



Physical Anthropology Section – 2004

H12 When DNA is Not Available Can We Still Identify People? Recommendations for Best Practice

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The learning objectives of this presentation are as follows. First, to understand the role played by traditional identification methods in cases of violations against International Humanitarian Law. Second, to show how a systematic process involving experts from different fields increases the chances of identifying war victims through traditional methods.

This study makes an impact on the forensic community in general and in the forensic anthropology community in particular by providing an example on how a systematic approach to individual identification in cases of serious human rights violations can provide good results in the absence of sophisticated technology.

The application of DNA profiling to the identification of victims of mass disasters is considerably recent, but the use of such techniques to victims of war crimes and crimes against humanity is even more recent. While DNA technology has become more common and the prices of testing have substantially dropped, its use in large-scale projects is primarily dependent on the availability of resources and in turn of the will of political powers to fund such activities. Paradoxically in countries where large number of victims remain unidentified are those in which this kind of technology is not available, and if so only in a limited scale (i.e., Rwanda, Congo, Guatemala). In those same settings the use of "traditional" techniques is generally favored over other more technologically costly. Traditional techniques generally consist of combining witness testimony, personal effects and clothing, and anthropological and dental data in order to corroborate or to exclude the identity of an individual. This paper provides recommendation of best practice to conduct identifications in settings with technological limitations. The sample consists of 95 cases from victims of the conflict in Kosovo between 1998-1999, in which positive presumptive identifications were generated and were later corroborated through DNA testing.

Generally overlooked in the individual identification of victims of any kind of armed conflict is the investigation on the "event of disappearance" that defines interactions between victim(s) and perpetrator(s) in a place and time. People simply do not "disappear." Forced disappearance is a well-planned practice designed to provoke anguish in the population and relatives of the missing person as well as a sense of relentless and of an unstoppable process. Understanding how people went missing (who took them, how many, in what were they taken, at what time, where were they seen going to) may help to establish their whereabouts. The reconstruction of the "event of disappearance" is crucial to determining the composition of the family target group to participate in the identification process.

Once the family target group is defined, the relatives are selected. A priority is given to next of kin relatives to the missing person. Friends and more distant relatives would participate at a later stage. An ante-mortem form is filled from each relevant relative prior to participating in the clothing exhibition.

The clothes of the victims are carefully washed and dried; preferably photographs of any personal effects are displayed separately from the clothes to which they were associated. The clothes are arranged on the floor, on some kind of tarpaulin or even colored surface, in a roughly anatomical position. Each family member or group of family members from one single missing person is accompanied to look at the display. One or two relatives are given latex gloves and a mask in case they may want to touch or feel the clothes or artifacts. No pressure is exerted over the relatives, they are allowed to take their time and observe the display. Once a recognition is made, the family is encouraged to see the artifacts if any. The family is not shown any specific set of artifacts or told which were the ones found with the clothing.

Once the identification of a person has been triggered, both the postmortem and ante-mortem files of the person are pulled out and the family is taken to an interview area. The following people typically participate during the interview: one police officer specialized in identifications, one anthropologist, one dentist and one pathologist that remains on call for any specific information that may be required as well as to discuss with the team once the interview is finished. Each specialist asks questions separately. Initial questions concern the clothing and artifacts (make, materials used, whether it was purchased or home made, any anecdotal events associated to them). Subsequent questions concern the biological profile of the victim (age, sex, stature, ante-mortem injuries) and the teeth (the dentist expects some basic clues regarding basic features such as tooth rotations, extractions, prostheses, bridges or repairs, occlusion, etc.). Each specialist scores the responses collected on a scale of 1 to 3 as bad, medium and good.

The main problem with any scoring is however that there are a number of elements that do not depend on the accuracy of the family members but on that of the specialists. For example, while anthropological determinations are a factor of the techniques used (i.e., age, stature), a dental comparison is dependent on the availability of an antemortem odontogram which can only be compared to another odontogram and not to a literary reconstruction of someone else's dentition.

Once the interview is finished, the experts that participated in the interview separately discuss each case. Generally after such discussion cases are classified in a scale of 1-3 as a good, medium or bad match.



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In any case, traits deriving from the body (anthropology, odontology or pathology) carry more weight than circumstantial evidence such as clothing.

While DNA testing is a favored technique over "traditional" methods, it is not always available. If it is available it still depends on the existence of ante-mortem and post-mortem information to carry out identification. Experts participating in traditional identifications must develop emic categories to transform objective physical features into recognizable categories by the family. They must also do the opposite by developing a system by which the dentist, for example, understands that the cue given by a family member regarding an impacted anterior tooth could be anything from a visible extra tooth to a bump on the gum, or that a prosthesis could also be something removed from the mouth at bedtime.

Identification, DNA, Traditional Methods