

Survey of Teaching Programs in Law and Psychiatry

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How important is the teaching of forensic psychiatry in medical school curricula and in psychiatric residency training programs? Of the ninety-one university medical centers that received a questionnaire dealing with this problem early in 1973, eighty-three answered—and their answers affirm the growing significance of forensic psychiatry, or social-legal psychiatry, in the curricula of our medical schools. For example, eighty-one per cent of the schools polled have scheduled interdisciplinary teaching programs in psychiatry and law for students, interns or residents. Ninety per cent of these have had ongoing programs for five years, while six per cent said they would be initiating such programs in the fall of 1973. While nineteen per cent had no program in forensic psychiatry, all but one of these expressed interest both in starting such a program and in meeting with other teachers of forensic psychiatry. As an indication of growing interest in the field, twenty-two per cent sent detailed information about their programs beyond that asked for in the questionnaire.

This questionnaire is the first phase of a three-pronged study in progress. Phase II has already brought forensic psychiatrists and teachers together to discuss mutual programming problems, and should lead to a more intensely interdisciplinary and multidisciplinary approach to the teaching of forensic psychiatry. Phase III will develop a manual to detail the approaches of the more comprehensive programs in this field and alert psychiatric residents to the centers and medical schools that provide training in this widely expanding field.

In the first survey of this type, recorded in 1956, Stoller received replies from sixty-seven per cent of the eighty-seven medical schools he contacted.¹ Eight years later, Barr and Suarez prepared a more comprehensive survey of both law schools and medical schools.² Of the eighty-six university medical centers contacted, seventy-two (84%) replied. Others have assessed the teaching of psychiatry at the nation's law schools.³

The current study began with the questionnaire sent to ninety-one medical schools in the country. The initial response was encouraging. Sixty-one (67%) of the questionnaires were returned after the first mailing. A second letter of request resulted in the return of twenty-two more, totalling eighty-three responses (91%).

In the second phase of the current study, the present authors invited interested teachers of legal psychiatry in the nation's medical schools to a conference devoted primarily to the teaching of legal psychiatry to medical students and psychiatric residents. This interest grew out of the original plan of the American Academy of Psychiatry and the Law, which was formed in 1969 to promote the teaching of legal

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psychiatry in medical schools and psychiatric residency programs, and to stimulate post-residency fellowship training in the field. This paper will report on the results of Phase I, or the survey of training, and a subsequent paper will review the proceedings of the conference, held in the fall of 1973.

Results:

Eighty-one per cent of the respondents indicated that they offered or were about to offer interdisciplinary teaching programs in psychiatry and law for students, interns or residents. Ninety-one per cent of those have offered such programs for the past five years, and six per cent indicated they would be starting such a program in the fall of 1973. While nineteen per cent indicated they had no program in forensic psychiatry, all but one of these were interested both in starting such a program and in meeting with other teachers of forensic psychiatry. Twenty-two per cent sent detailed information about their programs beyond what was covered on the questionnaire.

Table I illustrates the various methods of teaching this material and the extent of their utilization. Four respondents checked all eight methods of teaching, and three checked seven.

TABLE I

<i>Method</i>	<i>Number of Respondents</i>	<i>Per cent of Respondents</i>
Lectures	53	64
Discussions	48	58
Seminars	46	55
Field Trips	31	37
Case Histories	26	31
Panels	18	22
Films	16	19
Video-tape	9	11

While it is significant to note that thirty-one of the schools have field trips to various institutions involved in law and psychiatry, this table reveals that more work is needed in the practical approach, rather than in lectures, discussions and seminars.

Table II shows the kinds of teachers who present the courses:

TABLE II

<i>Teacher</i>	<i>Number of Responses</i>	<i>Per cent of Respondents</i>
Psychiatrists	45	54
Forensic Psychiatrists	41	49
Law Professors	34	41
Attorneys	28	34
Judges	16	19
Physicians	9	11
Anthropologist	1	1
Professor of Social Work	1	1
Psychologist	1	1

The distinction between psychiatrists and forensic psychiatrists was made by all, and most of the schools schedule cooperative teaching among law professors, lawyers, judges and psychiatrists. Two respondents say they use teachers from all six fields. Thirty-nine (47%) schools include a forensic psychiatrist on their staff; all those named are members of the American Academy of Psychiatry and the Law.

Respondents were asked to check if their programs included material in sixteen areas in law and psychiatry. Table III reveals the frequency of the type of material taught:

TABLE III

<i>Subject</i>	<i>Number</i>	<i>Subject</i>	<i>Number</i>
Criminal Responsibility	59	Right to Treatment	41
Commitment Procedures	59	Malpractice	36
Competency	57	Child Custody	36
Expert Psychiatric Testimony	52	Juvenile Delinquency	35
Drug Abuse	51	Domestic Relations	33
Sex Offenders	50	Civil Rights	30
Privilege and Confidentiality	48	Personal Injury	23
Patients' Rights	47	Workmen's Compensation	19

This table reveals that over half of the respondents' programs include traditional areas of criminal responsibility, sex offenders, drug abuse, competency, commitment and expert testimony. One-third to one-half of the programs present civil questions such as child custody, domestic relations, civil rights, juvenile delinquency, malpractice considerations and right to treatment. About one-quarter of the programs present torts or personal injury and workmen's compensation. Twelve respondents (14%) checked all sixteen areas of teaching.

Two questions, concerned with how much student contact time was devoted to the presentation of this material, have been eliminated from the final tabulation because of faulty wording. The authors hoped to tabulate semester hours or weekly hours in terms of lecture time and patient contact time.

The question regarding textbooks used in the courses revealed that sixteen different books were named; the most frequently used textbook was Davidson's *Forensic Psychiatry*.⁴ Other books receiving more than one response were: Fredman and Kaplan, *Comprehensive Textbook of Psychiatry*;⁵ Robitscher, *Pursuit of Agreement: Psychiatry and Law*;⁶ Allen, Ferster and Rubin, *Readings in Law and Psychiatry*.⁷

The next series of questions involved the relationship between the medical school and law schools and between the medical school and correctional institutions, court clinics and state mental hospitals. Forty (48%) responded that there was a law school affiliated with the university and that the courses given were usually entitled Law and Psychiatry, Forensic Psychiatry, Law and Medicine, or Seminars, Research Conference or Electives in Psychiatry and Law. There was, however, little or no contact or interaction between law schools and medical students in most of the programs. Table IV reveals the responses to the relationship between the medical schools and community institutions.

Twenty-five per cent said they provide both evaluation and treatment at correctional institutions, whereas fourteen per cent provide evaluation alone.

Five institutions said that they train post-residency fellows in forensic psychiatry. A total of twelve fellows are currently in training, seven of them at the University of Southern California. UCLA has two fellows; Temple University, Iowa University and University of Pennsylvania each has one.

TABLE IV

<i>Institution</i>	<i>Number of Responses</i>	<i>Per cent of Respondents</i>
Law school affiliation	40	48
Correctional institution	38	46
Court clinic	40	48
State mental hospital	50	60

Thirty-seven per cent of the respondents indicate that a lawyer is associated with the department for consultation purposes. Table V indicates the extent that the students participate in:

TABLE V

	<i>No.</i>	<i>Per cent of Respondents</i>
A—Commitment hearings		
Little	40	48
Much	18	22
None	7	8
B—Court clinic procedures		
Little	27	32
Much	17	20
None	9	10
C—Preparing testimony		
Little	21	25
Much	11	13
None	11	13
D—Testifying at hearings		
Little	33	40
Much	11	13
None	7	8
E—Consulting with Attorneys and/or Judges		
Little	34	41
Much	14	16
None	8	10

It should be noted that those checking "much" are the same programs that have comprehensive teaching and training programs in forensic psychiatry.

Asked whether the teachers felt their programs in forensic psychiatry were adequate, twenty-five per cent replied affirmatively, sixty-six per cent negatively, and seven per cent no response. When asked how the training could be improved, thirty different methods were suggested. The most common included:

- Increased participation with law schools and lawyers,
- expansion of clinical services and teaching material,
- more formal structure,
- more hours in the curriculum,
- additional personnel,
- more teaching experience,
- more exposure to court appearances.

Some respondents indicated that they would like to improve their programs by using more time, personnel and money, which were not available. Other respondents said they would like to establish a closer relationship with law schools and courts.

Asked whether they were interested in learning of programs in psychiatry currently presented in other schools of medicine, a question leading to Phase II of this program, ninety per cent replied affirmatively. Eighty per cent said they would like to participate in a year-end conference on forensic psychiatry, and listed a total of fifty persons who would be likely to attend such a meeting.

What are the needs of education in forensic psychiatry, as indicated by answers to this questionnaire?

- First, very few postgraduate or post-residency fellows are currently being trained, although forensic psychiatrists are now being identified as such, rather than as general psychiatrists who have an interest in the law.
- Second, there is a need for a standard text of forensic psychiatry that can be more widely used in training and teaching legal psychiatry. While Davidson's *Forensic Psychiatry* is used in seven of the schools, most indicate the use of informal notes and case materials, rather than a standard text.
- Third, while it is encouraging to note that a growing amount of field work is provided as part of the teaching programs, even more such work seems desirable. Medical schools and departments of psychiatry are affiliated with the law schools, law professors, correctional institutions, court clinics and state hospitals where field work occurs.
- Fourth, the need exists for increasing contact with other disciplines to provide multidisciplinary teaching in this field.
- Fifth, the need also exists for an increase in the amount of teaching of civil law and psychiatry with less of a focus on the criminal aspects.

In a previous paper (RLS⁸), the fact was noted that much forensic-psychiatric training was offered in criminal law and psychiatry because funding was available for such affiliation. A number of areas of legal psychiatry, however, are neglected or overlooked in most of the programs and yet form an important part of the practice of general psychiatrists. It is likely that the general psychiatrist will more often be involved in a domestic relations problem or in a personal injury situation with emotional overtones rather than in a criminal-legal situation.

A number of medical school teachers regard their program as inadequate in forensic psychiatry, but are hard pressed to offer more to their students and residents because of realities of budgeting and time scheduling. Forensic psychiatry is still seen as a highly specialized area which, in many schools, does not warrant much teaching time or exposure, and is offered primarily as an elective.

Phase I of this program has been a survey to stimulate the thinking and alert the teachers of forensic psychiatry to the importance of getting together and improving the situation as much as possible. Phase II will go a step further and bring together forensic psychiatrists and teachers to discuss program modifications among themselves and to help teachers with smaller programs develop more thoroughly coordinated programs. One might hope that the result will be to replace a few lectures by a psychiatrist with an interdisciplinary and multidisciplinary approach. Increasing their field experience to various institutions and programs in the community will also help alert general psychiatric residents and medical students to the expansive nature of forensic psychiatry and its application in a number of community, social and general psychiatric areas.

Phase III will be the development of a manual detailing the approaches of a number of the more comprehensive programs, along with the results of this survey, in order to provide information and data to those schools wishing to expand their programs, and

also to alert psychiatric resident applicants to the centers and medical schools that provide training in forensic psychiatry.

Summary:

Results of a questionnaire to ninety-one medical schools have been presented in tabular form with discussion of the kinds of programs available in forensic psychiatry, the extent and quality of the teaching and the requirements for further improvement. Follow-up conferences are planned to continue to improve and expand the teaching of law and psychiatry for medical students and psychiatric residents, as well as to encourage the development of post-residency fellowship programs for those interested in more comprehensive training in forensic psychiatry.

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