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Forensic reporting of TASER exposure: An examination of situational and exposure characteristics



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ABSTRACT

The current study examines the content of autopsy reports (N=184) for deaths that occurred following TASER exposure by police. Guided by previous research and national autopsy standards for other weapon-specific deaths, we evaluate 1) whether reports document situational characteristics of the police-citizen encounter and 2) whether reports document characteristics of the TASER exposure. We find a large portion of reports are often missing a police report summary and information regarding the TASER exposure. Considering the expanding use of TASERs by police, we emphasize the importance of creating national standards that require documentation of police report summaries, TASER injuries, and TASER logs.

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1. Introduction

The use of conducted electrical devices (CEDs) by police has proliferated over the last two decades. The TASER, the most common model, has been distributed to 17,000 law enforcement agencies, private security companies, and military operations worldwide. In a recent survey of 662 U.S. police agencies, 80% reported they were using CEDs.² To date, the device has been deployed in the field almost 3 million times, with an estimated 250,000 TASER deployments taking place in the field annually.³ Despite this widespread use, TASERs still represent a relatively new addition to the toolbox of modern policing. To date, 500 recorded arrest-related deaths (ARDs) have occurred proximate to use of the TASER by police.^{3–5} The role of the device in these fatal events remains empirically unclear. Debate surrounds whether TASER-proximate ARDs result from a combination of exposure and compounded emotional and physical strain and injury, or if the role of TASER in these events is incidental. As such, forensic treatment of TASER-proximate ARD is currently only loosely defined.

Autopsy reports are used as an official data source for understanding what transpired during these events, and for empirical

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research in policing, forensics, and legal medicine. $^{5-9}$ However, although the National Association of Medical Examiners (NAME) provides official autopsy standards for common categories of death and injury, 10 there are no standards for CED exposure. This oversight is likely due to the relative novelty of CEDs, compared to more established methods of police force. Such lack of clarity inhibits the ability of forensics practitioners to accurately and consistently account for the role of TASER in their investigations. Further, the lack of standards highlights a need for further empirical inquiry into the role of TASER in arrest-related death. To address these concerns, we analyze the content of autopsy reports (N = 184), each detailing the death of a suspect in police or correctional custody proximate to one or more TASER exposures. We draw on existing literature and national autopsy standards to direct our inquiry.

1.1. TASER use & arrest-related death

Research suggests the TASER¹ may reduce police use of deadly force by offering an alternative to firearms, ¹¹ and allows police to subdue suspects and deescalate conflict. ^{12–17} Still, some groups

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 $^{^{-1}}$ In accordance with previous research, 9 the term "TASER" is used as a general term for a CED throughout this paper. TASER is only one brand of conducted electrical weapon, but it is used by over two-thirds of police departments in the United States 24

have advocated for stricter policies governing police use of the TASER based on reports of misuse by police and deaths of individuals who had recently been tased. A,18,19 Others suggest the TASER poses minimal health risk for the majority of people who come into contact with the police. One also issued a policy statement warning against deployment near the chest area, noting exposure in the chest area near the heart has a low probability of inducing extra heart beats ... In rare circumstances, [this] could lead to cardiac arrest.

Further complicating matters, it is difficult to account for the combined effects of violent police-citizen encounters, which typically include sustained physical exertion and the use of multiple forms of physical force by police against a resisting party before, during, and after TASER deployment.³ White and colleagues⁹ characterized the TASER-proximate ARD events in their study as "complex, dynamic encounters between suspects who were actively and aggressively resisting police, and officers who were drawing deeply into their arsenal of force options in an attempt to control them" (pg. 102). The multifaceted, evolving nature of these encounters has made it difficult to assess the TASER's role, if any, in arrest-related death. In short, the potential role of the TASER in subsequent ARD remains a major gap in current forensic knowledge. Properly contextualizing and documenting police use of TA-SER in the field is therefore critical to fostering accurate characterizations of TASER-proximate ARDs.

1.2. National forensic autopsy standards

The National Association of Medical Examiners (NAME) offers nationally recognized accreditation to promote standardized, scientifically grounded practices for conducting autopsies. ¹⁰ Accreditation signals that an office performs at a "high-level of competence" and enables the office to receive some forms of federal funding. The guidelines provide standards for conducting investigations into specific types of deaths (e.g. drowning, heart attack), with specific instructions for various forms of weapons (e.g. gunshot injuries, stabbings). For example, when evaluating gunshot cases, NAME standards require a physical description of each injury, the location of entry and exit, and the direction of the trajectory. They must also remove and document foreign objects and correlate external injuries to internal injuries. Other injury categories include burns, blunt and sharp force wounds, unique pattern injuries, and bite marks. Here, standards require a description of the injury's appearance, distribution, location, and size, as well as a sample of any foreign materials. These standards have important implications for the evaluation of injuries from a TASER device. When used properly, police issued TASER prongs produce punctures in the skin.²³ However, there are no national standards that expressly regulate the evaluation and documentation of injuries caused by a TASER. Considering use of the TASER by police is increasing across the country, documenting these injuries systematically will help forensic professionals more accurately assess the nature of arrest-related deaths.

2. Methods

Focusing our study on autopsy reports from TASER-proximate ARDs allowed us to move beyond White et al.'s⁹ incident-level profile by specifically analyzing one forensic process for documenting and evaluating police use of force. Guided by research on TASER use and arrest-related death, and NAME standards for conducting autopsies,¹⁰ the current study analyzes:

 Whether autopsy reports for TASER-proximate deaths document situational characteristics of the police-citizen encounter, and Whether the reports document characteristics of the TASER exposure.

2.1. Data

The current data were drawn from a larger study on TASERproximate arrest-related deaths. Using the online media search tool (www.webclipping.com) White and colleagues⁹ compiled media reports detailing cases in which police deployed a TASER device during a police-citizen encounter and the individual who received the TASER exposure died during the incident. This search resulted in 392 unique cases. To expand on both the quality and quantity of the information provided in the media reports, Freedom of Information Act (FOIA) requests were then filed in corresponding jurisdictions, requesting autopsy reports for all 392 deaths. The follow up search produced autopsy reports for 213 cases, or 54%. The success of each FOIA request depended on voluntary cooperation from local and state agencies, and was constrained by ongoing police investigations, litigation, and state law requirements (e.g. some states require the applicant obtain permission from next-ofkin). The current study systematically examines the content of the obtained autopsy reports. Criteria for inclusion in the present study are listed below. Cases that did not fit the criteria were excluded from the study.

- 1. The report indicated that the decedent received² a standard TASER or drive stun exposure.
- 2. The report indicated that the exposure occurred within 24 h of the death.
- 3. The report was legible.

After removing cases that did not fit the criteria for inclusion, the final sample (N=184) represented 87% of total cases where autopsy reports were obtained by White and colleagues. Reports were only dropped in cases where low quality or missing information prohibited our ability to code the document. For instance, some reports included in the FOIA requests were illegible to the researchers, while others made no nominal reference to a TASER device being used during the fatal event. The nature of case attrition in the current study results in a selection bias toward reports containing more information and/or higher quality, and suggests that our sample represents the 'best of the best' with regards to our variables of interest.

2.2. Coding

We constructed a coding instrument totaling 15 variables (see Table 1). We selected variables to assess whether reports addressed characteristics of the police-citizen encounter and characteristics of the TASER exposure. We coded each variable for its *presence* or *absence* in the document. To ensure the reliability of the coding procedure, we recoded 10% of the data (18 cases) to assess level of agreement. The intercoder reliability test resulted in a high agreement rate (Cohen's k=.84-1.0).

2.2.1. Incident characteristics

We selected 9 variables to examine the extent to which the reports assessed situational characteristics of the police-citizen encounter. First, we coded for suspect characteristics, including

² Reports indicating that one or both of the TASER probes failed to make contact with the body, or that the TASER device failed to shock the decedent were removed from the data set.

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