



Psychiatry & Behavioral Sciences Section – 2011

I17 Forensic Psychiatry in Japan: Personal Observations

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After attending this presentation, attendees will have learned about Japanese forensic psychiatry.

This presentation will impact the forensic science community by fostering cross-cultural understanding between forensic psychiatrists in Japan and the United States.

On November 18, 2009, upon arriving at Narita Airport in Tokyo, this author was met by the host for the visit to Japan, Dr. Saburo Matsubara, and by Ms. K. Ota, a counseling psychologist, who functioned as a personal guide and interpreter.

During the visit, this author toured and spoke at several centers. These included the National Center of Psychiatry and Neurology where the physical facilities were impressive: they were modern and were designed to match the clinical progress of the patients from initial admission. The staff was multidisciplinary (psychiatrists, counseling psychologists, social workers, nurses, and activities therapists) and functioned as a team for the on-going evaluation and treatment of each of the patients. The visit to the Centre for Forensic Mental Health at Chiba University will be discussed where the presentation on "Legal Regulation of Psychiatry and Forensic Psychiatry: Clarifying Categories for Clinicians" was made. The members of the audience asked relevant questions regarding the mental health laws in the USA as compared and contrasted with those in Japan. After the formal presentation, there was an elegant traditional Japanese dinner, where informal professional discussions were continued.

Next, this author had the privilege of speaking to an astute audience at the Workshop Program on Forensic/Criminal Psychiatric Examination at the National Center of Sciences.

At the Okayama Psychiatric Medical Center, among the medical professionals present were: (1) Toyoji Nakashima, MD, Chief Executive Officer and Director of the Okayama Psychiatric Medical Center, President of the Japanese Society of Forensic Mental Health, and Vice- President of the Japan Municipal Hospital Association; and (2) Yoshiki Kishi, MD. The forensic psychiatry facilities was toured as well as the facilities for the treatment of adolescents, substance abusers, and "difficult-to-treat" patients. The facilities were modern and were adapted to the clinical needs of the patients. For example, the adolescent facilities housed fewer patients than the adult facilities, so that the adolescents would have more room for their activities. The forensic psychiatry facilities demonstrated four different types of accommodations, each of which was designed to meet the needs of the patients as they progressed from initial admission through the subsequent stages of treatment. This author met with the staff in two separate conferences. Among the issues that were considered were dual- diagnosis cases (for example, persons who had both mental illness and substance abuse problems), the care and management of persons with Asperger's Syndrome, and problems in the treatment of persons with Personality Disorders (for example, serial sex offenders).

Overall, the visit provided a valuable opportunity to learn about forensic psychiatry in Japan. The goal is to engage in on-going communication with colleagues in Japan regarding the practice of forensic psychiatry in Japan and in the United States of America. It was a richly rewarding professional experience.

Japanese, Forensic Psychiatry, Japanese Mental Health Law