

The awful tragedy in Clonroche over the weekend again raises the question as to why these tragically gruesome incidents occur. What could possibly drive a man to murder his wife and children and then turn a gun on himself. What gives rise to these catastrophic outbursts of violence, murder, and suicide?

Recent appeals have suggested that the solution is to have more improved psychiatric services available. While necessary, this is, I think, a simplistic analysis of a complex situation. We all have a desire to categorise the perpetrators of these acts as seriously disturbed psychiatric patients. This however is unfair to most people who suffer from various forms of mild to severe mental illnesses. It is also a reflex to put as much distance between ourselves and these perpetrators as possible. We need them to be not like us. However, I am sure most of you will be shocked at how, in many of these awful incidents of domestic murder, the perpetrator is not 'a drooling monster who drags his knuckles in the dust' but often an upstanding and well-functioning citizen. This is what makes these catastrophes all the more chilling.

Having worked with violent and abusive men over the past 20 years, I have realised that most men who engage in controlling and abusive behaviour escape the net of psychiatric and psychological services. This is the case because under-functioning people use most of these services. That is by people, who by virtue of some form of mental distress, under-function in some area of their life such as work, family, relationships, or emotional-control. Their 'illness' interferes with the person's ability to cope with life and they seek help.

However, many disturbed people are in fact over-functioning people. Over-functioning people rarely come within the radar of psychological or psychiatric services because they are actively trying to control their lives. Rather than appearing mentally ill or unable to cope they are seen as highly functioning people by friends and acquaintances. They may be well liked and successful. For example, the Austrian man who kept his children in the dungeon was, according to accounts, a reliable employee and unremarkable neighbour. The over-functioner is in control of their lives and the people around them in ways that are obsessive but equally driven to maintain social status and respectability.

It is not unusual that after a tragedy people say things like "he was such a successful person", "he had everything going for him" etc. This is because the person who is over-functioning appears to family and friends to be a rock of success or stability. Very often no one, except this person's wife and children, ever sees the extremes that drive many of these kinds of people.

It is in fact a significant gap in psychological and psychiatric diagnostic systems that there are no accurate diagnoses for the Controlling and Abusive Personality. This should include the controlling man who uses various tactics of abuse, violence, and degradation to dominate his wife and family; the controlling man who uses extreme tactics to promote and develop his success and social status; the controlling woman who dominates and terrorises her partner and children through extreme demands for compliance; etc.

The common characteristic of these people is intense over-functioning. The over-functioner will rarely utilise psychiatric services and will, in most instances, see such an outcome as catastrophic failure. The tragedy for the controlling abuser is that needing psychiatric or psychological intervention is the ultimate failure and they would often choose suicide or some other catastrophic outcome than to publicly be seen to have failed. Social status is the essential ingredient for this person's self-esteem and self-status and without it the controlling person feels that they are nothing. And they would prefer to be dead than to feel like nothing.

So what can we do? We need public mental-health education campaigns about the hidden iceberg of emotional abuse and control that affects so many families today; about how to recognise abuse and control; about what is normal and healthy; about male mental health and the compulsive drive toward social status; and about human rights within the home. TV ads should be run on family emotional health that showed the difference between abuse and anger, between over-functioners and under-functioners, between respect and contempt, between domestic control and freedom, between emotional terrorism and healthy discipline etc. There is little or no investment today in any kind of this kind of preventive education for families.

The success of the NCT system for assessing a car's road worthiness is to me an example of what a government can do if it has a will to *prevent problems* rather than dealing with the *effects* of them. *We put more into ensuring our cars are safe than we do into ensuring that families are safe.* Just as every car gets its NTC, should not every family receive a family psychological assessment that would highlight strengths and weaknesses as well as uncover patterns of abuse and control that may be silently hidden behind its doors. I can assure you that if child benefit were linked to each family having its psychological 'NCT' test done, everyone would be doing it.

What we are beginning to realise is that psychological or psychiatric degenerates do not murder their wives and children - socially convincing, driven, and controlling personalities do. As we know from child sex abuse, monsters don't abuse children, 'nice' men do. The domestic terrorist rarely goes to see a psychiatrist - and when he does it's because he wants to get his wife into treatment.

**WHY MEN KILL THEIR WIVES,
CHILDREN, AND THEMSELVES:**

**Understanding Catathymic Violence
and
what we might be able to do about it.**

A public seminar