

## CASE REPORT

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### An Unusual Case of Child Abuse Homicide/Suicide

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**ABSTRACT:** This case report examines a child abuse homicide in which the perpetrator committed suicide a few hours after the infant's death. At the time of the perpetrator's suicide he was not under investigation, nor was he a suspect in the death of the child. Although the literature does not contain reports of similar cases, we are sure they exist. This report raises the question of the degree of social stigma attached to the accusation of child abuse. It also serves as a warning to those who must deal with the potentially suicidal child abuser.

**KEYWORDS:** criminalistics, pathology and biology, child abuse, suicide

An 18-month-old female infant was presented to a hospital emergency room by her mother and her consort, with a primary complaint of not being able to walk. The nurses pressed for further explanation of the nature of the child's illness, and the male subject stated that the infant may have fallen off her bed during the evening. The infant's mother offered the additional medical history of the child being a well infant, with a fever for the past few days. An over-the-counter children's acetaminophen had been administered before the infant's being put to bed. Because of the vagueness of the explanation offered by the adult care-givers and obvious minor traumatic injuries visible on the infant, the nursing staff contacted the local police agency. The infant was without vital signs upon arrival at the hospital and failed to respond to advanced cardiac life support measures. Both the mother and her consort fled the hospital before the arrival of the police and before the staff could notify them of the demise of the infant.

The police proceeded to the mother's residence, and an investigation was begun. The consort was leaving the residence as the police arrived, and he was questioned briefly as to where he was going and where he could be contacted should police wish to speak with him. The usual occupants of the residence were the mother of the deceased infant, four of her five other children, and occasionally the consort. The eldest child, a female, was removed from the home by Child Protective Services in relationship to a previous abuse complaint against the mother. This child resided nearby with her grandmother and had access to the residence. The other children, all males, were older than the deceased infant. The house had a kitchen, bathroom, living area, and two bedrooms. The residence was unkept and infested with

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roaches. It did have running water and indoor plumbing facilities. A strong smell of urine was present throughout the residence. The children all shared the same bedroom. The bed from which the infant was alleged to have fallen measured 41 by 75 in. (104 by 190.5 cm) and was 24 in. (61 cm) in its total height. It was covered with a bedspread, a threadbare sheet, and a plastic shower curtain.

The mother was questioned as to the events of the day prior to the infant's death. She revealed that her consort had spent the day with the children because she was working a part-time job. When she arrived home in the evening, her consort had the now-deceased infant standing on one leg in the living area. She questioned him as to his actions, and he simply explained that the infant had been "bad." The mother stated that the infant was warm to the touch, was given some children's strength acetaminophen, and put to bed. The mother and her companion remained at the residence for the evening. At approximately 4:30 a.m., the consort was wakened by a thumping sound and discovered the female infant on the floor adjacent to her bed. A neighbor took the infant, mother, and consort to the hospital.

As the police officers were leaving the residence, they were notified of a suicide at the address given to them earlier by the consort. They went directly to that residence and were met by the consort's mother and cousin. The cousin indicated that the subject had recently arrived at the residence and appeared depressed and despondent. His mother indicated that he had called her a few moments before and said that "one of his babies had died." The cousin related the following information to the police. The consort had arrived at the residence and requested a bologna sandwich, a beer, pencil, and paper. He received these and went into a back bedroom. A few minutes later she heard a single gunshot and rushed to the room to find the consort lying on the bed with a wound to his chest. An ambulance was called to the scene, but the subject was deceased. A note was found on a nearby dresser, and it indicated that the consort had murdered the infant.

#### **Autopsy No. 1 (Infant)**

At autopsy, the child was a slightly undernourished 18-month-old female, whose facial appearance was much older than her age. She was received unclad. Her skin turgor was poor, with marked "tenting" of the skin. Both eyes were sunken. No hymen could be seen or palpated in the vagina, and it was quite patent. Her anus was markedly dilated, but without traumatic injuries. Smears of the vagina, rectum, and oral cavity were negative for sperm. Total body X-rays did not reveal any old or recent fractures. She had multiple contusions on her face, mouth, chest, abdomen, back, and legs. A small laceration was seen on the right malar eminence. Diffuse subgaleal hemorrhage was noted over all surfaces of the skull, and ranged in size from 1 to 4 cm and in coloration from bright red to greenish. Extensive subpleural contusion was seen around the hilus of each lung, with hemothoraces of 30 cm<sup>3</sup> on each side. The peritoneal cavity contained 750 cm<sup>3</sup> of recent hemorrhage, with extensive contusion of the entire diaphragm and the greater curvature of the stomach. The liver had been lacerated along the ligamentum teres, into right and left halves. Finally, extensive retroperitoneal hemorrhage was noted throughout the abdominal cavity.

Her death was attributed to shock and acute congestive heart failure due to the trauma described and was considered consistent with Battered Child Syndrome. The death was ruled a homicide.

#### **Autopsy No. 2 (Consort)**

The body was an adult male who was consistent with his stated age of 22 years. A single "contact" gunshot wound was observed on the chest, 2 cm to the left of the midline and 1 cm inferior to a line drawn between his nipples. At the 7 o'clock position of the gunshot wound was a small laceration, consistent with an ejector rod from the weapon found at the scene.

The wound itself was 0.75 cm in diameter, with an abrasion collar measuring 0.25 cm surrounding the wound equally on all sides. A small area of cherry-red discoloration surrounded the wound. The missile passed just to the left of the body of the sternum and through the upper and lower lobes of the left lung. The blast effect of the weapon had lacerated the pulmonary artery in the pericardial cavity. The bullet exited the pleural cavity and was discovered in the musculature of his back. Approximately 2000 cm<sup>3</sup> of hemorrhage was discovered in his left pleural cavity and 60 cm<sup>3</sup> in his pericardial cavity.

A gunshot residue kit taken before autopsy was examined by scanning electron microscopy (SEM) and was positive for gunshot particles on his hands. Fingerprints discovered on the weapon could be matched to those of the deceased taken at autopsy. His death was attributed to shock from blood loss, resulting from a gunshot wound to the chest, and was ruled a suicide.

### Discussion

The incidence of child abuse in the United States is estimated to involve 10 children per 1000 live births (1%). Child abuse is the second leading cause of death in children under the age of 1 year, superseded only by Sudden Infant Death Syndrome (SIDS); in the older child it is second only to accidents [1]. Even a cursory examination of the current literature on the subject reveals numerous articles on the circumstances and contributing factors of abuse as well as documentation of those children most likely at risk of abuse. Although the literature seems to point to women as the primary abusers of children, men seem to be playing an increasing role as abusers [2]. This activity seems to increase in situations where the male is forced to take a role as a primary caretaker of an infant who is not his own. Abuse by adult males results more often in the death of the infant, probably a result of the greater physical strength of the adult male in relationship to his victim [3].

The case study presented here is unusual in the fact that the perpetrator of the abuse committed suicide before being interrogated or interviewed by the police. At the time of the perpetrator's death he was not a suspect in the death of the infant. The police did express a desire to question him regarding the events of the night before the infant's death, but as a fact-finding interview, not an interrogation. An extensive review of literature on child abuse and child abusers revealed no reports of cases similar to this. Although no similar reports were found in the literature, personal communication with Walter Fahr, Ph.D., Division of Children, Youth and Family Services for the State of Louisiana, revealed at least four other cases of suicide following reports of child abuse.<sup>2</sup> In each of these cases, the offender had been interrogated by the police and arrest was imminent.

This pattern of homicide/suicide fits other reported cases of suicide following homicide. Allen reported two types of homicide/suicide: the homicide/suicide pact and the impulsive suicide following homicide [4]. In the latter, the homicide was usually followed by remorse and guilt which compelled the offender to suicide. The murders in these cases were usually free of other criminal associations. This would certainly seem to be the basis for the suicide in the case presented here, where the perpetrator expressed remorse to his mother and confessed his guilt in the suicide note. He had been arrested on one occasion and charged with malicious damage for breaking a door. Beyond that offense the perpetrator had no criminal history.

Other factors that may have played a role in this and other cases are the social stigmata attached to those people accused of child battering. While our society seems to condone violence of assorted types, people accused of child abuse are not granted social protection. Accused child abusers are often "guilty until proven innocent." Those who are convicted by

<sup>2</sup>W. Fahr, Louisiana Department of Health and Human Resources, Division of Children, Youth, and Family Services, Dec. 1986, personal communication.

our court system of child abuse, and placed into correctional facilities, usually require special classification and separation from the remainder of the prison population [5]. Murderers of children are held in very low esteem by their fellow inmates.

### Conclusion

This case report represents an unusual case of child abuse homicide followed by suicide. The literature does not reveal other similar occurrences, although we are sure that they exist. Further research should be done in the area of child abuse and perpetrator suicide and should not be limited to those cases resulting in the death of the child. Examination and standardized testing should be performed on those offenders currently receiving treatment for abusive behavior to determine their potential for suicide. Those police officers, court officials and correctional personnel who deal with abusers should have greater awareness of the potential for suicide. It may be that in our zealous pursuit of those who harm children, we have created a crime that carries a greater social than legal penalty, in that those accused of this crime would rather "convict" themselves than have society do it.

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