Commentary: Forensic Psychiatry— Can Its Pursuit of the Truth be Color-Blind?

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Dr. Hicks¹ has made an important contribution to forensic psychiatry in an area of scholarly and clinical endeavor where discourse among psychiatry, culture, and the law must ultimately converge. His article ranks as one of most comprehensive statements published thus far in this area in the Journal of the American Academy of Psychiatry and the Law or its predecessor, the Bulletin of the American Academy of Psychiatry and the Law. This article should prove a valuable introduction to those interested in acquiring an understanding of our current state of knowledge regarding the intersection of culture, psychiatry, and the law. But most important, the article introduces a number of areas of fundamental importance, both theoretical and practical, in the emerging field of cultural forensic psychiatry.^{2,3}

The article deals with three important areas about which I intend to provide further discussion and clarification. With regard to genetics and race, Dr. Hicks states, "Genetic studies have called into question the validity of the concept of race. The average genetic variation between individuals of the same race is as great as any genetic variation between racial groups" and concludes, "In light of such evidence, it would be unwise to presume much about an individual's genetic make-up based on racial appearance." However, the impact of recent genetic research on our understanding of race is considerably more complex than the article suggests. Although it is likely that factors associated with physical appearance linked to race would involve a small set of genes, there is indeed a controversy among experts regarding the im-

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pact that information originating from the human genome project and related enterprises⁸ may have on future biomedical research and clinical practice with relation to race, ethnicity, and culture.^{4–12} Gonzalez Burchard and his colleagues highlight one aspect of this controversy when they state:

In the United States, race and ethnic background have been used as cause for discrimination, prejudice, marginalization, and even subjugation. Excessive focus on racial or ethnic differences runs the risk of undervaluing the great diversity that exists among persons within groups. However, this risk needs to be weighed against the fact that in epidemiologic and clinical research, racial and ethnic categories are useful for generating and exploring hypotheses about environmental and genetic risk factors, as well as interactions between risk factors, for important medical outcomes [Ref. 10, p 1171].

While I tend to agree that the risk for most common diseases is not likely to be closely linked to raceassociated gene variants, 11 ruling out some of these potential contributions must await future research. For example, an association between increased risk for Alzheimer's disease and the presence of a variant of the APOE gene has been proposed. The gene appears to be present in frequencies of 9 to 19 percent, depending on race, as discussed by Gonzalez Burchard and his colleagues, 10 and may be an example of such a race-correlated gene variant. Biological information may become increasingly valuable to forensic psychiatry, especially as the architecture of relevant psychiatric taxonomies such as psychopathy, violent behavior, stress-induced disorders, and paraphilic pathologies become increasingly clarified from both psychobiological and psychosociocultural perspectives and are integrated in psychiatric diagnostic guides such as DSM-V. 13-15

Most important, even if folk notions about race are eventually determined to depend on a small number of genes, it is likely that race determining exophenotypes (i.e., skin color, hair texture), will continue to be inextricably and decisively associated with much of human conduct with regard to race. In all likelihood, it is within this wondrous, complex, and oftentimes dangerous web of mimetic networks that humanity will continue to chart its course in the foreseeable future. Therefore, a major reason for preserving race and related concepts at the forefront of the universe of discourse within forensic psychiatry lies in a host of biopsychosociocultural considerations that have more to do with racism than with race itself.

Given that categorization of human beings on the basis of poorly defined notions such as race is not likely to disappear in the foreseeable future either from lay discussion or scholarly discourse, we may find a greater measure of success in delineating some of the neurobiological bases of commonly held notions about race, including racism, as opposed to race itself. From this viewpoint the myth of race may well be partially mapped with the aid of brain scan technology, serving as a deep but humbling reminder that the biological bases of our folk cognitions about race may be as real as the neurobiological structures that subserve them. ^{16–19}

But far more important, cultural forensic psychiatry may benefit substantially from the lessons of history, because they inform us that the consequences of relying on folk knowledge, have been far reaching and not infrequently destructive to socially disenfranchised people who are identified as racially, ethnically, or culturally different from those in power. 6-7,20 Most recently, some social critics and politicians have advocated a "color-blind approach" as a way to help prevent our maladaptive and oftentimes unfounded reliance on racial, ethnic, and cultural stereotypes and prejudices. From this perspective, they would prohibit racial classifications in government organizations, a view that was prominently represented in the recently defeated Racial Privacy Initiative in California. 12,21 Although some may find it attractive to remove considerations about race, with regard both to its biological and psychosociocultural underpinnings from the mainstream of psychiatric-legal discourse, such a time, given the present state of humanity, has not arrived. In this regard, Dr. Hicks is very much aware of the impossibility of color-blindness in our present historical moment and acknowledges psychiatry's challenges with making itself culturally relevant, and his article provides us with a valuable overview about several important psychiatric-legal issues associated with this problem.¹

A second aspect of Dr. Hicks' article that deserves more discussion involves the role of the forensic psychiatrist. He framed the significance of ethnicity within forensic psychiatry as a function of advocacy, ethical imperatives, political expedience, and the search for truth and concludes that the views of leading contemporaneous psychiatrists such as Paul Appelbaum²² and Ezra Griffith²⁰ find a common ground, because ultimately they share the conviction that forensic psychiatry must define itself by the pursuit of the truth.¹

However, while few may argue that the pursuit of the truth may be the only reasonable approach for a field of scientific endeavor, we should take note that accomplishing this ideal has often been fraught with false starts, treacherous roads, and good, but nonetheless unrealistic, intentions. Indeed, it may well be worthwhile to consider exactly which truth falls within reach of the lens of forensic psychiatry. Are we talking about the truth championed by the ivorytower professor of forensic psychiatry, the truth sought by the mainstream forensic psychiatric specialist, or the truth believed by the myriad of socially disenfranchised individuals who find themselves navigating the tumultuous and oftentimes uncertain environments of our legal system? Philosopher Michel Foucault addressed this very question and concluded that the nature of "the truth" is a function of the power structures intrinsic to institutions and areas of knowledge such as forensic psychiatry. To put it more clearly, what the truth is, who tells it, and how it is told, constitute the privilege of the select few who represent those power structures.²³ Therefore, Griffith's critique²⁰ is not just another retelling or celebration of the ethics of truth-telling. Rather, he invites us to engage in a broader and I think more valid exploration of issues of fundamental importance to contemporary forensic psychiatry by adopting a multifaceted psychiatric lens informed by cultural, historical, and political knowledge, an approach that I find well suited to the challenges of our times.

My third comment involves the concept of otherness—that is, the sense and conviction that human

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beings as persons can be and often are different and that these are key considerations in psychiatric, legal, and anthropological discourse. It may be well worth emphasizing that the study of otherness is a central point of convergence in psychiatric, legal, and anthropological thought. Nonetheless, both psychiatry and criminal law direct their inquiries about the person away from the norm by focusing on psychiatric, legal, and/or criminological categories. However, the study of culture, ethnicity, and race, most prominently views otherness as a complex set of nonpathologic or noncriminologic alternatives for defining the person. From this perspective, our understanding about differences and deviance can become more problematic and even elusive. Therefore, I find it compelling to say that fundamental differences between forensic and cultural psychiatry with regard to their views of and focus on persons are likely to become a source of considerable tension between them.

From this perspective, the challenge of the emerging field of cultural forensic psychiatry is to question some of our most cherished notions about truth and ethics that we entertain as forensic psychiatrists. However, we should also view those potential challenges as decisive opportunities for professionals within forensic and cultural psychiatry to engage in invigorating discourse regarding issues of fundamental and even defining importance to both areas of inquiry. And I am optimistic that the cross-fertilization of the two will help us come to terms with seemingly straightforward ideas, such as what we mean as forensic psychiatrists when we search for the "truth."

References

- 1. Hicks JW: Ethnicity, race, and forensic psychiatry: are we colorblind? J Am Acad Psychiatry Law 32:21–33, 2004
- Silva JA, Leong GB, Yamamoto J, et al: A transcultural forensic psychiatric perspective of a mother who killed her children. Am J Forensic Psychiatry 18:339–58, 1997
- Silva JA, Leong GB, Dassori A, et al: A biopsychosociocultural approach for the evaluation of parents who kill their children. J Forensic Sci 18:339–58, 1998
- 4. Cavalli-Sforza LL, Menozzi P, Piazza A: The History and Geog-

- raphy of Human Genes. Princeton, NJ: Princeton University Press, 1994
- Cavalli-Sforza LL: Genes, Peoples, and Languages. Berkeley, CA: University of California Press, 2000
- Andrews LB: Future Perfect: Confronting Decisions about Genetics. New York: Columbia University Press, 2001
- Marks J: What it Means to be 98% Chimpanzee: Apes, People, and Their Genes. Berkeley, CA: University of California Press, 2002
- 8. Olson S: The genetic archaeology of race. Atlantic Monthly 287: 69–80, 2001
- Phimister EG: Medicine and the racial divide. N Engl J Med 348:1081–2, 2003
- Gonzalez Burchard E, Ziv E, Coyle N, et al: The importance of race and ethnic background in biomedical research and clinical practice. N Engl J Med 348:1170-5, 2003
- Cooper RS, Kaufman JS, Ward R: Race and genomics. N Engl J Med 348:1166–70, 2003
- 12. Holden C: Race and medicine. Science 302:594-6, 2003
- Charney DS, Barlow DH, Botteron K, et al: Neuroscience research agenda to guide development of a pathophysiologically based classification system, in A Research Agenda for DSM-V. Edited by Kupfer DJ, First MB, Regier DA. Washington, DC: American Psychiatric Press Inc., 2002, pp 31–83
- 14. Alarcon RD, Bell CC, Kirmayer LJ, et al: Beyond the funhouse mirrors: research agenda on culture and psychiatric diagnosis, in A Research Agenda for DSM-V. Edited by Kupfer DJ, First MB, Regier DA. Washington, DC: American Psychiatric Press Inc., 2002, pp 219–81
- 15. Helmuth L: In sickness or in health. Science 302:808-10, 2003
- Phelps EA: Faces and races in the brain. Nat Neurosci 4:775–6, 2001
- 17. Golby A, Gabrieli JDE, Chiao JY, *et al*: Differential responses in the fusiform region to same-race and other-race faces. Nat Neurosci 4:845–50, 2001
- Kurzban R, Tooby J, Cosmides L: Can race be erased? Coalitional computation and social categorization. Proc Natl Acad Sci USA 98:15387–92, 2001
- Richeson JA, Shelton JN: When prejudice does not pay: effects on interracial contact on executive function. Psychol Sci 14:287–90, 2003
- Griffith EEH: Ethics in forensic psychiatry: a cultural response to Stone and Appelbaum. J Am Acad Psychiatry Law 26:171–84, 1998
- Barlow A, Duster T: Racial privacy initiative: an invitation to racial discrimination. San Francisco Chronicle. May 10, 2002, pp 3A
- Appelbaum PS: A theory of forensic psychiatry. J Am Acad Psychiatry Law 25:233–47, 1997
- Foucault M: The dangerous individual. In: Michel Foucault: Politics, Philosophy, Culture, Interviews and Other Writings 1977–1984. Edited by Kritzman LD. New York: Routledge, 1988