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Sexual Fatalities: Behavioral Reconstruction in Equivocal Cases

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ABSTRACT: A few sexual fatalities show ambiguous or conflicting evidence of manner of death or, in cases involving partners, of the partner's intent. In such equivocal cases, postmortem behavioral analysis and reconstruction aid in understanding what happened and provide an explainable basis for expert judgment and opinion, even though some cases can never be resolved with certainty. Behavioral analysis and reconstruction are enhanced by experience with related cases that have been solved, detailed investigation of the death scene and other relevant settings, and interviews with survivors.

KEYWORDS: psychiatry, pathology and biology, deaths, manner of death, sexual deviations, sex offenses, masochism

Sexual fatalities are deaths that occur as a result of or in association with sexual activity. Sexual fatalities span a broad range, including deaths from natural causes during coitus [1-4] or masturbation [2,5], autoerotic asphyxial deaths [6-9], and lust murder [10,11]. In the majority of these cases, the manner of death can be ascertained with a high degree of certainty through customary investigative techniques, assuming that the personnel involved have knowledge and experience with these cases. In a small proportion of cases, however, the manner of death is more elusive. It is these cases that we focus on in this paper.

We have had the opportunity to analyze an extraordinary number of sexual fatalities through our work with law enforcement agents, offenders, and victims and through two ongoing research projects of the Behavioral Science Unit of the FBI Academy, one on autoerotic fatalities and one on serial sexual murders.

Since the inception of the autoerotic fatality study four years ago, 160 cases have been submitted by investigative agencies throughout the United States and Canada. Of these deaths, 150 have occurred accidentally during autoerotic activities, as documented by official investigative reports, death-scene photographs, and autopsy protocols. The remainder are cases involving a second party or cases in which manner of death remains equivocal after thorough investigation and analysis. In addition to collecting and reviewing the case reports, we have spoken with families and associates of victims, investigating officers, medical ex-

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aminers, and other researchers in this area and have conducted an exhaustive search of the English language literature. The cases submitted to the research project include accidental sexual deaths attributable to the use of ligatures compressing the neck, airway obstruction, various forms of electrical stimulation, injurious agents causing extreme chest compression, and chemicals or gases. Cases have also been received in which the victim died of natural causes (for example, myocardial infarction) or exposure while engaged in autoerotic activity. Investigative agencies and attorneys have submitted equivocal deaths to us for evaluation and have solicited opinions as to the manner of death or the possibility of second-party involvement. In each instance, the requesting agency submitted well-documented reports that included photographs, autopsy findings, and information about the victim's history.

The questions that most often arise in the investigation of sexual fatalities are whether an individual who was alone committed suicide or died accidentally, whether another person had been present, and, if another person was present, whether the death was intended or not. These questions involve complex issues of fact, behavior, and intent and cannot always be answered. Opinions should not be rendered in such cases without detailed information about both the scene and the victim's history.

In this paper we present two cases in which there was a question as to whether a sexual fatality was an accident or a suicide (Cases 1 and 2) and three cases (Cases 3 to 5) in which evidence suggesting or indicating the presence of a second party added the possibility of murder. For each case, we first present the facts and then our behavioral analysis and reconstruction.

Accident or Suicide?

Case 1

A 33-year-old man was discovered dead in an unfinished room on the second floor of a warehouse where he was employed as a security guard at night. He was in an upright position with his feet on the floor. A rope, attached to a wall behind him, passed over a beam approximately 2 m (6 ft) above him and ended in a hangman's noose which encircled his neck. He was nude except for a black leather belt around his waist and a pair of handcuffs that passed through the belt and secured his wrists in front. A handcuff key was found in his right hand, and his left hand held his penis. Around his left ankle was a shipping tag secured by wire, and on the tag was the notation, "77-0130 5/11/77." About the circumference of his penis was a surgical-like incision which accommodated a washer (Fig. 1). Beneath the victim, two cinderblocks rested on newspapers spread on the floor. Feces and ejaculate were on the newspapers. A cigarette butt of the type smoked by the victim was located 0.45 m (1½ ft) in front of him. Against a wall, to the rear of the victim and neatly stacked, were a pair of men's trousers, a shirt, and a pair of ankle boots. His service revolver and holster were also in the room. The large room was otherwise empty, with barren, cinderblock walls. The victim's automobile was parked outside the warehouse. Its interior was in disarray and contained several empty cans, snack cartons, and wrappers, and several magazines, including *Forum* and *Oui*.

He had made a career as a peace officer and worked in this capacity during the day. Five days after discovery of the body, a box containing his badge, credentials, undershorts, and uniform was found behind some boxes on the floor below the death scene.

He had lived in a one-bedroom efficiency apartment, a search of which revealed bondage magazines. Although not unkenpt, the apartment was not tidy (for example, there were dirty dishes in the sink).

The victim sometimes stayed with his wife of ten years, from whom he had been separated for six months. On the evening preceding his death, he had visited his wife and made arrangements to take their son (with whom he enjoyed a very close relationship) to the zoo the



FIG. 1—The victim in Case 1. Note handcuff binding of the wrists, broad leather belt, and a metal washer around the penis.

next day. According to his wife, he had appeared to be in normal spirits during the visit. His wife was the beneficiary of his life insurance policy.

In the hours preceding his death he had called a female acquaintance at 1:30 a.m. and again at 4:30 a.m., requesting that she visit him at the warehouse, but she had refused.

At the time of his death, he was experiencing financial difficulties, was working at a second job, and was said to have been occupationally dissatisfied. His co-workers described him as having changed from a relatively outgoing individual to one who seemed depressed and overworked (he worked an excessive amount of overtime to obtain additional salary). On at least two occasions during the week preceding his death, he had made suicidal statements, such as, "I ought to put a .38 in my mouth" and "I can understand why someone would kill themselves."

His wife said that approximately two years previously he had begun practicing sexual bondage at home and had requested that she tie him up and whip him and that she allow him to reciprocate. She said that she had declined to participate.

Behavioral Analysis of Case 1

In this case, the death scene had many features commonly found in autoerotic fatalities: secluded location, incomplete suspension, bondage, the use of a hangman's noose, nudity, and the presence of ejaculate. When further investigation uncovered the victim's history, however, the manner of death became uncertain because indicators of suicide were also present.

The victim had experienced some of the stressors and exhibited some of the behaviors commonly found among persons with suicidal intent. He was experiencing marital, financial, and occupational problems; his co-workers described him as being overworked and depressed; he had been rejected by his female acquaintance on two occasions on the very morning of his death; his possessions had been neatly placed at the scene; and he had made two suicidal statements in the week preceding his death. These are highly suggestive that the victim intended to end his life.

We believe, however, that the victim did not intend to die on this occasion but died accidentally during autoerotic activity. This opinion was derived through several considerations.

The victim's interest and involvement in sexual bondage and sadomasochistic activities are well documented by his wife's verification of his interest in bondage and flagellation for

at least two years before his death. Bondage materials were found in his apartment, and at the time of his death he was handcuffed and held the key in his right hand. Handcuffs are a common bondage device, and the key serves as a self-release mechanism. The washer fixed around his penis is a masochistic feature. At the time of death, he was totally nude except for the belt and was holding his penis in his left hand. While nudity is consistent with autoerotic fatalities, it is most unusual in suicide. The black leather belt suggests a leather fetish or symbolic bondage.

Had the victim intended to take his life by hanging, it would not have been necessary to fashion so exotic a ligature as a hangman's noose; a simple loop would have sufficed. Having previously stated, "I ought to put a .38 in my mouth," he might have used his .38 revolver, which was found in the room where he died. It is probable that he kept the weapon in close proximity in the event someone entered the building. Had he intended to die by hanging, he would have had no need for this weapon. He had affixed a tag to his ankle. While it may be argued that the numerals "0130" represent the time (in military hours) of the first call to his friend, there are thirteen wraps in a hangman's noose and the middle digits in the notation are also 13. In our opinion, the tag was a prop used by the victim in his ritualistic fantasy (see below). In our opinion, if the victim had intended to die, he would not have hidden his uniform and identification but would have placed them where they could readily be found.

Typically, a person with suicidal intent makes plans for death, but not plans for the future. In this instance, the victim visited his son on the evening preceding his death and arranged to take him to the zoo the following day. The victim's automobile and residence were extremely cluttered and contained sexual materials and bondage paraphernalia. It is unlikely that an individual would intend for such materials to be found.

Despite his separation, he had made no changes in the beneficiary of his life insurance policy. Considering the close father-son relationship, it seems likely that if he had planned to die, he would have taken steps to ensure that his preadolescent son would be financially secure.

Our reconstruction of the death scenario is that the victim was acting out an execution fantasy when he accidentally died (such a fantasy is not uncommon and is documented in several cases in our study). This is evidenced by the hangman's noose, the secured wrists, the "body tag" on the ankle, and the cigarette butt immediately in front of him, representing the "last smoke."

Case 2

A 27-year-old white man was living in a common-law situation with a woman two years his junior. They had lived together for three years. On the day of his death, she had left him alone in their home while she went shopping. Upon her return, she went to the kitchen to put away her purchases and found a hand-written note on the kitchen table:

Sharon, the obvious solution to the problem finds me hanging in the bathroom. But it won't be so awful cause in my own kinky way I'll have enjoyed the method of my demise (as will be evident by the unusual attire). Loved you. Sorry. Bill

Upon reading the note, the woman at first thought it to be a joke and went to the bathroom. When she attempted to open the door, she found it blocked by the victim's body. After forcing the door open, she found him partially suspended by a ligature around his neck. He was clad in a pink sweater, pantyhose, panties, a brassiere, and high-heeled boots, all of which belonged to her.

She denied any knowledge of his desire to cross-dress and reported that she had never had any reason to suspect transvestism. She reported that they had had a normal sexual relationship for three years during which he had never suggested sexual bondage or asphyxiation.

The paper on which the note was written had deep and worn creases, suggesting that it had been repeatedly folded, opened, and refolded.

Behavioral Analysis of Case 2

The facts that the victim acted alone, was not totally suspended, and was cross-dressed indicate that his death was an autoerotic fatality. In labeling his own behavior "kinky," he indicated his awareness of the deviant nature of this sexual activity. In stating that he would enjoy the hanging, he reveals that he previously had similar experiences and found them pleasurable. These facts create a strong presumption that his death was accidental.

This presumption is overcome by the fact that the content of his note clearly implies suicidal intent. The investigating authorities properly ruled this death as a suicide. Nonetheless, the fact that the note appeared to have been repeatedly folded creates a question as to whether he may have used this note repeatedly as a "prop" for a suicide fantasy or as a farewell to his lover in the event he should die during a self-hanging episode. In any event his note indicates that he was aware that his self-hanging created a substantial risk of death.

A Question of Murder*Case 3*

A 22-year-old single woman was discovered dead by her sister, who had been staying with the victim temporarily. The sister had been away for two days and returned on a Sunday evening at 9:00 p.m. to discover a note on the front door requesting that she be as quiet as possible as a man was sleeping on the kitchen floor. She went directly to her bedroom and did not discover the victim until the following morning.

The deceased was found in an arched position with an electrical cord that passed over a door knob and wrapped around her ankles and was attached to her neck via a slipknot. Her abdomen, thighs, and forearms rested on the floor, and her feet were pulled back toward her head. The right side of her head was against the door's edge, and her hair was entangled in the slipknot. She was clothed only in a blouse that she normally wore for sleeping. Commercial lubrication cream was found in the victim's vagina, and a battery-operated vibrator was found 1.2 m (4 ft) from her body. The only trauma exhibited was a 4 cm (1½-in.) contusion above and behind her right ear. The scene was not disturbed, and there was no sign of a struggle. On her bed were a series of drafted letters she had written in response to an advertisement seeking a possible sexual liaison.

Autopsy revealed no evidence of recent intercourse, and no alcohol or other drugs were detected in the body. The cause of death was determined to be asphyxia resulting from laryngeal compression.

The victim had been in excellent physical condition, had made plans for a canoe trip on the day following her death, and had recently been in good spirits. She was sexually active but was reportedly disappointed in her sexual relationships as she had difficulty attaining orgasm. She used contraceptive cream and a diaphragm to prevent pregnancy, and these items were located in her car. Although her sister found the note at 9:00 p.m. Sunday, a neighbor reported seeing the note early that morning.

Behavioral Analysis of Case 3

The victim's position illustrates features found in a number of autoerotic asphyxias, including interconnection of the neck with the limbs, and the arching and binding of the body. Her state of undress and the presence of lubrication cream and a battery-operated vibrator indicate sexual activity.

A critical element in the resolution of this case was the fact that examination of the slipknot (self-rescue mechanism) revealed that the victim's hair was entangled in it and would have precluded its release (Fig. 2). This observation, coupled with the contusion



FIG. 2—*Inspection of the rope at the scene in Case 3 revealed the victim's hair entangled in a slipknot.*

above the right ear and the fact that her head was adjacent to the door's edge, suggests that the victim attempted to disengage the ligature by pulling the slipknot. Not being able to do so, she thrashed about, striking her head on the edge of the door, thereby causing the contusion. The autopsy surgeon reported that the contusion would have been insufficient to render her unconscious and that it is not likely that the victim could have been forced into such a position without being unconscious or leaving evidence of a defensive struggle. The question of the note on the door was never resolved. Its presence since early Sunday morning suggests that a male visitor had been there on Saturday evening. The victim's draft letters to a male, whom she had not yet met, further suggest that she was alone at the time of her death, as it is unlikely that she would have had such letters on her bed had she been entertaining a male friend there. The death was officially ruled accidental and the matter was closed.

Case 4

A 30-year-old single woman was found dead in her locked apartment. She was nude and lying supine on a blanket on the bedroom floor. A pillow was beneath her buttocks, elevating them. Her legs were slightly spread, and her arms were by her sides. A blouse was lodged in her mouth and covered her face. Next to the body was a dental plate belonging to the victim. Near her left foot were an empty beer can, an ashtray, and a drinking glass. Neither the body nor the scene exhibited signs of a struggle. The victim's clothes and purse (containing her keys) were on her bed. A vibrator and leather bondage materials were found in her closet. The door was locked with a spring bolt. The autopsy indicated that she had died of suffocation.

Behavioral Analysis of Case 4

While the body condition was consistent with either masturbation or sexual activity with a partner, the victim's sexual paraphernalia were found in her closet, not near her body. The leather bondage items in the closet suggest previous sexual bondage activity. Although we are familiar with several confirmed autoerotic fatalities involving mechanical airway obstruction, none involves the insertion of a gag to such a depth in the oropharynx. Consultation with forensic pathologists confirmed our suspicions that it would be next to impossible for one to asphyxiate oneself in such a manner. Although the door was locked and the victim's keys were in her purse, the lock was spring-activated and would have locked upon closing. The victim's willing participation is suggested but not proved by the absence of defense in-

juries, signs of a struggle, or alcohol or drugs in her body. In sexual acts involving bondage or manual restraint between consenting partners, one partner depends on the other for release, thereby allowing that person wide latitude in the act. We concluded that the death occurred during sexual activity that included use of the gag and at least one other person. It is not possible to determine whether the other person(s) intended to kill the victim. Thus, in our opinion the manner of death was homicide, but we are unable to determine whether this was murder or manslaughter.

Case 5

A 65-year-old single man was found dead in his one bedroom apartment while his stereo blasted hard rock music.

His abdomen was in contact with the floor next to the bed, and his arms were pulled onto the bed behind him (Fig. 3). His wrists were tied with a short length of rope. A black leather belt tied to a telephone cord extended from his wrists to the bed headboard. The belt was too small to have been worn by the victim, and three additional belts of various sizes were also found in the room. The telephone cord had been pulled from the wall.

The victim's feet were tied to the footboard by another piece of rope. He wore only an undershirt and an athletic supporter. A jacket covered his head, which was lying on a dresser drawer. Beneath the jacket, two knit shirts were wrapped around his head, and a white T-shirt, which had been used as a gag, was tied tightly around his head.

Resting on an air conditioner above the victim's headboard was *Penthouse* magazine, opened to a page depicting two women fondling one another. The room had been ransacked, and some personal items (such as his watch and some clothes) were missing, though expensive stereo equipment and over \$600 in cash were found in the room. He had a collection of tapes of classical music, and his friends confirmed that he preferred such music.

He had been seeking information on homosexuality, and examination of a homosexual pornographic magazine found in his bedroom revealed his fingerprints on the corona of a penis pictured in the magazine as well as several smudged prints on other penes in the book.

He had a history of heart disease, and his death was attributed to airway obstruction and coronary thrombosis. During the autopsy, the victim's anus was found to be tunnelled, a condition commonly present in individuals who repeatedly act as the receptive partner in anal intercourse. As noted by the medical examiner, however, this is also common in other individuals of the victim's age.



FIG. 3—In Case 5 the room had been ransacked, the victim's head was covered with clothing, and his torso was off the bed, though his extremities remained tied to the bed.

Behavioral Analysis of Case 5

The question in this instance was whether the deceased had been murdered or had died while engaging in sexual bondage activities, either alone or with another person. The complexity and tightness of the binding were such as to have precluded his being able to tie them himself. The fact that the telephone cord had been torn from the wall strongly suggests the presence of a second person, as it is unlikely that an individual would disable his own telephone to obtain bondage materials. The T-shirt used to gag the victim was tied so tightly that it caused the victim's lower jaw to recede far behind the upper jaw. These observations, coupled with the fact that his radio was tuned to a hard rock station, though he preferred classical music, leave little doubt that a second party was present when he died. The question remains as to whether he had been murdered.

As mentioned, the room had been ransacked, but valuables were left undisturbed. Drawers were pulled out, tables overturned, and the scene littered with clothing. Even though the victim was bound and gagged, two shirts and a jacket had been placed over his head unnecessarily.

In our opinion, the victim had brought a person to his room for the purpose of engaging in sexual bondage activities. He was lying supine on the bed, allowing himself to be bound at the wrists and ankles with the small lengths of rope and to be gagged with the T-shirt. He suffered a heart attack, and his partner, thinking him dead, panicked and attempted to make it appear to be a robbery by ransacking the apartment. The dresser drawer beneath the victim's head indicates that the room had been ransacked while he was still on the bed. Frightened, remorseful, and unable to look at the victim's face, his partner wrapped the shirts around the victim's head. After the unidentified person left the room, the victim began struggling against his bonds and rolled off the bed.

After arriving at this conclusion, one of us (R. R. H.) provided the requesting agency with a criminal personality profile of the unidentified sexual partner:

The offender is a Hispanic male between the ages of 19 and 25 years. He is a high school dropout and is either unemployed or employed in a menial job requiring little or no contact with the public. It is believed that the subject was associated with the victim in some capacity. While having little education, he has average or better social intelligence. He frequents adult book stores, purchasing heterosexually oriented bondage literature. At the time of the offense, he resided alone or with his family and lived within walking distance of the scene. He is from an upper lower socioeconomic environment and has either moved or joined the military since the death. He would be described by friends and family as a quiet, passive type of person who is an "underachiever." It is possible that he has a history of juvenile offenses. He is single and his social life is restricted to a few male friends.

The police later developed a suspect who was a 20-year-old Hispanic male who had resided with his family within three blocks of the death scene. He knew the victim and had joined the military shortly after the victim's death. The young man had gone AWOL and had sent a letter to his commanding officer advising that he was contemplating suicide and had been depressed for the "last three months." The letter was written in April. The victim had died in January. Although we believe the victim's death was unintended and that this is a case of manslaughter, we cannot be certain that it was not murder.

Discussion

Suicidal sexual fatalities are extremely rare. To our knowledge, the only unequivocal autoerotic suicide case that has been published is Case B in Litman and Swearingen's paper [12], in which the authors emphasize depression, orientation toward death, and suicidal

thoughts among bondage practitioners. In our series of sexual fatalities, there is only one unequivocal suicide, and that case involved a partner who assisted the man's suicide at his direction.

We believe there should be a strong presumption that the manner of death in an autoerotic fatality is accident. This view contrasts sharply with that of Richardson and Breyfogle [13], who in 1946 wrote that mere proof of hanging should overcome the legal presumption against suicide, should eliminate the need for proof of motive, and should "cast the burden of going forward with the evidence upon the party claiming that death was accidental." In our view, if a hanging is accompanied by clear indications of sexual activity (not merely the presence of ejaculate), it should be presumed accidental in the absence of evidence to the contrary. This is not to say that the decedent was unaware of the risk, for there is a substantial body of opinion and some very suggestive evidence that men who engage in autoerotic asphyxia are indeed aware of a risk to their lives. The question, not yet answerable, is whether their knowledge of the risk should be viewed as similar to that of motorcyclists who ride without helmets, skydivers, men who habitually inject heroin, or men who play "Russian roulette."

Cases 1 and 2 illustrate many of the factors that must be taken into account in considering whether an autoerotic fatality might be a suicide. A suicide note in the handwriting of the decedent, left where it would certainly be found, is the best single indicator that an autoerotic fatality was suicidal. Yet even when this is present, as in Case 2, one must consider whether the note is a prop for a suicide fantasy that has been enacted repeatedly.

As illustrated by Cases 3 and 4, behavioral reconstruction is complicated considerably when there is suggestive but inconclusive evidence of the presence of a second party. Case 3 apparently did not involve a second party, despite preliminary indications to the contrary. Cases 4 and 5 probably represent an unusual group of sexual manslaughter cases.

Usher [14] mentions an English case in which a prostitute was suffocated with a pillow by a client who subsequently said that he frequently used suffocation as foreplay. A woman he had picked up shortly before the prostitute's death confirmed this, saying he had almost suffocated her [14]. Usher refers to the death as a murder but does not indicate how manslaughter was ruled out. Case 4 may be analogous to the one Usher mentions, though the victim's possession of bondage equipment and the indications that she was a willing participant weight the evidence toward unintended death.

One of the earliest documented fatalities from sexual asphyxia, that of the musician Kotzwarra in London in 1791, involved a second person. Kotzwarra had persuaded Susanna Hill, a prostitute, to hang him for his sexual pleasure and instructed her to cut him down after five minutes. When she did so, he was dead. She was tried for murder, but the court regarded the event as accidental manslaughter [15]. We think it likely that Case 5 is analogous to the case of Kotzwarra and Susanna Hill in two respects: (1) the decedent probably requested bondage and asphyxia for his sexual pleasure and (2) it is unlikely that either the decedent or his partner intended his death.

The possibility remains, however, that Case 4, Case 5, or both, were in fact murders in the course of sexual activity. In addition to the reasons for thinking otherwise that are set forth in the case analyses, it should be noted that asphyxia, while a frequent mechanism in sexual murders, is far more often accomplished in murders through manual or ligature strangulation or through suffocation with an external object, such as a pillow, than through the use of gag materials.

A novelist with forensic science experience, P. D. James, has written a fictional account of a murder camouflaged as an autoerotic fatality and subsequently altered to appear like a suicide [16]. A colleague has told us of one case in which a murder is believed to have been committed by a police officer who attempted to conceal it as an autoerotic fatality but neglected to arrange an escape mechanism. The case reported by Wright and Davis [17], in which two prostitutes left an intoxicated client tied up after robbing him, resembled an

autoerotic asphyxia in a few respects but did not appear to have been intentionally camouflaged.

Conclusions

In the United States, sexual murders outnumber autoerotic fatalities, which in turn outnumber cases of sexual manslaughter. Even for the most experienced medical examiners and law enforcement investigators, a small number of these deaths remain equivocal after all efforts at resolution. In the above examples we have attempted to illustrate the importance of careful investigation (a subject we have developed at greater length elsewhere [9]) and detailed behavioral analysis and reconstruction in resolving equivocal sexual fatalities. The practical importance of these distinctions lies in the response of family members and friends to sexual fatalities, in the life insurance benefits that may be awarded according to whether the death was an accident or a suicide [18], and in the potential prosecution of living persons in possible homicides.

We are familiar with several fatalities during sexual bondage between partners in which information subsequently obtained from the partner made it possible to determine with reasonable certainty that the death constituted murder, manslaughter, or suicide. In the absence of such an informant, however, the intent of the deceased or of a missing partner can only be inferred from their behavior. Postmortem behavioral analysis requires not only historical information about the victim elicited through interviews with third parties, such as mates, co-workers, and acquaintances, as others have shown [19], but also detailed knowledge of the physical evidence from the scene and elsewhere, including those locations where the victim's personal possessions are kept.

The sexual fatality caseload of a jurisdiction is likely to be considerably lower than the caseload of vehicular, gunshot, poisoning, drowning, and other deaths. For this reason most investigators, regardless of discipline, do not have the opportunity to acquire experience with more than a few dozen sexual fatality cases in the course of their careers. Yet even where the best equipped laboratories and interdisciplinary teams are available, final determination of the intent of the participants remains a matter of judgment. Whether the legal authority to render such judgment rests with a law enforcement officer, a medical examiner, a coroner, a coroner's jury, or a court, a small proportion of sexual fatalities involve misleading or ambiguous clues. For these equivocal cases, we recommend consultation with specialists who have experience in both sexual fatalities and postmortem behavioral analysis [20]. In such cases, consultation is most useful when sought early in the investigation so that investigative leads can be pursued before evidence is altered or destroyed and before memories become lost, blurred, or otherwise inaccessible.

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