
NEW STUDY: TASERS "AS SAFE AS WEAPONS CAN BE,"
NOT "INSTRUMENTS OF DEATH"

Citation:

PoliceOne.com New study: TASERS "as safe as weapons can be," not "instruments of death"
June 06, 2008. <http://www.policeone.com/writers/columnists/Force-Science/articles/1702148-New-study-TASERS-as-safe-as-weapons-can-be-not-instruments-of-death/>

CHAS' REVIEW of the "BOOK REVIEW" (And comments about THE BOOK):

On pages 2-7 of this file is a **Book Review** written by an unnamed **www.policeone.com** columnist. The book allegedly being "reviewed" is: *TASER Electronic Control Devices and Sudden In-custody Death: Separating Evidence from Conjecture*

Contrary to this columnist's title, this book doesn't contain a "new study" about Taser effects – it doesn't contain any kind of *study* at all! The book contains a single Police Chief's **report** of the **opinions** he elected to draw from a review of what little information he could find associated with "310" Taser-related deaths that occurred in the US between 1983 and "2006."

"I gathered as much information as I could from the primary sources, and when primary sources of information were not available, I relied on news reports."

View a selection of the **BOOK's excerpts**, I obtained from the publisher's website:

<http://www.charlydmiller.com/LIB11/2008JuneTaserBookExcerpts.pdf>

After reviewing those excerpts, it is abundantly clear that the Police One "book review" is nothing more than an **advertisement** for this book. Were it anything even remotely resembling a book *review*, it certainly would *not* identify the book as being a "**new study**" that has "**confirmed that [Tasers] are by no means the dangerous and often deadly weapons that Amnesty International, the ACLU and media reports frequently suggest.**"

In fact, the following quotes quite clearly confirm the Police One "book reviewer's" core motivation:

"But the payoff, of course, is the conclusions Williams draws from his analyses. ... 'The evidence makes the case that TASER devices are not instruments of death,' Williams asserts. 'The only conclusion the evidence supports is that they are safe weapons.'"

The Police One "book review" is clearly a sham.

From what I've seen of it, the book is probably a sham, as well. However! To confirm or deny this conclusion; If any of you **purchase** this book, **PLZ** scan and send me the following pages:

Pages 6 – 10: Excited Delirium; Restraint Asphyxia; Metabolic Acidosis; Rhabdomyolysis; Handling Excited Delirium Patients; Handling Excited Delirium Patients

Pages 159 – 164: ANALYSIS OF TASER CASE STUDY DATA; Group One Analysis; Group Two Analysis; Summary

Pages 177 – 204: *Glossary and Bibliography*

Thereafter, I'll add those pages to the selection of *excerpts* from the **Book**, and all of us can better analyze whether or not the book is – indeed – a **SHAM!**

YOURS, CHAS

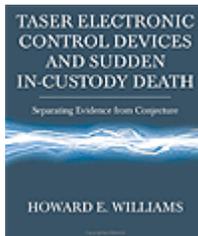
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06/06/2008 [BOOK REVIEW]



Destroying Myths & Discovering Cold Facts
with The Force Science Research Center



New study: TASERs “as safe as weapons can be,”
not “instruments of death”

From *Force Science News*

A first-of-its-kind, case-by-case study of in-custody deaths associated with TASER use has confirmed that the popular electronic control devices are by no means the dangerous and often deadly weapons that Amnesty International, the ACLU and media reports frequently suggest.

Self-described as “kind of a nerd” who approaches tedious research as recreation, Chief Howard Williams of the San Marcos (TX) PD patiently tracked down and analyzed 213 cases in which suspects in the U.S. died after being TASERed. The search took more than a year and cost thousands from his own pocket, but in the end Williams has documented what TASER supporters have long believed:

These devices are “safe weapons. At least they are as safe as weapons can be.”

During the scope of his investigation, which covered cases from 1983 through 2005, Williams concluded that a TASER can be confirmed as the direct cause of or a significant contributing factor in only 2 deaths, he told *Force Science News*. “That’s less than 1% of the deaths that critics of Taser technology attribute to it.”

Since his study formally ended, he has identified and preliminarily probed some 216 additional post-TASERing fatalities that occurred from 2006 to the present. But he has found no data that would change his initial findings or cast doubt on TASER safety.

Critics of TASER have failed to “separate evidence from conjecture or to analyze cases” one by one, Williams says. Instead, they’ve drawn misleading assumptions “based simply on the number of deaths, or on a misunderstanding of how the devices work, or on speculation of potential problems with the use of electromuscular disruption technology.”

In contrast, he says his study objectively analyzes “the credible evidence”—including “what medical experts know about sudden death, the technical operations of conducted energy weapons, the physiological effects of TASER devices, and the facts of each case—to determine the true role” of TASERs in suspects’ fatalities.

Williams’ discoveries are reported in a 212-page book, *TASER Electronic Control Devices and Sudden In-custody Death: Separating Evidence from Conjecture*, issued recently by Charles C. Thomas Publishers [**Call (800) 258-8980 or [order a copy online](#)**]

“Given all the headlines, the controversy and the lawsuits generated by TASER-related deaths, it’s ironic that a lone police official steps up to conduct this kind of vital research rather than it being a priority mandate by a major governmental entity,” says Dr. Bill Lewinski, executive director of the Force Science Research Center at Minnesota State University-Mankato. “Sadly, this speaks to the lack of interest at the state and federal level for funding research into practical, street-level enforcement issues.

“Chief Williams’ study will not be the final scientific statement on the ramifications of TASER use. But it presents the clearest picture to date regarding a core controversy that in the past has produced far more heat than light.”

Williams first got interested in exploring the “death by TASER” issue, which he considers “the most significant law enforcement controversy of the last decade,” when he was struck by the contrast between what he saw of TASER use on the street and what he read in the media and from activist groups about it.

On one hand were officers’ success stories—incidents that might otherwise have escalated to baton beatings or shootings being resolved earlier and less violently, fewer on-the-job injuries by officers, fewer ER trips by subdued suspects thanks to TASER deployment. On the other hand were alarming allegations by Amnesty and other groups, strongly implying if not charging outright that TASERs were responsible for scores of offender deaths and calling for moratoriums on the “dangerous” devices’ use.

Williams tells his CJ students at Texas State University, where he’s an adjunct faculty member, “You do not have to trust what anyone tells you. Research it yourself.” So he took his own advice and started looking into TASER-related deaths, determined to see what the evidence revealed.

Searching out leads on the Internet and through media databases at Texas State, he compiled a comprehensive list of reported fatalities. Then through freedom of information requests, he pursued each case and got police reports, autopsy results and other official records wherever possible and supplemented these with whatever news coverage he could garner. He amassed stacks of information 2 to 3 feet high on his desk at home and waded through them item by item, tabulating and analyzing.

Each of the 213 cases he verified is described in narrative detail in his book and includes the name, age, race and gender of the deceased; the date of the incident and the death; the agency involved; the cause of death, plus contributing factors; and the role of the TASER device

deployed. Unique to Williams' study, these accounts in themselves make fascinating reading and represent a prodigious amount of research.

But the payoff, of course, is the conclusions Williams draws from his analyses. These include the following highlights:

Early generation fatalities. The first 42 of Williams' case studies represent deaths that occurred before 2000 and followed the use of first- and second-generation TASER weapons (the TASER TF-76, the Tasertron and the Air TASER 34000, which "relied mainly on pain compliance") against aggressive or resistive subjects.

A TASER device cannot be confirmed as a cause of death or even as a significant contributing factor in *any* of these "Group 1" cases, Williams reports.

By the study's definition, TASER can be "confirmed" as a direct cause of death only in instances where the subject likely would have survived had the weapon not been used.

Later generation fatalities. The other 171 deaths, considered "Group 2" events, followed the application of third- and fourth-generation weapons (Advanced TASER M26 and the TASER X26, which depend on "electromuscular disruption technology").

In this category, TASER can be confirmed as a cause of death in only 1 case and confirmed as a significant contributing factor in only 1 other, Williams concludes.

"The evidence makes the case that TASER devices are not instruments of death," Williams asserts. "The only conclusion the evidence supports is that they are safe weapons."

Case details. The sole case of confirmed death-by-TASER involved extreme circumstances in subduing a 29-year-old black male prisoner in South Carolina named Maurice Cunningham. After a night of hallucinating that snakes were around him, Cunningham escaped his cell in a sheriff's facility, stabbed 2 officers in the eye with a pencil and tried to gouge out the eyes of a third officer.

He was shocked 5 times with a TASER, for a cumulative total of 35 seconds, but "he ripped the probes out and continued to fight," Williams reports. After an ineffective use of chemical spray, he was zapped with a second TASER, the probes hitting in his left arm and thigh. Williams notes: "The deputy held the trigger for 2 minutes 49 seconds," before Cunningham collapsed and was soon after pronounced dead.

"[T]he coroner listed Cunningham's cause of death as cardiac arrhythmia due to TASER shocks," Williams writes. "Pathologists found that [his] heart suffered damage at a cellular level purportedly from the electrical current [and] concluded that the probes...completed a circuit in his body that disrupted the electrical system that controls the heart."

The single case in which Williams classified TASER as a significant contributing cause of death also represents an anomaly of circumstances. This offender was Jerry Pickens, a 55-year-old white male who hostilely confronted sheriff's deputies in his front yard in Louisiana when they arrived to investigate a family dispute.

Against their orders, Pickens tried to re-enter his residence. They TASERed him, and he stiffened and fell, striking his head on the driveway. He was declared brain-dead at the hospital and died 3 days later when doctors pulled the plug on life support. The coroner ruled that he died of a brain hemorrhage from the fall. "Clearly," Williams writes, "the fall...was caused by application of the TASER."

Predisposing factors. Williams reports that subjects who die in custody or during an arrest after a TASER is used against them tend to share certain characteristics that seem to "predispose" them to an increased risk of sudden death quite apart from any TASER involvement.

These include: obesity, coronary problems, illicit drug use, mental illness, too much or too little psychotropic medication, alcohol intoxication or withdrawal, diabetes and hypoglycemia, hyperthyroidism, dehydration, head injuries (current or historic) and vigorous physical activity that may trigger ventricular fibrillation.

For example, nearly 70% of Group 1 subjects and more than 72% of those in Group 2 were users of illicit drugs (most often cocaine). Nearly 40% in Group 2 showed evidence of heart disease.

In all, Williams found, a coroner or medical examiner observed at least 1 predisposing factor in nearly 88% of the cases studied. In more than 35%, at least 2 such factors were confirmed.

Williams pointed out to *Force Science News* that the prevalence of predisposing factors is roughly the same among subjects who die after being TASERed and those who die suddenly in custody without any TASER involvement—further indication that the use of the electronic weapon "is not creating any special risk."

On the other hand, he notes, "[T]he risk of sudden death following violent exertion, such as a struggle with police or straining against restraints, increases manifold for people with predisposing factors."

TASER failures. Interestingly, Williams documents a high rate of TASER failure associated with post-TASERing deaths; either the electronic application did not stop the individual or stopped him only temporarily and "some other form of force had to be used to get the subject under control." Among Group 1 cases, "the TASER pulse was ineffective in subduing the target" some 71% of the time. In Group 2, the ineffective rate was nearly 60%.

This may suggest the exceptionally high level of agitation and violent determination in subjects who end up dying as compared to other offenders who are TASERed, where the effectiveness level is much higher.

Moreover, the vast majority of subjects in both Groups 1 and 2 did not fatally collapse within 5 to 15 seconds after the application of a TASER device, "an indication that the current from the TASER pulses did not affect their hearts' rhythm" as critics often conjecture, Williams says.

Media/activist shortcomings. TASER critics and the media have emphasized that the number of deaths after use of electronic devices is rising, and they conclude that this increase is occurring because TASERs cause deaths. Fallacious thinking, Williams insists.

"First, there is *no* evidence that the total number of custody deaths is rising," he states. Deaths after TASER use *are* rising, but that's because the number of police agencies in the U.S. equipping officers with TASERs has increased more than 10 fold since 2001.

What activists and the media seize upon, he says, is a *correlation* between TASER use and sudden death. "[T]his is an unscientific linking of 2 events" just because one follows another, Williams writes, not a true cause-and-effect relationship. "The sun rises after the cock crows, but that doesn't mean there's a causal relationship," he offers as comparison.

Indeed, he notes, other studies have shown "a much higher correlation between sudden death and heart disease, sudden death and the use of...drugs, and sudden death and bizarre behavior than between sudden death and the use of a TASER... [T]ens of thousands of people who have been shocked with a TASER device survived without ill effects."

Williams points out that investigators "usually need several days or weeks to determine the facts, complete the investigation, and determine whether a TASER pulse, or any other factor, played a role in an unexpected death."

Typically, the media prominently play initial stories of post-TASERing deaths, but the public gets "little sense of the results of the investigations or of the coroners' findings." News reports presented one case he cites in his study "as being related to the discharge of a TASER device, but tests proved that the device was not properly charged and could not have delivered a shock."

Often results indicating that TASERing was not a death factor are buried in little-read sections of newspapers or totally ignored by tv news. Williams tells of one particularly egregious example of post-investigation reporting in which the headline read: "Cocaine Blamed for TASER Death."

"Trying to educate the media is hopeless," Williams told *FSM*. Like TASER's activist critics, "too many in the media have an agenda. That's obvious when you read their articles."

In the future, Williams is hopeful that a central database will be created at the federal level to collect meaningful information on in-custody deaths, similar to the reporting that exists for crime records. This would make possible a more comprehensive ongoing analysis of the role played by the TASER and other factors in suspect fatalities.

Meanwhile, he continues gathering information on his own in anticipation of eventually revising and updating his study. He'd like to hear from people who have observations or contributions regarding his work—including critics.

"I'm open to debate and discussion," he says. "If anyone can show me I'm wrong, I'd welcome it. I'm a Little League umpire, so I'm used to criticism."

To contact Williams, you can email him at: howardewilliams@msn.com

[Thanks to Wayne Schmidt, executive director of [Americans for Effective Law Enforcement](#), for tipping us to Chief Williams' study.]

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[Read more Force Science News articles](#)

The FSRC was launched in 2004 by Executive Director Bill Lewinski, PhD. - a specialist in police psychology -- to conduct unique lethal-force experiments. The non-profit FSRC, based at Minnesota State University-Mankato, uses sophisticated time-and-motion measurements to document-for the first time-critical hidden truths about the physical and mental dynamics of life-threatening events, particularly officer-involved shootings. Its startling findings profoundly impact on officer training and safety and on the public's naive perceptions.

For more information, visit www.forcescience.org or e-mail info@forcescience.org. If you would benefit from receiving updates on the FSRC's findings as well as a variety of other use-of-force related articles, please visit www.forcesciencenews.com and click on the "Please sign up for our newsletter" link at the front of the site. Subscriptions are free.

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