

FORENSIC PSYCHIATRY- AN INTERFACE OF LAW AND MENTAL HEALTH**Jyothi Sajayan¹, Anusree Mohan²**^{1,2},²nd year P.G Scholar, Dept of Agadatantra, SDMCA, Hassan, Karnataka, India.**ABSTRACT**

Forensic Psychiatry was established as a sub specialty of psychiatry in 1992. A mentally ill person may perform acts to which the normal logic of human behavior does not apply. So the person needs protection against himself, and the society need protection against the mentally ill. Psychiatric problems are frequently fraught with legal implications. Apart from the changes in the internal milieu, the psycho social factors to modify the human behavior. The symptoms in Psychiatry are the experiences as narrated by the patient, who causes distress to the individual. A cluster of such symptoms, may indicate signs of the illness. Level of sensorium of the patient and various higher mental functions may have to evaluate in relation to certain medicolegal issues. A Medical officer may ask to give his opinion on the state of mind of an accused. So it is very important have knowledge in this Forensic Psychiatry for a practioner during his practice.

Key Words: Forensic Psychiatry, Mentally ill, Medico legal issues

INTRODUCTION

Forensic psychiatry it is a sub specialty of psychiatry. Psychiatry deals with study, diagnosis, and treatment of mental illness. Forensic Psychiatry deals with application of psychiatry in the administration of justice. This term Forensic Psychiatry is mainly used for those persons who are unable to adopt themselves to the ordinary social circumstances, due to mental illness. The law is most frequently concerned with “Mental impairment” and not mental illness. Different kinds and degrees of mental impairment are required for different legal issues.

The term “Mental illness” as used in Mental Health act (1987), it's wholly a sociological concept. Accordingly a mentally ill person may be designated as that member of the community who is unable to look after himself /manage his own affairs or is dangerous

to himself or to others¹. The Indian Penal code employs the term unsoundness of mind while referring to Insanity. This is used as a synonym with other terms like Madness, lunacy, mental derangement, mental disorder, etc

Classification of mental diseases-Mainly two types of classification²

1. DSM 4 (Diagnostic and Statistical manual of mental disorders)
2. ICD-10 (International classification of diseases, injuries and causes of death)³

Main classification of mental disorders

MENTAL DISORDER	SUBDIVISION
AMENTIA	Feeble mindedness, Imbecility, Idiocy
Neurosis	Anxiety, Depression, Hysteria, Obsession, Phobia
Psychosis	Organic, Functional
Personality disorder	Psychopathic personality, Sex deviation, Drug dependence

Amentia: Amentia is the first type of mental illness, in which mental developmental defect or mental retardation characterized by defective perception, cognition & social adaptability. It is of three types. Mild mental retardation, moderate retardation & severe retardation. In mild retardates the IQ level is 50-70, they are also called feeble mindedness. Second category moderately retardates, in which the IQ level is 30-50, they are also called imbecile, in severe retardates or idiots the IQ level is less than 30.

Neurosis: is the second type of mental disorder in which patient suffers with emotional or intellectual disorders but does not lose touch with reality. Hysteria is a type of neurosis which is commonly seen in young females. Main symptoms are deafness, blindness, loss of smell, paralysis.

In psychos: is that is the third type of mental disorder mentioned in the classification, in which it is characterized by withdrawal from reality, living in a world of fantasy. Schizophrenia is an example of psychoses, in which there is complete loss of reality.

Personality disorder: the fourth type in this psychopathic personality is the most important, a person who is neither insane nor mentally ill but fails to perform normal standards of behavior and they are anti-social and have long criminal records.

Forensic psychiatry correlation and application of this Psychiatric knowledge to the purpose of law. Mentally ill person-- a person who is in need of treatment by reason of

any mental disorder other than mental retardation. The term Lucid interval is important in Forensic Psychiatry, defined as, during the course of mental illness a person may cease to exhibit signs of the illness and his mind remains clear for variable duration.

Branches of Forensic Psychiatry

1. Academic branch deals with Formation of databases, case studies, Classification profiling (crimes & criminals)
2. Diagnostic branch –deals with profiles of criminals prepared, evaluation of mindset of the accused, before crime, during the crime after the crime
3. Therapeutic branch dealing with treatment of accused & victims Gives support to relatives
4. Preventive branch deals with early detection of criminal tendencies, deriving indicators for impending incidence like - crime-, suicide, negligent behaviour, addictions
5. Jurisprudence deals with civil and criminal responsibilities of a mentally ill.

Main objectives of Forensic Psychiatry-

- Evolution of medico-legal understanding
- Appreciation of the relationship between mental illness & criminality
- Evolution of legal tests to define insanity
- Developing new methodologies for the treatment of mental conditions
- Make changes in the public attitude and perceptions

Who is a Forensic Psychiatrist?

A forensic psychiatrist is a psychiatrist who has additional training and/or experience related to the various interfaces of mental health (or mental illness) with the law.

He must have sound knowledge of

Legal definitions

Legal policies

Legal procedures

Some important terms related with Forensic Psychiatry

LUCID INTERVAL: This is a period occurring in insanity during which all the symptoms of insanity disappear completely. This period is legally very important, the individual is able to judge his act soundly, and he becomes legally liable for his acts.⁴

Disorder	Symptoms
Abreaction	Reviving and bringing into consciousness, forgotten and other traumatic experiences or repressed emotions.
Affect	Emotion, Feelings, or mood
Phobia	Excessive or irrational fear of a particular object or situation
Confabulation	Unconscious filling of gaps in memory by imagining experiences or events that have no basis infact
Para suicide	It is a conscious often impulsive, manipulative act, undertaken to get rid of an intolerable situation
Somnambulism	A person may move around while sleeping and may commit some crime or theft, and then come back normally
Empathy	The degree to which the observer is able to enter into the thoughts and feelings of the patient and establish good contact.
Delusion	False unshakable belief or idea, which is out of keeping the patient's educational, cultural and social background

Legal Aspects related with mental illness

Most important legal point related with a mentally ill person is from Mental Health Act

Illusion	It is false interpretation by the senses of an external object or stimulus which has real existence
Compulsion	It is a repetitive behavior done by an individual in spite of knowing that it is not correct
Hallucination	Disturbance of perception False sensory perception without any real external stimulus
Personality disorder	A person who is neither insane nor mentally ill but fails to perform normal standards of behavior
Schizophrenia	Means disintegration of mind. Commonly called 'split personality' There is a complete loss of reality. The exact reason : not known but it runs in families

(1987).⁵This is an act to consolidate and amend the law relating to the treatment and care of mentally ill person ,to make better provisions with respect to their property and affairs and for matters connected therewith.

Repeals the Indian Lunacy Act (1912). It contain 10 chapters.

Mental Health Act (1987)-Important Points

Chapters	Main points mentioned
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Chapter 1	Short title, Extent & Commencement, Definitions of Mentally ill person, Mentally ill prisoner, Psychiatrist, Psychiatric hospital
Chapter 2	Descriptions of authorities mainly Central & State Mental Health Services
Chapter 3	Mentioning the criterias for Psychiatric hospitals & Psychiatric nursing homes and their license and Inspection
Chapter 4	Admission and detention of mentally ill, Immediate, voluntary and under special circumstances
Chapter 5	Appointment of visitors, monthly inspection of visitors are explained
Chapter 6	Civil and criminal responsibilities of mentally ill person is described
Chapter 7	Liability to meet the cost of maintenance of mentally ill by Government/Guardian
Chapter 8	Deals with protection of human rights of mentally ill persons
Chapter 9	Penalties & Procedures, For improper reception Penalty for establishment of psychiatric hospital in contravention are described
Chapter 10	Pension to mentally ill person, legal aid to mentally ill person at state expense in certain cases

Chapter 6 dealing with civil responsibility and criminal responsibility of a mentally ill

The main civil responsibilities of mentally ill person

1. Management of property of a mentally ill person
2. Insanity and contracts
3. Marriage contracts of mentally ill
4. Insane as a witness
5. Testamentary capacity

In management of property-if on enquiry, a person is found incapable of managing his properties and affairs, but is not dangerous to him or to others. The court appoints a manager to look after his property, granting him necessary power.

A contract is invalid if one of the parties at the time of making it was incapable of understanding what he was doing due to insanity

Marriage considered invalid under these conditions- incapable of giving valid consent due to insanity, though capable of giving valid consent, has been suffering from such a degree of mental disorder as to be unfit for marriage and procreation, recurrent attacks

of insanity and epilepsy. Insane as a witness, is not valid - not able to understand the necessity of telling the truth due to insanity. Testamentary capacity-It is the mental ability of a person to make a valid will, Testator should be a major and of sound disposing mind so it is invalid for a mentally ill person.⁶

Criminal responsibilities

The law presumes that every person is sane and responsible for his action until the opposite is proved. McNaughten Rule is the most important rule regarding criminal responsibility. According to these rules, to establish defense on the ground of insanity it must be clearly proved that at the time of committing the act he does not know the nature and quality of the act he was doing. In our country India we developed IPC section 84. It's based on McNaughten rule, It says that nothing is an offence which is done by a person who at the time of doing it is by the reason of unsoundness of mind, incapable of knowing the nature of act.⁷

DISCUSSION

Understanding legal issues of mentally ill or Forensic Psychiatry is the need of the hour. It is the peak time that we require competent and professional psychiatric expert services to the judiciary. The most important challenge in this field is accurate diagnosis, prognosis, and treatment of mentally ill person. Another most important terminology related with mentally ill, is feigned insanity. A feigned insane who is not actually mentally ill, but he pretend as if he is a mentally ill. The detection of feigned insanity is also the responsibility of a medical officer. Ordinarily, it is easy to detect the fraud, but times it becomes very difficult. All these can be achieved by the possible means of awareness regarding the clinical applications of forensic psychiatry and also include curriculum for training forensic psychiatrists in the medical field. Moreover extensive research work is needed in this field.

CONCLUSION

Forensic Psychiatry is a sub speciality of Psychiatry. Use of the insanity defence is a very controversial topic in law, since history. The future development of this sub speciality of Psychiatry is envisaged on the basis of the developments which have taken place in first and second world countries. Forensic Psychiatrists are key to the process

that produces or changes mental health law, whether these “laws” derive from the legislature, the courts, or the executive branch of government.

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