



Pima County Court Clinic

Superior Court Building

110 West Congress

Ninth Floor

Tucson, Arizona 85701

Carolyn Ford, A.C.S.W.

Director

May 1, 1990

Mr. R. Lamar Couser
Attorney At Law
Transamerica Building
Suite 805
177 North Church
Tucson, Arizona 85701

Re: Joseph Rudolph Wood, III
CR-28449

Dear Mr. Couser:

Pursuant to your request, I conducted a pre-Rule 11 evaluation of Joseph R. Wood on April 18, 1990 at the Pima County Jail. In addition to the clinical interview, Mr. Wood completed a Biographical Data Sheet and a competency screening measure, which were administered by Court Clinic clerical staff on April 13, 1990. Mr. Wood was informed of the nature and purpose of the evaluation, including the limits of confidentiality, and he appeared to understand this.

Collateral material was reviewed, which included the Pre-Rule 11 Referral Form; a letter from R. Lamar Couser to the Pima County Court Clinic dated 4/02/90; police reports regarding the alleged offense dated 8/07/89; supplementary police reports regarding the alleged offense, the defendant's behavior, and statements while in the hospital dated 8/07/89 through 8/22/89; and the Grand Jury transcript dated 8/15/89.

Joseph R. Wood presents as a rather stocky, muscular, thirty-one year old Caucasian male who was neatly groomed and dressed in jail clothing. He has several tattoos on his arms and shoulder. He was alert and well-oriented.

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He was cooperative with the evaluation and provided considerable background information. He did not demonstrate any symptoms of a major mental disorder, either of an affective or psychotic nature. He denied any disturbance in appetite, but described some difficulty sleeping, for which Sinequan, an antidepressant, has been prescribed. He stated that his sleep has improved. This is likely due to situational stress. Otherwise, mood and affect appeared normal. Rate and volume of speech were normal. He denied any current suicidal ideation. No peculiarities of posture, gait, or motor behavior were noted. In sum, Mr. Wood does not appear to presently suffer from any serious mental disorder.

Cognitive functioning appeared grossly intact, including attention, concentration, and memory. Mr. Wood was asked to remember three objects after an approximately fifteen minute period and was able to do so. He also was able to recall as many as five digits in a sequence, but his performance was inconsistent, suggesting some attentional difficulties. He had some difficulty with giving specific dates of historical events, but was able to estimate and put things in proper sequence. His ability to relate relevant information, both remote and more recent, suggests that his general memory functioning is intact. Spoken vocabulary, performance on written materials, and academic history are consistent with intellectual functioning in the average range.

Mr. Wood is a high school graduate and also spent six years in the Air Force after graduating from high school. He described some difficulties in school with reading comprehension, for which he got some special assistance. It was noted that he had some difficulty expressing himself verbally, in that he often hesitated, searched for words and did not speak fluidly, but was able to comprehend questions and communicate his thoughts nevertheless. This might be related to a possible learning disability. Mr. Wood has a history of substance abuse, beginning in his teen years. His father also has had an alcohol problem. He has had a severe drinking problem throughout most of his life. Sometime in 1984, he went through an alcohol treatment program. His drinking caused difficulties in his relationships and he recalled going into "violent rages" and destroying things when he was drinking. He indicated that all of the trouble he has gotten into has been alcohol-related. He goes into violent rages when he is not drunk, but can control himself at those times or remove himself from the situation. He reported frequent blackouts when intoxicated, but never any experiences of memory loss when enraged, unless he was also intoxicated. He also has a history of drug use, including cocaine and methamphetamines, particularly during the last two years.

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Mr. Wood gives some suicide history, stating that in 1983 he took a large number of pills after he had been drinking. He was feeling depressed at the time and was having problems with his wife. He was hospitalized subsequent to this attempt, but did not receive any follow-up mental health treatment. He also recalled, again in 1983, threatening to kill himself. He had locked himself in the bathroom with a razor, at his home. His parents called the police, who talked him out of it and then took him to the Veterans Administration Hospital. He stated there was no room, so he was not admitted.

Mr. Wood has had approximately four episodes of unconsciousness subsequent to head injuries, some of them after motorcycle accidents or fights. Most resulted in only a few minutes of unconsciousness, although once he was unconscious for approximately an hour. He was once hospitalized for a week for observation after a head injury. He stated that he did not notice any difficulties in his functioning subsequent to these injuries. He does report daily headaches since a 1981 motorcycle accident, but he stated that they result from a pinched nerve. He also stated that, since this last head injury in 1981, other people told him he had changed and become more moody, "going from calm to upset." He stated that he was never aware of this and had never associated it with the accident.

Competency:

Mr. Wood does not appear to suffer from any current mental condition which would preclude the requisite abilities for competency. In addition, he was able to discuss his case in a rational and coherent manner. He is aware of the charges against him and has a good appreciation for his legal circumstances. He has a "stack" of depositions and has read them, some of which he remembers better than others. He was aware of the consequences if convicted of the alleged offense and he appeared to have an understanding of the different charges which could be filed in the case of a homicide - for example, manslaughter, second degree murder and first degree murder. Thus, he appears to have an understanding of the nature and purpose of the proceedings against him.

Mr. Wood's ability to participate in this evaluation indicates that he should be able to assist counsel and communicate in a rational manner. The only possible issue in competency is his claimed lack of memory for the alleged offense, in that he is not able to relate to defense counsel an account of his mental state and actions during that period.

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It is my understanding that this does not necessarily preclude competency if sufficient information is available from other sources to reconstruct the alleged offense. This would be a legal and not a psychological determination.

M'Naghten Sanity:

The defendant claims a lack of memory for the period surrounding the alleged offense and could not provide an account of his thoughts, feelings, and behaviors in the significant period. Collateral material also does not provide much information from which one might infer mental state. Mr. Wood stated that in the month prior to the alleged offense, he was abusing alcohol on a nightly basis, "as much as I could." In the period preceding the alleged offense, he stated that he was "snorting" approximately a gram a day of speed, stating that both he and the victim were doing this on a daily basis. He stated that he used "a little" speed on Saturday morning, which had been left over from the night before. On Saturday, he did not recall being intoxicated. On Sunday, all he could recall was having two drinks and nothing else. From this period on, he stated that he recalls little. He did not recall thoughts about killing his ex-girlfriend. He denied being aware of any suicidal thoughts or feelings in the period or days prior to the alleged offense. In fact, although he acknowledged difficulties in his relationship with the victim, he stated that in the days prior to the alleged offense, things had been going much better. He stated that he last saw her on a Friday afternoon and she had told him she would see him the next day. He also recalled beginning to worry when he did not hear from her, specifically that something had happened to her, such as being put back in jail or getting into a fight with her family. He denied that he was concerned about her leaving him and stated "we'd gotten over that." He stated that he did not sleep much Saturday night, but slept a little on Sunday. He recalled going to talk to his girlfriend, Sherry, and telling her that he was worried. He went back to his apartment, went for a walk around the neighborhood, and then went back to Sherry's house. He recalled that he could not sit still and, again, was quite concerned about Debbie. He also recalled going by the automotive shop and seeing her car parked inside the fence, which increased his alarm that something might have happened to her. He stated that he could not call her family to see if she was alright and he felt "totally helpless." From then on, things are a "blur." He recalls only bits and pieces, which include going to Sherry's house for a third time and having his gun with him, which he always carried.

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He did not know how long he stayed there. He recalled being too upset to eat. He denied feeling intoxicated. He remembered leaving Sherry's house when it was dark, but could not recall where he went. He next remembers lying on the ground after being shot.

Collateral material contains some information, but not much. A number of police reports indicate the defendant to be confused about what had happened and unable to remember what he had done. There are other brief reports where the defendant apparently told individuals that he had killed his girlfriend, although it is unclear whether he had already been told what he had done by that time. He also has told individuals that he reached for his gun so that he would be shot by police, suggesting that he wanted to be killed. One police officer reportedly overheard him state to his father, "I knew I shot him, but I didn't know I killed him." Thus, there is some question as to whether the defendant really remembers the alleged incident, or at least more of it than he has indicated to this evaluator.

None of these data clarify his thought processes at the time or his specific intentions or motivations. It is unlikely that he was psychotic, in that he has no history of psychosis and Sherry, who saw him in a distraught state prior to the alleged offense, did not observe psychosis, but rather "sweating and crying." There is evidence to suggest that he may have been suicidal at the time that he was shot, although it is unclear whether he was suicidal at the time he shot the victims. It is possible that suicidal feelings were present at the time of the alleged offense, but they also could have been a reaction to it. He does have a prior suicide attempt, having been intoxicated at that time.

Mr. Wood does not recall being intoxicated immediately prior to the alleged offense, although this would not preclude such a possibility. Any toxicology results are unknown, such as blood alcohol level. Obviously, if his behavior is a direct result of alcohol intoxication, M'Naghten insanity is precluded. He does describe difficulties controlling a violent temper when intoxicated. Defense counsel raises the possibility of a dissociative state. While this was considered, it appears unlikely. Certain personality types are prone to dissociate episodes. Mr. Wood gives no history of difficulties remembering, either during painful events or while angry or distressed. His only history consists of alcoholic blackouts. He does report some difficulty recalling events in his younger days, but these include both good and bad events and do not appear characteristic of dissociation.

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It is possible that his memory loss is due to psychological factors rather than an alcoholic blackout, meaning that he has suppressed the painful memory. This would not mean that he was unaware of his actions at the time of them, however. While it is possible that he had a dissociative episode during the period of the alleged offense, there is simply no information available by which one might confirm this.

Regarding concerns about organic impairment, with his head injuries and extensive alcohol and drug abuse, it would not be surprising for Mr. Wood to have some organic impairment. However, he does not appear to have any serious cognitive deficiencies and any impairment is likely to be mild. There is no evidence of cognitive impairment to a degree which would preclude him from being aware of and understanding his own behavior. There is a possibility that his head injury in 1981 affected his emotional functioning - the personality change he referred to. This is not an uncommon phenomenon with head injuries. It is possible that a past head injury may have increased his emotional lability. He has stated that, even though he gets upset, as long as he is not intoxicated, he is able to cope with this emotional arousal. Thus, even if a head injury led to increased lability, it appears likely that the alcohol intoxication is what impairs his self-control, rather than the head injury. The best way to document the possible emotional effects of such a head injury would be to interview those who have known him both prior and subsequent to that injury and to obtain their observations about his behavior. More in-depth neuropsychological and neurological assessment could be conducted, although even if they showed some deficiencies, it is unlikely that they would be sufficient to preclude his being aware of his own behavior. They might provide some information which could be mitigating, however.

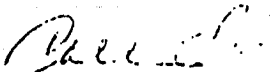
Conclusions:

The defendant appears presently competent to stand trial, but issues of his mental state at the time of the alleged offense should be more fully explored via formal Rule 11 evaluation.

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If there are any additional questions, please do not
hesitate to contact me.

Respectfully submitted,


Catherine L. Boyer, Ph.D.
Clinical Psychologist

CLB/hrm