Therapeutic Jurisprudence

Prevention in the field of law and mental health

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I. Introduction

1. Personal introduction: MD and psychiatrist, social psychiatrist, family or systems therapist, clinical experience of 32 years.
2. Theoretical introduction: definitions and differences of language and thinking
   - The term of therapeutic jurisprudence is a contradiction in itself, and I don't know if I use it correctly.

     What lawyers and psychiatrists have in common as compared to engineers and other medical doctors is that they are both still quite close to religion and philosophy and further away from the real sciences, so a lot of discussion is about belief systems. How do they differ:
   - Juridical professionals speak an adversary language, a language of dualism, right and wrong, offender/victim, guilty/not guilty, black/white, the means for change of human behaviour is punishment rather than support
   - Medical professionals speak a diagnostic language, sick vs normal, they think in different diagnostic categories as fixed static entities or images. Yet the brain, the location of the mental illness is the most complex, flexible organ with the greatest plasticity.
   - Family therapists or systems therapists think in terms of interpersonal conflict and conflict resolution, which always means growth, development, in more general terms „process".
   - The concept of prevention „lat. „praevenire", implies getting into the process before the illness comes preventing something bad evil or sick getting in the way of illness, mental illness being conceived as a fixed static entity such as „psychopathy".
   - But mental illness is usually an inhibited growth process of the individual and the family a blocked development.
   - Avoiding a mental illness promoting mental health would rather imply promoting a normal development than inhibiting any thing called illness.

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- My definition of prevention: intelligent careful, one could say mindful intervention at a critical moment of the developmental stage of a person or a family system.
- What do juridical and mental health professionals have in common is that they have endless academic fights for dominance over who is right and who is wrong as e.g. „nature" Vs „nurture", „sick" vs „guilty" instead of more careful exploration of the reality of the offender/delinquent or the patient and his history.
- What they also have in common is that they make many interventions which do more harm than help, intensify the pathological process, but nevertheless are continued.

II. What are the consequences of these thoughts

- More careful studies of the individual history of the delinquent rather than collecting statistical data, statistical data never get the process, they only get generalized static pictures.
- Looking for nodal events or crossroads in the delinquent person's life and imagine what one might have done to prevent the negative course the pathological pathway (prevention after the fact).
- Draw generalized complex conclusions from the individual delinquent cases and feed them back to the earlier systems, such as school systems, parents' support systems, which are responsible for the child's health at an earlier stage such as early childhood for preventive projects.
- Example: Early intervention studies with preventive effect: Support of parents of little children have a preventive effect for these children in adolescence in terms of delinquence.

III. What meaning does the debate of nature vs nurture organic/genetic vs educational defect, medical vs psychological problems have for prevention

- This is another example of adversary thinking which does not lead us anywhere, but into nice exciting academic arena fights for dominance discussions, but no problem resolution.
- The answer is nature plus nurture. A certain type of nature or genetic make up (hard ware you might say) combined with a special type of nurture or lets

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say lack of nurture and education by punishment leads up to the psychopathology or illness.

- E.g. Children with slight brain dysfunction (in the prefrontal lobe) such a ADD need specially sensitive and attentive parents in order to grow up normally, in other words, these parents need special support.
- The support and professional advice of these parents and teachers is a preventive intervention against delinquency.
- This preventive intervention is not against the pathological symptom but for the environment around the sensitive individual.
- ADD children can also turn schizophrenic, this is even more the case, when they smoke pot or take any other hallucinogenics. The delineating factor is the educational style and the atmosphere in the family.

IV. What is the role of the legal and mental health system in prevention in the field of law and mental health

- The legal system could collect viable meaningful individual process data to improve our learning and knowledge for preventive interventions.
- It also can provide a secure framework in which the therapeutic growth process can take place.
- It should obstain from punishment as a corrective measure of behaviour when this is only counterproductive because it deteriorates the growth process and get help from other professionals such as system therapist.
- The legal professionals and the mental health professionals should work out practical problem solutions rather than writing piles of expertises and legal documents, conducting extensive adversary academic exchanges of problem solutions which lead nowhere but to their own profile making.
- Legal and mental health professionals should rather form a mindful collective body or form a collective mindfulness, bring their different know how together and work out more mindful problem solutions for the present and the future, rather than traumatizing their „victims“ professionally and cause or promote iatrogemic or juridicogemic further diseases and further delinquency.
- By doing so we might catch up with the technical progress in medicine on the human axis of ethics rather than falling behind. We will work in the direction of

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what Els Borst and Benk Korthals have outlined the two ministers of our host country to this 28th congress of law and mental health.

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