

## Raped Woman as Offender-Case Report

Ibishi FN<sup>1\*</sup> and Musliu RN<sup>2</sup>

<sup>1</sup>Clinic of Psychiatry, University Clinical Center, Kosova

<sup>2</sup>Clinic of Internal Disease, University Clinical Center, Kosova

\*Corresponding author: Ibishi F. Nazmie, Clinic of Psychiatry, University Clinical Center of Kosova, Kosova, Tel: +37744521616; E-mail: nazmiemb3@hotmail.com

Received date: February 26, 2018, Accepted date: March 07, 2018, Published date: March 12, 2018

Copyright: © 2018 Ibishi FN, et al. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

### Abstract

**Introduction:** Mrs. Bela was a 47 year old Albanian woman from Kosovo, placed under detention on remand because of a criminal offence of Aggravated Murder. She killed her husband and this is her first criminal offence. She was brought to Forensic Psychiatry Ward, Psychiatry Clinic, for psychiatric examination and evaluation of mental capacity at the moment of commission of the criminal offence she is charged with and the competence to follow the main trial. Her thinking was preoccupied with the event, manifests the phenomena of traumatic re-experiencing of the event and 'flash back', with retained cognitive functions.

After the event, Mrs. Bela also provided information about sexual abuse that she was subjected to for years by the victim, being forced to perform anal and oral sexual acts, under pressure and physical violence. Forensic examination found hematomas few weeks old all over the body with ulcerous injuries on both sides of buttocks and abdomen area, face and back. Gynecological examination found fresh bleeding in the internal anal and vaginal region. Her mental state capacity at the moment of commission of the criminal offence was reduced. She was fit to participate in the main trial.

**Discussion:** Victimization of women is a frequent factor of criminal behavior, even in cases when they had a relatively normal quiet past and psychological development without trauma from early childhood or adolescent.

**Conclusion:** This case study presentation shows direct impact of victimization on criminal acts in the case of lack in experienced prior childhood maltreatment or abnormal development, and shed light on possible linkage between various and multiple psychological traumas prior to criminal acts among woman, and also have potential to inform debate regarding the gendered nature of women's criminal pathways.

**Keywords:** Criminal offence; Murder; Psychiatry; Criminal behavior

### Case Study

Mrs. Bela was a 47 year old Albanian woman from Kosovo, placed under detention on remand because of a criminal offence of Aggravated Murder. She killed her husband and this is her first criminal offence. She was brought to Forensic Psychiatry Ward, Psychiatry Clinic, for psychiatric examination and evaluation of mental capacity at the moment of commission of the criminal offence she is charged with and the competence to follow the main trial. Mrs. Bela had a normal childhood, without any behavioural or intellectual development difficulties. She was brought up in her family, there is no data about any history of abuse of any substances or alcohol, no history of psychiatric treatment, and at the age of 24 she interrupted her studies while attending the second year of Albanian Language and Literature studies, to marry a man whom she met recently and did not know well. This marriage was concluded speedily in an emotional reactive state and feeling of despair through which Mrs. Bela was going through, because of separation from her first boyfriend.

After the marriage, she started feeling that she married a wrong person, but it was too late to change things. Her husband, with two failed marriages behind him and two children from these marriages, had deceived Mrs. Bela by lying to her about his residence and about having a good job, which he did not have. She began a hard life under

quite hard conditions and social circumstance unfavorable to her. She immediately started looking after her husband's two children and gave birth to her first child. Her emotional state was significantly worsened by continuous requests of her husband for her not to speak to anyone and the extreme jealousy that her husband was showing in relation to her. Very quickly she was isolated from the social environment and due to the threats by her husband she started feeling bad, physically and psychologically. She started getting beaten up brutally by her husband, so much so that she lost her second child during the ninth month of pregnancy because of the physical trauma and blow to the abdomen area, in which case she had a stillbirth at her home, due to internal bleeding. She did not inform anyone from her family or authorities about this physical mistreatment and the loss of the child because of the fear and threats from her husband. She experienced the loss of the child very badly emotionally by undergoing through a state of reactive depression and long period of sadness. She continues to be physically and psychologically mistreated and abused everyday by her husband who, based on the description of the profile and information from the file, was a person with sadistic and psychopathic features. Prior to the occurrence of aggravated murder the husband began with threats to sell her with intentions of sexual abuse by other men, which was an inadmissible request for Mrs. Bela, and the end of tortures for her. She often thought of committing suicide under continuous threats, and during the last month he tortured her every day by causing her injuries all over her body by a metallic rod, breaking her ribs and leaving them

untreated, and he undertook these sadistic actions in the bedroom. Mrs. Bela commits the murder by a fire weapon that her husband had made ready and by which he kept Mrs. Bela under continued threat. After this act she reported to the authorities and informed them about the murder committed in a state of extreme physical and psychological trauma as a consequence of permanent mistreatment, with hematomas and bleeding all over the body, with fresh and old injuries as well as in a state of a severe psychological trauma.

After the event, Mrs. Bela also provided information about sexual abuse that she was subjected to for years by the victim, being forced to perform anal and oral sexual acts, under pressure and physical violence. Forensic examination found hematomas few weeks old all over the body with ulcerous injuries on both sides of buttocks and abdomen area, face and back. Gynecological examination found fresh bleeding in the internal anal and vaginal region.

She arrived at the Forensic Psychiatry ward in a state of psychological post-traumatic distress and signs of permanent physical and sexual abuse-rape, which are found also by the forensic medicine, after the performed examination.

Her psychic profile: she was conscious, oriented in all three dimensions; her external look is noticeable, cachectic, gloomy face. General psychomotor inhibition, fluent speech with a low tone, during interview often breaks down crying, the process of thought without any changes. Emotional state was tense, depressive mood. No delusions, no hallucinations. Her thinking was preoccupied with the event, manifests the phenomena of traumatic re-experiencing of the event and 'flash back', with retained cognitive functions. Currently she showed suicidal ideas without any action plan, she has no homicidal ideas. Her extent of knowledge was adequate with the education level. She was conscious of her mental state.

In the psychological profile we find introvert behaviour, disappointment, blocked in achieving her potential and activities that enable adequate achievement of personality, with a low level of intentionality and spontaneity.

Results of psychological tests indicate for a hypersensitive personality, conventional, authoritative but also submissive with a tendency for a bad evaluation of her self-function in personal psychological space, which results from the high presence of precipitating factors of stress with a consequence of decreasing the frustration tolerance. Prolonged functioning in an inferior position with a feeling of insecurity and being threatened by all possible dangers imposes functioning within suggestibility. High level of emotional tension is registered that culminates with a revolt.

Her mental state capacity at the moment of commission of the criminal offence was reduced. She was fit to participate in the main trial.

## Discussions

Victimization of women is a frequent factor of criminal behaviour, even in cases when they had a relatively normal quiet past and

psychological development without traumas from early childhood or adolescent. This induced criminal behaviour that ended with a murder as a consequence of physical and psychological mistreatment and abuse that Mrs. Bela was subjected to for years shows an extremely negative impact that partner's mental disorder and psychopathological behaviour had in increasing the criminality and violent behaviour, in this case self-defense.

The large percentages of criminal offences committed by women are light and aggravated bodily injuries, and less frequently murder [1].

All cases that ended with murder were preceded by verbal conflict with the victim or attack, and women committed the offence by a tool/mean that was nearest to them-kitchen knife, spade, other domestic tool or even a hunting rifle (as in our case). Regarding the areas where a murder is committed by women then they are committed in villages more than urbane areas, most of them housewives and rarely had been recidivist [1].

A lot of authors give importance to phenomenological and etiologic views of knowledge on women criminality but dualistic views of researchers show how serious the establishing of factors that influence women criminality.

Some women's stories regarding the impact of victimization included descriptions of behaviour that might be described as "internalizing" or over controlled behaviour. These included feelings of emotional distress, worthlessness, and withdrawal from daily activities [2].

From the research [3], elucidates the multiplicity of traumas that women faced prior to prison. Most women in the sample experienced child maltreatment, sexual violence, or adult relationship violence, and most experienced more than one of these types of victimization.

## Conclusions

This case study presentation shows direct impact of victimization on criminal acts in the case of lack in experienced prior childhood maltreatment or abnormal development, and shed light on possible linkage between various and multiple psychological traumas prior to criminal acts among woman, and also have potential to inform debate regarding the gendered nature of women's criminal pathways.

## References

1. Palijan ZT, Kovacevic D (2009) Forensic psychiatry book, Ceres Press, Zagreb, Croatia. pp: 118-127.
2. Martin K (2003) Substance-abusing adolescents show ethnic and gender differences in psychiatric disorders research findings. National Institute on Drug Abuse 18: 1.
3. DeHart DD (2008) Pathways to prison: Impact of victimization in the lives of incarcerated women. Violence Against Women 14: 1362-1381.