A Medico-judicial framework for rehabilitation of forensic psychiatric patients in Zimbabwe

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Introduction and Context

- Forensic psychiatric patients are admitted for rehabilitation in what are called Special Institutions in Zimbabwe.
- These institutions are hospitals located within a prison setting.
- Patients are discharged from Special institutions following the recommendations of the Special Boards and Mental Health Review Tribunal.
- Their port of exit is to a general psychiatric hospital for rehabilitation and not into the community as expected.
- They often stay in these institutions for more than five years and some are eventually sent back to Special Institutions creating a revolving door scenario.
Observation

- I observed that there were no guidelines for forensic psychiatric practice and no clear documentation on procedures to be followed in the rehabilitation process in Zimbabwe.
- An average Zimbabwean should have been able to follow the entry-exit process in the continuum of care for the forensic psychiatric patient.
- At the time of the conception of the research study, the medico-judicial marriage with regards to rehabilitation of forensic psychiatric patients in special institutions was blurred and discordant.
Methodology

- Grounded theory (Charmaz 2006, 2014)
- Exploratory partially mixed sequential dominant status design
- Theoretical framework: Pierre Bourdieu’s, conceptual canon of habitus, field and capital
Participants

- Purposefully selected
- Theoretical sampling
- Included:
  - Judiciary
  - Patients
  - Patients’ family
  - Psychiatrists
  - Nurses
  - Social workers
  - 119 documents/patients’ files
Preferred future Medico-Judicial Framework for the rehabilitation of forensic psychiatric patients in special institutions in Zimbabwe.
• Guidelines for implementing the framework: The vision of a new medico-judicial cosmos

• Exposing the dinosaur of obsolescence: Revision of the Mental Health Act of 1996

• Change of names and location for the special institutions: Renaming and finding a new home for forensic psychiatry, ‘the bastard child’

• Realigning the conatus seseconservandi: Medical staffing of the remand prison

• Realigning the engine and the anchor: In-service training workshops for the judiciary
- Locating the missing pieces: Awareness campaigns

- Repairing the cracked mirror: More psychiatric trained staff than guards in forensic hospital

- Exposing the dinosaur of pluralism: Special office and separate clerk of court

- Embracing a world without clones: Separating criminal mental patients and forensic psychiatric patients
Navigating the libido dominandi: Integrating the Mental Health Act with the Prison Act of 1996
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