

**PSYCHOSOCIAL TRAFFIC AUTOPSY AS A STRATEGY FOR ASSESSING
INTENTIONALITY IN ROAD TRAFFIC INCIDENTS: A METHODOLOGICAL
STUDY**

**AUTÓPSIA PSICOSSOCIAL DE TRÂNSITO COMO ESTRATÉGIA PARA
AVALIAÇÃO DA INTENCIONALIDADE EM SINISTROS VIÁRIOS: UM ESTUDO
METODOLÓGICO**

**AUTOPSIA PSICOSOCIAL DE TRÁNSITO COMO ESTRATEGIA PARA LA
EVALUACIÓN DE LA INTENCIONALIDAD EN SINIESTROS VIALES: UN
ESTUDIO METODOLÓGICO**

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ABSTRACT

Traffic accidents rank among the leading causes of death from external causes and constitute a major public health concern. Traditionally classified as unintentional events, these fatalities are often attributed to human error, environmental conditions, or deficiencies in road infrastructure. However, scientific evidence indicates that some of these deaths may involve signs of self-harm intentionality, which remain largely underreported and are frequently recorded as accidents of undetermined cause. In light of this gap, the present study aims to introduce traffic psychosocial autopsy as an innovative methodological strategy for assessing intentionality in fatal road accidents. This study is a methodological development, qualitative and applied in nature, which systematizes an integrated process

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for retrospective investigation of traffic-related deaths. The methodology adapts the principles of classical psychological and psychosocial autopsies, expanding them to incorporate technical-forensic, psychosocial, epidemiological, environmental, and institutional data. The process is organized into six sequential steps: case identification, integration of data sources, retrospective psychosocial investigation, technical and contextual road analysis, intersectoral integration and inference session, and preparation of a technical report with recommendations. It is concluded that the traffic psychosocial autopsy enhances the analytical capacity of traffic death investigations, contributes to improving epidemiological surveillance, and supports intersectoral public policies aimed at preventing avoidable fatalities.

Keywords: Psychosocial Autopsy. Road Safety. Traffic Accidents. Intentionality. Mortality from External Causes. Epidemiological Surveillance.

RESUMO

Os sinistros de trânsito figuram entre as principais causas de morte por causas externas e constituem um problema prioritário de saúde pública. Tradicionalmente classificados como eventos não intencionais, esses óbitos são frequentemente atribuídos a falhas humanas, condições ambientais ou deficiências da infraestrutura viária. Contudo, evidências científicas indicam que parte dessas mortes pode envolver indícios de intencionalidade auto lesiva, os quais permanecem amplamente subnotificados e registrados como acidentes de causa indeterminada. Diante dessa lacuna, o presente estudo tem como objetivo apresentar a autópsia psicossocial de trânsito como uma estratégia metodológica inovadora para a avaliação da intencionalidade em sinistros viários com óbito. Trata-se de um estudo de desenvolvimento metodológico, de natureza qualitativa e aplicada, que sistematiza um processo integrado de investigação retrospectiva de mortes no trânsito. A metodologia adapta os pressupostos da autópsia psicológica e psicossocial clássica, incorporando de forma ampliada dados técnico-periciais, psicossociais, epidemiológicos, ambientais e institucionais. O processo é organizado em seis etapas sequenciais: identificação do caso, integração de fontes de dados, investigação psicossocial retrospectiva, análise técnica e contextual da via, sessão intersetorial de integração e inferência, e elaboração de relatório técnico com recomendações. Conclui-se que a autópsia psicossocial de trânsito amplia a capacidade analítica da investigação de óbitos no trânsito, contribui para a qualificação da vigilância epidemiológica e subsidia políticas públicas intersetoriais voltadas à prevenção de mortes evitáveis.

Palavras-chave: Autópsia Psicossocial. Segurança Viária. Sinistros de Trânsito. Intencionalidade. Mortalidade por Causas Externas. Vigilância Epidemiológica.

RESUMEN

Los accidentes de tránsito se encuentran entre las principales causas de muerte por causas externas y constituyen un problema prioritario de salud pública. Tradicionalmente clasificados como eventos no intencionales, estas muertes suelen atribuirse a errores humanos, condiciones ambientales o deficiencias en la infraestructura vial. Sin embargo, la evidencia científica indica que una parte de estas muertes puede involucrar indicios de intencionalidad autolesiva, los cuales permanecen ampliamente subregistrados y suelen clasificarse como accidentes de causa indeterminada. Ante esta laguna, el presente estudio tiene como objetivo presentar la autopsia psicossocial de tránsito como una estrategia metodológica innovadora para la evaluación de la intencionalidad en accidentes



viales con resultado fatal. Se trata de un estudio de desarrollo metodológico, de naturaleza cualitativa y aplicada, que sistematiza un proceso integrado de investigación retrospectiva de muertes en el tránsito. La metodología adapta los supuestos de la autopsia psicológica y psicosocial clásica, incorporando de manera ampliada datos técnico-periciales, psicosociales, epidemiológicos, ambientales e institucionales. El proceso se organiza en seis etapas secuenciales: identificación del caso, integración de fuentes de datos, investigación psicosocial retrospectiva, análisis técnico y contextual de la vía, sesión intersectorial de integración e inferencia, y elaboración de informe técnico con recomendaciones. Se concluye que la autopsia psicosocial de tránsito amplía la capacidad analítica de la investigación de muertes en accidentes de tránsito, contribuye a la mejora de la vigilancia epidemiológica y respalda políticas públicas intersectoriales orientadas a la prevención de muertes evitables.

Palabras clave: Autopsia Psicosocial. Seguridad Vial. Accidentes de Tránsito. Intencionalidad. Mortalidad por Causas Externas. Vigilancia Epidemiológica.



1 INTRODUCTION

Traffic accidents are among the main causes of death from external causes in the world, configuring themselves as a priority public health problem. Traditionally, these events are interpreted as unintentional occurrences, resulting from human error, adverse environmental conditions, or deficiencies in road infrastructure. Although this framework has supported important advances in traffic engineering and enforcement, it is insufficient to explain the totality of deaths recorded in traffic, especially those classified as accidents of undetermined cause (WORLD HEALTH ORGANIZATION, 2023).

Since the mid-twentieth century, studies in psychiatry and forensic medicine have indicated that the vehicle can be used as a means of self-injury, especially in contexts characterized by high lethality and low possibility of external intervention. Selzer and Payne (1962) described suicide by vehicular collision at an early age, while Shneidman (1973) introduced the concept of *vehicular suicidal ideation*, highlighting the ambivalent, impulsive and socially concealable character of this behavior. Despite these pioneering contributions, self-injurious intentionality remains largely underreported in official traffic death registration systems.

Contemporary empirical evidence reinforces this interpretative gap. Observational and population-based studies have shown a consistent association between suicidal ideation and risky driving behaviors, such as speeding, driving under the influence of alcohol or other substances, and lower adherence to safety devices, substantially increasing the likelihood of fatal collisions (BRAMNESS et al., 2008; THOMPSON et al., 2011). Such findings suggest that certain road accidents cannot be understood exclusively as fortuitous accidents, but may involve subjective and emotional dimensions relevant to the occurrence of the event.

In addition, investigations carried out in transport infrastructures, such as railways, bridges and highways, indicate that improvements in the procedures for analyzing and classifying deaths significantly alter the proportion of events attributed to accidents or suicides (PIRKIS et al., 2013; RUNESON et al., 2025). These results highlight structural limitations of traditional research models, which often focus on the physical dynamics of the event and neglect psychosocial and contextual factors.

In this scenario, the psychosocial autopsy is consolidated as an interdisciplinary methodology capable of retrospectively investigating deaths from external causes, by integrating clinical, psychological, social and contextual data in the reconstruction of the

fatal event (WERLANG et al., 2003; ROZA et al., 2023). In Brazil, studies published in national scientific journals demonstrate the validity and applicability of this approach to qualify the investigation of suicides and ambiguous deaths, overcoming analyses restricted to the physical cause of death (WERLANG et al., 2003).

By adapting this methodological framework to the field of road safety, psychosocial traffic autopsy broadens the analytical scope by incorporating, in an integrated manner, expert reports of collision dynamics, road conditions, risk history of the site and interviews with key informants. This approach makes it possible to assess signs of self-injurious intent in traffic accidents with death, contributing to the reduction of underreporting, the improvement of epidemiological surveillance, and the strengthening of intersectoral public policies aimed at prevention (TRANSPORT FOR NSW, 2020; WORLD HEALTH ORGANIZATION, 2023).

In view of these evidences and methodological gaps, the present study aims to present the psychosocial traffic autopsy as an innovative and integrated methodology developed to evaluate signs of intentionality in traffic accidents with death, detailing its procedures, data sources, instruments, analytical strategies and implications for epidemiological surveillance and road safety policies.

2 METHODS

This is a methodological development study, of a qualitative and applied nature, whose objective was to structure, describe and systematize the Psychosocial Traffic Autopsy as an integrated process of evaluation of signs of intentionality in traffic accidents with death. The study does not propose to estimate prevalences, but to develop an operational methodological framework, capable of being incorporated into the institutional practice of traffic agencies, public health and technical expertise.

The methodology developed is inspired by the assumptions of psychological and psychosocial autopsy, widely used in the investigation of suicides and ambiguous deaths, but substantially expands its scope by incorporating road, forensic and environmental and institutional variables, as well as by involving multiple sectors of the public power in the investigative and analytical process.

The construction of the methodology was based on three main references: (i) the classic and contemporary literature on psychological and psychosocial autopsy; (ii) international evidence on suicide in transport systems and difficulties in classifying deaths;

(iii) road safety and public health guidelines, including the principles of Vision Zero and epidemiological surveillance of external causes.

These references guided the definition of the analytical categories, the collection instruments and the criteria for inferring intentionality, ensuring conceptual coherence and practical applicability.

The methodology was organized as a sequential and cumulative process, composed of six interdependent macro steps:

1. Case identification and selection
2. Survey and integration of data sources
3. Retrospective psychosocial investigation
4. Technical-forensic and contextual analysis of the road
5. Cross-sector integration and inference session

Accidents with death that present, alone or together: (a) high-lethality collisions (e.g., frontal impact, single vehicle, run-overs on high-speed highways) are eligible for the application of the psychosocial traffic autopsy; (b) absence or inconsistency of evidence of evasive maneuver; (c) previous history of psychosocial risk or known psychological distress; (d) initial classification as an accident of undetermined cause; (e) recurrence of deaths on the same road section (critical point). The selection of cases can be carried out prospectively (continuous flow) or retrospectively (review of deaths already registered).

The methodology presupposes the integration of multiple sources of information, organized into four axes:

- Technical-forensic sources that include official expert reports (collision dynamics, estimated speed, braking marks, vehicle deformations); Reports from PRF, DETRAN and DNIT; Photographic records, monitoring videos and telemetry data, when available; Autopsy reports and toxicological examinations.
- Psychosocial sources include semi-structured interviews with family members, cohabitants, co-workers, and friends; History of stressful life events; Family relationships and social support network; Recent behavioral changes and verbalizations of farewell or hopelessness.
- Public health sources such as Mortality Information System (SIM) records; Clinical and mental health records; Notifications of violence and previous attempts.



- Contextual and environmental sources involving the road conditions (geometry, signaling, lighting, accident history); Characterization of the site as a potential critical point; Weather conditions and visibility at the time of the event.

The psychosocial investigation follows the principles of the classic psychosocial autopsy, using a validated semi-structured script, adapted to the traffic context. The following axes are explored:

- Life trajectory and recent psychosocial context;
- Mental health and substance use history;
- Previous, explicit or veiled suicidal ideation;
- Repeated risk behaviors;
- Meanings attributed to traffic and displacement.

The interviews are conducted by trained professionals, with an ethical and empathetic approach, prioritizing the triangulation of independent informants.

Parallel to the psychosocial investigation, a detailed analysis of the dynamics of the accident is carried out, including: Compatibility between the narrative of the event and physical evidence; Existence of road alternatives and opportunities for evasion; Choice of the place and time of the claim; Degree of predictability of lethality. This analysis allows the identification of recurring patterns of structural and behavioral risk.

The data are discussed in an intersectoral session, involving representatives of forensics, mental health, traffic and epidemiological surveillance. An inference matrix of intentionality is used, with graduated classification: Strong indications of intentionality; Moderate indications; Event without evidence of intentionality; Indeterminate (inconclusive data). Decisions are reasoned, documented and consensual, avoiding isolated individual judgments.

The process culminates in a technical-synthetic report of the case; Recommendations for updating official records; Indication of local preventive measures (engineering, inspection, psychosocial support); Institutional feedback to the agencies involved.

The methodology observes ethical principles of confidentiality, respect for families and responsible use of information. As it is an investigation with secondary data and retrospective interviews, its institutional application requires its own regulations and informed consent.



The Psychosocial Traffic Autopsy is distinguished by: broadening the scope of the traditional psychosocial autopsy; integrate technical, human and environmental dimensions; operate in an intersectoral manner; directly guide public policies and preventive interventions.

3 RESULTS

The methodological process of the Psychosocial Traffic Autopsy is organized in six sequential and integrated stages, as described below:

1. Identification of the accident with death: selection of eligible cases based on risk criteria (high lethality, undetermined cause, atypical patterns, recurrence in a given location).
2. Technical-forensic survey: collection and analysis of collision reports, autopsy, toxicological examinations, photographic records, videos and road data.
3. Retrospective psychosocial investigation: semi-structured interviews with key informants; reconstruction of psychosocial trajectory, mental health history, and stressful events.
4. Contextual and environmental analysis of the road: evaluation of the physical conditions of the site, history of accidents, structural characteristics and potential risk factors.
5. Intersectoral integration and inference session: collegiate discussion of data by a multiprofessional team; application of the inference matrix of intentionality.
6. Classification, registration and feedback: preparation of technical report; recommendations for updating official records and proposing preventive actions. It is expected that the development and systematization of psychosocial traffic autopsy will produce conceptual, methodological and operational advances in the evaluation of traffic accidents with death, especially with regard to the identification of signs of self-injurious intentionality.

On the methodological level, the main expected result is the consolidation of a structured, replicable and intersectoral process for retrospective investigation of traffic deaths, overcoming fragmented approaches focused exclusively on the physical dynamics of the accident. The application of the methodology should allow the systematic integration of technical-forensic data, psychosocial, epidemiological and contextual, expanding the analytical capacity of the institutions involved.



In terms of diagnosis, a better qualification of the intentionality of fatal events is expected, with a reduction in the proportion of deaths classified as "accidents of undetermined cause". The use of graded inference criteria (strong, moderate, absent or inconclusive evidence) should enable a more realistic reading of road mortality, without imposing dichotomous or simplified classifications.

At the epidemiological level, the methodology tends to contribute to the improvement of health and traffic information systems, especially through the qualification of records from the Mortality Information System (SIM) and institutional databases of highway agencies. The generation of more accurate data will allow more consistent temporal, spatial and population analyses, favoring the identification of recurrent patterns of psychosocial and structural risk.

In the preventive plan, it is expected that the findings produced by the psychosocial traffic autopsy will support more effective and targeted interventions, such as the prioritization of critical points for engineering, monitoring and signaling actions, as well as the development of psychosocial care protocols for vulnerable groups. By identifying human and contextual factors associated with fatal claims, the methodology expands the potential for primary and secondary prevention.

At the institutional and intersectoral level, it is expected to strengthen the articulation between traffic agencies, technical expertise, mental health and epidemiological surveillance. Conducting cross-sectoral analysis and consensus sessions tends to promote institutional learning, standardization of investigative practices, and strengthening a life-centered road safety culture.

Finally, at the political and strategic level, the adoption of psychosocial traffic autopsy can support the formulation of evidence-based public policies, aligned with the guidelines of Vision Zero, PNATRANS and the Sustainable Development Goals, contributing to the reduction of avoidable traffic deaths.

4 DISCUSSION

The results expected with the development of the Psychosocial Traffic Autopsy point to a substantial expansion of the analytical capacity of traffic death investigation systems, by incorporating traditionally neglected dimensions in models focused exclusively on the physical dynamics of the accident. The international literature has shown that the restricted interpretation of the event as an "accident" tends to hide subjective, emotional and

contextual factors that may be directly implicated in the occurrence of fatal collisions, especially those classified as having an undetermined cause (SELZER; PAYNE, 1962; SHNEIDMAN, 1973).

In this sense, the expectation of a reduction in the proportion of deaths classified as undetermined is supported by studies that have applied expanded investigation methodologies, such as psychological and psychosocial autopsy, in contexts of ambiguous deaths. Systematic reviews indicate that the inclusion of interviews with key informants and the retrospective reconstruction of the individual's life context significantly increase the identification of previously unrecognized indications of intentionality (ROZA et al., 2023; CRISĂN; BĂCILĂ; MORAR, 2022). By transposing this methodological framework to the field of traffic, the psychosocial autopsy of traffic tends to produce similar effects, qualifying the epidemiological reading of road mortality.

The integration between technical-forensic data and psychosocial information is one of the main advances expected from the methodology. Studies carried out in countries such as Australia and Sweden show that the isolated analysis of collision dynamics is insufficient to differentiate accidental events from potentially intentional occurrences, especially in scenarios of high lethality and absence of witnesses (TRANSPORT FOR NSW, 2020; PARACHUTE, 2023). The systematic incorporation of variables such as mental health history, stressful life events, and recurrent behavioral patterns broadens the understanding of the phenomenon and reduces interpretive biases.

On the epidemiological level, it is expected that the application of psychosocial traffic autopsy will contribute to the improvement of the surveillance of deaths from external causes, especially in the Mortality Information System. The World Health Organization highlights that the underreporting of intentionality compromises the formulation of effective public policies, by making specific segments of the population at risk invisible (WORLD HEALTH ORGANIZATION, 2023). By qualifying the records and reducing the overuse of the "undetermined cause" category, the methodology can generate more consistent and comparable databases over time.

Another relevant aspect of the expected results refers to the preventive potential of the methodology. International evidence indicates that structural and psychosocial interventions targeting critical points and vulnerable groups are more effective when based on integrated analyses of human behavior and the road environment (PIRKIS et al., 2013; RUNESON et al., 2025). By identifying recurrent patterns of risk — such as deliberate



choice of places of high lethality or absence of evasive maneuvers — the psychosocial traffic autopsy provides technical subsidies for engineering, signaling, inspection and psychosocial support actions.

From an institutional point of view, the expected results include the strengthening of intersectoral coordination between traffic, forensics, mental health and epidemiological surveillance agencies. The holding of collegiate integration and inference sessions promotes not only greater analytical rigor, but also organizational learning and standardization of practices, elements pointed out as essential for the sustainability of evidence-based road safety policies (WORLD HEALTH ORGANIZATION, 2023). This institutional arrangement contributes to overcoming the traditional fragmentation between sectors and to consolidating a systemic approach to the phenomenon.

Finally, the expectation that the methodology will contribute to the conceptual redefinition of traffic as a space of care and prevention is supported by the principles of Vision Zero, which recognizes that deaths in the transport system are neither acceptable nor inevitable. By revealing hidden dimensions of road mortality, psychosocial traffic autopsy challenges traditional paradigms and broadens the horizon of public policies, by integrating road safety and mental health in a perspective centered on the protection of life.

5 FINAL THOUGHTS

The development of the Psychosocial Traffic Autopsy, presented in this study, highlights the need to expand the traditional models of investigation of traffic deaths, incorporating psychosocial, contextual and institutional dimensions to the analysis of fatal accidents. By recognizing that part of these deaths may involve evidence of self-injurious intentionality, the proposed methodology contributes to overcoming the restrictive reading of the accident as an exclusively fortuitous event.

The expected results indicate that the application of this approach has the potential to qualify epidemiological surveillance, reduce underreporting of intentionality, and improve the classification of deaths from external causes. By integrating technical-forensic data, psychosocial interviews and analysis of the road environment, the psychosocial traffic autopsy offers a more comprehensive understanding of the factors that converge to the occurrence of fatal accidents, in line with international evidence and the recommendations of the World Health Organization.

In addition to its analytical value, the methodology has practical relevance in supporting more precise preventive interventions, either through engineering and signaling actions at critical points, or by identifying vulnerable groups that require psychosocial care strategies. The emphasis on intersectoral articulation strengthens institutional response capacity and promotes a road safety culture centered on the protection of life.

It is recognized, however, that the consolidation of the Psychosocial Traffic Autopsy requires investments in professional training, standardization of protocols and improvement of information systems. Future studies may empirically evaluate its application in different territorial contexts, contributing to the refinement of inference criteria and to the measurement of its impact on public policies. Even so, the methodology presents itself as a relevant conceptual and operational advance, by integrating road safety and mental health in a preventive, humanized and evidence-based perspective.

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