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BACKGROUND

When assessing the defendant's sanity, forensic psychiatrists are required to draw a line to distinguish crime and insanity. This involves bringing scientific reliability in line with the logic of the law and reconciling two discourses: legal and medical. The role of an expert psychiatrist is often compared to that of a translator: their task is to translate the language of psychiatry into the language of law.

The process of formulating a narrative about the perpetrator of a crime—although appearing to be rooted in neutrality—is not independent of the broader social context including gender stereotypes, particularly stereotypes of femininity. Forensic experts make specific lexical and narrative choices, and these choices influence the reception of their texts.

OBJECTIVES

I explore how the meaning of normality is developed at the interface of psychiatry and law. I focus on the adaptation of medical-psychological language to the requirements of the justice system. My study will answer the question of how medical categories are translated into legal categories and, more broadly, how an agreement between representatives of (radically) different disciplines can be reached. I will also capture discursive mechanisms of constructing gender representations of defendants.

I carved out those segments from the reports that contained extracts from the case files and medical records of the defendants (usually schematic, consisting of extensive quotations) as well as more creative and free-flowing narrative segments where the experts describe the course of the examination, discuss the entirety total material and build arguments. Only the latter group has been included in the analysis. From it, I singled out two subcorpora: the subcorpus of reports concerning women (FPO_female), consisting of 235,821 tokens, and the subcorpus of reports concerning men (FPO_male), consisting of 425,555 tokens.

	FPO_female	FPO_male
Number of tokens	235821	425555
Average number of tokens per report	3368.87	2745.52
Lemma/token ratio	0.03	0.02
Average sentence length in tokens	12.78	12.56
Number of verbs per sentence	1.15	1.08
Frequency of verb forms		
In total	31479 (13.35%)	55632 (13.07%)
First Person Singular	3772 (11.98%)	4982 (8.96%)
First Person Plural	509 (1.62%)	1008 (1.81%)
Third Person Singular	20957 (66.57%)	38480 (69.17%)
Third Person Plural	2510 (7.97%)	4772 (8.58%)
Infinitive	2631 (8.36%)	4451 (8.0%)
Impersonal Verbs	982 (3.12%)	1790 (3.22%)
Present Tense	7648 (24.3%)	15825 (28.45%)
Past Tense	20362 (64.68%)	34005 (61.12%)
Future Tense	568 (1.8%)	890 (1.6%)
Frequency of pronoun forms		
In total	6372 (2.7%)	9030 (2.12%)
First Person Singular	1704 (26.74%)	1657 (18.35%)
First Person Plural	110 (1.73%)	175 (1.94%)
Third Person Singular	4065 (63.79%)	6338 (70.19%)
Third Person Plural	448 (7.03%)	816 (9.04%)
Frequency of sentiment words		
Positive	9205 (3.9%)	15928 (3.74%)
Negative	7214 (3.06%)	12915 (3.03%)

Table 1. Comparison of FPO_female and FPO_male in terms of selected grammatical and semantic features

Keyword analysis identified vocabulary that was specific to reports about women and reports about men. The FPO_female subcorpus contained significantly more words describing specific family members, rooms or equipment and housework. The experts portrayed female subjects as susceptible to stress and incapable of coping with social pressures. They also diagnosed women in terms of acute reaction to stress (this diagnosis was never applied to men). Men were more likely to be described as "impulsive," "aggressive" and "hyperactive," i.e. their emotional condition was therefore supposed to manifest itself through increased activity, whereas women were described as expressing emotions through "crying."

CONCLUSIONS

Polish forensic psychiatrists struggle with translating the language of medicine into the language of the law. The lack of consistency in referring to the person assessed indicates that it is difficult for them to abandon the vocabulary used in everyday medical practice and replace the doctor-patient relationship with an expert-subject relationship.

Experts do not build their reports as a narrative about the offender. They constrained the presence of the author's voice and did not use the narrative form in their reports.

My analysis confirmed the persistence of traditional representations of femininity and masculinity in forensic psychiatric discourse. At the same time, I have highlighted contradictions in the narrative construction of defendants' identities: I have observed that forensic experts, on the one hand, were more likely to give voice to female defendants in comparison to male ones, and were also more likely to describe the former in terms of their activities. On the other hand, experts used dehumanising terms, thus depriving female subjects of agency, and presented them in a medical rather than legal context.

CORPUS

As the core research material, I compiled a corpus consisting of 225 written psychiatric reports issued by Polish forensic experts, including 70 reports concerning women and 155 on men. The corpus includes reports from 2009–2020, where the experts were tasked with assessing the sanity of the subjects. It consists of 1,536,809 tokens.

The material comes from a variety of sources: 59 reports were made available by a psychiatric reference centre in Poland, and 166 come from 7 district courts from different parts of the country (Fig. 1). In the former case, the coverage of the reports was not narrowed down, whereas in the latter case only documents referring to perpetrators of violent crimes were selected for analysis.

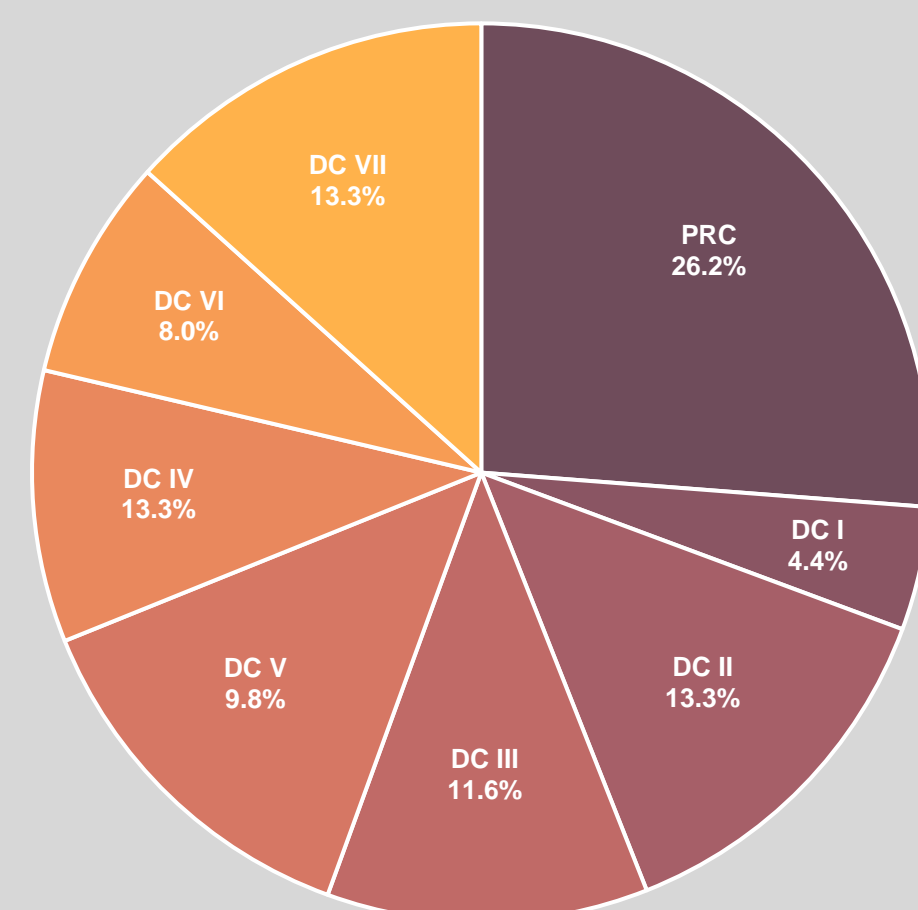


Figure 1. Characteristics of the corpus by source of documents

The reports were written by 107 different experts working in 101 teams. In 79 cases (35.11%), the reports were issued after a hospital observation. In the remaining cases, examination was conducted on an outpatient basis.

I obtained the documents in the form of photocopies. I carried out digitisation using OCR, semi-automatic text cleaning and anonymisation. I also precisely described reports with possibly complete metadata.

METHODS

My study is based on the mixed-methods approach. I combine methods that are extremely rarely employed in analysis conducted at the intersection of law, psychiatry and language: computational text analysis and discourse analysis developed in the sociology of science and discursive psychology.

I identify the singularities of the language of forensic psychiatry and forensic psychiatric reports as a genre. I compare, on the one hand, forensic psychiatric reports with strictly medical and legal texts, and, on the other hand, reports concerning men with reports on women. I analyse lexical, grammatical and narrative features, and further on, identify the interpretative repertoires used by Polish forensic experts. Employing tools provided by CLARIN-PL I conduct, i.a., stylometric analysis, sentiment analysis and in-depth semantic analysis using plWordNet.

A comparison of how psychiatrists referred to the subjects can provide information on how the identity of defendants was constructed (Tab. 2). Forensic experts most commonly used forms indicating the role of women and men in the situation of psychiatric examination ("the examined person"), opinion-giving ("the opinion subject") and in court proceedings ("the accused/defendant" and "the suspect") or used their full names. Experts often used the term "patient" to refer to the subjects of the assessment. In psychiatric reports concerning men, experts were more likely to use the full name of the defendant and the terms "opinion subject" and "the suspect." In contrast, they were more likely to refer to women as "the examined person" and "the patient" or to avoid additional terms by using pronominal forms.

	Frequency per 1000 tokens	
	FPO_female	FPO_male
full name	3.08	3.53
"opiniowany" [the opinion subject]	1.01	2.13
"badany" [the examined person]	1.77	1.64
"oskarżony" [the accused/defendant]	0.39	0.34
"podejrzany" [the suspect]	0.79	1.09
"pacjent" [the patient]	0.90	0.50

Table 2. Frequency of naming strategies in FPO_female and FPO_male

The authorship attribution analysis did not indicate similarity between the reports by data source (except RPC). Some similarity was captured in the analysis of grammatical style (Fig. 2). There was also a noticeable similarity based on the type of examination conducted (either a one-time outpatient examination or a hospital observation) and the experts' team issuing the report. However, some reports prepared by the same psychiatrists in different cases differed significantly in terms of style. The influence of particular variables requires further in-depth analysis.

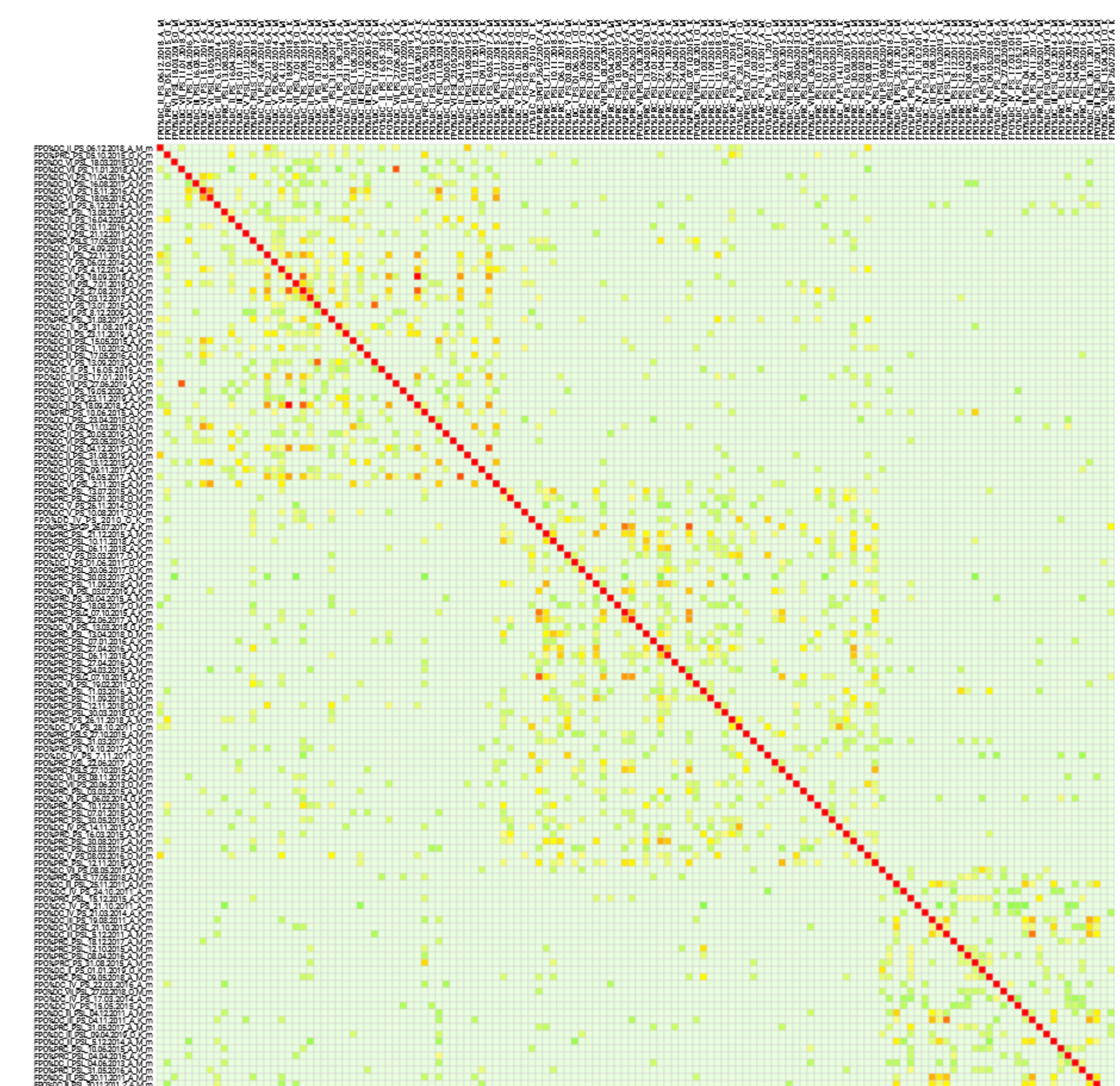


Figure 2. Results of grammatical style analysis of forensic psychiatric reports using WebSty presented in the form of a heat map (excerpt)