

# Just Family Support During Death Investigations

**Introduction** [00:00:01] RTI International's Justice Practice Area presents Just Science.

**Voiceover** [00:00:09] Welcome to Just Science, a podcast for justice professionals and anyone interested in learning more about forensic science, innovative technology, current research, and actionable strategies to improve the criminal justice system. In episode three of our Supporting Medicolegal Death Investigators mini season, Just Science sat down with Rebecca Reid, Laramie County Coroner in Wyoming, and Meghan Clarke, Family Advocate Coordinator at the Denver Office of the Medical Examiner, to discuss the development of new roles in MDI offices that focus on providing support to the families of decedents. On a daily basis, the staff of medical examiner and coroner offices encounter grieving families who are in need of compassion, resources, or just a listening ear. In response to this need, MDI offices across the country are developing programs and staff positions that are entirely devoted to supporting the families of decedents. Listen along as Rebecca and Meghan describe the historical need for family and community advocates, specific strategies for support and remembrance, and advice on how more offices can start building this kind of program. This episode is funded by the National Institute of Justice's Forensic Technology Center of Excellence. Some content in this podcast may be considered sensitive and may evoke emotional responses or may not be appropriate for younger audiences. Here's your host, Kelly Keyes.

**Kelly Keyes** [00:01:23] Hello and welcome to Just Science. I'm your host, Kelly Keyes with the Forensic Technology Center of Excellence, a program of the National Institute of Justice. The role of a medicolegal death investigation office, or MDI office, has really evolved over the last few years. I know that in my almost 25 years working as a medicolegal death investigator at a large coroner's office, I saw it evolve from a focus of just determining cause and manner of death to one that also incorporates prevention and support to families and the community, really encompassing many more of the public health aspects of the job. I have seen so many examples around the country of offices going above and beyond to provide this support to their communities, and our two guests today are two of those doing amazing things to provide this support to their communities. Joining us today, we have Meghan Clarke and also Rebecca Reid. Thanks for joining us.

**Meghan Clarke** [00:02:15] Thanks for having us.

**Rebecca Reid** [00:02:16] Thank you for having us.

**Kelly Keyes** [00:02:17] So, Rebecca, you're the elected coroner in Cheyenne. How did you end up in that role?

**Rebecca Reid** [00:02:22] So I came to Cheyenne, Wyoming, from Panama City, Florida, where I worked with the District 14 medical examiner's office there. After a month of being here, I ended up being employed with the Laramie County Coroner's Office and worked my way up to running for coroner in 2008 and was elected. And now I'm working on my second term, going into my second term.

**Kelly Keyes** [00:02:43] Congratulations. Meghan, can you tell us a little about your path to working in an MDI office?

**Meghan Clarke** [00:02:48] My background is in victim services. I was a victim advocate for well over a decade before I came to the Denver Office of the Medical Examiner or DOME.

That's what we call it here. And the way that it happened is I got my start, like I said, in victim services, which included courtesy responses for unattended deaths. So meeting with families on scene, helping them through next steps after somebody had been found deceased in their home. I went on to work at the DA's office here in Denver, and then in 2021, I saw that the Denver Office of the Medical Examiner was hiring for a family advocate support position. And I thought it was super cool because I always knew this was a gap in services for families. So I applied and started developing our program, and here I am, like a year and a half later and it's still going strong.

**Kelly Keyes** [00:03:47] So it's a fairly new position there. Is that correct?

**Meghan Clarke** [00:03:51] Correct. It was a brand new position.

**Kelly Keyes** [00:03:53] Wow. How did the office come to decide that they needed the position?

**Meghan Clarke** [00:03:58] I think it's something that they had been wanting to have for a long time. We have staff here who would be repeatedly tasked with providing emotional support for families, even though that's not necessarily their job or what they were hired to do. And it could take away from the time that they would spend on the job that they were hired to do. They were seeing deaths in the same households, so suicides in the same family or overdoses in the same home. And I think they really started to look critically at what they could put in place to maybe intervene in some of those secondary traumas. Steve had an opportunity for funding, and he decided to create this position and use that funding for this position.

**Kelly Keyes** [00:04:51] I can only imagine how invaluable that has been to the investigators. How have the investigators there in Denver responded to having you in this role?

**Meghan Clarke** [00:05:00] I think they love it. I know they like the support. We work really well as a team and it takes one more thing off of their plate, which they already have a tremendously hard job to do, and it's not really fair to task them with also holding emotional space for families when they already have to do so many other things on each case. We have figured out over the last year and a half how to navigate this together, and I would say we really do a good job of it. We had a person retire in September. She spent like 30 plus years as a sergeant in the gang unit at Denver Police Department, which we also refer to as DPD. And in her exit interview, one of the things that she noted, the burnout she felt from being a death investigator here for five years was so much more than she ever felt as a police officer in Denver for decades. And she said one of the things that was the hardest part of the job was being asked to do the death investigations and you talk to a family and you provide them support for that day. And then, you know, you're 30 cases down the road and that family calls you back and wants to talk about something that maybe isn't necessarily related to the death. They just want support. And that was a really hard thing for her to navigate. And that's what we're here to do now. So when they get those calls, they can pass them on to me and my team.

**Kelly Keyes** [00:06:44] That sounds amazing. On behalf of those investigators, yes, thank you, and certainly on behalf of your community, thank you for doing that. I'm wondering what exactly it is that you've been able to do to support your community and what extra things can having someone in your position bring to the community?

**Meghan Clarke** [00:07:01] One of the first things that I did was to build out an internship program to get additional support for the work that I was about to undertake. We have a lot of deaths that occur in Denver every year, and a program like this can't be done with just one person. So I built out an internship program, started recruiting interns and training them to be advocates and in the meantime started developing resource material brochures in both English and Spanish that our investigators could take out on scene and hand to families while they're on scene. I connected with Denver Police Department's Victim Services Unit to make sure that we weren't duplicating efforts or crossing lanes, if you will. We figured out where they kind of leave off, our group can pick up. I think the additional things that FAST, which is the Family Advocate Support Team, brings to the community are really individually based. I mean, we reach out to families, witnesses, loved ones who are connected to any homicide, suicide, overdose, any child fatality, and we're providing those people a space to talk about what it is that they have experienced, to help connect them with resources that are already available in the community that they might just not know about because they've never been through something like this before. We can help them navigate complex systems. So having a point person who knows, Hey, you need to go here with Denver Human Services to apply for burial assistance, and then you go here to figure out Social Security and if you're having trouble paying rent, we have a couple of phone numbers you could try to see if you can get some rent support. So really, we're acting as a liaison to connect families with what is already in existence in the community.

**Kelly Keyes** [00:09:05] This sounds just like such an incredible resource. Is this a growing position that you're seeing in other medical examiner and coroner offices?

**Meghan Clarke** [00:09:14] It is, which is really cool to see. We have been in contact with different coroner offices across the country. We have worked with Mesa County here in Colorado to help them with their family advocate program. We've helped Boulder County here with their family advocate program. I think it's something that has always been a need and now it's gaining some traction. And I don't think we're going back. I think the wave of the future is going to be having a position like this in any coroner's office or community.

**Kelly Keyes** [00:09:50] So switching gears a little bit, Rebecca, you don't have a program particularly like this, but you do some amazingly wonderful things to support your office and really just support your community. Can we start by talking about your efforts related to suicide prevention and support of families and others who experience a death by suicide of a loved one?

**Rebecca Reid** [00:10:09] Yeah, for sure. So about seven years ago, someone came to me and says, Hey, what do you feel about a LOSS team? So a LOSS is a Local Outreach of Suicide Survivors. And I said, Well, what all does that entail? And so, you know, we sat and talked for several hours and I said absolutely, let's start it. So we have what's called a LOSS team, the Laramie County LOSS team, Local Outreach Suicide Survivors. So what that means is I have a group of volunteers, along with the local organization that's nonprofit, Grace For 2 Brothers, who gets funding for biohazard cleanup, any kind of resources, and then some of their volunteers will come and volunteer with the coroner's office and they'll go out to calls with us. So we always make sure the scene is safe. You know, they're not walking into, you know, any kind of active crime scenes and that sort of thing. But they're there to help the families during their loss. So we as investigators can actually do our job and investigate their loved one's death. So they're able to provide, you know, if we need meals, if we need any reading materials, biohazard cleanup, anything at all that they need, then our volunteer group will be able to help them with the loss. And we see a huge impact with the LOSS team. There for a long time, we were going, like Meghan

was saying, to multiple houses for the same types of deaths, whether it was overdoses or suicides. And with this group, we've been able to do a lot of postvention and prevention outreach with the community and being able to help the suicide loss here in Laramie County.

**Kelly Keyes** [00:11:42] And you also do a suicide review team as well, don't you?

**Rebecca Reid** [00:11:47] Correct. I'm in my second term. So 2019 I went to our Laramie County commissioners and said, hey, we have victims advocates for crimes, you know, like, say, victims of crimes. We have our LOSS team for suicide. Well, what about the other, you know, families that suffer a loss for car accidents, natural deaths? And they're like, well, what do you mean? I said, well, we don't have any services for them. And so then that I started what's called the Laramie County Grief Support Group. And with that being said, since we've started the LOSS team and the grief support group, we're able to help all families in Laramie County. It doesn't matter how you pass away or how your loved one has died. So with that being said, we've actually just recently started in the last year a suicide fatality review board team, which is thumbs up to all the people that help us put it together. This is able to pinpoint locations to where we can get training in the community like Question Persuade in response on, you know, to know if anybody suicide - the animal shelter. People like to drop their animals off before they die by suicide, or maybe even to funeral homes. They'll do pre-need funeral arrangements. And then two weeks later, you know, they're deceased. So the suicide fatality review board team has really, really helped us and be able to pinpoint risk factors where we need education and training in the community and different professional entities here in Laramie County.

**Kelly Keyes** [00:13:10] The grief support team that you mentioned, is that the kits that you and your staff have at your office to- to pass out to families?

**Rebecca Reid** [00:13:18] Yeah, that is so we have what we call memory boxes. So for our kiddos who have lost a loved one, whether it be a mom, dad, whoever it may be, we have little boxes. There's a little photo book in there. There's a water bottle, there's some grief coloring pages, some bubbles, and then some coloring crayons or pencils. And we also have a memory box book that goes along with that. So we can hand that to our kiddos who have lost a loved one and say, Hey, how about you make a In Memory box for your loved ones so you can remember them every time you look at this book, or if you're missing them, or if your heart's aching for them and it's some kind of anniversary, you're able to pull that out and remember all the good times.

**Kelly Keyes** [00:13:59] Rebecca, another thing that I think is so wonderful that you do is your remembrance tree. And I know that that's something that other offices have modeled off of what you have done. Can you talk a little bit about that?

**Rebecca Reid** [00:14:10] So here we started oh, it's been, I think, two years now. I said, you know what, we need a in memory tree. So I went out and I bought a Christmas tree and I just started advertising, did some media release with our local media groups and said, you know, if you've lost a loved one, come place an ornament on our tree in memory of them. And then each year we put the same tree back up and the same ornaments, and every year people start adding, keep adding ornaments, and some of them are personalized, some have some pictures. They really, really like coming out and putting those special ornaments. And we remember all of our deceased that we work. We're not as big as Denver or some of these other counties. We're working about 500 cases a year. But each family touches you in a different way, and so being able to see those families

come out and place those ornaments on the tree, being able to keep that rapport and, you know, in the community and with these families are a wonderful thing for our office.

**Kelly Keyes** [00:15:08] What other ways have you found to support your community? It seems like it's never ending for you.

**Rebecca Reid** [00:15:13] No, it's never ending. And right now, we're fixing to kick off our fourth annual glow in the dark dodgeball fundraiser for the grief support group and the LOSS team. So we have about 30 teams that come out. It's a whole day event. So that's our annual fundraiser that we do every year. Another thing that we have started too here recently is called an Overdose Fatality Review Board team. So it's kind of like our suicide fatality review board, but it's for overdoses. As we know as the fentanyl cases rise nationwide, we know that there is a tough road ahead of people in general on drugs. And if we could find some kind of risk factor or some kind of training education for the general public or even the professionals out there to be able to help with the overdoses to kind of lower them, I think this group is going to do it here in Laramie County.

**Kelly Keyes** [00:15:59] I have no doubt with you spearheading that and helping to guide that ship, that's probably true. Meghan, obviously your office was able to figure out how to get your role incorporated into the office. Any tricks you would share with the community to get a role like yours funded or any words of advice to a coroner or a medical examiner thinking of creating such a role like yours?

**Meghan Clarke** [00:16:21] My advice would be to do it however you can, even if it's starting small with maybe a volunteer who can follow up with families. The need is so great. And like Rebecca was mentioning, the fentanyl crisis that we're experiencing right now, the need is not going to be going away or diminishing any time soon. And there are a lot of people suffering in your communities that really could use just something as simple as a phone call to say, We haven't forgotten about your loved one, we haven't forgotten about you. How can we support you right now? And just something as simple as that is very meaningful and impactful for a family. And so start small. There are tons of grants out there that you can get for starting like even a part-time position. When I first started, I didn't have any sophisticated technology. I used a spreadsheet to track cases, to track families, to track follow up status and who needed calls when. It was something as simple as that. I used resources that are already in the community, and so that also helps, you know, not recreating the wheel, but using what's already accessible to you and building relationships with your community and the agencies in your community that are doing this work because they're going to make it a lot easier for you to get families connected to them if you know who they are, how they operate.

**Kelly Keyes** [00:17:54] Rebecca, most MDI offices have a pretty meager budget with, without a lot of wiggle room. You mentioned your dodgeball tournament. Any other creative ways that you found to fund these activities?

**Rebecca Reid** [00:18:06] You know, I really just use grants, so I do our community prevention grant through our local hospital here. So with those community grants, I'm able to provide all of my supplies and all my resources for that. Mainly our dodgeball fundraiser will support if we need to help pay rent or if we need to put somebody in a hotel for a night or two. We do a lot of things at Christmas for families who have lost a loved one that we worked. So we'll go through our whole year and say, Hey, is there a family that you would-like has some kiddos that maybe we should buy some gift cards or some presents? So a

lot of that, but a lot of it really just goes throughout the whole year, just helping each family depending on what their need is.

**Kelly Keyes** [00:18:50] You've really taken the public servant role to a whole new level. Thank you. I love that. Meghan, In recent years, we've seen the country shift its focus to highlight mental health. Can you talk about how that impacts your work and the work that you do with the community?

**Meghan Clarke** [00:19:05] So in Denver specifically, there's been a focus on supporting the mental health needs of our community. And so there's a lot of grants and funding and money that has come through the city that we've been able to tap into, are still trying to tap into, to kind of bolster up the work that we're doing. I think this also goes back to what I was saying before, just about, you know, this need isn't going away. People are experiencing extremely traumatic life changing losses and having a support team there to help them, guide them through their grief is only going to benefit your communities. If people feel supported, if they feel heard, if they're getting access to the resources that they need, they are able to move through their grief in a more positive way and continue to do things like participating in their family units, participating in their communities, and that benefits everybody.

**Kelly Keyes** [00:20:15] Do you have any data that shows your impact in the community?

**Meghan Clarke** [00:20:19] I have solid numbers about the work that we're doing. In 2022, we reached out to people on 1,200 cases. So that's just cases. That's not number of people connected to each case, which can be, you know, two, three or four, sometimes more. We provided almost 3,000 contacts. And I think that says something in and of itself. You know, we are new. We are still gathering our empirical data to support what we're doing. But what I will say is the feedback that we've had from the community, the number of people who leave Google reviews or call the office or send an email saying this was invaluable. Thank you so much. That in addition to the other stuff that we've been doing, helped us get funding for a second position. So I will be adding somebody to my team in the next few months. It's a full-time position and I think that just speaks volumes to the work that we're doing, that the city is going to put additional funding into what we're doing so that we can grow and expand the work that we do.

**Kelly Keyes** [00:21:39] Meghan, what sort of background would you recommend for somebody who wants to start a position? Is it a good position for a former death investigator, or is it better for somebody that has like the victim services training that you came in with?

**Meghan Clarke** [00:21:54] I would say social work backgrounds, victim service, and victim advocacy backgrounds are helpful to have. I mean, you really have to know when you're advocating like how to navigate systems, how to connect people with resources that are going to be meaningful, feasible, affordable, accessible. And that just usually comes with years of experience doing that repetitively. But I truly think that for this job, you just need to have empathy and a true desire and a true heart for service to your community. And if you have that, you can build out on that regardless of what your background is.

**Kelly Keyes** [00:22:38] Rebecca, do you have any idea how many families, cases and what your impact was on your community as far as numbers?

**Rebecca Reid** [00:22:46] Yeah. So we worked at 516 cases and we had contact with over 1,200 people from those cases. Still to this day, am I in communications from two years ago on cases that we worked. I feel when you're doing this job, it's just not a one time I'm going to talk to you, give you some resources and help you on your way. This is you build relationships and rapport with these families. And- and we do, you know, we don't ever stop helping our families. And like Meghan says, being able to connect them to other resources in the community is huge because we all got to get on the same page. And I think that's why the suicide fatality and the overdose fatality review boards, everybody in there are in some kind of, you know, mental health, you know, suicide, overdose, with the state crime lab, each law enforcement, victims' advocates, those types of things. And we can all come together and have all the same resources, then I think we'll be able to help a lot more people in 2023, too.

**Kelly Keyes** [00:23:42] Meghan, is that similar for you that you find these contacts aren't even necessarily proximal to the death, but can be weeks, months later?

**Meghan Clarke** [00:23:50] Absolutely. You know, we work hand in hand with DPD's Victim Services unit, and we're lucky in the sense that they have victim advocates who will do that initial courtesy contact with the family. And so our program, we do the proactive outreach, like eight weeks after a death when things have kind of started to settle. They might be seeing what their needs actually are at that point, but families can reach out to us at any time. They'll be given our information on scene so if they need something sooner, they have that ability to reach us. But yes, we have families who, you know, maybe we called them a few times and they told us, you know, I think I'm actually okay. I don't need further follow up. And then they'll reach out to us a couple of months later and change their mind. Maybe they just weren't in that right frame of mind when we were reaching out to them to be open to receiving support and assistance. So everybody is on their own journey, they're going to have their own time frame. And we also, like Rebecca said, we respect that. We work with them where they're at.

**Kelly Keyes** [00:24:59] So it really is a long-term solution to a community problem, not just holding the family's hand through it right now. Meghan, what sort of challenges you faced in doing these things that you do and how you've overcome some of those challenges?

**Meghan Clarke** [00:25:15] I feel pretty lucky. I have a support system here at work. Everybody believes in the work that we're doing, and that has made it really easy, as easy as something like this could be, to develop and implement. Challenge wise, I think at the beginning it was a challenge because there wasn't much to model my program after. There isn't a lot of programs like mine in the country. And so that was a challenge to just figure out the basics of what this was going to look like and how we were going to move forward with it. But that evolved over time, and I'm feeling very confident and comfortable with where we are right now.

**Kelly Keyes** [00:26:00] Do you know how many offices around the country now have a position like this, or is that just an unknown?

**Meghan Clarke** [00:26:06] I believe that you're probably looking at only a handful. When I first started, I got connected with a program like mine in Maricopa County, I believe. I recently heard about a program in Pennsylvania that does similar work. I was collaborating with the New York City's chief medical office to help them develop a program that I heard recently did get going. So it's very few and far between, but I do think and I hope that this is just going to continue. You know, having a program like ours to do the emotional work I

think is going to help with your retention, with your other employees. You know, taking that off of a death investigator's plate is only going to be a beneficial thing for everybody.

**Kelly Keyes** [00:26:57] Is there one biggest surprise to you in all that you've done, Rebecca?

**Rebecca Reid** [00:27:02] Yeah. It's the lack of mental health in our nation. And, you know, some people just don't want to go see a mental health counselor. They don't want to see a therapist. You know, I would have to say mental health is one of the hugest things that I've seen the lack of of doing some of this community outreach.

**Meghan Clarke** [00:27:17] I would have to echo what Rebecca said. As you know, working as a victim advocate, you do see a lack and a gap in mental health services and what's available to families. And so moving into the role that I have now, it can be challenging to find a therapist that is going to meet the needs of the person that you're working with, from what health insurance they have to what their availability is. Do they even have Internet to be able to access virtual sessions? I mean, all of those things are barriers for people getting the help that they really need. And so trying to navigate some of that is definitely challenging and hopefully something that we can work on changing.

**Kelly Keyes** [00:28:04] Well, thank you for the difference that you both are making to tackle some of these mental health challenges that you mentioned. And with that, I'm just wondering if you have any parting thoughts.

**Meghan Clarke** [00:28:15] I really think this is a new wave of services offered through ME's offices or coroner offices. I don't think we're going back. I hope people jump on this train and start their own programs, or at least having the conversations around how to start their own programs. And if you want help, call me, send me an email. I'm happy to provide any help that I can to anybody who's looking at doing this for their community.

**Rebecca Reid** [00:28:47] You know, I'll just repeat what Meghan says, but just remember that you're not alone in this time. We're here to help you walk you through one of the toughest times of your life. And whether it's for two weeks, two months, or two years or however long it will be, we'll always be here. And I look forward and hope to hear of more medical examiner's office and coroners nationwide going to victim families support centers, or maybe a LOSS team or a grief support group, because it's a huge asset to your community.

**Kelly Keyes** [00:29:15] I want to thank you, Rebecca and Meghan, for sitting down with Just Science to discuss all of the work that you're currently doing within the MDI community. Thank you so much for being on the show.

**Meghan Clarke** [00:29:26] Thanks for having us.

**Rebecca Reid** [00:29:28] Thank you for having us.

**Kelly Keyes** [00:29:29] If you enjoyed today's conversation, be sure to like and follow Just Science on your podcast platform of choice. For more information on today's topic and resources in the forensics field, visit [ForensicCOE.org](http://ForensicCOE.org). I'm Kelly Keyes and this has been another episode of Just Science.

**Voiceover** [00:29:48] Next week Just Science sits down with Bridget Kinnier and Bethany Smith to discuss the process of getting certified by the American Board of Medicolegal Death Investigators. Opinions or points of views expressed in this podcast represent a consensus of the authors and do not necessarily represent the official position or policies of its funding.