



Epidemiology of Femicide: An autopsy based study at DHQ Teaching Hospital Sahiwal.

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ABSTRACT... Objective: To know the epidemiology of female homicidal deaths in Sahiwal. **Study Design:** Descriptive Retrospective study. **Setting:** Department of Forensic Medicine, Sahiwal Medical College and DHQ Teaching Hospital Sahiwal. **Period:** 1st January 2016 to 31st December 2018. **Material & Methods:** This study includes 73 cases of female homicide from a total of 314 autopsies conducted at DHQ Teaching Hospital, Sahiwal. These cases were examined regarding their age, marital status, residential background, cause of death, alleged offender and apparent motive of Killing. **Result:** The study revealed that commonly involved age group was 20-29 years (45.2%), 45 (61.6%) females were married and 64 (87.7%) female victims belonged to rural area. Firearms were the causative agent in 31 (42.5%) cases. In 19 (59.5%) cases the alleged offender was husband. Honor killing, financial/property disputes were the main reason for homicides. **Conclusion:** The violence against women in Sahiwal is higher in rural areas and more commonly affecting the married women of child bearing age.

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INTRODUCTION

The voice of violence against gender, especially as women, is a major public health problem and a violation of women's basic social rights.¹ Pakistan is considered as an underdeveloped country, wherein violence in opposition to women is a core hassle.² The VAW (violence against women) is defined as "Any act of gender based violence that results, or is probable to end result in bodily, sexual, or psychological hurt or suffering to women, including terrorization of as such act coercion or illogical the deprivation of liberation, whether taking place in public community or in their personal life".³ It is integrated in different ways: Inter alia, sexual violence, intimate spouse partner or spousal neglect in household violence, sexual-harassment, continuation of harmful traditional exercise (enforced fully marriage such as vanni, karokari etc.), and other unfair practices that rely on gender basis.⁴ It is not an easy job or not a child's play to estimate the weight of this critical gender problem because of the contradiction in definitions, under-reporting and lack of epidemiological studies in their culture,

environment, lack of community development system and awareness between the public regarding the matter. On the other hand, existing statistics data from around the globe is a sign of that one out of three women are acted upon violence in an intimate relationship in her personal life and their social sector system.¹ In the year of 2017, worldwide the danger figure showed that 87,000 women were killed deliberately, and more than half were killed by their intimate partners or family members. It means that 137 women across the world are killed by a member of their own family every day.^{5,6} Pakistan has been ranked as the third⁷ and in another survey, the sixth most dangerous country in the world for women.⁸

Respect executing is another type of familial VAW in Pakistan. Respect slaughtering is characterized under section 299 Pakistan Penal Code as "Offense submitted in the name or on the affection of respect implies an offense submitted in the name or on the appearance of karokari, Siyahkari or comparable different traditions or practices".⁹

Instances of respect murdering in Pakistan are on the ascent. As per data report the Human Rights Commission of Pakistan around 15222 instances of honor Killing occurred from 2004-2016.¹⁰ In 2014, the number was 837 ladies including 75 minor, and 1,100 ladies were killed in 2015.^{11,12} Another figure shows that 460 cases were accounted for in 2017, including 376 ladies as victims¹³, as indicated by Human Rights Watch, around 1000 respect killings are done every year in Pakistan.

Causes, nature and frequency of this social issue are not well documented in this region. This study would be helpful in providing valuable input to minimize this social issue through collaborative efforts by concern sectors of government and social organization.

MATERIAL & METHODS

Its was a descriptive retrospective study. At Department of Forensic Medicine, Sahiwal Medical College and DHQ Teaching Hospital Sahiwal after approval from Ethical Review Committee (57/DME/SLMC/SWL). It was 3 Years from 1st January 2016 to 31st December 2018. All autopsy cases of female homicide. Negative autopsies and exhumations were excluded from the study.

This study includes all 73 cases of female homicide from a total of 314 autopsies conducted at the DHQ Teaching hospital, Sahiwal. These cases were labeled as homicide on the basis of police inquest reports, injury statements, autopsy reports . Data was collected and recorded in predesigned Performa and analyzed in SPSS V-25. For numerical values (e.g. age), mean + SD was calculated; while for categorical variables marital status, residential background, cause of death, alleged offender and apparent motive of Killing) frequencies and percentages were calculated.

RESULTS

The total number of medico-legal deaths during the study period was 314. From this, the homicidal manner of women was observed only in 73 cases giving an incidence rate of 23.24%. The age group

in which the most number of deaths occurred was 20-29 years (45.2%) followed by the 30-39 (20.5%). Least number of victims were from the extreme age groups i.e. 0-9 and above 60 years.

Age (Years)	Cases (%)
0-9	1 (1.4%)
10-19	13 (17.8%)
20-29	33 (45.2%)
30-39	15 (20.5%)
40-49	4 (5.5%)
50-59	6 (8.2%)
>60	1 (1.4%)
Total	73 (100)

Table-I. Age distribution of female homicidal cases (n=73).

Our study revealed that the maximum number 45 (61.6%) was married followed by unmarried 25 (34.2%) and least number of victims were widow and divorced.

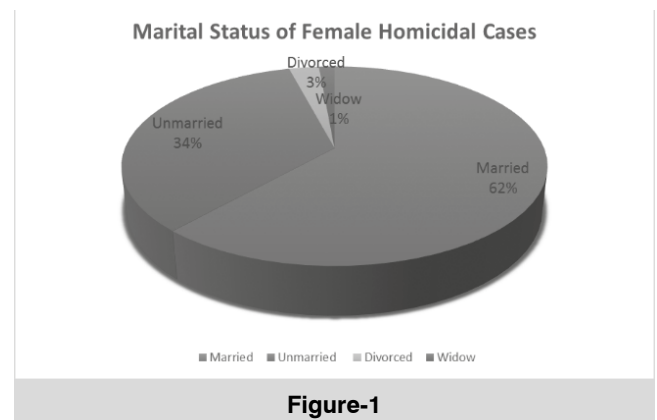
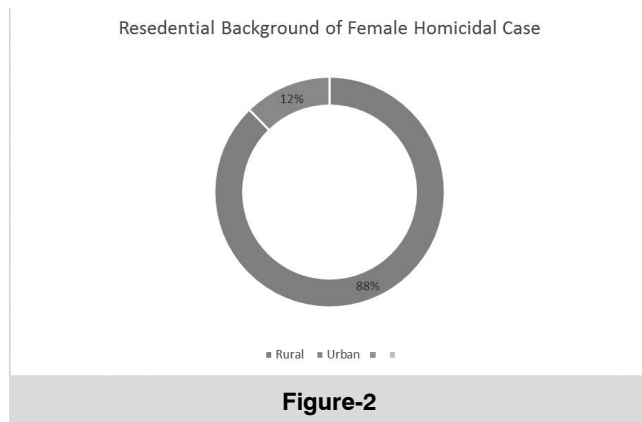


Figure-1

Marital Status	Cases (%)
Married	45 (61.6%)
Unmarried	25 (34.2%)
Widow	2 (2.7%)
Divorced	1 (1.4%)
Total	73 (100)

Table-II. Marital status of female homicidal cases (n=73).

As regarding the residential background of the sufferers; 64(87.7%) cases belong to a rural area and 9(12.3%) cases were inhabitants of the urban area as shown in Figure-1.



Majority of victims died due to firearm injuries 31(42.2%) followed by asphyxia 14(19.2%), blunt injury 9(12.3%), sharp injury 8 (11%), asphyxia plus sexual assault 4(5.5%) and poisoning 3(4.1%). Only 1(1.4%) were died of burn, stab injury, sexual assault and criminal abortion (Table-IV).

Cause of Death	Frequency (%)
Firearm	31 (42.2%)
Asphyxia	14 (19.2%)
Blunt Injury	9 (12.3%)
Sharp Injury	8 (11%)
Asphyxia + Sexual Assault	4 (5.5%)
Sexual Assault	1 (1.4%)
Poisoning	3 (4.1%)
Burn	1 (1.4%)
Stab injury	1 (1.4%)
Criminal Abortion	1 (1.4%)
Total	73 (100)

Table-III. Causes of Female Homicidal deaths.

In majority of deaths 41(56.2%) the alleged offender was father /brother and husband followed by acquaintance and unknown 10 (13.7) (Table-IV).

Alleged Offender	Frequency (%)
Father/Brother	22 (30.1%)
Husband	19 (26.1%)
Other relative	6 (8.2%)
Acquaintance	10 (13.7%)
Stranger	9 (12.3%)
Unknown	10 (9.6%)
Total	73 (100)

Table-IV. Distribution of Female Homicide according to alleged offender.

In 40.5 % cases the apparent motive was other reason followed by 25% family dispute, 23.8% Honor killing and 10.7% financial dispute (Table-V)

Apparent Motive	Frequency (%)
Honor killing	16 (21.9 %)
Property dispute	16 (20.5 %)
Financial dispute	15 (20.5 %)
Family dispute	7 (9.6 %)
Sexual assault	5 (6.8 %)
Other reason	11 (15.1 %)
Unknown	4 (5.5 %)
Total	73 (100)

Table-V. Distribution of cases according to apparent Motive.

DISCUSSION

Sahiwal is the 22nd largest city of Pakistan by population.¹⁵ A demographic data shows that the total population of Sahiwal was 2.517 million in 2017.¹⁶ During 3 years study period, 73 female deaths reported out of total 314 autopsy conducted accounting for 23.24% of the entire postmortem conducted. In this study we have focus on the homicidal violence against women. A significant number of variables have been reviewed such as age of the victim, marital status, and residential background, methods used for violence and reasons of homicide.

The maximum age range of female victims of homicide in this study was at 20-29 (45.2%) and 30-39 years (20.5%). This has been shown in many other studies conducted internationally in Jammu Region¹⁷, India^{18,19,21,23} Sri Lanka²⁰ and Ethiopia.²² This may be due to the fact that this is the group of females who are to be married or belong to young married class. These females are working physically and socially active and also take new responsibility at home as well as outside.²³ In this study the incidences of homicide sharply decreased by age (0-9 & >60) which are in line of other studies.^{21,22}

In this study marital status wise distribution showed that maximum numbers of females 61.6% were married which is consistent with the findings of other studies.^{18,19,21} The reason behind that is marriage leads to change in social

environment. Sometime, it may cause physical, social and mental stress.²¹ In present study, majority of victim's 87.7% belong to rural area followed by 12.3% urban which are in the line of other studies.^{19,27} The higher percentage of female deaths in rural areas can be attributed to more of gender inequality, low literacy rate less of employment avenues and more of economic dependence in these regions.¹⁹

The victims of homicide due to firearm were maximum 42.2% which correlates with the study conducted at Faisalabad²⁶, Sahiwal²⁷, and in the United States.²⁸ Firearms remain dominant weapon for murder, despite of legislation against possession of firearms in various parts of the world.³¹ Our study shows 19.2% (14 cases) of Asphyxial deaths, which is not consistent with the findings of local studies³⁰, but in the line of international study conducted in Sri Lanka²⁰, where these incidences were 17%.

Alleged offender in 56.2% of homicides was the husband, Father or Brother. Worldwide, Intimate partner violence has been considered as a public health problem. Many women are killed by their husbands or intimate acquaintances.²⁵ Women are rarely killed by strangers.³¹

CONCLUSION

The incidence of violent deaths is higher in married women as compared to unmarried females. The majority of females were inhabitants of rural area. In homicidal deaths, either husband or blood relatives were responsible for killing. Honor killing, property, financial or family disputes were the common motives or circumstances leading to death. Therefore, there is dire need to implement existing laws through collaborated effort by involvement of governments, law enforcing authorities and civil society to control the violence against women.






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2	Sumaira Sarwar	Data collection & Analysis, Preparation of Resutls, Review of Literature.	
3	Khalid Mukhtar	Literature Review, Verification of Resutls, Proof reading.	
4	Waqar Aziz Rehman	Literature Review, Verification of Resutls, Proof reading.	
5	Khalil Ur Rehman	Verification of results, Proof reading.	
6	Noman Saleem	Data collection & Analysis.	