



science
& technology

Department:
Science and Technology
REPUBLIC OF SOUTH AFRICA



HSRC
Human Sciences
Research Council

***Towards making homes safer and parents resilient to prevent filicide:
Assessing availability of preventive multi-sectoral services in South Africa***

Desktop Study report

CONTENTS

EXECUTIVE SUMMARY	iii
1. BACKGROUND AND INTRODUCTION	1
2. STUDY PURPOSE AND OBJECTIVES	6
3. METHODOLOGY	7
3.1. Literature and document review	7
3.2. Data analysis	8
3.3. Human security principles and prevention of filicide	9
4. UNDERSTANDING THE FACTORS ASSOCIATED WITH FILICIDE IN SA	10
4.1. FILICIDE MOTIVATED BY DIVORCE AND SEPARATION	11
4.2. KILLING METHODS FOR MATERNAL AND PATERNAL FILICIDE	13
4.3. RESPONSES TO INCIDENTS OF FILICIDE: SHOCK, GRIEF, AND INSTITUTIONAL INVOLVEMENT	14
5. Critical Review Of Policy Frameworks: Gaps And Missed Opportunities.....	16
5.1. Review of child protection, family, domestic violence and public health legislation	17
5.2. Review of the National Strategic Plan on Gender-Based Violence and Femicide (NSPGBVF)	24
6. CRITICAL REVIEW OF EXISTING SERVICES: MISSED OPPORTUNITIES FOR PREVENTING FILICIDE.....	26
6.1. Reviewing child protection and social services: family advocates and mediation.....	26
6.2. The role of health services: Missed opportunities for the response and prevention of filicide	28
6.3. VAW-VAC intersection: Missed opportunities for integrated response services	30
7. Conclusions and recommendations	32
8. References	36

Suggested citation: Mokhantšo Makoae, Neo Mohlabane, Anele Langeni, Noncedo Maphosho, Phelimon Papale, Dimpho Makitla, Brinda Raghavendra & Gadija Khan. *Towards making homes safer and parents resilient to prevent filicide: Assessing availability of preventive multi-sectoral services in South Africa*. Research Report. Human Sciences Research Council. Cape Town/Pretoria.

Acronyms

CWSA	Child Welfare South Africa
CEDAW	Committee on the Elimination of Discrimination against Women
DSD	Department of Social Development
DJCD	Department of Justice and Constitutional Development
FAMAC	Family Mediators Association of the Cape
FAMS	Families South Africa
GBV	Gender-Based Violence
GBV	Gender-Based Violence and Femicide
IPV	Intimate partner violence
KAFAM	Kwa-Zulu Natal Association of Family Mediators
LHR	Lawyers of Human Rights
LRC	The Legal Resource Centre
NABFAM	National Accreditation Board for Family Mediators
NSPGBVF	National Strategic Plan on Gender-Based Violence and Femicide
NSP	National Strategic Plan
NPO	Non-Profit Organisations
SAAM	South African Association of Mediators
SAPS	South African Police Service
SALRC	South African Law Reform Commission
SAMRC	South African Medical Research Council
SDGs	Sustainable Development Goals
WHO	World Health Organisation
UNICEF	United Nations International Children's Emergency Fund
UNDP	United Nations Development Programme
VAC	Violence Against Children
VAW	Violence Against Women
VPF	Violence Prevention Forum

EXECUTIVE SUMMARY

Background

South Africa has an overall child homicide rate of 5.5 per 100 000 of the population; with a distinct gender pattern of younger girls being murdered and an increase in male homicide during adolescence. The South African Police Service (SAPS) annual crime statistics for 2019/2020 showed that, 943 children were killed in 2020 and 352 children were killed between October to December of 2020. Despite these alarming statistics and deserved coverage by the media, South Africa has no strategy to systematically tackle the underlying and intertwined contextual factors that affect child survival such as patriarchy, gender inequality and discrimination, poverty, high rates of single parenthood and lack of social support for parents, unemployment, child living arrangements, and structural violence. There is an intriguing phenomenon relating to interconnectedness of VAW and VAC; where mothers and children are victims of family violence on the one hand, and women's perpetration of VAC on the other.

While there is a growing focus on initiatives that seek to understand measures for prevention and response to VAC among various stakeholders for example the Violence Prevention Forum (VPF) initiative; there is a knowledge gap in the provision of services to parents and caregivers in response to severe VAC outcomes such as filicide (deliberate killing of children by their own parents). It is less frequently recognised that parents may be a threat to the human security of their children; and discourses in child protection policies and interventions are dominated by efforts to build healthy parent-child attachments and strengthen parental capacity to care for children, to reduce VAC in the form of neglect, abuse and exploitation. Filicide is the most serious form of violence against children. Filicide occurs under various circumstances which differ from those associated with child homicides including child maltreatment (abuse and neglect), abandonment of very young children or infanticide. The understanding of vulnerabilities of children and response to contextual factors driving parents to kill their children, especially during family adversity, remain a gap. In the absence of interventions specifically designed to prevent filicide, it continues unabated.

Study Purpose and Objectives

The study aimed to review the body literature and provide an overview of the prevention and responses to filicide in South Africa. The specific objectives were to:

- review sectoral policy frameworks that address filicide in South Africa as well as implementation of supporting mechanisms in the form of human resources, financial resources, services and information and reporting systems,
- conceptualise the programmatic prevention of filicide by identifying public and non-governmental institutional and service landscape for responding to parental challenges identified in the literature as threats and risk factors for filicide, and
- critique the services provided with the view to prevent or respond to filicide in terms of timing, targeted beneficiaries, access by families from different socioeconomic backgrounds.

Methodology

The study comprised a literature and document review of various document types including academic literature, policy documents, research reports, administrative data published by the police and document review to characterise filicide in terms of its forms and causes in South Africa. The search was limited to children aged 2 to 17 years old. The databases used to search for academic literature included Sabinet, EBSCOHost Web, Google Scholar, PubMed, Lancet, Cochrane, Science Direct, Google for full text published articles. Grey literature was hand searched and identified through academic literature. Media reports in the form of online news reports, magazines, and social media platforms were reviewed to identify cases of filicide in the public domain for analysis which augments the literature and document review.

Key findings

Factors associated with filicide in South Africa

Filicide occurs across all provinces in the country; mothers and fathers are equally capable of perpetrating filicide; and most incidents involve the killing of multiple children. Paternal filicide is often associated with domestic violence and revenge during the dissolution of a relationship, reasons for maternal filicide include possible psychosis or other mental health condition but are often elusive or not mentioned in media reports. impulsive violence or severe cruelty is perpetrated by fathers, while covert filicide (e.g. poison and drowning) with an intent to kill is perpetrated by mothers.

Critical review of policy frameworks: Gaps and missed opportunities

South Africa has a plethora of legislative and policy frameworks for the protection of children from fatal harm located across different sectors including child protection, family law, criminal law, domestic violence and public health. However, the policy and administrative data practices do not recognise filicide as a distinct category of child deaths. Mandatory reporting for child abuse is meant to be institutionalised to detect recurring abuse, however, there is a policy-implementation gap owing to noncompliance by professionals, as well as inadequate assistance by police and social workers due to lack of resources.

One prevention mechanism more commonly institutionalised (i.e. child protection register) functions poorly owing to a lack of clarity on the responsibility of the organisation and maintenance it.

The children's rights monitoring framework developed by Richter and Dawes has been found to be a useful tool to preventing and responding to child abuse, a caveat identified is that the framework does not differentiate between risk factors for child abuse and filicide per se.

While South African Family Law evolves, children remain overlooked in the dissolution of marriages. These judicial processes are adult-focused with the pretext of children's economic status or maintenance, without the consideration of children being at risk or vulnerable to experience violence or hostility. The Mediation in Certain Divorce Matters Act safeguards the interests of minor and dependent children in case of marriage dissolution (e.g. family mediation practitioners whose services could mitigate the children's vulnerability), the families that need such services may not have access or be aware of these.

Despite the known intersections between VAW and VAC, the National Strategic Plan on Gender-Based Violence And Femicide (NSPGBVF) plan is silent on the prevention of VAC.

Critical review of existing services: Missed opportunities for preventing filicide

Various family mediation organisations exist in South Africa that are accredited by the National Accreditation Board for Family Mediators should disputes arise between parents. Legal support is also available for family mediation and child protection

purposes, such as Legal Aid South Africa which provides legal services for those who cannot afford their own.

The Department of Social Development (DSD) provides support and funding to various organisations, including those that focus on gender and issues pertaining.

Considering some of the contributory factors to maternal filicide (i.e. unwanted child, or spousal revenge or acute psychosis or depression) health care such as occupational therapy, supportive nurses and doctors, psychotherapy are essential in the prevention of fatal child harm; yet in most cases it appears to be inaccessible.

When cases of domestic violence are reported and investigated, there are currently no risk assessment tools for predicting situations where children are at a higher risk for lethality.

Conclusion and recommendations

The study findings highlight gaps in policy development and implementation, and services provision in light of filicide prevention and response. Although various child protection policies exist which can potentially be used in the prevention and response to filicide, these are often silent on filicide.

We provide two (separate) sets of recommendations, note that this is a distinction artificially imposed to suggest stakeholders who we consider as the key drivers of the recommendation we make.

Bridging the policy-implementation gap [Policymakers and service providers]

- Shifting from the current reactive model to a proactive (prevention) model
 - An amplified focus on early identification of at-risk children using risk assessment tools.
 - Build and sustain collaborations amongst various governmental agencies or systems to share and triangulate information about children (and families) at-risk.
- Develop appropriate and robust interventions that
 - Comprise multi-pronged approaches to address the multiple forms of violence occurring within families (given the intersection between VAW and VAC)

- Support children and families who are found to be at-risk (i.e. safety plans are developed and executed) specifically in the context of domestic violence
- Improve mental health care response through:
 - Investment and financing to increase the human and financial resources contribute to the treatment gap
 - Horizontal integration (integrate mental health into primary health care) by task shifting and use existing personnel to deliver services.
 - Integration of mental health into prenatal and postnatal services to provide opportunities to assess risk and to identify mothers who may need referral to services.
 - Provide ongoing psychosocial support to families who have experienced filicide.

Evidence for improved prevention and responses to filicide [researchers]

- Categorisation of child homicides and working towards an operational definition of filicide
- Production of evidence to improve implementation practices such as
 - Collaboration between research and service-level stakeholders to develop standardised risk assessment /screening tools to be used in various sectors across the country.
 - The extensive investigation and identification of barriers and facilitators to implementation of existing approaches to bridge the policy-implementation gap.

1. BACKGROUND AND INTRODUCTION

Filicide or the deliberate killing of children by their own parents is the most serious form of violence against children with unknown consequences for other children, family members and communities. Globally, there has been an increased commitment and collaboration to prevent and respond to all forms of violence against women (VAW) and violence against children (VAC). There are also intriguing phenomena relating to interconnectedness between VAW and VAC where mothers and children are victims of family violence on the one hand, and women's perpetration of VAC on the other¹. Violence against children needs to be understood in the broader context of violence and gender-based violence (GBV). In South Africa intimate partner violence (IPV) is a common feature of intimate relationships based on patriarchy-structured gender relations that legitimize men's use of violence to assert power and control over women in these relationships (Ratele et al. 2014²; Mathews & Abrahams 2018³). Accordingly, South Africa has among the highest reported IPV rates in the world with prevalence studies reporting rates ranging between 20 to 50%. Relatedly, femicide rates are four times higher than the global rate (Carlson 2020)⁴.

Intimate partner violence does not only affect women but the entire family and this highlights the significance of a holistic approach to violence in the home. According to UNICEF (2020)⁵, many children are exposed to domestic violence through witnessing IPV or experiencing violence themselves. Further, mothers often perpetrate violence against their children – at times it may be fatal – following their own experiences of

¹ Dekel B, Abrahams N, & Andipatin M (2019) Exploring the Intersection Between Violence Against Women and Children from the Perspective of Parents Convicted of Child Homicide. *Journal of Family Violence*, 34: 9–20 <https://doi.org/10.1007/s10896-018-9964-5>

² Ratele, K. et al. (2014). Psychological research and South Africa's violence prevention responses. *South African Journal of Psychology*. 44(2):136-144. <https://doi.org/10.1177/0081246314526831>

³ Mathews, S. & Abrahams, N. (2018). Developing an understanding of filicide in South Africa. In T. Brown, D. Tyson & P. Fernandez Arias (Eds.) *When parents kill children: Understanding filicide* Palgrave Macmillan Cham https://doi.org/10.1007/978-3-319-63097-7_3

⁴ Carlson, C., Namy, S., Norcini Pala, A., Wainberg, M. L., Michau, L., Nakuti, J., ... & Devries, K. (2020). Violence against children and intimate partner violence against women: overlap and common contributing factors among caregiver-adolescent dyads. *BMC Public Health*, 20(1): 1-13.

⁵ UNICEF (2020) *Violence against children: No violence against children is justifiable. All violence against children is preventable*. New York: UNICEF

IPV (Carlson 2020)⁶. Most research on filicide in high income settings recognises prior child abuse, intimate partner violence or both as significant risk factors suggesting that often, there is a prior involvement of the family with child protection services and or the criminal justice system (Jaffe et al., 2013⁷; 2017⁸).

While such incidents highlight the strong intersections of VAW and VAC, policy and programme developers often fail to recognise these interconnections. Consequently, prevention of and response to VAC as well as child protection policies fail to acknowledge that children are harmed during domestic violence, and VAW policies also fail to acknowledge the risk that children face during volatile home situations.

Homicide perpetrated against South African children

Violence is a common feature of the South African social landscape, and the murder of children is the most severe form of VAC. The World Health Organisation (WHO) (2014)⁹ estimates that South Africa's child homicide rate is more than double the global average. According to Abrahams et al. (2016)¹⁰, in 2009, medical and legal data from a random sample of urban and rural settings across the country revealed that 454 children under the age of five were killed. This equates to more than one young child being killed every day. Nearly two-thirds of those killed, were infants under the age of one year, and more than half of those killed were neonates aged zero to six days old, with abandonment being the most common manner of homicide in this age group. The demographic details of the child, the perpetrator and the motive of the killings were collected from mortuaries and police records. This study focused on children under the age of five years because this group represents the second largest group of children killed.

⁶ Ibid.

⁷ Jaffe, P., K. Scott, A. Jenney, M. Dawson, M. Campbell, and A. Straatman. 2013. Risk factors for children in situations of family violence in the context of separation and divorce. Ottawa: Department of Justice.

⁸ Jaffe, P., Fairbairn, J., & Reif, K. (2017). Children at risk of homicide in the context of intimate partner violence. In J. C. Campbell & J. T. Messing (Eds.), *Assessing dangerousness: Domestic violence offenders and child abusers* (pp. 179–207). Springer Publishing Company. <https://doi.org/10.1891/9780826133274.0007>

⁹ WHO (2014) *Global status report on violence prevention 2014*. Geneva: WHO

¹⁰ Abrahams N et al. (2016) Gender differences in homicide of neonates, infants, and children under 5 y in South Africa: Results from the cross-sectional 2009 National Child Homicide Study. *PLoS Medicine*, 13(4): p.e1002003 <https://doi.org/10.1371/journal.pmed.1002003>

According to the report, children under the age of five are most likely to be killed in their first six days of existence, with more than half (53.2%) of children murdered within the first month of their lives and nearly two-thirds (74.4%) likely to die as new-borns. This is one of the highest incidences of neonaticide and infanticide ever recorded (Abrahams et al. 2016)¹¹. Parents, particularly mothers, were the most common perpetrators of these killings, possibly because they are responsible for child care. More recently, the South African Police Service (SAPS) (2021)¹² annual crime statistics in 2019/2020 showed that despite the 7% annual decrease in child homicide, 943 children were killed in 2020 (Lepule 2020)¹³ and 352 children were killed in the last quarter (October to December) of 2021 (UNICEF 2022)¹⁴. Child homicides constitute the worst outcome of physical violence against children (Abrahams et al. 2016)¹⁵ affecting children's right to survival as recognised by the Constitution, African Charter on the Rights and Welfare of the Child, the Children's Act No. 38 of 2005 and the UN Convention on the Rights of the Child (United Nations 1989)¹⁶.

Gould (2014)¹⁷ reports that 827 children were murdered in South Africa between 2012 and 2013 – that is more than two children a day. During the same period another 21 575 children were assaulted, of which half of the assaults were serious. According to the South African Medical Research Council (SAMRC) (Abrahams et al. 2012)¹⁸ three children are murdered daily in South Africa. South Africa has an overall child homicide

¹¹ Abrahams N et al. (2016) Gender differences in homicide of neonates, infants, and children under 5 y in South Africa: Results from the cross-sectional 2009 National Child Homicide Study. *PLoS Medicine*, 13(4): p.e1002003 <https://doi.org/10.1371/journal.pmed.1002003>

¹² SAPS (2021) *Crime Statistics: Integrity*. Accessed July 2022, https://www.saps.gov.za/services/older_crimestats.php

¹³ Lepule T (2020) Child murder drops by 7%, but 943 kids still murdered in SA. *IOL News*. Accessed 08 November 2021 [Child murder drops by 7%, but 943 kids still murdered in SA \(iol.co.za\)](https://www.iol.co.za/news/south-africa/child-murder-drops-by-7-but-943-kids-still-murdered-in-sa-2020-11-08)

¹⁴ Christine Muhigana, UNICEF South Africa Representative, statement, February 2022. <https://www.unicef.org/southafrica/press-releases/352-child-murders-ninety-days-are-352-too-many>

¹⁵ Abrahams N et al. (2016) Gender differences in homicide of neonates, infants, and children under 5 y in South Africa: Results from the cross-sectional 2009 National Child Homicide Study. *PLoS Medicine*, 13(4): p.e1002003 <https://doi.org/10.1371/journal.pmed.1002003>

¹⁶ UN (United Nations) (1989) *UN Convention on the Rights of the Child*. New York: UN <https://www.ohchr.org/documents/professionalinterest/crc.pdf>

¹⁷ Malherbe C & Häefele BW (2017) Filicide in South Africa: a criminological assessment of violence in the family. *Child abuse research in South Africa*, 18(1) <https://journals.co.za/doi/10.10520/EJC-77e03452b>

¹⁸ Abrahams N et al. (2012) Child homicide patterns in South Africa: Is there a link to child abuse?. Research Brief. *South African Medical Research Council*

rate of 5.5 per 100 000 of the population. Furthermore, child homicide in South Africa has a distinct gender pattern of younger girls being murdered and an increase in male homicide during adolescence (Mathews et al. 2012)¹⁹. Moreover, although the Bill of Rights in the South African Constitution guarantees children the right to care and protection, thousands of children nevertheless endure physical, sexual, and psychological abuse every day.

Despite these horrific statistics and the deserved publicity by the media that child homicides receive, South Africa lacks a costed plan of action with clarified interventions for the prevention of and response to child homicide (Hsiao et al. 2018)²⁰. There is no strategy that systematically tackles the underlying and intertwined contextual factors that affect child survival, notably patriarchy, gender inequality and discrimination embedded in social and legal institutions, poverty including its feminised nature, high rates of single parenthood and lack of social support for parents, unemployment, child living arrangements that may involve cohabiting of reconstituted families with non-consanguineal kinship, and structural violence that bars young people from accessing public reproductive health services. Multi-disciplinary services provided for families with children do not mainstream assessment of interpersonal violence in the home setting (domestic violence and child maltreatment). Some of the risk factors for domestic violence such as alcohol and drug abuse disorders, undiagnosed and untreated mental health problems threaten children's safety and survival but do not receive professional attention to prevent harm. There is no strategy that facilitates the monitoring of access to some of the lethal objects and materials used for killing children in various contexts.

There is a general understanding that a significant proportion of physical and mental harm affecting children's health, development and survival takes place in various settings including the home. Parents can be a threat to the human security of their children in the private sphere through various pathways. Discourses in child protection

¹⁹ Abrahams N et al. (2012) Child homicide patterns in South Africa: Is there a link to child abuse?. Research Brief. *South African Medical Research Council*

²⁰ Hsiao C et al. (2018) Violence against children in South Africa: the cost of inaction to society and the economy. *BMJ Global Health*, 3: e000573.

policies and intervention are dominated by efforts developed to build healthy parent-child attachments and strengthen parental capacity to care for children, to reduce VAC in the form of neglect, abuse and exploitation. Although the pathways to children's harm are known, the threats to everyday children's wellbeing have not been addressed sufficiently through appropriate interventions. There is growing focus on collaborative initiatives that seek to understand measures for prevention and response to VAC among government, civil society, international organisations and researchers such as the Violence Prevention Forum (VPF) initiative (Gould et al., 2020)²¹. However, there is a knowledge gap in the provision of services to parents and caregivers in response to severe VAC outcomes and if comparable services could be available for prevention as well. One such outcome is filicide, the intentional killing of children by their parents. Given the lack of specific focus on filicide in policy and services, it is crucial that the review assesses services that usually become available for families when the threat of harm to children is imminent, or filicide has occurred in the family. The extent to which the services are collaboratively provided across disciplines and who they focus on in such incidents is not well understood.

Filicide is common in South Africa. Filicide occurs under various circumstances which differ from those associated with child homicides including child maltreatment (abuse and neglect), abandonment of very young children or infanticide. By contrast, filicide not only associated with child abuse and domestic violence and may occur in the absence of a formal child protection or domestic violence report to the police. Inadequate social protection mechanisms, parental relationship disharmony and family violence coupled with the complexities of family structures and relationships, are possible contributory factors to filicide in many contexts including South Africa. While such killings are responded to with shock by professionals, practitioners, policymakers, the media, community and affected family members alike, the prevention thereof remains a challenge in South Africa (Malherbe & Häefele, 2017)²².

²¹ Gould C et al. (2020) Evidence-led violence prevention: principles and guidelines for practice. Policy Brief. Violence Prevention Forum. *Institute for Security Studies*. <https://issafrica.org/research/policy-brief/evidence-led-violence-prevention-principles-and-guidelines-for-practice>

²² Malherbe C & Häefele BW (2017) Filicide in South Africa: a criminological assessment of violence in the family. *Child abuse research in South Africa*, 18(1) <https://hdl.handle.net/10520/EJC-77e03452b>

In the absence of interventions specifically designed to prevent filicide, it continues unabated and thus, constitutes violation of children's right to survival, safety and security. Essentially, filicide falls through the cracks; the understanding of vulnerabilities of children and response to contextual factors driving parents to kill their children, especially during family adversity, remain a gap. Therefore, there is a knowledge gap in research on policy and programming around filicide that this study seeks to address using document review method.

2. STUDY PURPOSE AND OBJECTIVES

This desktop review provides much needed insight into prevention and response to filicide in South Africa. It contributes insight and awareness of how child protection, victim advocates, health care services, police, criminal justice officials, prosecution and family mediation services in South Africa could prevent familial murder, particularly filicide and support families when affected by filicide. With recognition of the limitations of the document review method, this study aims to explore media reports of how families with children are usually supported to cope with the aftermath of filicide. The extent to which the state processes and social partners focus on perpetrators and survivors and how the interventions provided could be approached to restore family functioning and foster resilience during adversity is considered.

Specific Objectives

- To review sectoral policy frameworks that address filicide in South Africa as well as implementation of supporting mechanisms in the form of human resources, financial resources, services and information and reporting systems,
- To conceptualise the programmatic prevention of filicide by identifying public and non-governmental institutional and service landscape for responding to parental challenges identified in the literature as threats and risk factors for filicide, and
- To provide a critique of services provided with the view to prevent or respond to filicide in terms of timing, targeted beneficiaries, access by families from different socioeconomic backgrounds.

3. METHODOLOGY

3.1. LITERATURE AND DOCUMENT REVIEW

This desktop study used qualitative research methods including review of academic literature, policy documents, research reports, administrative data published by the police and document review to characterise filicide in terms of its forms and causes in South Africa. It explores and documents the key factors contributing to filicide and characterises service availability for the prevention of and in response to filicide in South Africa. The study does not focus on neonaticide and infanticide; instead, it explores filicide affecting older children aged 2 to 17 years old, thus, the search was limited to this age group. The team searched databases which include, Sabinet, EBSCOHost Web, Google Scholar, PubMed, Lancet, Cochrane, Science Direct, Google for full text published articles. 'Grey' literature including government policies, institutional reports and presentations that are made available online were also reviewed. Literature review included scoping studies on filicide and prevention interventions in South Africa published since the adoption of the Children's Act No. 38 of 2005. The literature review identified services that are implemented internationally to foster family resilience during adversity such as judicial interventions, family mediation, screening for domestic violence, psychological assessments, mandatory hospitalisation, social welfare and child protection, the agencies that provide such services and their documented effectiveness in restoring affected families and preventing child harm including filicide.

The study used document review in the form of policy and programme documents and news reports to identify data analysed to gain understanding about the occurrence of filicide and institutional responses to it. Policy frameworks and programme documents for VAC prevention and response were reviewed and analysed. Through this process digital records on support services in South Africa that assist families with children during adversity, such as the Office of the Family Advocate, family mediation, family violence response units in police, social work, counselling and maternal and child health services were examined. The team used the following search terms to search for relevant literature:

child killings, child homicide, filicide, child murder, parental relationship breakdown, intimate partner violence, violence against children, family

violence, family adversity, parental violence, domestic violence, divorce, parental mental ill-health, mother, father, family mediation, counselling, families-oriented services, child protection, social services, health services, legal services, community programs

Finally, media reports in the form of online news reports, magazines, and social media platforms were reviewed to identify cases of filicide in the public domain for analysis which augments the literature and document review. Media reports by online news sources reporting about children killed by their parents and parent-figures in South Africa is used for characterisation of filicide cases reported between January 2010 and June 2022. A total of 44 online reports produced by various media houses (*IOL, News24, Review Observer, SowetanLive*) were identified. The reports covered incidents that were reported between 2005 and 2022. Document analysis is a systematic procedure for examining, organising and interpreting textual data to provide analysis to address the objectives. Content analysis which entails identifying meaningful and pertinent text and organising the information into categories related to the key study questions was conducted (Bowen, 2009)²³. This process identified dynamics that underlie filicide in South African communities in terms of the characteristics of the child/children, and perpetrator, the risk factors and contextual factors (where available) that the media reports captured through interviews or recording of official procedures led to the killing, and the immediate response interventions implemented.

3.2. DATA ANALYSIS

Data analysis involves the use of techniques such as familiarisation with data by reading literature, documents and media reports, and thereafter conducting preliminary coding using *a priori* codes or categories in filicide literature such as child characteristics, threats and risk factors, perpetrator characteristics, circumstances of filicide and mechanisms used for murder, services available for addressing identified threats and risk factors, missed opportunities for VAC and filicide prevention

²³ Bowen, G. A. (2009). Document analysis as a qualitative research method. *Qualitative Research Journal*, 9(2):27-40 doi:10.3316/QRJ0902027

interventions, effectiveness of intervention made available to families by multi-agencies, elements of response services and their effectiveness, and finally write up of summaries across different contexts.

3.3. HUMAN SECURITY PRINCIPLES AND PREVENTION OF FILICIDE

The human security approach was introduced to the international community through the UNDP *Human Development Report* (United Nations Development Programme (UNDP) 1994)²⁴ and consolidated by the University of British Columbia's 2005 *Human Security Report* as a fundamental shift from the narrow understanding of security concerned with eliminating threats to the nation-state to a broader human security perspective concerned with facilitating individual's freedom from fear. It is a perspective concerned with eliminating threats to the wellbeing of the entire society and the safety and security of vulnerable sectors in society including women and children, ensuring protection of human rights and access to the basic rights of survival and dignity (Periago, 2012)²⁵. The approach concentrates on the security of individuals, their survival, protection and empowerment. Human security entails "protecting people from critical (severe) and pervasive (widespread) threats and situations" (ibid, p.6). The human security approach is integrative and brings together the aspects of security, rights and development. It is conceptualised as an *inter-disciplinary* concept with the following five characteristics (Figure 1): *people-centred, context-specific, multisectoral, prevention-oriented and comprehensive*.

Figure 1 The integrative aspects of the human security approach



Source: United Nations Trust Fund for Human Security (2009).

²⁴ UNDP (1994) *Human Development Report 1994*. New York, UN

²⁵ Periago MR (2012) Human security and public health. *Pan American Journal of Public Health*, 31

Therefore, for the prevention of filicide, the human security approach will inform the development of approaches that are; people-centred meaning that they focus on improving local communities' self-reliance, prioritise social justice, and participatory decision-making. A comprehensive multi-sectoral approach to the prevention of filicide is critical for a concerted effort to address the multiple intersecting factors that contribute to filicide. Prevention oriented approaches requires that risk factors to filicide are identified, then strategies are put in place for early identification of risks and implementation of mitigation strategies.

STUDY FINDINGS

4. UNDERSTANDING THE FACTORS ASSOCIATED WITH FILICIDE IN SA

While filicides are committed globally, it is a rare event and that may render it difficult to predict (Campbell, Webster & Glass, 2009²⁶). Despite this characterization, such events are deeply shocking and provoke a sense of horror and outrage. The killing of one's own child or children shatters our fundamental expectations about what it means to be a parent and the idea of parental instincts as protectors for children. Not surprisingly, many of the cases analysed for this study are reported in the media as "inexplicable tragedies" leading those in the wider community and particularly, the families affected by these events, struggling to find an explanation (Brown et al, 2018)²⁷.

Filicide occurs under various circumstances which differ from those associated with child homicides due to child maltreatment (abuse and neglect), abandonment of very young children or infanticide. By contrast, filicide may not be associated with child abuse and may occur in the absence of a formal child protection report to child protection authorities. Mathews & Abrahams (2018)²⁸ argue that in South Africa a

²⁶ Campbell, J. C., Webster, D. W. & Glass, N. (2009) The Danger Assessment: Validation of a Lethality Risk Assessment Instrument for Intimate Partner Femicide. *Journal of Interpersonal Violence*, 24(4): 653-674
<https://doi.org/10.1177/0886260508317180>

²⁷ Brown T, Tyson D & Fernandez Arias P (2018) Filicide in Australia. In T Brown, D Tyson & P Fernandez Arias (Eds.) When parents kill children: Understanding filicide. *Palgrave Macmillan Cham*
https://doi.org/10.1007/978-3-319-63097-7_3

²⁸ Abrahams N & Mathews S (2018) Developing an understanding of filicide in South Africa. In T Brown, D

combination of factors including parental relationship breakdown are associated with parents committing filicide. The authors emphasise that it occurs in the context of high levels of violence, including IPV and VAC. This is confirmed by South African media reports that were analysed from 2010 to 2022.

In South Africa, this form of child killing by parents is always made visible by the media. Invariably, it is depicted as a tragedy that could not be predicted and prevented (Katz, 2013)²⁹, even when child death involves a history of child physical, emotional and sexual abuse or child neglect which may occur without evidence of intention to kill. The reports indicate that filicide happens in the various South African provinces and that mothers and fathers are equally capable of perpetrating filicide, and most incidents involve the killing of multiple children. The ages of children range from 2 to 16 years. Although most reports exclude the cause of filicide, the few that mention it highlight domestic violence, mental illness, VAC, and marital dissolution. The reports were categorised into two broad themes based on the perpetrator and possible reason for the killing – Paternal filicide (domestic violence, revenge) and ‘Mothers that kill’ (maternal psychosis). While paternal filicide is often associated with domestic violence, and revenge during marital dissolution or pending divorce, reasons for maternal filicide include possible psychosis but are often elusive and as such, often not mentioned in the report.

4.1. FILICIDE MOTIVATED BY DIVORCE AND SEPARATION

The characteristics of the murdered children’s families resemble the family structures common in South Africa and highlighted the fluidity of household membership. The children were likely to be co-parented by cohabiting parents or be living in a reconstituted family whereby one of the parents, usually the father was not the biological parent of one or more children. Couple discordance and recent relationship dissolution were some of the reasons perpetrators or non-offending parent identified as the circumstances that led to one of the parents murdering the children.

Tyson & P Fernandez Arias (Eds.) *When parents kill children: Understanding filicide* Palgrave Macmillan Cham https://doi.org/10.1007/978-3-319-63097-7_3

²⁹Katz C (2013) The narratives of abused children who have survived attempted filicide. *Child Abuse & Neglect*, 37(10) <https://doi.org/10.1016/j.chiabu.2013.04.015>

O'Hagan (2014b)³⁰ has analysed the killing of children in separation, divorce and custody disputes. In South Africa, this is evident in the various reports where filicide is reported to happen in the context of dissolution of romantic relationships or divorce and is suspected to take place as a form of revenge against the parent ending a relationship. For example, in a story headlined '*Free State man gets life in jail for killing 3-year-old son to spite the child's mom*'³¹, reported in March 2022, a 25-year-old man strangled his son to death after the child's mother ended their relationship. Following the killing, the man allegedly wrapped his body in plastic and hid him under a bed at his home. The man was later convicted and sentenced to life imprisonment. Also, in the Free State province a 29-year-old woman allegedly poisoned her five children and then committed suicide while her 6-month-old infant survived. In another incident in 2020 in Limpopo province, domestic violence and jealousy are reported as the possible underlying factors that led to the killings of four children – aged between 3 and 9 years – by a 52-year-old father. The report titled '*Man accused of killing his 4 children tells court he confronted wife with axe, knife the day before*'³² reveals that three of the children were found hacked to death with an axe, and the youngest one had her head bludgeoned with a huge stone. Similarly, in another report titled "*Mpumalanga mom details events leading up to murder of her four children*", a 24 year old mother killed her children with bread laced with rat poison. She informed the court during her trial that earlier on that day she had confronted her ex-partner and father of two of the children for not providing the children with Christmas gifts and the conflict escalated when she 'noticed' that there was a woman in his bedroom³³ In response to these killings, the media reports mentioned that the perpetrators were being prosecuted or had been sentenced to life imprisonment.

³⁰ O'Hagan K (2014) Filicide-suicide: The Killing of Children in the Context of Separation, Divorce and Custody Disputes. United Kingdom: *Palgrave Macmillan*

³¹ Khumalo Z, Free State man gets life in jail for killing 3-year-old son to spite the child's mom, *News24*, 23 March 2022. Accessed July 2022, <https://www.news24.com/news24/southafrica/news/free-state-man-gets-life-in-jail-for-killing-3-year-old-son-to-spite-the-childs-mom-20220323>

³² Molefe R, Man accused of killing his 4 children tells court he confronted wife with axe, knife the day before, *News24*, 30 April 2021. Accessed July 2022, <https://www.news24.com/news24/SouthAfrica/News/man-accused-of-killing-his-4-children-tells-court-he-confronted-wife-with-axe-knife-the-day-before-20210430>

³³ Dlulane B, Mpumalanga mom details events leading up to murder of her four children” 17 September 2019 <https://ewn.co.za/2019/09/17/mpumalanga-mom-details-events-leading-up-to-murder-of-her-4-children>

In Gauteng³⁴, the reasons for paternal filicide in which four children were poisoned by their father were unknown. Three of the children aged between 6 and 16 years died whilst one was in hospital fighting for his life. The involvement of the education sector is amplified in this report whereby the Gauteng Member of Executive Council visited the schools attended by the children and subsequently, counselling support was offered to the school children.

The reports showed that it was common for filicide to involve multiple siblings. While many incidents led to prosecution of the accused parents, there were some parents who committed suicide or killed their partners as well.

4.2. KILLING METHODS FOR MATERNAL AND PATERNAL FILICIDE

When contrasting the killing methods used by mothers and fathers, some important findings emerged. Those deaths resulting from impulsive violence or severe, persistent cruelty are almost exclusively perpetrated by fathers, while those with an apparent intent to kill the child or children (overt or covert filicide) are more likely to be perpetrated by mothers. For example, mothers killed their children with poison or drowning. The poison commonly used to kill children is pesticides/rodenticide and it is readily available from hawkers and vendors. Some paternal perpetrators had a history of violent crime including threats made to their victims, suggesting that violence and impulsivity were their prevalent characteristics (Sidebothem & Retzer 2019)³⁵. Fathers used blunt or sharp weapons that caused fatal injuries and they may kill the children away from home. It was striking that in nearly all perpetrated filicides, the victims were all children in the family and in a few cases the perpetrator killed an only child. More mothers than fathers committed or attempted suicide at the same time. Many reports involved multiple deaths with the highest number of murdered children at four. In addition, many mothers had underlying mental illness, and some of them were victims of domestic violence.

³⁴ Monama T, 'He is apologising': Family says dad didn't know what he was doing when he spiked kids' drink, *News24*, 27 May 2022. Accessed July 2022, <https://www.news24.com/news24/southafrica/news/he-is-apologising-family-says-dad-didnt-know-what-he-was-doing-when-he-spiked-kids-drink-20220527>

³⁵ Sidebothem P & Retzer A (2019) Maternal Filicide in Cohort of English Serious Case Reviews. *Archives of Women's Mental Health*, 22(1): 139-149 <https://doi.org/10.1007/s00737-018-0820-7>

4.3. RESPONSES TO INCIDENTS OF FILICIDE: SHOCK, GRIEF, AND INSTITUTIONAL INVOLVEMENT

Availability of preventive multi-sectoral services

there is a knowledge gap in the provision of services to parents and caregivers in response to severe VAC outcomes and if comparable services could be available for prevention as well

Media reports reveal that family and community members experience severe distress following such killings as reported below:

“... a neighbour who saw the three younger children being discovered in their home, said they were still shocked by the tragedy (Neighbour of Durban father).³⁶

“We are torn apart, to be honest. We are damaged inside, when it’s an elder going we accept easily. But now it’s too much because she’s one year eight months. She still needs our care; she still needs the mother’s care. We did not expect this to happen, especially when we see this on tv, hear on the radio we did not expect that one day it will come to our family,” (Aunt of a toddler killed by a father – Free State province)³⁷.

Immediate responses to these incidents were police investigations and involvement of the provincial Department of Education whereby teachers and school children received counselling support. The suffering endured by family members and neighbours in the communities where children are killed can be mitigated by services provided by the state, civil society and faith-based organisations. Such services should not be once-off encounters; the affected people need to be monitored and supported over medium and long-term period using effective interventions that promote social cohesion. More importantly, professionals and advocacy groups that provide protective services for families need to create awareness of their services and establish ways of ensuring equitable access to these services across South Africa.

These few examples demonstrate the seriousness of filicide and the lack of preparedness by state institutions and social partners to prevent it. Following each

³⁶ Ngema, T. 2019 <https://www.iol.co.za/dailynews/news/kwazulu-natal/durban-dad-accused-of-hanging-his-four-children-arrested-while-trying-to-kill-himself-31881649>

³⁷ Moeti, P. 2020 <https://www.sabcnews.com/sabcnews/free-state-family-in-shock-following-20-month-olds-brutal-murder/>

incident, police, government officials, families, communities experience the shock wave that characterises such incidents. In the absence of interventions to prevent such incidents it means that there are children who fall through the cracks and the persistence of filicide due to the absence of preventive interventions constitutes injustice to vulnerable children. The literature has identified family adversity and circumstances that tend to be referred to in the aftermath of filicide, however, such inferences are usually made without identifying the social institutions responsible for implementing interventions that would otherwise mitigate circumstances associated with parental lethal actions. Intervention based on the knowledge that parents usually kill older children, neonates and infants under different circumstances will benefit legislative and policy thinking in ways that safeguard children's lives. Creating awareness among communities and facilitating community participation are some options that future empirical research and implementation science should consider.

In addition, maternal mental illness has been associated with filicide (Moodley, Subramaney, & Hoffman 2019)³⁸. Suicidality, psychosis and depression elevate risk, as does a history of child abuse. Mentally ill filicidal mothers have very different risk profiles than mothers who fatally batter their children. Prevention then becomes a challenge because of the various risk factors, such as maternal depression and social disadvantage, which are common among non-filicidal mothers (Frieman & Resnick, 2007)³⁹. Dekel, Andipatin and Abrahams (2020)⁴⁰ argue that mental illness experienced by patients who commit filicide is triggered through experiencing trauma which resulted from their lack of resources. Trauma is also understood to be interrelated between the individual, family and social levels and therefore, interventions need to work within those components in order to prevent the transmission of violence. Whilst maternal psychosis may have been suggested as a possible reason for committing filicide in the media reports, it nonetheless was

³⁸ Moodley S, Subramaney U & Hoffman D (2019) A Qualitative Study of Mentally Ill Women Who Commit Filicide in Gauteng, South Africa. *Frontiers in psychiatry*, 10: 757 <http://doi.org/10.3389/fpsy.2019.00757>

³⁹ Hatters Friedman S & Resnick PJ (2007). Child Murder by Mothers: Patterns and Prevention. *World Psychiatry*, 6(1): 137-141. PMID: 18188430; PMCID: PMC2174580.

⁴⁰ Dekel B, Andipatin M & Abrahams N. (2020). Exploring adversities among parents convicted of killing their children. *PLoS ONE* 15(7): e0235812. <https://doi.org/10.1371/journal.pone.0235812>

inconclusive as it is often reported as being under investigation as part of judicial procedures.

5. Critical Review Of Policy Frameworks: Gaps And Missed Opportunities

South Africa is signatory to various international, regional and national treaties aimed at child protection, yet child homicides as a cause of child deaths have not received policy focus and there are no strategic plans or initiatives implemented to reduce their occurrence. Filicide refers to the phenomenon where one or more child is killed by a parent, stepparent, or guardian – it is a specific form of child homicide with unique perpetrators. Unsurprisingly, in the public domain, the common interventions tend to bolster the view that child killing by parents is an unpredictable tragedy that befalls families and communities, which portrays response to such killings through conventional criminal justice processes, forensic psychiatric and psychosocial assessments as inevitable. Although it is an uncommon occurrence, filicide continues to affect many children in South African families and communities and this situation undermines children's human rights and security. This study has reviewed international and South African literature as well as legislative and policy frameworks and other accountability processes to assess the adequacy of the state and social responses to the problem of children killed by parents.

South Africa is a signatory of several international policy frameworks that oblige the government to promote and protect the lives of children. They include the following statutes:

- The UN Convention on the Rights of the Child 1989
- African Charter on the Rights and Welfare of the Child 1990
- The South African Constitution of 1996
- The Children's Act 38 of 2005
- Prevention of Family Violence Act of 1999
- The National Strategic Plan on Gender Based Violence and Femicide 2019
- The National Child Care and Protection Plan 2019
- Mediation in Certain Divorce Matters Act (No. 24 of 1987)
- The Dangerous Weapons Act (No. 15 of 2013)

- The Hazardous Substances Act (No. 15 of 1973)
- Social Assistance Act (No. 13 of 2004)
- Births and Deaths Registration Act (No. 52 of 1992)
- Domestic Violence Act (No. 116 of 1998)
- The Domestic Violence Act (No. 14 of 2021)
- Maintenance Act (No. 99 of 1998)
- Marriages Act (No. 25 of 1961) and Recognition of Customary Marriages Act (No. 120 of 1998)

The following analysis of child protection, family, environmental safety and domestic violence legislation and policies explores the possible missed opportunities (and silences) in the legislative framework including in administrative processes which could potentially be used to effectively prevent filicide. This depends on institutional mechanisms and practices, data processing mechanisms and reporting that are sensitive to filicide as well as a coordinated strategy that includes community participation.

5.1. REVIEW OF CHILD PROTECTION, FAMILY, DOMESTIC VIOLENCE AND PUBLIC HEALTH LEGISLATION

South Africa has a plethora of legislative and policy framework for the protection of children from harm including fatal harm. These frameworks are located across different sectors and regulate conduct of professionals working in different disciplines including child protection, family law, criminal law, domestic violence and public health. In a society that experiences high rates of violence against women and children, and high levels of child murder, the lack of focus on parents as perpetrators of child death jeopardises development of interventions for the prevention of and response to filicide. Currently, international and national agencies with a mandate to monitor homicides (for example, the UN Office for Drugs and Crime and police) do not disaggregate data to isolate this phenomenon or provide solutions to this problem. As Mathews & Abrahams (2018)⁴¹ indicate, South African policy and administrative data practices do

⁴¹ Abrahams N & Mathews S (2018) Developing an understanding of filicide in South Africa. In T Brown, D Tyson & P Fernandez Arias (Eds.) *When parents kill children: Understanding filicide* Palgrave Macmillan Cham https://doi.org/10.1007/978-3-319-63097-7_3

not recognise filicide as a distinct category of child deaths and children's death reports are not always linked to perpetrators. The National Child Care and Protection Policy (DSD 2019)⁴², being the most recently developed policy for child wellbeing also does not address this phenomenon.

The role of parents and caregivers in the prevention of VAC is acknowledged by the several international and domestic policy, legislative frameworks and initiatives to end VAC. They include the UN Convention on the Rights of the Child, the African Charter on the Rights of the Child, and the Sustainable Development Goals (SDGs) relating to violence prevention. The Constitution of South Africa (Article 28) and the Children's Act (Act No. 38 of 2005) protect children's suffering from deliberate harmful acts. The Children's Amendment Act No.41 of 2007 provides for additional pillars of the child protection system envisaged to provide a multi-sectoral system of services at provincial level. Among the intensions of the Children's Act, are to provide for prevention and early intervention in addition to response services. But there has been a delay in the development of 'a comprehensive inter-sectoral strategy aimed at securing a properly resourced, coordinated, and managed national child protection system' with this instrument only to be developed in 2022.

Prior child abuse and maltreatment is also a risk factor for filicide. As such, mandatory reporting laws for child abuse, such as the promulgation of amendment 41 of 2007 to the Children's Act of 2005, can be useful to bring attention to potential cases before fatal child maltreatment can occur (Hendricks 2014)⁴³. However, such legislation, while seemingly important in theory, often fails in practice due to noncompliance by professionals, as well as inadequate assistance by police and social workers due to lack of resources. In 2022 the World Health Organisation published guidelines for healthcare professionals' responsibilities in eliminating violence against children.

⁴² DSD (2019) *The National Child Care and Protection Policy: Working together to advance the rights of all children to care and protection*. South Africa: DSD

⁴³ Hendricks ML (2014) Mandatory reporting of child abuse in South Africa: Legislation explored. *South African Medical Journal*, 104(8): 550. <https://doi.org/10.7196/samj.8110>

As part of the Children's Act of 2005, the Department of Social Development subsidizes non-profit organisations (NPO) to provide child protective services. However, these organisations lack funding and are heavily overwhelmed by high caseloads, leaving them unable to fix structural issues or institute preventative measures related to child protection (Strydom et al. 2020)⁴⁴. In addition, Child Protection Registers are not functional in many areas of the country, and clarity on who carries the responsibility of its organisation and maintenance is nonexistent (Richter & Dawes 2008)⁴⁵. Despite the constitutional and legislative protection provided to children's rights, the follow through is severely lacking. After children's deaths resulting from abuse, police investigations have been shown to be incomplete and incorrect. Police figures relating to child rape are unreliable, studies showing that in 2005, 82% of police rape reports did not include the age of the victim (Richter & Dawes 2008)⁴⁶. It is also shown that even the limited capacity of social services is steered toward investigation, rather than family support (Richter & Dawes 2008)⁴⁷. This focus on reactionary rather than preventive services stagnates and may even exacerbate the high rates of child abuse, both fatal and nonfatal. Dawes and colleagues developed a framework for children's rights monitoring that aims to collect indicators at the child, family, and community levels (Richter & Dawes 2008)⁴⁸. Such a framework has been indicated by prior literature to be useful for responding to and preventing child abuse (Richter & Dawes, 2008)⁴⁹. It is important to note, however, that risk factors for child abuse and filicide are currently indistinguishable. Additional research is critical to identify the contextual variables and risk factors distinguishing fatal and nonfatal child abuse. Equally, South Africa will benefit from research that provides understanding about filicide including its characterization in a country that

⁴⁴ Strydom M, Schiller U & Orme J (2020) The current landscape of Child Protection Services in South Africa: A systematic review. *Social Work*, 56(4) <https://doi.org/10.15270/56-4-881>

⁴⁵ Richter LM & Dawes AR (2008) Child abuse in South Africa: Rights and wrongs. *Child Abuse Review*, 17(2): 79–93. <https://doi.org/10.1002/car.1004>

⁴⁶ Richter LM & Dawes AR (2008) Child abuse in South Africa: Rights and wrongs. *Child Abuse Review*, 17(2): 79–93. <https://doi.org/10.1002/car.1004>

⁴⁷ Richter LM & Dawes AR (2008) Child abuse in South Africa: Rights and wrongs. *Child Abuse Review*, 17(2): 79–93. <https://doi.org/10.1002/car.1004>

⁴⁸ Richter LM & Dawes AR (2008) Child abuse in South Africa: Rights and wrongs. *Child Abuse Review*, 17(2): 79–93. <https://doi.org/10.1002/car.1004>

⁴⁹ Richter LM & Dawes AR (2008) Child abuse in South Africa: Rights and wrongs. *Child Abuse Review*, 17(2): 79–93. <https://doi.org/10.1002/car.1004>

may lack services for families, have an inadequate regulatory framework and lack enforcement of child protection and public health laws.

The structure and composition of families in South Africa provide varied contexts and living arrangements for children. Marriage is no longer common (Mohlabane, Gumede & Mokomane 2019)⁵⁰, divorce and remarriage are common, and adoption is sanctioned by the law giving children an opportunity to be provided with care within the family environment. Unfortunately, in some situations, children become entangled in unstable and hostile relationships between their parents. When parental discordance escalates to resentment, hopelessness, mental breakdown, and violence, children can be affected in profound ways, including suffering death. According to the Domestic Violence Act (No. 116 of 1998 as amended), it is a crime to 'expose a child to domestic violence'; meaning to intentionally cause a child to— (a) see or hear domestic violence; or (b) experience the effects of domestic violence. With the amendment, first instance report of domestic violence that include people in various relationships with a complainant can be an offence or lead to actions such as monitoring of domestic violence by South African Police Service (SAPS) officers (previously, the initial offence would be a breach of the protection order of contempt of court and not for an act of domestic violence itself (South African Law Reform Commission (SALRC), (SAPS n.d.)⁵¹.

Although the South African family law continues to evolve, these family dynamics and their possible consequences for the welfare and survival of children tend to be overlooked in family law implementation processes including in processes conducted by customary marriage systems. Where dissolution of a parental relationship is inevitable, these processes tend to be adult-focused with emphasis on children only mode in relation to their economic dependent status and maintenance of parent-child relationship. In other words, the possibility of children being victims of hostility and violence between parents is rarely considered by families and the judicial system. But

⁵⁰ Mohlabane N, Gumede N & Mokomane Z (2019) Attitudes towards marriage in post-apartheid South Africa. In: Z Mokomane, J Struwig, B Roberts & S Gordon (eds). *South African Social Attitudes: family matters: family cohesion, values and strengthening to promote wellbeing*. Cape Town: HSRC Press
<http://hdl.handle.net/20.500.11910/14808>

⁵¹ SAPS (n.d.) Applying for protection order. Pretoria: SAPS
https://www.saps.gov.za/services/protection_order.php

the literature identifies parental mental ill-health and family life crisis especially relationship dissolution as important contributory factors (Moodley, Subramaney & Hoffman, 2019)⁵². However, scholars have cautioned that analysis that “pathologises” filicide and relies on individuals’ life experiences is inadequate (Mathews & Abrahams; 2017⁵³; Mathews & Abrahams, 2018⁵⁴; Dekel, Abrahams & Andipatin, 2019⁵⁵).

Analysis of the legislative and policy framework is important because these frameworks are part of the broader contextual factors that expose children to intended fatal harm perpetrated by parents and caregivers. In this regard, some of the laws that regulate the family institution, the welfare of children and exposure of children to hazardous materials within the home are relevant and they include the following: Mediation in Certain Divorce Matters Act (No. 24 of 1987 as amended by Mediation in Certain Divorce Matters Amendment Act 121 of 1991); Social Assistance Act (No. 13 of 2004); the Dangerous Weapons Act (No. 15 of 2013); and the Hazardous Substances Act (No. 15 of 1973).

The Mediation in Certain Divorce Matters Act safeguards the interests of minor and dependent children in case of marriage dissolution. Under certain circumstances a family advocate provides reports and recommendations on matters that the court need to consideration during the divorce action in order to guarantee the welfare of the children affected by the divorce action. Such matters may include custody, maintenance order, guardianship, and access to a child. In this way, an enquiry instituted by a family advocate can provide information about the family which may inform the court about risk factors that affect the children, and which may be contained in child protection social worker or police reports. However, it is unclear if the children

⁵² Moodley S, Subramaney U & Hoffman D (2019) A Qualitative Study of Mentally Ill Women Who Commit Filicide in Gauteng, South Africa. *Frontiers in psychiatry*, 10: 757

⁵³ Mathews S & Abrahams N (2017).

⁵⁴ Abrahams N & Mathews S (2018) Developing an understanding of filicide in South Africa. In T Brown, D Tyson & P Fernandez Arias (Eds.) *When parents kill children: Understanding filicide* Palgrave Macmillan Cham https://doi.org/10.1007/978-3-319-63097-7_3

⁵⁵ Dekel B, Abrahams N, & Andipatin M (2019) Exploring the Intersection Between Violence Against Women and Children from the Perspective of Parents Convicted of Child Homicide. *Journal of Family Violence*, 34: 9–20 <https://doi.org/10.1007/s10896-018-9964-5>

whose parents do not institute a divorce action have access to safeguarding mechanisms like those prescribed under the Mediation in Certain Divorce Matters Act. There are several family mediation practitioners whose services could also mitigate the tensions that often disadvantage children during family dissolution. However, the families that need such services but cannot have access to them may lack the critical support provided through these services. Men and women may have different reasons for needing interventions such as family mediation where children are involved, but these may be some of the factors that motivate either of them to commit filicide.

Clearly family circumstances and parental factors are relevant to consider whenever children's safety is a concern. Parents may suffer severe mental health strain when their families experience adverse circumstances such as relationship dissolution or divorce. Under these circumstances, it becomes crucial to consider the safety of the environment in which children live. Although the mental health care policies provide several options for people suffering from mental illness to voluntarily access professional care, treatment and rehabilitation services (Mental Health Care Act No. 17 of 2002) some parents suffering from mental health disorders tend to be diagnosed in forensic psychiatric services as part of the assessments conducted under the Criminal Procedure Act (Szabo & Kaliski, 2017)⁵⁶ to determine the accused person's criminal liability (Criminal Procedure Act (No. 51 of 1977 as amended) is and initiation of treatment remain a challenge for the health sector.

It is difficult even for non-health professionals to initiate counselling and institute enquiries if families do not have access to their practice settings. Currently screening procedures are not institutionalised as part of norms and standards in social and health services. In the mainstream provision of services, whether by the police, social workers or judicial officials, practitioners and officials would ideally focus risk assessments for children when there is a history of interpersonal violence. In this case the history of violence is likely to prompt the enquiry to include questions about possession of or access to a lethal weapon such as a gun. However, officials fail to confiscate hazardous materials and dangerous weapons that are commonly used to kill children before they are used to harm children. In fact, such weapons are only found by family or community members in the aftermath of filicide or by the police

⁵⁶ Szabo, C. P. & Kaliski, S. Z. (2017) Mental health and the law: a South African perspective. *BJPsych International*, 14(3):68-70

during criminal investigation. For example, *“Mom accused of bludgeoning her 4 kids to death with a hammer may not be fit to stand trial, says NPA”* is a case of a woman in the Eastern Cape province who was accused of killing her children using a four-pound sledgehammer in their sleep. The prosecutors proposed that she would undergo mental health assessment to determine her fitness to go through trial. She died later in hospital under police custody.

There are several possible reasons for failing to confiscate hazardous materials and dangerous weapons used for killing children. They include inadequate information systems in place which lead to a lack of data on mechanisms used to kill children. Also, parents do not commonly use guns to commit filicide – they used random objects, poisoning and other mechanisms. In Ballito⁵⁷, KwaZulu-Natal province, another incident involved a 45-year-old mother who drowned her four-year-old child in a bucket full of water – because he was allegedly ‘difficult’ thereafter she attempted suicide. A professional man from Limpopo province accused of killing his 4 children who told the court that he confronted wife with axe and knife the day before and also revealed that three of his children he was accused of killing were hacked to death with an axe, and the youngest one had her head bludgeoned with a huge stone’. Additionally, a report on “Durban dad accused of hanging his four children arrested while trying to kill himself” showed that a father hanged four children with their belts and a neck tie.

The implementation of child protection laws is realised through multisectoral approaches involving the welfare, health, education, security and migration domains. A better coordination of response to children’s wellbeing and safety that emphasises primary prevention and includes sharing of data from emergency/casualty services for children could inform professionals and authorities about the threats to children’s health and survival because of violence in the home. One such mechanism is overt poisoning of children using pesticides and other toxins.

Acute poisoning of children due to exposure to harmful substances in the home and overt childhood poisoning from pesticides is a common medical problem in South Africa leading to hospitalisation but there is lack of information on its contribution to severe child illness and death (Balme, Roberts, Glasstone, Curling & Mann, 2010;

⁵⁷ Wicks J & Pijoos I, Ballito mom tied up and drowned her 'difficult' child, 4, then tried to kill herself – police, *News24*, 28 April 2022. Accessed July 2022, <https://www.news24.com/news24/southafrica/news/ballito-mom-tied-up-and-drowned-her-difficult-child-4-then-tried-to-kill-herself-police-20220428>

2012)⁵⁸⁻⁵⁹. There is lack of evidence on how the laws for regulating dangerous objects and hazardous material: the Dangerous Weapons Act (No. 15 of 2013) and the Hazardous Substances Act (No. 15 of 1973), respectively are implemented to avoid overt child deaths. The challenge of how to distinguish illegal use of such objects and substances in environments where they are part of day-to-day life and are easily accessible, lies with a fragmented regulatory framework and a limited worldview of factors that should be coordinated in various efforts intended to promote children's wellbeing even when their families face existential challenges.

The reports also highlight that incidents of filicide are pervasive and the urgency of developing interventions to prevent it cannot be overlooked. Practitioners' and officials' understanding of the complexity of the agents and mechanisms used by parents who kill their children is paramount to making practical predictions of risk and intervening timeously to prevent the tragedies affecting children and families.

5.2. REVIEW OF THE NATIONAL STRATEGIC PLAN ON GENDER-BASED VIOLENCE AND FEMICIDE (NSPGBVF)⁶⁰

In order to establish a cogent strategic framework to direct the national response to the GBVF crisis that South Africa is currently experiencing, the NSPGBVF was developed. This plan was inspired by a march that was led by South African women of all backgrounds demanding government's commitment to addressing GBVF under the hashtag #TheTotalShutdown. Subsequently, this culminated into the first GBVF Presidential Summit in November 2018 where activists, policy makers, researchers and survivors of GBV were in attendance. The NSP on GBV is a multi-sectoral strategic plan which aims to prevent and eliminate GBVF, but the plan is silent on the prevention of VAC – including filicide, yet the intersections of VAW and VAC are known. The strategic plan focuses on addressing GBVF holistically and strategically, with a particular emphasis on violence against all women (across age, physical

⁵⁸ Balme, K. H., Roberts, J. C. Glasstone, M., Curling, L., Rother, H., Leslie, L., Zar, H. & Mann, M. (2010) Pesticide poisoning at a tertiary children's hospital in South Africa: An increasing problem. *Clinical Toxicology*, **48**, 928-934 Doi: 10.3109/15563650.2010.534482.

⁵⁹ Balme, K. H., Roberts, J. C. Glasstone, M., Curling, L. & Mann, M. D. (2012) The changing trends of childhood poisoning at a tertiary children's hospital in South Africa. *South African Medical Journal*, **102**(3):142-6 Doi:10.7196/samj.5149

⁶⁰ DJCD (2020) National Strategic Plan on Gender-Based Violence and Femicide (NSPGBVF). Pretoria: DJCD

location, disability, sexual orientation, sexual and gender identity, gender expression, nationality, and other diversities). The national strategic plan set out 6 key pillars to achieve its goals and mission which are,

Pillar 1: Accountability, Coordination and Leadership

Pillar 2: Prevention and Rebuilding Social Cohesion

Pillar 3: Protection, Safety and Justice

Pillar 4: Response, Care, Support and Healing

Pillar 5: Economic Power

Pillar 6: Research and Information Systems

While the state is committed to eliminating GBVF in communities, there remains a gap in the NSPGBVF with regard to addressing filicide. This brings into question the extent to which it is comprehensive and holistic, given its silence on filicide as a form of VAC. The plan is created with the overarching goal of addressing VAW and it disproportionately focuses on women in their diversity, ignoring the various forms of VAC, including filicide. There is an urgent need to recognise the intersection between VAW and VAC as well as its reflection in policies and interventions aimed at eliminating violence perpetrated against women and other minorities as well as children in the home. Further, policies and legal frameworks ought to distinguish the various types VAW as well as VAC so that filicide is made priority alongside other forms of VAC.

Thus, the NSPGBVF requires an overhaul to address several shortcomings in relation to VAC, including filicide which finds its expression in women's behaviour towards children through the same mechanisms of power, control and ownership (Dekel, Abrahams & Andipatin, 2019⁶¹; Namy, Carlson, O'Hara et al 2017⁶²). The plan should consider strategies that focus on the establishment of private and public partnerships to aid the early identification of risk factors as well as facilitate development and

⁶¹ Dekel B, Abrahams N, & Andipatin M (2019) Exploring the Intersection Between Violence Against Women and Children from the Perspective of Parents Convicted of Child Homicide. *Journal of Family Violence*, 34: 9–20 <https://doi.org/10.1007/s10896-018-9964-5>

⁶² Namy S et al. (2017) Towards a feminist understanding of intersecting violence against women and children in the family, *Social Science & Medicine*, 184 <https://doi.org/10.1016/j.socscimed.2017.04.042>.

implementation of effective preventive measures within family and home settings because these are the key sites wherein filicide takes place.

6. CRITICAL REVIEW OF EXISTING SERVICES: MISSED OPPORTUNITIES FOR PREVENTING FILICIDE

6.1. REVIEWING CHILD PROTECTION AND SOCIAL SERVICES: FAMILY ADVOCATES AND MEDIATION

The Children's Act 38 of 2005, proposes that biological parents of a child seek mediation through a family advocate, social worker or any other qualified social services professional should disputes arise, and if there is conflict over parental rights and responsibilities, a parenting plan should be sought through means of mediation before going the legal route. Various family mediation organisations exist in South Africa that are accredited by the National Accreditation Board for Family Mediators (NABFAM), such as South African Association of Mediators (SAAM), Family Mediators Association of the Cape (FAMAC), the Social Justice Foundation, Families South Africa (FAMSA), Family Life Centre and Kwa-Zulu Natal Association of Family Mediators (KAFAM) (IFM n.d.)⁶³

Legal support is also available for family mediation and child protection purposes, such as Legal Aid South Africa which provides legal services for those who cannot afford their own. The Office of the Family Advocate which is located in the Department of Justice and Constitutional Development (DoJCD) provides an alternative option, a cost-effective service whereby the appointed officer is not a legal representative, although if disputes between the involved parties cannot be settled, the officer may make recommendations to the Court which are in the best interests of the child.

The Department of Social Development (DSD) gives support and funding to various organisations, including those that focus on gender and issues pertaining to children

⁶³ IFM (International Family Mediation) (n.d.) *South Africa*. Accessed July 2022, https://www.ifm-mfi.org/en/south_africa

(IFM, n.d.)⁶⁴. The work of the department does not stop there, on the 26th of March 2021, a webinar (DSD 2021)⁶⁵ on child killings, abuse and rape was co-hosted with UNICEF and other stakeholders. Minister of Social Development highlighted how the COVID-19 pandemic exacerbated the living conditions of children and families who were already vulnerable, creating an environment where neglect, physical and emotional abuse could thrive (DSD, 2021)⁶⁶.

Other organisations that offer legal services for the poor and marginalised include ProBono.Org, Lawyers of Human Rights (LHR), the Legal Resource Centre (LRC) and Home-Start South Africa which provide 'home-visiting and practical assistance to young families experiencing difficulties' (IMF, n.d.)⁶⁷. Child Welfare bodies and organisations such as Child Welfare South Africa (CWSA), SOS Children's Villages in South Africa, Save the Children South Africa, Ububele and The Refugee Children's Project also advocate for the protection of children's rights through various means. Ububele, for example, offers mental health training programmes for children under 7 years and their caregivers. SOS Children's Villages has established community social centres that provide a safe environment for children to grow and develop themselves (IFM, n.d.)⁶⁸.

⁶⁴ IFM (International Family Mediation) (n.d.) South Africa. Accessed July 2022, https://www.ifm-mfi.org/en/south_africa

⁶⁵ DSD (2021) Media Advisory Minister Zulu To Host A National Roundtable Webinar On Child Killings, Abuse And Rape In Partnership With Unicef. Accessed July 2022, <https://www.dsd.gov.za/index.php/21-latest-news/339-media-advisory-minister-zulu-to-host-a-national-roundtable-webinar-on-child-killings-abuse-and-rape-in-partnership-with-unicef?highlight=WyJJaGlsZCIsImtpbGxpbmdzLiwY2hpbGQga2lsbGluZ3MiXQ==>

⁶⁶ DSD (Department Of Social Development). (2021) *Media Advisory Minister Zulu To Host A National Roundtable Webinar On Child Killings, Abuse And Rape In Partnership With Unicef*. Accessed July 2022, <https://www.dsd.gov.za/index.php/21-latest-news/339-media-advisory-minister-zulu-to-host-a-national-roundtable-webinar-on-child-killings-abuse-and-rape-in-partnership-with-unicef?highlight=WyJJaGlsZCIsImtpbGxpbmdzLiwY2hpbGQga2lsbGluZ3MiXQ==>

⁶⁷ IFM (International Family Mediation) (n.d.) South Africa. Accessed July 2022, https://www.ifm-mfi.org/en/south_africa

⁶⁸ IFM (International Family Mediation) (n.d.) South Africa. Accessed July 2022, https://www.ifm-mfi.org/en/south_africa

6.2. THE ROLE OF HEALTH SERVICES: MISSED OPPORTUNITIES FOR THE RESPONSE AND PREVENTION OF FILICIDE

Within the context of maternal filicide, a mother's motive for filicide may be altruistic, acute psychosis, or it may be due to fatal maltreatment, unwanted child, or spousal revenge (Frieman & Resnick, 2007)⁶⁹. In addition, many mothers who do not attempt filicide, experience thoughts of harming their child. If the thought process and reasoning behind filicide can be understood, then it can provide a framework of prevention. Suicidality, psychosis and depression elevate risk, as does a history of child abuse. Mentally ill filicidal mothers have very different risk profiles than mothers who fatally batter their children. Prevention then becomes a challenge because of the various risk factors, such as maternal depression and social disadvantage, are common among non-filicidal mothers (Frieman & Resnick, 2007)⁷⁰.

Moodley et al., (2019)⁷¹ highlight that services for mentally ill women who commit filicide in South Africa are lacking. A study amongst mentally ill women who committed filicide in South Africa showed that after psychosis, access to resources such as occupational and industrial therapy, supportive nursing staff and doctors, and psychotherapy were essential towards women's recovery, yet it was inaccessible in most cases (Moodley et al., 2019)⁷². While this study focused on the aftermath of filicide, it is likely that access to similar therapies would be beneficial to women showing risk factors towards filicide before they are able to commit the act. Further, Mathews and Abrahams, (2018)⁷³ indicate that community mental health services should be integrated into prenatal and postnatal services to assess risk and report concerns to the appropriate authorities if necessary.

⁶⁹ Hatters Friedman S, Resnick PJ (2007) Child murder by mothers: patterns and prevention. *World Psychiatry*, 6(3): 137-41

⁷⁰ Hatters Friedman S & Resnick PJ (2007) Child murder by mothers: patterns and prevention. *World Psychiatry*, 6(3): 137-41

⁷¹ Moodley S, Subramaney U & Hoffman D (2019) A Qualitative Study of Mentally Ill Women Who Commit Filicide in Gauteng, South Africa. *Frontiers in psychiatry*, 10: 757

⁷² Moodley S, Subramaney U & Hoffman D (2019) A Qualitative Study of Mentally Ill Women Who Commit Filicide in Gauteng, South Africa. *Frontiers in psychiatry*, 10: 757

⁷³ Abrahams N & Mathews S (2018) Developing an understanding of filicide in South Africa. In T Brown, D Tyson & P Fernandez Arias (Eds.) *When parents kill children: Understanding filicide*. Palgrave Macmillan Cham https://doi.org/10.1007/978-3-319-63097-7_3

Dekel, Andipatin and Abrahams (2020) argue that the mental illness experienced by patients who commit filicide may be triggered by the experience of acute trauma because of the lack of resources. In other words, acute psychosis can be triggered by stressful events linked to deprivation. In most cases, this may lead to parents committing filicide. Trauma is also understood to be interrelated between the individual, family, and social levels and therefore interventions need to work within these components in order to prevent the transition of violence.

Parent-child bonds when growing up set the tone for bonds and attachments as adults. Those with traumatic parent-child experiences in the form of absent parents, neglect and abuse have been found to develop unhealthy attachments (Dekel, Abrahams & Andipatin, 2018)⁷⁴. The risk factors which have been identified as linked to violence and parental stressors include unemployment, financial strain and substance abuse, which lead to the killing of children. Moreover, it is said that adults would have modeled such behaviors as children and that then keeps the cycle in motion for generations (Malherbe & Häefele, 2017)⁷⁵. A method of prevention would therefore be to develop strategies that strengthen current parenting practices which will reduce children's vulnerabilities and better the relationships between parents and children. This will reduce future parents' experiences of trauma and thus, reduce the killing of children (Dekel, Abrahams & Andipatin, 2018)⁷⁶.

Mothers or father may also be victims in what is called 'familicide'. This is the combined killing of the child, the intimate partner and possibly followed by the perpetrator committing suicide. This is notably linked to psychological instability and more so depression, especially if the suicide follows the familicide. Social and healthcare

⁷⁴ Dekel B, Abrahams N, Andipatin M. (2018). Exploring adverse parent-child relationships from the perspective of convicted child murderers: A South African Qualitative Study. PLoS ONE 13(5): e0196772. <https://doi.org/10.1371/journal.pone.0196772>

⁷⁵ Malherbe C & Häefele BW (2017) Filicide in South Africa: a criminological assessment of violence in the family. *Child abuse research in South Africa*, 18(1) <https://doi.org/10.10520/EJC-77e03452b>

⁷⁶ Dekel B, Abrahams N, & Andipatin M (2019) Exploring the Intersection Between Violence Against Women and Children from the Perspective of Parents Convicted of Child Homicide. *Journal of Family Violence*, 34: 9–20 <https://doi.org/10.1007/s10896-018-9964-5>

professionals should be sensitive to emerging family problems especially when depression and other forms of mental illness seem present (Aho, Remahl & Paavilainen, 2017)⁷⁷.

6.3. VAW-VAC intersection: Missed opportunities for integrated response services

Older filicides, past the age of one year, are often associated with domestic violence. In such situations, paternal filicide is more common. In 2021⁷⁸, a report published by the Committee on the Elimination of Discrimination against Women (CEDAW) noted that domestic violence in South Africa is alarmingly high. Those who report their abuser do not receive the necessary protection from police, and the absence of State-run shelters for women and their children highlight delegation of responsibility to NGOs without adequate funding (CEDAW 2021)⁷⁹. Even when cases of domestic violence are reported and investigated, there are currently no risk assessment tools for predicting situations where children are at a higher risk for lethality (Jaffe et al. 2014)⁸⁰.

Similar to fatal and nonfatal child abuse, the warning signs for adult and child homicides are highly similar within the context of domestic violence. As such, there is a need for close coordination between family and criminal courts to ensure that a safety plan is in place both for victims of domestic violence and the children in such situations (Jaffe et al 2014)⁸¹. The rights of children to education, shelter, health and freedom from maltreatment, including filicide, are enshrined in the South African Constitution. It is critical that beyond legislation, the actions of integration of mental

⁷⁷ Aho, A. L., Remahl, A., & Paavilainen, E. (2017). Homicide in the western family and background factors of a perpetrator. *Scandinavian journal of public health*, 45(5), 555-568.

⁷⁸ UNHRC (2021) South Africa: Failure to tackle domestic violence a violation of women's rights – UN experts. New York: UN

⁷⁹ UNHRC (2021) South Africa: Failure to tackle domestic violence a violation of women's rights – UN experts. New York: UN

⁸⁰ Jaffe et al. (2014) Paternal filicide in the context of domestic violence: Challenges in risk assessment and risk management for community and Justice Professionals. *Child Abuse Review*, 23(2), 142–153. <https://doi.org/10.1002/car.2315>

⁸¹Jaffe et al. (2014) Paternal filicide in the context of domestic violence: Challenges in risk assessment and risk management for community and Justice Professionals. *Child Abuse Review*, 23(2), 142–153. <https://doi.org/10.1002/car.2315>

health services and more funding to child protective and domestic violence services are put in place to ensure that filicide prevention becomes a priority.

It has also been found that child witnesses of domestic violence have significantly worse psychological, social, attachment, and cognitive outcomes than those who did not witness the violence taking place (McIntosh et al. 2021)⁸². Especially following a separation in which domestic violence took place, risk of additional violence to the child is heightened. Tools exist to screen for and identify partner violence. However, these tools do not expand into identifying whole-family risks, and are unlikely to address risk to a child within the context of parental domestic violence. Since these tools are not readily available, community agencies that deal with domestic partner concerns are not well equipped to recognize homicide risk factors.

It is also critical that community agencies that manage different areas of concerns, such as domestic violence versus child abuse, coordinate to share information where multiple risk factors are identified (Johnson 2006)⁸³. Social services and community agencies do exist to identify risk factors and attempt to mitigate negative outcomes. However, the ability of such agencies to effectively stop such actions remains in question. A 10-year study conducted in Australia by Brown et al. (2014)⁸⁴ on filicide and parental separation found that 82% of filicide perpetrators had contact with at least one of the following services; mental health services, counselling, child protection or criminal justice services, drug and alcohol services. In cases where these perpetrators had maintained contact with some organisation designed to help families, it raises the question of how effective these organisations are in terms of early identification of filicide risk factors and ultimately, preventing filicide. In many cases, child abuse was suspected but little was done to prevent the abuse and ensure protection of the

⁸² McIntosh, J. E., Tan, E. S., Levendosky, A. A., & Holtzworth-Munroe, A. (2021). Mothers' experience of intimate partner violence and subsequent offspring attachment security ages 1–5 years: A meta-analysis. *Trauma, Violence, & Abuse*, 22(4), 885-899.

⁸³ Johnson, C. H. (2006). Familicide and family law: A study of filicide–suicide following separation*. *Family Court Review*, 44(3), 448–463. <https://doi.org/10.1111/j.1744-1617.2006.00099.x>

⁸⁴ Brown T, Tyson D & Fernandez Arias P (2014) Filicide and parental separation and divorce. *Child Abuse Review*, 23(2), 79–88. <https://doi.org/10.1002/car.2327>

children (Malherbe & Häefele 2017)⁸⁵. These overworked and overburdened agencies should be strengthened to ensure that they are able to provide useful aid to those in need, coordinate with other agencies to identify risk factors for child violence, make referrals and report to the authorities as necessary.

7. Conclusions and recommendations

The study provides much needed insight into prevention and response to filicide in South Africa and contributes understanding to how child protection, police, judiciary, prosecution, and family mediation services in South Africa should support vulnerable families with children to restore family functioning and foster resilience during adversity to prevent familial murder, particularly filicide. This desktop study characterises filicide in terms of its forms and causes in South Africa. It explores and documents the key factors contributing to filicide and characterises service availability for the prevention of and in response to filicide in South Africa.

The literature and policy review identified support services in South Africa that assist families with children during adversity, such as the Office of the Family Advocate, family mediation, family violence response units in police, social work, counselling and maternal and child health services. Further, South Africa also boasts a progressive policy landscape in terms of child protection, yet these remain silent on the perpetration of filicide specifically. As a result of this deafening silence, filicide continues to happen in many South African communities. Media reports in the form of online news reports, magazines, and social media platforms show that mothers and fathers are both likely to commit filicide although motives differ. For the latter, spousal revenge following or during divorce and jealousy were cited as underlying paternal filicide, whereas motives underlying maternal filicide were predominantly altruist. Further, maternal psychosis was cited as a common underlying factor in maternal filicide. Paternal filicide often takes place in the context of domestic violence as well there is a history of criminal violence behaviour prior to perpetrating filicide.

⁸⁵ Malherbe C & Häefele BW (2017) Filicide in South Africa: a criminological assessment of violence in the family. *Child abuse research in South Africa*, 18(1) <https://hdl.handle.net/10520/EJC-77e03452b>

These findings highlight gaps in policy development and implementation, and services provision in light of filicide prevention and response. Although various child protection policies exist which can potentially be used in the prevention and response to filicide, these are often silent on filicide. There are missed opportunities in relation to child protection, social, and health services. Further, failure to recognise the intersections of VAW and VAC and subsequently, to integrate VAW and VAC preventive and response services perpetuates the perpetration of filicide. As indicated in the media reports, filicide is a serious problem in South African communities, and it requires urgent and multi-sectoral response. In the long term, an approach that is people-centred, context-specific, involving multiple sectors for the development of comprehensive preventive measures will undoubtedly save many children's lives.

Recommendations

We acknowledge and emphasise that intersectoral collaboration between policymakers, service providers and researchers are necessary to adequately prevent and respond to filicide under the umbrella of VAC. Hereunder we provide two (separate) sets of recommendations, note that this is a distinction artificially imposed to suggest stakeholders who we consider as the key drivers of the recommendation we make. The first set of recommendations is focused on reducing the policy-implementation gap which is aimed at policymakers, and service providers across governmental agencies as well as non-governmental stakeholders. The second set of recommendations is aimed at expanding the body of evidence on filicide in South Africa.

Bridging the policy-implementation gap [Policymakers and service providers]

- Shifting from the current reactive model to a proactive (prevention) model through:
 - An amplified focus on early identification of at-risk children using risk assessment tools
 - Training various cadres of professionals and service providers (health care, social workers, family lawyers, educators) to routinely screen and identify children either at-risk or currently experiencing violence as well as parents who are either at risk of perpetration or currently perpetrating violence towards their children and or partners.

- Build and sustain collaborations amongst various governmental agencies or systems such as the family and criminal justice system; Department of Social Development; Department of Health and South African Police Service to share and triangulate information about children (and families) at-risk
- Develop appropriate and robust interventions that
 - Educate and empower parents and carers on the legal, social support, and health care available when families dissolve.
 - Consider the holistic well-being of children (beyond financial) during maintenance deliberations; specifically children’s vulnerability to violence exposure
 - Comprise multi-pronged approaches to address the multiple forms of violence occurring within families (given the intersection between VAW and VAC)
 - Support children and families who are found to be at-risk (i.e. safety plans are developed and executed) specifically in the context of domestic violence
- Improve mental health care response through:
 - Investment and financing to increase the human and financial resources contribute to the treatment gap.
 - Horizontal integration (integrate mental health into primary health care) by task shifting and use existing personnel to deliver services.
 - Integration of mental health into prenatal and postnatal services to assess risk and to identify mothers who need referral to services.
 - Provide ongoing psychosocial support to families who have experienced filicide.

Evidence for improved prevention and responses to filicide [researchers]

- Categorisation of child homicides; towards a definition of filicide

It is imperative to categorise child homicides to ensure that there is a distinction made between the various types. Having clearly defined child-death definitions has implications for its identification and measurement of the phenomenon as well as the monitoring health and rights indicators.

There is an urgent call for researchers to generate South African data (country and provincial) on filicide to determine its magnitude, and to develop indicators that can

enable routine monitoring which can subsequently be used to motivate for VAC (including filicide) be considered as a national priority.

- Production of evidence to improve implementation practices include:
 - Collaboration between research and service-level stakeholders to develop standardised risk assessment /screening tools to be used in various service sectors across the country.
 - The extensive investigation and identification of barriers and facilitators to implementation of existing approaches to bridge the policy-implementation gap.
 - Research findings should be made accessible to all relevant stakeholders in relevant formats to facilitate knowledge translation (use of evidence) to inform policy and service level decision-making.

8. References

Dekel B, Abrahams N, & Andipatin M (2019) Exploring the Intersection Between Violence Against Women and Children from the Perspective of Parents Convicted of Child Homicide. *Journal of Family Violence*, 34: 9–20 <https://doi.org/10.1007/s10896-018-9964-5>

Ratele K, Seedat M, Suffla S, & van Niekerk A (2014) Psychological research and South Africa's violence prevention responses. *South African Journal of Psychology* 44(2): 136-144. <https://doi.org/10.1177/0081246314526831>

United Nations Childrens Fund (UNICEF) (2020) *Violence against children: No violence against children is justifiable. All violence against children is preventable*. Accessed July 2022, <https://www.unicef.org/protection/violence-against-children>

WHO (World Health Organization) (2014) *Global status report on violence prevention 2014*. Geneva: WHO

Abrahams N, Mathews S, Martin LJ, Lombard C, Nannan N & Jewkes R (2016) Gender differences in homicide of neonates, infants, and children under 5 y in South Africa: Results from the cross-sectional 2009 National Child Homicide Study. *PLoS medicine*, 13(4), p.e1002003 <https://doi.org/10.1371/journal.pmed.1002003>

SAPS (South African Police Service) (2021) *Crime Statistics: Integrity*. Accessed July 2022, https://www.saps.gov.za/services/older_crimestats.php

Christine Muhigana, UNICEF South Africa Representative, statement, February 2022. <https://Unicef.org/southafrica/press-releases/352-child-murders-ninety-days-are-352-too-many>

UN (United Nations) (1989) *UN Convention on the Rights of the Child*. New York: UN <https://www.ohchr.org/documents/professionalinterest/crc.pdf>

Abrahams N, Jewkes R, Lombard C, Martin L & Mathews S (2012) Child homicide patterns in South Africa: Is there a link to child abuse?. Research Brief. *South African Medical Research Council*

Hsiao C, Fry D, Ward CL, Ganz G, Casey T, Zheng X & Fang X (2018) Violence against children in South Africa: the cost of inaction to society and the economy. *BMJ Global Health*, 3: e000573.

<http://dx.doi.org/10.1136/bmjgh-2017-000573>

Gould C, Mufamadi D, Connors J, Hayward J, Dartnall E, Shai N, Moruoane S, Austim J, Reddy O, Frost K, et al (2020) Evidence-led violence prevention: principles and

guidelines for practice. Policy Brief. Violence Prevention Forum. *Institute for Security Studies* <http://>

Malherbe C & Häefele BW (2017) Filicide in South Africa: a criminological assessment of violence in the family. *Child abuse research in South Africa*, 18(1) <https://journals.co.za/doi/10.10520/EJC-77e03452b>

UNDP (United Nations Development Programme) (1994) *Human Development Report 1994*. New York, UN

Periago MR (2021) Human security and public health. *Pan American Journal of Public Health*, 31

Katz C (2013) The narratives of abused children who have survived attempted filicide. *Child Abuse & Neglect*, 37(10) <https://doi.org/10.1016/j.chiabu.2013.04.015>

O'Hagan K (2014) Filicide-suicide: The Killing of Children in the Context of Separation, Divorce and Custody Disputes. United Kingdom: *Palgrave Macmillan*

Sidebotham P & Retzer A (2019) Maternal Filicide in Cohort of English Serious Case Reviews. *Archives of Women's Mental Health*, 22(1): 139-149 <https://doi.org/10.1007/s00737-018-0820-7>

Moodley S, Subramaney U & Hoffman D (2019) A Qualitative Study of Mentally Ill Women Who Commit Filicide in Gauteng, South Africa. *Frontiers in psychiatry*, 10(757) <http://doi.org/10.3389/fpsy.2019.00757>

Hatters Friedman S & Resnick PJ (2007). Child Murder by Mothers: Patterns and Prevention. *World Psychiatry*, 6(1): 137-141. PMID: 18188430; PMCID: PMC2174580.

Dekel B, Andipatin M, & Abrahams N (2020) Exploring adversities among parents convicted of killing their children. *PLoS ONE* 15(7): e0235812. <https://doi.org/10.1371/journal.pone.0235812>

DSD (The Department of Social Development) (2019) *The National Child Care and Protection Policy: Working together to advance the rights of all children to care and protection*. South Africa: DSD

Hendricks ML (2014) Mandatory reporting of child abuse in South Africa: Legislation explored. *South African Medical Journal*, 104(8): 550. <https://doi.org/10.7196/samj.8110>

Strydom M, Schiller U & Orme J (2020) The current landscape of Child Protection Services in South Africa: A systematic review. *Social Work*, 56(4) <https://doi.org/10.15270/56-4-881>

Richter LM & Dawes AR (2008) Child abuse in South Africa: Rights and wrongs. *Child Abuse Review*, 17(2): 79–93. <https://doi.org/10.1002/car.1004>

Mohlabane N, Gumede N & Mokomane Z (2019) Attitudes towards marriage in postapartheid South Africa. In: Z Mokomane, J Struwig, B Roberts & S Gordon (eds) *South African Social Attitudes: family matters: family cohesion, values and strengthening to promote wellbeing*. Cape Town: HSRC Press
<http://hdl.handle.net/20.500.11910/14808>

DJCD (The Department of Justice and Constitutional Development) (2020) National Strategic Plan on Gender-Based Violence and Femicide (NSPGBVF). Pretoria: DJCD

IFM (International Family Mediation) (n.d.) South Africa. Accessed July 2022, https://www.ifm-mfi.org/en/south_africa

Namy S, Carlson C, O'Hara K, Nakuti J, Bukuluki P, Lwanyaaga J, Namakula S, Nanyunja B, Milton L. Wainberg, Naker D & Michau (2017) Towards a feminist understanding of intersecting violence against women and children in the family, *Social Science & Medicine*, 184 <https://doi.org/10.1016/j.socscimed.2017.04.042>.

Jaffe PG, Campbell M, Olszowy L & Hamilton LH (2014) Paternal filicide in the context of domestic violence: Challenges in risk assessment and risk management for community and Justice Professionals. *Child Abuse Review*, 23(2): 142–153. <https://doi.org/10.1002/car.2315>

Johnson CH (2006) Familicide and family law: A study of filicide–suicide following separation. *Family Court Review*, 44(3): 448–463. <https://doi.org/10.1111/j.1744-1617.2006.00099.x>

Brown T, Tyson D & Fernandez Arias P (2014) Filicide and parental separation and divorce. *Child Abuse Review*, 23(2): 79–88. <https://doi.org/10.1002/car.2327>