

"The Code of the Streets as a Pathway to Dissociative Homicide: Exploring the Criminal Case of R. v. Husbands (The Eaton Centre Shooting)"

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The Eaton Centre Shooting

Tourist and Local meeting point

Heart of the downtown

Wikipedia highlights the history of the Eaton Centre and the Eaton Centre shooting is a notable incident in the description.

The Shooter was a Mr. Christopher Husbands.



Mr. Husbands' Case History

Born in Guyana

Came to Canada at the age of 11 years with his father

Parents separated and mother remained in Guyana

Racial discrimination in Canada

Taunting re skin colour but black peers too



Early Childhood

Grew up in Regent Park
Downtown housing project
An urban Ghetto
Exposure to violence as a teen
Guns, gangs, drugs and deaths
Saw friend shot dead



Early Adulthood

Dropped out in grade 9
Had an association with gangs in the locale but not officially a gang member
Was in a relationship and girlfriend charged with him a sexual assault.
Was out on bail.
Surety was an older woman.



The Stabbing

Was 21 years old and on bail for the sexual assault
Son of surety had concerns that he may be having a sexual relationship with mother
Unexpected, hard to explain ambush
Asked to attend at a specific location and did so to meet friends
Suddenly pulled into apartment and was stabbed about 23 times in his back
Hit in face with a gun and suffered from a fracture of the orbital bone.
Heard filling of bathtub
Realization that death was imminent
Fought off a few of his assailants who then abandoned the attack
Stumbles out and collapses into the snow and someone called an ambulance



Reaction to Trauma

The aftermath

- Hung around friends who carried a gun
- Hypervigilance
- Sleep disturbance
- Flashbacks
- Paranoia
- Carrying a gun
- Withdrawal and avoidance
- Refusal to cooperate with the police-Code of the Street!



Reaction to the Trauma

Admitted to a local hospital

Refused to talk to police

Refused to talk about feelings

Discharged in 4 days with no follow up

or referral to a psychiatric service

Develops post traumatic symptoms, depression, anxiety, flashbacks, hypervigilance and does not seek help

Drinking more and using cannabis to cope



Reaction to Perpetrators in the Mall-4 months later

Went with girlfriend to mall to buy inline skates

Was carrying loaded gun for friend but felt reassured to have it with him

Sudden chance appearance of several members of the group of men who stabbed him

Mr. Husband' description of his mental state at the time of the shooting-4months later

- Sudden terror
- Belief he will be killed
- Feeling cornered and trapped
- Heard words "There he is shoot him!"
- Sudden reaction on impulse
- Shot once and then everything a blur
- Slow motion and silhouettes
- Becomes aware of pandemonium in the mall and flees



Prosecution Concerns

Public safety
Motive to kill-revenge
Carrying loaded gun
Fail to seek help for PTSD
Need for severe punishment and deterrence of gun use in community
Public sentiments
Charged with 2 counts of First Degree Murder



Defenses Considered

Self Defense
Not Criminally Responsible on Account of Mental Disorder
Diminished Capacity
Second Degree
First Degree Murder



Psychiatric and Psychological Assessments

Post Traumatic Stress Disorder
Complex Post Traumatic Stress Disorder
Dissociative Experiences
Absence of Malingering



The Many Faces of Trauma

- Single episode-extra ordinary event-objective perspective
- Single episode-ordinary event-subjective perspective
- Multiple episodes-extra ordinary events
- Multiple episodes- ordinary events-cumulative life stress
- Developmental stressful events/Developmental trauma
 - Childhood abuse, neglect, abandonment, separation from family
 - Refugees states



Cont'd

Using one word "Trauma" to capture a variety of human events does not do justice to the individual's experience.

How is it possible to compare a motor cycle accident to a rape, a torture experience to the loss of a child.



Nature of Responses

- Depression
- Anxiety
- Sleep disorders
- Hypervigilance
- Dissociative symptoms
- Somatic symptoms
- Behavioral problems
- Aggression
- Post Traumatic Stress Disorder
- Complex PTSD
- DESNOS (Disorder of Excessive Stress Not Otherwise Specified)



The Evolution of the Concept

Railway spine, Soldier's Heart, Battle Fatigue
PTSD-III to DSM 5
Subthreshold PTSD
ICD 11-more restrictive criteria (Maercker, 2013)

Complex PTSD –disturbances in:
• Affect
• Self
• Interpersonal relationships
DESNOS-Herman
• Dissociative Identity disorder
• Borderline personality disorder
• Somatization disorder
Developmental Trauma Disorder-Van der Kolk

DSM-5

Exposure to actual or threatened death, serious injury, or sexual violence by:
• Direct exposure
• Witnessing it
• Learning of it occurring to close person
• Repeated or extreme exposure

Intrusion symptoms

(one or more symptoms in relationship to the trauma)

- Recurrent, involuntary and intrusive **Memories**
- Recurrent intrusive **Dreams** related to the trauma
- **Dissociative** reactions in the form of flashbacks and or dissociative episodes
- Intense or prolonged **psychological distress** to cues (internal and or external)
- Marked **physiological reaction** to cues symbolizing or representing aspects of trauma

Persistent Avoidance of Stimuli

(One or more of the following)

- Of memories
- External reminders



Negative alteration in cognitions and mood (two or more of the following)

- Dissociative amnesic episodes-re important aspects of the trauma
- Persistent and Exaggerated negative beliefs or expectations of self, others or the world
- Persistent Distorted cognitions re the cause or consequence of the traumatic event by blaming self and others
- Persistent negative emotions-guilt, shame, fear, horror, anger etc.
- Markedly diminished interest in or participation in significant activities
- Feelings of detachment or estrangement from others
- Persistent inability to experience positive emotions



Marked Alterations in arousal and reactivity associated with the trauma (two or more of the following)

- Irritability or anger to others or objects
- Reckless or destructive behaviors
- Hypervigilance
- Exaggerated startle responses
- Problems with concentration
- Sleep disturbances



Dispositive Factor

Personality variables
Prior mental illness
Gender
Nature of the trauma



Cont'd

Dose response (modest association)
Injury
Interpersonal in nature
Active involvement as opposed to being a witness
Subjective distress and dissociation
Especially peri-traumatic dissociation (strongest relationship)



Cont'd

Female gender
Younger age
Minority status (racial and ethnic)
Lower SES
Lower intelligence
Lower education
Prior psychiatric history
Prior trauma
Lack of social supports



Trauma and Violence

- Studies in post combat veterans-(Kulka 1990; Lasko et al., 1994)
- Studies in general populations-Collins and Bailey (1990)
- Studies in gangs- (Burton et al. 1994)
- Studies in child soldiers-
- Flashback driven-
 - Lewis 98
 - State v Sepi
 - 7 cases in US resulting in acquittal or insanity
 - None in Canada



Clinical, Legal and Ethical Dilemmas

- At what point do the boundaries between self defense and revengeful acts become blurred?
- Are there any legal mechanisms to mitigate the sentence?
- Do cultural and gender factors have an impact?
- What are the roles of clinicians in helping courts to understand
 - Post Traumatic Stress Disorder
 - Complex Post Traumatic Stress Disorder
 - Dissociation
 - Malingering



Alternative Scenarios

- Woman being gang raped
- Battered Woman Syndrome
- Non Black person being stabbed and similar offense occurring in similar location
- Black man stabbed and shooting in the ghetto
- Nature of juries



Judge and Jury

Husbands was convicted of 2 counts of First Degree Murder

Was sentenced to two life sentences to be served consecutively.



Final Thoughts

- Rethink definition of trauma
- Broader views of effects of trauma
- Understand the compulsion to repeat trauma
- Understand social and cultural context of trauma
- Open to notion that trauma may manifest differently in different people
- Trauma Informed Care in corrections, probation and mental health facilities
- Community Responses-Trauma Response Teams
- How does the "Code of the Streets" help to understand some of the above thoughts?



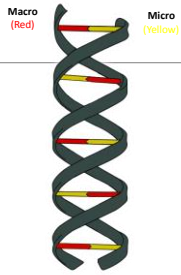
Adam's Insights

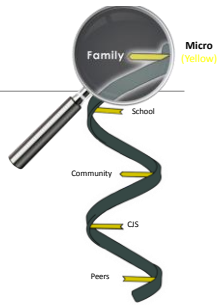
The Code of the Street



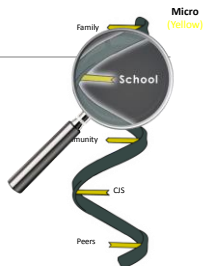
The Trauma Helix

Integrating the Micro/Macro contexts of violence

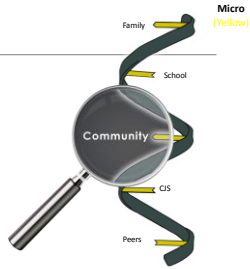




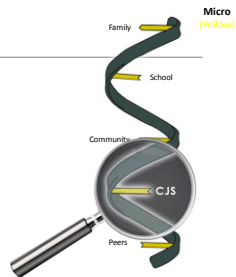
The trauma helix



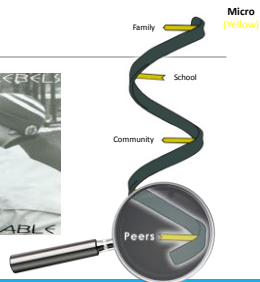
The trauma helix



The trauma helix



The trauma helix



Graduation to Organized Crime