

M^a Patricia Acinas¹
José I. Robles²
M. Ángeles Peláez-Fernández³

Suicide note and the psychological autopsy: Associated behavioral aspects

¹Psicóloga Especialista en Psicología de Emergencias y Catástrofes. Miembro fundador de SEPADEM (Sociedad Española de Psicología Aplicada a Desastres, Urgencias y Emergencias)

²Psicólogo. Jefe del Servicio de Psicología del Hospital Central de la Defensa

³Doctora en Psicología. Profesora del Departamento de Psicología Social, Antropología Social, Trabajo Social y Servicios Sociales Universidad de Málaga

When a death occurs under traumatic, ambiguous, unknown, or uncertain circumstances, a death of suicidal origin can be considered. On many occasions, a suicide note is found next to body that helps to clarify certain aspects needed for the investigation to elucidate whether the death is really due to suicide or other causes. There are several types of suicide note (farewell, instructions, accusation of others, request for forgiveness, justification of one's own suicide) that can contribute to the study of the victim's psychological state and the circumstances that led to death. There is no unanimously approved way to conduct the psychological autopsy, but there are protocols for obtaining relevant information and preparing the report.

Keywords: Suicide, Suicide note, Psychological autopsy

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Nota suicida y autopsia psicológica: Aspectos comportamentales asociados

Cuando se produce una muerte en circunstancias traumáticas, ambiguas, desconocidas o inciertas, cabe pensar en una muerte con etiología suicida. En muchas ocasiones, junto al cuerpo aparece una nota suicida que ayuda a aclarar algunos aspectos necesarios para la investigación que dilucide si realmente se trata de una muerte por suicidio o por otras causas. Hay varios tipos de nota suicida (despedida, instrucciones, acusación a otros, petición de perdón, justificación del propio suicidio) que pueden contribuir al estudio del estado psicológico de la persona y las circunstancias que condujeron a la muerte. No hay un modelo unánimemente aprobado para llevar a cabo la Autopsia Psicológica pero sí protocolos para obtener la información relevante y realizar el informe correspondiente.

Palabras clave: Suicidio, Nota Suicida, Autopsia Psicológica

INTRODUCTION

Consummated suicidal behavior is increasingly prevalent, with the number outpacing the number of deaths due to traffic accidents. Often health care services are the first on the scene and they encounter the suicide in progress or consummated.

There are few publications in Spanish on the implications of the suicide note and how it helps to conduct the psychological autopsy (in the same way that a medical post mortem does). The psychological autopsy helps to differentiate suicidal death from other types of violent death (homicide, simulated suicide in the case of murder ...) and facilitates medical efforts to reach reliable conclusions more efficiently and effectively.

If death has occurred under unclear circumstances and it is necessary to investigate the circumstances that may have led to death, families may feel invaded and/or that their family dynamic is challenged.¹ If a note appears next to the lifeless body, it can be used to determine the characteristics of the victim's emotional state, provided it has not been manipulated nor has another person written it to simulate a suicide and conceal a murder. The suicide note is one of the documents used for the psychological autopsy (PA) and to clarify if the death is in fact a suicide or signs of other possible causes of death exist.

We should take into account some questions that allow us to delimit certain fundamental aspects of the topic of this article.

The PA is an expert opinion (i.e., a report prepared by an expert) and a procedural instrument and, for this reason, should be carried out with all the guarantees provided for by procedural law because it is of interest to either the competent judicial authority or to the parties to the proceedings.

Another point that should be kept clear is that acting as an expert is ethically incompatible with providing clinical

Correspondence:
Patricia Acinas
E-mail: acinas.patricia@gmail.com

care. This means that the person preparing an expert opinion cannot be the same mental health professional who has seen the deceased in the office. The expert may obtain information from various sources.

We also have to consider the methodology or procedure for conducting the psychological autopsy, which depends on the skill and ability of the expert, like any other forensic procedure, but is also subject to *Lex Artis*. In this sense, we have to insist that the expert proceeds with sufficient sensitivity so that the family "does not feel invaded or that its family dynamics is challenged" to the point of producing *secondary victimization* in addition to their suffering for the loss of a loved one under traumatic circumstances.

On the other hand, the suicide note has evidentiary value as a document, which implies that it should be considered with sufficient objectivity and impartiality to avoid manipulation or other bias that may affect the criminal investigation. Thus, when it is known that a suicide note exists, it must be placed in the custody of the police and/or coroner to minimize obstacles in the investigation or to prevent certain interested parties they can question the authenticity of the note.

METHODOLOGY

An exhaustive search of the literature published in the last 25 years in both English and Spanish was made using the descriptors *suicide note* [nota suicida] and *psychological autopsy* [autopsia psicológica]. The following databases were reviewed: PsycINFO, MEDLINE, SciELO.

OBJECTIVES

The main objectives of this study were:

1. Review, describe, and illustrate the types of suicide notes found in the literature.
2. Examine the background for carrying out the PA based on the information in the suicide note.

THE SUICIDE NOTE

The suicide note is one of the elements that can sometimes help to clarify a death of unknown cause by showing that what is involved is a suicide, not an accident. A suicide note can also be falsified to make a murder look like a suicide. This probability is remote and is usually clarified by the police investigation.

When we can no longer talk to the deceased because the suicide attempt was consummated, the note can provide information about what the victim wanted to say in the last

moments, his or her state of loneliness, despair, anger, feelings of guilt or other, and the reasons why that point was reached.¹ Suicide notes are important because²: A) Suicide notes are a source of information about the victim's mental state. In addition to the type of suicide note, the analysis of other points related to the note facilitates our understanding of the circumstances and intentionality of the death,^{3,4} such as blaming others, possible cries for attention, the desire to be found before the suicide was consummated, and others.^{5,6} Analysis of these elements, expert investigation, and handwriting analysis became key elements in the PA by helping to reconstruct and understand the victim's mental state before the suicide. For example, a depressed person may use almost incoherent phrases or words denoting sadness, with a slow and clumsy handwriting stroke, application of little pressure to the paper with impaired fine motor skills, hypotonia of the fingers gripping the writing instrument, and other details. B) The suicide note involves preparations for the fact and the suicide attempt itself. In highly impulsive suicides, the suicide note is often absent because it involves some forethought and a period of time has to pass from writing the note to the suicide attempt. C) The suicide note makes it possible from a forensic point of view to classify a *suspicious* death as a suicide and undertake the investigation required to corroborate this particular (or to rule it out and look for other causes of death).⁷

A suicide note may be written with various intentions and aims, so the content of the note may vary considerably. We can differentiate various types of suicide notes² (see examples in Table 1).

- *Farewell*: A farewell note is usually associated with thanking people close to the victim and excusing them from any blame for the person's decision to end his or her life.
- *Instructions*: The person indicates what he or she wants done with the body or belongings after death, or how he or she wishes differences regarding the will to be settled. The person may even express his or her final wishes. In some cases, the instructions in the suicide note are addressed to the doctor certifying the death. This circumstance is unusual, as we shall see below, because suicide notes are usually addressed to loved ones.
- *Accusations*: In this case the victim tries to blame others, sometimes as a manipulative attempt *to make others feel guilty for the victim's death*.
- *Request for forgiveness*: The person usually does not want to blame others for the decision to commit suicide and tries to apologize for suffering caused in the past or that will be caused by news of the victim's death. For example: *I'm sorry to disappoint you...*
- *Justification* of the person's own suicide: In this case,

due to issues of honor, deeply rooted cultural reasons, or a person's sense of being forced by circumstances. The victim explains what happened. There are usually no explicit components of guilt or apology.

There may be a mixture of several of the above types, as in this case in which a mixture of apology and *postmortem* instructions can be appreciated, or the case of suicide notes in which a more extensive and varied statement of reasons is given.

Table 1	Types of suicide notes and examples
Farewell	The poet Charlotte Stieglitz, a very sensitive person as the result of an emotional commitment, stabbed herself in the chest in December 1834 to avoid interfering with the creativity of her husband Heinrich Stieglitz, a melancholy poet famous for his depressions and his struggle to find inspiration. <i>Together we suffered sadness... You will be better now... We will find each other again free... Say hello to all those I loved... Until forever. Your Charlotte.</i>
Instructions	Example 1. The suicide note of Raymond Roussel, a poet found dead in July 1933 in a hotel in Palermo, contained the following lines: <i>Check without fear that I no longer breathe... And then, give this letter to my executor. I name you my heir, as you see. Forget me then, as the world has.</i> Example 2. A note containing last requests, by Justo Alejo, who died in January 1979. He subscribed to the journal Clarin and then threw himself from the Ministry of Air in Madrid. ⁸ <i>I want only one thing before seeing the end, to receive Clarin in my spartan grave.</i>
Accusations	Example 1. The note of young man who hung himself, to his mother, whom he knew would find him, <i>This is your fault.</i> Example 2. Note from a man to his wife: <i>To the woman who was my wife in life: I lay my curse on you if you try to take advantage of a single penny of the pension you may receive when I die, because you, and only you, have been to blame for my misfortune. Thus, if in the Hereafter, there is any possibility to communicate with you, I will use it to not give you a moment's peace.</i>
Request for forgiveness	<i>Dear wife and children, I beg you to forgive me for the bad time I'm going to make you go through [...] it is the best for all [...] I beg God's forgiveness.</i>
Justification of one's own suicide	Example 1. <i>The poet Attila József, who threw himself before a train in December 1937, wrote: And do not weep for me, I am only paying my debt.</i> Example 2. <i>Note of a Turk who in June 2008 committed suicide after shooting his wife because he thought she was not a virgin. Mother, I love you; Father, I love you; the girl was impure.</i> Example 3. <i>Note of the Austrian painter Jules Holtzapfel, who died in 1866 from a shot in the head, saying the members of the jury have rejected me. I have no talent, then. I deserve to die! (His work had not been accepted for presentation at an exhibition, which meant his ruin.)^{8,9}</i>
Apology and post-mortem instructions	<i>Please forgive me; I wish to be incinerated.</i>
Psychotic break	<i>We shall meet again</i> (this boy thought he was under the influence of aliens who had ordered him to kill himself; he was leaving for a better life, and his other relatives or friends would come when they were ready).
Attribution to economic problems	Note of an elderly Greek man who killed himself publicly: <i>"The Government of Tsolakoglou has destroyed any chance of survival for me, which was based on a very dignified pension that I had paid for by myself own without any help from the government for 35 years. Since my advanced age does not allow me to react differently (although if a Greek compatriot were to take up a Kalashnikov, I would support him), I see no other solution than to end my life in this dignified way to avoid ending up rummaging in garbage bins to survive ..."</i>
Suicide note of a woman experiencing loneliness.	Suicide note of a woman in Mexico <i>I do not know who will find this note, but whoever it is, please help me by carrying out the legal procedures my action requires.</i>
Justification of one's own suicide and post-mortem instructions	<i>I have been alone for almost 20 years and at the age of 77 I do not have anything to do; I have no family or friends. Arthritis has consumed me and my body is deformed; I cannot walk and I am nearly blind. I kept the gun for a moment like this, but it is so old that it may explode without the bullet leaving the chamber because it is so rusty; I have only one bullet and I pray to the Lord to let it serve and kill me instantly; I can bear no more agony than I already have.</i> She died of a single shot to the heart. When her body was received at the Forensic Service of Mexico City, there was no one who asked about her or gave any sign of knowing that she existed. Taken from: Fernando Quintanar. <i>Comportamiento Suicida</i> . Ed: Pax México (2008). ¹⁰

Table 1	Continuation
Suicide letter. Personal (homosexuality) and political reasons.	<p><i>Dear friends:</i></p> <p><i>Due to my precarious state of health and the terrible emotional depression I feel as I am unable to continue writing and fighting for the freedom of Cuba, I am ending my life. In recent years, though I felt very ill I was able to finish my literary work, on which I have worked for almost thirty years. I leave, then, as a legacy of all my terrors, as well as the hope that Cuba soon will be free. I feel satisfied to have been able to contribute, albeit modestly, to the triumph of freedom. I end my life willingly because I cannot continue working. None of the people around me is involved in this decision. Only one person is responsible: Fidel Castro. The sufferings of exile, the pains of expatriation, the loneliness and illnesses that I may have contracted in exile surely would not have occurred if I had lived free in my country.</i></p> <p><i>To the Cuban people, both those in exile and on the island, I urge you to continue fighting for freedom. My message is not a message of defeat, but of struggle and hope.</i></p> <p><i>Cuba will be free. I am now free.</i></p>
Suicide letter found in a hidden text file. Instructions. Apology. Farewell. Personal reasons (HIV infection and the associated shame)	<p>Suicide letter from a man in Uruguay (a 21-year-old man who shot himself). To a trusted friend.</p> <p>Forensic analysis found no evidence of HIV infection. The psychological autopsy revealed the presence of a dysfunctional family core that pertained to a satanic cult and was centered on the Antichrist and the vindication of death, as well as symptoms of depressive mood disorder and group A personality traits (undiagnosed in life). He had never had an intimate partner (he had problems with interpersonal relationships and part of the neighborhood considered him homosexual); about 6 years before the suicide the brother of a friend died of HIV-AIDS.</p> <p><i>DD, by the time you read this I expect I will be dead, otherwise this note would be senseless. I'll start from the beginning.</i></p> <p><i>About 1 year and 2 months ago I met a girl. She was beautiful, with brown eyes, tall, blonde, and thin. Shortly after we met, we became a couple and soon had sexual relations. Just over one month ago we fought and we went our separate ways.</i></p> <p><i>Roughly three weeks after that, I started feeling pain in the penis and stomachache. I went to the doctor for a check-up and an examination if necessary, thinking that I had pain from the operation. (All of this happened without my parents finding out and so far they do not know).</i></p> <p><i>The case is that one month later when I returned for the results I received the worst news I could ever have been given. After that, my life was not the same, the pain increased and little by little I began to lose my hair. It was the same as with ÑÑ.</i></p> <p><i>I hid all this for months, but now I cannot take any more. While I just felt the pain inside, nothing happened, but when people realized that something was wrong with me I had to constantly invent something. I don't have to any more.</i></p> <p><i>If I did not do this before it was because I was thinking about my brother QQ, who is still little and I do not think will understand all this.</i></p> <p><i>But that is over, I made up my mind from the moment when the doctor told me I was HIV positive; my life went to hell. At first all I did was cry without being able to tell my best friends; then all I thought about was to find that bitch to beat her up, but now all I want is to die; I do not want to suffer anymore.</i></p> <p><i>I know how you think DD and that you are capable of thinking I'm a wimp for doing this, but put yourself in my place. What would you do if they suddenly told you that you have AIDS?</i></p> <p><i>No one, not my parents or my brother, knows anything about this. That's why I am writing this, so that you know why I am doing this.</i></p> <p><i>The truth is that if I had to summarize my life, I would have to say it was crap. All problems were eating me up because I didn't want to hurt anyone, because the truth is, who would be interested in the problems of an asshole like me.</i></p> <p><i>But hey, that's life, I always wanted to know what comes after death and I hope that I can find out now. Please tell my parents to forgive me for not talking to them, but I never wanted nor do I want to talk about it; it's one of those things that happens to you; you may be dying of anger but there is nothing you can do. I swear that I will miss you all the same. DD, I hope that you get something and you triumph in life, that LL has luck with his projects, and that everything goes well in life for all the "gurisas," and that things go well for the "porteños" as well.</i></p> <p><i>It is time, I swear that I was planning this moment, thinking and rethinking it for months, and from the time that I knew you were going inland and knew that your father had a gun, I decided.</i></p> <p><i>The only thing I ask is that you protect QQ, please take care of him is all I ask because I could not. Make him understand that this is not a whim, but a decision I was forced to make. Another thing I want to ask is that you PLEASE TAKE CARE OF YOURSELVES!!!!!!!</i></p> <p><i>Don't make the same mistake I did, please, seriously. I thought that this was something that could never happen to me, that was a story that you only heard on TV, but I was wrong and it happened to me.</i></p> <p><i>Well, I'm going, I'm going to miss you all, CHAU, GOOD-BYE FOREVER, GOOD-BYE FOR ALWAYS. BB.¹¹</i></p>

Table 1	Continuation
Suicide note of a daughter. Induction to suicide by mother	<p>STS 1387/2009 of December 30. RJ 2010\434</p> <p>On December 14, 2005, at noon, Cecilia blamed Enriqueta for a problem with her grades, specifically, a failed grade in a subject that she hid. She insulted the girl and hit her in the face and head. In the afternoon, when she returned from school, Cecilia left her naked in the bathroom and then forced her to stay in her room. When the girl asked to be forgiven, Cecilia, intending that she kill herself and thereby resolve what she now saw as a problem, told her to throw herself out the window and told her siblings to say the same thing to her.</p> <p>Enriqueta returned to her room and wrote a suicide note that she gave Cecilia, who tore it up saying that she had to write another, which Enriqueta did as directed by Cecilia, who reaffirmed that she was worthless and that the best for all the family would be for her to throw herself out the window. The girl insisted, apologizing and saying that "to live like that I prefer to die." Cecilia and Enriqueta's siblings, at Cecilia's instructions, refused to forgive her or even turned their faces away when Enriqueta tried kiss them, insisting that she go to her room and throw herself out the window.</p> <p>As a result of being pressured and due to the situation of despair into which she had been driven, Enriqueta returned her room and threw herself out of the window and onto the street.</p> <p>This is a crime of attempted induction to suicide, provided for and punishable under Article 143.¹¹² with a sentence of two years and six months of imprisonment, loss of the right to vote for the duration of the sentence, and payment of the costs of prosecution.</p>

Suicide notes are most often written on paper, but there are exceptions, such as the person who writes a note with his wife's lipstick on the bathroom mirror. Notes may also be written on clothing, as in the case of two people who placed their heads on the railroad tracks in Terrassa (Barcelona) in 1972. A suicide note may also be written on the victim's skin (for lack of paper or to ensure that the message is found immediately).¹³ Suicide notes are also found in electronic format.¹¹ Some people send the suicide note as an e-mail to the person they want to receive the message. Knowing when that person will see the message, or whether or not the e-mail account is configured on the mobile phone (and is checked almost instantaneously) can provide clues about whether or not the person wants to be rescued. As for the size of the paper, it is often the same size as the message left and is usually written on one side. Suicide notes are usually *handwritten*. When written in the victim's *own handwriting*, they help to demonstrate that the victim (and no one else) wanted to commit suicide because those close to the person will recognize the handwriting. The fact that the suicide note is written on a computer denotes embarrassment or thinking that one's handwriting is not good and the person wishes to leave a clear message. In these cases it may also be a sign that the suicide note is false (and needs to be investigated).

The writing tool most often used is a pen (as well as lipstick or blood). The poet Sergei Yesenin hanged himself in a hotel in St. Petersburg after writing a few verses with his blood.⁸

Suicide notes are left at home in a high percentage of cases (80%),¹³ and are usually addressed, by decreasing order of importance, to siblings, the police, a partner, friends, parents, or another family member.

The content of suicide notes refers to questions of economic ruin, terminal illness,¹⁴⁻²⁰ chronic disabling illness,²¹ unemployment, loneliness, old age, diminished quality of life, loss of a loved one,^{22,23} mental illness,^{24,25} loss of roots,^{2,26,27} or embarrassment about a change in social image after an event.¹¹

In some cases, it can also be seen that the suicide note was written during a psychotic break.

The economic crisis of recent years has also triggered the number of suicides in some countries among people who prefer to kill themselves rather than die of hunger or in an undignified manner.

In some suicide notes, it is evident that the victim wrote the note immediately before dying, perhaps to make it easier to determine the time of death, or to indicate to family members that they could not do anything about it. It could be a covert accusation.

In some cases, due to its extension or format, we refer to a *suicide letter* in which feelings, thoughts, and other matters are expressed, for example, as in the letter written by the Cuban poet Reynaldo Arenas, whose life story has been made into a film.²⁸ Personal and political issues may be mixed.

THE PSYCHOLOGICAL AUTOPSY (PA)

When a death of unknown cause occurs and it is suspected that there may be a major psychiatric or psychological component that could have influenced the lethal outcome, a PA is also performed.²⁹⁻³¹ The death may

not be due to suicide, or at least it may not initially be thought to be due to suicide.

The first references to PA date back to 1958 (Robert Litman in *Los Angeles County Medical Examiner*; Curphey, coroner, and the psychologists Farberow and Shneidman of the Suicide Prevention Center in the same city). There still is no valid consensus allowing standardization at the international level. The absence of an accepted and validated standard model has been criticized, but it is a useful technique and, when it is employed well and with the due precautions, it can yield substantial information.

The PA is a retrospective and indirect method for investigating the personality traits that the individual had in life and are useful for understanding the circumstances of his or her death.

In some cases, a family member has had major responsibility in the suicide (see Table 1).

PREPARATION OF THE PSYCHOLOGICAL AUTOPSY

The PA is a scientific method for reconstructing a death by suicide through interviews with survivors, understanding as such the relatives of the person who committed suicide^{29,32} or the retrospective reconstruction of the life story of the deceased, which involves examining the physical and environmental details of the daily life of the deceased to more precisely determine the manner of death and role of the victim in accelerating or influencing his or her own death.³³

Sources of information have to be sought in order to start the process of determining the mental state of the subject at the time of death, understood as the product of the subject's personality, relationship to his or her environment, and overall result of experiences. Data from the life of the person prior to consummation of the suicide have to be collected.

The PA uses all the techniques and tactics of the forensic experts involved in the PA (forensic medicine, toxicology, forensic anthropology, forensic psychology, criminology, and so on). In the Spanish legal framework (unlike the American system, which is more incriminating), the investigations will focus on the possibility of suicide and analysis of the victim's previous *life*, such as the possibility of homicide and locating and arresting the author of the homicide.

Considering the possibility of suicide, an attempt will be made to interview family members to find out what they remember, insofar as possible trying to lower their anxiety level; an attempt will also be made, with judicial authorization, to study and analyze personal effects such as diaries, notebooks, correspondence, e-mails, and messages on mobile phones. Therefore, the PA can facilitate clarification in cases

of suspicious death by enabling the assessment of risk factors, lifestyle, mental state at the time of death, areas of conflict and motivation, personality profile, and the warning signs of suicide; in cases of other types of violent death, the circle of suspects can be defined.^{31,34}

There are several models for systematizing the task:

- MAPI (*Modelo de Autopsia Psicológica Integrado* [Integrated Psychological Autopsy Model]). This is the model most often used in the Latin American area (Mexico, Chile, Honduras, Costa Rica...). It was developed in Cuba³¹ at the Ministry of Public Health and Institute of Forensic Medicine. It is applied to victims of suicide, homicide, and accident. It is highly structured and systematized, with closed responses that reduce potential bias and respondent subjectivity. It is one of the most complete models, with 59 categories and numerous subcategories, and it is accompanied by instructions for those administering the interview, responses to questions that may arise in the process, and requirements for selecting the information sources to be examined.
- ARMY. This model is used in the setting of the U.S. Army³⁵ to develop prevention plans; suicides are classified into three types by intent: 1. Clear suicidal intent. 2. Impulsive, unplanned suicide. 3. No suicidal intent (cases of suicide due to the victim putting his or her life in jeopardy with high-risk games, substance abuse, or other).
- NAVY. The U.S. Naval Criminal Investigative Service model.³⁶
- This systematized model³⁷ consists of four steps:
 1. Careful examination of the death scene (photography, videotaping).
 2. Study of the available documents, witness statements, medical autopsy report, and toxicology.
 3. Review of documents relevant to the victim's life before death (school records, visits to doctors and mental health centers, and occupational information).
 4. Interview with relevant persons.

In order to conduct a good PA, it is essential to carry out the forensic actions correctly and without contaminating the evidence (for example, by witnesses and onlookers who may leave their mark at the site), that the photographer takes a good set of photos of the place in areas from which the evidence is then collected and of the place that no longer has its original appearance. The PA begins with the appearance of the corpse and the police and forensic methods, but then continues with other specialists and methods (such as cognitive interviewing techniques for people who are especially affected and/or have problems remembering, and closed questionnaires for the reference informants). Some authors recommend waiting one to six

months after the event because people still have sharp memories and the information obtained is reliable.³⁸ The average duration of the interview is two hours, although it may continue a little longer.

The PA, considered the working method in cases of dubious death or possible suicide, has the aim³⁹ of increasing the accuracy of the certificates, providing indications that the researcher can use to evaluate the lethal intent of the victims when they were alive, and conducting postvention, or therapeutic, work with family members.

A model PA interview is shown in Table 2.

The PA must answer at least three different questions⁴⁰:

- What was the motivation for the individual's suicide? (Explain why the person acted, or discover what drove the person by reconstructing the motivations of the deceased).
- How and when did the person die, or why did the person choose this particular time? (Clarify the socio-psychopathological reasons why the person died at that time.)
- What is the most probable mode of death? (When the mode of death is equivocal, establish the mode of death with as much accuracy as possible).

A PA may include certain categories⁴⁰ listed in Table 3.

Other useful points can be knowing some details, such as the objects found, the arrangement of the furniture, and others. The PA technique requires taking into account a number of methodological considerations⁴¹ in order to apply the technique with guarantees: the choice of informants and how to approach them, the effect of the time interval between the suicide and the interview on the quality of the information obtained, the integration of multiple data sources, and the choice of assessment instruments.

The **choice of informants** is crucial: in suicides of adults we choose spouses or first-degree relatives, as well as secondary informants, such as friends, coworkers, roommates, doctors, and employees of shops, bars, or places frequented by the person. When the suicide is committed by an adolescent, the information is obtained from parents, siblings, friends and others (with the permission of the parents or guardians of minors), and teachers who might have detected warning signs in some circumstances. In the case of suicides of older adults, the range of informants is expanded to be able to determine the presence of underlying physical illness, medication, socioeconomic circumstances and other, meaning that social workers, pharmacists, and neighbors may be interviewed.

There are different ways of approaching potential informants: from the time of the funeral, visiting the victim's

home without an appointment, sending a letter, calling by phone, and others. Obviously, depending on how the first contact is made, the informants will be more or less willing to cooperate. In some cases, the family was sent a letter of condolence 6 to 12 weeks after the suicide, and then the family was contacted by telephone about a week after sending the letter. It has been shown that compliance is better in families in which the suicide has occurred more recently.

In order to obtain information from informants, it is useful⁴² to remember that informants are not patients, that one should act as a guide to the family, although semistructured instruments are used, that guilt-inducing approaches and judging anyone's behavior should be avoided, as well as false condolences, and the interviewer should be flexible about the length of the interview.

We studied the relation between the interval between death and the interview; according to some authors,⁴¹ in the range of 2 to 6 months there is no simple or consistent relation between the timing of the interview and the quality and quantity of data obtained.

Another important aspect is the analysis of the places: where the victim was found, where he or she lived, worked, socialized, and played, and why the victim was found in the place where he or she appeared. In general, an attempt is made to find inconsistencies, background, motivations, or aspects that allow the facts to be explained.

One of the aspects that may interfere with the greater and better development of the psychological autopsy may be the extent of its materialization versus the usefulness of the information it provides.^{29,43}

At this point, we will again emphasize that it is essential to abide by the procedural guarantees of the PA. The legal requirements must be met (by obtaining a judicial order or authorization).

PREPARATION OF THE REPORT

All the data sources that have been obtained must be integrated to prepare the report. The absence of self-reported data on this type of victims precludes first-hand information about emotional aspects for purposes of comparison. The ideas or conclusions drawn from the informants will have more validity if we interview more people (the sensitivity of the procedure increases with the number of informants).

The preparation of the psychological autopsy report requires the review of additional available documentation, such as medical records, forensic records, court records, and letters, diaries, notes, poems, and other.⁴⁴

The first data to consider and relate with the other data when presenting the mandatory report are the elements

Table 2 Semistructured interview for psychological autopsy (ESAP)**First module – Precipitants and Stressors**

Step 1: Is there any immediate event related with the fact?

Step 2: Did the reaction of the deceased show that the event caused sufficiently stressful emotional involvement or frustration to cause behavioral changes that may have been able to lead the person to suicide? Specify.

Step 3: Could there have been other events that also influenced the decision to commit suicide?

Step 4: Final decision.

Second Module – Motivation

Step 1: Are there psychological forces and/or reasons (in life) for wanting to die?

Step 2: Are there serious enough psychosocial or environmental problems, or events to take the decision to end them?

Step 3: Are there symptoms of biopsychosocial dysfunction that could explain the action?

Step 4: Are there personality traits that might constitute a pattern of non-existential confrontation?

Step 5: Is there a family or other type of background that might be considered predisposing factors for the suicidal act?

Step 6: Could there be other reasons that might better explain the fact?

Step 7: Final decision.

Third Module – Lethality

Step 1: Has a lethal method been used?

Step 2: Are there signs suggesting that it may have been self-inflicted?

Step 3: Would the victim have had the knowledge and/or ability to evaluate the degree of lethality of the method used?

Step 4: Was the method accessible, or would it have been easy to obtain it?

Step 5: Final decision.

Fourth module – Intent

Step 1: Is there evidence that the deceased could have played a direct and conscious role to cause his or her own death?

Step 2: Did the deceased show in interpersonal acts or verbal and/or behavioral signs any indication of intending to attempt suicide as a solution to his or her problems?

Step 3: In the person's lifestyle is there any involvement in activities that might be hazardous or harmful to health and could they demonstrate a desire or intention to die?

Step 4: Did the deceased make any recommendations, make arrangements, distribute belongings, make a will, write letters or notes, or exhibit any other behaviors suggestive of the possibility of suicide?

Step 5: Did the victim choose a place, time, date, and method suggestive of the objectification of a self-injurious act as the only option available?

Step 6: Is it possible to justify the self-injurious act by an untenable and/or altruistic situation?

Step 7: Is there any other evidence that might better explain the possibility of an intent for what happened?

Step 8: Final decision.

indicative of suicide at the scene, such as the victim undressing fully or in part, leaving perfectly folded clothing in the case of total nudity (partial nudity refers to the anatomical areas where the injury is inflicted), removing shoes before jumping or hanging, and ordering the shoes parallel to each other near the jump site. Other aspects more difficult to define must be considered without help from other professionals, such as the indirect effects of suicidal behavior; for example, in the case of a person who takes psychoactive drugs for self-destructive purposes and then vomits and experiences bronchial aspiration, this may actually be the cause of death (the initial dose of psychotropic drugs may not even be sufficient).

The peculiarities of this technique mean that bioethical issues must be considered. An investigation was carried out in relation to the principles of doing no harm, beneficence, and respect for independence.⁴⁵ The informants said that they were able to release feelings of guilt, grief, and pain, and experienced significant improvement within two weeks of the interview. None reported harm during the interview. A high percentage did not consider the interview to be emotionally traumatic. They concluded that the interview can be carried out long after the suicide without worsening the quality of the information, and that if interviews are conducted carefully, information can be obtained without causing discomfort to the respondents.

Table 3	Categories into which a PA could be included
	<ol style="list-style-type: none"> 1. Identifying information for the victim (name, age, address, marital status, religious practices, employment, and other details). 2. Details of the death (including cause or method and other relevant aspects). 3. Brief summary of the victim's history (siblings, marriage, medical conditions, treatments, psychotherapy, and previous suicide attempts). 4. History deaths in the family of the victim (suicide, cancer or other fatal diseases, age at the time of death, and other details). 5. Description of the personality and lifestyle of the victim. 6. Typical patterns of reaction to stress, emotional disorders, and periods of imbalance of the victim. 7. Any anger, pressure, stress, or anticipation of recent problems (from a few days earlier to the last 12 months of life). 8. Role of alcohol and drugs in the overall lifestyle of the victim and in his or her death. 9. Nature of the victim's interpersonal relations (including interactions with doctors). 10. The victim's fantasies, dreams, thoughts, premonitions, or fears related to death, accidents, or suicides. 11. Changes in the victim prior to death (in habits, hobbies, eating patterns, sleep, sexuality, and other routines). 12. Information related to the side of the life of the victim (improvements, successes, and plans). 13. Evaluation of intent, that is, of the role of the victim in his or her own end. 14. Estimated lethality (attributed dimension reflecting the lethal intent of the individual in his or her death). 15. Reaction of informants to the victim's death. 16. Comments, special characteristics.

It is therefore important to be careful about the design of the interview and how it is administered by experts, including adherence to ethical principles that address the interviewer's needs without violating the respondents' privacy.

The PA is a valid and reliable instrument for the investigation of violent deaths when the cause of death is not fully clarified, provided it is clear that the conclusions are speculative and probabilistic, not an irrefutable proof of the cause of death.⁴⁶ It is one more tool in a multidisciplinary set of tests and methods that, used jointly, allow more reliable conclusions to be reached. It allows the victim's story (siblings, marriages, medical conditions, medical,

psychiatric, or psychological treatment, suicide attempts) to be prepared, while also serving to obtain the history of deaths in the victim's family (due to cancer, suicide, or accident, as well as the age at time of death and other details). Another indirect factor is that it makes it possible to detect pathologies among family members of the victim, as well as the need for medical and psychological monitoring, thus preventing complicated grief.

Some of the family members with whom this method has been used have reported that it has served as an aid for the development of difficult emotional issues in relation to what occurred with the suicide or the person who committed suicide, because the survivor may experience an intimate mental and interpersonal crisis.⁴⁷ From the vantage point of clinical practice and care, what is important in all cases is that the PA can be used to prevent *secondary victimization* in the family in response to the event involving their loved one or the accompanying circumstances. Working through the suicide of someone close is very painful and leaves those close to the victim more vulnerable to other traumatic experiences.

In order for the psychological autopsy to fulfill the function of clarifying doubts about the victim's death, it is necessary to identify fundamental elements, such as: factors of suicide risk, heteroaggressive risk, or accident risk in order to assess the lifestyle of the deceased, assess the mental state of the victim at the time of death, establish areas of conflict and motivation, design the personality profile of the deceased, and clarify whether there were warning signs or a presuicidal state existed.⁴⁴

It is necessary to emphasize the ethical aspects of conducting the PA, meaning that in some cases there may be competing interests, for example, between the police force that wants to find a suspected murderer who has been long sought and, at the same time, the insurance company that is interested in demonstrating a suicide to avoid having to pay the beneficiaries the insurance compensation.⁴³ Therefore, we must remember that whoever conducts the PA must be able to demonstrate what really happened without any kind of pressure. The PA is an expert procedure and the procedure should adhere to the same ethical and legal rules, regardless of who the sponsor is, because the expert must always respond to the judicial authority for the expert report issued, including the evidentiary portion and the preparation process (i.e., the expert must always obtain court approval).

CONCLUSIONS

1. The suicide note (or letter) is evidence in the procedure of determining whether a death is due to suicidal intent or an attempt to conceal a homicide-murder as a suicide. It may be a very important element for confirming whether a suicide has taken place and for ruling out other causes of death.
2. The suicide note, when it is genuine, is one of the

relevant documents that serve in form and content to conduct the PA, together with other reports, interviews with people close to the victim, and other elements of investigation of the case by various methods.

3. The PA is an expert procedure that makes it possible to investigate and understand the motivations that led to the fatal outcome, as well as relevant aspects of the suicidal dynamic and important elements for elucidating what happened.
4. Upon terminating the process and after delved into the reasons that led to the victim's death, it is mandatory to prepare a report with the relevant conclusions reached by the expert after investigating the case.
5. The PA procedure must be implemented with care and sensitivity, avoiding the production of *secondary victimization* among the family members and friends of the deceased.
6. It is necessary and appropriate to standardize and unify PA procedures to facilitate the investigation, disclosure of results, and standardization of their use.

CONFLICTS OF INTEREST

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