PSYCHOLOGICAL AUTOPSY: the Psychological Assessment of an equivocal Death

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ABSTRACT
There are times when physical evidence and evidence found at autopsy does not reveal the cause and mode of death. This is known as equivocal death. The psychological autopsy is a retrospective construction of a decedent’s life initiated to get a better understanding of his death. It is used to determine the victim’s psychological intent, using interviews and examination of documents to reconstruct the behaviour, personality, lifestyle, habits and history of the victim prior to death. Psychological autopsy aids as an investigative tool which is at the outer edge of professional knowledge and practice in that it requires an application of skills, experience, and training to assess a variety of factors including the behaviour, thoughts, feelings, and relationships of an individual who is deceased. There may be issues that the deceased or his or her family does not want facts to be revealed that require special handling. Hence the interviews of family members, friends, and relatives may be adequate. So the interviewer has to be flexible. The interviewer should establish mutual respect and confidence, with the informant, and ensure confidentiality and anonymity, and also obtain an informed consent before the interview. Hence one should be qualified and skilled to conduct the interview. False information also can be given due to lack of memory or it may be intentional. Suicide note, Personal documents, Medical records, School records, Military records, Employment records, should be carefully analysed. With the above mentioned information, a psychological autopsy report is produced, the final conclusion depends on the accuracy of the data collected from the interviews, examination of relevant documents and other materials. Therefore the interviewee’s probabilities and limitation to science should be noted. Thus the final judgement as to the mode of death is based upon a review of all the known facts and circumstances; including the coroner’s report, forensic medical report, police reports, crime scene analyst reports, and the psychological reconstruction, so that people may learn from the tragedy and, hopefully, be cautious and reduce the chances of similar occurrence in future. Psychological autopsy is most often used in cases of suspected suicide or homicide in an attempt to reconstruct the personal life and character of the deceased, to uncover hidden secrets that may help to give family members peace of mind and also plays a role in many legal suits, malpractice suits, insurance claims, and criminal investigations.

Mesh words: Cause of death, autopsy, coroners and medical examiners.

“Human consciousness is an unusual template of experience and emotions”

Introduction
In every instance of death, a physician must distinguish both the cause and mode of death. The cause of death is defined as “the original underlying medical condition which initiates the lethal chain of events culminating in death”\(^1\). It is the duty of the medical examiner, coroner, and law enforcing authorities, to determine the mode of death in all violent and suspicious death investigations. There are times when physical evidence and evidence found at autopsy does not reveal the mode of death. This is known as equivocal death. Equivocal deaths often involve questions that surface around suicide, homicide, accidental or some natural deaths. Those deaths that fall under the category of “undetermined” are based on what is found at the scene of crime and autopsy, but which frequently require a closer “psychological” investigation and examination. The psychological autopsy was developed as a further post mortem investigative tool that aids in the determination of the person’s death. The psychological autopsy is a retrospective construction of a decedent’s life initiated to get a better understanding of his death. It is used to determine the victim’s psychological intent, using interviews and examination of documents to reconstruct the behaviour, personality, lifestyle, habits and history of the victim prior to death\(^2\). The concept and technique of the psychological autopsy was developed by Dr. Edwin S. Shneidman who defined the psychological autopsy as:

“A behavioural scientific impartial investigation of the psychological (motivational, intentional) aspects of a particular death. It legitimately conducts interviews (with a variety of people who knew the decedent) and examines personal documents (suicidal notes, diaries, and letters) and other materials (including autopsy and police reports) that are relevant to the role in the individual’s death”\(^3\).

Behind the scene of an equivocal death investigation

Role of the medical examiner in the investigation:
The medical examiner, who is the forensic pathologist defines the cause of death, provides details about the manner and circumstances of death and the results of a medico-legal autopsy. The prime function of the medical examiner is medico-legal certification of the manner of death, which has important legal, social, medical and research implications\(^4\).
Role of the investigators:

An investigator in the death team investigation includes the magistrate/coroner, medical examiner, psychologist, psychiatrist, a psychiatric social worker, or a police investigating officer and other law enforcement authorities, as psychological autopsy aids as an investigative tool which is at the outer edge of professional knowledge and practice in that it requires an application of skills, experience, and training to assess a variety of factors including the behaviour, thoughts, feelings, and relationships of an individual who is deceased. Therefore, the interview with the family, friends, co-worker, relatives, neighbours, physicians and other acquaintances to prepare a psychological autopsy report are carried out mainly by the mental health professionals and behavioural science investigators.

Primary goals of these mental health professionals and behavioural scientists are:

a) To determine the mode of death.
b) Reasons for death at that particular period of time.
c) Assessment of lethality (suicide).
d) Psychotherapeutic value to the survivors.

Protocol to conduct an equivocal death interview

a) Ethical considerations concerning the interview, is of prior importance, the integrity of the deceased must be respected (Young, 1992). There may be issues that the deceased or his or her family does not want revealed or facts that requires special handling.

b) History of the actual events must be reviewed, later the interviews of family members, friends, relatives, colleagues at work/school, neighbours, physicians, priest, acquaintance and eyewitnesses, should be conducted.

c) Approaching the informant to conduct an interview is an important consideration, the informants are contacted by mail and later a phone call, to avoid contact refusal rate. So the interviewer has to be flexible and ready to reschedule the interview.

d) The interviewer should establish mutual respect and confidence, with the informant, and ensure confidentiality and anonymity, and also obtain an informed consent before the investigation.

e) The skills of interviewing includes, proper language, clarity, listening more than speaking, no threatening questions, no repetitions, avoid loaded questioning and more than one informant in a single interview (College of Health, 1994).

f) The interviewee may have motives of giving exaggerated information or concealing facts, or give pertinent information to protect the image of the victim and family. False information also can be given due to lack of memory or it may be intentional. Therefore it is important to explain to the interviewee the significance of the information he/she are providing. It is the role of the interviewer to be able to assess distorted or irrelevant information.

Salient features in an equivocal death interview:

1) Description of the deceased: the personal views about the deceased.
2) Period of association with the deceased: how long they know the deceased, how often they see each other, type of relationship between them.
3) Any changes noticed in behaviour or emotional distress associated with the deceased.
4) Any problems noticed by the interviewee, or discussed with deceased.
5) Observed or expressed mental status of the deceased to sitution of depression and stress.
6) Recent changes physically observed: pain, signs of illness, fatigue, tension, or loss of appetite, changes in sleep pattern, insomnia, wakes up throughout the night.
7) The interviewee's reasons behind the death: what would have probably happened and why.

Other sources:

- Suicide note: This play an important role to solve the whole issue if it is proved that the deceased had written the suicide note (verified by a forensic document examiner), the contents, language (specific references to suicide or morbid content). Suicide note also plays as an experimental control for the mental health professionals in interviewing process, when they are not disclosed about the evidence, and to derive their opinion to provide an estimate of validity.

- Personal documents: Letters (family, friend, relatives, or acquaintances), dairies, videos, and literature read recently and in past (morbid content), e mail, threats notes or messages received recently, bills, tickets, and pornographic collections if any.

- Medical records: Visits to physicians, medical illness, family history of illness, whether under medications.

- School records: Information such as change in academic performance or absenteeism, conduct and character in general.

- Military records: Reveal education and training background, areas of deployment, promotions, efficiency and obsession for weapons.

- Employment records: Performance, conduct, alibi of work and absenteeism.

With the above mentioned information, a psychological autopsy report is produced, and later reviewed by the death investigation team to determine the mode of death. The psychological autopsy is considered ultimately to be an expert opinion; therefore it depends on the accuracy of the data collected from the interviews, examination of relevant documents and other materials. Therefore the interviewee's probabilities and limitation to science should be noted.
Evaluation of psychological autopsy report

The psychological autopsy report provides detailed information about the death using various sources including the autopsy report, medical records, relevant documents and information gathered from interviews with key informants. These sources and information provided is to be clearly documented for evaluation and its potential validity. The behavioural scientist and other mental health professionals would be expected to provide more systematic details about the important psychological stages in the person’s thought processes e.g. motivation and personality, to deliver a formal evidence for the conclusion. Actually there is no well developed conceptual or theoretical basis for deriving conclusions from various sources of information, due to lack of standardised technique or specific procedure in conducting the psychological autopsy there is an area of potential weakness of this procedure. Here, the investigator is merely interpreting a prior set of facts rather than predicting future behaviour based upon the limited facts available before assessment. The final judgement as to the mode of death is based upon a review of all the know facts and circumstances; including the coroner’s report, forensic medical report, police reports, crime scene analyst reports, and the psychological reconstruction. Finally, to analyse and conclude suspicious deaths or ambiguous fatalities, and to facilitate the expansion of knowledge so that people may learn from the tragedy and, hopefully, be cautious and reduce the chances of similar occurrence in future.

Our Experiences an example:-

A 23 year male was rushed to the causality with bleeding injury abdomen, with strong smell of alcohol, with alleged history of tripping and falling over an sharp vegetable cutting weapon in an inebriated condition. He maintained the same history up to his death. By practising our guidelines of psychological autopsy the investigation revealed that there was a scuffle between two brothers with a double edged weapon, which lead to his death. Hence the opinion as to accidental injury was changed as homicidal.

Surgically sutured wound on the lateral side of the abdomen showing the homicidal injury

Conclusion

Psychological autopsy is most often used in cases of suspected suicide or homicide in an attempt to reconstruct the personal life and character of the deceased, to reveal that may help to give family members peace of mind and also plays a role in many legal suits, malpractice suits, and insurance claims, including criminal investigations. Psychological autopsy has become a valuable tool in the investigation and, at times, resolution of questionable and equivocal death cases. Despite the weakness of the evidence and procedures used in this technique, mental health professionals face problems while reconstructing a psychological autopsy in both civil and criminal matters, when questions can be raised regarding the mental state of the deceased prior to death. Therefore, it is important to establish the value that the report may add to the proceedings, and that includes the admissibility of psychological autopsies as evidence in court hearing which will be in the near future.

BIBLIOGRAPHY