicide-suicide, he confided to a friend that he was thinking about killing her and himself. His friend did not know whether to believe him or how to disclose it to others. The same friend reported to police afterwards that just before the deaths, the perpetrator had left him a music cassette tape of a song entitled Kim performed by the rapper artist Eminem. The song contains explicit lyrics about murder/suicide in the context of a failed intimate relationship.

The forms of peer disclosure outlined in the case examples suggest that it might be difficult for youth to recognize the warning signs of serious dating violence among their peers. They may minimize the violence they witness or dismiss their friends’ disclosures of danger as jokes or exaggerations. Peers in these situations may also be influenced by modern youth culture that normalizes and accepts jealousy and violence within romantic relationships.

Limitations

When interpreting these findings, some study limitations should be considered. A major limitation of this study is the sample size. The database contained a small number of youth domestic homicide cases \((n = 18)\) for comparison, limiting the generalization of the results. Due to the small sample size, the findings may not be generalizable to other cases of youth domestic homicides, say, in different geographic locations. The couples in both age samples were also quite homogenous, consisting of only male perpetrators and female victims. Findings may not be applicable to youth couples that involve same-sex partners, transgender partners, and female perpetrators.

Secondly, there was a substantial amount of subjectivity between the reporting of cases. Each case is comprised from various sources of information (e.g. police reports, court
documents, interviews with friends and family members), which influences the consistency in which the cases are compiled. Interviews with individuals who were close to the couple could contain biases or errors in reporting. When interpreting the content of these interviews, the interviewer is influenced by his or her personal bias and is also forced to rely on the memory and honesty from the interviewees. Some of the cases also contained missing or incomplete data, as it is difficult to obtain the same resources for each couple due to variability in organization and procedures between systems. For example, couples who were less involved with community agencies had more missing data within their files. Missing data can compromise the amount of risk factors that are reported. While case descriptions were analyzed qualitatively to account for this limitation, it is likely that risk factors were still underreported in some of the cases.

Finally, differences in the youth population should be considered. As reflected in the literature, there are many terms that exist to describe youth as well as multiple age categorizations to capture this stage of life. These contrary definitions make it difficult to determine which stage of life youth individuals are in. For example, a younger youth who is between the ages of 15-18 will likely be in high school with presumably less responsibilities than an older youth, between the ages of 19-24, who may be pursuing secondary education or in the workforce. It should be noted that due to the small sample size, it was not possible to meaningfully compare the younger youth (ages 15-18) to the older youth (19-24). The makeup of the sample of youth in this research also consisted of a variety of experiences, including the presence of children, employment status, and cultural status. Such factors might impact these youth’s experiences of dating violence.

Current Initiatives
Many youth dating violence initiatives operate from a prevention framework. Prevention programs can be categorized as primary or selective; primary prevention programs are universal in scope and aim to deliver preventative strategies to a whole group of individuals, whereas selective programs target individuals who may be at a greater risk for perpetrating or experiencing violence (Jaffe, Crooks, Dunlop, & Kerry, 2016). Examples of selective populations include those who have been exposed to domestic violence, those who have involvement with child protection services, and individuals with a criminal history. Although many times violence has already occurred within these types of populations, the goal of selective prevention programs is to stop future violence from happening (Jaffe et al., 2016). Both primary prevention programs, and selective initiatives for at risk youth are explored.

**Education on Dating Violence for Youth.** Educational institutions and school curriculum are excellent places to deliver information about dating violence and healthy relationships to large numbers of youth. The Fourth R program was developed for classroom and community use to encourage healthy relationships among youth (Wolfe et al., 2003). The “R” in the Fourth R represents relationships, and operates from a position that healthy relationship skills can be taught from the three R’s of learning: reading, ‘riting, and ‘rithmetic (Kerry, 2016). The program has been implemented in schools throughout Canada and is also beginning to be utilized by various American schools. Several versions of this 21-session program are used with students to address topics related to youth risk taking behaviours through role playing techniques (Crooks et al., 2015). Students practice being participants and bystanders in risky situations that include topics such as peer violence, dating violence, substance use, and sexual health (Crooks et al., 2015). The Fourth R program has been found to be effective at reducing physical dating violence, encouraging healthy relationships, and promoting protective factors for youth (Jaffe et
al., 2016). It should be noted that while the Fourth R is a primary prevention program that has demonstrated promising results for youth collectively, it has been proposed that vulnerable youth with violent or criminal histories may also benefit from this intervention (Kerry, 2016; Lipsey, Howell, Kelly, Chapman, & Carver, 2010).

The Safe Dates program is another school based program that helps students learn the differences between safe and respectful relationships and controlling and unhealthy relationships (Foshee et al., 2000). Safe Dates consists of ten lessons that aim to prevent dating violence from occurring. The program was shown to be effective in preventing dating violence perpetration and reducing cognitions that influence the perpetration of violence, such as dating violence norms, beliefs in traditional gender stereotypes, and conflict resolution skills (Foshee et al., 2000). This program provides communication and conflict resolution skills to youth, and also helps them identify when friends may be involved in violent relationships. Other components of the program include a theatrical school play and a poster contest. Safe Dates is an evidence-based program that has shown effectiveness in preventing dating violence (Jaffe et al., 2016).

Bystander programs for college and university students have been developed as part of initiatives for reducing dating violence among older youth. Although programs vary between campuses, typically they consist of weekly training sessions for students on how to increase skills around safety and consent (Storer, Casey, & Herrenkohl, 2016). Bystander programs also work to enhance trainees’ confidence to intervene during dangerous situations, such as witnessing an instance of dating violence between a couple (Jaffe et al., 2016). Two bystander programs that have been shown to increase students’ willingness to intervene are the Bringing in the Bystander program and the Green Dot program (Cares et al., 2014; Coker et al., 2011).
Technology Based Initiatives. In 2015, the Ontario DVDRC recommended that students should be educated on how a perpetrator can blackmail a partner via technology and messaging. As mentioned previously, technology is increasingly being used by youth to perpetrate various forms of dating violence. Technology use is almost universal, especially among the youth population. Youth dating violence initiatives have recently begun to incorporate aspects of technology in the hopes that youth will be more likely to utilize resources that are based out of technology, social media, and other electronic elements.

*Project Safe’s Teen Text Line* is a program that operates out of Georgia. Teens can use the text line to voice their concerns to trained interns about a variety of issues including cutting, suicide, alcohol and drugs, and poor grades (Georgia DVFRP, 2014). Many of the text messages that the interns receive deal with the issues of jealousy and sexual pressure among dating relationships (Georgia DVFRP, 2014). Texting is an activity that many youth are familiar with and comfortable using, making Project Safe’s initiative an ideal resource for this population.

Another resource that can be accessed by youth via their cell phones are apps for dating violence. The Circle of 6 app and the OnWatch app, are two dating violence apps that won the Apps Against Abuse challenge endorsed by the White House and the Department of Health and Human Services in 2011 (Family and Youth’s Services Bureau, 2013). The apps feature a set of preprogrammed messages that the user can send to a selected number of trusted contacts. For example, a user can send the message “Come and get me. I need help getting home safely” along with their GPS co-ordinates in the case of an emergency. Many organizations are beginning to develop such apps that include additional features like safety assessments of one’s relationship.

Social media sites are another popular platform for youth. Delaware’s Domestic Violence Coordinating Council in Delaware (DVCC) (2014) has launched Instagram photo contests
where students are asked to post pictures that depict healthy and respectful relationships on their Instagram accounts to be publicly viewed by their followers and other youth. Similar concepts could be applied to youth using other social media sites to encourage widespread promotion of healthy relationships.

**Initiatives for At Risk Youth.** Several selective interventions have been created for specific populations that may be more at risk for experiencing dating violence. The *Dating Matters* initiative was developed by the Centers for Disease Control and Prevention (CDC) for 11-14 year old youth living in high risk urban areas (CDC, 2017). This program is focused on collaboratively engaging members of the community to learn how to identify risk factors of youth dating violence. Specifically, Dating Matters targets professionals, teachers, students, family members, and peers. The program is delivered in urban classrooms and neighbourhoods so that at risk youth can feel more comfortable learning healthy relationship skills in familiar environments with their peers (CDC, 2017). Material from the program is presented to youth virtually and features a teacher using a whiteboard to teach risk factors and warning signs of youth dating violence (CDC, 2017). The *Youth Relationships Program* was designed for vulnerable youth with histories of maltreatment and trauma, and who are therefore, at a greater risk of dating violence. This 18 session manualized program targets youth in the community and offers education/awareness of dating violence, increases safety skills, and provides social learning opportunities (Wolfe, 1996).

As mentioned previously, males are more likely to be perpetrators of dating violence than females, which is why some interventions have been developed to target the attitudes around violence perpetration for young men. The *Coaching Boys into Men* program and *Locker Room Chats* are two initiatives that are geared towards boys on high school sports teams. *Coaching
Boys into Men was launched by Futures Without Violence and focuses on preventing relationship violence through curriculum that is delivered to male athletes by their coaches (Futures Without Violence, 2016). The material addresses gender norms regarding masculinity and male attitudes and offers specialized training and resources for young men. Coaching Boys into Men began in America but has been implemented in schools throughout Canada and the U.S. Locker Room Chats is a similar concept developed by the Georgia state review team (2014). This initiative provides facilitated discussions for coaches and athletes to collaboratively engage in. Topics range from instances of domestic violence in national sports leagues, to youth dating violence, and how to have healthy and safe dating relationships (Georgia DVRP, 2014).

Overall, there are some promising initiatives that currently work to prevent youth dating violence. Although there are some selective dating violence prevention programs that focus on at risk youth, it is recommended that more programs are developed for youth with criminal histories or who are involved in the criminal justice system. Further recommendations are offered for future directions.

Helping Youth Experiencing Dating Violence

This study investigated whether youth cases of domestic homicide were different from adult cases. The lack of significant results between risk factors for the two age groups indicates that cases of serious youth dating violence should be treated with the same seriousness as cases of adult intimate partner violence. An important implication of this research is improving resources and interventions that currently exist to support youth who are experiencing dating violence. Specifically, findings are useful for advising risk assessment and risk management methods for youth.
Based on the results of this study, risk assessment tools and procedures for youth dating violence and domestic homicide should reflect the characteristics of the youth population. Risk assessments for youth should take criminal history into account when assessing youth perpetrators, and also include the established risk factors for adult cases of domestic homicide (e.g. separation, a history of domestic violence, substance use) as these factors seem to be present within the youth population as well. Findings from this study also highlight the importance of addressing the help seeking behaviour of youth. Youth victims of dating violence should be encouraged to seek counselling or guidance from adult based resources, instead of relying on the advice of their peers. Peers should also be educated to know when to engage adults. More specific recommendations are outlined below.

**Recommendations**

Prevention of youth domestic homicide should begin with improving current risk assessment and risk management strategies for dating violence. All of the cases that were examined within the present study presented multiple risk factors, which indicates that domestic homicides are predictable and preventable deaths (DVDRC, 2015). Previous literature reviews and results from the current study, have aided in informing recommendations for youth dating violence. Firstly, attention should be given to increased training for professionals who interact with youth (Ackard et al., 2007; Exner-Cortens et al., 2013; Raiford et al., 2007). Such professionals would include those in the health and education fields (e.g. physicians, nurses, school counsellors, student service workers). As mentioned previously, youth have stated that they believe it is the duty of their health care provider to ask them about dating violence, yet they do not feel as though their physicians and nurses are adequately addressing their concerns (Ackard et al., 2007). It is therefore imperative that clinicians and education professionals are
well trained on how to ask youth appropriate questions about dating violence in a sensitive and understanding manner (Wincentak et al., 2016). They should also be able to identify risk factors for dating violence in youth and be knowledgeable about appropriate interventions and safety planning for youth (Raiford et al., 2007). Finally, professionals should be encouraged to consider how to best meet the needs of individual clients by collaborating with other relevant fields when necessary (Vagi et al., 2013).

Youth spend much of their time in classrooms, which is why education on dating violence within the school curriculum would work to change distorted attitudes that condone relationship violence and promote healthy relationships. Although education based prevention programs are emerging, many of the American Domestic Violence Death State Review teams still advocate for increased education on dating violence, both in high schools and throughout the community (Hill, 2004; Delaware DVCC, 2014; Fawcett, 2010; Nevada DVFR, 2014). Such education could be incorporated into physical education and health classes and should teach youth about the warning signs of dating violence (County of Kern DVDRT, 2006; Lutwak et al., 2013; Santa Clara County DVDRC, 2013). This curriculum should also include information about healthy and respectful dating relationships (Lutwak et al., 2013). Youth should be able to clearly recognize and understand what it means to be involved in an abusive relationship, as well as what it looks like if a friend is involved in an unhealthy partnership. The risk factors of cyberdating violence and abuse perpetrated through technology should be outlined within this curriculum, as well as information about how to recognize serious dating violence risk factors that could result in homicide (DVDRC, 2015).

Specifically, it is recommended that youth’s attitudes and cognitions toward dating violence be addressed within education systems and current interventions (Jourlies et al., 2011;
Karlsson et al., 2016; Leen et al., 2013; Smith-Darden et al., 2016). As one of the more widely acknowledged risk factors of dating violence, it is important to address the distorted cognitions youth hold and replace these beliefs with ones that encourage positive behaviours. Jealousy, infidelity, and instability are common features of dating relationships that are normalized and encouraged within the youth culture (Adams & Williams, 2014). These romantic patterns should be debunked with their potential consequences and instead, youth should learn to practice respect and patience in their relationships. Education on dating violence should teach that appropriate conflict resolution methods do not include violence and hostility, but rather consist of communication and self-care strategies.

Within this education, options for seeking help with dating violence should also be incorporated. Youth should be made aware of adult based resources and should be encouraged to seek out parents, teachers, and trained professionals if they are concerned about a dating relationship. Similarly, if a friend discloses they are worried about their safety in a relationship, youth should understand that this disclosure should be reported and not ignored or minimized. Peers should be taught to provide support to their friends by responding sensitively to their concerns and redirecting them to a more experienced form of help. When developing interventions for youth dating violence, the influence of peers on youth should be considered (Barter et al., 2009; Exner-Cortens et al., 2013; Foshee et al., 2013; Georgia DVFRP, 2014). Peer support groups involve seeking help from a designated team of students who would more closely align with the age of the help seeker (Barter et al., 2009). These have been implemented in high schools and universities with some success, however, in cases where dating violence is severe, youth should be directed to adult organized resources (Barter et al., 2009).
Finally, it is recommended that further research is conducted in the area of youth domestic homicide. The findings of the current study contradict what has been discovered in past studies, indicating that more investigations would yield clearer explanations. The amount of literature that currently exists on youth domestic homicides is scant and the topic would benefit from replicating these findings with a larger national sample to minimize the limitations that constituted this study and to explore youth relationship dynamics in greater detail.

Conclusion

The current study identified that youth domestic homicides did not display many significant differences when compared to cases of adult domestic homicides. However, it appears that youth perpetrators may be more likely to possess a criminal history. In addition, the findings on youth help seeking behaviour aligns with previous research that states youth victims seem to disclose dating violence to peers instead of pursuing organized resources such as counselling. The overarching aim of this research was to contribute to improving risk assessment and risk management strategies for domestic homicide in the youth population.

Results from this study suggest that youth should be assessed for risk of dating violence and domestic homicide in the same way as adults. Risk assessment methods should focus on detecting risk factors that have been established for domestic homicide, and also consider the criminal history of youth dating violence perpetrators. Risk management and safety planning procedures should also be applied with specific interventions for youth. Interventions should target youth help seeking behaviour and encourage youth to seek guidance from adults and formal resources in situations of dating violence.
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effectiveness of juvenile justice programs: A new perspective on evidence-based practice.

Centre for Juvenile Justice Reform.


Appendix A

Domestic Violence Death Review Committee
Office of the Chief Coroner of Ontario
Data Summary Form

OCC Case #(s): OCC Region: Central
OCC Staff: ____________________________________________________________

Lead Investigating Police Agency:

Officer(s):

Other Investigating Agencies: _
Officers: __

VICTIM INFORMATION

**If more than one victim, this information is for primary victim (i.e. intimate partner)

Name

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<th>Gender</th>
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<tbody>
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<td>Age</td>
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<td>DOB</td>
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<td>DOD</td>
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<td>Marital status</td>
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<td>Number of children</td>
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<tr>
<td>Pregnant</td>
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<tr>
<td>If yes, age of fetus (in weeks)</td>
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<td>Residency status</td>
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<td>Education</td>
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<td>Employment status</td>
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<td>Occupational level</td>
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<tr>
<td>Criminal history</td>
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<td><em>If yes, check those that apply...</em></td>
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<td>____ Prior domestic violence arrest record</td>
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<td></td>
<td>____ Arrest for a restraining order violation</td>
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<td></td>
<td>____ Arrest for violation of probation</td>
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<td></td>
<td>____ Prior arrest record for other assault/harassment/menacing/disturbance</td>
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<td></td>
<td>____ Prior arrest record for DUI/possession</td>
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<td></td>
<td>____ Juvenile record</td>
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<td></td>
<td>____ Total # of arrests for domestic violence offenses</td>
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<td>____ Total # of arrests for other violent offenses</td>
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<td>____ Total # of restraining order violations</td>
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<td>____ Total # of bail condition violations</td>
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<td></td>
<td>____ Total # of probation violations</td>
</tr>
<tr>
<td>Family court history</td>
<td></td>
</tr>
<tr>
<td><em>If yes, check those that apply...</em></td>
<td></td>
</tr>
<tr>
<td></td>
<td>____ Current child custody/access dispute</td>
</tr>
<tr>
<td></td>
<td>____ Prior child custody/access dispute</td>
</tr>
<tr>
<td></td>
<td>____ Current child protection hearing</td>
</tr>
<tr>
<td></td>
<td>____ Prior child protection hearing</td>
</tr>
<tr>
<td></td>
<td>____ No info</td>
</tr>
<tr>
<td>Treatment history</td>
<td></td>
</tr>
</tbody>
</table>
If yes, check those that apply ...

- Prior domestic violence treatment
- Prior substance abuse treatment
- Prior mental health treatment
- Anger management
- Other – specify _____________________________
- No info

Victim taking medication at time of incident

Medication prescribed for victim at time of incident

Victim taking psychiatric drugs at time of incident

Victim made threats or attempted suicide prior to incident

Any significant life changes occurred prior to fatality?

Describe:

Subject in childhood or Adolescence to sexual abuse?
Subject in childhood or adolescence to physical abuse?  
Exposed in childhood or adolescence to domestic violence?

**END VICTIM INFORMATION**

**PERPETRATOR INFORMATION**

*Same data as above for victim*

<table>
<thead>
<tr>
<th>Gender</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td></td>
</tr>
<tr>
<td>DOB</td>
<td></td>
</tr>
<tr>
<td>DOD</td>
<td></td>
</tr>
<tr>
<td>Marital status</td>
<td></td>
</tr>
<tr>
<td>Number of children</td>
<td></td>
</tr>
<tr>
<td>Pregnant</td>
<td></td>
</tr>
<tr>
<td>If yes, age of fetus (in weeks)</td>
<td></td>
</tr>
<tr>
<td>Residency status</td>
<td></td>
</tr>
<tr>
<td>Education</td>
<td></td>
</tr>
<tr>
<td>Employment status</td>
<td></td>
</tr>
<tr>
<td>Occupational level</td>
<td></td>
</tr>
</tbody>
</table>
### Criminal history

*If yes, check those that apply…*

- Prior domestic violence arrest record
- Arrest for a restraining order violation
- Arrest for violation of probation
- Prior arrest record for other assault/harassment/menacing/disturbance
- Prior arrest record for DUI[possession]
- Juvenile record
- Total # of arrests for domestic violence offenses
- Total # of arrests for other violent offenses
- Total # of arrests for non-violent offenses
- Total # of restraining order violations
- Total # of bail condition violations
- Total # of probation violations

### Family court history

*If yes, check those that apply…*

- Current child custody/access dispute
- Prior child custody/access dispute
- Current child protection hearing
- Prior child protection hearing
- No info

### Treatment history
### If yes, check those that apply ...

- Prior domestic violence treatment
- Prior substance abuse treatment
- Prior mental health treatment
- Anger management
- Other – specify _____________________________
- No info

**Perpetrator on medication at time of incident**

**Medication prescribed for perpetrator at time of incident**

**Perpetrator taking psychiatric drugs at time of incident**

**Perpetrator made threats or attempted suicide prior to incident**

**Any significant life changes occurred prior to fatality?**

**Describe:**

**Subject in childhood or Adolescence to sexual abuse?**
<table>
<thead>
<tr>
<th>Subject in childhood or adolescence to physical abuse?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Exposed in childhood or adolescence to domestic violence?</td>
</tr>
</tbody>
</table>

---

**END PERPETRATOR INFORMATION**

---

**INCIDENT**

<table>
<thead>
<tr>
<th>Date of incident</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date call received</td>
</tr>
<tr>
<td>Time call received</td>
</tr>
<tr>
<td>Date of death</td>
</tr>
<tr>
<td>Incident type</td>
</tr>
<tr>
<td>Incident reported by</td>
</tr>
<tr>
<td>Total number of victims <strong>Not including perpetrator if suicided</strong></td>
</tr>
<tr>
<td>Who were additional victims aside from perpetrator?</td>
</tr>
<tr>
<td>Others received non-fatal injuries</td>
</tr>
<tr>
<td>Perpetrator injured during incident?</td>
</tr>
</tbody>
</table>
**Who injured perpetrator?**


**Location of crime**

<table>
<thead>
<tr>
<th>Location of incident</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>If residence, type of dwelling</td>
<td></td>
</tr>
<tr>
<td>If residence, where was victim found?</td>
<td></td>
</tr>
</tbody>
</table>

**Cause of Death (Primary Victim)**

<table>
<thead>
<tr>
<th>Cause of death</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Multiple methods used?</td>
<td></td>
</tr>
<tr>
<td><em>If yes be specific ...</em></td>
<td></td>
</tr>
<tr>
<td>Other evidence of excessive violence?</td>
<td></td>
</tr>
<tr>
<td>Evidence of mutilation?</td>
<td></td>
</tr>
<tr>
<td>Victim sexually assaulted?</td>
<td></td>
</tr>
<tr>
<td><em>If yes, describe (Sexual assault, sexual mutilation, both)</em></td>
<td></td>
</tr>
<tr>
<td>Condition of body</td>
<td></td>
</tr>
<tr>
<td>Victim substance use at time of crime?</td>
<td></td>
</tr>
<tr>
<td>Perpetrator substance use at time of crime?</td>
<td></td>
</tr>
</tbody>
</table>

**Weapon Use**
### Weapon use

If weapon used, type

If gun, who owned it?

Gun acquired legally?

If yes, when acquired?

Previous requests for gun to be surrendered/destroyed?

Did court ever order gun to be surrendered/destroyed?

### Witness Information

Others present at scene of fatality (i.e. witnesses)?

If children were present:

Matthew Jr.

Michelle

Andrea

What intervention occurred as a result?

### Perpetrator actions after fatality
<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did perpetrator attempt/commit suicide following the incident?</td>
<td></td>
</tr>
<tr>
<td>If committed suicide, how?</td>
<td></td>
</tr>
<tr>
<td>Did suicide appear to be part of original homicide?</td>
<td></td>
</tr>
<tr>
<td>How long after the killing did suicide occur?</td>
<td></td>
</tr>
<tr>
<td>Was perpetrator in custody when attempted or committed suicide?</td>
<td></td>
</tr>
<tr>
<td>Was a suicide note left? If yes, was precipitating factor identified?</td>
<td></td>
</tr>
<tr>
<td>Describe: Perpetrator left note attached to envelope and within the envelope were photos of the victim and her boyfriend and correspondence regarding the purchase of a house in North Dakota and money transfers etc.</td>
<td></td>
</tr>
<tr>
<td>If perpetrator did not commit suicide, did s/he leave scene?</td>
<td></td>
</tr>
<tr>
<td>If perpetrator did not commit suicide, where was s/he arrested/apprehended?</td>
<td>(At scene, turned self in, apprehended later, still at large, other – specify)</td>
</tr>
<tr>
<td>How much time passed between the fatality and the arrest of the suspect:</td>
<td>(Hours, days, weeks, months, unknown, n/a – still at large)</td>
</tr>
</tbody>
</table>

-- END INCIDENT INFORMATION --
<table>
<thead>
<tr>
<th>Relationship of victim to perpetrator</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Length of relationship</td>
<td></td>
</tr>
<tr>
<td>If divorced, how long?</td>
<td></td>
</tr>
<tr>
<td>If separated, how long?</td>
<td></td>
</tr>
<tr>
<td>If separated more than a Month, list # of months</td>
<td></td>
</tr>
<tr>
<td>Did victim begin relationship with a new partner?</td>
<td></td>
</tr>
<tr>
<td>If not separated, was there evidence that a separation was imminent?</td>
<td></td>
</tr>
<tr>
<td>Is there a history of separation in relationship?</td>
<td></td>
</tr>
<tr>
<td><em>If yes, how many previous separations were there?</em></td>
<td><em>Indicate #, unknown</em></td>
</tr>
<tr>
<td>If not separated, had victim tried to leave relationship</td>
<td></td>
</tr>
</tbody>
</table>
**Children Information**

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did victim/perpetrator have children in common?</td>
<td></td>
</tr>
<tr>
<td>If yes, how many children in common?</td>
<td></td>
</tr>
<tr>
<td>If separated, who had legal custody of children?</td>
<td></td>
</tr>
<tr>
<td>If separated, who had physical custody of children at time of incident?</td>
<td></td>
</tr>
<tr>
<td>Which of the following best describes custody agreement?</td>
<td></td>
</tr>
<tr>
<td>Did victim have children from previous relationship?</td>
<td></td>
</tr>
<tr>
<td>If yes, how many?</td>
<td>(Indicate #)</td>
</tr>
</tbody>
</table>

**History of domestic violence**
Were there prior reports of domestic violence in this relationship?

Type of Violence? (Physical, other) ____________________________________________
If other describe: ____________________________________________________________
...........................................................................................................................
...........................................................................................................................

If yes, reports were made to: (Check all those that apply)
  ___ Police
  ___ Courts
  ___ Medical
  ___ Family members
  ___ Clergy
  ___ Friends
  ___ Co-workers
  ___ Neighbors
  ___ Shelter/other domestic violence program
  ___ Family court (during divorce, custody, restraining order proceedings)
  ___ Social services
  ___ Child protection
  ___ Legal counsel/legal services
  ___ Other – specify _______________________________________________________

Historically, was the victim usually the perpetrator of abuse? __________________

If yes, how known? __________________________________________________________
Describe: ____________________________________________________________________
...........................................................................................................................
...........................................................................................................................

Was there evidence of escalating violence?
If yes, check all that apply:

___ Prior attempts or threats of suicide by perpetrator
___ Prior threats with weapon
___ Prior threats to kill
___ Perpetrator abused the victim in public
___ Perpetrator monitored victim’s whereabouts
___ Blamed victim for abuse
___ Destroyed victim’s property and/or pets
___ Prior medical treatment for domestic violence related injuries reported
___ Other – specify __________________________________________

-- END VICTIM-PERPETRATOR RELATIONSHIP INFORMATION --

SYSTEM CONTACTS

Background

Did victim have access to working telephone? _________________________________

Estimate distance victim had to travel to access helping resources? (KMs)

________________________________________________________________________

Did the victim have access to transportation? _________________________________

Did the victim have a Safety Plan? _________________________________

Did the victim have an opportunity to act on the Plan? _______________________________
Agencies/Institutions
Were any of the following agencies involved with the victim or the perpetrator during the past year prior to the fatality? ____________________________________________________________

**Indicate who had contact, describe contact and outcome. Locate date(s) of contact on events calendar for year prior to killing (12-month calendar)**

Criminal Justice/Legal Assistance:

Police (Victim, perpetrator, or both)
Describe:________________________________________________________________________________________
__________________________________________________________________________________________
Outcome:________________________________________________________________________________________

Crown attorney (Victim, perpetrator, or both)
Describe:________________________________________________________________________________________
__________________________________________________________________________________________
Outcome:________________________________________________________________________________________

Defense counsel (Victim, perpetrator, or both)
Describe:________________________________________________________________________________________
__________________________________________________________________________________________
Outcome:________________________________________________________________________________________

Court/Judges (Victim, perpetrator, or both)
Describe:________________________________________________________________________________________
__________________________________________________________________________________________
Outcome:________________________________________________________________________________________

Corrections (Victim, perpetrator or both)
Describe:________________________________________________________________________________________
__________________________________________________________________________________________
Outcome:________________________________________________________________________________________
DOMESTIC HOMICIDE IN THE YOUTH POPULATION

Probation (Victim, perpetrator, or both)
Describe:___________________________________________________________
___________________________________________________________
Outcome:_________________________________________________________

Parole (Victim, perpetrator, or both)
Describe:___________________________________________________________
___________________________________________________________
Outcome:_________________________________________________________

Family court (Victim, perpetrator, or both)
Describe:___________________________________________________________
___________________________________________________________
Outcome:_________________________________________________________

Family lawyer (Victim, perpetrator, or both)
Describe:___________________________________________________________
___________________________________________________________
Outcome:_________________________________________________________

Court-based legal advocacy (Victim, perpetrator, or both)
Describe:___________________________________________________________
___________________________________________________________
Outcome:_________________________________________________________

Victim-witness assistance program (Victim, perpetrator, or both)
Describe:___________________________________________________________
___________________________________________________________
Outcome:_________________________________________________________

Victim Services (including domestic violence services)
**Domestic violence shelter/safe house** (Victim, perpetrator, or both)
Describe: ____________________________________________________________
___________________________________________________________
Outcome: ___________________________________________________________

**Sexual assault program** (Victim, perpetrator, or both)
Describe: ____________________________________________________________
___________________________________________________________
Outcome: ___________________________________________________________

**Other domestic violence victim services** (Victim, perpetrator, or both)
Describe: ____________________________________________________________
___________________________________________________________
Outcome: ___________________________________________________________

**Community based legal advocacy** (Victim, perpetrator, or both)
Describe: ____________________________________________________________
___________________________________________________________
Outcome: ___________________________________________________________

**Children services**

**School** (Victim, perpetrator, children or all)
Describe: (Did school know of DV? Did school provide counseling?)
___________________________________________________________
Outcome: ___________________________________________________________

**Supervised visitation/drop off center** (Victim, perpetrator, or both)
Describe: ____________________________________________________________
___________________________________________________________
Outcome: ___________________________________________________________
Child protection services (Victim, perpetrator, children, or all)
Describe:_____________________________________________________________________________
____________________________________________________________________________________
Outcome:____________________________________________________________________________

Health care services

Mental health provider (Victim, perpetrator, or both)
Describe:_____________________________________________________________________________
____________________________________________________________________________________
Outcome:____________________________________________________________________________

Mental health program (Victim, perpetrator, or both)
Describe:_____________________________________________________________________________
____________________________________________________________________________________
Outcome:____________________________________________________________________________

Health care provider (Victim, perpetrator, or both)
Describe:_____________________________________________________________________________
____________________________________________________________________________________
Outcome:____________________________________________________________________________

Regional trauma center (Victim, perpetrator, or both)
Describe:_____________________________________________________________________________
____________________________________________________________________________________
Outcome:____________________________________________________________________________

Local hospital (Victim, perpetrator, or both)
Describe:_____________________________________________________________________________
____________________________________________________________________________________
Outcome:____________________________________________________________________________

Ambulance services (Victim, perpetrator, or both)
DOMESTIC HOMICIDE IN THE YOUTH POPULATION

Describe:_____________________________________________________________________________
___________________________________________________________

Outcome:_____________________________________________________________________________

*Other Community Services*

**Anger management program** (Victim, perpetrator, or both)

Describe:_____________________________________________________________________________
___________________________________________________________

Outcome:_____________________________________________________________________________

**Batterer’s intervention program** (Victim, perpetrator, or both)

Describe:_____________________________________________________________________________
___________________________________________________________

Outcome:_____________________________________________________________________________

**Marriage counselling** (Victim, perpetrator, or both)

Describe:_____________________________________________________________________________
___________________________________________________________

Outcome:_____________________________________________________________________________

**Substance abuse program** (Victim, perpetrator, or both)

Describe:_____________________________________________________________________________
___________________________________________________________

Outcome:_____________________________________________________________________________

**Religious community** (Victim, perpetrator, or both)

Describe:_____________________________________________________________________________
___________________________________________________________

Outcome:_____________________________________________________________________________

**Immigrant advocacy program** (Victim, perpetrator, or both)
Describe:________________________________________________________________________________________

Outcome:________________________________________________________________________________________

**Animal control/humane society** (Victim, perpetrator, or both)

Describe:________________________________________________________________________________________

Outcome:________________________________________________________________________________________

**Cultural organization** (Victim, perpetrator, or both)

Describe:________________________________________________________________________________________

Outcome:________________________________________________________________________________________

**Fire department** (Victim, perpetrator, or both)

Describe:________________________________________________________________________________________

Outcome:________________________________________________________________________________________

**Homeless shelter** (Victim, perpetrator, or both)

Describe:________________________________________________________________________________________

Outcome:________________________________________________________________________________________

-- END SYSTEM CONTACT INFORMATION --

**RISK ASSESSMENT**

Was a risk assessment done?

*If yes, by whom?* ________________________________________________________________

When was the risk assessment done? ____________________________________________
What was the outcome of the risk assessment?

**Ontario Domestic Violence Death Review Committee Risk Factor Coding Form**
(see descriptors below)

A= Evidence suggests that the risk factor was not present  
P= Evidence suggests that the risk factor was present  
Unknown (Unk) = A lack of evidence suggests that a judgment cannot be made

<table>
<thead>
<tr>
<th>Risk Factor</th>
<th>Code (P,A, Unk)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. History of violence outside of the family by perpetrator</td>
<td></td>
</tr>
<tr>
<td>2. History of domestic violence</td>
<td></td>
</tr>
<tr>
<td>3. Prior threats to kill victim</td>
<td></td>
</tr>
<tr>
<td>4. Prior threats with a weapon</td>
<td></td>
</tr>
<tr>
<td>5. Prior assault with a weapon</td>
<td></td>
</tr>
<tr>
<td>6. Prior threats to commit suicide by perpetrator*</td>
<td></td>
</tr>
<tr>
<td>7. Prior suicide attempts by perpetrator* (if check #6 and/or #7 only count as one factor)</td>
<td></td>
</tr>
<tr>
<td>8. Prior attempts to isolate the victim</td>
<td></td>
</tr>
<tr>
<td>9. Controlled most or all of victim’s daily activities</td>
<td></td>
</tr>
<tr>
<td>10. Prior hostage-taking and/or forcible confinement</td>
<td></td>
</tr>
<tr>
<td>11. Prior forced sexual acts and/or assaults during sex</td>
<td></td>
</tr>
<tr>
<td>12. Child custody or access disputes</td>
<td></td>
</tr>
<tr>
<td>13. Prior destruction or deprivation of victim’s property</td>
<td></td>
</tr>
<tr>
<td>14. Prior violence against family pets</td>
<td></td>
</tr>
<tr>
<td>15. Prior assault on victim while pregnant</td>
<td></td>
</tr>
<tr>
<td>16. Choked victim in the past</td>
<td></td>
</tr>
<tr>
<td>17. Perpetrator was abused and/or witnessed domestic violence as a child</td>
<td></td>
</tr>
<tr>
<td>18. Escalation of violence</td>
<td></td>
</tr>
<tr>
<td>19. Obsessive behaviour displayed by perpetrator</td>
<td></td>
</tr>
<tr>
<td>20. Perpetrator unemployed</td>
<td></td>
</tr>
<tr>
<td>21. Victim and perpetrator living common-law</td>
<td></td>
</tr>
</tbody>
</table>
22. Presence of stepchildren in the home
23. Extreme minimization and/or denial of spousal assault history
24. Actual or pending separation
25. Excessive alcohol and/or drug use by perpetrator*
26. Depression – in the opinion of family/friend/acquaintance - perpetrator*
27. Depression – professionally diagnosed – perpetrator* (If check #26 and/or #27 only count as one factor)
28. Other mental health or psychiatric problems – perpetrator
29. Access to or possession of any firearms
30. New partner in victim’s life*
31. Failure to comply with authority – perpetrator
32. Perpetrator exposed to/witnessed suicidal behaviour in family of origin
33. After risk assessment, perpetrator had access to victim
34. Youth of couple
35. Sexual jealousy – perpetrator*
36. Misogynistic attitudes – perpetrator*
37. Age disparity of couple*
38. Victim’s intuitive sense of fear of perpetrator*
39. Perpetrator threatened and/or harmed children*

Other factors that increased risk in this case? Specify:
Risk Factor Descriptions

Perpetrator = The primary aggressor in the relationship
Victim = The primary target of the perpetrator’s abusive/maltreating/violent actions

1. Any actual or attempted assault on any person who is not, or has not been, in an intimate relationship with the perpetrator. This could include friends, acquaintances, or strangers. This incident did not have to necessarily result in charges or convictions and can be verified by any record (e.g., police reports; medical records) or witness (e.g., family members; friends; neighbours; co-workers; counsellors; medical personnel, etc.).

2. Any actual, attempted, or threatened abuse/maltreatment (physical; emotional; psychological; financial; sexual, etc.) toward a person who has been in, or is in, an intimate relationship with the perpetrator. This incident did not have to necessarily result in charges or convictions and can be verified by any record (e.g., police reports; medical records) or witness (e.g., family members; friends; neighbours; co-workers; counsellors; medical personnel, etc.). It could be as simple as a neighbour hearing the perpetrator screaming at the victim or include a co-worker noticing bruises consistent with physical abuse on the victim while at work.

3. Any comment made to the victim, or others, that was intended to instill fear for the safety of the victim’s life. These comments could have been delivered verbally, in the form of a letter, or left on an answering machine. Threats can range in degree of explicitness from “I’m going to kill you” to “You’re going to pay for what you did” or “If I can’t have you, then nobody can” or “I’m going to get you.”

4. Any incident in which the perpetrator threatened to use a weapon (e.g., gun; knife; etc.) or other object intended to be used as a weapon (e.g., bat, branch, garden tool, vehicle, etc.) for the purpose of instilling fear in the victim. This threat could have been explicit (e.g., “I’m going to shoot you” or “I’m going to run you over with my car”) or implicit (e.g., brandished a knife at the victim or commented “I bought a gun today”). Note: This item is separate from threats using body parts (e.g., raising a fist).

5. Any recent (past 6 months) act or comment made by the perpetrator that was intended to convey the perpetrator’s idea or intent of committing suicide, even if the act or comment was not taken seriously. These comments could have been made verbally, or delivered in letter format, or left on an answering machine. These comments can range from explicit (e.g., “If you ever leave me, then I’m going to kill myself” or “I can’t live without you”) to implicit (“The world would be better off without me”). Acts can include, for example, giving away prized possessions.

6. Any recent (past 6 months) suicidal behaviour (e.g., swallowing pills, holding a knife to one’s throat, etc.), even if the behaviour was not taken seriously or did not require arrest, medical attention, or psychiatric committal. Behaviour can range in severity from superficially cutting the wrists to actually shooting or hanging oneself.

7. Any non-physical behaviour, whether successful or not, that was intended to keep the victim from associating with others. The perpetrator could have used various psychological tactics (e.g., guilt trips) to discourage the victim from associating with family, friends, or other acquaintances in the community (e.g., “if you leave, then don’t even think about coming back” or “I never like it when your parents come over” or “I’m leaving if you invite your friends here”).

8. Any actual or attempted behaviour on the part of the perpetrator, whether successful or not, intended to exert full power over the victim. For example, when the victim was allowed in public, the perpetrator made her account for where she was at all times and who she was with. Another example could include not allowing the victim to have control over any finances (e.g., giving her an allowance, not letting get a job, etc.).

9. Any actual or attempted behaviour, whether successful or not, in which the perpetrator physically
attempted to limit the mobility of the victim. For example, any incidents of forcible confinement (e.g., locking the victim in a room) or not allowing the victim to use the telephone (e.g., unplugging the phone when the victim attempted to use it). Attempts to withhold access to transportation should also be included (e.g., taking or hiding car keys). The perpetrator may have used violence (e.g., grabbing; hitting; etc.) to gain compliance or may have been passive (e.g., stood in the way of an exit).

11. Any actual, attempted, or threatened behaviour, whether successful or not, used to engage the victim in sexual acts (of whatever kind) against the victim’s will. Or any assault on the victim, of whatever kind (e.g., biting; scratching, punching, choking, etc.), during the course of any sexual act.

12. Any dispute in regards to the custody, contact, primary care or control of children, including formal legal proceedings or any third parties having knowledge of such arguments.

13. Any incident in which the perpetrator intended to damage any form of property that was owned, or partially owned, by the victim or formerly owned by the perpetrator. This could include slashing the tires of the car that the victim uses. It could also include breaking windows or throwing items at a place of residence. Please include any incident, regardless of charges being laid or those resulting in convictions.

14. Any action directed toward a pet of the victim, or a former pet of the perpetrator, with the intention of causing distress to the victim or instilling fear in the victim. This could range in severity from killing the victim’s pet to abducting it or torturing it. Do not confuse this factor with correcting a pet for its undesirable behaviour.

15. Any actual or attempted form physical violence, ranging in severity from a push or slap to the face, to punching or kicking the victim in the stomach. The key difference with this item is that the victim was pregnant at the time of the assault and the perpetrator was aware of this fact.

16. Any attempt (separate from the incident leading to death) to strangle the victim. The perpetrator could have used various things to accomplish this task (e.g., hands, arms, rope, etc.). Note: Do not include attempts to smother the victim (e.g., suffocation with a pillow).

17. As a child/adolescent, the perpetrator was victimized and/or exposed to any actual, attempted, or threatened forms of family violence/abuse/maltreatment.

18. The abuse/maltreatment (physical; psychological; emotional; sexual; etc.) inflicted upon the victim by the perpetrator was increasing in frequency and/or severity. For example, this can be evidenced by more regular trips for medical attention or include an increase in complaints of abuse to/by family, friends, or other acquaintances.

19. Any actions or behaviours by the perpetrator that indicate an intense preoccupation with the victim. For example, stalking behaviours, such as following the victim, spying on the victim, making repeated phone calls to the victim, or excessive gift giving, etc.

20. Employed means having full-time or near full-time employment (including self-employment). Unemployed means experiencing frequent job changes or significant periods of lacking a source of income. Please consider government income assisted programs (e.g., O.D.S.P.; Worker’s Compensation; E.I.; etc.) as unemployment.

21. The victim and perpetrator were cohabiting.

22. Any child(ren) that is(are) not biologically related to the perpetrator.

23. At some point the perpetrator was confronted, either by the victim, a family member, friend, or other acquaintance, and the perpetrator displayed an unwillingness to end assaultive behaviour or enter/comply with any form of treatment (e.g., batterer intervention programs). Or the perpetrator denied many or all past assaults, denied personal responsibility for the assaults (i.e., blamed the victim), or denied the serious consequences of the assault (e.g., she wasn’t really hurt).

24. The partner wanted to end the relationship. Or the perpetrator was separated from the victim but wanted to renew the relationship. Or there was a sudden and/or recent separation. Or the victim had contacted a lawyer and was seeking a separation and/or divorce.

25. Within the past year, and regardless of whether or not the perpetrator received treatment, substance abuse that appeared to be characteristic of the perpetrator’s dependence on, and/or
addiction to, the substance. An increase in the pattern of use and/or change of character or behaviour that is directly related to the alcohol and/or drug use can indicate excessive use by the perpetrator. For example, people described the perpetrator as constantly drunk or claim that they never saw him without a beer in his hand. This dependence on a particular substance may have impaired the perpetrator’s health or social functioning (e.g., overdose, job loss, arrest, etc). Please include comments by family, friend, and acquaintances that are indicative of annoyance or concern with a drinking or drug problem and any attempts to convince the perpetrator to terminate his substance use.

26. In the opinion of any family, friends, or acquaintances, and regardless of whether or not the perpetrator received treatment, the perpetrator displayed symptoms characteristic of depression.

27. A diagnosis of depression by any mental health professional (e.g., family doctor; psychiatrist; psychologist; nurse practitioner) with symptoms recognized by the DSM-IV, regardless of whether or not the perpetrator received treatment.

28. For example: psychosis; schizophrenia; bi-polar disorder; mania; obsessive-compulsive disorder, etc.

29. The perpetrator stored firearms in his place of residence, place of employment, or in some other nearby location (e.g., friend’s place of residence, or shooting gallery). Please include the perpetrator’s purchase of any firearm within the past year, regardless of the reason for purchase.

30. There was a new intimate partner in the victim’s life or the perpetrator perceived there to be a new intimate partner in the victim’s life

31. The perpetrator has violated any family, civil, or criminal court orders, conditional releases, community supervision orders, or “No Contact” orders, etc. This includes bail, probation, or restraining orders, and bonds, etc.

32. As a(n) child/adolescent, the perpetrator was exposed to and/or witnessed any actual, attempted or threatened forms of suicidal behaviour in his family of origin. Or somebody close to the perpetrator (e.g., caregiver) attempted or committed suicide.

33. After a formal (e.g., performed by a forensic mental health professional before the court) or informal (e.g., performed by a victim services worker in a shelter) risk assessment was completed, the perpetrator still had access to the victim.

34. Victim and perpetrator were between the ages of 15 and 24.

35. The perpetrator continuously accuses the victim of infidelity, repeatedly interrogates the victim, searches for evidence, tests the victim’s fidelity, and sometimes stalks the victim.

36. Hating or having a strong prejudice against women. This attitude can be overtly expressed with hate statements, or can be more subtle with beliefs that women are only good for domestic work or that all women are “whores.”

37. Women in an intimate relationship with a partner who is significantly older or younger. The disparity is usually nine or more years.

38. The victim is one that knows the perpetrator best and can accurately gauge his level of risk. If the women discloses to anyone her fear of the perpetrator harming herself or her children, for example statements such as, “I fear for my life”, “I think he will hurt me”, “I need to protect my children”, this is a definite indication of serious risk.

39. Any actual, attempted, or threatened abuse/maltreatment (physical; emotional; psychological; financial; sexual; etc.) towards children in the family. This incident did not have to necessarily result in charges or convictions and can be verified by any record (e.g., police reports; medical records) or witness (e.g., family; friends; neighbours; co-workers; counselors; medical personnel, etc).
DOMESTIC HOMICIDE IN THE YOUTH POPULATION

**DVDRC COMMITTEE RECOMMENDATIONS**

Was the homicide (suicide) preventable in retrospect? (Yes, no)

*If yes, what would have prevented this tragedy?*

_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

What issues are raised by this tragedy that should be outlined in the DVDRC annual report?

_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

Future Research Issues/Questions: _____________________________________________________

_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

Additional comments: _________________________________________________________________

_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
Appendix B

Research Ethics
Western University Non-Medical Research Ethics Board
NMREB Delegated Initial Approval Notice

Principal Investigator: Dr. Peter Jaffe
Department & Institution: Education, Faculty of Education, Western University

Study Title: Domestic Homicide Typologies
Sponsor:

NMREB Initial Approval Date: January 05, 2016
NMREB Expiry Date: January 05, 2017

Documents Approved and/or Received for Information:

<table>
<thead>
<tr>
<th>Document Name</th>
<th>Comments</th>
<th>Version Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Western University Protocol</td>
<td>Received by email on December 22, 2015.</td>
<td></td>
</tr>
</tbody>
</table>

The Western University Non-Medical Research Ethics Board (NMREB) has reviewed and approved the above named study, as of the NMREB Initial Approval Date noted above.

NMREB approval for this study remains valid until the NMREB Expiry Date noted above, conditional to timely submission and acceptance of NMREB Continuing Ethics Review.

The Western University NMREB operates in compliance with the Tri-Council Policy Statement Ethical Conduct for Research Involving Humans (TCPS2), the Ontario Personal Health Information Protection Act (PHIPA, 2004), and the applicable laws and regulations of Ontario.

Members of the NMREB who are named as Investigators in research studies do not participate in discussions related to, nor vote on such studies when they are presented to the REB.

The NMREB is registered with the U.S. Department of Health & Human Services under the IRB registration number IRB 00000941.
Appendix C

1. History of violence outside of the family by perpetrator
2. History of domestic violence
3. Prior threats to kill victim
4. Prior threats with a weapon
5. Prior assault with a weapon
6. Prior threats to commit suicide by perpetrator
7. Prior suicide attempts by perpetrator
8. Prior attempts to isolate the victim
9. Controlled most of all of victim’s daily activities
10. Prior hostage-taking and/or forcible confinement
11. Prior forced sexual acts and/or assaults during sex
12. Child custody or access disputes
13. Prior destruction or deprivation of victim’s property
14. Prior violence against family pets
15. Prior assault on victim while pregnant
16. Strangulation of victim in the past
17. Perpetrator was abused and/or witnessed domestic violence as a child
18. Escalation of violence
19. Obsessive behaviour displayed by perpetrator
20. Perpetrator unemployed
21. Victim and perpetrator living common-law
22. Presence of stepchildren in the home
23. Extreme minimization and/or denial of spousal assault history
24. Actual or pending separation
25. Excessive alcohol and/or drug use by perpetrator
26. Depression – in the opinion of family/friend/acquaintance – perpetrator
27. Depression – professionally diagnosed – perpetrator
28. Other mental health or psychiatric problems – perpetrator
29. Access to or possession of any firearms
30. New partner in victim’s life
31. Failure to comply with authority – perpetrator
32. Perpetrator exposed to/witnessed suicidal behaviour in family of origin
33. After risk assessment, perpetrator had access to victim
34. Youth of couple (18 to 24 years of age)
35. Sexual jealousy – perpetrator
36. Misogynistic attitudes – perpetrator
37. Age disparity of couple (age difference of 9 or more years)
38. Victim’s intuitive sense of fear of perpetrator
39. Perpetrator threatened and/or harmed children
### Appendix D

**Risk Factors in the Youth and Adult Populations**

<table>
<thead>
<tr>
<th>Risk Factor</th>
<th>Youth Population</th>
<th>Adult Population</th>
<th>Total</th>
<th>$\chi^2$</th>
</tr>
</thead>
<tbody>
<tr>
<td>History of Violence Outside of Family</td>
<td>9 (56.3)</td>
<td>8 (72.7)</td>
<td>17 (63.0)</td>
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</tr>
<tr>
<td>History of Domestic Violence</td>
<td>12 (80.0)</td>
<td>13 (92.9)</td>
<td>25 (86.2)</td>
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<tr>
<td>Prior Threats to Kill Victim</td>
<td>7 (50.0)</td>
<td>8 (61.5)</td>
<td>15 (55.6)</td>
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<tr>
<td>Prior Threats with Weapon Against Victim</td>
<td>3 (18.8)</td>
<td>4 (30.8)</td>
<td>7 (24.1)</td>
<td>5.66</td>
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<tr>
<td>Prior Assaults with Weapon</td>
<td>3 (18.8)</td>
<td>4 (30.8)</td>
<td>7 (24.1)</td>
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<tr>
<td>Prior Attempts to Isolate Victim</td>
<td>10 (62.5)</td>
<td>6 (42.9)</td>
<td>16 (53.3)</td>
<td>1.16</td>
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<td>Prior Attempts to Control Victim</td>
<td>9 (52.9)</td>
<td>5 (35.7)</td>
<td>14 (45.2)</td>
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<tr>
<td>Prior Hostage Taking</td>
<td>3 (17.6)</td>
<td>2 (14.3)</td>
<td>5 (16.1)</td>
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<tr>
<td>Prior Forced Sexual Acts</td>
<td>2 (15.4)</td>
<td>1 (8.3)</td>
<td>3 (12.0)</td>
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<td>Prior Destruction of Victim’s Property</td>
<td>6 (35.3)</td>
<td>2 (15.4)</td>
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<td>Prior Violence Against Family Pets</td>
<td>1 (5.9)</td>
<td>1 (7.1)</td>
<td>2 (6.5)</td>
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<tr>
<td>Strangulation of Victim in the Past</td>
<td>4 (36.4)</td>
<td>3 (23.1)</td>
<td>7 (29.2)</td>
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<tr>
<td>Perpetrator Exposed to Domestic Violence as Child</td>
<td>6 (66.7)</td>
<td>3 (75.0)</td>
<td>9 (69.2)</td>
<td>.090</td>
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<tr>
<td>Escalation of Violence</td>
<td>12 (70.6)</td>
<td>9 (69.2)</td>
<td>21 (70.0)</td>
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<td>Obsessive Behaviour</td>
<td>15 (93.8)</td>
<td>9 (75.0)</td>
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<td>Perpetrator Unemployment</td>
<td>9 (56.3)</td>
<td>6 (40.0)</td>
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<td>Minimization or Denial of Abuse</td>
<td>4 (23.5)</td>
<td>6 (50.0)</td>
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<td>Actual or Pending Separation</td>
<td>14 (82.4)</td>
<td>13 (86.7)</td>
<td>27 (84.4)</td>
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<td>Substance Abuse</td>
<td>6 (37.5)</td>
<td>7 (53.8)</td>
<td>13 (44.8)</td>
<td>.775</td>
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<td>Depression Evident</td>
<td>6 (37.5)</td>
<td>5 (45.5)</td>
<td>11 (40.7)</td>
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<td>Diagnosed Depression</td>
<td>2 (13.3)</td>
<td>3 (25.0)</td>
<td>5 (18.5)</td>
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<tr>
<td>Other Psychiatric Illness</td>
<td>4 (26.7)</td>
<td>5 (35.7)</td>
<td>9 (31.0)</td>
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<td>Access to a Firearm</td>
<td>3 (17.6)</td>
<td>5 (41.7)</td>
<td>8 (27.6)</td>
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<tr>
<td>New Partner in Victim’s life (Real or Perceived)</td>
<td>9 (56.3)</td>
<td>5 (33.3)</td>
<td>14 (45.2)</td>
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</tr>
<tr>
<td>Failure to Comply with Authority</td>
<td>9 (52.9)</td>
<td>4 (28.6)</td>
<td>13 (31.9)</td>
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<tr>
<td>Family History of Suicide</td>
<td>1 (9.1)</td>
<td>1 (25.0)</td>
<td>2 (13.3)</td>
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<td>Access to Victim After Risk</td>
<td>1 (6.7)</td>
<td>2 (14.3)</td>
<td>3 (10.3)</td>
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<tr>
<td>Assessment</td>
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<td></td>
<td></td>
<td></td>
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<tr>
<td>Sexual Jealousy</td>
<td>8 (57.1)</td>
<td>6 (54.5)</td>
<td>14 (56.0)</td>
<td>.017</td>
</tr>
<tr>
<td>Misogynistic Attitudes</td>
<td>4 (36.4)</td>
<td>4 (40.0)</td>
<td>8 (38.1)</td>
<td>.029</td>
</tr>
<tr>
<td>Victim’s Intuitive Sense of Fear</td>
<td>10 (62.5)</td>
<td>8 (66.7)</td>
<td>18 (64.3)</td>
<td>.052</td>
</tr>
</tbody>
</table>

* $p < .05$ for a priori predictions
Appendix E

Summaries of Case Examples for Themes of Peer Disclosure

Example 1.

This case involved the homicide of a teenaged female victim by her former male partner. The victim had dropped out of school around the time the relationship began, and soon afterwards became pregnant. The perpetrator had a history of drug and alcohol abuse, and a criminal record. Over the next couple of years, the perpetrator and victim had a stormy relationship, with numerous incidents of physical abuse and assaults, forcible confinement, damage to property and threatening. On one occasion, he was charged and convicted of spousal assault, and the probationary terms prohibited his association with the victim. By this time the couple had separated, and she had returned to school through a school-parenting program. The perpetrator continued to contact her repeatedly, threatening suicide and stalking and intimidating her and any of her male associates. Police made application for a warrant for his arrest for a further domestic assault, but this was not put on the CPIC system in a timely fashion, leading to a missed opportunity to apprehend him during a routine traffic stop by another police service just days before the homicide.

One day before the homicide, the victim confided her concerns to tutors at school, but they were unable to provide any information to her regarding helpful domestic assault contact services prior to her death. On the day of the incident, the perpetrator gained entry into the victim’s home and shot her.

Example 2.

This case involves a young couple in their early twenties who had been in a volatile and abusive dating relationship for several years. The perpetrator made numerous threats to kill the victim and her family in attempts to control the victim. In one such incident several months prior to the homicide in early May 2002, while the victim was at a club with friends, the perpetrator grabbed her by the arm and told her if he ever saw her talking to his friends again he’d kill her, “you’re done, your life is over.” The victim went to her parents, told them of the threat, and she reported the incident to the police the next day. The perpetrator was arrested and charged with assault and uttering a death threat. He was released after a bail hearing with a condition that he not have contact with the victim or her family. The perpetrator’s mother was named as surety. Although there were conditions for the perpetrator and the victim to not have any contact, they continued to see each other and frequent the same places.

A few days prior to her death, the victim decided to finally end her relationship with the perpetrator. She had recently started a new relationship. She had also learned that the perpetrator had been intimate with her roommate. She told others that she was looking forward to moving to a new apartment and getting on with her life. In the early morning hours on the day of homicide, the perpetrator visited the victim’s apartment where they argued until 4 a.m. The victim finally told the perpetrator to leave.
After leaving the apartment, the perpetrator drove around town and consumed alcohol and cocaine with two other women he met. He eventually returned to the victim’s apartment. Later that morning, the victim and perpetrator agreed to meet to exchange personal belongings. They met behind a nearby school at approximately 10:30 a.m. The perpetrator sat in the victim’s car with her. He then pulled a knife from a gym bag he had brought with him and attacked her with it. The perpetrator had purchased this knife a few days prior. He stabbed the victim 58 times, causing her to bleed to death.

After the attack, the perpetrator placed the victim’s body in the passenger seat of her car and drove to an apartment building downtown where he left the vehicle in an alleyway. The perpetrator then went into the building, called the police, and told them where they would find her body. Once the officers arrived, the perpetrator confessed to stabbing the victim. The perpetrator was arrested and charged with first-degree murder. At trial he was convicted of second-degree murder and was sentenced to life imprisonment with parole eligibility set at fourteen years.

Example 3.

This is a case of homicide-suicide involving a young couple aged 19 and 21 who had recently separated. Based on a forensic analysis of the scene where the bodies were discovered—a wooded area—and the autopsy results detailing the injuries, investigators concluded the female victim died as a result of the perpetrator reaching from behind and stabbing her once in the chest. He then attempted to hang himself using his shirt hooked on a tree limb, and finally stabbed himself in the chest, resulting in his death. Information suggested he had planned the event in advance—he had strapped a bayonet to his lower leg, and had placed a machete in the park near the logs where the female victim was found.

The victim and perpetrator had met in high school and lived together after finishing school. There were frequent disturbances while they lived together in an apartment. Information supplied by family and friends confirmed he had been controlling, possessive, and jealous of the victim. After she separated from him, he would become upset with her relationship with some of her friends, her attendance at area bars, and her association with other males.

The perpetrator’s recent behaviour and statements suggested he was contemplating ending his own life. He had declared to his friends that he was moving away, but he would not tell anyone where he was moving. He had quit his job. When it was suggested to him that he transfer to another store, he said there were none where he was going. He had given up his apartment and set about selling his possessions. Several days before the homicide-suicide, he confided to a friend that he was thinking about killing her and himself. His friend did not know whether to believe him or how to disclose it to others. The same friend reported to police afterwards that just before the deaths, the perpetrator had left him a music cassette tape of a song entitled Kim performed by the rapper artist Eminem. The song contains explicit lyrics about murder/suicide in the context of a failed intimate relationship:
...so now it’s double homicide and suicide with no note
I should have known better when you started to act weird
We could have….HEY! Where are you going? Get back here!
You can’t run from me Kim
Its just us, nobody else!
You’re only making this harder on yourself
Ha! Ha! Got’cha!
(Ahh!)
Ha! Go ahead yell!
Here I’ll scream with you!
AH SOMEBODY HELP!
Don’t you get it bitch, no one can hear you?
Now shut the fuck up and get what’s comin’ to you
You are supposed to love me
{*Kim choking*}
NOW BLEED! BITCH BLEED!
BLEED! BITCH BLEED! BLEED!
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2009-2013 B.A. Honours Psychology with Thesis

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University of Windsor
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Supervisor: Dr. Peter Jaffe
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2016-2017

Presentations:

Promoting Healthy Relations for Youth: Feb. 17th, 2017
Breaking Down the Silos in Addressing Mental Health & Violence
London, ON
Speaker, Presentation: Dangerous Relationships

Association for Behavioural and Cognitive Therapies Conference Nov. 14th, 2014
Philadelphia, Pennsylvania
Conference Poster: Substance use during adolescent dating incidents: A contextual examination.