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Anthropology

Advocating for the Dead: An Interdisciplinary Path Toward Restructuring the Medicolegal Death Investigation System in the Texas Borderlands

Current medicolegal practices in Texas

border counties fail to identify and repatriate

unidentified decedents creating the need for

a Regional ID Center.

Courtney Siegert¹, Carina Marques², Molly A. Kaplan¹, Victoria M. Swenson¹, Kate Spradley¹, Nora Salinas^{3,4}, Vanessa Alaniz³, Dina Nunez³, Eddie Canales³, Cate E. Bird⁵, Jason Wiersema⁶ Texas State University¹; University of Texas Rio Grande Valley²; South Texas Human Rights Center (STHRC)³; Brooks County⁴; International Committee of the Red Cross⁵; Harris County Institute of Forensic Sciences⁶

INTRODUCTION

Medicolegal authorities in Texas lack adequate resources to identify and repatriate transnational decedents, overwhelming capacity and creating a humanitarian mass disaster that leaves many unidentified persons at risk of being administratively lost.^{1, 2}

Migrant deaths will continue to rise without significant interventions, policy reform, and systemic change. The need for a sustainable solution is urgent. The authors propose the establishment of a Regional ID Center in South Texas to alleviate the mass disaster by promoting a Disaster Victim Identification (DVI) approach and following legal statutes within Texas.

BACKGROUND

Medical Examiners Offices are established in 13 Texas counties (Figure 1).¹ In the remaining 241 counties, a Justice of the Peace (JP) is the medicolegal authority for unidentified deaths.

.JPs are elected officials and are not required to have any forensic training or knowledge prior to taking office. In addition to other magistrate duties, JPs are responsible for conducting inquests and investigating unidentified human remains.

Most borderland counties are rural and financially poor limiting JPs ability to:

- Seek comprehensive forensic analyses to identify the deceased
- Fulfill state and federal reporting requirements
- Locate transnational next-of-kin

KEY PARTNERS

FORENSIC

COALITION

BORDER

• Track decedent remains from recovery to burial or repatriation

In August 2022, medicolegal authors and key partners formed a working group to continue efforts to improve forensic outcomes for migrant decedents, and secured Humanitarian and Human Rights Resource Center (HHRRC) funding to support our efforts to establish a Regional ID Center in South Texas to alleviate barriers to identification and repatriation (Case A, B, & C examples; Figure 2).

Case A - In 2024, human remains were found with an ID card and transferred to a private pathology office. The JP made the identification; however, the family rejected it because the decedent was decomposing and unrecognizable. After communicating with the JP and the pathologist office, it became clear neither knew how to confirm identification using forensic standards.

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Figure 4. OpID training local actors to take PM fingerprints

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Figure 1. Texas counties and jurisdiction type

Figure 2. Guatemalan consul discussing challenges

Case B - In 2022, human remains were found with an ID card. Fingerprints were collected and the individual was buried. Weeks later, there was print match, however neither the JP nor the funeral home could relocate the remains for exhumation and repatriation. DNA samples were not collected. and the case was not entered into NamUs, both mandatory in Texas.

community members



Figure 3. Workflow for Regional ID Center developed by working group partners with contributions from South Texas

Regional ID

Center Workflow



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Q

NEXT STEPS

4

CONCLUDING THOUGHTS

Figure 5. Sister Pimentel & Eddie Canales Figure 6. STHRC Board of Directors, Forensic Border Coalition, and OpID at Regional ID Center advocating for migrant riahts meeting to develop advocacy and outreach plan





EFFORTS TO DATE

To date the working group has:

Developed a proposal and budget to establish a Regional ID Center at UTRGV (Figure 3)

Received intensive postmortem (PM) fingerprint training from the FBI Implemented DVI protocol in Maverick County^{3,4} resulting in:

- 21 scientific identifications out of 36 examined decedents
- elimination of unidentified persons' case backlog
- reduced timeline from recovery to repatriation
- thousands of dollars in savings for the county

Trained local actors on legal requirements, the need for positive identification through scientific means, & postmortem fingerprinting techniques (Figure 4) Partnered with strategic advocacy organizations to facilitate the introduction of legislation in the 89th Texas Legislative Session (Key Partners; Figure 5 & 6) Drafted a white paper mirroring the Regional ID Center proposal for dissemination to Texas legislators and advocacy groups

Developed a letter of support for circulation to local actors, forensic practitioners, family representatives, and community members to foster support for introduced legislation

Present drafted documents to state legislators to obtain bipartisan bill sponsorship

- Host a meeting with local officials, consular representatives, forensic
- practitioners, non-governmental organizations, & state legislators to draft a bill and discuss feasibility and implementation
- Continue advocacy & outreach efforts with local officials & legislators (Figure 7)

South Texas Regional ID Centers will reduce costs and defragment the medicolegal system, by standardizing and centralizing the identification processes and supporting overwhelmed rural counties. It will ensure compliance with state codes while providing a sustainable solution for medicolegal authorities to manage and identify unknown bodies, including those of presumed migrant, in accordance with humanitarian standards.⁵

Case C - In 2024, human remains in the county's refrigerated storage had an ID card on top of the body bag. Postmortem fingerprints did not match the ID card, but matched another missing person. Prior to obtaining postmortem fingerprints, a death investigator insisted that the decedent was already identified and the consulate was reaching out to family.

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