Study on the Development and Diffusion of Diagnosis, Assessment, and Treatment Contributing to the Promotion of the Equalization of Forensic Mental Health

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This study addresses a wide range of issues collected from various areas of forensic psychiatry, such as criminal cases, juvenile cases, civil cases, adult guardianship, the Medical Treatment and Supervision Act (MTSA), and the correctional system, which were assigned to six research teams. Tangible results, such as a clinical tool to provide direction in the resolution of each issue could be achieved, and these have been dispersed into the field.

The planned results are wide ranged, such as a) a method to screen for persons needing psychiatric consideration in the criminal justice system, b) a psychiatric evaluation manual for psychiatrists, c) a psychiatric evaluation user’s manual for legal professionals, d) an objective assessment method of impulses which may lead to personal harm or to others, e) cognitive behavioral therapy for harmful behavior, f) assessment method to treat responsibility competence, g) a manual regarding how to proceed in mandatory treatment, and h) a community treatment system for persons who have injured others.

The implementation conditions of each team in 2014 are described below.

1. Equalization of criminal responsibility evaluation and establishment of appropriate use methods of the evaluation in judicial system

Workshops for legal professionals, psychiatrists, and judges were carried out three times this year. Opinions regarding how to evaluate various psychiatric disorders (this year, special focus was placed on eating disorders and Kleptomania) and ways to judge responsibility competence were repeatedly exchanged.

First, regarding recent conditions where an expert opinion is requested on “the mechanism where psychiatric symptoms lead to crime,” we reached the same opinion that limiting the roles of psychiatric evaluation to the original medical judgment and evaluation, and requesting a detailed report about the specific influence of the symptoms on the crime, will ensure the medical and factual basis for legal judgment on final criminal responsibility competence.

Furthermore, we considered measures on how to improve standards for the evaluation of responsibility competence of other countries, and reflected these achievements in discussions in Japan. At this time, in reference to the regulations of Swiss Criminal Code
Article 20 (when responsibility competence is in doubt), and proceeded clarify the legal, theoretical standard to select truly needed evaluations while avoiding so-called "evaluation just-in-case."

2. Development of model multi-job type team medical care for outpatient medical care

This team specifically considered problems in multi-disciplinary team (MDT) treatment by surveying actual conditions in MDT treatment, and developed and put into practice a methodology of MDT treatment that promoted and practiced rehabilitation of persons with psychological disorders back into society. The team aimed to share this with psychiatric institutions throughout Japan by preparing a manual and holding lectures.

This year, questionnaires were distributed to 16 designated inpatient medical institutions of the Medical Treatment and Supervision Act (MTSA) system, in order to further understand issues of MDT treatment. Responses were obtained from 385 persons (response rate 86.7%). In NDT treatment, "Preventative effect of confrontation structure between a patient and the person providing treatment," "diversity in responses to the needs of the patient," "need for advance preparation by care coordinator" were identified as important points. In consideration of these results the team worked to prepare an MDT manual.

In collaboration with the University of California, the Collaborative Practice Assessment Tool (CPAT) to measure the functional standard of MDT was revised. After it was translated and reverse-translated, the degree of coincidence before and after translation was confirmed, and Japanese edition (CPAT-J) was prepared. 100 persons in the U.S. and 200 persons in Japan with MDT treatment experience participated in this project, and standardization has continued to make progress.

3. Development of multifaceted forensic psychiatry risk assessment based on various biological, psychological, and social factors

In this study, "impulsiveness" which is often linked to problem behavior was considered, in order to clarify objective and scientific indicators by biological reaction measurement and develop an assessment tool which can be applied for evaluation and treatment of problem behavior in the future.

In 2013, an examination model which combines stimulating images to arouse emotion and a Go/Nogo task was prepared in order to search for a relationship between impulsive behavior and specified biomarkers, and preparatory experiments were carried out. When the ERP component was measured during the task, the amplitude of P2 and P3 significantly increased when negative stimulating images were shown, and the amplitude of P3 significantly increases in the Go/Nogo task than when the Go task was tested. Moreover, the larger the P3 amplitude, the lower the BIS score which is an impulsiveness scale, was observed. These results indicate the possibility that ERP can objectively predict how easily
punishment and reward can influence behavior.

4. Understanding various psychology programs in the Medical Treatment and Supervision Act and development of new methods

The purpose of this team was to develop a cognitive behavioral therapy with high reproducibility, which can be carried out in the field of forensic psychiatric medicine. A tool to verify efficacy was also developed at the same time. The team carried out the following work and could obtain positive results.

First, verification of the validity of the crime affinity scale was carried out. As a result of comparing the Crime Sentiments Scale, Japanese version (CSS-MJ) and 39 non-criminal insane, sufficient distinction in validity was observed (AUC=.706, CI=.64-.77, p<.001).

Second, the Japanese edition of R&R2MHP was prepared, rights to distribute it, and testing began.

Third, the Japanese edition of Short-Term Assessment of Risk and Treatability (START) was developed. Furthermore, since 2015, a conference with the Rehabilitation Bureau regarding the research plan was initiated in order to promote investigative research regarding the reliability and validity of START with rehabilitation officers as the research collaborators. Practical training for START was carried out for the rehabilitation officers that participated as research collaborators. A total of 107 rehabilitation officers participated in the training in eight locations across Japan.

5. Development and diffusion of screening for children and adults who are susceptible and require psychiatric consideration in the criminal justice system

Within the criminal justice system, a screening method which could be performed by police officers in order to identify persons with high vulnerability requiring some kind of mental support is needed, in order to properly consider such vulnerability in handling of such persons. The purpose of this study is to prepare such a screening method.

This year, the development team is preparing 1) a Japanese edition of the Learning Disability Screening Questionnaire (LDSQ) and 2) a Japanese edition of Hayes Ability Screening Index (HASI), which are both legal screening methods for mental disability. To do so, a survey of 394 possible suspects and 200 persons in a control group was carried out. A survey of 199 persons with mental disability and 188 persons in a control group was also carried out for 3) N2-BIAS development for screening by behavior observation, etc. For 4) a Japanese edition of GSS2 to measure the inductiveness of an interview and 5) N2-FAST development of a simple psychiatric check, 9 persons with mental disability and 200 persons in a control group were surveyed. Among these, progress is being made in the result
analyses of 1) and 3), and as example, ROC-AUC was confirmed to be able to distinguish between persons with mental disability and healthy person at an extremely high level of 0.83 in 1) the Japanese edition of LDSQ and 0.83 in 3) N2-BIAS. Investigation and analysis are with other tools are now underway.

6. Development and diffusion of the critical path from psychiatric assessment to decision making in forensic psychiatry medicine and criminal justice system

This team organizes and reviews the role of each of the five above-mentioned assigned teams. Among its achievements, a structure to judge criminal responsibility competence was published as a thesis.

And this year, as a topic, the team worked on the development of a method to evaluate the ability to consent to therapy in psychiatric medicine and a method to confirm Advanced Medical Directives. An original draft of the specific tool was planned based on the review of overseas document and discussion with research collaborators.

To evaluate therapy consent ability, a “Scheme to evaluate consent ability in case of mental health medical emergency” was created using the structure of A) Specification of items attempted for explanation and consent, B) Implementation of confirmation and evaluation (B-1 communication ability, B-2 realistic and specific understanding of explanation description, B-3 With or without declaration of intent and its contents, B-4 rationality of the declaration of intent), and C) Comprehensive judgment (C-1 Consent ability, C-2 possibility of recovery of consent ability).

Regarding advanced consent, since it is not yet legally recognized in Japan, the document form “Advanced indication memorandum in case of mental health medical emergency” was formulated, focusing on the fact that medical personnel should know the intent, feelings and thinking of their patients in a more general meaning, and should share this with the patient.