

Survivors of Homicide Victims: Factors that Influence their Well-Being

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Although survivors of homicide victims are recognized as a distinct bereaved population, little attention has been given to concepts of posthomicide wellness and the conditions that advance survivors' healing. This article examines the well-being of survivors through interviews and focus groups with survivors and victim assistance providers. Data were analyzed using a combination of template analysis and grounded theory, qualitative approaches that serve to broaden existing theory and prior research about homicide bereavement so that survivors' functioning can be assessed outside of theory built principally on death due to natural causes or through the lens of complicated bereavement. Findings include eight dimensions of well-being: (a) movement/intentionality, (b) stagnation, (c) reckonings, (d) injustice, (e) factors in the criminal justice system that help or hinder, (f) the role of time, (g) faith, and (h) family and friends. Findings suggest that posthomicide well-being is associated with cognitive and emotional movement in a forward direction. Discussion centers on the prevention of or reduction in barriers that block survivors' movement.

The horror of murder and its aftermath fall outside the expected norms associated with “normal” bereavement or grief associated with death from natural causes (Armour, 2002; Goodrum, 2008). Instead of mourning for a period of

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time and moving on, *homicide survivors*,¹ defined as family members and close friends of a loved one who has been murdered, experience the ongoing intensity of emotions and the recurrence of grief over a lifetime (Armour, 2002). The disjuncture between the traditional conceptualization of natural death reactions and posthomicide experiences make it difficult to measure what is usual for this population without a new framework that lies outside of current literature or understanding. Indeed, lacking a homicide-specific model of bereavement that encompasses the unique features of homicide grief and trauma and differentiates standard from prolonged reactions, mental health practitioners and bereavement specialists tend to assess homicide survivors against the general population, finding their characteristic reactions from homicide aberrant and indicative of pathology (Spungen, 1998).

The primary purpose of this study is to expand knowledge about homicide-specific bereavement by using the concept of well-being as the focus of inquiry to explore the following research questions: What are the parameters of well-being for homicide survivors? What are the factors that advance or hinder their healing? The focus on a deceased's survivors' well-being grew out of a larger study about the impact of the offender's sentence on survivors' welfare. *Well-being* generally refers to how a person is faring and what is good for that individual (Diener, 1984). Although well-being is subjective and difficult to ascertain, an initial formulation specific to homicide survivors is essential to providing a positive counterbalance to pathology-oriented models such as complicated bereavement (Rando, 1993). The concept of well-being offers the opportunity for establishing beginning theory about norms for survivor functioning so it can be assessed outside of theory built principally on unintentional death due to natural causes or through the lens of complicated bereavement (Middleton, Raphael, Martinek, & Misson, 1993).

LITERATURE REVIEW

Subjective well-being is primarily considered an intrapsychic phenomenon (Gallagher, Lopez, & Preacher, 2009). For homicide survivors, however, a sole emphasis on their internal processes is incomplete because they negate the fact that survivor well-being is heavily influenced by external stressors that are unrelenting.

It is widely recognized, for example, that the state's responsibility for the criminal justice process and its' agenda to obtain a conviction often obscures or takes priority over the emotional needs of survivors thereby negatively impacting their efforts to regain control over their lives (Parsons

¹Other studies refer to these individuals as survivors, connoting their ability to weather the horror of murder. Other studies refer to them as victim-survivors or as co-victims to convey that their status is commensurate with being a direct victim of crime.

& Bergin, 2010). Survivors' struggle to find firm footing may be impeded by their limited access to information that is controlled by law enforcement about the case (Goodrum, 2007); lack of inclusion by the prosecutor in decisions about how the case is handled; refusal by the coroner's office to allow survivors to view and touch their loved one's body (Armour, 2000); disregard by the media of survivors' feelings when publishing sensational newsworthy events (Armour, 2002); and unanticipated and insensitive responses from friends and family. These external stressors diminish survivor's power to have control over their own well being (Hatton, 2003).

Less recognized and underexamined are factors in the posthomicide experience that might support survivors' well-being (Mirowski & Ross, 1989; Pearlin, 1989). For example, the strength of belief in a just world seems to lessen distress because it enables people to trust they will be treated fairly by others (Zuckerman & Gerbasi, 1977) and promotes the assimilation of injustices they have incurred (Hafer & Olson, 1989). The ameliorative effect of this belief has been found with numerous groups including accident victims with spinal cord injuries, flood victims (Otto, Boos, Dalbert, Schops, & Hoyer, 2006), teachers who are victims of student violence (Dzuka & Dalbert, 2007), and victims of mob action (Cubela Adoric & Kwartuc, 2007). For homicide survivors, this relationship between well-being and belief in a just world has relevance because survivors' beliefs about justice and injustice are severely challenged by the murder and closely intertwined with seeking justice. An assessment of this relationship, however, requires concentration on the complexity of interaction between survivors' justice-oriented experiences and their beliefs.

The concept of well-being for homicide survivors therefore needs to be expanded beyond the intrapsychic or relational experience with self to include their interpersonal experience with external and controlling forces. Some indicators of well-being might include survivors' ability to assimilate injustices, the impact of posthomicide trauma on physical health (Freeman, Shaffer, & Smith, 1996; Murphy et al., 1999), their management of outside influences (Hatton, 2003), and their construction of a coherent narrative that could serve as a vehicle for the externalization of the trauma (Dannemiller, 2002; Pals, 2006). Even the self of the survivor, which is frequently portrayed as shattered as a result of the murder (Janoff-Bulman, 1992), could be viewed subsequently as interactionally constituted based on how survivors are seen and treated by others and how they converse with themselves about that treatment (Kenny, 2004).

In her seminal book on homicide survivors, Spungen (1998) called for a new model of homicide bereavement that recognizes the intersection between trauma and grief and differentiates it from complicated homicide bereavement, which Spungen delineated as incorporating mental disorders that occur as a consequence of survivors' vulnerabilities to traumatic grief. Those disorders include anxiety related to issues of separation, clinical depression,

prolonged obsessive compulsive thinking including rumination, and possible somatic disturbances (Spungen, 1998). Aside from the severity of trauma responses and delineation of commonly occurring experiences that obstruct healing, there is little information as yet about the dimensions of homicide-specific bereavement. This study reports the results from interviews with survivors and victim assistance providers, which focused on homicide survivor well-being and survivors' intrapsychic reactions to commonly occurring external circumstances that advance wellness or its' deterioration.

METHODOLOGY

This qualitative study used a symbolic interactionist perspective to examine survivor well-being. Symbolic interactionism maintains that meaning emerges in social interaction with others and internal conversations with self (Blumer, 1969). Symbolic interactionism is consistent with survivors' engagement with self in reaction to the external public response to the murder. It is also consistent with the primary data collection methods used in the study, which included focus groups whose members constructed meanings about well-being collectively and through their interactions with each other as well as interviews with both survivors and victim assistance service providers who otherwise interact with each other posthomicide in role-defined ways.² Data on survivor well-being was initially collected from focus groups and individual interviews for creating a survey to be used in a two-state comparative study of the impact of the ultimate penal sanction on survivor well-being (see Armour & Umbreit, in press). The semistructured questions used in these groups to generate discussion were based on sensitizing concepts found in the literature on violent death, as well as topics that might be relevant to well-being. After examining the data for the purpose of constructing the survey, the researchers realized that the data themselves contained important information for the field on survivor well-being and determined to do a post-hoc qualitative analysis.

Sample Recruitment and Description

The sample for this study consisted of homicide survivors ($n = 23$) and criminal justice professionals ($n = 15$) living in Texas and Minnesota. Survivors were recruited from homicide survivor support groups in both states. Some

²Data were collected from anonymous written responses to survey questions. Although the data were not generated through interaction with the researcher or focus group members, the application of symbolic interactionism to these data remains relevant because the data derive from homicide, which as a public event engages survivors with social institutions, e.g. media, criminal justice system; the survey questions focused, in part, on survivors' experiences with these institutions; and the data themselves reflect survivors' conversations with themselves.

survivors ($n = 16$) elected to participate in focus groups ($n = 12$) or individual interviews ($n = 4$). Other survivors ($n = 7$) contributed written responses anonymously to the questions used in the focus groups. Criminal justice professionals were recruited for focus groups from the criminal justice sector in both states. Demographics contain missing data because data were originally obtained for survey construction.

Survivors who were interviewed consisted of both men ($n = 6$) and women ($n = 10$). They self-identified as White ($n = 14$) or Hispanic ($n = 2$). They had lost children or stepchildren ($n = 10$), parents ($n = 2$), grandchildren ($n = 2$), or siblings ($n = 2$). None of the survivors were present when their loved one was murdered. However, 73% ($n = 11$) of the victims knew the person who killed them. Available data on focus group members ($n = 11$) are that 45.5% ($n = 5$) had a GED or high school diploma, 45.5% ($n = 5$) had some college, and 9% ($n = 1$) had a graduate or professional degree. Their mean age was 28.7 years with a range of 28 to 73 years. The mean age of their loved one at time of death was 28.4 years with a range of 18 to 56. Moreover, 82% of victims ($n = 9$) were between 18 and 30 years old. The offender either had been apprehended (18.2%, $n = 2$) or sentenced (54.4%, $n = 6$). In the remaining cases (27.3%, $n = 3$), the offender had not been apprehended.

Criminal justice professionals consisted of men ($n = 8$) and women ($n = 7$). The roles represented included victim advocate ($n = 11$), prosecutor and defense attorney ($n = 2$), and therapist ($n = 2$). Similar to the survivors, they were either White ($n = 14$) or Hispanic ($n = 1$). Their mean age, based on the available data ($n = 8$), was 56.8 years with a range of 44 to 69 years. Educationally, this group of professionals had at least a Bachelor's degree (25%, $n = 2$), and 75% ($n = 6$) had some graduate school or a graduate or professional degree.

Data Collection

The research protocol was reviewed and approved by the Institutional Review Board at the University of Texas at Austin. A total of three survivor focus groups and three victim assistance provider focus groups were conducted over a 3-month period in Texas or Minnesota. Focus groups and individual interviews lasted 2 hours and were audiotaped and transcribed for transcription. All focus groups and individual interviews used the same semistructured questionnaire about well-being. The questionnaire was revised after review by a provider and qualitative researcher familiar with the posthomicide experience. Items on the questionnaire included participant's conceptualizations of and experience with fairness and justice after a loved one has been murdered, definitions of well-being and nonwell-being including the factors that contribute to each, the impact of the passage of time on well-being, social attitudes and expectations about offender punishment and victim healing, positive and negative aspects of criminal proceedings on well being, and additional topics specific to survivor well-being.

Data Analysis

Data were analyzed using both template analysis (Crabtree & Miller, 1999; King, 1998) and grounded theory (Strauss & Corbin, 1998). Template analysis was used because the semistructured interview guide was developed from preexisting theory on homicide bereavement. Template analysis is appropriate for data that has been collected using semistructured or structured questions or categories derived from a specific theory (Crabtree & Miller, 1999; King, 1998). Key codes are defined provisionally on an a priori basis. Data is coded according to these a priori codes. In addition, codes representing themes are defined as they emerge (Crabtree & Miller, 1999). Emergent codes are those that represent patterns of ideas that are not anticipated and are not included in the a priori template. The template also serves as the basis for interpretation or illumination of the data set, and the writing-up of findings.

In this study, data was collected using semistructured questions derived from theory about homicide bereavement. These questions also served as key codes for the analysis of group and individual responses as well as cross group/case comparisons. Additional or emergent codes were added based on new information from participants about survivor well-being. A modified version of grounded theory was subsequently used to re-analyze the codes that were derived both deductively and inductively to abstract themes and examine relationships that emerged between concepts specific to developing theory about survivor well-being and the factors that influence its' direction. This reanalysis included identifying categories, properties, and dimensions related to well-being, as well as conditions and consequences. Extensive memoing served to capture the critical concepts as they materialized and the emergence of the theory. A list of the a priori and emergent codes are in the appendix.

FINDINGS

For survivors, normalcy in the homicide bereavement trajectory is synonymous with healing and well-being. The findings from this study delineate eight dimensions that are relevant to survivor well-being: (a) movement and intentionality, (b) stagnation, (c) reckonings, (d) injustice, (e) factors in the criminal justice system that help or hinder, (f) the role of time, (g) faith, and (h) family and friends.

Movement and Intentionality

In this study, the mourners recognized that their experience of grief as homicide survivors is not typical. They therefore did not expect their grief

to follow a common progression, to achieve a known end or result in a return to a normal or pre-homicide state. They did, however, associate well-being with movement. *Movement*, in this study, was defined as a nonlinear change of position in a progressive direction toward greater well-being. Indicators of movement included being functional, operating in the present rather than the past, and having a sense of control and choice. Examples of being functional and operating in the present included maintaining a job, paying bills, looking after their own health, or expressing a recommitment to live. After observing “they’ve taken time to do their makeup or a man’s shoes are polished, or their nails” a provider explained the meaning of these behaviors: “They’re showing me that they’re making an effort every day. It’s hard to get up and just face that day. But, it’s also hard to get up and care about what you look like and what you present to people.”

Survivors used various strategies to activate movement including homicide-related activities, a cognitive acceptance of the stark reality, and the consciously chosen decision to move on. Movement motivators included intentional actions such as speaking on drunk driving panels or getting involved in legislative issues that had symbolic significance. A bereaved sister said, “I realized that being a victim and a survivor still tied me back to that crime. So I am no longer a survivor. I am a warrior and I am on my way to being a hero.” Actions were also a means to alter the meaning given to the murder. A survivor furnished this counsel:

You have to take something good from it. You have to. You have to because otherwise if you can’t transform your suffering you’re going to transmit it. You’re just going to keep moving it on. So you have to be able to do something with it. So ... [maybe] ... that involves making new friends because there’s old ones who couldn’t support you, making new choices, re-evaluating your own values, having a new perspective on life, lightening up on some of the things that maybe you did, incorporating the loss into your life in a meaningful way.

Movement was also induced by accepting what cannot be changed. That included the mode of death as well as its impact on who the survivor had become. A father reflected on accepting the irreversible changes that murder brings: “If you’ve had somebody murdered, that person is always going to be with you ... You can move along, you can heal. But you’ll never have the same mindset about things ... You’re different.”

Besides murder-induced activity and acceptance of a new reality, letting go of suffering encouraged survivors’ movement. A survivor concluded that, “[N]o longer dwelling on all of the events is one of the manifestations of well-being in my life.” For homicide survivors, movement did not follow a set schedule or destination. Rather the overarching goal was an unimpeded process that assisted healing to occur.

Stagnation

Stagnation was defined as being stuck in time, a kind of limbo state in which there is no place to go. According to one survivor, just existing meant that “nothing can get in and nothing can get out. You’re just there and you’re nothing.” Manifestations of stagnation included lack of functioning, making destructive choices, being singularly focused, and the inability to move on. As little in life seemed important anymore, survivors had limited energy for basic functioning and, consequently, might let the house go, watch television excessively, not take care of their health, or as one provider shared, “I’ve seen people that have literally come to my office in their night gown.” Besides feeling suspended and out of touch, survivors might make destructive choices. After telling a story about a survivor who was likely deteriorating as indicated by her inability to stop crying or to desist from using chemicals and drinking, a provider declared, “That’s non well-being which is frustrating because she was recognizing the fact that she wasn’t where she wanted to be but for some reason was making choices that she also knew were destructive.”

Indicators of stagnation also included being singularly focused and not having the ability to move on after the loss of a loved one. Survivors might be consumed by ruminations or trapped in their anger, especially toward the murderer. Some described being preoccupied with making repeated trips to the prison where the person was incarcerated, following events in the murderer’s life by what they found on the murderer’s website, or just being fixated on what they might do to the person in the future. “I slept on death row for 12 years with Frank and it was killing me the same.” Survivors could remain in the past by never allowing much change. A provider relayed that she knew a handful of victim-survivors that fast-freeze the victim and circumstances of the victim’s life in time. “I have them back from 1989. The room of the victim has not been touched, the car of the victim is still sitting in the garage. You know, [it is] extremely out of the normal but normal to them because it makes them feel good.” For some survivors, not moving forward might be a consequence of unrelenting rage, a sense of responsibility for remembering the victim, or the guilt-inducing belief that letting go is tantamount to leaving the victim behind.

Reckonings

For homicide survivors, justice as defined by the criminal justice system had little to do with well-being. Indeed, the concept was practically incongruous, an anachronism that had little to do with their own experience and was almost an afterthought. When justice was experienced, it was portrayed as a settling of accounts, a reckoning, for what was taken from survivors and for the injuries received. As such, it was associated with specific events such as

apprehending the murderer and holding the murderer or others accountable for their actions. For homicide survivors, the capture of the murderer signaled forward movement. "We're on our way." Finding out who did it gave some hope that the case would be solved as well as provide a sense of personal safety because the person was no longer at large.

Justice was also conveyed by acts of accountability that served to avenge somewhat the immoral wrong that had been committed. For many homicide survivors, justice therefore meant "getting the max" which signified being charged at the highest level, serving time in prison for as long as possible, extensive suffering, and getting the death penalty. Anything less was viewed as a sell out of their loved one. Morally righting the taking of life could include other behaviors such as the offender's making some sort of restitution, saying he was sorry, showing remorse, or being available in the future for meeting with family members so they could confront him with what he took away and the agonizing pain of loss to the family. Acts of accountability also pertained to persons, including criminal justice officials, whose behaviors, in the opinion of the survivors, created additional wrongs.

The attainment of a sense of reckoning was advanced by fantasies about the offender or experiences that created resolution or peace. Survivors' fantasies might include killing the offender themselves, a change of heart and expression by the murderer of regret and sorrow at the execution, how the offender is suffering in prison, forgiving the offender, watching him die in the death chamber, and imagining what will happen when the offender meets God.

Besides picturing the future, survivors had justice-inducing experiences that helped free them from feeling imprisoned emotionally. A survivor felt safe again after an offender's parole was refused. A parent who witnessed an execution sensed the lifting of a burden. "We don't have to put our lives off anymore. It's given me time now to heal." These reckonings appeared to resolve apprehensions, allowing survivors to finally let go and, in some instances, come back into life.

Injustice

In contrast to the muted sense of justice, the sense of injustice or unfairness was pervasive. Each posthomicide event had the propensity to reinforce the injustice of the murder itself causing more or less injury to survivors. In addition, the frequency and accumulation of wrongs over time had the tendency to compound and embed the wounding.

For homicide survivors, the concept of injustice was synonymous with the devaluing of their loved one or themselves. Survivors' stories of feeling minimized, unworthy, or unimportant were often laced with anger, disgust, frustration, and a mounting and self-protective cynicism. They frequently compared their treatment with the attention or advantage given to someone

else. For example, the murderer only had to serve a limited number of years in prison to pay for the loss of their loved one's life. A survivor pointed out society's misplaced priorities by noting, "You can kill a federally protected wildlife species [and] do life ... whereas you can kill a human being and do 5, 6, 7, 8 years and be out on the street." The unfairness they felt extended beyond experiences in the criminal justice system. A stepmother commented on how people underrated her reactions to her stepdaughter's death. "Because it was my step daughter, people would wait until my husband was away from me and then ask me, 'How's Donald doing? What's going on?' Like I had no feelings about this. I was her step mom for 30 years."

Survivors judged those who treated them poorly as dishonest, insensitive, or incompetent. They evaluated unjust events as indicative of a double standard. For example, survivors experienced theory fabrication by the defense attorney as dishonest or the use of technicalities to reverse decisions on appeal as gimmicks. They experienced misinformation from system-based authorities as evidence of incompetence. The lasting injustice, however, came when survivors experienced a double standard, notably that the offender had more rights than they or their loved one had. Although rare, there were actions that for some survivors balanced the inequity and reduced the feeling of being invalidated. A survivor, for example, told how a bailiff removed the offender's sister from the trial courtroom when she got really loud in her comments to the survivors. "Yes it felt right that they took her out. It felt at least [that] they had that decency."

Time

Time seemed to move differently after a loved one was murdered. Time passing did not seem to change the vividness with which the murder was recalled. Consequently, time could go on chronologically but not move at all emotionally. Indeed, for many, time moved in two directions at once: Toward the past that was gone and the future, which could not be comprehended as having any meaning.

The central feature of homicide-related healing was the exceedingly slow pace of the process. "It never goes away ... it's just like yesterday for me everyday." Even change over time moved in slow motion. A daughter described gradual shifts in thinking about her father's death. "For two years I thought about it every 5 minutes. And there was a period of one year where I thought about it every 10 minutes and then after 3 or 4 years I thought about it every 30 minutes to an hour. Then in five years I thought about it every two or three hours. Then I'm down to 5 times a day. This is eight years later."

The inherently slow pace of healing for homicide survivors was often compounded by their unrelenting anger, fixation on the loved one's suffering, initial negative experiences with the criminal justice system, prohibitions

against finding pleasure, external circumstances (e.g. stigmatizing media coverage, level of dysfunction prior to the murder, and survivor's ability to handle differences in family member's reactions). These circumstances could create blockages that impeded forward movement or, more commonly, caused crises that emotionally threw the survivor back in time requiring the need to start all over again. The slow pace of healing also reflected the time necessary for the emergence of a new self and the experience of life with different eyes. "After a murder ... you have to start over with life. Everything is new. Every event and holiday is new. Everything is either 'before' or 'after.'"

The impact of time on survivor well-being was heavily influenced by the criminal justice process which itself was slow, controlling, and determinative of outcomes that may thwart or advance healing. Indeed, some survivors believed that they had to postpone their own lives, sometimes for years, and endure the lengthy waiting periods associated with the justice procedures before their healing could begin. "I took non committal jobs because I had to be available to go to appeals."

Survivors measured time by events related to their loved one's death. The recounting of these incidents honored and helped keep the victim's memory alive. Time was also calculated based on years served by the murderer, when the murderer would be released, changes in family holiday celebrations, and rituals to memorialize the victim.

Psychological movement was measured by marker events as well. Survivors assessed changes in themselves by comparing how they reacted over time. They might conclude, for example, that there was little difference between one year and the next. "Every birthday, every Christmas, Mother's Day, Father's Day ... I always get sick. It's just knocks the scab right off ... and you're right back where you were." Alternately they might be surprised. A provider related what happened when he made his annual call to a father on the anniversary of his daughter's death. "He yelled out to his wife, 'What's today?' [Then] he realized the anniversary of [his daughter's] death had passed ... It wasn't intentional but he had sure done things [to grow] over the years."

Criminal Justice System

After a murder occurred, representatives from the criminal justice system became the reference point for survivors. How they initially treated survivors set the stage for how the survivors perceived and emotionally responded to subsequent experiences. When survivors were included in decisions and unfolding developments, it helped them feel useful and countered the feeling that nothing they did or their opinions made a difference. Likewise, when family members' questions got addressed they were better able to reconstruct or make some sense of what happened. A son drew an analogy between being given scraps of information by officials and chewing on a

bone. "You know that you will grab any bone they will throw you. [If they call you] you just get off the phone and you're smiling. More, more."

Validation of survivors and honoring of their loved ones by justice officials served to restore some partial belief in the goodness of others. A mother felt affirmed and supported after she realized that the sentencing of the offender came on her daughter's birthday. "I just thought, 'Betty's birthday.' Whatever they come up for the sentencing, it will be appropriate, just to honor her." Justice officials also reduced the propensity for additional trauma by providing guidance and reasonable explanations for what survivors were experiencing. As part of preparing survivors to witness executions, a provider explained that "[I]f that day they feel badly because someone is about to die, [I tell them], 'It says more about who they [the survivors] are than what this process is or the person who is fixing to be executed.'"

Forward moving events also seemed to help survivors. The attainment of desired court outcomes provided relief and some sense of resolution. Victim impact statements attesting to the survivors' love for the victim plus the degree of loss they have suffered could offer a release of pent-up anger and some expression of moral accountability directed at the offender. A meeting with the offender or members of the offender's family often resulted in answers to long-standing questions or the re-establishment of some of the humanity that was desecrated by the murder.

In contrast to these positive elements, movement was hindered by the uncertainties produced by unknowns about the outcome of a case, surprises that undercut survivors' progress, and unmet expectations. These conditions increased survivors' insecurities and the unpredictability of circumstances, such as the trial or parole hearings, in which they were deeply invested. Moreover, a litany of unanticipated events tended to recreate the shock and anxiety that survivors felt when they first learned about the murder. A survivor expressed her disappointment in the prosecutor during a plea hearing. "The assistant prosecutor ... she was joking in the front ... with his lawyer. So I told my son, 'Look at that. They're just laughing at us.' So he called the meeting ... with them and he told her, 'What are you doing? We don't want you on this case. Just stay away from us. We don't want no part of you.'"

Faith

Many if not most survivors looked to God to answer the questions that plagued them. Commonly they experienced an initial crisis in faith that shifted their relationship with God. Indeed, some providers contended that survivors flip flopped blaming and moving away from God if they were devout before the homicide because He didn't protect the victim or, the reverse, suddenly moving toward religion because they needed God to talk to or pray with. Rarely was the relationship with God stable. A survivor admitted, "I do believe in God and sometimes I didn't when it happened. My brother did

stop believing in God and ... it was more than a decade later he told me he could believe again.”

Nagging questions about forgiving the offender also challenged the relationship between survivors and God. Aside from the fact that some religions instructed survivors to forgive, the path to forgiveness was varied. A survivor remarked that he hoped the offender would say something at the time of execution that would make a difference. “If she said she was sorry, I could have a feeling of forgiveness in my heart.” Another survivor indicated that he was waiting for God to change his heart. Some people actively strove to forgive because the anger they feel is killing them literally or figuratively. Overall, however, the decision and ability to forgive the offender was more a gradual process than an event. According to some survivors, forgiving affected well-being by freeing them up, allowing them to forgive others as well, and releasing them from the emotional burden they were otherwise carrying.

Many survivors turn to prayer or a faith community for strength to weather the horror caused by the murder. A mother expressed her gratitude for a prayer phone line she would call in the early hours of the morning. “Total strangers who knew nothing about me ... They were there and they were able to share my pain and pray with me and cry with me and do whatever I needed and stay on the phone for hours with me.” Reactions from fellow parishioners also impacted survivors’ needs for belonging, acceptance and comfort. Indeed, just being able to attend services or volunteer in some way could sustain their faith even if they felt estranged from God.

Family and Friends

Murder altered the structure and order of relationships in the family. “Someone is not the youngest anymore, somebody is not the middle child ... and somebody is not the oldest anymore.” It also changed how people reacted and experienced life at a time when family members most needed each other and their friends. How a particular family member grieved, for example, could strain relationships and the subsequent well being of the other family members. A wife explained the importance of differences in gender-based reactions. “I’m the woman and I cry and I want my spouse [to cry]. My husband doesn’t want to. Well normally it’s because the man doesn’t want to see the wife cry and doesn’t want to talk about it. They feel guilty because they couldn’t protect the child.” Besides not living up to each other’s expectations, family members’ well-being was also influenced by the comparisons they made to each other. A survivor noted, “One day you might whistle and then your partner or your brother or your sister or your spouse is really down in the dumps and so you feel worse for having an okay frame of mind. You feel guilty because you’re not as low as that person or you feel jealous

if they are having a [good day].” Murder uniquely affected children in a family. Survivors’ self-absorption might leave children feeling that they had lost more than the person who was murdered. A provider explained, “You may know a mother for ten years and not know she has any other children but the one that was murdered.”

Murder also created or exacerbated estrangement between family members and with friends. These additional losses occurred at a time when survivors were already depleted and when the undoing of their close relationships left them even more alone. Even if relationships lasted, survivor couples, for example, worried that they too might become a divorce statistic thereby substantiating the hearsay about greater rates of divorce among couples that lose a child.

Support groups or assistance from friends, fellow parishioners, or therapists addressed needs that other family members were not able to meet because of their differences or concerns about burdening each other. Besides this substitute function, family members and the providers who served them were clear about which behaviors are supportive of a person’s journey. The central task was to listen to survivors in ways that bore witness to their story and their pain. “I didn’t need kudos. I didn’t want pats on the back. I don’t want hugs. I got them but I needed people just to listen to me, just blabber.” Listening included hearing the intensity of survivors’ feelings without backing away. Support also meant that survivors did not have to explain themselves to be validated. Moreover, when genuine and nonjudgmental support was available, survivors were able to lower their guard. It was particularly heartwarming when others initiated talking about the loved one who was killed or could reassure survivors that they weren’t responsible. “If we hadn’t had wonderful people telling us it wasn’t our fault, we would have been torn apart from the feelings of guilt that we could have done something different.”

When murder happens, homicide survivors are thrown into a netherworld where they are powerless and clueless about their new role as survivors. They are therefore more susceptible to the influence of socially prescribed behaviors that define what is and is not allowed and vulnerable to the conditions that impact their well-being for years. “You’re just out there and your brain is going, ‘Oh, my God. What is this and who’s going to tell me what to do ... and how to do it?’” Although posthomicide well-being is likely influenced by the individual’s level of functioning prior to the homicide, survivors’ perceptions of mental and physical health, reckoning experiences that provide a sense of justice specific to the murderer, the accumulation of injustices, the role of time, the nature and quality of their interaction with the criminal justice system, their ambiguity about faith or belief in God, and the closeness or distance in their personal relationships including family members impact survivors’ ability both positively and negatively to move in ways that support their ongoing life.

DISCUSSION

The portrayal of homicidal grief as complicated bereavement places homicide survivors as outliers when it comes to evaluating their grief reactions. This categorization places an unfair burden on them for not getting past their grief, which in the context of a healing journey goes on in some form for the rest of their lives. The description of eight dimensions of homicide survivor well-being including the definition of posthomicide well-being itself is intended to establish homicide survivors as a unique cohort and to move their posthomicide experience beyond the narrow confines of bereavement. Indeed, shifting the focus to the survivors' well-being emphasizes their functioning as whole human beings, not just as survivors of grief with a complicated grief label.

The delineation of well-being as movement establishes parameters for assessing the health of survivor's current functioning. Indeed movement and stagnation could be considered two ends on a well-being continuum. Movement, however, is not necessarily forward in direction but rather jagged. Survivors tend to move back and forth between making progress and feeling knocked back down as a natural part of their healing process. What matters, therefore, are not reversions or set backs but identifying blockages that can stall forward movement. Many of those blockages are caused by injustices, unanswered questions, or beliefs such as the conviction that letting go of pain or moving forward in time is tantamount to leaving their loved one behind. Blockages may also be created by the lack of momentum in the criminal justice system, which holds survivors in limbo until after the murderer's final legal proceeding or execution.

Because movement is critical to their well-being, survivors and the providers who accompany them need to work through the knots that otherwise impede their healing progress. When survivors, for example, are given ample information or have the opportunity to get questions answered, pieces of the puzzle go into place and move them forward. When survivors are given reasonable explanations for people's baffling behaviors, disparate realities, or poor treatment, their deeper understanding can mitigate some of the emotional reactivity that otherwise keeps them stuck. Advocacy to ensure survivors are not sidelined but are included in the criminal justice process can reduce the devaluing that contributes to their feeling powerless and despondent.

Besides removing blockages, movement is best bolstered by survivors' own pursuit of their well-being. The findings support the notion that survivors must activate movement themselves rather than waiting for it to happen naturally or without intervention in order to give themselves back some sense of the control and privacy that has been stripped away due to the public nature of homicide.

The suggested dimensions of homicide survivors' well-being derive directly from survivors themselves and providers who assist them but there is support for some of the dimensions in the literature on grief generally. For example, the delineation of well-being as movement and nonwell-being as stagnation coincides with Kubler-Ross's stage theory of grief (1969) and Horowitz's assessment of abnormal grief as the person remaining "interminably in the state of grief without progression towards ... assimilation or accommodation" (Horowitz, Wilner, Marmer, & Krupnick, 1980, p. 1157). Likewise, the concept of time is central to both homicide-specific and non-homicidal grief. However, the consideration of time as prolonged is a common occurrence in the homicide survivor population but considered aberrant otherwise and an indicator of complicated bereavement (e.g. Prigerson et al., 1995; Rando, 1993). As found in this study, a religious and spiritual connection to God and the faith community is regarded as a core pillar of support for mourners generally (Rando, 1993) and for particular ethnic groups (e.g. Boyd-Franklin & Lockwood, 1999; Mattis, 2002). Moreover, in some kinds of socially stigmatized deaths, such as AIDS, avenues to spiritual reconciliation may be blocked (Rando, 1993). Similarly, studies of perceived social support from family and friends have found less or greater difficulty with bereavement based on whether support is available or inadequate or conflicted (Worden, 2008).

Although there is overlap in the study's findings on well-being with the general literature on grief and disenfranchised deaths, homicide has unique features that impact well-being such as the criminal justice system as well as nuanced differences within the apparent overlap. For example, well-being for homicide survivors interfaces with different aspects of time in that movement is slow due to external factors such as the criminal justice system but also because of internal factors such as the evolution of a changed self. Moreover, because murder or the deliberate taking of another person's life is fundamentally immoral, no amount of justice can erase that reality. Indeed, the findings indicate that the experience of justice is muted and splintered, being limited to specific events such as apprehending the murderer and acts of accountability. On the other hand, the experience of injustice is far stronger and pervasive. Accordingly, expectations about survivors' subjective well-being may need to be re-examined for two reasons: First, to reflect the substantial power of accumulated injustices to diminish the quality of well-being, and second, to confirm that the optimal level of well-being in the posthomicide experience is more in the neutral range rather than some wished for highly positive emotional feeling.

Implications

These realities have implications for creating a new mindset and theory about homicide-specific bereavement. Moreover, it redirects attention away from a grief context toward the concept of well-being, which incorporates

the ongoing quality of the healing process and addresses factors that hinder or assist movement. The findings also have implications for practice both in terms of a strengths or resilience perspective and interventions that build a sense of safety, increase available choices and the ability to be self-determining, as well as identify, prevent, or reduce factors that block movement.

Although most states have endorsed a Bill of Rights for crime victims, compliance is generally voluntary rather than legislated. The research findings suggest that well-being is heavily influenced by having more or less control over the events in the criminal justice system and could be used as a basis for educating policy makers and garnering support for current state-based efforts to improve treatment of crime victims/survivors and prevent rights violations. This study also opens the door to including an analysis of survivor well-being as part of the public health costs of homicide to a community.

Because the concept of subjective well-being shifts the focus away from a pathology and a narrow model of grief, research on the concept of well-being can be expanded and applied to victims of crime other than homicide. Moreover, comparative studies might help determine similarities as well as differences between homicide survivors and victims of other types of crime. Additional research might focus on the impact of marker events such as offender's sentence, parole reviews, or offender's release on survivor well being. Most research on homicide survivors disregards time since the murder or limits time to the first 5 years posthomicide. Longitudinal or cross-sectional surveys could examine homicide well being at different points in time for a more comprehensive picture of survivor's healing process.

Limitations

This study was limited by the fact that the qualitative findings cannot be generalized beyond the homicide survivors and providers who participated in the research or the sociohistoric time when they were interviewed. The majority of participants were Anglo-White and therefore neither ethnically diverse nor representative of the populations most heavily impacted by homicide, that is, African Americans and Hispanics (Centers for Disease Control and Prevention, 2011). The survivor participants were restricted to users of homicide services including support groups.

CONCLUSION

Although victim assistance and mental health providers are well aware of the trauma suffered by homicide survivors, survivors themselves recognize that the murder has far reaching and unforeseen consequences that permanently change their lives, who they are, and how they live. Moreover, the reality that their loved one was murdered continues to be reworked based on where

they are in the life cycle, reshaping their values, decisions, and what they need over time. The concept of survivor well-being incorporates the totality and longevity of the posthomicide experience while making movement a core indicator of health.

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APPENDIX

A Priori Codes, Emergent Codes and Dimensions of Well-Being

A priori codes	Emergent codes	Dimensions of well-being
Fairness and justice	Movement in the case Meaning of justice Cognitive concept Apprehending the murderer Getting the max Procedural justice Safety Accumulated injustices	Reckonings Injustice
Well-being and healing	Intentional living Functionality Nonwell-being Drugs and alcohol Consumed with the past In limbo Anger/hatred	Movement/intentionality stagnation
Time factors	Healing process Healing rhythm Counting time Measuring movement	Role of time
Social attitudes Offender punishment Survivor healing		
Criminal proceedings	Surprises Relationship with murderer Delays and endurance Invalidation Social supports-friends Expectations Estrangement Substitute friends Social supports-family Differences in reactions Divisiveness/fragmentation Faith and religion Crisis in faith Anger at God Prayer Spiritual support Forgivingness	Factors in the criminal justice system that help or hinder Family and friends