

Forensic dentistry case book 5: Protective mother leads to miscarriage of justice

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H Bernitz

INTRODUCTION

An 18 year old girl and her boyfriend were spending the afternoon on the grassy banks of a dam near Beaufort West. They were suddenly overpowered by three young men wearing balaclavas. The young girl was severely beaten in the attack, see Figure 1. During the attempted rape she was bitten several times on the neck and facial area, see Figure 2.

The attackers were fortunately disturbed by passers-by and fled the crime scene taking only the victims wallets and cell phones. The couple went straight to the girl's house where her mother immediately bathed her and put plasters on any wounds that she could see. She then took photos of "all" the evidence. The next day they reported the case to the police. The mother did not want the police to take what she felt were private photos of her daughter but she assured the police that she had ample photos of the evidence. The police accepted her photos and filed them as evidence.

Several weeks after the incident had taken place the photographic evidence was brought to us to analyse. As a result of the poor quality of the evidence no analysis was possible. No DNA swabs were taken as the mother had assisted her daughter in cleaning off any possible saliva, semen or trace evidence which could have been present. The photos were unusable as they were not taken in the correct way: the photos had been taken at an acute angle and no metric ABFO rule was used. The photos did not include a case number, any identifier or a shade scale.

DISCUSSION

It is extremely important to follow the correct protocol when collecting bite mark evidence.¹ Every bite mark should be correctly processed. The steps which should be followed include: fulfil all the legal requirements, photograph the bite mark, take DNA swabs, take silicone impressions of the bite marks, document all the procedures and store all the information correctly.

In this case, the washing of her daughter's body by the mother destroyed all possible chances of securing a DNA profile of the suspects. The over caring mother was initially only interested in her daughter's wellbeing and did not realise the consequences of her actions. The mother was also apprehensive about police officers at the local charge office



Figure 1: Bruising and scratch marks on victim.



Figure 2: Bite marks present on the neck and face.

taking photos of her daughter. The extent of the injuries would have meant the police would have had to take photos of her undressed daughter which she was not prepared to allow. The collection of evidence by the mother and the receipt of the evidence by the police without following correct protocols e.g. without taking impressions of the bite marks, made any form of analysis impossible. If the mother of the victim was better informed, she would have taken her daughter straight to the nearest police station, where they would have referred her to the nearest rape clinic, where all the necessary evidence would have been collected in the correct and appropriately sensitive way.

CONCLUSION

Dentists should be familiar with the protocol for collecting bite mark evidence. Dental awareness programs must inform the public regarding procedures to be followed in cases of violent crime when bite marks are present. The public must know their rights regarding confidentiality, the care which is available and the procedures to be followed. Dentists should advise local clinics that they are well equipped to assist in such cases.

Reference

1. Bernitz H, van Niekerk P J. Bungled bite mark evidence collection: a proposed protocol for the prevention thereof. SADJ 2003;58: 16-19.

H Bernitz: BChD., Dip (Odont.), MSc., PhD. (Pret). Department of Oral Pathology and Oral Biology, School of Dentistry, University of Pretoria. Tel: 013 2826419. E-mail: bernitz@iafrica.com