Forensic Psychology in Military Courts


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Forensic Psychology in Military Courts provides a comprehensive overview of the military jurisdiction and the unique challenges faced by both general and forensic mental health professionals who interact with the United States military justice system. The authors’ stated purpose in writing the book is to “educate psychologists on the unique nature of the military system” and “to assist attorneys in identifying appropriate roles and responsibilities for psychologists who work in the system.”

This text is written by psychologists and military lawyers. Despite being written for and marketed to psychologists, this book is just as applicable to psychiatrists who consult and testify for military courts. The book is divided into three sections: Overview of the Military Justice System, Psychologists’ Role in Courts Martial, and Psychologists and Legal Counsel as Partners.

The Overview of the Military Justice System is made up of four chapters. Chapter 1 discusses the basics of the military justice system, including how it compares to civilian legal systems, what makes it unique, and how psychologists fit into the system. Chapter 2 provides an overview of how military trials (courts-martial) work, comparing and contrasting them to civilian trials. Chapter 3 outlines the military’s rules and standards for expert witnesses. Chapter 4 covers the topic of privilege and mental health records in courts-martial and explores the nuances of military law that set it apart from other federal jurisdictions.

These chapters provide a highly informative introduction to the military legal system. They provide such a clear and concise introduction to the theory behind and structure of military justice that these four chapters are an invaluable resource, not just to those doing forensic work, but also clinicians practicing within or adjacent to the U.S. military health care system. For example, Figure 1.1 in Chapter 1 is a flowchart showing how military justice progresses from alleged misconduct to any possible outcome, something anyone who may have patients involved in military justice should know. Furthermore, Chapter 1 provides a description of the participants and potential outcomes of courts-martial and offers indispensable information for anyone assessing a service member’s competency to stand trial at court-martial.

One unique feature of the military system is that general psychiatrists and psychologists are required to perform evaluations of competency to stand trial and mental responsibility evaluations for cases deemed appropriate for non-forensically trained clinicians. Chapter 3, therefore, has a special relevance for military psychologists and psychiatrists. Chapter 3 distills the admissibility concerns specific to the military system’s four steps. It also succinctly defines and describes the R.C.M. 706 evaluation, the military’s specific procedure for evaluating both competency to stand trial and criminal responsibility for individuals involved in the military justice system.

The following section, Psychologists’ Roles in Courts-Martial, consists of five chapters (Chapters 5–9) and focuses more on topics relevant to the forensic psychiatrist or psychologist. The topics of Chapter 5 are the ethics and potential role conflicts unique to working in the military system, particularly how the roles of consultant and expert witness are routinely combined at courts-martial. Chapter 6 then moves into a description of the practical aspects of the roles psychologists take in the military system. The authors focus on the logistical challenges posed by the unique combined role of both consultant and expert witness. Chapter 7 provides further detail on the trial consultant role and Chapter 8 does the same for the expert witness role.

The final section, Psychologists and Legal Counsel as Partners (Chapters 10–12), is written by military judges and addresses how psychologists can best assist in their various roles in the trial team. Chapter 10 is an overview of how collaboration between military lawyers generally works, with a specific focus on how the military system provides unique logistical and cultural challenges. Chapter 11 discusses the topic from a prosecutor’s perspective, and Chapter 12 from a defense attorney’s perspective.
The latter sections of the book are highly relevant to forensic psychologists and psychiatrists who are either practicing or planning to practice in the military system. Because of the structure of the system and the resources available, the ethics and logistics of consulting for courts-martial often differ from comparable civilian jurisdictions. This text explores the ethics challenges of having to act as both consultant and expert witness, and how experienced experts have navigated the dual roles. In the chapters written by military judges, the authors provide expert advice on how psychologists can provide the most effective consultation to the military system and integrate into the unique trial team approach often used for courts-martial. Chapter 9 is of particular interest to anyone with limited trial experience looking to be a consultant or expert witness because it aggregates the literature on common topics for which military attorneys often request consultation.

The largest critique I have of this text is that it focuses on the role of psychologists while neglecting the role of psychiatrists at courts-martial, despite all its content being equally relevant to psychiatrists involved in the military legal system. The authors occasionally acknowledge that the military uses psychiatrists in its mental health evaluations for courts-martial, but entirely ignore the fact that psychiatrists often testify to the same concerns as psychologists at courts-martial. I am aware of many courts-martial where one side retained a psychiatrist and the other a psychologist to consult on the same topic. With a few rare exceptions, however, this omission does not take away from the applicability of the information and advice.

Overall, this book is an indispensable resource for any psychiatrist or psychologist interested in the military legal system. It presumes a basic knowledge of forensic practice in the civilian courts and builds upon that knowledge to highlight the ways in which the military system is unique. Readers unfamiliar with the military system will find that the writers do not presume a knowledge of anything military and provide appropriate context. Even those who are quite familiar with the military legal system will likely learn something new.

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Physician Suicide: Cases and Commentaries


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Physician Suicide: Cases and Commentaries is a collection of ten cases depicting behaviors and disorders that increase a physician’s risk of suicide, with two of the vignettes discussing scenarios that resulted in suicide. Each case includes a detailed description of the life of a physician with various risk factors for suicide, including substance use disorders, depression, other mood disorders, medical illness, and adverse life events. Although the cases are fictional, they depict realistic scenarios that represent the everyday struggles physician-patients face and their challenges in attaining overall wellness. A commentary after each case discusses the salient clinical factors presented and solutions that were applied, along with those that should have been explored. Throughout the book, the author emphasizes preventive measures that could have averted the struggles experienced by the physician.

Dr. Yellowlees, an internationally renowned expert on physician wellbeing, specializes in treating physicians.1 As a professor of psychiatry, he also serves as the chief wellness officer at the University of California Davis Health and is the first to hold such a role in the University of California system.2 Dr. Yellowlees’s career includes treating many physician-patients at risk for suicide, including two physician-patients that chose to end their lives. Through these experiences, Dr. Yellowlees provides an informed examination of the personal, professional, and systemic factors in physician struggles with wellness and suicide, along with an exploration of possible preventive measures.

This book highlights vital statistics regarding physician suicide. Data indicate that physicians end their lives by suicide at a higher rate than the general population, with male physicians 1.41 times more likely