Psychotherapy and Social Responsibility: The Challenging Case of Homicide

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ABSTRACT *In this article we consider the social basis of homicide and the suffering experienced by secondary victims (the family, friends and close associates of the primary victim) and tertiary victims (the communities and societies of primary and secondary victims). We propose that alongside the legitimate and enacted professional role in the sphere of personal suffering, psychotherapists have an ethical obligation to tackle the social roots of such suffering. Specifically, we challenge psychotherapists and their organisations to commence or increase substantially individual and collective engagement aimed at reducing fatal violence in global society by addressing those causative factors which lie beyond individual bio-psychopathology. Such substantive "moral action" can contribute significantly to the present underdeveloped socially responsible basis of psychotherapy. Copyright © 2013 John Wiley & Sons, Ltd.*

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> All it takes for evil to triumph in the world is for good men [and women] to do nothing. (Edmond Burke)

HOMICIDE

Violence has been in decline over long stretches of history, and today we are probably living in the most peaceful moment of our species' time on Earth (Pinker, 2011). An individual living in London during the Middle Ages was 14 times more likely to be murdered than today (Gardner, 2008). Officially, both the homicide rate and overall rate of violence is recorded as having dropped significantly over the last few years in countries such as the USA, Australia, and Britain (United Nations Office on Drugs and Crime [UNODC], 2011). England and Wales for 2011–2012 has the lowest rate of homicide since 1983, despite its population increasing by

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over 5 million during that period (Office of National Statistics, 2011, 2012). Furthermore, most humans do not kill, no matter what the situation or the means at hand. Out of a huge number of violent acts that occur in any one year only a small percentage will end with someone dying.

There are, however, still approximately half a million officially recorded victims of homicide globally each year and many Caribbean and Central/South American countries show significant increases in their homicide rates (UNODC, 2011). Moreover, the global figure is considered to be inaccurate. Although homicide is defined as the killing of one human by another, the legal definition and status of homicide differ across the world. The difference between "attempted murder", manslaughter, murder, infanticide, and various "degrees" or levels of homicide, may be more inadvertent than finely judged.

More importantly, the actual homicide rate is considered to be much higher than the official one. Data are not available at all for large parts of Africa and some Asian countries. Many countries do not make mention of all or any military and civilian deaths as a result of armed conflict, judicial and extrajudicial executions, euthanasia, and filicide (a parent killing his/her biological son or daughter of any age) and foeticide (the deliberate killing of a foetus) as methods of birth control. Nor are deaths attributable directly or indirectly from the lethal effects of, for example, the armament and tobacco industries, as well as (allegedly) global industrialisation, consumerism, and transport policies ranging from road speed limit mismanagement to building extra airport runways (Monbiot, 2007). Furthermore, what the raw data do not draw attention to are major primary victim groups: domestic, in which, in the main, women are killed; infants killed by a parent or step parent; young men, especially when alcohol is consumed; gangs involved in trading illegal drugs (Morrall, 2006).

However, no matter what the authentic figure is, the "collateral damage" from homicide is extensive. Aside from the primary victims of homicide, secondary and tertiary victimhood comprises a sizeable section of global society (Morrall, 2006; Morrall, Hazelton, & Shackleton, 2011).

SOCIETY

For C. Wright Mills (1959) there was a reflexive interrelationship between individuals and society and between personal and social pathologies. "Realist" criminologists (e.g. Lea & Young, 1984) have long recognised that to suggest there is one identifiable bio-psychopathology or one form of social pathology which leads to any crime or type of crime ignores the variety and sophistication of the connections between the individual and society.

Any killing event comes about because of a complex matrix of predisposing and precipitating factors involving aspects of the perpetrator and victim's psychology and/or biology and the culture and structure of their social environment (Morrall, 2006). For example, some of the factors amongst many implicated in the act of a man killing his female partner may be: learning in childhood to respond to frustration with violence; having a high level of testosterone or genetic propensity for excessive aggression; living in a society which does not engender respect for women, and generally glorifies violence.

Moreover, the meaning of a crime is also constructed or reconciled by societal ascriptions of importance. The significance of husbands raping or murdering their wives (men are

notably more likely to kill women than vice versa), and whether or not either is even considered a crime, has changed historically and continues to differ cross-culturally.

Some social factors, however, would appear to be more potent in their potential to predetermine whether or not homicide rates will fall or rise. Pridemore (2004), for example, observed that there is strong evidence of a connection between a culture of high alcohol intake and high homicide rate in Russia, and that an acceptance of daily drinking of large volumes of strong alcohol may form the cultural context in which violent outcomes from binge-drinking at weekends are more likely. High gun ownership in a country or region (the noticeable exception being Switzerland) is associated with a high rate of homicide (UNODC, 2011). In the USA homicides committed using guns appear to revolve around issues of gender, race, class and "hot spot" urban situations including night clubs, accident and emergency hospital units, "red light" areas, and illegal drug-buying locations (Miethe & Regoeczi, 2004).

The major social ingredients linked to the causation of homicide, however, are inequality and poverty (Wilkinson & Picket, 2010). A cross-country study of the causes of violent crime by Fajnzylber, Lederman, and Loayza (2002) views income disparities, along with economic growth or decline, as the main determinant of violent crimes, especially robbery and homicide. Research by Dorling (2006a, 2006b) indicated that in Britain people living in the poorest areas are six times more likely to be murdered than those in the richest. Furthermore, plentiful research has revealed that in most countries a high proportion of homicides occur between people of similar life circumstances, with both victim and perpetrator likely to come from the disadvantaged sections of society (UNODC, 2011). For Dorling and others (e.g. Gilligan, 1996) poverty breeds feelings of worthlessness, humiliation, and shame, particularly amongst young men, and this is the specific trigger for non-fatal and fatal violence.

Jock Young (1999), Professor of Criminal Justice and Sociology at City University of New York, pointed out the obvious: that homicide rates can be reduced appreciably if inequality and poverty are addressed effectively.

PSYCHOTHERAPY

That violence causes psychological (and physical) suffering is self-evident. Hence the enterprise of psychotherapy has an obvious and legitimate role in understanding and addressing violence. Indeed, the nature of violence has been conceptualised within psychotherapy since its inception as a formal discipline and has influenced other disciplines. Psychoanalysis in particular has been rich in ideas about violent perpetration and victimhood. Duclos (1998), a sociologist, writing about the "werewolf" cultural contradiction between social mores and laws admonishing violence juxtaposed with pervasive cruelty and carnage in popular media and entertainment, noted Freud's position: "It was Freud who expressed … in the clearest terms: we are all a bunch of killers" (Duclos, 1998, p. 119).

Melanie Klein's psychoanalytic approach to the perpetual "near the edge" emotional turmoil of the human mind in general was to influence psychotherapist and criminologist Hyatt-Williams (1998) in his work on the specific minds of sadistic serial killers.

Theodor Reik (1945), psychoanalyst and pupil of Freud, argued that there was no division between murderers and non-murderers if measured not by deeds but by thought. Reik argued

that most people will fantasise about murder at some point in their lives. This premise has been developed more recently by Buss (2005), a neo-evolutionary theorist, who surveyed the thoughts of university students and discovered that they were at some point murderous.

Theorising about violence (fatal and not-fatal) has continued since the days Freud, Klein, and Reik, and psychotherapists of many different theoretical persuasions deal with personal problems connected with violence in their everyday practice. There has also been a profusion of specialist psychotherapists (working, for example, in the field of forensic mental health) and psychotherapies (adapting for example, attachment theory, systems theory/ies, person-centred therapy, psychodynamic theory, and cognitive-behavioural therapy) for those committing and/or traumatised by violence (Jones, 2004).

The theory and practice of psychotherapy are replete with ideas and practices relating to the perpetration of violence and victimhood. This is to be applauded. Our argument, however, is that there should be much more appreciation in psychotherapy and amongst psychotherapists of the social context of violence in terms of causation and curtailment.

VICTIMS

The pool of known and suspected primary and secondary victims from fatal violence globally is colossal. Writing about the USA Armour (2002) described secondary victims of homicide collectively as a "substantial part of the population" (p. 121). Again in the USA, Hertz, Prothrow-Stith and Chery (2005) calculated that 16.4 million people were affected by homicide (their work was conducted at a time when the homicide rate had reached a peak of approximately 25,000 per year). This figure comprises 5 million adults who had experienced the murder of an immediate family member, 6.6 million people who had experienced the murder of a relative other than an immediate family member, and 4.8 million who had experienced the murder of a close friend. Moreover, secondary victimhood may also encompass the family, friends and close associates of the perpetrator, and professionals who attend the scene of the killing, investigate the homicide, and provide support to the family.

Criminology has for decades attended to victimhood in terms of theory, policy and practice, and continues so to do (Spalek, 2012). Realist criminologists in particular have long argued for the criminal justice systems to recognise and respect the plight of victims (Lea & Young, 1984; Matthews & Young, 1986). Undoubtedly, victims of violence are being given far more attention by politicians than previously. Victims of crime in general are now incorporated to some extent within the criminal justice system of a number of countries such as the USA, Australia, and Britain (Karmen, 2009). A recent United Nations report written by its Human Rights Special Rapporteur has called for victims of terrorist atrocities to be awarded the right to claim financial compensation and access to facilities for rehabilitation (Emmerson, 2012).

Nevertheless, individual secondary victims, victim advocacy agencies, and governmental appointees responsible for championing the rights of victims continue to complain that the specific needs of this group are not respected fully and can be made worse by the judicial process. Sandra Brown, Head of the US Institute for Relational Harm Reduction and Public Pathology Education, has argued that the privileges and sensitivities of perpetrators of major crimes involving violence are more protected by the law than are those of the victims of these crimes. This, for Brown, added significantly to the suffering of secondary victims of homicide (Brown, 2011). The Victims of Crime Assistance League of New South Wales,

Australia (VCAL) records the difference for secondary victims of homicide between what they expect from the criminal justice system and the reality:

> Over and over victims tell us that what they are led to expect will happen – and what actually happens are two entirely different things. They say that responses from supposed professional workers in the field, the police, courts, and comments and reactions from friends, family and others, often just astound and re-victimise them in their grief. (VCAL, 2013)

In Britain it is the charity sector which provides most of the available provision for secondary victims. The main British victims' charity is Victim Support which, with financial backing from the government, does offer a specialist "National Homicide Service". The service has existed only since 2010; at the time of implementation it employed only 30 specialist personnel; and, after two years of operating, "staff stressed that there was considerable pressure on the resources required to deliver a high-quality service" (Turley & Tompkins, 2012, p. 46).

Louise Casey (2010) the first British Victims' Commissioner, stated that victims are still the "poor relation" of the criminal justice system. Following the conviction in 2011 of the killer of 13 year-old Milly Dowler, and what her parents described as the "mental torture" they suffered as witnesses at the trial, Casey called for sweeping changes to the criminal justice system. Subsequently, a report was produced by Casey (2011) containing a series of substantial recommendations to correct the lack of recognition of the needs of secondary victims. These needs, the report proposed, should be underscored by a "Victims' Law". To date (2013), there is no sign of such a law in Britain.

SUFFERING

The effects on the health of secondary victims have traditionally been understood and treated using a framework of (sudden) bereavement (Morrall, 2006; Morrall, Hazelton & Shackleton, 2011). However, Rock has argued that homicide produces an intensity of bereavement that can be distinguished from other forms of grieving such as the loss of human life from illness and accidents (Rock, 1998; Malone, 2007).

Sudden bereavement through homicide may be compounded if the killing has been sadistic and/or sexualised. The profundity of the loss is also made more severe because of the feeling of "unfinished business", and because the killer may not be known, if known not necessarily apprehended, if apprehended not always convicted, and if convicted subsequently released following an appeal, retrial or pardon. The grieving process is further complicated by the intrusiveness of the media. For example, repeated and sensationalised broadcasts of details surrounding the homicide are distressing for the secondary victims, although in some cases secondary victims embrace the media and others may be requested to do so by the police. The mother of James Bulger, the 2-year-old boy from Merseyside, England, who, in 1993 was killed by two 10-year-old boys, commented on her experience with journalists: "In the beginning I refused to go outside the door. I locked myself into the bedroom. I had cameras shoved in my face … It just feels as though you are living in a total nightmare" (Fergus quoted on BBC News, 2012).

Journalists, too, can themselves suffer. Steve Rosenberg (2012), a BBC reporter, has remarked on the after-effects of having sat through the trial of Anders Breivik. In 2011 Breivik killed 77 people, eight when the bombs he planted exploded in the city centre of Oslo, Norway, and 69 when he shot and killed mostly teenagers attending a youth camp on the island of Utoeya. Rosenberg attended the trial for the BBC and listened to what he described as the "horrific stories" of the secondary survivors. These, he explained, he found too "deeply painful". Rosenberg also found what the culprit said at the trial about his motivation for the killings caused him further distress.

Secondary victims may take on a sense of guilt. Moreover, feelings of shame and culpability can be exaggerated significantly if the spotlight of suspicion is cast over family members by investigating police officers. There can be a kind of double jeopardy from secondary victimhood, involving both personal distress and social disgrace.

The victim impact statement written by the mother of British 17-year-old, Hannah Foster, murdered in 2003, illustrated how emotionally tumultuous some homicides become for secondary victims not only because of their loss but as a consequence of feeling responsible for not "being there" for their loved one:

> Her life tragically cut short by the wilful actions of a cruel stranger who took it upon himself to abduct, rape and then murder my beloved Hannah … I felt numb, paralysed by grief and pain … For the rest of my life, I will feel the guilt that I wasn't there when she needed me most … He [the killer] has wrecked our family. So many other innocent people, including his own family, have had their lives shattered … The sense of loss is unbearable. We are heartbroken and will always remain so. (Foster, 2008)

Hertz, Prothrow-Stith, & Chery (2005) commented that the usual therapeutic approach to bereavement for secondary victimhood is inadequate because it may not capture the accepted intensity of the homicide survivor's experience. They pointed out that there is evidence linking homicide survivorship to post-traumatic stress disorder (PTSD). However, neither a bereavement nor a PTSD conceptualisation of secondary suffering recognises the social suffering of neighbourhoods and wider social contexts when saturated with the grief from either particularly horrific or multiple killings (National Center for Victims of Crime, 2004).

Social suffering can be measured. For example, at times of armed hostilities infant morbidity and mortality rates rise, average life expectancy rates drop, and economic productivity overall falls dramatically (UNODC, 2011).

RESPONSIBILITY

Bloom (2001) observed that violence has its victims and its perpetrators, and it also has its bystanders: the rest of humanity that allows the conditions which breed violence (including homicide) to happen and does not react at all, or is reactive rather than proactive. This, for Bloom, demonstrates a lack of social responsibility.

On the basis that society is at least in part responsible for certain homicide events and certain aspects of the overall level of homicide, some specific suggestions for altering society are already in the public domain and being acted upon: various international, governmental, and non-government agencies are working together on preventative strategies focused, for

example, on child soldiering, genocide, alcohol consumption, domestic abuse, and sex work (UNODC, 2011).

Other global social issues, some of which have direct relevance to homicide, such as inequality, disease, pollution, poverty, and civil disorder, are also intractable realities for much of the world's population. Collier (2008) remarked that the reality for the "bottom billion" of global society in the 21st century is the social conditions – which are more identifiable with the 14th century (Common Era), including risk of non-fatal and fatal violence.

There is, we suggest, an ethical imperative for psychotherapists and their organisations, although in the vanguard of dealing with personal suffering, not to be bystanders when it comes to the social causes and social effects of that suffering. Psychotherapists have occupational responsibilities set out in the ethical codes of their representative organisations, for example, the United Kingdom Council for Psychotherapy (2009) and the British Association for Counselling and Psychotherapy (2013). We contend that such codes should also embrace moral responsibilities to alleviate the social problems of poverty, disease, inequalities, ecocide, and violence.

Some psychotherapists do propose potential solutions to the problems of global society. Samuels (2006), for example, has referred to a number of therapy organisations that have social agendas, one of which is the Psychotherapists and Counsellors for Social Responsibility (PCSR) (http://pcsr-uk.ning.com/). Moreover, in 2012 a conference on "Psychoanalysis in the age of Totalitarianism" was held by the London-based Institute of Psychoanalysis, which publicises its wider moral credentials under the banner "Beyond the Couch" (http://www.beyondthecouch. org.uk/). Another conference, entitled "Psyche, Law and Justice – Joining up Human Responses to Ecocide", arranged by the Climate Psychology Alliance (http://www.climatepsychologyalliance. org/), which was founded by a psychotherapist, Adrian Tait, took place in the Refugee Therapy Centre of London during 2013. Ecocide (the destruction of natural habitats) can foment genocide as governments seek to protect resources (Richter, Blum, Berman, & Stanton, 2007). On a global basis, environmental destruction could see the whole of humanity exterminated.

It is far from clear, however, as to how much actual social change occurs via these politically minded therapy groupings. The PCSR website (2013) declares that it is an interactive forum for therapists who have an "interest" in politics and social responsibility. Whilst this interest, according to its forum agenda, covers such topics as the image of psychotherapy and improving access to psychotherapy, these issues are hardly likely to lead the dynamic transformation of all that is wrong with humanity and its social systems. Having an "interest" in some more politically charged topics may be enough to sow the seeds of taking steps to revising how society is ordered, but, equally, it may remain merely as a curiosity rather than a cure.

The website of the Institute of Psychoanalysis, "Beyond the Couch", has on its main page a rolling show of quotations from eminent therapists. Fritz Perls, the founder of gestalt therapy, is cited thus: "I am not in this world to live up to other people's expectations, nor do I feel that the world must live up to mine" (Institute of Psycoanalysis, 2013).

Perls (1969) realised that humans are social animals, recommending personal growth and true love as the main ways to achieve individual happiness and a more humane society. Such strategies may have their intended effect, although 43 years after his death not as yet. Furthermore, the implication from the above quotation is "I do my thing and you do your

thing", which is hardly a relevant mantra for the vigorous engagement with tactics to alter the structure and culture of inequality, inequity, and injustice.

The Climate Psychology Alliance states on its website that its rationale is to:

> facilitate a deeper understanding of our human responses to climate change … Through papers, discussions, artistic contributions and events, we investigate the psychological and social dynamics which underpin the development of human-induced climate change and ecological destruction. (Climate Psychology Alliance, 2013)

Raising the consciousness and consciences of psychotherapists concerning political matters is ethically laudable. However, these aims imply that this alliance is more of a "talking-shop" than a hot-bed of executable plans for a better (and less hot) future.

No matter how socially aware and politically motivated these organisations and conferences are, they do not have huge memberships or attendees. For example, the PCSR has, at the time of writing, fewer than 500 full members worldwide. Social responsibility should not only be carried by a moral minority of therapists. As we have argued elsewhere (Morrall, 2008a, 2008b, 2009; Morrall, Hazelton, & Shackleton 2011), social responsibility should move from the fringe to the forefront of psychotherapy praxis (i.e. the enacting of ideas and theories), as it should the praxis of associated disciplines such as psychiatry and psychiatric nursing.

CHALLENGE

We challenge individual psychotherapists to embark on moral action of their choice, and to pressurise their representative organisations, with the aim of tackling at least some of the social factors that are associated with homicide in global society. Our challenge to the officials of psychotherapy organisations is to connect with agencies in related professional, academic, and human rights fields for the same purpose.

We, the authors, do not claim the moral high ground, but we do attempt to practise what we preach: by promoting the views expressed here both in connection with suffering caused by homicide and other causes of misery (through articles, books, lecturing, and conference presentations); and by committing ourselves to improving the lot of individuals and communities (through our past/present work in mental health and the police; voluntary work for, and financial donations to, charities and other agencies with an international humanitarian and/or anti-violence agenda). We, of course, appreciate that some psychotherapists already practise what we are advocating. Neither do we have the perfect solutions to prevent all homicides and all violence in the world, let alone all aspects of human suffering. What we offer to psychotherapists and the managers of their professional organisations are some practical socially responsible suggestions that may lead in that general direction:

- That all therapy training curricula include in-depth explication and practicable application of socio-political knowledge which elucidates personal suffering, together with the potential for personal growth, as socially contextualised.
- That there is a shift away from "the self" as the only focus of attention during psychotherapy sessions towards a dialogue with the client's sophisticated "social self" which encompasses,

for example, gender, ethnicity, education, economic position, religion–spirituality, family, community, culture, national society, and global society.

- That there is a legitimisation of rigorous and forthright debates about society held not only at "politically orientated" gatherings of psychotherapists but also at most if not all mainstream psychotherapy conferences and related events.
- That there is a dialogue and alignments made with ethical campaigns intended to take moral action to alleviate global misery including but not exclusively those concerning homicide/violence. Here we tentatively offer some examples of those organisations and agencies with which such a dialogue/alignment and allegiance could be made:

1. Change.org (www.change.org) – the web's leading platform for social change which empowers anyone, anywhere to start petitions that make a difference.
2. Avaaz.org, the World in Action (www.avaaz.org) – another global web movement designed to bring people-powered politics to decision making everywhere.
3. Forum for a New World Governance (www.world-governance.org/).
4. Alliance for a Responsible, Plural and United World (www.alliance21.org) – an organisation which seeks to invent new forms of collective action.
5. Amnesty International (www.amnesty.org/) – protecting human rights worldwide.
6. *Médecins Sans Frontières* (www.msf.org/) – an international medical and humanitarian aid organisation.
7. Citizens Against Homicide (www.citizensagainsthomicide.org/).
8. End Violence Against Women Coalition (www.endviolenceagainstwomen.org.uk).
9. Mothers Against Murder and Aggression (www.mamaa.org/).
10. Genocide Watch (www.genocidewatch.org/) – The international alliance to end genocide.

CONCLUSION

Homicide remains a – possibly *the* – major social and personal problem worldwide. There are social factors involved in the causation of homicide as well as those emanating from an individual's psychological/biological make-up.

A vibrant and wider alliance is required for the type and degree of social change necessary to reduce radically fatal and non-fatal violence globally: an alliance of psychotherapists, social and natural scientists, medical/health practitioners, along with victims' advocates and those who campaign against the actuality and the glorification of violence. Globally, millions of people work in the health, social, caring, academic, and psychotherapy occupations, and work for human rights. Collectively, they have the potential to convene a powerful social movement. Such a social movement could apply itself to tackling the social causes of violence and may even entertain what Kurlansky (2006) described ironically as the "dangerous idea" of a non-violent global society.

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