

I27 Impartiality and Forensic Psychiatry: How Forensic Psychiatry Specialists Consider the Concept of Impartiality

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The goal of this presentation is to determine knowledge and representation regarding impartiality and which factors could change this.

This presentation will impact the forensic science community by increasing knowledge of the factors that influence impartiality.

Introduction: When it comes to justice, an expert psychiatrist has a different role than a therapist. In the first case, the psychiatrist works only when asked by authorities to testify. Impartiality is a priority for the expert psychiatrist.¹ This survey was initiated to better understand how forensic psychiatry specialists consider the concept of impartiality and also asks which factors can influence impartiality.

Material and Methods: An online survey was created that included a clinical case, some general issues about impartiality, and questions on personal and professional specifications relating to the persons who answered. This survey was sent to psychiatrist members of the World Psychiatrist Association of the European Psychiatric Association and of the American Association of Forensic Psychiatry.

Results: One hundred thirty-one psychiatrists from 18 countries (66% from the United States) participated in this survey with a rate of 94.5% answers (103-131 answers by question). The sample consisted of 74% men and 94.5% of graduate psychiatrists. The average age was 53.4 years and the average forensic psychiatry experience was 18.3 years. More than 80% of the sample had an additional forensic psychiatry certification. In the clinical case, personal convictions were identified as a factor that called into question their impartiality in 80% of the cases. Impartiality pertains primarily to ethics and legal topics, according to the survey. The most important factors that influenced personal impartiality were: (1) being the treating psychiatrist of the assessed person in the past (97%); (2) personal past experiences (92%); and, (3) personal convictions (90%). The most frequent factors that strengthened personal impartiality were: (1) forensic psychiatric training (94%); and, (2) professional past experiences (77%). The most important factors that question legal impartiality were: (1) already being the treating psychiatrist of the assessed person in the past (93%); (2) personal convictions (78%); and, (3) already having performed a psychiatric assessment on the person (70%). Comparisons reveal very few differences between answers provided by men and women, the doctor's age had an influence on the factors questioning legal impartiality, and there were very few differences between the experienced psychiatrists and those who did not have a lot of experience. It was noted that the choice of factors that strengthen and call impartiality into question were influenced by the psychiatrists' work countries. Finally, the survey compared the different types of forensic psychiatric training. Results reveal that psychiatrists trained in forensic psychiatry within a general psychiatry program feel that personal convictions and being the treating psychiatrist for the assessed person in the past strengthen impartiality. Psychiatrists with additional training in forensic psychiatry consider impartiality more as an ethical notion and that additional training in forensic psychiatry strengthens impartiality. Psychiatrists who were supervised during their assessment consider that the fact that they have already completed a psychiatric assessment affects impartiality — that this could also question it and that professional past experience calls impartiality into question.

Conclusion: The psychiatrists sampled have a good knowledge of impartiality. The principal factors they identified as being able to affect, strengthen, and call into question are the same factors mentioned in scientific articles and international recommendations.² The high participation rate of American psychiatrists could be explained by a large diversity of organizations and the recognition of forensic psychiatry in European countries. As expected, having additional training in forensic psychiatry did not change the perception of impartiality. Moreover, years of experience in forensic psychiatry had a small influence on the answers, whereas psychiatrists older than 65 years of age were most likely to identify some factors that call impartiality into question.

Reference(s):

- ^{1.} ABDA-FILHO. Objectivity and subjectivity in forensic psychiatry. *Revista Brasilieira de Psiquiatria*. 35 (2013):113-114
- 2. American Association of Psychiatry and Law. *Ethics Guidelines for the Practice of Forensic Psychiatry*. Adopted May, 2005. http://www.aapl.org/ethics-guidelines.

Impartiality, Forensic Psychiatry, Psychiatric Assessment