

# Diane Heiskell Schetky, MD: A Renaissance Woman

Elissa P. Benedek, MD

*J Am Acad Psychiatry Law* 51:167–72, 2023. DOI:10.29158/JAAPL.230010-23

**Key words:** Diane Schetky; memoirs; forensic psychiatry; child and adolescent psychiatry; poetry; art

Dr. Diane H. Schetky is a board-certified child, adolescent, and forensic psychiatrist; an artist; a musician; a photographer; a poet; a wife; a mother; and my good friend. I have known Diane Schetky for 40 years, first meeting her at child psychiatry meetings and continuing our friendship at forensic meetings, and reading her thoughtful publications in numerous professional journals. I have known her as a colleague and collaborator, and finally as a very good personal friend. It is difficult for me to condense and encompass the career of a renaissance woman into a short biography. Fortunately, I've had many sources to draw upon: Dr. Schetky's unpublished memoirs; her extensive CV (including over 60 publications in professional journals); her six books; her five books of poetry; several interviews with her oldest son, Jim; an interview with Joanne, a good friend; and a recent interview with Dr. Schetky.

Dr. Schetky modestly describes herself in one of her unpublished personal reflections as a person who has managed to balance a satisfying career and a loving family as a single mother and find time to write and edit professional books; publish over 60 articles or chapters (mostly on forensic child psychiatry) without a secretary, assistant, or the internet; travel around the world; sing with a professional choir; and volunteer as a docent in a local museum. She proudly adds that her career has allowed her to visit places she never expected to see, places as near as Maine State Prison, much of the United States and Canada, and countries as far as Asia, and the Arctic.



Diane Heiskell Schetky, MD

In a short unpublished memoir entitled *Perseverance*,<sup>1</sup> she describes herself as feeling different as a youngster. Dr. Schetky writes, “When I was a child I knew I was different but not what to do with that difference.”<sup>1</sup> In this memoir she describes her career in medicine. In another unpublished memoir, *Feeling Different*,<sup>2</sup> she describes her trajectory in medicine. She writes that she was drawn to medicine from the age of four when she contracted typhoid fever and was given a toy doctor's bag at Christmas. When she subsequently had measles and pneumonia at age nine, she decided that she'd rather be a doctor than a patient. She adds that she had no parental support for a decision to enter

Dr. Benedek is Clinical Professor of Psychiatry, University of Michigan Medical School. Address correspondence to: Elissa P. Benedek, MD. E-mail: epb@umich.edu.

Disclosures of financial or other potential conflicts of interest: None.

medicine. Neither her father, the Publisher of *Life Magazine* and then the Chairman of Time Inc., nor her mother, a socialite, encouraged a career in medicine. Medicine was not considered an appropriate career for a future debutante. She also worried if she had sufficient talent to pursue art and if she had the stamina for medical school. As a youngster she had many other interests and she frequently thought she might do better if she pursued a career in art or music. These choices garnered parental support. School was always awkward for her because the boys' heads usually met her at chest level. She was also different because she was always the youngest in her class and felt she would never catch up age-wise with the others.

She describes her academic career in her memoirs. She first attended Greenwich Country Day School and then transferred to an all-girls school, Greenwich Academy. She continued to feel different there. She writes that while her classmates excelled at academics, she "excelled at daydreaming." Her secure world began to fray in the fifth grade. A classmate was killed by her mother, who killed herself and her three children by carbon monoxide poisoning. This was her first encounter with death and perhaps stimulated her interest in child and forensic psychiatry. While at the Greenwich Academy, her other interests in art and music flourished and continued to develop.<sup>2</sup> There, these were also nurtured as acceptable activities for a future debutante.

In her freshman year of high school, she transferred to Rosemary Hall or, as it was called by her classmates, Rosemary Hell. She continued to be taller than her classmates, gangly, and awkward. She differed from her high school friends in other ways. Her parents were divorced by this time, and she avoided sharing any information about her parents as she always wanted to be judged for herself and get out from under the shadow of her well-known father, her socialite mother, and her actress stepmother. She left Rosemary Hall to enter Chatham Hall, which she describes as a "southern girls finishing school." There she saw herself as a "late bloomer." While at Chatham, she was uncomfortable. It was a school where the student body and faculty were all White, and all the other staff were Black. Her commitment to volunteering began there. She joined and chaired the Capital Relations Committee of the Service League. This was during the 1950s. She boldly suggested to the Rector of Chatham Hall that he consider accepting Blacks as students. The Rector retorted that Black students

would "feel uncomfortable being waited upon at meal-time by Black servants."<sup>2</sup> Dr. Schetky continued to persevere and fight back. As a student, she told the Director she would not donate to any alumni fund until the school was integrated. In her memoirs, she recalls that she kept her word and saved a lot of money over the next 30 years. During her residence at Chatham, she learned that she was not the only child of divorced parents. At Chatham she informed her parents she did not wish to become a debutante. She did not care to be presented to society and believed it was a waste of money. She suggested instead that she be allowed to use the money that was dedicated to her debutante party to cover the cost of travel to Europe. Her mother did not agree. She persevered, worked hard over the next two summers as an *au pair* and, by age 20, had earned enough money to pay her own way to Europe. Her love of travel began at this point.

Her education continued at Connecticut College, her second choice of a college. She was rejected from Vassar. She adds she was not considered "Vassar material." At Connecticut College she discovered it was not possible to fit the twelve courses required for graduation in with the four requisite premed courses and still have time to major in Studio Art. She recalls receiving no support or guidance from the college regarding her hopes to apply to medical school. She decided to transfer to Sarah Lawrence College. At Sarah Lawrence it was "okay to be different." During this period, she began to visit Greenwich Village in New York City. Classes at Sarah Lawrence were small, attendance required, and no grades were given, and she recalls learning to learn for learning's sake. She spent most of her time studying and decided medical school might be within her reach.

She had little social life at Sarah Lawrence because of her dedication to academic pursuits and her passion for art and music. She continued her interest in studio art, acquired an appreciation of jazz, and talked about social problems and politics with one of her professors, a jazz clarinetist and an artist who accused her of wanting to go to medical school so that she could once again become a member of a minority group (i.e., female physicians). Her vacillation between a career in the arts and medicine continued. She questioned whether she really had the talent to make it as an artist but kept that option open as a fallback plan. In the end, she decided she could do more for the world as a doctor than an artist and would be better able to support herself.

While at Sarah Lawrence, Dr. Schetky applied to four prestigious East Coast medical schools. In her memoir,<sup>2</sup> she recalls being asked many times why she was studying art and music when she wanted to go to medical school. She had also heard a rumor, prevalent at that time, that medical schools were not accepting females as the faculty assumed that women in medical schools were looking for husbands, would get married, then pregnant, then drop out of medical school, and take the place of a more diligent and committed male who would ultimately practice medicine. The four East Coast schools she applied to never even bothered to ask her to interview. She was not accepted to any of them. She was accepted to the Western Reserve University School of Medicine in Cleveland. The Dean there apparently appreciated students who pursued multiple interests or had other careers before choosing to attend medical school. Dr. Schetky describes herself as an addition to the Dean's personal colorful collection of students with outside and diverse interests who stayed the course.

Despite being admitted to medical school, she could not join her first-year class. En route to medical school she was diagnosed with hepatitis A, an illness that forced her to defer medical school entrance for a year. Again, she persevered and added to her numerous competencies and skills. During her period of recovery, she completed her first actual research project under the mentorship and tutelage of a Sarah Lawrence biology professor, assisting her with her cancer research studying the growth patterns of malignant melanoma. She was a mouse surgeon, learned to do histology, and prepared slides of mouse tumors. "My mother was convinced I would catch it."<sup>2</sup> She understood this as a metaphor and that she was really more concerned that she might catch "Blackness" from her African American biology class professor and employers.

Once in medical school she joined a class of 80 students, 13 of whom were females. They were the largest number of women in an entering medical school class at Western. Once again, she was in the minority, but she was no longer the tallest or youngest person in her class, having taken a year off. Her class bonded, and she never experienced gender discrimination. Exams were few, which minimized competition. She married in her second year and became one of two married women in her class. Once again, she never had much time to socialize and did not spend time with either male or female

classmates. Her sense of identity did solidify. There, she became an MD, wife, and, finally, a mother. She was no longer concerned about being different. Being different was okay. She reminisces, "had I not been different I would never have gotten to where am today."<sup>2</sup>

She timed her first pregnancy to coincide with the end of medical school and the beginning of her internship. Her first son, James (who I was lucky enough to interview), was born when she was 29, at the end of medical school and the beginning of her internship in pediatrics at University Hospital, Cleveland, Ohio, 1966–1967. In 1967–1969, she completed a residency in psychiatry once again at University Hospitals-Cleveland. During her part-time residency, she worked as a physician five hours per day and persevered in her other jobs as wife and mother.

After completing her residency in 1969, she began a fellowship in child psychiatry, once again at University Hospitals-Cleveland. Her second child, Scott, arrived near the end of her fellowship and shortly before she was scheduled to testify for the first time at trial.

Her academic career began immediately after completing the fellowship. In 1972–1973, she achieved the rank of Clinical Professor in Child Psychiatry at Case Western Reserve University School of Medicine. Shortly thereafter she, her husband, and their two children moved to Oregon. She combined her new part-time job directing the Child Psychiatry Clinic at the University of Oregon Health Science Center, with an academic position, Assistant Clinical Professor in Psychiatry, University of Oregon Health Sciences Center with being a wife and a mother.

When her first marriage failed, she and her two sons returned to Connecticut, and she changed her name from Diane Browning to Diane H. Schetky [she had begun publishing under that name]. The H stood for Heiskell. The H was for her father, Andrew Heiskell. She continued publishing extensively under that name. In Connecticut, she started her first small private practice, and she continued her extensive publishing in professional journals. Her publications were diverse, including articles focusing on the treatment of child victims of incest,<sup>3,4</sup> countertransference,<sup>5,6</sup> acute child leukemia,<sup>7</sup> and a study of 20 narcotic addicts.<sup>8</sup>

Her academic career flourished. From 1978 through 1982 she was an Assistant Clinical Professor of



Psychiatry at the Yale Child Study Center, New Haven, Connecticut. From 1982 through 1986, she was Associate Clinical Professor of Psychiatry, Yale Child Study Center. Her publishing career took off. She continued to contribute to diverse professional journals reflective of her ongoing interest in child and adolescent psychiatry and forensic psychiatry and ethics. The topics she addressed were diverse and included papers on corporate family lifestyles,<sup>9</sup> parental kidnappings,<sup>10</sup> children and handguns,<sup>11</sup> emerging concerns regarding child sexual abuse,<sup>12</sup> and tardive dyskinesia in a young boy.<sup>13</sup>

Dr. Schetky's expertise in child forensic psychiatry, in general, and child sexual abuse, in particular, was recognized internationally, and she has been invited all over the world to lecture and to be a visiting professor. In 1982, she was a visiting professor in the Department of Psychiatry, University of Witswatersrand, Johannesburg, South Africa. That same year, she was invited as a Visiting Professor, Division of Child Psychiatry, Austin Hospital, Heidelberg, Victoria, Australia. In 1982, she presented a lecture entitled "Emotional Reactions of Children to Hospitalization and Illness" at the India Academy of Pediatrics in Calcutta, India. In 1994 she gave a lecture to the Association for Child Psychology and Psychiatry, Irish Branch, Dublin, Ireland, entitled "False Memories of Sexual Abuse." In 1999, she began a series of lectures in Iceland, including a lecture to the Akureyri Medical Society in Akureyri, Iceland on the suggestibility of child witnesses, followed by a lecture to the medical staff at Akureyri Regional Hospital on youth violence. In 2001, she was invited to return to Reykjavik, Iceland, and delivered a series of lectures, including one on child sexual abuse, another on interviewing children for suspected abuse and bullying, and a third that focused on sexual harassment delivered at an annual meeting of the Icelandic Society of Child and Adolescent Psychiatrists.

My personal relationship with Diane began when we both attended professional conferences, including those of the American Psychiatric Association, the American Academy of Child Psychiatry, and the American Academy of Psychiatry and the Law. We shared our experiences as minority medical students, minority residents in psychiatry, and minority fellows in child psychiatry; as wives and mothers; our reactions to testifying in high profile cases; and our professional interest in child and forensic psychiatry. We began a long, fruitful professional collaboration

writing papers together. This was before either of us had a computer. We talked frequently on a land line, visited one another at our respective homes, co-wrote papers for professional journals, and finally decided to edit three books dealing with child and adolescent forensic psychiatry.<sup>14-16</sup> It was hard work but great fun.

During this period, Dr. Schetky continued to travel widely and lecture frequently at professional meetings both nationally and internationally. All during this period she continued her interest in music and art. During our conversations she spoke to me fondly of her trips to Russia and the multiple trips she made to the Arctic Circle. She added to her artistic skills during her travels and painted and photographed widely the many countries she visited, including West Africa, Australia, and Iceland. In our recent conversation, she expressed enthusiasm about possibly going on another international trip.

Dr. Schetky contributed an ethics column to the *Journal of the American Academy of Child and Adolescent Psychiatry* for 20 years. Dr. Douglas A. Kamer, the ethics column editor, described Dr. Schetky in the following manner: "Diane became the conscience of child and adolescent psychiatry for two decades. She did it while writing about ethics, forensics, consultation/liaison, the juvenile justice system, prevention, and the myriad of other topics we encounter in our lives as child and adolescent psychiatrists, physicians, patients, and as people." He also noted that in whatever ethics topic she explored, her writing showed wisdom, common sense, humanity, professionalism, personal responsibility, integrity, and respect. Dr. Kramer added, "She talked to us about how we ought to be as we sought excellence in a complicated professional world." He observed that although she was retiring her ethics column, she was not retiring as a person and presciently commented that wisdom and integrity do not retire. She told him she would continue writing after her retirement. She planned on editing *The Original Maine Shrimp Cookbook*, something she told him was "more than a cookbook . . . you might call it a cookbook with a conscience."

In her last ethics column,<sup>17</sup> Dr. Schetky mused that she had been writing the column for 20 years and at first worried that "the well would run dry" (Ref. 17, p 228) and later realized that she would never run out of material, that ethics cut across almost all aspects of life. To that end, she described the ethics challenges she faced starting her private practice in mid-coast Maine in 1986 when she was the only child adolescent

psychiatrist in private practice in the northern half of the state. She was often asked to see the children of medical staff or acquaintances and had to determine when these relationships were too close for comfort and would preclude her taking on a therapeutic role. She described the challenge of “double bookkeeping,” trying to remember what she heard from whom, and where it should be discussed. She not only heard things about patients or their families from other patients or friends but would hear about her own children, who had a different last name than hers, from her child patients who were unaware that these were her children they were talking about. In the column she wrote at her retirement she recalled the lesson that she learned during staff orientation at Maine State Prison (see below), where she was taught the valuable adage, “Nothing In, Nothing Out,” that is, not to share information about your life outside the prison with inmates and what inmates told you stays in the prison. In many of her columns she discussed her take on the challenges of maintaining personal integrity in tricky situations, including evolving systems of health care delivery, managed care, limits of confidentiality under managed care, confidentiality of electronic communication, and the security of cell phones. She also explored conflicts of interest with drug companies.<sup>17</sup> They were all new challenges her contemporary practicing psychiatrists faced. They are ethics challenges we face today.

In concluding her last ethics column, she mused that the column had provided her a forum to address pressing social problems that affect the wellbeing of children and their families, such as racial disparities, poverty, global warming, same sex marriage, gun control, juveniles, and the death penalty. In closing, she passed on the ethics mantle to the next generation with the hope that ethics would maintain a strong presence in the *AACAP News*.<sup>17</sup> Her well never ran dry. After she retired from writing the AACAP ethics column, she continued to participate on ethics committees of the Maine Association of Psychiatric Physicians and the American Academy of Psychiatry and the Law.

Dr. Schetky retired from private practice in 2007 but kept an appointment as a Clinical Professor in the Department of Psychiatry, University of Vermont College of Medicine at Maine Medical Center in Portland. In addition, after her retirement from private practice, she began working at the Maine State Prison in Thomaston, Maine, as a Staff Psychiatrist.

She describes receiving a phone call from a colleague who was planning to do two years of temporary placements in New Zealand. He asked if she would fill in for him at the prison one day a week while he was gone. She told him that she had no experience in dealing with adult criminals or violent patients and that she was quite content. His response was the prison would “round out your forensic education.” She did not argue. She describes herself in the prison system as once again an oddity, feeling different, a female in a skirt in a men’s prison.

While working in the prison system she was once again creative, innovative, and a pioneer. She observed that approximately one-fourth of the inmates experienced mental illness and were treated inappropriately. She documented her experiences in prison psychiatry in a paper entitled “Mourning in Prison, Mission Impossible,” first presented at an AAPL annual meeting and then published in *The Journal*.<sup>18</sup> In that paper, she wrote about the many inmates she encountered who experienced unresolved problems of grief and loss. She initiated a grief support group. The impetus for this group came from an inmate who experienced the death of five relatives during his period of incarceration. He commented on how difficult it was to mourn in prison. He worried about how he would deal with all of his losses when confronted with them upon release. Dr. Schetky discussed the possibility of a grief support group with him, and the inmate offered to help organize it. Once again, in the group she brought together her multiple interests and skills and her training in psychiatry. She capitalized on her interest in art, encouraging prisoners to use art as a medium for self-expression, again pioneering, persevering, and innovating in a challenging situation. Scissors were not allowed in prison, so Dr. Schetky brought paper images that she cut from magazines into the prison group and passed them out. Glue sticks had to be counted before and after each art project. Pencils were not allowed because one inmate had succeeded in lighting a contraband cigarette by sticking a pencil into an electrical outlet. She found creative solutions for all these new challenges. She fostered an art and poetry exhibit in the prison when she noticed that some of the prisoners were able to express themselves in poetry. She also initiated a prison hospice group, providing modified hospice training to prison security staff, medical staff, and senior administrators.

After retirement, Dr. Schetky shared her expertise by frequently lecturing in community groups. In a

presentation tailored to adults aged 55 and older, Dr. Schetky read from one of her self-published books, *Poems on Loss, Hope and Healing*.<sup>19</sup> In addition to sharing her book she described her efforts as a hospice volunteer to help the men's state prison inmates express themselves through art and poetry. She continued her interests in music and art. She served as a board member of the Bay Chamber Concert, she continued performing in several choral groups, and, most currently, she volunteers as a docent at an art museum in Bowdoin College.

Dr. Schetky has been the recipient of numerous awards. I will mention but a few. In 2003, the American Psychiatric Association, in conjunction with the American Association of Psychiatry and the Law, awarded Dr. Schetky and me the Guttmacher Award for the textbook, *Principles and Practice of Child and Adolescent Forensic Psychiatry*.<sup>16</sup> In 2005, she won a Governor's Service Award for her project with Maine State Prison inmates. She received the Golden Apple award from AAPL in 2006.

In my most recent conversation with Dr. Schetky, she shared with me the pleasure she experienced volunteering at Bowdoin College conducting tours at their Arctic Museum. She fondly remembered her visits to the Arctic, all four of them, and felt she had a good grasp of Arctic culture. (To that end, her email address is arcticpoppy1@gmail.com. She would enjoy both hearing from you and hearing about you.)

Diane maintains close relationships with her two sons and her two grandchildren. As we talked, she shared with me her continued enthusiasm, her love of music, art, photography, and, most of all, her love of people.

It has been my pleasure and privilege to try to share a very condensed version of Dr. Schetky's multiple valuable contributions to child, adolescent, and forensic psychiatry. I hope I have introduced you to Dr. Diane H. Schetky, a renaissance woman who has learned from all her experiences and shared those experiences in her teaching, professional writing, community activities, and continues to share them to this date. Her

unique personality, varied interests, and skill set have enabled her to achieve a record of success that serves to me as a model for all of us. After speaking with her, it is clear that Dr. Schetky has had a lot of fun doing what she did, learning what she's learned, and enjoying the many opportunities she's had. From all accounts she will continue to provide wise counsel and contagious enthusiasm to the field of psychiatric medicine for years to come.

## References

1. Schetky DH. Perseverance. Unpublished memoir.
2. Schetky DH. Feeling Different. Unpublished memoir.
3. Browning DH, Boatman BE. Incest: Children at risk. *Am Psych*. 1977 Jan; 134(1):69-72
4. Boatman BE, Borkan E, Schetky DH. The treatment of child victims of incest. *Am J Family Therapy*. 1981 Winter; 9(4):43-51
5. Browning DH. Patients' reactions to their therapist's pregnancies. *J Am Acad Child Psych*. 1974 Summer; 13(3):468-82
6. Schetky DH, Colbach F. Countertransference on the witness stand: A flight from self? *Bull Am Acad Psychiatry Law*. 1982; 10(2): 115-21
7. Browning DH, Gross S. Epidemiological studies of acute childhood leukemia. *Am J Dis Child*. 1968; 116(6):576-85
8. Browning DH. Follow-up study of twenty narcotics addicts. *Psychiatry Med*. 1970 Sep; 1(3):223-32
9. Schetky DH. Corporate family lifestyles: A child psychiatrist's perspective. *Psychiatric Annals*. 1982; 12(9):862-71
10. Schetky DH, Haller LH. Parental kidnapping. *J Am Acad Child Psych*. 1983; 22(3):279-85
11. Schetky DH. Children and handguns: A public health concern. *Am J Dis Child*. 1985; 139(3):229-31
12. Schetky DH. Emerging issues in child sexual abuse. *J Am Acad Child Psychiatry*. 1986; 25(4):490-2
13. Browning DH, Ferry PC. Tardive dyskinesia in a ten-year-old boy. *Clinical Pediatrics*. 1976; 10(15):955-7
14. Schetky DH, Benedek EP, editors. *Child Psychiatry and the Law*. New York: Brunner/Mazel; 1980
15. Schetky DH, Benedek EP, editors. *Emerging Issues in Child Psychiatry and the Law*. New York: Brunner/Mazel; 1985
16. Schetky DH, Benedek EP. *Principles and Practice of Child and Adolescent Forensic Psychiatry*. Washington, DC: American Psychiatric Publishing; 2002
17. Schetky DH. Twenty years of ethics columns. *AACAP News*. 2009 Sep/Oct; 40(5):228-9
18. Schetky DH. Mourning in prison: Mission impossible? *J Am Acad Psychiatry Law*. 1998 Sep; 26(3):383-91
19. Schetky DH. *Poems on Loss, Hope and Healing*. Self-published; 2009