# The (un)translatability of languages: discursive strategies of forensic psychiatrists

Agnieszka Karlińska

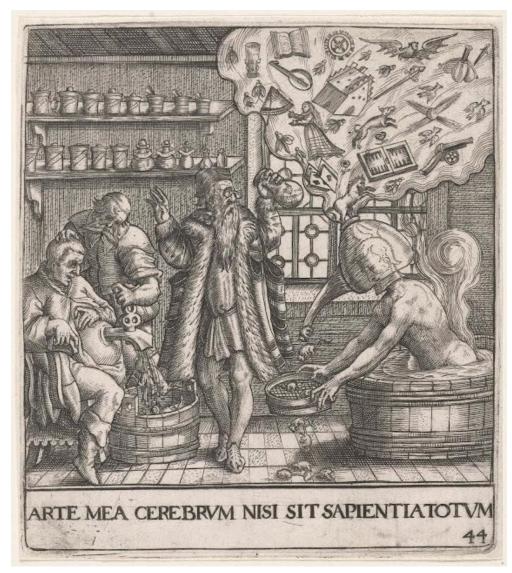








https://www.metmuseum.org/art/collection/search/703195



https://www.rijksmuseum.nl/en/collection/RP-P-BI-5230

### **Background**

- Forensic psychiatrists have to reconcile two discourses, legal and medical
- Forensic reports do not have the status of objective, impersonal documents
- Experts are not independent of the broader social context including gender stereotypes

**RQ1:** How the meaning of normality is developed at the interface of psychiatry and law?

**RQ2:** How medical-psychological categories are translated into legal categories?

**RQ3:** What are the discursive mechanisms for constructing gendered representations of the defendants?

## Corpus

- 225 written psychiatric reports issued by 107 Polish experts
- 70 reports concerning women and 155 on men
- scope: legal sanity evaluation
- size: 1,536,809 tokens
- source: 7 district courts and psychiatric reference centre

#### **Methods**

- mixed-methods approach:
  - computational text analysis
  - discourse analysis developed in the sociology of science and discursive psychology
- use of the CLARIN-PL tools: stylometric analysis, sentiment analysis and in-depth semantic analysis using plWordNet

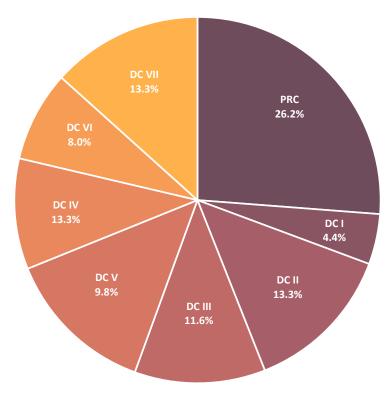


Fig. 1. Characteristics of the corpus by source of documents

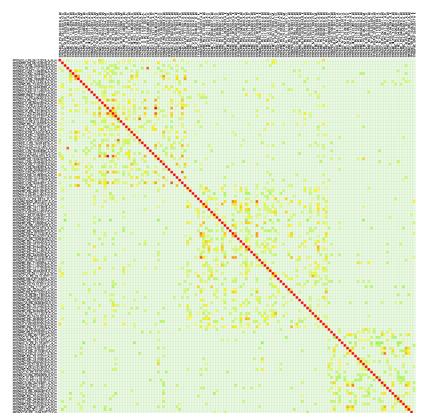


Fig. 2. Results of grammatical style analysis of forensic psychiatric reports using WebSty presented in the form of a heat map (excerpt)

#### Results

- Polish forensic psychiatrists struggle to translate the language of medicine into the language of the law
- It is difficult for psychiatrists to abandon the vocabulary used in everyday medical practice and replace the doctor-patient relationship with an expert-subject relationship
- Experts constrain the presence of the author's voice and do not use the narrative form in their reports
- The analysis confirmed the persistence of traditional representations of femininity and masculinity in forensic psychiatric discourse

# Thank you!

Agnieszka Karlińska

agnieszka.karlinska@ibl.waw.pl @a\_karlinska



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