



ROADMAP

FOR A SUSTAINABLE SOLUTION TO THE ILLEGAL POSSESSION,
MISUSE AND TRAFFICKING OF SALW AND THEIR AMMUNITION
IN THE WESTERN BALKANS BY 2024



CHARACTERISTICS AND PREVENTION OF INTIMATE PARTNER FEMICIDE-SUICIDE CASES COMMITTED WITH A FIREARM

Research Report

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The project contributes to the implementation of the Roadmap for a sustainable solution to combat illicit possession, misuse, and trafficking of small arms and light weapons (SALW) and related ammunition in the Western Balkans by 2024.

The research was conducted by Tanja Pavlov, PhD and Vedrana Lacmanović, MA, with expert assistance by Tanja Ignjatović, PhD and Nada Polovina, PhD.

The contents of, findings and views expressed in this publication are those of the authors and do not necessarily represent those of the United Nations, including UNDP, or UN Member States.



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We would like to thank the professionals from the higher and basic public prosecutor's offices, police departments and police stations, centers for social work and safe houses from Belgrade, Novi Sad, Sombor and Valjevo, who showed great willingness and motivation to share their experience in working on cases of femicide and femicide-suicide committed with firearms, thus together shedding light on this phenomenon and improving the existing response practice. We owe special thanks to the women who survived violence and mustered the strength to talk about their tragic experiences.

ABOUT THE RESEARCH

Despite significant changes in the legal framework and institutional response, gender-based murders of women - femicides, as the most drastic consequence of domestic and intimate partner violence, are still part of our reality.

Femicide is a violation of the right to life, and affects not only the lives of individuals, but also the safety of the entire community, as such cases can happen in front of the victim's family members, colleagues, passers-by on the street, in front of children. The trauma and loss caused by femicide can have transgenerational consequences.

The presence of and access to firearms and their misuse in the context of violence against women represents an additional threat and increases the likelihood of a fatal outcome of violence. The lethality of firearms increases the probability of multiple attacks, as well as injuries with lasting consequences on the lives of violence survivors. Additionally, just knowing that the abuser has access to firearms keeps survivors in fear of reporting violence, and also prevents witnesses of violence from intervening and providing support to survivors.

Analyses carried out so far indicate that the number of femicides committed in Serbia is around 30 murders of women per year. Data indicating that over 70% of women who were killed in a family-partner relationship context had not previously reported violence, is also worrying¹. An analysis of the cases of femicide that occurred in the period from 2017 to 2020 shows that one fifth of them were committed with a firearm. In these cases, almost 80% of the perpetrators of femicide attempted or committed suicide.²

In research on femicide, including that committed with firearms, cases of femicide followed by suicide, which have their own specificities and unique risk factors, have not been investigated in detail. These cases also show the deep gender dimension of the problem (women make the majority of victims, and men the majority of perpetrators of femicide followed by suicide), and also point to the need for intensive multisectoral cooperation in preventing these and other cases of femicide.

¹ Quantitative-narrative annual and biannual reports of the "Women against Violence" Network, available at: https://womenngo.org.rs/images/femicid/FEMICID_Kvantitativno_-_narativni_polugodi%C5%A1nji_izve%C5%A1taj_2021._godina.pdf

² Analysis of cases of femicide committed with firearms (June 2017-June 2020), UNDP, 2021, available at: <https://www.undp.org/serbia/publications/analysis-cases-femicide-committed-firearms-june-2017-june-2020>

The research before you intends to provide a deeper insight into the problem of femicide followed by suicide through misuse of firearms. The goal is to better understand the circumstances that precede the femicides and suicides, the main factors and characteristics of these acts, their consequences and perspectives of possible interventions by institutions and the community. The research is a contribution to the practice of regular collection, analysis and publication of data on femicides in order to better understand the phenomenon, to recognize the danger of escalation of violence and prevent new cases of femicides.

The ultimate aim is for women to live without fear, to have trust in institutions and support services and be free of violence, while those who commit violence are adequately sanctioned.

The research was conducted within the project “Reduce Risk - Increase Safety II” implemented by the United Nations Development Programme (UNDP), with the financial support provided by Germany, Sweden, the United Kingdom, France, the Netherlands and Norway, as well as the European Union, through the United Nations’ Western Balkans SALW Control Roadmap Multi-Partner Trust Fund.

The project contributes to the implementation of the Roadmap for a sustainable solution to combat illicit possession, misuse, and trafficking of small arms and light weapons (SALW) and related ammunition in the Western Balkans by 2024.³

The purpose of the project is to foster implementation of Goal 4 of the Roadmap, namely to significantly reduce the supply, demand and misuse of firearms through increased awareness, education, outreach and advocacy, by 2024.

The project focuses on decreasing the considerable number of suicides and cases of firearms misuse for domestic violence that are still recorded in Serbia. The overall goal is to reduce the risk of misuse of firearms by persons who have access to firearms as civilians, or based on their occupation or hobby, as well as those who have access to illegal firearms.

³ The Roadmap for a sustainable solution to the illicit possession, misuse, and trafficking of small arms and light weapons and ammunition in the Western Balkans by 2024 was jointly developed by the six Western Balkans jurisdictions, under the auspices of Germany and France, in coordination with the European Union and with technical support from the South Eastern and Eastern Europe Clearinghouse for the Control of Small Arms and Light Weapons (UNDP SEESAC). The Roadmap is the most comprehensive arms control exercise in the region, covering all key aspects, from securing the stockpiles of weapons and ammunition to mainstreaming gender in firearm control and countering firearms trafficking. The Roadmap was adopted at the London Summit in 2018. The text of the Roadmap is available at: <https://www.seesac.org/f/docs/publications-salw-control-roadmap/Regional-Roadmap-for-a-sustainable-solution-to-the.pdf>

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ABBREVIATIONS

CEDAW	<i>Convention on the Elimination of All Forms of Discrimination against Women</i>
GREVIO	<i>Group of Experts on Action against Violence against Women and Domestic Violence</i>
BPPO	<i>Basic Public Prosecutor's Office</i>
PS	<i>Police Station</i>
PD	<i>Police Department</i>
SEESAC	<i>South Eastern and Eastern Europe Clearinghouse for the Control of Small Arms and Light Weapons</i>
CSW	<i>Center for Social Work</i>
UNDP	<i>United Nations Development Programme</i>

GRAPHS

- Graph no. 1:* The total number of femicides, cases committed with firearms and cases committed with sharp objects, i.e. knives (2010-2022)
- Graph no. 2:* The percentage of femicides followed by suicide and the percentage of femicides followed by attempted suicide in relation to the total number of femicides (2010-2020)
- Graph no. 3:* Number of weapons used to commit femicide and suicide in relation to legal or illegal possession of weapons and missing data about this aspect (2010-2020)
- Graph no. 4:* Number of children - minors and adults, who were left without a mother after femicide (2010-2021)
- Graph no. 5:* Age of victims of femicide followed by suicide committed with a firearm
- Graph no. 6:* Age of perpetrator of femicide followed by suicide committed with a firearm



KEY FINDINGS



The total number of femicides committed in the last twelve years in Serbia was approximately 30 murders of women per year, regardless of the means of execution. The highest number of femicides was committed in 2013 - 43 women were killed, there was also a mass murder that year in which 7 women died; the lowest number was in 2021 - 20 women, probably due to the Covid situation. **The total number of femicide cases committed with a firearm, as well as the number of those followed by the suicide of the perpetrator, varies. Out of the total number of femicides, the highest number of murders with a firearm was recorded in 2015 - 45.71%, and the lowest in 2018, when the share of these femicides was 20%. The share of such femicides followed by suicide was the highest in 2017 - 57.69%, and the lowest in 2016 - 18.16%.**



The highest percentage of femicide-suicide cases is committed with firearms and in the context of intimate partner relations. The main characteristics of this type of femicide in Serbia are that it occurred in a higher percentage in cities and public places than in villages and private spaces. As regards the region, they happened most often in Vojvodina and Šumadija and Western Serbia. In most cases, the firearm that was used was a pistol, with unknown ownership, in illegal possession. These cases of femicide-suicide in both partner and domestic relationships are accompanied by a high degree of brutality with fatal, often multiple, wounds on the victim's head or chest, as well as the perpetrator's suicide by a shot to the temple. This form of femicide, more often than other forms of homicide, involves other victims, too. However, in the majority of the cases, only the partner was killed and the children did not witness the actual act of murder. The most common month of femicide-suicide was December, the days were Monday and Tuesday, and the time was during the day (until 6 pm).



The analysis of characteristics of the victims and the perpetrators of femicide-suicide cases committed with firearms in Serbia primarily points to a large age gap between the perpetrator and the victim - almost 10 years on average. The highest percentage of victims were in their younger middle ages - 25 to 35 years old, while the perpetrators were middle-aged or older, between 46 to 65 years old. Data on the educational structure and employment of femicide perpetrators are rarely published in the media. According to nationality, the highest percentage of both the victims and the perpetrators are of Serbian nationality, but there are also members of national minorities (slightly more among the victims). A slightly higher percentage of **the relationships** were among intimate partners (emotional and sexual relationships) rather than spouses, but a significantly higher percentage were ex-partners than former spouses. The same percentage of victims and perpetrators (44%) had previous marriages or partner relations, in 50% of the cases they had children with other partners, and in only 31% of cases they had children together (often adult children), thus conflicts over shared children and custody were irrelevant.



The identified risks for this type of femicide recognized in the literature, the media, and through interviews with professionals and women victims of violence are very similar, although there is no specificity concerning other types of femicide (except for the risk related to firearms). **Access to firearms**, whether in legal or in illegal possession, as well as **working in services or hobbies that involve the possession of firearms**,



are some of the most significant risks for this type of femicide. Additionally, there are risks characteristic of other femicides: the perpetrator's **jealousy and different types of controlling behavior** towards the victim, as well as **partner leaving, planning or announcing leaving/separating** (starting work abroad or moving to another city were also identified as factors of separation/leaving). After leaving, women often experienced persistent calls, being spied on or stalked by the partner. In a large percentage, there was a **history of domestic violence** or violence in the intimate partner relationship (including threats with weapons and threats of murder and suicide), and the victims had an **intense fear of the perpetrator**. A large percentage of them also talked about **problems with addiction** (alcohol and drug abuse) and **mental health issues of the perpetrator** (adjustment, depression, acute stress disorder, borderline and bipolar disorders, paranoia and psychosis), often combined with other financial and social problems. **The event was not an isolated incident**, but rather an indicator of the system of abuse that preceded the murder. It did not happen for the first time.



The legislative framework for the prevention and protection of women from intimate partner violence and domestic violence consists of the **Criminal Code of the Republic of Serbia, the Family Law, and the Law on Prevention of Domestic Violence**. Placed under the jurisdiction of the government's **Council for Combating Domestic Violence**, the regular monitoring of the implementation of the Law on Prevention of Domestic Violence and proposing measures for improvement is expected, but it is not enforced in the proper way and to a sufficient extent. Research and analysis of practice indicate that **the main issues lie in the uneven implementation of existing regulations**. The form and content of oversight indicate the **lack of understanding of the phenomenon, and insufficient knowledge and training** to assess security risks, as well as to establish a link between the risk and the individual plan of protection and support measures for the victim and its enforcement. The **Law on Weapons and Ammunition, the Law on Police** and the **Law on Game and Hunting** are also relevant to this field. **By-laws related to gender-based violence** (strategies and protocols on responding and other types of instructions and guidelines) lack the necessary hierarchy and understanding of the specific characteristics of this phenomenon and the general principles for organizing the authorities' actions. They also **lack effective implementation**, which results from inadequate human, technical and financial resources, as well as a completely inadequate system of monitoring of implementation and evaluation of the achieved results. In the latest **strategic document for the period between 2021 and 2025 which still has no Action Plan**, a whole series of measures relevant to prevention and protection from violence, including femicide and femicide followed by suicide committed with a firearm, remained without operationalization and implementation.



In most femicide-suicide cases committed with firearms, the perpetrator was not previously reported to institutions. Three patterns were identified in relation to the (non)reporting: 1) **'under the radar' cases** with three subgroups - a) cases that went unnoticed by everyone (perpetrators were not seen as capable of committing a crime), which institutions cannot identify; b) cases in which family members and friends observed the perpetrator's 'sick' and 'obsessive' jealousy, violence or alcoholism, the

partner left the perpetrator, but no one reported the violence to institutions; c) cases in which the community knew the perpetrators well, the perpetrators obsessively pursued their partners, and centers for social work knew one family member on other grounds, and this domestic violence/violence in partner relationship was also not reported to the institutions; 2) **'red flag' cases** are cases of violence from current or previous relationships with jealousy and obsessive stalking or the perpetrators' serious psychological problems, where the partners left the perpetrators, the violence was repeatedly reported to the institutions, which had intervened, but there was no consent in risk assessment or defined protection measures, and the femicide-suicide was committed; and 3) **'profession as a risk' cases** (these can simultaneously be 'under the radar' or 'red flag' cases) are cases in which the perpetrator's job involves carrying a firearm - police officer, gamekeeper, hunter, etc.



The survivors' perspective shows that those who have specific strength, resilience and can assess the situation well and predict future events have the greatest chance of survival. The survivors should trust their own feelings and listen to themselves. On the other hand, violence survivors, as well as professionals, note that they do not recognize the signs of gradual escalation of violence and development toward a lethal outcome. Survivors also indicate the difficulty of getting out of a toxic relationship due to not recognizing the alarming signs, devoted effort in the relationship (emotions, children, time), fear of the unknown and a new beginning, lack of support from the social environment, and also due to the feeling of control when their abuser is in sight, thus having the ability to assess the abuser's condition and intentions.



Professionals' proposals for the prevention of certain patterns of femicide-suicide committed with firearms are divided into **five categories**: 1) improving prevention, 2) standardizing the practice (and understanding of measures towards perpetrators of violence) and improving the coordination of everyone within the system, 3) improving support measure availability for victims, 4) improving case monitoring, and 5) collecting and processing data on cases to improve the practice. The system is like a pyramid - the media and educational institutions are at the base of the pyramid and they should work on educating potential victims about the phenomenon of domestic/partner violence and developing their trust in institutions, as well as encouraging survivors to report violence. **The middle of the pyramid** consists of the competent authorities - the police, centers for social work and the public prosecutor (which are most often under the public's attention, supervision and control), while representatives of health institutions are distinctly absent. **At the top of the pyramid** are the judges, whose decisions cause a lot of frustration for representatives of the three operational victim protection systems due to the rejection of proposals for the violence perpetrators' detention or the extension of detention or the absence of security measures, but also the most frequently imposed suspended sentences, inappropriate sentences for violating emergency and extended emergency measures, due to evidence treatment, and the length of the proceedings.



1.

INTRODUCTION

The report on the *Characteristics and prevention of intimate partner femicide-suicide cases committed with firearms* was created as a result of research within the *Reduce Risk - Increase Safety II* project, which is implemented by the United Nations Development Programme in Serbia (UNDP). **The goal of the project is to contribute to the reduction of the misuse of firearms in cases of domestic violence, murder and suicide.**

Femicide is often followed by suicide, which is defined in literature as 'homicide-suicide' femicide or 'extended suicide'⁴. In these cases, after killing the victim, the perpetrator kills himself, and sometimes this involves other family members and children. Suicide was most often committed immediately after femicide or on the same day. **In the Republic of Serbia, about 30 women are killed every year in a domestic-partner relationship context, and year after year, the number of femicides committed with firearms followed by the perpetrator's suicide comprises between a third and a quarter of the recorded cases⁵.**

The presence of firearms in the household increases the risk of serious injury and homicide⁶, and a Canadian study found a correlation between the rate of firearm ownership and the number of intimate partner homicides committed with a firearm in that the number of homicides with firearms is higher, if the rate of firearm ownership is higher⁷. In the Republic of Serbia, earlier research showed that **firearms are available and widespread, that they can be quickly and easily obtained, and that they are simple to use⁸,** that **94.7% of firearms are owned by men⁹,** and that **illegal firearms left over from armed conflicts in the 1990s are kept in households** and used to commit violence against women¹⁰.

The impact of femicide is far-reaching and devastating. From a systemic aspect, the consequences can be seen on the micro, meso and macro levels. On a personal level, it leaves a lasting legacy of pain and trauma for the victims' families¹¹. On the level of the local social community, it raises questions about the (in)sufficiency of the institutions' actions and causes distrust. Globally, it undermines the health, safety and well-being of women and girls around the world. In the protection system against violence, professionals, who

⁴ Geneva Declaration Secretariat, *Global Burden of Armed Violence 2011*, Geneva Declaration, Geneva, 2011, p. 130. Available at: <http://www.genevadeclaration.org/home/contact.html> [accessed 6. 2. 2023].

⁵ Autonomous Women's Center, Reports and press releases on femicide in Serbia, Belgrade (undated). Available at: <https://www.womenngo.org.rs/publikacije/izvestaji-o-femicidu-u-srbiji> [accessed 6. 2. 2023].

⁶ Imai et. al., "Firearm presence and storage practices in North Carolina homes", *Journal of Human Behavior in the Social Environment*, 27(7), 2017, pp. 779–788.

⁷ Tutty, L.M., "I Didn't Know He Had It in Him to Kill Me", *Nonlethal Firearms Use and Partner Violence Against Canadian Women*, *Journal of Forensic Social Work*, 5, 2015, p. 131.

⁸ Lacmanović, V., „Femicid u Srbiji: potraga za podacima, odgovorom institucija i medijska slika“, *Series Historia et Sociologija*, 29(1), 2019.

⁹ Božanić, D., *Gender and Small Arms in Serbia*, South Eastern and Eastern Europe Clearinghouse for the Control of Small Arms and Light Weapons (SEESAC), Beograd, 2019, pg. 4. Available at: https://www.seesac.org/f/docs/Gender-and-SALW/Gender-And-Small-Arms_SERBIA_ENG_WEB.pdf [accessed 6. 2. 2023].

¹⁰ OSCE Serbia, *OSCE-led survey on violence against women: Wellbeing and safety of women*, 2019, pg.. 43. Available at: https://www.osce.org/files/f/documents/e/4/419750_1.pdf [accessed 6. 2. 2023]; Lacmanović, V., *Kad institucije zakažu ostaje tišina – Analiza institucionalnog odgovora na prijave nasilja koje su prethodile femicidima*, Autonomous Women's Center, Belgrade, 2022, pg. 41. Available at: https://www.womenngo.org.rs/images/publikacije-dp/2022/Kad_institucije_zakazu_ostaje_tisina.pdf [accessed 6. 2. 2023].

¹¹ Akbas et al., "The Depth of Trauma: The Children Left behind after Femicide in Turkey", *International Social Work*, 65(1), 2022, pp. 110–123.

are faced with solving one of the most complex social problems¹², through a practice that is sometimes very complicated, stressful and emotionally demanding¹³, are key in reducing the indicated consequences. In compliance with the obligations assumed by international law, primarily the **Convention on preventing and combating violence against women and domestic violence**¹⁴, to which Serbia is also a signatory, the obligation to fulfill 'due diligence' is very important and it implies that states must prevent human rights violations in the context of intimate partner violence and violence against women¹⁵, including the protection of the right to life¹⁶. The list of tasks that the state must fulfill in this regard includes the following seven areas: 1) prevention 2) protection 3) awareness-raising and adherence to non-discrimination¹⁷ and prohibition of violence against women, 4) investigation, 5) criminal prosecution, 6) sentencing, 7) compensation for acts of violence against women.

Two studies on femicides committed with firearms were recently conducted in Serbia - *Analysis of cases of femicides committed with firearms (June 2017 - June 2020)*¹⁸ and *Domestic violence and firearms misuse*¹⁹ written within the first part of the project 'Reduce risk, increase safety - Towards reducing the misuse of firearms in the context of domestic violence', which was implemented by the United Nations Development Program (UNDP) in Serbia. **The studies aim to determine the prevalence and describe the characteristics of femicides committed with firearms on the territory of the Republic of Serbia, as well as to map the institutions' shortcomings in handling these cases and to give recommendations to improve institutional practice and prevent further gender-based homicides of women.** The first study was based on the collection and analysis of media articles, and the second one on a research into the practice of institutions of the criminal justice system in response to domestic violence committed through misuse or threat of misuse of firearms, supplemented by focus group discussions and semi-structured in-depth interviews with public prosecutors, representatives of centers for social work and police officers.

¹² Miller et al., *Does social work have a problem with leadership?*, University of Birmingham, Birmingham, 2019, p. 238.

¹³ Earle et al., "Reflective supervision: Resource Pack", in: Flood, S. (ed.), *Reflective supervision: Resource Pack*. Research in Practice, Dartington Hall, 2017, p. 6.

¹⁴ Council of Europe, *Convention of Preventing and Combating Violence against Women and Domestic Violence*, May 11, 2011, pg. 1(5). Available at: <https://www.coe.int/en/web/conventions/full-list?module=treaty-detail&treatyid=210> [accessed 2. 2. 2023].

¹⁵ Sarkin, J., "A Methodology to Ensure that States Adequately Apply Due Diligence Standards and Processes to Significantly Impact Levels of Violence Against Women Around the World", *Human rights quarterly*, 40(1), 2018, pp 1–36.

¹⁶ Obreja, D., "Expanding Due Diligence: Human Rights Risk Assessments and Limits to State Interventions Aimed at Preventing Domestic Violence", *Groningen Journal of International Law*, 7(2), 2020, pp. 183.

¹⁷ Sarkin, J., "A Methodology to Ensure that States Adequately Apply Due Diligence Standards and Processes to Significantly Impact Levels of Violence Against Women Around the World", *op. cit.*, p. 2.

¹⁸ Lacmanović, V., *Analysis of cases of femicides committed with firearms (June 2017 – June 2020)*, United Nations Development Program (UNDP) in Serbia, Belgrade 2021. Available at: <https://www.undp.org/serbia/publications/analysis-cases-femicide-committed-firearms-june-2017-june-2020> [accessed 6. 2. 2023].

¹⁹ Konstantinović-Vilić et al., *Domestic violence and firearms misuse*, research period from June 1, 2017. to December 31, 2019, Belgrade, 2021. Available at: <https://www.undp.org/serbia/publications/domestic-violence-and-firearms-misuse> [accessed 6. 2. 2023].

The findings show that 84 women were murdered between June 2017 and June 2020 and that one in five murders was committed with a firearm. The media reported on 52 cases of domestic violence involving the misuse or threat of firearms misuse: 19 femicides committed with firearms, 19 femicides with attempted suicide, and 14 cases of domestic violence involving the threat of a firearm. **Almost 95% of the analyzed cases of femicide committed with a firearm were committed in an intimate partner relationship.** Most of the murdered women, as well as the perpetrators, were between the ages of 46 and 55. In the majority of cases, a gun was used, and in one-third of the cases the firearm was in the legal possession of the perpetrator. **High-risk factors have been identified:** leaving the perpetrator by the victim (68% of cases), the perpetrator's jealousy (63%), the victim's fear of the perpetrator or that the perpetrator will kill her (47%), and following and stalking by the perpetrator (26%). Almost two-thirds of femicides were committed in a private space, while one-third were committed in public places. After the homicide, 78.9% of the perpetrators attempted or committed suicide.

However, these studies did not investigate separate cases of femicide-suicide, which **have specificities regarding other cases of femicide**, as indicated by foreign literature. For example, two risk factors emerged that were unique to femicide-suicide cases compared to the overall femicide risk analysis: previous suicide threats and victims who were once married to the perpetrator,²⁰ 3), while others point out that women who are not married are more often killed with firearms than married women²¹, access to firearms²² and employment of the perpetrator in security services²³. The above indicates that this distinction is not easy to make, but also that the **cases of femicide followed by suicide require additional analysis.**

Also, the **methodologies used in the research have limitations and the reliability of the data is questionable.** Journalists do not write about all cases of femicide. In addition, some data cannot be collected because the media articles lack them (for example, there is no data on whether the victims or family members owned firearms, nor are there epilogues of the cases). A large number of articles have been written about some cases, while only a few have been written about others. Some data are not explicitly stated but could be indirectly concluded, but such data are subject to different interpretations. The key limitation of the data analysis on the practice of criminal justice authorities is the impossibility of finding out certain data that have been anonymized. There is so much data missing that it is difficult to generalize the findings. Also, the research material consists only of the decisions of public prosecutors and court decisions.

²⁰ Campbell et al., "Risk Factors for femicide-suicide in abusive relationships: Results from a multisite case control study", in: Campbell, J. C. (ed.), *Assessing dangerousness: Violence by batterers and child abusers*, 2nd ed., Springer Publishing Company, New York, NY, US 2006, p. 3.

²¹ Cavlak et al., "Analyzing two decades of intimate partner femicide-suicides in Türkiye", *Journal of Forensic and Legal Medicine*, 94, 2023, p. 4.

²² Sivaraman et al., "Association of State Firearm Legislation With Female Intimate Partner Homicide", *American Journal of Preventive Medicine*, 56(1), 2019, p. 125.

²³ Cavlak et al., "Analyzing two decades of intimate partner femicide-suicides in Türkiye", *op. cit.*, p. 6.

Therefore, the aim of this research was to shed light on the characteristics of the phenomenon of an intimate partner femicide committed with a firearm followed by the perpetrator's suicide, in order to assess the circumstances and factors that had preceded it and to improve institutional practice and prevent further gender-based murders of women. **We also wanted to overcome the methodological limitations** of previous research by applying the triangulation of data obtained through the analysis of media articles, analysis of response from relevant institutions, through focus group discussions with representatives of key institutions (BPPO - Basic public prosecutor's office, PD - Police department, CSW – centers for social work), and semi-structured interviews with women who survived a threat/ attack with a firearm.

This report was written as another contribution to the existing efforts of women's and international organizations in order to prevent and combat femicide while recognizing the necessity of a comprehensive, multi-sectoral, coordinated response to this problem at all levels, the importance of educating and raising awareness in the professional and wider social community, and the necessity of action by various participants to prevent and combat this crime. **It comprises several chapters.** After the **introduction**, which concerns the very recognition of the importance of addressing the problem of femicide followed by suicide committed with a firearm and the aim of the research, the **second part** provides a review of previous research in this area. The **third part** summarizes the characteristics of femicide in Serbia focusing on femicide-suicide committed with a firearm, while the **fourth part** lists the results of research on the characteristics and prevalence of femicide followed by suicide committed with a firearm. The **fifth part** concerns the risk analysis of femicide-suicide committed with a firearm. The **sixth part** includes an analysis of the institutional response to femicide and mapped challenges in focus group discussions and in interviews with women survivors of domestic violence. The **seventh part** rounds up insights and formulates recommendations for improving knowledge and actions of professionals in the system of protection against violence, as well as raising social awareness of the studied topic.

On this occasion, we would **like to thank** the professionals from the higher and basic public prosecutor's offices, police departments and police stations, centers for social work and safe houses throughout Serbia, who showed great willingness and motivation to share their experience in working on cases of femicide and femicide-suicide committed with firearms, thus shedding light on this phenomenon together and improving the existing practice. We owe special thanks to the women who survived and mustered the strength to talk about their tragic experiences. We also owe a great deal of gratitude to our mentors, Nada Polovina, PhD and Tanja Ignjatović, PhD, who, with their great knowledge and many years of experience in practice, also contributed to the enlightening of others about the phenomenon of femicide-suicide and the formulation of recommendations for improving the institutional practices for their prevention and alleviation of consequences.

The background features a stylized landscape with rolling hills in various shades of blue, from a deep teal at the top to a light sky blue at the bottom. A bright orange semi-circle representing a rising sun is positioned behind a hill in the upper-middle section.

2.

THEORETICAL FRAMEWORK

The issue of violence against women as a violation of human rights is one of the significant problems on the global agenda. **Although interest and research on femicide have increased in the past ten years, analysis of femicide followed by suicide is still rare. Femicide followed by suicide differs from both the phenomenon of suicide and individual homicide**²⁴. Throughout history, suicide (explained by inward-directed aggression) and homicide (explained by outward-directed aggression) have been widely discussed in the literature, while the phenomenon of homicide followed by suicide has remained neglected since it was considered a combination of completely opposite actions²⁵. The rate of homicide-suicide cases has been relatively stable in the last twenty-five years, but also the inability to reliably predict and prevent them²⁶. The neglect of the phenomenon is also a reflection of the fragmentation of approaches, research and actions within different disciplines (psychology, police and justice, psychiatry). In the theoretical-conceptual space, interdisciplinary cooperation (pushing different trends) has been missing for many years, which is partly reflected in the problems of the absence of interdisciplinary cooperation in practice. In this sense, from the domain of psychiatric observations of phenomena - the question of aggression, femicide and femicide-suicide cases were discussed in the context of the relationship between aggression and depression, indicating that the presence of depression increases the risk for general aggression toward an intimate partner and also self-aggression²⁷.

Statistics on femicide followed by suicide vary from country to country, ranging from 18% to 40% of all femicides²⁸. The rate of femicide followed by suicide in Türkiye is lower than the rate recorded internationally. Researchers state that this is a difference related to cultural norms in the Eastern Mediterranean region, which has the lowest suicide rate globally because suicide is culturally perceived as unacceptable. Although femicide is also considered culturally unacceptable behavior, the authors claim that in that case, the effects of norms of gender inequality are stronger²⁹.

Femicides followed by suicide are far less frequent than suicides and homicides individually. They mostly happen in a domestic-partner relationship context and, more often than other forms of homicides, they involve other victims³⁰. The relationship between the victim and

²⁴ Carmichael *et al.*, "Premeditated versus "passionate": patterns of homicide related to intimate partner violence", *Journal of Surgical Research*, 230, 2018, p. 92.

²⁵ Adler, J. S., "If we can't live in peace, we might as well die': homicide-suicide in Chicago, 1875-1910", *Journal of Urban History*, 26(1), 1999, p. 4.

²⁶ Podlogar *et al.*, "Advancing the prediction and prevention of murdersuicide", *Journal of Aggression, Conflict and Peace Research*, 10, 2018, p. 223.

²⁷ Dutton *et al.*, "Depression as a risk marker for aggression: A critical review", *Aggression and Violent Behavior*, Volume 18, Issue 2, 2013; Rosenbaum, M., "The role of depression in couples involved in murder-suicide and homicide", *The American Journal of Psychiatry*, 147(8), 1990, pp. 1036-1039.

²⁸ Mathews *et al.*, "Intimate femicide-suicide in South Africa: a cross-sectional study", *Bulletin of the World Health Organization*, 86(7), 2008, p. 552; Adinkrah, M., "Intimate partner femicide-suicides in Ghana: Victims, offenders, and incident characteristics", *Violence Against Women* 2014, 20, 2014; Sorrentino *et al.*, "Risk Factors for Intimate Partner Femicide-Suicide in Italy: An Ecological Approach", *International Journal of Environmental Research and Public Health*, 19, 2022, p. 1; Zimmerman *et al.*, "Examining the Factors that Impact Suicide Following Heterosexual Intimate Partner Homicide: Social Context, Gender Dynamics, and Firearms", *Journal of Interpersonal Violence*, 38(3/4), 2023, p. 2851.

²⁹ Cavlak *et al.*, "Analyzing two decades of intimate partner femicide-suicides in Türkiye", *op. cit.*, p. 5.

³⁰ Liem *et al.*, "Homicide-Suicide in the Netherlands: An Epidemiology", *Homicide Studies*, 13(2), 2009, p. 113.

the perpetrators is of great importance for understanding the dynamics of these cases and shows that the closer the relationship between the perpetrators and the victims, the higher the probability that they will commit suicide after the murder³¹. One earlier analysis of risk factors that included comparative data from the US, Australia, Canada and Sweden found that the rate of intimate partner femicide followed by suicide was about 25%, compared to non-intimate partner femicide followed by suicide which makes up only 5% of all femicides³². Also, in a quarter of the femicide followed by suicide cases, the perpetrators killed other people, mostly women and children³³.

It is also more likely that the perpetrator will commit suicide after the murder if the means of execution is a firearm, and not some other form or method of execution³⁴. Perpetrators of homicide followed by suicide are usually middle-aged³⁵. In general, perpetrators of homicide followed by suicide tend to use firearms, most often they are middle-class men³⁶, middle-aged, married, with a history of domestic violence³⁷, while the victims are mostly women³⁸. **Other studies also show that intimate partner murder followed by suicide is a gender-specific problem, that in most cases women who killed their partners previously experienced violence from them,³⁹ and that it is extremely unlikely that a woman will commit suicide after murdering her partner⁴⁰.** The same is indicated by an analysis from Norway that covered a period of 22 years, in which there was only one woman among the perpetrators of intimate partner murder followed by suicide⁴¹. The researchers also note that there is a growing number of studies dealing with intimate partner femicide, but they mostly focus on the victim's and perpetrator's characteristics and risk factors, neglecting the gender aspect of violence and considering this issue generally as a form of homicide without taking into account the gender perspective⁴².

³¹ Liem, M., "Homicide followed by suicide: a review", *Aggression and Violent Behavior*, 15(3), 2010, p. 75.

³² Campbell et al., "Risk Factors for femicide–suicide in abusive relationships: Results from a multisite case control study", *op. cit.*, p. 128.

³³ Cavlak et al., "Analyzing two decades of intimate partner femicide–suicides in Türkiye", *op. cit.*, p. 4.

³⁴ Banks et al., "A Comparison of Intimate Partner Homicide to Intimate Partner Homicide–Suicide", *Violence Against Women*, 14(9), 2008, p. 1071.

³⁵ Liem, M., "Homicide followed by suicide: a review", *op. cit.*, pp. 74–75.

³⁶ *Ibid.*; Podlogar et al., "Advancing the prediction and prevention of murdersuicide", *op. cit.*, p. 223.

³⁷ Schwab-Rees et al., "Factors contributing to homicide–suicide: differences between firearm and non-firearm deaths", *Journal of Behavioral Medicine*, 42, 2019, p. 682.

³⁸ Santos-Hermoso et al., "Is Homicide Followed by Suicide a Phenomenon in Itself? A Comparison of Homicide and Homicide–Suicide in Spain", *Journal of Interpersonal Violence*, 37(11–12), 2022, p. 9883; Panszak et al., "Incidence and risk factors of homicide–suicide in Swiss households: National Cohort study", *PLoS ONE*, 8(1), 2013, p. 3.

³⁹ Matias et al., "Intimate partner homicide in Portugal: What are the (as)symmetries between men and women?", *European Journal on Criminal Policy and Research*, 27(4), 2021, p. 471.

⁴⁰ Standish et al., "Gendered pandemics: suicide, femicide and COVID-19. Gendered pandemics: suicide, femicide and COVID-19", *Journal of Gender Studies*, 30(7), 2021, p. 808.

⁴¹ Vatnar et al., "A Comparison of Intimate Partner Homicide With Intimate Partner Homicide–Suicide: Evidence From a Norwegian National 22-Year Cohort", *Journal of Interpersonal Violence*, 36(17–18), 2021, p. 8249.

⁴² Sorrentino et al., "Risk Factors for Intimate Partner Femicide–Suicide in Italy: An Ecological Approach", *op. cit.*, p. 2.

In the literature, the **perpetrator's access to firearms**⁴³ and the **perpetrator's employment in the security services**⁴⁴ are cited as the two most prevalent risk factors for femicide-suicide related to weapons. Police work includes factors that increase the risk of an aggressive reaction in general in terms of aggressiveness, domestic violence, exposure to violence and the availability of firearms related to the work they do,⁴⁵ and the increase in the employment of men in private security companies has influenced the increase in the rate of femicide in intimate partner relationships⁴⁶.

Bivariate analysis showed a connection between certain characteristics of intimate partner femicide-suicide and the use of firearms in the sense that **unmarried women were more often killed by firearms than married women**; that if the perpetrator **planned the crime, firearms were used more often** (89.3%), in contrast to unplanned cases where this rate is 74%. If the perpetrator **committed suicide immediately after the murder, the use of a firearm is more frequent** than if he did so within a longer period of time after the femicide. If both murder and suicide were committed by the same method, then it is most often a firearm (91.8% of cases), and the use of a firearm is more common in cases where the perpetrators died compared to those in which they lived⁴⁷. Almost all analyzed studies and research indicate that access to firearms, regardless of whether they are legal or illegal, is a significant risk factor for femicide followed by suicide and, that adequate regulation and control of possession and use of firearms could help reduce this problem as more restrictive firearms legislation is associated with lower rates of intimate partner femicide⁴⁸.

It has been noted that these cases of femicide-suicide in both partner and family relationships are accompanied by a **high degree of brutality with multiple wounds to the victim's face and head**. In over two-thirds of the samples, the data indicate that the perpetrator not only wants to take the victim's life but also wants to destroy her face or disfigure her with multiple gunshot wounds to the face⁴⁹. A 20-year analysis of this problem in Türkiye showed that in 66.9% of cases the perpetrator fired more than one shot at the victim and that in more than half of the cases he aimed at the victim's head⁵⁰.

⁴³ Mathews *et al.*, "Intimate femicide-suicide in South Africa: a cross-sectional study", *op. cit.*, p. 552; Sorrentino *et al.*, "Risk Factors for Intimate Partner Femicide-Suicide in Italy: An Ecological Approach", *op. cit.*, pp. 1, 3;

⁴⁴ Cavlak *et al.*, "Analyzing two decades of intimate partner femicide-suicides in Türkiye", *op. cit.*, p. 6; Dayan, H., "Sociocultural Aspects of Femicide-Suicide: The Case of Israel", *Journal of Interpersonal Violence*, 36(9-10), 2021, p. 5158; Liem, M., "Homicide followed by suicide: a review", *op. cit.*, p. 74; Mathews *et al.*, "Intimate femicide-suicide in South Africa: a cross-sectional study", *op. cit.*, p. 553; Sorrentino *et al.*, "Risk Factors for Intimate Partner Femicide-Suicide in Italy: An Ecological Approach", *op. cit.*, pp. 2, 9.

⁴⁵ Violanti, J. M., "Homicide-suicide in police families: Aggression full circle", *International Journal Emergency Mental Health*, 9, 2007, p. 97; Sorrentino *et al.*, "Risk Factors for Intimate Partner Femicide-Suicide in Italy: An Ecological Approach", *op. cit.*, p. 2.

⁴⁶ Sela-Shayovitz, R., "The role of ethnicity and context: intimate femicide rates among social groups in Israeli society", *Violence Against Women*, 16(12), 2010, p. 1434.

⁴⁷ Cavlak *et al.*, "Analyzing two decades of intimate partner femicide-suicides in Türkiye", p. 4.

⁴⁸ Sivaraman *et al.*, "Association of State Firearm Legislation With Female Intimate Partner Homicide", *op. cit.*, p. 125.

⁴⁹ Dayan, H., "Sociocultural Aspects of Femicide-Suicide: The Case of Israel", *op. cit.*, p. 5152.

⁵⁰ Cavlak *et al.*, "Analyzing two decades of intimate partner femicide-suicides in Türkiye", *op. cit.*, p. 4.

In relation to planning femicide followed by suicide, the views are divided. Some believe that the so-called extended suicide is rationally planned where the perpetrator's primary goal is a suicide, but at the same time he murders the family too; while others argue that it is murder in a moment of jealousy followed by suicide as a result of remorse or fear of judgment⁵¹. Earlier research found that femicide followed by suicide is more often planned compared to femicide, however, the degree of premeditation or planning depends on other factors. On the one hand, it is most certain that the perpetrators of older age and poor health will plan femicide-suicide, while for younger perpetrators, it is more likely that it will happen in a moment of jealousy⁵². Planning is recognized in leaving farewell messages (on Facebook) or comments like 'We were not aware of its value'⁵³, and in organizing finances and documentation before committing the crime⁵⁴.

The literature mentions other risk factors for femicide-suicide in intimate relationships - **history of domestic violence⁵⁵, separation of the victim and the perpetrator⁵⁶, the perpetrator's jealousy and possessiveness⁵⁷, the perpetrator's mental health issues** that include psychoactive substance abuse, addiction to alcohol, presence of depression (often combined with substance abuse and pathological jealousy) and previous threats of suicide by the perpetrator, social isolation, history of childhood abuse or witnessing intimate partner violence among parents⁵⁸, **the age gap between the perpetrator and the victim** (if the perpetrator is older than the victim, he is more likely to commit suicide)⁵⁹, **the**

⁵¹ Mathews et al., "Intimate femicide-suicide in South Africa: a cross-sectional study", *op. cit.*, p. 554.

⁵² Ellis et al., *Marital separation and lethal domestic violence*, Routledge, London, 2016, pp. 17-21.

⁵³ Cavlak et al., "Analyzing two decades of intimate partner femicide-suicides in Türkiye", *op. cit.*, p. 4.

⁵⁴ Monckton Smith, J., "Intimate Partner Femicide: Using Foucauldian Analysis to Track an Eight Stage Progression to Homicide", *Violence Against Women*, 26(11), 2020, p. 1279.

⁵⁵ Campbell et al., "Risk Factors for femicide-suicide in abusive relationships: Results from a multisite case control study", *op. cit.*, p. 140.

⁵⁶ Dayan, H., "Sociocultural Aspects of Femicide-Suicide: The Case of Israel", *op. cit.*, p. 5158; Ellis et al., *Marital separation and lethal domestic violence*, *op. cit.*, p. 42; Logan et al., "Correlates of intimate partner homicide among male suicide decedents with known intimate partner problems", *Suicide and Life-Threatening Behavior*, 49(6), 2019, p. 1072.

⁵⁷ Cavlak et al., "Analyzing two decades of intimate partner femicide-suicides in Türkiye", p. 6; Liem, M., "Homicide followed by suicide: a review", *op. cit.*, p. 119; Logan et al., "Correlates of intimate partner homicide among male suicide decedents with known intimate partner problems", *op. cit.*, p. 1072; Mathews et al., "Intimate femicide-suicide in South Africa: a cross-sectional study", *op. cit.*, p. 554.

⁵⁸ Campbell et al., "Risk Factors for femicide-suicide in abusive relationships: Results from a multisite case control study", *op. cit.*, p. 140; Capaldi et al., "A systematic review of risk factors for intimate partner violence", *Partner Abuse*, 3(2), 2012, p. 231; Dutton et al., "Depression as a risk marker for aggression: A critical review", *op. cit.*; Kafka et al., "Intimate partner violence victimization and perpetration as precursors to suicide", *Population Health*, 18, 2022, p. 2; Rosenbaum, M., "The role of depression in couples involved in murder-suicide and homicide", *op. cit.*, pp. 1036-1039.

⁵⁹ Mathews et al., "Intimate femicide-suicide in South Africa: a cross-sectional study", *op. cit.*, p. 553; Salari, S., "Patterns of intimate partner homicide suicide in later life: Strategies for prevention", *Clinical Interventions in Aging*, 2, 2007, p. 444; Sorrentino et al., "Risk Factors for Intimate Partner Femicide-Suicide in Italy: An Ecological Approach", *op. cit.*, pp. 7, 9.

presence of (mutual) children⁶⁰ and immigration⁶¹. However, it should be noted that there are contradictory findings. Data from Italy show that the perpetrator's jealousy, quarrels and conflicts correlate less with committing suicide after committing intimate partner femicide and that there is no significant correlation between the perpetrator's mental health or psychological illness and committing femicide followed by suicide⁶².

Based on the findings so far, most of the risk factors are also characteristic of femicide in general, so it is not possible to make a distinction in relation to femicide followed by suicide. In general, it could rather be concluded that the factors together, that is, their interaction and combination, lead to the suicide of the perpetrator after committing femicide and that their deeper analysis is necessary for understanding and preventing this phenomenon. In future research, it is necessary to identify the number of factors and their combinations in the context of the perpetrator's tendency to kill himself after committing femicide.

⁶⁰ Cavlak *et al.*, "Analyzing two decades of intimate partner femicide–suicides in Türkiye", *op. cit.*, p. 4; Sorrentino *et al.*, "Risk Factors for Intimate Partner Femicide–Suicide in Italy: An Ecological Approach", *op. cit.*, p. 7; Vatnar *et al.*, "A Comparison of Intimate Partner Homicide With Intimate Partner Homicide–Suicide: Evidence From a Norwegian National 22-Year Cohort", *op. cit.*, pp. 8241–8242;

⁶¹ Dayan, H., "Sociocultural Aspects of Femicide–Suicide: The Case of Israel", *op. cit.*, p. 5161; Garsen, Hoo-genboezem, Kerkhof, 2006, 2007, citirano u: Liem *et al.*, "Homicide–Suicide in the Netherlands: An Epidemiology", *op. cit.*, p. 117.

⁶² Sorrentino *et al.*, "Risk Factors for Intimate Partner Femicide–Suicide in Italy: An Ecological Approach", *op. cit.*, p. 8.



3.

RESEARCH METHODOLOGY

The subject of the research was the cases of intimate partner femicide-suicide committed with a firearm. Four elements are key – femicide, suicide, firearms and intimate partner relationship. According to feminist theorists Caputi and Russell, the term femicide means the murder of women by men out of hatred, contempt, pleasure or a sense of ownership of women, i.e. sexism⁶³. Suicide meant the perpetrator taking his own life immediately or up to two days after the femicide, although death could have occurred later. Firearms included pistols, rifles and bombs. We defined an intimate partner relationship as the presence of the partners' emotional involvement, regardless of the duration and form (marriage, cohabitation, emotional and sexual relationship, current or former).

The aim was to determine the characteristics of femicides followed by suicide committed with firearms on the territory of the Republic of Serbia, as well as to map institutional difficulties in processing these cases and to give recommendations for improving institutional practices and the prevention of gender-based murders of women.

The methodology included: 1) the review of academic literature on cases of femicide followed by suicide; 2) secondary analysis of data collected through reports on femicide in the Republic of Serbia in the period 2010-2022 by the Autonomous Women's Center⁶⁴; 3) content analysis of media articles on cases of femicide with firearms in the period 2019-2022, especially articles on cases of intimate partner femicide-suicide; 4) analysis of data collected from competent institutions through requests for information of public importance; 5) content analysis of transcripts from three focus groups and interviews held with professionals in the violence prevention system; and 6) content analysis of transcripts of semi-structured interviews (live) or media interviews with women who survived attempted femicide or who were threatened with firearms.

Secondary analysis of data collected through reports on femicide in the Republic of Serbia in the period 2010-2022 by the Autonomous Women's Center included the following variables: femicide according to the circumstances of death, the share of perpetrators committing suicide in cases of femicide, the legality of firearm ownership, reporting violence to the institutions before the murder in all cases and in cases of the firearm misuse, the relationship between the victim and the perpetrator, the location of the femicide, the victim's age, the number of children who lost their mother because of femicide.

Content analysis of media articles on cases of femicide with firearms in the period between 2019-2022, especially the articles on cases of intimate partner femicide-suicide, was based on the following indicators: 1) **the victim's characteristics** (age, education, employment, nationality, new partner/husband, previous marriage/partner relationship, fear of the perpetrator, mental and physical health /alcohol abuse /psychoactive substances abuse); 2) **the perpetrator's characteristics** (age, education, employment, nationality, new partner/wife, previous marriage/partner relationship, mental and physical health /alcohol abuse / psychoactive substances abuse, history of crime/violence/firearms misuse, access to firearm (occupation, hobby, participation in armed conflicts); 3) **characteristics of the**

⁶³ Caputi et al., "Femicide: Speaking the unspeakable", *The World of Women*, 1(2), 1990, pp. 34–37.

⁶⁴ Autonomous Women's Center, Reports and press releases on femicide in Serbia, *op. cit.* Available at: <https://www.womenngo.org.rs/publikacije/izvestaji-o-femicidu-u-srbiji> [accessed on 6. 2. 2023].

relationship between the victim and the perpetrator (type of relationship, children, custody conflict, threats to/injury of children, previous violence against the victim, leaving/planning to leave the partner, controlling behavior, work/life abroad), 4) **characteristics of the event** (month, year, day of the week, time, region, type of settlement, place of murder, extended suicide, presence of children, type of weapon/firearm, ownership and legality of weapons, previous threats with weapons/firearms, suicide threats) and 5) **institutional response** - PD, BPPPO, CSW (the case was not reported, reported without any action, reported and the institution reacted), confiscation of weapons/firearms, imposed measures. A total of 803 media articles were reviewed. In the mentioned period, 27 cases of femicide committed with firearms were determined, namely 7 femicides, 1 femicide with attempted suicide and 19 cases of femicide with suicide, 16 of which were committed in an intimate partner relationship. **These 16 cases of femicide - suicides were the subject of a more thorough analysis.**

Thirty-two requests for information of public importance were submitted to the following competent institutions: regarding the perpetrators' sentencing for femicide - the higher public prosecutor's offices in Belgrade, Jagodina, Kragujevac, Novi Sad, Sombor, Sremska Mitrovica, Šabac, Užice, Velika Plana, Zaječar; regarding the care of children after femicide-suicide - the centers for social work in Bor, Kragujevac, Kraljevo, Novi Pazar, Pančevo, Sjenica, Šid, Valjevo; regarding the reporting of domestic violence to three key institutions – BPPPO, PS and CSW in Paraćin, Petrovac na Mlavi and Velika Plana, PS and CSW Svilajnac and PD Belgrade, and concerning the findings of the control of insitutional procedures in cases of femicide-suicide - to the republic and provincial protector of citizens. The responses of three key institutions (BPPPO, PD, CSW) for 17 persons were analyzed, a total of 49 replies. We did not receive answers from 9 institutions.

Eighteen professionals from five groups for coordination and cooperation participated *in three online focus group discussions*: 3 representatives of the Higher Public Prosecutor's Office in Belgrade, 5 representatives of the Basic Public Prosecutor's Office, 5 representatives of centers for social work and 5 representatives of police stations. Two-hour long focus groups were held on 2nd February (9 participants, Palilula and Zemun), 3rd February (6 participants, Novi Sad and Sombor) and 8th February (3 participants, Valjevo). A *semi-structured interview* was also organized with two representatives of the Center for Social Work/Women's Safe House in Novi Sad, who gave an account of the cases of their beneficiaries. The cities where the cases of femicide-suicide identified in the media took place were selected, as well as the regions where there were the most femicide-suicides committed with firearms - Vojvodina and Western Serbia, and the region with the lowest number of femicide-suicides - Belgrade. Questions in the focus group discussions and interviews related to two topics - 1) the specificity of intimate partner femicide-suicides committed with firearms and the recognition of the risks for their prevention, and 2) the institutions' response and necessary support.

A semi-structured interview was conducted with one beneficiary of the Women's Safe House, a woman who survived domestic violence and threats of murder and suicide, and whose husband committed suicide by hanging. Media interviews with a woman who survived a gun

attack by her ex-partner⁶⁵, who committed suicide with the same weapon, were also analyzed. *The focus of the interviews with the women* was on their understanding of the threats (risks), strategies they used to protect themselves, recommendations to other women with similar experiences, reporting violence and the perception of support from institutions.

The *limitation* of the research lies primarily in the application of the content analysis on unreliable and incomplete material - media articles. However, this methodology is common in such research, and it can also be seen in foreign literature. There are two key reasons for this. Firstly, many participants of femicide-suicides are not reported to institutions. Secondly, institutions are reluctant to provide data or provide scant data due to the personal data protection of femicide-suicide participants. Therefore, these findings are supplemented with data collected through focus group discussions and semi-structured interviews with representatives of institutions, as well as requests for information of public importance addressed to the same institutions. The institutions' delay to respond to requests or refusal to respond to requests, due to their procedures, appeared as an additional limitation. During the analysis of the literature, terminological and methodological differences emerged regarding the scope, definition and analysis of homicide and suicide with a gender perspective. Working with women survivors is challenging due to the sensitivity of the topics and the danger of the victim's secondary victimization or re-traumatization of the victim's and the perpetrator's children and family members.

Ethical review - in the research process, some of the collected data were not shown in the report, and all activities, as well as the report itself, were designed in accordance with the principles of informed consent and privacy policy, with full awareness of the importance of preserving the dignity and reputation of the victims, their children and other family members and the danger of secondary victimization and re-traumatization.

⁶⁵ Available at: *Praktična žena – Marina Minić: bivši dečko je pucao na nju 4 puta i prikovao je za kolica* - Bing video; (152) *STRAŠNA ISPOVEST: ČETIRI METKA ZBOG LJUBAVI* - YouTube; <https://youtu.be/29z33jhR2Y> [accessed 20. 2. 2023].

The background features a stylized landscape with rolling hills in various shades of blue and purple. An orange semi-circle, representing a sun or moon, is positioned behind the hills in the upper right quadrant.

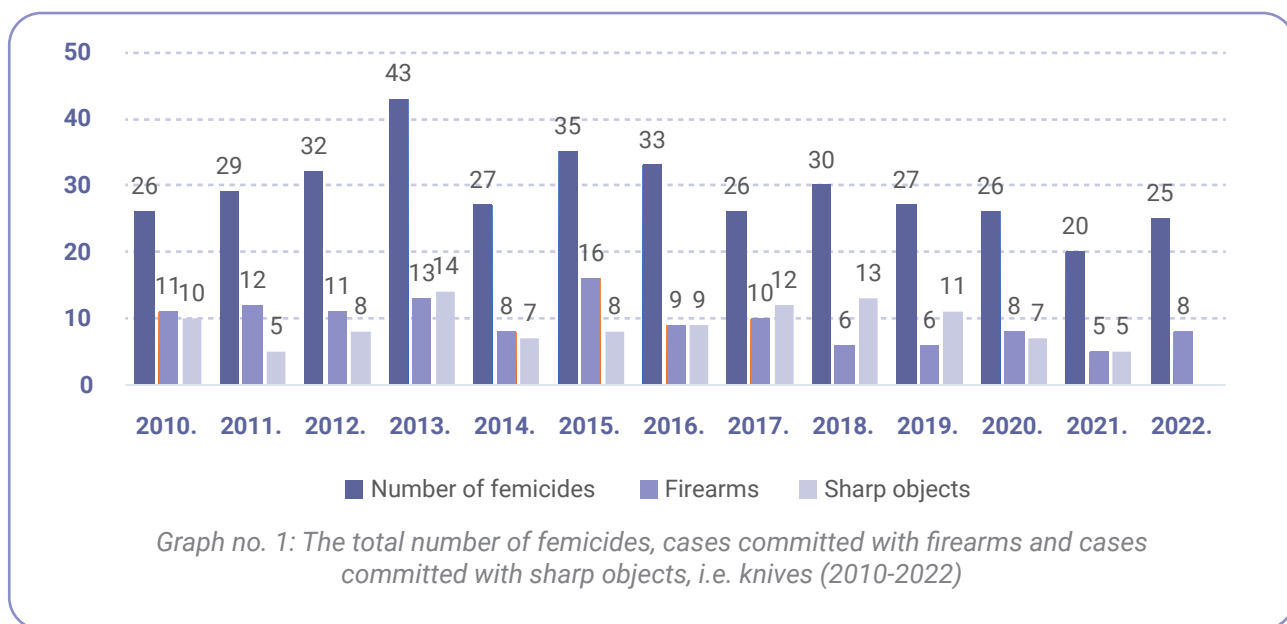
4.

**CHARACTERISTICS
OF FEMICIDE IN
SERBIA WITH
A FOCUS ON
FEMICIDE-SUICIDE
COMMITTED WITH
A FIREARM**

Detailed insight into the phenomenon of femicide in Serbia can be provided based on the existing reports of women’s organizations and the results of earlier research since there are no unified and official statistics on femicides in Serbia⁶⁶. This type of research is mostly based on media reports since judicial statistics do not keep data on perpetrators of crimes who committed suicide after the murder⁶⁷.

From the analysis of annual reports on femicide in Serbia between 2010-2022 (Autonomous Women’s Center and the “Women Against Violence” Network⁶⁸), key aspects of this phenomenon were obtained, with an understanding of methodological limitations that prevent direct comparison of all data in the indicated period⁶⁹.

Graph no. 1 shows the total annual number of femicides, and **the number of these events ranged between 43 (2013) and 20 (2021) femicides**. Mass murders are mainly the reason for the increased number of women killed. Thus, in 2013, 13 people died in mass murder in the village of Velika Ivanča in the municipality of Mladenovac, of which seven were women; in 2015, a mass murder occurred in Martonoš near Kanjiža, where seven people were killed, four of whom were women; and in 2016, there was a mass murder in Žitište, when five people were killed, two of them women and 22 people were injured. In two out of the three cases, the perpetrators were participants in armed conflicts in the 1990s, and in one case, the weapons came from the war zone (family members moved from the war zone).



⁶⁶ Petrušić et al., *Društveni i institucionalni odgovor na femicid u Srbiji II*, Udruženje građanki „FemPlatz“, Pančevo, 2019, pg. 112. Available at: https://www.femplatz.org/library/publications/2019-11_Femicid_monografija_Druga_publikacija_E_primerak.pdf [accessed 20. 2. 2023].

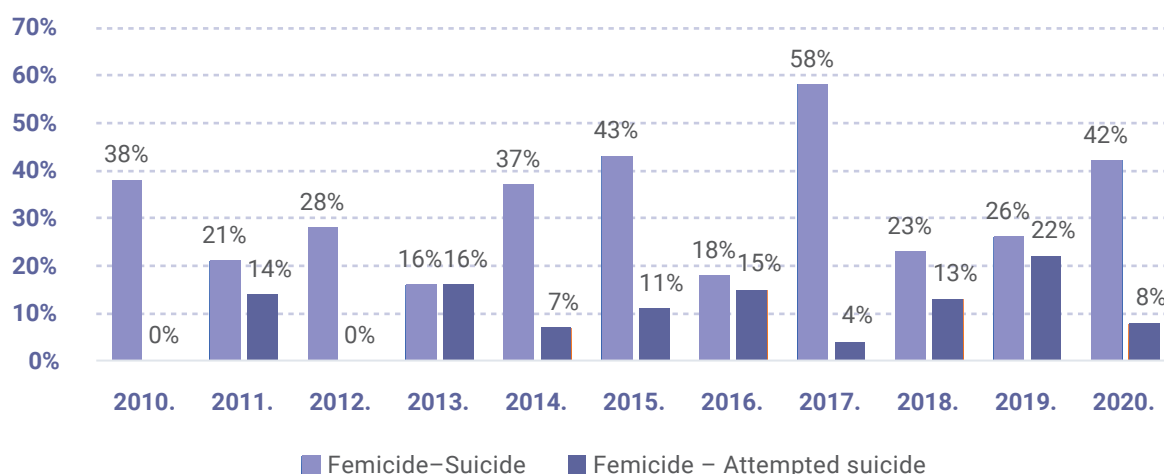
⁶⁷ Petrušić et al., *Društveni i institucionalni odgovor na femicid u Srbiji II*, Udruženje građanki „FemPlatz“, Pančevo, 2019, pg. 112. Available at: https://www.femplatz.org/library/publications/2019-11_Femicid_monografija_Druga_publikacija_E_primerak.pdf [accessed 20. 2. 2023].

⁶⁸ Reports are available at: <https://www.zeneprotivnasilja.net/femicid-u-srbiji>.

⁶⁹ Indicators for collecting data from the analysis of printed media content were established during this period, which conditioned their development with the increase in knowledge about the importance of certain information and risks. In these reports, only gender-motivated homicide of women is designated as femicide (the murder committed by a man motivated by misogyny, feeling of superiority and experiencing the right to take a woman’s life).

The number of femicides since 2017 is less than 30, with oscillations most often between 27 and 25 murdered women, except for 2021 when media content analysis concluded that 20 women were killed. Also, the number of femicides committed with firearms until 2015 is generally higher compared to the murders committed with sharp objects (knives), and after that period it decreases (with less oscillation). In discussions with representatives of institutions, this change is related to the start of the implementation of the Law on Prevention of Domestic Violence⁷⁰ (2017) and the binding instruction of the Ministry of Interior on checking weapon ownership for every reported violence (including conflicts), regardless of where it happened (private or public place) and regardless of the nature of the participants' relationship.

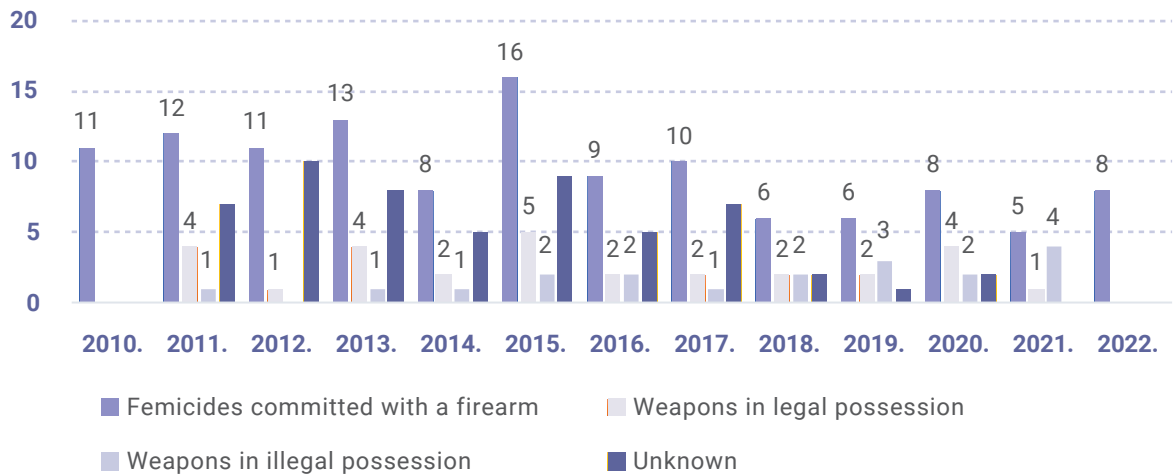
Murders of women followed by suicide and attempted suicide oscillate during the observed period with a peak in 2017 and in the years of mass murders (2014-2015), but also in the years when there is a decrease in the use of firearms as a means of homicide and suicide (2017, 2019 and 2020), as shown in Graph no. 2.



Graph no. 2: The percentage of femicides followed by suicide and the percentage of femicides followed by attempted suicide in relation to the total number of femicides (2010-2020)

The account on the legality of the firearm used to commit femicide followed by suicide or attempted suicide confirms that this information is mostly omitted in media reports, as well as that information on whether the weapon is in legal or illegal possession has been appearing increasingly more since 2014. Based on the available data, a conclusion can be drawn but with caution, that slightly more weapons were in legal possession in the earlier years compared to the later period (since 2019) when weapons used to commit femicide were more often in illegal possession. This is presented in Graph no. 3.

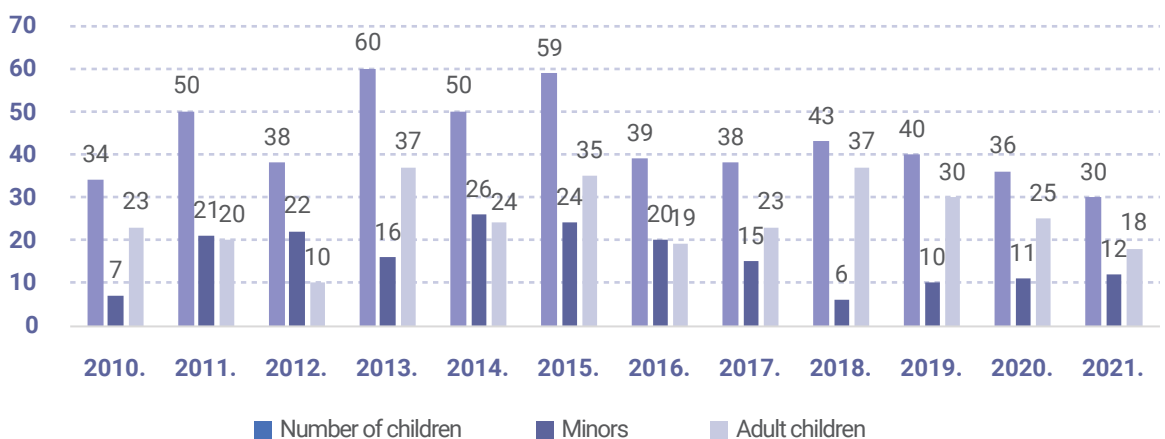
⁷⁰ Law on Prevention of Domestic Violence, *Official Gazette of the Republic of Serbia*, no. 94/16, 10/23 – other law.



Graph no. 3: Number of weapons used to commit femicide and suicide in relation to legal or illegal possession of weapons and missing data about this aspect (2010-2020)

In the observed period, data on the linkages between the previous report of violence and femicide committed with a firearm was not consistently monitored. Therefore, it is not possible to conclude whether the implementation of the Law on Prevention of Domestic Violence (from mid-2017) and the binding instruction of the Ministry of Interior on the confiscation of firearms for each reported incident of violence (in 2018) led to a (significant) reduction in the number of homicides with firearms in cases of domestic violence and partner violence that had been previously reported to institutions.

Graph no. 4 shows that the number of children left without mothers after femicide is the highest in the years of mass murders (2013 and 2015) and that in other years it ranged between 30 and 50 children, with a decrease in the number in the last three observed years. Although, in some years, the number of minor children is higher or equal to the number of adult children who were left without a mother, **there are generally more adult children**, which corresponds to a somewhat older sample of perpetrators and their victims.



Graph no. 4: Number of children - minors and adults, who were left without a mother after femicide (2010-2021)

The gender dimension of armed violence is reflected in the fact that men are the majority of perpetrators (94.7%) and victims (82.4%) of this type of violence in Serbia, but in the domestic context, this violence disproportionately affects women, who make two-thirds of those killed in this context, and the possibility of fatal outcomes is three times higher in a domestic than in a criminal context⁷¹. In the last twelve years, **the number of femicide cases committed with a firearm varies from 20% in 2018 to 45.71% in 2015 in the total number of recorded femicides, while the number of femicides followed by suicide varies from 18.16% in 2016, up to 57.69% in 2017 in the total number of femicides**⁷². Suicide most often follows femicide, if the means of execution is a firearm (in relation to some other type of weapon), and in these cases, the method of executing the homicide and suicide is usually the same - a firearm, unlike other methods of homicide (sharp objects, strangulation, use of physical force) in which the perpetrator most often hangs himself after committing the murder⁷³.

In Serbia, women are most often killed by their partners, and the rate of men murdered by women is fifteen times lower than the rate of women murdered by men⁷⁴. The strong correlation between a partner relationship and the use of firearms as a means of execution is indicated by data from an earlier analysis that showed that 95% of femicides, 84% of attempted femicides, and 86% of threats with firearms **were committed in a partner relationship context**⁷⁵. The place of execution of femicide with a firearm is **most often the perpetrator's and the victim's private space, and it happens twice as often in urban than in rural areas**⁷⁶. In the context of the type of firearm, perpetrators of violence against women⁷⁷, but also perpetrators of femicide, **most often use a pistol/revolver**⁷⁸. In terms of execution dates, the most common are Mondays and Sundays. **The highest number of victims and perpetrators were between the ages of 46 and 55**, and a large number of perpetrators were in the age group of people over 65⁷⁹. **Femicide followed by suicide compared to femicide in general is far more often followed by the so-called 'linked murders'** when, in addition to the murder of the partner, the perpetrator takes the life of one or more other persons, and

⁷¹ Institut društvenih nauka – „Rodna dimenzija zloupotrebe vatrenog oružja u porodičnom kontekstu u Srbiji” -Institute of Social Sciences „Gender dimension of firearms misuse in a domestic context in Serbia”, lecture, Belgrade (undated). Available at: https://idn.org.rs/sr_lat/blog/2021/11/04/rodna-dimenzija-zloupotrebe-vatrenog-oruzja-u-porodicnom-kontekstu-u-srbiji/ [accessed 22. 2. 2023].

⁷² Autonomous Women's Center, Reports and press releases on femicide in Serbia, *op. cit.*

⁷³ Spasić *et al.*, „Femicid u partnerskim odnosima” (Femicide in Partner Relationships), *Temida*, 20(3), 2019, pg. 427, 429; Spasić, D., „Kontrola vatrenog oružja i rodno zasnovano nasilje: link koji nedostaje” (Firearms control and gender-based violence: the missing link”, *Teme – Časopis za društvene nauke (Teme- Social Sciences Paper)*, 44(4), 2020, pg. 1522.

⁷⁴ Simeunović-Patić, B., „Ubistva heteroseksualnih partnera: kriminološke i viktimološke karakteristike” (Murders of heterosexual partners: criminological and victimological characteristics), *Temida*, 5(3), 2002, pg. 6.

⁷⁵ Lacmanović, V., *Analysis of cases of femicide committed with firearms (June 2017 – June 2020)*, United Nations Development Programme (UNDP), Belgrade, 2021, pg. 7. Available at: <https://www.undp.org/serbia/publications/analysis-cases-femicide-committed-firearms-june-2017-june-2020>.

⁷⁶ *Ibid.*

⁷⁷ Konstantinović-Vilić, S., Petrušić, N., Žunić, N., Beker, K., *Domestic Violence and Firearms Misuse*, research period June 1, 2017 – December 31, 2019, Belgrade, 2021, pg. 4. Dostupno na: <https://www.undp.org/serbia/publications/domestic-violence-and-firearms-misuse>.

⁷⁸ Lacmanović, V., *Analysis of cases of femicide committed with firearms (June 2017 – June 2020)*, *op. cit.*, pg. 27.

⁷⁹ *Ibid.*, pg. 30–31.

this is more common when it comes to murdering women under 40 years old compared to murdering older women⁸⁰.

As in foreign studies, the same femicide risk factors were identified in our country: separation of the victim and the perpetrator (divorce, breakup); the perpetrator's possessive/intense jealousy; the victim's fear of the perpetrator; history of violence against the same or other victims; history of criminal behavior; threats of murder and suicide; legal possession of weapons; the perpetrator stalking the victim; alcohol abuse by the perpetrator; job-related availability of weapons to the perpetrator; the perpetrator's and/or victim's serious illness; alcoholism, violent conflicts to resolve issues in general; verbal aggressiveness with threats of murder⁸¹. Although these risk factors indicate that femicide will occur, it is necessary to examine their correlation in terms of the perpetrator's tendency to commit suicide after killing the woman.

Apart from **the widespread use of firearms by civilians** in the Western Balkans, with Serbia and Montenegro in lead positions⁸², the possibility of obtaining guns quickly and easily⁸³ and their availability, represent one of the most common risks of femicide⁸⁴. An additional danger is the war conflicts in the 1990s and the remaining illegal weapons used to commit violence against women⁸⁵, as well as the perpetrators' increasing preparedness to use firearms when committing violence if they participated in armed conflicts⁸⁶. Also, a large number of citizens legally own weapons, because the cult of weapons, as a reflection of maturity and masculinity, is extremely strong and represents an indispensable part of the 'folklore', of celebrations and times of mourning⁸⁷.

The correlation between firearms, femicide and suicide is a complex and multidimensional issue. From all of the above, it can be concluded that the context of femicide with a firearm followed by suicide in Serbia shows similar or the same patterns and trends that have already been determined in the research in other countries and the world. Almost all research shows that there is a clear causal relationship between the presence of a firearm, a partner relationship and an increased risk of suicide after committing femicide.

⁸⁰ Antović, A., *Predikcija i prevencija femicida u nasilnim partnerskim odnosima, forenzička studija (Prediction and Prevention of femicide in violent partner relationships, forensic study)*, doctoral dissertation, University of Niš – Medical Faculty, Niš, 2016, pg. 55. Available at: <https://nardus.mpn.gov.rs/bitstream/handle/123456789/7087/Disertacija6455.pdf?sequence=6&isAllowed=y> [accessed 20. 2. 2023].

⁸¹ Simeunović-Patić, B., „Ubistva heteroseksualnih partnera: kriminološke i viktimološke karakteristike“, *op. cit.*, pg. 11; Spasić, D., „Kontrola vatrenog oružja i rodno zasnovano nasilje: link koji nedostaje“, *op. cit.*, pg. 1520–1521; Lacmanović, V., *Analysis of cases of femicide committed with firearms (June 2017 – June 2020)*, *op. cit.*, pg. 44.

⁸² Spasić, D., „Kontrola vatrenog oružja i rodno zasnovano nasilje: link koji nedostaje“, *op. cit.*, pg. 1517–1518.

⁸³ Lacmanović, V., „Femicid u Srbiji: potraga za podacima, odgovorom institucija i medijska slika“, *op. cit.*, pg. 45.

⁸⁴ Spasić et al., „Femicid u partnerskim odnosima“, *op. cit.*, pg. 425.

⁸⁵ OSCE Serbia, *OSCE-led survey on violence against women: Wellbeing and safety of women*, *op. cit.*, pg. 43.

⁸⁶ Nikolić-Ristanović, V. (ur.), *Nasilje u porodici u Vojvodini*, Pokrajinski sekretarijat za rad, zapošljavanje i ravnopravnost polova, (Domestic Violence in Vojvodina, Provincial Secretariat for Labour, Employment and Gender Equality), Novi Sad, 2010, pg. 82.

⁸⁷ Spasić, D., et al., *Zloupotreba oružja i rodno zasnovano nasilje*, *op. cit.*, pg. 14.

5.

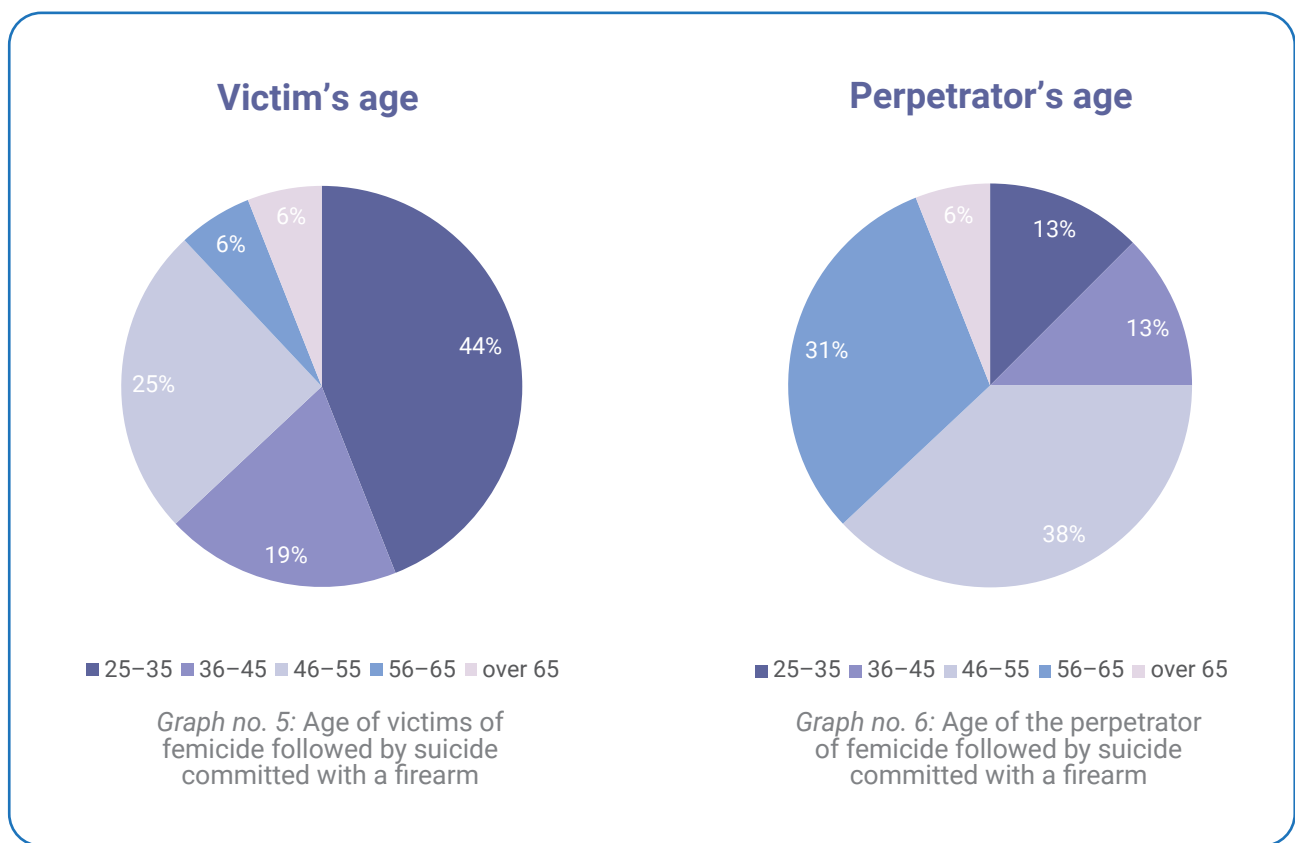
**CHARACTERISTICS
OF FEMICIDE-SUICIDE
COMMITTED WITH
A FIREARM**



Between 2019 and 2022, 27 cases of femicide committed with a firearm were identified through media analysis, 19 of which were followed by the perpetrator's suicide, 7 cases were cases of femicide, and there was one case of femicide with the perpetrator's attempted suicide. These figures already indicate that the majority of femicide cases committed with firearms are followed by suicide and that most of them are committed in intimate partner relationships. Therefore, 16 intimate partner femicide-suicide cases committed with a firearm were analyzed in depth. The characteristics of the participants and their relationships, as well as the characteristics of the criminogenic situation, are presented here.

a. The victim and the perpetrator of femicide-suicide and the characteristics of their relationship

The analysis of the victims' and the perpetrators' **age** shows that the highest percentage of the victims were middle aged - 25 to 35 years old (44%), while the perpetrators were middle aged or older, 46-55 years old (38%) and 56-65 (31%), as shown in graphs no. 5 and 6.



There is an **age gap between the partners** - the average age difference is 9.94 years, and in the majority of relationships/marriages the age difference is between 6 and 10 years (44%).

The media rarely report on the **education level of persons involved**. The victims' and the perpetrators' job descriptions imply that they mostly have secondary education, but there were also those with higher education.

Data on employment is also rarely found in the media. There is data for 69% of the victims who were employed and 56% for the perpetrators - 44% employed and 12% unemployed (one pensioner).

According to nationality, the majority of victims and perpetrators are of Serbian nationality - 62% of victims and 75% of perpetrators, but there are also members of minorities (Hungarian, Bosnian and one Roma victim) - 38% of victims and 25% of perpetrators.

A slightly higher percentage (50%) was recorded among the civil partnership type of **relationship** rather than among spouses (44%), but a significantly higher percentage was recorded for ex-partners (62.5%) than former spouses (28.6%). In 69% of the cases, the victim **announced that she was going to leave her partner/husband or had left him**. A significant data regarding the separation is that, in 44% of the cases, one or both of the partners **worked and lived abroad**, immediately before the murder or earlier. Three women had been working abroad (two expected their husbands to join them). The partners had **children together** in 31% of cases.

A previous marriage or partner relationship was mentioned in an equal percentage for both the victims and the perpetrators - 44%, and a certain number of both victims and perpetrators had children from those marriages and relationships - in 50% of the cases **they did not have children together**.

A new relationship after the breakup of the victim and the perpetrator was mentioned in the case of one woman (6%) and three perpetrators (19%).

Mental health issues in the form of depression, aggressiveness, pathological jealousy, obsessiveness, paranoia, and/or alcohol abuse were mentioned for 50% of the perpetrators, but all (except one) were functional, there is no mention of previous treatment or diagnosis of mental illness, addiction or behavioral disorders. In 81% of cases, the perpetrator **showed controlling behavior towards the victim**. Only 12% of the victims (2 women) were reported on by the media to have behaved inappropriately, i.e. had multiple partners or consumed alcohol (for one, her father said she had psychological problems), and one woman suffered from cancer (an older woman, whom the husband killed and committed suicide allegedly to ease her/their suffering). Furthermore, in 37.5% of the cases, **the perpetrators had a history of violence** (25% of the cases lack any data). In 25% of the cases, the media reported that **the perpetrator threatened with suicide before the event**, and in 37.5% of the cases, **he threatened the victim or other persons with a weapon**. In 31% of the cases, the perpetrators **had access to firearms because they were members of the police or army, they were gamekeepers or hunters** (for 12% there was no information on the availability of weapons). In 56% of cases, it was recorded that **the perpetrator had been violent towards the victim even before the murder**. It is also significant for the victims that in 44% of cases, the media reported that **they had an intense fear of the perpetrator**.

b. Characteristics of criminogenic situations

The main aspect of femicide-suicide with a firearm, which was different from the aspects of femicide, is **the location where they happened** - they happened more often in cities (69%) than in villages (31%), and in public places (56%) rather than private spaces (44%), in contrast to femicide and femicide with firearms, which happened more in private space. Femicide-suicides took place in front of the victim's home, on river embankments, at the hippodrome, in cafés, and in cars, which is partly the result of the fact that a higher percentage of them happened in partner relations and former relationships, and the perpetrator and victim did

not live together, but this could also be a message to the public 'if I can't have you, no one can'⁸⁸. This finding indicates the need for the protection of victims in public places.

The highest number of cases **occurred in the administrative regions of Vojvodina (37.5%) and Šumadija and Western Serbia (31%)**, and fewer in Southern and Eastern Serbia (19%) and Belgrade (12.5%). The cities of Vojvodina (Šid, Bečej, Zrenjanin, Subotica) also lead in terms of the number of suicides⁸⁹.

The firearms used most often were pistols (87.5%) – "tetejac" (Zastava M57, semi-automatic, 7.62x25 mm), CZ 7.65 (Zastava M70, semi-automatic), browning (9 mm, semi-automatic), scorpion (Zastava M84 , automatic pistol), Magnum 357. In only two cases no gun was used, but a rifle and a bomb. In **62.5% of the cases, there was no data about the firearms owner**, in 18.8% it was owned by the perpetrator (hunting rifle and pistol), and in equal percentage, it was owned by someone else (father and father-in-law). Firearms were in illegal and legal possession in 44% and 31% of the cases, respectively, and for 25% there is no data.

The victims were most often killed by a shot/shots to the head (two shots) and to the chest. In three cases, they were shot with a gun more than once - 4, 5 and 11 times (there were more victims). **Suicide was committed in almost all cases with the same firearm, a shot to the temple (one to the mouth).** Only in one case did the perpetrator commit suicide by hanging.

In the largest percentage, only the partner was killed and the children did not witness the act of murder. Other persons were killed in two cases only - the victim's parents and the victim's brother, and in two cases children witnessed the murder.

In one case only had **the victim reported that the perpetrator was violating the restraining order and no-contact order immediately before the tragedy**, in the other cases the abusers were not reported (there is no data for 2 cases). **Only in two cases were there reports made of domestic violence/stalking to institutions in Serbia.** Additionally, in one case there was a report of the perpetrator for violence/ stalking abroad and in one case the ex-wife (not the current partner) reported the perpetrator for domestic violence.

The analyzed femicide-suicide cases occurred in **almost equal numbers in the years in which the media analysis was carried out** - 2019 - four, 2020 - five, 2021 - four, and 2022 - three. **The most frequent month of femicide-suicide was December** - 3 cases, two cases occurred in January, May, July and September, and one case in June, October and November. **The days on which femicide-suicide occurred were Mondays and Tuesdays (4 cases each day), Saturdays (3 cases), on Wednesdays and Fridays - 2 cases each, one on Thursday, and none on Sunday.** The **time of femicide-suicide** was either in the morning until noon (44%) or in the afternoon from 12 am to 6 pm (44%).

⁸⁸ Available at: [IF I CAN'T HAVE YOU, NO ONE CAN: These were the killer's last words before he took his wife's life in front of a hairdresser in Bor \(kurir.rs\)](#)

⁸⁹ Available at: [This small town with just 32.000 inhabitants holds the MOST INFAMOUS RECORD in Serbia. Nobody knows WHY \(blic.rs\)](#)

6.

**IDENTIFYING
THE RISKS OF
FEMICIDE–SUICIDE
COMMITTED WITH
FIREARMS**



This chapter analyzes the risks of intimate partner femicide-suicides committed with a firearm that were identified through media analysis, focus groups with representatives of key institutions (PD, BPPD, CSW), and interviews (one interview from the media) with two women who survived domestic violence (one survived an armed attack) and whose partners committed suicide. The aim was to **identify the specific risks for this type of femicide**, by comparing it with the risks mentioned in the literature for other types of femicide, especially femicides committed with firearms that are not followed by the perpetrator's suicide.

The theoretical framework already highlighted the security risks for intimate partner femicide committed with a firearm from the literature, and here **the risks that appear in media reports** will be briefly presented, noting that journalists did not define them as risks, but event circumstances. **Access to firearms**, whether in legal or illegal possession, as well as **working in services or having hobbies that involve the possession of firearms**, are the most significant risks for this type of femicide. **The history of domestic or intimate partner violence** is also mentioned in media reports.

One of the most frequently cited risks is **partner abandonment, planning or announcing abandonment**. Reports often indicate that one or both partners **work or have worked abroad**, which may be associated with the risk of abandonment. The most frequently mentioned circumstance is the perpetrator's **jealousy and different types of coercive behavior** towards the victim, appearing in 81% of the analyzed cases. This was most often visible after the victim's separation from the perpetrator which was followed by persistent calls, stalking, and even persecution, often visible to the victim's family members, friends and neighbors, but rarely reported to institutions. The violence perpetrators' **mental health problems** are also often mentioned in media reports, most often alcohol abuse, other psychological disorders, and occasionally disabilities. In only four cases did the media report that there were threats of suicide.

The media also report on **the victim's fear**, but generally do not mention **the age gap between the perpetrator and the victim** (although all reports state the ages of both participants). The **presence of children** during femicide-suicide with a firearm, a risk found in the literature, was not a characteristic of the analyzed cases (the majority of partners did not have children together or did not have any children at all, or they were adult children with their own families, and in cases with children, they were usually not present at the time of the event, there was no relevant potential conflict regarding the children, no threats or injuries to the children).

Professionals working in institutions mentioned the **possession of firearms** as the most important risk that trigger 'red flags' in them (some associate this circumstance with information about whether the perpetrator had participated in previous armed conflicts and whether there are symptoms of post-traumatic stress disorder). Also mentioned was the information on whether there were **previous reports of violence** or the perpetrators had a **criminal history**, and whether **the victim was afraid of the perpetrator** (it is described as the victim's anxiety, but also as a discrepancy between verbal and non-verbal content, and as 'frozen with fear'). It was also pointed out that when 'the risk reaches the red zone, the victim's perception is unreliable as she has adapted to the violence, she minimizes it because she wants to survive, she doesn't believe that he is going to kill her, that is where we must react'.

Problems with addiction (alcohol and drug consumption) are also assessed as a serious risk (adding that it is a 'huge cluster' and it is not clear how to treat that indicator). The same applies to **mental health difficulties and disorders** (adjustment disorders, depression, acute stress disorder, borderline and bipolar disorders, paranoia, and psychosis are mentioned, but not always diagnosed and treated), often associated with other financial and social issues.

The perpetrator's **jealousy, control and 'complete fixation'** on the relationship with the victim are cited (not always spontaneously) as indicators of high risk, accompanied by the perpetrator's **persecution or threats of murder and suicide** (and it is indicated that some behaviors are completely ignored, such as threatening messages on social networks, especially when they are not of explicit content, or verbal threats are normalized, even those that are uttered in front of representatives of institutions). In the description of stalking behavior, the **usual stages** are distinguished: 'verbal actions, possible threats, and damage to property, and the third stage is bodily assault, an indispensable part of the phenomenon in practice', which are not always easy to document and prove. **Announcing separation, leaving the partner, or filing for divorce** are seen as indicators of an increased security risk, but they are not always clear (as leaving the abuser and divorce are seen as the desired goal to end violence).

Experts also single out the **victim's attitude** as a significant factor influencing the risk ('we cannot protect her interests, if she does not want to do it'), which is usually related to the victims' refusal to report violence and to testify in criminal proceedings or to 'respect' protection measures ('there is no potential sanction for the victim who does not comply with the protection measures, as if we are taking away all her rights, the system does everything for her, but what if she does not comply with the measures, there must be some responsibility'), which shows that there is a misunderstanding of the dynamics and characteristics of partner relationships where violence occurs.

It should also be noted that **the highest percentage of femicide-suicide cases were not reported to the institutions and that many professionals did not have the opportunity to work on these cases, so their observations refer generally to domestic violence and femicide**: 'We do not have what you are looking for. We are unable to single out cases from the database according to specific criteria, but we record them and keep them [open cases] for a long time, even though we do not see the court decisions. In recent years, knives were used more often, because the assessment of the possession of weapons is carried out immediately after the report of violence - this was not missed in any of the cases'.

Representatives of institutions emphasize **the importance of their experience**, in addition to using the 'risk assessment list' (which is constantly being extended⁹⁰) for the assessment of security risks in reported cases of violence against women and domestic violence. Some of them state that 'there is no key to the solution, there is no quantification, because that would

⁹⁰ The Law on Prevention of Domestic Violence, in its article 16, lists seven specific risks of particular concern. The special protocol on police officers' behavior in situations of domestic violence contains 14 defined risks. Through concrete practice, other relevant risks are added to these and other 'risk lists', thus the lists get longer, acting as a reminder, and they contribute to the systematic overview; this, however, does not have to and cannot contribute to the recognition of the specific features of a concrete case and the verbal and non-verbal impressions and experiences of the professional who is in contact with victims of violence.

entail the assessment of each individual' or 'I assess according to the available information, but you can't always have everything, there will always be some influx [of data] that affects the increase or decrease of risk' or 'with centers for social work, the police and the prosecutor, the assessment is reduced to a 'deep' conversation, what she tells us and the way she says it, it's a combination of variables'. It is also emphasized that 'risk assessment does not always have a predictive value, we did not even have time to assess some cases, and what we knew did not indicate that femicide or suicide would occur.'

Others point out that this is precisely the weak point and misconception of 'many of our colleagues in the centers, safe houses, the police or the prosecutor's office who **do not understand that this event is not an isolated incident**, but an indicator of a system of abuse that had existed before, it did not happen for the first time, and it is up to us to examine and prove what kind of violence it was; the system of his beliefs, behavior, patterns, must have existed, in 95% of the cases when we came to act, it was all already there'. Lawyers note that murders in our country are unplanned (not premeditated, or directly premeditated), but more often a murder happens 'in the spur of the moment, in one incident', and some add that it is not possible to point out 'red flags', 'sometimes there were signs, at other times not, most often with the same pattern of behavior - a rather long-lasting violence, where even the victim says 'If he didn't kill me before, he won't kill me now either'.

From the perspective of a woman survivor, who was married for 16 years, the risks were visible, jealousy, control, but not immediately ('everything is wonderful at first, then it starts with jealousy, I won't allow you to work...') and there are plenty of reasons to stay or return to the relationship ('I trusted him, then we got a child...'), especially if there is no support from parents and family ('that's the worst thing that can happen to you'). When **the violence intensifies, the children or others witness it**, the partner **gets drunk more often**, she is increasingly **afraid of the consequences, he threatens** to throw her out of the house, to take the children ('he knows that's my weakest point'), threatens to kill her ('these were all signs'). However, the feeling of having 'control' over a dangerous situation exists as long as she can see the perpetrator ('when I left, I didn't see him, I didn't have control, I didn't know what he could do, and that increased fear').

A woman who was in an emotional partner relationship for two years confirms that 'at the beginning everything was great, everything went well, I moved in with him, and then it got worse', 'it started with the first arguments, then he stopped being gentle, so he started drinking, a lot, much more than usual.' It was difficult to immediately end the relationship because she did not recognize the signs of her partner's violence, but also because of the investment in that relationship. 'There were signs that I didn't recognize, because I had never been with someone like that, and I simply didn't have, I didn't know what to do with it, what was happening to me, and I invested so much in that relationship, both emotions and time and I didn't want to throw all that away just like that.' **She also described the experience of being a violence survivor and why it is difficult to leave the partner:** 'the survivor of such violence believes that she is unworthy, that she has nowhere to go, that she will never be loved again, that no one will support her, so what would she do then, how would she start

over'. She made **the decision to end the relationship** the first time the arguments escalated into violence (her partner beat her), although she was in shock for three days and only then called her parents, who immediately reacted and supported her. For two weeks **he came to her work every day**, begged her to come back, and then he **stopped** coming. She thought he understood and accepted that she wouldn't change her mind. He came to her second, afternoon job, the last working day, he waited for her to be alone (which means he followed her), he entered and **without saying a word he shot her** (he fired four shots) and then shot himself.

The first woman says that **the suicide was planned** ('I have dozens of photos of him with a noose, the whole plan, like in a textbook, it lasted for months'), the perpetrator talked about it with others, but they did not believe him ('they thought he was helpless, that he had no argument to get me back, that he was rude, that he wants me to be afraid for him, to save him'). The only uncertain thing was whether he would kill her and the children too, which she feared the most.

She believes that **she survived because she listened to her inner voice** ('gut feeling'), because 'I always look a few steps ahead'. There was a lot of **questioning of one's own decisions and strength** ('sometimes I wonder if it's courage or madness, nobody supports me, so I put in double the effort, I wonder will I be able to... I analyze, I wonder if my children will be hungry, then I realize that I beg for every penny anyway... he keeps telling you that you are useless'). **Feeling guilty did not bring her back to the relationship** ('I didn't blame myself, but I wondered if I could have done something, every time I called the police, I didn't want him to get arrested, but to help him...'). She had a **plan** of being 'always five steps ahead' **and faith in herself**, even when things didn't go according to plan she said 'you don't see why this is good, but you'll understand'. From the survivor's perspective, she cannot tell why she waited for 16 years to leave him 'I did it when I was ready, that was the right moment'. **Feeling angry** helps because fear paralyzes. She needed to stay **connected with the children** ('so that he can't get into our relationship'). Another woman recalls how she survived that day because, after the first shot, **she instinctively approached her partner and started to wrestle with him and fight for her life**, but she was also lucky. She also pointed out that a woman should leave the relationship at the first signs of violence.

In planning the prevention of femicide-suicide cases with firearms, all participants must understand that it is a process of violence that escalates over time, and that the perpetrator's murder and suicide are often preceded by his thoughts and threats of murder and suicide. Reporting violence to institutions occurs at one point during that process, and it is important that both professionals and potential survivors recognize the signs at an early stage before the escalation, and take the necessary preventive steps through institutions and/or specialized organizations. It is also important to understand why the potential victim does not leave the partner – for all the effort devoted to the relationship (emotions, time, children, resources, etc.), failure to recognize the early signs of violence, the feeling of unworthiness, fear of not receiving support from others, fear of the unknown and of starting all over again, but also the feeling that she has control over the perpetrator as long as she sees what state he is in.

Several authors mention **the importance of observing 'the process perspective of intimate partner murder'**⁹¹ or **'the timeline of intimate partner femicide'**⁹². The first authors define three stages: 1) before the murder ('build-up' phase) characterized by the perpetrator's possessiveness and violent behavior, alcohol and drug abuse, mental health problems, and fear of tomorrow, often associated with separation; 2) project change - feelings of rejection and jealousy leading to the decision to kill; and 3) the aftermath - admission of guilt, but minimization of responsibility. The 'timeline' includes 8 stages: 1) Relationship history: criminal record, charges (whether for violence, stalking or other types of criminal behavior), 2) Behavior in the early stages of the relationship: early commitment (emphasizing the intensity of the connection, emphasized loyalty, the relationship becomes serious too quickly, cohabitation/marriage is initiated early, pregnancy, etc.), 3) Relationship behavior: risk markers, 4) Potential trigger of murder: separation, ill health, financial problems, threats or rumors, 5) Escalation - frequency, severity, stalking, persistence; 6) Change in thinking - last attempts at reconciliation, the victim does not respond to threats; 7) Planning - buying weapons/firearms, digging graves, manipulative meetings, letters, organizing papers; and 8) Murder - murder/suicide, confession, missing person, denial, accident, multiple victims⁹³. Similarities with some of the characteristics of the mentioned phases or 'timeline' can also be observed in the characteristics of cases of femicide-suicide committed with firearms from the analyzed sample, as well as from professionals' and female survivors' experiences.

⁹¹ Enander *et al.*, "The killing and thereafter: intimate partner homicides in a process perspective", part II, *Journal of Gender-Based Violence*, vol XX, no XX, 2021, 1–17, DOI: 10.1332/239868021X16317122802413, p. 59.

⁹² Monckton Smith, J., "Intimate Partner Femicide: Using Foucauldian Analysis to Track an Eight Stage Progression to Homicide", *op. cit.*, pp. 1274–1280.

⁹³ *Ibid.*, pp. 1267–1285.



7.

RESPONSES BY INSTITUTIONS

Domestic violence and intimate partner violence against women is a violation of basic human rights and a form of discrimination against women. **The key international documents that Serbia has ratified**⁹⁴ oblige the state to take due diligence in the prevention, protection and support of victims, the implementation of an appropriate investigation and proportionate punishment, including compensation for damages to the victim, and in measures that ensure coordination, cooperation, sufficient financial resources and appropriate records and investigation of the occurrence. The international legal framework regarding the possession (keeping, carrying and use) of firearms and arms control obliges the Republic of Serbia⁹⁵, and also relevant are international documents that call for greater participation of women in decision-making, especially during and after armed conflicts, which is recognized as a risk for the protection of women from gender-based violence⁹⁶.

The legislative framework for the prevention and protection of women from intimate partner and domestic violence is gender-neutral and has been improved a number of times since 2002. It consists of the **Criminal Code of the Republic of Serbia**⁹⁷, **the Family Law**⁹⁸, **and, since 2016, the Law on Prevention of Domestic Violence**⁹⁹. The latter regulates the emergency protection against the immediate danger of violence, risk assessment, training for the representatives of competent institutions, mandatory reporting of any suspicion of violence, daily information exchange, mandatory coordination and cooperation, individual protection and support plan development, creating unified, central records, as well as punitive measures against professionals for failure to respond. Also, placed under the jurisdiction of the government's **Council for Combating Domestic Violence**, the regular monitoring of the implementation of the law and proposing measures for improvement is expected (which has not publicly published analyses and possible proposals for practice improvement yet). Although the legal framework is not fully in line with the standards of international treaties¹⁰⁰, research and analysis of practice indicates that **the main issues lie in the uneven implementation of existing regulations**, which is confirmed by three separate reports by the Protector of Citizens (between 2016 and 2022)¹⁰¹. The form and content of oversight indicate **the lack of understanding of the phenomenon, insufficient knowledge and training** to assess security risks, as well as to establish a link between the risk and the individual plan

⁹⁴ The Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), *Official Gazette of the SFR Yugoslavia - International Treaties*, no. 11/1981. as well as General recommendations no. 19 and no. 35; the Council of Europe Convention on preventing and combating violence against women and domestic violence, *Official Gazette of the RS, International Treaties*, no. 12/2013

⁹⁵ Law on Confirmation of Arms Trade Treaty, *Official Gazette of the RS*, no.14/2014

⁹⁶ Such as the United Nations Security Council Resolution 1325, available at: <https://peacemaker.un.org/node/105> based on which the Republic of Serbia established a strategic and action framework

⁹⁷ *Official Gazette of the RS*, no. 85/2005, 88/2005 - corrected, 107/2005 - corrected, 72/2009, 11/2009, 121/2012, 104/2013, 108/2014, 94/2016 and 35/2019.

⁹⁸ *Official Gazette of the RS*, no. 18/2005, 72/2011 – other law and 6/2015.

⁹⁹ *Official Gazette of the RS*, no. 94/2016.

¹⁰⁰ The GREVIO report on the basic procedure for assessing the situation in Serbia, 2020. <https://rm.coe.int/grevio-report-on-serbia/16809987e3> Concluding observations of the CEDAW on Serbia's Fourth Periodic Report on the Implementation of the Convention on the Elimination of All Forms of Discrimination against Women, 2019, <https://digitallibrary.un.org/record/3801127?ln=en>

¹⁰¹ Forty-five systemic recommendations of the Protector of Citizens for the actions of authorities in cases of violence against women, 2016, <https://ombudsman.rs/index.php/2012-02-07-14-03-33/4833-2016-07-28-08-59-32> Special report by the Protector of Citizens on the work of groups for coordination and cooperation in the area of the Higher Public Prosecutor's Office in Belgrade, 2020, <https://ombudsman.rs/index.php/izvestaji/posebnii-izvestaji/6804-p-s-b-n-izv-sh-z-sh-i-ni-gr-d-n-r-du-grup-z-rdin-ci-u-i-s-r-dnju-n-p-druc-u-gr-d-b-gr-d.pdf>

of protection and support measures for the victim and its enforcement, including monitoring the effects of the plan of measures and their revision when required due to circumstances.

The Law on Arms and Ammunition was adopted in 2015 and has been amended twice since then¹⁰² (and at the end of 2022, the Ministry of Internal Affairs put the Draft Amendment to the Law on Arms and Ammunition for public discussion once again¹⁰³). The **Law on Police**¹⁰⁴ and the **Law on Game and Hunting**¹⁰⁵ are also relevant to this field.

When it comes to **by-law provisions related to gender-based violence**, established in the period 2010-2022, they lack the necessary hierarchy and understanding of the specific characteristics of this occurrence and the general principles for organizing the authorities' actions¹⁰⁶. They also **lack effective implementation**, which results from inadequate human, technical and financial resources, as well as a completely inadequate system of monitoring, realization and evaluation of the achieved results. Similarly, the latest **strategic document for the period between 2021 and 2025 still has no Action Plan**¹⁰⁷, a whole series of measures relevant to prevent and protect from violence, including femicide and femicide followed by suicide committed with a firearm, remained without operationalization and implementation.

The analysis of replies from the relevant institutions (PD, BPP0, CSW) in which data were requested on cases of femicide-suicide committed with firearms identified in the media, **showed that the institutions were not familiar with the majority of these cases** (75%). In a certain number of cases, someone from the family was in the records of the centers for social work (31%), but not for domestic violence committed by the perpetrator of femicide-suicide. In as little as 4 cases (25%) the perpetrators were reported for stalking or violence, two for stalking the victim and two for domestic violence (one for murder) or violence in a partner relationship. So, it is possible to recognize three patterns of **reporting cases of domestic violence or stalking by partners to the relevant institutions and their response** - 1) 'under the radar' cases, 2) 'red flag' cases, and 3) 'profession as a risk' cases.

In **'under the radar' cases** there are three subgroups - cases that have gone unnoticed - by friends and neighbors and institutions; cases in which both the family and the community recognized the abuser, but no one reported him to the institutions, and cases in which everyone knew the abuser but nobody reported him, and one family member was a beneficiary of institutional services.

Special report by the Protector of Citizens on the work of groups for coordination and cooperation in the area of the Higher Public Prosecutor's Office in Niš, 2022, <https://www.ombudsman.rs/attachments/article/7518/Poseban%20izvestaj.pdf>

¹⁰² *Official Gazette of the RS*, no. 20/2015, 10/2019 and 20/2020.

¹⁰³ Available at: <https://bit.ly/3YN2owg>.

¹⁰⁴ *Official Gazette of the RS*, no. 6/2016, 24/2018 and 87/2018. At the end of 2022, the Ministry of Interior prepared a new Draft Law on Internal Affairs, which was withdrawn from public debate in January 2023, and the Ministry of Interior opened a new, second round of consultations with the representatives of the civil society, who criticised the Draft.

¹⁰⁵ *Official Gazette of the RS*, no. 18/2010 and 95/2018.

¹⁰⁶ It is about General and special protocols, as well as strategies and action plans.

¹⁰⁷ *Strategy for preventing and combating gender-based violence against women and domestic violence for the period 2021-2025* <https://www.minrzs.gov.rs/sr/dokumenti/ostalo/sektor-za-socijalnu-zastitu/strategija-za-spreccavanje-i-borbu-protiv-rodno-zasnovanog-nasilja-prema-zenama-i-nasilja-u-porodici-za-period-2021-2025-godine>

In three cases, *in which friends and neighbors were surprised by the tragedy*, the perpetrators were not seen as capable of committing the crime. One is perceived as a depressed person, another as a nice person, not very outgoing, and the third as a caring person. However, in one case the perpetrator was depressed and hinted that he was going to kill himself, in another case the perpetrator told the neighbor that it was best to 'that they both kill themselves (the woman and himself) as they are very sick and close to each other'. In all three cases, the victim and the perpetrator were married, in late middle age (in the range of 55-62, and one married couple of old age - 83 and 85). Two couples had adult children, and one had no children. Also, they were not very well known in the neighborhood. An elderly married couple were refugees from Croatia and built their own house, living as loners. The other married couple moved into the building a couple of years before and they rented an entire floor in the building and the neighborhood knew little about them. The third married couple was separated since the wife had been working as a housekeeper in a retirement home in Germany for the past year. Institutions can identify these cases with difficulty, except for perhaps healthcare institutions, so prevention would have the greatest importance here.

There were three cases in which family and friends noticed the 'sick' and 'obsessive' jealousy in the perpetrators, including violence in two cases (the victim's sister stated that 'he was so rough with them that they really spent part of their lives in a horror movie') and alcoholism in one case, yet no reports were made to institutions. In all three cases, there was partner abandonment - one woman moved to her mother and then came back and again intended to leave the perpetrator, the other ended the relationship before her partner left for Norway, and the third worked as a babysitter in Austria for 20 years. Two of these were intimate partner relationships, and one was a marriage. They had no children together (in one relationship they had a blind son, who died). The women were younger - 30, 43 and 46 years old, and two men were older - 53 and 60, while one was thirty-one years old. This is also where prevention and engagement of the health system would be most beneficial.

Four cases with perpetrators who were well-known abusers in the community and obsessively persecuted their victims, and one family member who was reported to the center for social work on other grounds, were also not reported to institutions for domestic violence. In two cases, the victims were beneficiaries of centers for social work because of the children (child custody, decision about the name), and one of them because of one-time financial assistance. One victim was known to the institutions because of the psychological violence of a previous extramarital partner (a drug addict, who was in prison at the time of the murder) with whom she had a son. The Coordination and Cooperation Group created a protection plan for her and her son. The institutions knew one perpetrator who had a conflict with an adult son from a previous marriage before, and he denied the violence. His first wife and their son with disabilities, were also beneficiaries of financial assistance and the services of a daycare center, and a center for social work. Two married couples had children together, two unmarried couples had children from previous marriages. All victims left their partners. The age of the women ranged from 31 to 47, and of the partners from 41 to 57. The age difference was 10 years and above, only in one case it was 7 years. In these cases, it would be possible for the center for social work to identify violence and report the abuser if all the workers of the center asked questions about domestic violence in working with all categories of beneficiaries.

These cases that go unnoticed by the community and our institutions include a case that can be classified under the **category of 'profession as a risk'**, in which police officer P.R. (31)

killed former partner M.P. (28) and himself by activating a hand grenade in the car, on the road between Batajnica and Stara Pazova. They had an extramarital relationship. He was married and had two children. They met at the kindergarten his children attended and where she was a teacher. Thanks to his hobby of woodcarving, he became widely known. He was often a guest in various shows, and he said that he was raised in a patriarchal manner and that he finds inspiration in a piece of wood, fiddler songs and historical events, as well as the Orthodox religion. Colleagues and friends perceived him as a good and capable policeman, honest, hard-working, and a devoted father. The victim left him because he did not want to divorce. The victim was perceived by her colleagues as a cheerful person who skilfully hid her problems. On the other hand, there was a visible risk of femicide (apart from the availability of firearms), the perpetrator pursued the victim, and she changed her workplace.

Furthermore, there was also a case of *violence in a partner relationship registered in institutions abroad, but not in our institutions*. B.Š. (30) was killed by her ex-husband E. T. (44) with a gun in her parents' house, a day before returning to Berlin. Apart from her, he also killed her parents, and wounded her brother and their two cousins. He fled the scene of the crime, but when the police surrounded him, he shot himself in the head with a pistol. They had been married for about ten years, but they divorced a year before the tragedy and the children (an 8-year-old daughter and a 6-year-old son) were entrusted to their mother. For the last year, they lived at separate addresses in Berlin. He worked abroad for twenty years. The neighborhood perceived him as a calm and reserved man from a good family. However, it was also reported in the media that he was jealous and had a difficult time coping with the divorce. The perpetrator was reported to the authorities in Berlin, but not to our institutions. He received restraining orders and no-contact orders on several occasions. The intervention of the center for social work happened after the murder, by taking actions regarding the guardianship of the children.

'Red flag' cases represent the cases of violence in a partner relationship that were repeatedly reported to institutions that had responded, but there was no agreement in risk assessment and determining protection measures, and the femicide-suicide was committed. Or, the perpetrators of femicide had been reported for violence in previous partner relationships. One case recorded that the abuser even served prison terms (the district court in Vranje sentenced him to seven years in prison for the first murder, and after the prosecution's appeal, the Supreme Court changed it to nine years). The second received a suspended sentence with 6 months of prison time and a 2-year probation period, as well as a restraining order and no-contact order with his (former) wife for a period of 2 years from the date of the verdict. In three cases out of four in total, there were partner relationships and previous marriages/ partner relationships and children they did not have together (in one case, a partner relationship was suspected). The women were between 27 and 49 years old, and the partners were between 47 to 57, the age difference was 10 years or more (18 and 20, 8 in only case). In all cases, there was jealousy and obsessive stalking. Two perpetrators had serious psychological problems - aggressiveness. In all cases, the partner was left by the victim. In two cases in which the institutions responded to the victim's stalking by the perpetrator, the perpetrators received measures of a temporary no-contact order with the victim. In one case the Basic Public Prosecutor's Office issued an official note on the absence of grounds for a criminal offense, after receiving a report from the Coordination and Cooperation Group that estimated a low risk of domestic violence.

In the second case, the perpetrator was a police officer (a '**profession as a risk**' case) and the victim reported him twice to the police for stalking. Three court experts assessed that there was no danger of repeated criminal offenses. The court of general jurisdiction refused to order detention both times and released M.M. with a restraining order and no-contact order. In the case of the first reported stalking, the principle of opportunity was applied, the criminal charges were dismissed and the imposed restraining order and no-contact order were dropped. In the case of the second reported stalking, a plea bargain was signed and the perpetrator received a suspended sentence - a prison sentence of five months over a period of three years. His service weapon was confiscated, and he was suspended both times. Three days before the murder, he was reported for violating the restraining order and no-contact order. The court stated that there was no crime of domestic violence since the partners had no children together and were not treated as family members.

The 'profession as a risk' cases described in the previous groups, one as an under-the-radar case and another that was reported to all institutions and represented a 'red flag' case, include femicide-suicide cases in which the perpetrator has a job that involves carrying a firearm - police officer, gamekeeper, hunter, etc. The security services where these perpetrators were employed should work to prevent these cases.

The focus group discussions with professionals focused on how to prevent these particular patterns of femicide-suicide cases committed with firearms. The proposals ranged within **five categories**: 1) prevention, 2) optimization of the practice (and understanding of measures towards the perpetrator of violence) and coordination, 3) availability of support measures for survivors, 4) case monitoring, and 5) collection of data on cases and their processing to improve practice.

In the analysis of the answers, we will use the portrayed pyramid description used by a deputy public prosecutor from a basic public prosecutor's office (which is similar to the usual way of presenting the basic levels of prevention). At **the base of the pyramid** are participants who play the most important role in prevention - the media (the authors' note: and educational institutions). **The media are responsible for the information that shapes the public's attitudes and behavior**, and their negative influence was highlighted due to the way they write about these occurrences, especially since they do not encourage victims and the social environment to report violence and they portray institutions in a bad light. Educational institutions were not discussed, although it is widely known that they are the most important means of primary prevention, so educational programs at all levels could improve the understanding and prevention of gender-based violence¹⁰⁸.

The middle of the pyramid consists of competent institutions - the police, centers for social work and the prosecutor's office (which are most often under the public's scrutiny, supervision and control), but it is emphasized that their responsibility cannot be isolated from the participants at the base and top of the pyramid, or the participants from the same level of activity (healthcare institutions with specialist psychiatric services). **In this part, the representatives of health institutions are conspicuously absent**, and all interlocutors agreed that there is no cooperation but it would be important. Somewhat above the middle layer of the pyramid are general hospitals, psychiatrists and neuropsychiatrists,

¹⁰⁸ Pulimeno *et al.*, "School as ideal setting to promote health and wellbeing among young people", *Health Promot Perspect*, 10(4), 2020, pp. 316–324, doi: 10.34172/hpp.2020.50. PMID: 33312927; PMCID: PMC7723000.

with whom cooperation is weak, and court experts, whose assessments, according to the participants, are often wrong, yet influential in terms of preventing the implementation of certain institutional measures. Therefore, the middle of the pyramid is the most complex, interwoven with the effects of action or inaction both from the base (underdeveloped culture of attitudes towards violence in general and in close relationships) and the middle part of the pyramid (limited sectoral cooperation) and from the top of the pyramid (expert reports).

The psychiatrists' findings for perpetrators in a state of intoxication or with mental health difficulties and diseases (that 'the person is sane and is aware of his actions') are very frustrating, as well as the fact that it is ineffective to refer to the provisions of the Law on Protection of Persons with Mental Disorders (according to which such persons can be kept in health institutions against their will)¹⁰⁹. The participants point out that perpetrators who threaten with murder or suicide are always sent to psychiatric evaluation, but they return with a report that they are not prone to suicide (they are rarely admitted, not even for in-depth diagnostics). It should be taken into account that such threats do not necessarily reflect, at the moment in which they are uttered, deep suicidal intentions, but rather a type of manipulation, which is why it is important to evaluate them in relation to the dynamics of the partner relationship and violence (and not only on an individual basis as an expression of suicidal intent), and to treat them as a serious warning sign that precedes the partner's murder. However, the issue of unsuccessful cooperation with health institutions has existed for a long time and there was no success in overcoming it.

When it comes to prevention by these institutions, several of them believe that this is not their primary role. However, it is believed that **the public announcement of verdicts in femicide cases** could help change public attitudes (because the media usually lose interest in the epilogue of specific cases). Also, **the participation of health institutions** is perceived as important for prevention, above all when it comes to psychological violence, consequences, mental health and support for survivors. **Support for survivors**, and especially familiarization with rights and procedures 'in a language they understand, presented graphically, so that they trust us and open up' is perceived as important prevention.

The police **check regularly** if the reported person and anyone in his household owns a firearm, and they **immediately proceed to confiscate every weapon**. Police representatives point out that special care is taken in cases where the perpetrators are police officers or military personnel when service weapons are confiscated in the presence of a senior officer, however, they do not have information on how many weapons are returned after the security checks. However, they emphasize that it is easy to obtain firearms illegally, which is confirmed by cases of murder following the confiscation of firearms in legal possession and searches of all houses and utility rooms wherever there is evidence of the existence of illegal firearms. It is indicated that more femicides were not committed with firearms, which may be a consequence of better control of weapons in legal possession. Periodic health checks of those who have received a license to carry firearms are carried out every five years, as a condition for license renewal.

Routine checks of domestic violence in services that do not deal with this topic (such as health services or services for financial benefits in centers for social work), although it could be useful, is not seen as realistically feasible, mainly due to the lack of knowledge and the

¹⁰⁹ Law on Protection of Persons with Mental Disorders, *Official Gazette of the Republic of Serbia*, no. 45/13.

overload of all systems with regular work. The conditions under which the institutions work, especially being **understaffed**, is seen as a serious obstacle to respond efficiently, with the emphasis that the system is based on motivated individuals, and that this is not sufficient. Cases of femicide are said to instill fear among professionals but do not raise awareness of the problem. The lack of specialized knowledge regarding the occurrence of gender-based violence and domestic violence is seen as a major problem.

The interviewed professionals emphasize the importance of continuous education (not short-term of one or two days, but thorough and quality training) because of the massive employee turnover, as well as the importance of mutual exchange of experiences ('the exchange of experiences is invaluable, every experience is different and can be useful'). The importance of monitoring, control, mentoring, and supervision is also emphasized (with a reminder that this sample of experts is not representative, but consists of highly motivated individuals). Also, they notice a **striking lack of praise for their good work** ('most never received a *thank you, well done, kudos*'), which would be significant for them in the circumstances in which they operate. They believe that the absence of praise leads to a 'loss of motivation, one falls into a vicious circle, like a victim of violence, which is seen in centers for social work'. Therefore, some conclude that the system obstructs itself.

Furthermore, **the professionals' specialized training** and their authority to work exclusively with these occurrences are seen as a need for better quality action. The existence of a **psychologist in the prosecutor's office and at the court, or a social worker in the police**, is seen as part of the solution to understanding better and providing support to the survivor in the proceedings, and it is believed that she would be more likely to accept to testify in those circumstances. The **availability of support measures for survivors** (housing, appropriate financial assistance, employment advice), including better availability of free legal assistance, would contribute to more frequent reporting and deciding to leave the abuser. Solving the problem of the violent perpetrator's **detention, hospitalization, and mandatory treatment** when under the influence of alcohol, as well as those with mental health difficulties and illnesses is also a frequently cited need of the system. Talking about **centers for social work**, it was assessed that they are 'a conglomerate that cannot exist as such'; poor internal organization and the difficulty of setting priorities in action are observed, and it is proposed to establish a team that would deal only with cases of domestic violence. Also, the participants reached the opinion that **two resources of centers for social work** are not used sufficiently or at all - **the planning and development departments**, where research is carried out are insufficiently used in practice, and counseling centers, which could contribute to the prevention of the occurrence and have a more significant place in the survivor support system.

At the top of the pyramid are the judges whose decisions also cause a lot of frustration among the representatives of the three operational survivor protection systems. This is particularly visible due to the rejection of proposals for the abusers' detention or the extension of detention or the absence of security measures, but also the most frequently imposed suspended sentences, inappropriate sentences for violating emergency and extended emergency measures, due to evidence treatment, and the length of the proceedings... The fact that proceedings usually last a long time and the survivor pulls out of testifying during the process (between the investigation and the trial) in circumstances when the court separates all circumstantial evidence, is seen as an obstacle to the efficiency of the work ('I think some

judges influence the survivor to give up, instead of encouragement, they first tell them that they have the right not to testify, even in cases of violation of emergency measures'). It is stated that some judges are still looking for a previous record of violence in order to proceed with the criminal charge of domestic violence, or refuse to extend emergency measures not understanding their preventive role, or rarely respect the opinion of the centers for social work, or do not question the court experts' findings even when there are good arguments for it.

They emphasize **the importance of reporting any knowledge of violence as a prerequisite for action** and the possibility of checking firearms possession, although it is thought that the survivor must first be empowered to report and persist in the procedure. **Procedural difficulties** are pointed out, especially due to the quality and nature of the evidence (even with the encouraging opinion of the Supreme Court of Cassation that circumstantial evidence is used in proceedings when the aggrieved party refuses to testify, which is not a legal position). Prosecutors point out that 'there is little room for maneuver for proving such acts', but also that 'if someone has committed an offense, some evidence must exist', which requires a broader view of the phenomenon. However, the different attitudes of the basic and higher courts regarding the evidence remain a frustrating part of the work for these experts, especially for the prosecution. The same applies to the penal policy, which according to everyone is excessively lenient ('not all violence deserves prison, but a suspended sentence is like a release'). The participants agree that **police work has improved** with the adoption of the Law on Prevention of Domestic Violence, but that 'support from above' is often lacking.

Experts from social protection services point to **the importance of psychological assessment** as part of the prosecution and court proceedings, which requires a uniform understanding of violence, femicide, and suicide, consideration of differences in interpretations (e.g. psychological violence, differences between conflict and violence, who is the violence survivor and who is the perpetrator), unifying the understanding of risk factors, especially their dynamics (fluctuations over time in intensity and type). Also, some state that sometimes they do not know what to do with the abundance of information, and sometimes they lack information (and the responsibility for informing the institutions is placed on the survivor).

When it comes to **the measures available to the system to protect the violence survivor**, the need for better operationalization of the possible protection measures is highlighted (some even suggest a detailed indication). This is especially necessary when measures that are not explicitly related to protection against domestic violence are applied (e.g. the presence of police officers 24 hours a day in front of the survivor's house), for which a legal argumentation is required. Some indicate that the system is exhausted by extensive protective measures, and also the perpetrators' and their lawyers' complaints about the 'illegal conduct' of the experts (which requires them to make additional efforts to write reports in the supervision and control procedures). Some note that **restraining orders** are less often imposed (especially when the survivor moved out of the house or is placed in a safe house), which is an improper interpretation of the risk. It is also pointed out that the Magistrate's courts **do not react to the violation of emergency measures** (or the court accepts the perpetrator's appeals and drops the emergency measures or protective measures if the woman entered a safe house, or when he works from home, and the judge argues that he cannot be deprived of work and a way to earn).

Working in Groups for coordination and cooperation is evaluated as an excellent opportunity in terms of information exchange and cooperation, and the possibility to handle each case with due attention, which is not always the case in large municipalities, where a large number of reports of domestic violence are processed. At the same time, they point out that they do not represent the work of coordination and cooperation groups in entire Serbia (they represent a motivated and dedicated group, which is not the case everywhere). They state that at least one-third of the cases they prepare for the group meeting is unknown. Some express the opinion that coordination and cooperation groups are 'an unrecognized and inexhaustible resource of influence that can lead to a reduction of femicide, suicide and the misuse of firearms, but institutions do not understand their role', and it is necessary to intensify the research of their work. It is also suggested that survivors be invited to group meetings more often, as well as for non-governmental organizations that have the knowledge and can help in empowering survivors to be involved.

There are significant differences in the opinions of the participants in understanding **the possibility of case monitoring**. Prosecutors emphasize that it is impossible to apply the measures after the sentence has expired. Representatives of centers for social work cite the uneven practice of working with perpetrators of violence both in the centers for social work and through specialized treatment as a problem, as well as the uneven practice of working with survivors (while there are standards and clear procedures in the world). The police emphasize the importance of 'educating the survivor' as well as 'relocating the survivor from the place of residence' as a means of protection, and there is often an undertone of complaint when the survivors do not accept the offered protection measures.

Some of the participants believe that even when the institutions respond properly, **it will not be possible to prevent the victim's murder** in every case because the murders 'were not predictable or they were not in our records'. This opinion is connected with the limitations of the three competent authorities in relation to the implementation of certain measures ('the court refused to extend detention, and after the murder, the police and the prosecution were held responsible').

The system would work more efficiently and prevent cases of violence and femicide if they **regulated the provisions** in the Criminal Code and the Law on Prevention of Domestic Violence regarding the circle of protected persons (which is a proposal that existed since 2005, since the adoption of the Family Law and the protection measure against domestic violence). Also, it is thought that a **detailed listing of protection measures and support measures** (practical instructions with a list of all protection measures that can be taken, as well as support measures that are available to the entire system) would be useful for increasing certainty at work, i.e. reducing the risk of failure and/or mistakes, although, through experience, some of them have 'developed internal procedures' that are useful for preventing violence. Drafting a plan of protection and support measures for survivors, as well as the ways of organizing the monitoring of its implementation, developed by some of the participants, could serve as an example of good practice, especially when it comes to custody and prison cases, handing over children or organizing contact between children and parents in controlled conditions. **Monitoring the pronounced measures needs to be improved**, and the use of electronic monitoring of the execution of the measures in severe cases of violence is also suggested.

Several participants pointed out **the problem of the analyzed and researched data on the occurrence of femicide**, i.e. they resent that the analysis and conclusions are based on media reports on femicide, which are incomplete and untrue, indicating that more reliable data exist in the institutions in charge of processing administrative records. However, it was also pointed out that the availability of institutional data is limited based on internal instructions to provide as little data as possible on request for free access to information of public importance, supposedly to protect the participants' personal data, which makes it impossible to collect more reliable data about the circumstances of the cases. Also, immediately after the femicide, there was an absence of valid information from institutions, which would adequately inform the public, and at the same time prevent speculations about the irresponsibility and mistakes of experts and services (which is typical for centers for social work, that are most exposed to unjustified media and public criticism).

One of the women survivors recalls: 'the institutions are not doing a good job'. She states that she is grateful for the safe house because she had a place to hide, and to think, but also that it is not right that 'my life stopped, my job, my children did not go to school for 21 days because they lack the staff to escort them.... he received an order, but that's ridiculous'. She believes that she was lucky because the police inspector 'was wonderful', but that there were many inadequate responses, 'the police officers were his friends, his car was at home, and they issued a search warrant, who is looking for him...', they warned her that the father had the right to see the children, that she only has the right to take personal things from the house ('so I'm asked if I know what personal things are, the toothbrush is, but not toothpaste... that I am not allowed to approach him').

Even the representatives of the institutions **did not take the suicide threats seriously** ('at that time the inspector told me: "I'm telling you, he won't kill himself", even though I knew he would'). They kept him at the psychiatric hospital for a short time and released him. **She describes the situation in the courtroom as extremely unpleasant** ('a small space, they bring him in handcuffs, he cries, I didn't mean him harm, I don't feel guilt, but I'm sorry that he allowed this to happen to him, to us'), as well as the fact that the court learned that she and the children were placed in a safe house. She states that 'it was in his favor that he was not convicted... and that we were placed in a safe house, so that he would not be detained'. When he violates the emergency measure, she has to report to the police, but he continues to send messages without any consequence. At the same time, **she thinks she was lucky because she found understanding at the center for social work**, she describes how their findings and opinions were good, how they understood and wrote professionally about her situation ('I don't know how to put it, I'm describing what happened to me for two hours, and they wrote everything expertly, I got answers on those five pages'). She also points out that the mediation of the safe house with other institutions was an important intervention to understand the situation and the risks.

The other woman had no institutional experience, **she did not report the violence to the police**, and she insisted that her parents do not either, she did not want to harm him (to get him detained, to not be able to pay alimony to the child from her first marriage), she thought: 'he should just leave me alone'. She also recalls that she did not recognize the signs of violence that would escalate, and that is the reason why she did not report it ('If I had known that these were signs that could lead to something like that, that this behavior could escalate...I would have asked someone who knows and can tell me, a professional, there are

many SOS numbers, there is an association, the Victimology Society of Serbia, which I didn't know existed and which has existed for 20 years and more'). She later realized that it was stupid. She needed the **help of a psychiatrist** because she could not talk about the traumatic experience, and **the support of a specialized non-governmental organization** (Victimology Society of Serbia) helped her a lot.

Recovery takes a long time. After more than a year, she is still fighting by working hard and aiming to keep her children safe. She didn't know what to tell the children, but she chose to tell them the truth ('you know what daddy said he was going to do, he did it'). She notices changes in the children due to the traumatic experience, and despite the fact that they see a psychologist, it is a slow process. She also has numerous symptoms (sleeping problems, numbness, she smiles a little and then cries), she avoids taking medicine. The second woman was left with a physical disability (paraplegia), but **she did not give up**, she persistently exercised, undertook surgical interventions, tried to live independently, go out, socialize and **talk about her experience** in the hope that it will have a preventive effect on other women. She was mainly alone in all of this. The funds for her surgery were collected thanks to citizens. She also had to move to another city where an exercise program existed.

When asked **what her recommendation would be for other women**, she says, 'I would be contradicting myself if I said that you should get out on time, I guess everyone leaves when the time comes.' She adds that it will not be easy ('it won't get easy for a long time, but then time passes'). She believes that it is important **to trust your feelings and listen to yourself**, but that there is no room for self-pity ('it pushes you into the abyss'). Although fear and a sense of helplessness distract and lead to wrong decisions ('I don't know what awaits me'), it is important to look ahead and keep responsibility in mind. She believes that **education would be important for women**, not like that in the center for social work, but in less formal conditions, with the understanding that women who have survived a difficult experience could help others, 'not to tell her what to do, but what will happen to her, that it is a normal process'. Also, **more external support** is needed, both informal and formal (family, friends). However, it could be said that a significant factor of recovery is a **specific strength and resilience**, a natural feeling to choose the right path whenever faced with a dilemma, a good sense of assessing the situation and predicting future events. A woman who survived an attempted femicide with a firearm says '**don't allow one second, one percent of anything, it has to be a firm no**'. If women notice or suspect violence (especially psychological), **they should contact professionals**. ('If a person feels that her partner is not behaving the way he should be behaving, if a woman thinks to herself, wait, is this normal, then maybe it is not normal'). She recommends specialized organizations who work to support survivors of violence, where help can be obtained confidentially. Also, for recovery, she recommended getting out of the house and socializing (not only with disabled people). 'Life can't stop. I experienced it myself; I survived something terrible, but I overcame it and now I live life to the fullest.'

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8.

CONCLUSIONS AND RECOMMENDATIONS

Conclusions:

- **The review of the literature indicates that there are contradictory findings when researching the characteristics of femicide-suicides committed with a firearm**, conditioned on the one hand by the overlapping of similar related phenomena (violence against women in an intimate partner relationship, femicide, femicide-suicide) that are viewed separately in different disciplines, and on the other hand, different methodology, but also socio-cultural factors and different institutional approaches, that is, the organization of preventing these cases and their institutional response before the fatal outcome. Overall, it is determined that there are two risk factors specific to these cases of femicide, on which the authors agree - access to firearms and the perpetrator's employment in security services. Other factors that were present can also be identified, such as the victim separating from the perpetrator, a history of domestic violence, and others, but most of them are characteristic of femicide in general, and it was not possible to make a distinction in relation to femicide followed by suicide. In general, it could rather be concluded that the factors together, that is, their interaction and combination leads to the suicide of the perpetrator after committing femicide, and that their deeper analysis is necessary for understanding and preventing this phenomenon.
- **The in-depth analysis of femicide-suicide cases committed with a firearm in an intimate relationship** in Serbia showed the specific **characteristics of the relationship between the perpetrator and the victim** - a large age gap, civil partner and former relationships, not living together anymore, no children together (or children from previous marriages and partner relationships). **Separation is the key point** where the 'project change' occurs, i.e. the decision to kill which is fuelled by feelings of rejection and jealousy¹¹⁰. Murders and suicides **appear to be planned**, since the perpetrators have firearms on them (they obtained them illegally, too, the firearms were not accidentally found at the scene of the crime) and they 'take' the victims to places such as river embankments, cafés or the hippodrome, or they are waiting for them outside their homes. They also kill themselves immediately after the murder, most often with a shot to the temple (which is sure to be fatal). The feature of the criminogenic situation - murder in a public place is also specific to this type of femicide, which is probably the result of not living together anymore, but it could also possibly be a message to the public: 'if I can't have you, no one can'¹¹¹. The most common **firearm used, is an illegally obtained gun**.
- **Four key risk factors have been identified for these femicide-suicide cases:** 1) **partner abandonment, planning or announcing abandonment** (working abroad or in another city were also forms of abandonment), 2) the perpetrator's **jealous and controlling behavior** towards the victim, and after the abandonment, persistent calls, waiting for and spying on the other person, and stalking by the abandoned partner often ensue, 3) **history of domestic violence** or intimate partner violence (including threats with weapons and threats of murder and suicide), and 4) alcohol consumption and the perpetrator's mental health difficulties, such as depression and aggressiveness (only two cases in the media mentioned that there is probably a diagnosis). These risks occur along a '**timeline**', which was discussed by both victims and professionals - the perpetrator's violent attitude towards the victim gradually develops and escalates. When looking

¹¹⁰ Enander et al., "The killing and thereafter: intimate partner homicides in a process perspective", *op. cit.*, p. 59.

¹¹¹ Available at: [IF I CAN'T HAVE YOU, NO ONE CAN: These were the killer's last words before he took his wife's life in front of a hairdresser in Bor \(kurir.rs\)](https://kurir.rs)

at the analyzed femicide-suicide cases, even in the case of perpetrators of whom the community thought well, similar patterns of violent behavior towards other persons and/or the victim were found in their history. Separation and no response to stalking and requests for reconciliation represent a 'breaking point' for the perpetrator, but before that, there was a rise in violence.

- Another important characteristic of intimate femicide-suicides committed with firearms is that they are **not reported to institutions**. These perpetrators of violence do not get reported by the victims, their relatives, or the neighborhood. There are several reasons for this. The biggest role is played by the victim's fear of the perpetrator and mistrust of institutions, i.e. fear of a long procedure, re-traumatization and poor results. There is also a large number of former partners without children or married partners with adult children, and the victims believe that by breaking up, they are done with their partner for good and they never wish to see him again. Some victims don't want to hurt their partner, they just want to get on with their lives. For the same reasons, victims often ask their relatives not to report the violence they experience. In some cases, the neighborhood does not recognize the violence (if he is from a good family, polite and educated), but in most cases, they do not want to 'get involved' with a violent person. In these cases, **the most important thing is prevention**, that is, education about the phenomenon and forms of protection through the media and educational institutions, but also early detection through health and social institutions.
- **There is a certain number of cases that reach institutions**, but not because of reports of domestic violence or violence in partner relationships, but because of other needs of family members. Usually, it involves social welfare services - custody of a child from a previous marriage, decisions about the child's surname, one-time financial assistance, daycare services, etc. This finding shows that **a specific number of cases can be detected early on the 'timeline' through routine checks and prevention of centers for social work**.
- **Two cases that institutions know of because the victims reported a crime of domestic violence, i.e. stalking**, showed that there was no agreement in risk assessment and determining protection measures, and the femicide-suicide was committed. The measures for the perpetrators were just a temporary restraining order and no-contact order. Along with the different assessments by the group for coordination and cooperation in relation to the assessment of judges, there are also different (inadequate) assessments of court experts, which prevent the implementation of certain institutional measures. **Two cases in which the perpetrators had previous sentences for femicide/domestic violence** (nine years in prison for femicide and attempted femicide/suspended sentence with a prison sentence of 6 months and a 2-year probation, as well as a no-contact order), and after that they committed femicide-suicide, which pointed out the need to monitor convicted violent offenders (while serving a suspended sentence and after release from prison).
- **The survivor's perspective shows** that those who have strength and resilience and can assess the situation well and predict future events have the greatest chance of survival. This is why it is important to empower survivors and encourage their resilience, partly through their participation in the development of protection plans in coordination and cooperation groups. Survivors' participation in coordination groups facilitates understanding of their perspective and planning more adequately in line with their needs.

Recommendations

There are five categories of recommendations based on feedback from professionals from competent institutions that indicated the need for improvement, and these include recommendations of the women themselves who survived violence.

● **Prevention** needs to be improved through **media content (especially public media services)** so that potential survivors of violence and citizens would become familiar with the phenomenon of domestic violence/violence in partner relationships, with the role and work of relevant institutions and organizations, thereby developing trust in them and encouraging survivors to report violence (and at the same time to change the way the perpetrators are described, which potentially justifies or encourages them to commit violence), and through educational programs in educational institutions at all levels, in order to improve the understanding and prevention of gender-based violence. For the purpose of prevention, the following would also help:

- **Publishing the verdicts in femicide cases** (because the media usually lose interest in the epilogue);
- **Institutions should inform the public about the event in an appropriate manner immediately after femicides occur**, in order to prevent the spread of false information and speculation about the irresponsibility and errors of experts and services (which is typical for centers for social work, that are most exposed to unjustified media and public criticism);
- **Participation of health institutions**, above all when it comes to the recognition and treatment of psychological violence, its consequences, mental health and support for survivors. Solving the problem of the violent perpetrator's **detention, hospitalization, and mandatory treatment** when under the influence of alcohol, as well as those with mental health difficulties and illnesses is also a frequently cited need of the system, and recognition of the risk of murder and suicide threats;
- **Support for survivors**, and especially familiarization with rights and procedures in a language they understand and in a trusting atmosphere. **Counseling centers** within the social protection system could contribute to the prevention of the occurrence and have a more significant place in the survivor support system, primarily through individual therapy and counseling sessions. Greater **involvement of specialized civil society organizations** in providing support to survivors during institutional procedures is important in order for them to be empowered to persevere in them;
- **Routine checks of domestic violence** in services that do not deal with this topic (such as health services or services for financial benefits in centers for social work), although it could be useful, is not seen as realistically feasible, mainly due to the lack of knowledge and the overload of all systems with regular work.

● **Regulating the provisions** of the Criminal Code and the Law on Prevention of Domestic Violence regarding the circle of protected persons (which is a proposal that has been in place since 2005, since the adoption of the Family Law and measures to protect against domestic violence) would help **standardize the practice (and to understand the measures taken against perpetrators of violence) and improve the coordination of everyone in the system**. Also, a **detailed indication of protection measures and support measures** would be useful for increasing certainty at work, especially when using provisions that are not directly related to the laws regulating protection against domestic violence (although through experience some of them have 'developed internal definitions' and procedures that are useful for preventing violence). Drafting a plan of protection and support measures for survivors, as well as ways of organizing the monitoring of its implementation, developed by some of the participants, could serve as an **example of good practice**, especially when it comes to custody and prison cases, handing over children or organizing contact between children and parents in controlled conditions. The implementation of the following recommendation would also be useful:

- **Continuous** thorough and high-quality **education**, because employee turnover is considerable, and the introduction of monitoring, control, mentoring, and supervision; more frequent opportunities for **mutual exchange of experiences; praising and rewarding** highly motivated professionals for their good work; working on 'support from above' which is missing.
- **Coordination and cooperation groups** should be recognized as an important resource that can lead to the decrease of femicide, suicide and firearms misuse. It is important to systematically monitor and research their work and disseminate examples of good practice.
- It is important to **optimize the understanding of violence, femicide, and suicide**, the consideration of different interpretations (e.g. psychological violence, differences between conflict and violence, who is the violence survivor and who is the perpetrator), and the understanding of risk factors, especially their dynamics (fluctuations over time in intensity and type), which would contribute to the regular practice in a case analysis of femicide-suicide with firearms (and all other femicides) and confronting experts, including court representatives, with the consequences of their assessments and decisions.
- Improve a **differentiated approach to the perception of suicidal threats** in healthcare institutions (not only through the framework of suicidal intent but also through the function of threat in the context of violence towards close people and problematic relationships).
- **Standardize the practice of working with perpetrators of violence** both in the centers for social work and through specialized treatment, as well as the **practice of working with survivors** (there are standards and clear procedures in the world);

- **Standardize the basic and higher courts' approach** to the quality and nature of the evidence and the penal policy (which, according to everyone, is excessively lenient).
 - **Open the issue of the selection of court experts for discussion**, that is, their specialization and the basis for this would have to be an analysis of the effects of their previous assessments.
- The **availability of support measures for survivors** (housing, appropriate financial assistance, employment advice), including better availability of free legal assistance, would contribute to more frequent reporting and deciding to leave the abusive partner. Furthermore, professionals should understand that reporting violence and leaving the abuser is not an easy and obvious decision for the survivor, even though it is considered to be necessary for the prevention of violence. **Professionals' specialized training** and authority for working with this phenomenon exclusively would enable better performance. The existence of **a psychologist in the prosecution and the court, or a social worker in the police**, would enable the survivors to be understood and supported better in the proceedings, and it is believed that in those circumstances they would accept to testify more often, but also the lawyers working with victims would have more certainty. **The victim protection measures that are available to the system** need to be implemented more efficiently. **Survivors should be invited more often to the meetings of coordination and cooperation groups**, as well as non-governmental organizations that know and can help in empowering survivors. Also, **violence survivors and their children should be assisted in their long-term recovery**, which includes specialized psychological treatments for survivor women, and family members of murdered women, as well as age-appropriate psychological support for children.
- **Monitoring of pronounced measures should be improved**, and the use of electronic monitoring of the execution of the measures in severe cases of violence is also suggested. Although professionals point out that control of the possession of firearms in every reported domestic violence or suspicion of violence as a positive change, it is necessary to further improve the procedures for detecting and confiscating firearms in illegal possession, and expanding the terms for keeping and carrying firearms in relation to natural persons, tightening the criteria in terms of health checks, as well as penalties and security measures to prevent firearms misuse. In relation to this is the improvement of preventive work within 'risk professions' (all services in which employees carry firearms), which would have to be continuous and effective.
- **Collecting and processing data on cases**, as well as presenting the findings to professionals in relevant institutions and organizations would significantly improve the understanding of the phenomenon of femicide (and other forms of violence) and the work on its prevention. Although experts from centers for social work suggest using the existing resources for this purpose - **the planning and development departments**, where research is carried out that is insufficiently used in practice, for this type of phenomenon, which, in addition to its extreme complexity, also requires consideration of different institutional responses, it is necessary to establish a special body (to avoid fragmentary data), which is also the recommendation of international bodies¹¹².

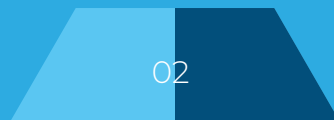
¹¹² Šimonović, D., Report of the Special Rapporteur on violence against women, its causes and consequences (A/71/398), UN General Assembly, 23 September 2016. Available at: <https://www.ohchr.org/en/special-procedures/sr-violence-against-women/femicide-watch-initiative>

In summary, following one of the laws in the field of prevention that the effectiveness of action increases from the bottom up - the more action at the level of primary prevention, the better the job will be at the level of secondary and tertiary prevention - and vice versa, what is missed at the primary level can hardly be compensated at the following levels of prevention - in the process of observing the phenomenon and acting, a **pyramid of prevention** should be built (which reminds us of the statement one survivor made 'three steps ahead...').

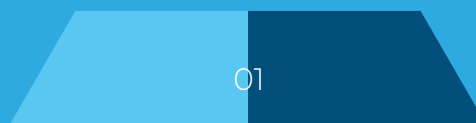
The top of the pyramid is **tertiary prevention**, which includes processing related to serious threats of violence or an already committed act of violence by developing measures to manage further negative outcomes, and also includes actions by the prosecution, the court, forensic experts, as well as the regulation (and further improvement) of legal provisions and creating a special (specified and uniform) framework for addressing this problem.



The middle of the pyramid is **secondary prevention**, which seeks to prevent the further development and spread of the problem, aimed at vulnerable individuals and groups, and it includes the early (as early as possible) detection of persons who are at risk of committing violence by (mis)use of firearms or being survivors of violence, an effort to reduce that risk through actions by the police, the prosecutor's office, health institutions, mental health services, centers for social work, safety and security services.



Primary prevention is at the base of the pyramid, and it examines the assumptions, conditions and causes of the phenomenon in order to prevent risk factors in the general population; it is the basis for taking measures before bad outcomes occur and includes the actions of the media and the education system.



A comprehensive prevention program should be based on multi-systemic action aimed at the same goal - preventing intimate partner violence and domestic violence. Important characteristics of the circumstances of the researched phenomenon and the **determinants that should serve as a starting point when shaping prevention** include the fact that these perpetrators are (most often) not reported by the victims, nor by their relatives or neighbors, that different (inadequate) assessments made by the participants (above all, the group for coordination and cooperation, judges and forensic experts) prevent the implementation of certain institutional measures, that the professionals in cases of femicide and femicide-suicide lack sensitivity and knowledge, and that it is important to empower survivors and encourage their resilience.



9.

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10. APPENDIX

Analyzed femicide cases committed with firearms from the media (2019-2022)

Number	Victim's initials	Type of femicide with a firearm	Year of femicide	Statistical regions of Serbia
1.	D. V.	femicide with suicide	2019	Sombor, Vojvodina
2.	K. D.	femicide with suicide	2019	Near Bačko Petrovo selo, Vojvodina
3.	S. M.	femicide with attempted suicide	2019	Visibaba settlement, Požega, Šumadija and Western Serbia
4.	G. J.	femicide with suicide	2019	Kruševac, Šumadija and Western Serbia
5.	S. J.	femicide	2019	Svilueva village near Koceljeva, Šumadija and Western Serbia
6.	M. Đ.	femicide with suicide	2019	Kotež, Belgrade
7.	V. M.	femicide	2020	Karavukovo, Odžaci, Vojvodina
8.	M. P.	femicide with suicide	2020	Stara Pazova, Vojvodina
9.	B. G.	femicide	2020	Erdevik near Šid, Vojvodina
10.	S. S.	femicide with suicide	2020	Kotež, Belgrade
11.	M. S.	femicide with suicide	2020	Pančevo, Vojvodina
12.	V. M.	femicide with suicide	2020	Voždovac, Belgrade
13.	M. P.	femicide with suicide	2020	Aleksinac, Southern and Eastern Serbia
14.	D. J.	femicide with suicide	2020	Petrovaradin, Novi Sad, Vojvodina
15.	B. Š.	femicide with suicide	2021	Rasno village near Sjenica, Šumadija and Western Serbia
16.	S. A.	femicide with suicide	2021	Vranje, Southern and Eastern Serbia
17.	A. Ž.	femicide with suicide	2021	Valjevo, Šumadija and Western Serbia
18.	M. O.	femicide with suicide	2021	Ribarići, Tutin, Šumadija and Western Serbia
19.	V. N.	femicide	2021	Bor, Southern and Eastern Serbia
20.	T. P.	femicide with attempted suicide	2022	Kušiljevo, near Svilajnac, Šumadija and Western Serbia
21.	S. P.	femicide	2022	Lok, Titel, near Novi Sad, Vojvodina
22.	A. Ž.	femicide with suicide	2022	In Šavac village, near Paraćin, Šumadija and Western Serbia
23.	M. M. M.	femicide	2022	Kragujevac, Šumadija and Western Serbia
24.	Z. E.	femicide with suicide	2022	Crnoča village near Tutin Šumadija and Western Serbia
25.	A. K.	femicide with suicide	2022	Telečka, Sombor Vojvodina
26.	J. P.	femicide with suicide	2022	Starčevo, Petrovac na Mlavi South and East Serbia
27.	M. N.	femicide	2022	Markovac village near Velika Plana, South and East Serbia



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