



Psychiatry & Behavioral Science Section – 2010

I8 Evidence-Based Forensic Psychiatry

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By attending this presentation, attendees will have a better understanding of the importance of the scientific method in forensic psychiatry, will recognize that it is essential to seek to videotape examinations, and will learn the value of transparency and consultation for improving the standards of the discipline.

This presentation will impact the forensic science community by combating incompetence, dishonesty, and distortion in forensic psychiatry.

The most important tools for ridding forensic psychiatry and psychology of incompetence, dishonesty, and distortion are: (1) the application of the scientific method in the collection, analysis, interpretation, and presentation of data and in the cross-examination of opinion; and, (2) improvements in the transparency of evaluations and reasoning and in the use of consultation to guard against confirmation bias.

Forensic psychiatry and psychology are branches of the forensic sciences, which, like other sciences, require objective observation, measurement, and reproducible results. Videotaping of examinations has been a practical option for 30 years, during which time no example has arisen of videotaping having harmed the search for truth. Yet even today there are those who conduct unrecorded examinations, concealing from scrutiny their examination technique, the utterances of the examinee, and any "evidence-tampering" that may have occurred through the use of suggestive or leading questions, the sharing of investigative information or witness statements, coaching on the relevant legal standards, or coaching on the symptoms of a particular diagnosis. Without verbatim recording, subsequent examiners and the trier of fact have only the selective reporting of the examiner on which to judge what

transpired and how the evaluatee or the evaluatee's story may have changed as a result of the examination.

The need for forensic mental health professionals to contribute to the collection and preservation of evidence during investigations and to base their analysis, interpretation, and presentation of evidence in both reports and testimony on reliable and valid observations, properly recorded, with reference to the applicable scientific literature will be addressed. This requires a different method of interviewing and a higher standard of practice than clinical diagnosis or opinion formation because of the higher incentives for malingering, distortion of facts, and concealment of evidence and motives.

Forensic mental health professionals are as susceptible to confirmation bias as other forensic scientists and can take steps to address this universal phenomenon by greater transparency in the evaluative and analytic processes and through more frequent use of consultation.

Forensic Psychiatry, Evidence, Videotaping