

## Introduction

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During the past two decades, the fields of law and criminal justice have joined the clinical mental health disciplines in acknowledging the existing and increasing roles which each has played in the development of the other. As psychologists systematically applied the science of psychology to test the assumptions of the legal system, psychiatrists and other clinicians working in the criminal justice system pressed for greater visibility and credibility within their respective academic disciplines. The results of these efforts have included professional journals, societies, and even new academic departments bridging social science and criminal justice disciplines.

Despite the flurry of activity joining these seemingly diverse fields of interest, it remains unclear to what extent and in what manner these new academic and professional hybrids have affected the lives of the people and systems who are their clients. Generally, a case can be made that the vast majority of such changes, at least in the United States, have been accomplished through the judicial and legislative branches of government. Social science data have had an impact on case law (Melton, 1987; Monahan & Walker, 1985) as well as legislation (e.g., Landesman & Butterfield, 1987) on a wide range of issues.

While the academic and professional communities have focused effectively upon issues arising in legislatures and the courts, they have been far less attentive to operational and administrative issues; issues which are traditionally the province of the executive branch, usually of state governments. For example, while the debate has raged over the abolition of the insanity defense and the creation of the verdict of guilty but mentally ill, little or no attention has been paid in the professional literature to *administration* of the actual provision of mental health services in prisons or to the treatment of those found not guilty by reason of insanity (NGRI). To be sure, there have been exceptions to this rule. Noteworthy among those have been efforts by practitioners themselves to provide standards for the provision of such services (e.g., American Association of Correctional Psychology, 1980), or to generally introduce forensic administrative issues to a broader context such as hospital psychiatry (Silver & Gelpi, 1988). Nevertheless, it is ironic to find such a glaring disparity between the vast literature on whether a person is to be hospitalized as NGRI or incarcerated as a convicted felon and the virtual absence of scholarship on administering their treatment after trial.

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It is this lack of attention to the administration of forensic mental health programs that has led to this special issue. In it, we touch on some of the major themes and dilemmas faced by all public mental health administrators. However, rather than focus on the legal issues in public mental health systems (which would easily justify their own issue), we have instead addressed the practical realities of running forensic mental health programs. While academic, jurisprudential, and philosophical issues are of great importance to forensic administrators, it is the practical realities of forensic programs that have the greatest effect on the patients such programs treat and the communities they protect. Each contributing author has demonstrated an ability to apply scholarship and a broad perspective to years of hands-on experience in administering mental health services to forensic populations. Perhaps most importantly, as a group, the contributors have demonstrated an ability to approach services to forensic patients in an integrated and comprehensive manner.

The first four chapters set the international context for forensic mental health administration. Georg Hoyer and Sheilagh Hodgins describe the forensic mental health systems in Scandinavia and Canada from administrative and organizational perspectives, and Han Blankstein discusses issues specific to one forensic hospital in Holland. Following these, Nancy Halleck and John Petrila provide a thoughtful and useful guide to risk management in forensic facilities, from both legal and quality assurance perspectives.

The next two articles focus on community based forensic programs. Larry Fitch and Janet Warren describe Virginia's extensive program to train forensic evaluators in community mental health settings. Orest Wasyliw and his colleagues discuss the special problems presented by the legal statuses of mentally disordered offenders and suggest ways to overcome these obstacles in an outpatient forensic treatment program. Finally, two articles deal with administration of mental health treatment services in correctional settings. Ronald Greene describes the historical context and current look of New York's prison mental health system, and Judy Cox and her colleagues provide a practical guide to reducing suicide in local jails and police lockups.

It is, of course, impossible to include everything, and important areas regrettably are omitted, including the administration of forensic mental health services to children and the mentally retarded.

It is our hope that this special issue will serve several purposes. The first is to provide practical and useful information to the many managers responsible for the administration of forensic evaluation and treatment services. The rapid expansion of these services nationally means that many managers will be opening new programs with little experience in serving these special populations. Our second purpose is to contribute to the literature an understanding of the breadth of these services. Specifically, we want to demonstrate how forensic mental health services have evolved from inpatient hospital-based evaluation and treatment services to a broad range of services in a variety of inpatient, community, and correctional settings. Finally, this special issue is an invitation to scholars in law as well as the behavioral sciences to extend their conceptual and empirical work to forensic settings, not only to their own benefit, but to the benefit of the patients and communities we serve.

**References**

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