

Forensic Techniques in Crime Scene Investigation – *The Psychological Autopsy*

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Abstract: Any crime scene investigation is a real challenge for those involved in forensic examination. Especially in those cases where a death occurred, evidence dynamics and the amount of data collected must lead to an undoubtful conclusion. In some cases investigators have to establish a clear difference between *accident, suicide, homicide*, and a natural death. It is the case of equivocal death, where is necessary to understand all the psychosocial factors who have contributed to this end in order to clarify the nature of death. The psychological autopsy is the appropriate procedure in these cases. The present article will describe this technique.

Keywords: psychological autopsy; equivocal death; criminal profiling; victimology

1 Considerations

A psychological autopsy is a forensic technique that involves reconstructing the psychosocial aspects of a victim's life. It may be seen as an extension of *victimology*. This reconstruction is based upon information gathered from personal documents (including electronic documents, such as emails, word documents), police reports, medical and coroner's records, and face-to-face interviews with families, friends, and others who had contact with the victim before the death. All these data may reconstruct the deceased's psychological state leading up to and at the time of death. Oftentimes a timeline is constructed that depicts major life stressors (financial problems, drugs abuse, loss of a loved ones), psychological states, and major life events (birthdays, marriages etc). Known psychological theories are applied to these data to develop a victim's profile and background, and to better infer the interpersonal relationships, personality traits, and coping mechanisms. *The psychological autopsy assists the investigators in understanding what role the deceased had in his own death* (Gelles, 1995).

2 A brief history of psychological autopsy

The first psychological autopsy research was most likely Gregory Zilboorg's investigation of ninety-three consecutive suicides by police officers in New York City between 1934 and 1940. In 1958 the chief medical examiner of the Los Angeles Coroners Office asked a team of professionals from the Los Angeles Suicide Prevention Center to help in his investigation of equivocal cases where a cause of death was not immediately clear. Having the point start on these investigations, the psychiatrist Edwin Shneidman coined the phrase "psychological autopsy" to describe the procedure he and his team of researchers developed during those investigations. The method involved talking in a tactful and systematic manner to key persons – a spouse, lover, parent, grown child, friend, colleague, physician, supervisor, and coworker – who knew the deceased. Their practice of investigating equivocal death in Los Angeles continued for almost thirty years and allowed for more accurate classification of equivocal deaths as well as contributing to experts' understanding of suicide.

In the 1970s and 1980s, researchers using the psychological autopsy method investigated risk factors for suicide. Psychological autopsies have confirmed that the vast majority of suicide victims could be diagnosed as having had a mental disorder, usually depression, maniac depression, or alcohol or drug problems. Other studies focused upon the availability of firearms in the home of suicide completers, traumatic events in person's lives, and other psychological and social factors.¹

3. Types of psychological autopsies

There are two major fields where the psychological autopsies should be applied: the *suicide psychological autopsy* (SPA) and the *equivocal death psychological autopsy* (EDPA) (La Fon, 1999). Both applications use a similar procedure although each application's purpose or goal is very different.

¹ <http://www.encyclopedia.com/doc/1G2-3407200026.html>.

3.1. Suicide psychological autopsy

This type of clinical approach is performed when the manner of death¹ is unequivocally a suicide. For this purpose there are clear guidelines provided by the Centers for Disease Control and Prevention, Atlanta, USA², guidelines that establish suicide as the appropriate mode of death (Jobes *et. al.*, 1987). These guidelines classify a death as suicide based on the presence of self-inflicted injury evidence and explicit/implicit intend to die.

Understanding the psychosocial factors that contributed to the suicide is the prevalent purpose of the SPA. Data from the SPA are collected and databased by suicidologists to better understand suicide causation for the purposes of clinical intervention and prevention.

3.2. Equivocal death psychological autopsy

An equivocal death is any death in which the manner of death is not immediately clear. Shneidman (1981) estimates that between 5% and 20% of all deaths are equivocal.

The EDPA is a form of death investigation that must analyze alternative manners of death in an attempt to provide new information about the circumstances surrounding the death that can then be further investigated by the appropriate authorities (Spellman and Heyne, 1989). The best known application of EDPA is in cases where a homicide is presented by the author as a suicide through a staged crime scene. Through a complete documentation of victim's background, the specialist in EDPA will provide useful information in reconstructing the crime and the case will remain under investigation.

Those who conduct equivocal death psychological autopsies are generally psychologists or psychiatrists who have training and experience in death investigation and forensic pathology.

¹ The manner of death refers to the specific circumstance by which a death result (Jobes *et. al.*, 1987). There are four generally accepted manners of death: natural, accident, suicide, and homicide (Spellman and Heyne, 1989). Furthermore, should be noted that the cause of death (pathological process that results in the physical body's death) is not the same with the manner of death.

² See <http://www.cdc.gov>.

4 The accuracy of psychological autopsy procedure

There are several studies on psychological autopsy, including: Clark and Horton-Deutsch, 1992; Wolford and Reihman, 1991; Grieger and Green, 1998; Younger *et al.*, 1990. The most notable research was published by La Fon in 2001. La Fon provided an empirically based core set of components to be included in EDPA. These components are a consensus of experts based on a nationwide survey. As La Fon notes, „*This list of components provides an operational definition of an EDPA agreed upon by the relevant scientific community. This research of EDPA components provides a platform for establishing scientific reliability and validity: the next step for today’s researchers to move the PA beyond clinical intuition toward an empirically validated scientific tool*” (La Fon, 2002, p. 162)

Another point of view is seeing psychological autopsy as a core component of the criminal profiling method (Turvey, 2002). Compared to criminal profiling and homicide investigations, EDPA may provide usefull information for ongoing criminal investigations. The psychological autopsy take the victimology step of criminal profiling and extend it to include psychological data not otherwise apparent to the death investigator (Turvey, 2002).

To date, no study on this matter have been published in Romania. The following guidelines published by La Fon may be considered as a start point for romanian practitioners and researchers in future studies:

Item description	Essential <i>n</i>	Non-essential <i>n</i>	<i>p</i>
Interview data from the family	23	0	000*
Interview data from superiors or employees	21	2	000*
Interview data from co-workers	23	0	000*
Interview data from close friends	23	0	000*
Interview data from those who were last to see decedent alive	22	0	000*
Interview data from recent neighbors	17	6	022*
Medical examiner’s report, lab studies,	23	0	000*

toxicology reports			
Police reports, crime or death scene evidence	23	0	000*
Contents of decedent's medicine chest	22	1	000*
Review of locations involved such as how and when the death occurred	23	0	000*
Recent writings made by decedent	23	0	000*
Books or videos owned by the decedent	18	5	007*
Family constellation	21	2	000*
Family history (mh, familial relations, death Hx)	23	0	000*
Medical history	23	0	000*
Drug and alcohol use history	23	0	000*
Education history (educ. level, grades, etc.)	20	3	000*
Employment history (stability, difficulties)	23	0	000*
Trauma history (including previous suicidal/homicidal behaviors)	23	0	000*
Residential history (including stability)	21	2	000*
Interpersonal relationship history	23	0	000*
Legal history (including criminal records)	22	1	000*
Psychiatric treatment history	23	0	000*
Demographics of the decedent	22	0	000*
Physical condition of decedent at time of death	23	0	000*
Decedent's most recent occupation	18	5	007*
Decedent's religious practices	21	2	000*
Decedent's personal finances	22	0	000*

ADMINISTRATIO

Description of decedent's personality	22	1	000*
Description of decedent's lifestyle	22	1	000*
The decedent's pattern of reacting to stress	23	0	000*
Recent stressors, tensions	23	0	000*
The presence of alcohol in lifestyle and death	23	0	000*
The presence of drugs in lifestyle and death	23	0	000*
Changes in decedent's habits before death	23	0	000*
The nature of decedent's interpersonal relationships and interpersonal network	23	0	000*
Conduct a reflective mse prior to death	22	1	000*
Assess any anger directed at particular people	22	1	000*
Motivation assesment: decedent's intent or motive in his or her own death	22	1	000*
Decedent's death ideation	22	1	000*
Presence of typical pre-suicidal behaviors	22	1	000*
Assess suicide notes, if present	23	0	000*
Decedent's familiarity with method of death	23	0	000*
Ratings of lethality of death	23	0	000*
Reaction of informants to decedent's death	19	4	002*
Determine the level of risk factors (i.e. high risk victim/low risk victim)	21	2	000*
Establish Timeline: A reconstruction of events occurring on the day before the decedent's death	23	0	000*

Establish Timeline: A reconstruction of events at the time of death and up to 12 months prior	19	4	002*
The relationship between the decedent and the death location	20	2	000*
Presence of sexual paraphernalia	18	5	007*
Any special conditions or special features	22	1	000*

*significantly essential items ($p < 0.05$)

La Fon's components of the EDPA (Turvey, 2002, pp. 162-163)

Turvey (2002) notes that this list of EDPA components also provides a platform for the establishment of an *epidemiological homicide victimology database* similar to the FBI's Violent Criminal Apprehension Program (VICAP). Established by the Department of Justice in 1985, FBI-ViCAP serves as the national repository for violent crimes; specifically homicides, sexual assaults, missing persons, and unidentified human remains. Comprehensive case information submitted to FBI-ViCAP is maintained in the national database and automatically compared to all other cases in the database to identify similarities. Additionally, individual case submissions are analyzed by crime analysts through the application of analytical skills, education, specialized training, and research.¹

5. The psychological autopsy and criminal profiling

The psychological autopsy and, especially, the EDPA, can assist the criminal profiler by providing an extensive amount of detail into the victim's mental status and personality. This detail is built on psychological theory that is based on decades of scientific research (La Fon, 2002).

This information can include:

- the likelihood that the deceased played a role in his own death and what that role might have been;

¹ <http://www.fbi.gov>.

- theoretically based predictions of the deceased's behavior, cognition, and feelings up to and at the time of death;
- veracity assessments of associated individual's statements based on a working knowledge of the deceased;
- a timeline of the deceased's actions, thoughts, and feelings prior to death;
- an explanation of the behavioral correlates associated with any mental or personality disorders of the deceased, his or her family, and or associated individuals;
- assistance in ruling out actions or behaviors not congruent with the deceased's personality (La Fon, 2002).

The criminal profiling process is a work of an entire team. Information gathered need a huge investigative effort from those involved. The psychological autopsy only implies a few investigators working for some days in collecting data, interviewing all relevant people or making connections between victim and crime occurred. The result must be a full-data report which will provide all necessary aspects in generating the victim's profile and risk.

Many suitable crimes for profiling are poor in physical evidence, especially those committed by offenders with criminal culture. These crime scenes rarely offer clues about individuals responsible, and for this reason the investigation team will ask the criminal profiler specialist for help. Unlike the physical evidence, the behavioral clues are present in all crime sites and interpreting them correctly will guide the investigative effort to a good suspect tool.

6. Conclusions

Although the Romanian police procedure does not include criminal profiling as a mandatory activity in criminal investigations, more and more forensic psychologists are invited to provide suggestions in different inquiries. The next step is to overcome this level and to begin a professional assistance of profilers in law enforcement agencies.

From inquiries related to missing persons to homicides or equivocal deaths, the profilers work may be seen as a helping hand in investigative effort. In crimes where time is crucial, the forensic psychologist may offer fast case assessments in order to guide the investigators to the correct way. Case assessment strategies, including threshold assessment, are investigative reports that reviews the initial

physical evidence of crime related behavior, victimology, and crime scene characteristics for a particular unsolved crime in order to provide immediate investigative direction. (Baeza *et al.*, 2000).

6 References

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