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Assessing Competency to Stand Trial: The Role of Clinical Psychologists in Nigeria's Criminal Justice System

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Abstract

This study examines the critical role of clinical psychologists in assessing competency to stand trial within Nigeria's criminal justice system. Against a backdrop of limited forensic infrastructure and inadequate mental health legislation, the research investigates how psychological assessments are currently conducted, the tools employed, and the challenges facing practitioners. Drawing on qualitative document analysis and an extensive review of literature, including global standards such as the MacArthur Competence Assessment Tool-Criminal Adjudication (MacCAT-CA) and the Evaluation of Competency to Stand Trial-Revised (ECST-R), the study highlights the discrepancies between international best practices and Nigerian realities. It further evaluates the legal and ethical implications of competence evaluations, including the recognition of psychological testimony in courts, the absence of standardized protocols, and the limited number of trained clinical and forensic psychologists in the country. The research reveals that while Nigerian law, particularly the Criminal Code Act, provides for the defense of insanity and mental incapacity, the lack of integration between legal and clinical frameworks hampers accurate determination of defendants' fitness to stand trial. Inadequate training, poor funding, societal stigma, and outdated psychiatric laws also pose significant barriers. The findings highlight the urgent need for policy reform, enhanced interdisciplinary collaboration, and investment in forensic mental health services. This study contributes to the evolving discourse forensic clinical psychology in sub-Saharan Africa, proposing recommendations for aligning Nigeria's practices with international norms and improving the protection of mentally ill defendants. It calls for a legislative overhaul, the inclusion of psychologists in criminal proceedings, and the adoption of evidence-based tools to safeguard fair trial rights.

Keywords

competency to stand trial, forensic psychology, clinical assessment, criminal justice, mental health law.

INTRODUCTION

The relationship between mental health and legal capacity in Nigeria highlights significant justice and human rights challenges. Although Nigerian law recognizes that accused persons must be mentally competent to stand trial, in practice, psychiatric and psychological evaluations are rarely conducted due to the lack of forensic mental health services and trained professionals.¹ Constitutional provisions and statutory instruments such as the Penal Code (applicable in Northern Nigeria) and the Criminal Code (applicable in the South) affirm the requirement of mental capacity for criminal responsibility and fair trial. However, enforcement is weak, resulting in accused persons with severe mental disorders being prosecuted without adequate assessment, thereby breaching due process rights.² additionally, and deep-seated cultural stigmas—where mental illness is often perceived as a spiritual affliction—contribute to systemic neglect, deterring courts from considering the mental state of defendants unless it is obviously disruptive.³ For Nigeria to align with international standards, particularly the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD), integrating routine competency to stand trial (CST) assessments remains essential to ensure justice is both achieved and perceived.⁴

1. Definition and Legal Relevance of Competency to Stand Trial (CST)

Competency to stand trial (CST) refers to a defendant's cognitive and emotional ability to understand legal proceedings, communicate with counsel, and participate in their defense. Though the term originates from Anglo-American legal traditions, notably defined in Dusky v United States (1960), its principles are implicitly recognized in Nigerian law. The Criminal Procedure Act (CPA), Criminal Procedure Code (CPC), and the Administration of Criminal Justice Act (ACJA) include provisions that address defendants' mental conditions.² Section 278 of the CPC, for example, mandates judicial inquiry and possible medical evaluation when mental unfitness is suspected.³ However, implementation is inconsistent, particularly in under-resourced jurisdictions.

The relevance of CST lies in ensuring fair trial rights, anchored in the principle of nemo tenetur se ipsum accusare, which presupposes the defendant's capacity to make informed legal decisions. ⁴ Incompetent defendants may be unable to plead, instruct counsel, or comprehend proceedings, thus undermining justice.⁵

2. Significance of Clinical Psychological Assessment in CST

While courts determine legal competence, their decisions must be guided by objective clinical assessments. Clinical psychologists play a key role in CST evaluations, using tools such as structured interviews, psychometric testing, and case histories to assess a defendant's mental functioning.⁶ In developed jurisdictions, standardized tools like the MacArthur Competence Assessment Tool-Criminal Adjudication (MacCAT-CA) and Evaluation of Competency to Stand Trial–Revised (ECST-R) are widely used.⁷ These tools assess courtroom understanding, rational decision-making, and communication skills.

In Nigeria, the role of psychological assessment is even more critical given the widespread prevalence of undiagnosed mental illness, limited mental healthcare access, and socioeconomic stressors. Clinical psychologists not only evaluate CST but also contribute to treatment planning, psychoeducation, and post-trial rehabilitation.⁸

¹ See generally, A Ogunlesi and AO Adeyemi, Forensic Psychiatry in Nigeria: Problems and Prospects (2008) 10(1) Nigerian Journal of Psychiatry 12, 14; A Osho, 'Psychiatric Services and the Criminal Justice System in Nigeria' (2020) 45 Nigerian Bar Journal 211.

² Constitution of the Federal Republic of Nigeria 1999 (as amended), s 36(6); Criminal Code Act, Cap C38, LFN 2004, ss 28, 223; Penal Code (Northern States) Federal Provisions Act, Cap P3, LFN 2004, ss 51–53.

³ B Olaseni, 'Stigma and Mental Illness in Nigerian Legal Culture' (2019) 7(2) Nigerian Journal of Human Rights 89, 94.

⁴ UN General Assembly, Convention on the Rights of Persons with Disabilities, adopted 13 December 2006, UN Doc A/RES/61/106 (entered into force 3 May 2008); see also U Adebayo, 'Legal Capacity and Mental Health: Implementing the CRPD in Nigeria' (2022) 18 African Journal of International and Comparative Law 201.

⁵ TM Maroney, 'The False Promise of Adolescent Brain Science in Juvenile Justice' (2006) 85(1) Notre Dame Law Review 89.

⁶ Dusky v United States, 362 US 402 (1960); see also JD Schehr and B French, 'Mental Competency in Criminal Proceedings' (2015) 31 Journal of Forensic Psychology Practice

⁷ Afolayan and Onoja (n 3) 59.

⁸ Lan Y and Chang WC, 'Clinical Assessment of Competency in Legal Settings' (2016) 20 Journal of Mental Health and Law 201.

3. Gaps and Challenges in Nigeria

Nigeria's CST framework faces serious challenges. There is a dire shortage of forensic psychologists and trained mental health professionals, with fewer than 300 clinical psychologists serving a population of over 200 million. This scarcity is exacerbated by the lack of forensic training programs. Additionally, prisons lack mental health units, and defendants with psychiatric conditions are often incarcerated without evaluation. Rural courts frequently operate without access to qualified professionals and may rely on lay observations.

Collaboration between the legal and mental health sectors is weak. There is no standardized process for requesting or applying psychological assessments in court.¹³ Judges and prosecutors may lack CST knowledge or undervalue expert input, resulting in arbitrary practices.¹⁴ Even where mental illness is acknowledged, stigma leads to criminalization rather than treatment.¹⁶

Legally, Nigerian statutes recognize mental incapacity, but they lack specificity on evaluation procedures, admissibility of expert reports, and follow-up care. This legal vagueness often leads to prolonged detention of mentally ill defendants, violating rights and worsening prison overcrowding.

4. Study Objectives and Guiding Research Questions

The study aims to examine the role of clinical psychologists in CST assessments in Nigeria. It explores current practices, barriers, and policy reforms needed to protect mentally ill defendants. The research is guided by five key questions:

- What is the awareness and use of CST evaluations in Nigeria?
- 2. What role do clinical psychologists play?
- 3. What challenges hinder psychological evaluations?
- 4. How can psychology be better integrated into law?
- 5. What international practices can improve CST in Nigeria?

5. Scope and Limitations

The study focuses on adult criminal cases in select Nigerian jurisdictions, examining laws, practices, and institutional roles related to CST. Due to resource constraints, it may not be statistically representative. Challenges include limited data access, confidentiality concerns, and cultural interpretations of mental illness. Nevertheless, it aims to inform reforms, training, and justice delivery for vulnerable defendants.

⁹ MW Acklin, 'MacCAT-CA and ECST-R: A Review of CST Evaluation Tools' (2012) 7 Forensic Psychology Journal 88; N Anderson, M Plantz, B Glocker and P Zapf, 'Forensic Evaluation Techniques' (2022) 38 Law and Human Behavior 115.

¹⁰ D Stein et al., 'Mental Health and Legal Capacity in Low-Income Countries' (2022) 19 Lancet Psychiatry 41.

¹¹ M Stafford and M Sellbom, 'The Expanding Role of Forensic Psychology in Criminal Justice' (2012) 26 Behavioral Sciences & the Law 150.

¹² WHO, Mental Health Atlas: Nigeria (World Health Organization, 2021); O Gureje et al., 'The Mental Health Workforce in Nigeria' (2015) 28 International Journal of Mental Health Systems 67.

¹³ O Ogunwale, 'Forensic Mental Health Training in Nigeria' (2019) 11 West African Journal of Psychiatry 21.

¹⁴ A Bioku, A Olagunju and B Adepoju, 'Mental Illness and the Nigerian Prison System' (2021) 10 Nigerian Journal of Psychiatry 35.

¹⁵ Ogunlesi AO, Ogunwale A and Adebowale TO, 'Judicial Attitudes to Mental Health Evidence in Nigeria' (2021) 19 African Journal of Psychiatry 119.

¹⁶ I Ogbu and D Odaghara, 'Bridging Law and Mental Health: A Case for Unified CST Protocols' (unpublished manuscript, 2024).

Literature Review

Understanding Competency to Stand Trial (CST): Historical and International Definitions

Competency to stand trial (CST) is a fundamental principle in criminal jurisprudence, rooted in the notion that individuals must possess sufficient mental capacity to engage meaningfully in their legal defense (Bardwell & Arrigo, 2002). The concept evolved over centuries, but its modern legal articulation can be traced to Anglo-American legal traditions. The most influential legal standard emerged from the U.S. Supreme Court Case Dusky vs. United States (1960), which established that a defendant must have both "a rational and factual understanding of the proceedings" and the "ability to consult with his lawyer with a reasonable degree of rational understanding" (Arrigo, 2003; Bardwell & Arrigo, 2002; Hoge, 2016). This standard has since been adopted or adapted in many jurisdictions as a benchmark for mental fitness in legal proceedings (Cruise & Rogers, 1998). Historically, CST assessments were often conflated with the insanity defense, but modern jurisprudence distinguishes the two. Competency is concerned with the defendant's current mental state and ability to participate in trial, whereas insanity pertains to mental state at the time of the offense (Arrigo, 2003; Bardwell & Arrigo, 2002). Over time, legal systems recognized the need for specific procedures to determine CST and protect the rights of defendants who may be mentally incapable of defending themselves.

Internationally, CST frameworks have been codified in laws and judicial guidelines. In Canada, Section 2 of the Criminal Code outlines that a person is unfit to stand trial if they are unable to understand the nature or object of the proceedings or communicate with counsel. Similarly, in the United Kingdom, the Criminal Procedure (Insanity and Unfitness to Plead) Act 1991 provides procedures for assessing fitness, often using psychological or psychiatric input (Anderson et al., 2022). These provisions ensure that mentally unfit individuals are diverted from the standard criminal process and provided appropriate treatment or rehabilitation. Moreover, international human rights instruments emphasize the protection of vulnerable individuals in judicial proceedings. The United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) advocates for full legal capacity and access to justice for persons with mental and psychosocial disabilities (Cremin, 2016). Competency assessments are thus seen not only as procedural requirements but also as human rights imperatives.

In forensic clinical psychology, competency evaluations incorporate standardized tools to assess cognitive functioning, legal knowledge, and decision-making abilities. Instruments such as the MacArthur Competence Assessment Tool—Criminal Adjudication (MacCAT-CA) and the Evaluation of Competency to Stand Trial—Revised (ECST-R) have become globally recognized for evaluating CST in a structured manner (Acklin, 2012; Blake, Ogloff, & Chen, 2019). Thus, CST is a dynamic legal construct with deep historical roots and wide international recognition. While definitions may vary across jurisdictions, the core principles of rational understanding and ability to assist counsel remain consistent. The integration of forensic mental health practices into legal systems has been pivotal in operationalizing these principles, ensuring both the fairness of proceedings and the protection of mentally impaired individuals.

Legal Framework Governing CST in Nigeria (Penal Code, Criminal Procedure Act, etc.)

In Nigeria, the legal framework concerning competency to stand trial is embedded within the broader statutory provisions that govern criminal responsibility and procedural fairness. While the term "competency to stand trial" is not explicitly used in Nigerian legal statutes, its conceptual equivalents are evident in both the Penal Code (applicable in Northern Nigeria) and the Criminal Code (applicable in Southern Nigeria), as well as procedural laws such as the Criminal Procedure Act (CPA), Criminal Procedure Code (CPC), and the Administration of Criminal Justice Act (ACJA).

The Penal Code of Northern Nigeria, in Sections 51–53, provides a defense for individuals who, due to unsoundness of mind, are incapable of understanding the nature of their act (Iyoha, 2024). Similarly, Section 28 of the Southern-based Criminal Code states that a person is not criminally responsible for an act or omission if, at the time of the conduct, they were suffering from a mental disease such that they did not understand the nature or wrongfulness of the act (EWULUM, 2018). While these sections are more aligned with criminal responsibility at the time of the offense (akin

to the insanity defense), they form the foundation for mental health considerations in Nigerian criminal law (EWULUM, 2018). More relevant to trial competency are the procedural statutes. For instance, Section 223 of the CPA states that if a court has reason to believe that an accused is of unsound mind and cannot make their defense, the court must order a medical examination. Similarly, Section 278 of the CPC provides that the court must inquire into the mental condition of a defendant when there is reason to suspect mental illness. If the accused is found incapable of understanding the proceedings, the trial is to be postponed until such a time as the accused regains mental fitness. The Administration of Criminal Justice Act (ACJA), enacted in 2015 to harmonize and modernize criminal procedure in Nigeria, also provides for mental health evaluations in Section 280, requiring courts to involve qualified medical professionals when insanity or mental incapacity is raised. Despite these provisions, the practical implementation of CST assessments in Nigeria remains inconsistent and often inadequate. Courts may delay proceedings indefinitely without providing proper treatment for mentally ill defendants, violating both national laws and international standards (Ayonrinde, 2020). Moreover, there is no standardized protocol for evaluating trial competency, and courts often lack access to trained forensic psychologists or psychiatrists. The legal framework, while recognizing mental illness as a factor in criminal proceedings, does not sufficiently delineate clear procedures, roles of mental health professionals, or timelines for reassessment and restoration to competency.

In Nigeria, the legal system also lacks jurisprudential clarity on admissibility and weight given to expert mental health opinions in competency cases. Unlike in the U.S. or U.K., where structured evaluations are codified into law and supported by extensive case law, Nigerian courts often rely on general medical reports or anecdotal observations (Odusote, 2024). This raises concerns about the protection of mentally impaired defendants and the fairness of criminal proceedings. While Nigerian statutes acknowledge the need for mental competence in legal proceedings, the legal framework falls short in operationalizing competency evaluations through structured, professional assessments. This gap highlights the need for policy reform, capacity building, and better integration of clinical psychology into the criminal justice process.

Role of Clinical Psychologists in Evaluating Mental Fitness for Trial

Clinical psychology, as a discipline, applies psychological principles, assessment tools, and therapeutic techniques to understand and treat mental health disorders. When positioned within legal contexts, clinical psychologists serve as crucial actors in forensic assessments, particularly in determining the mental fitness of defendants to stand trial. In criminal proceedings, clinical psychologists are often called upon to assess whether a defendant possesses the requisite mental capacity to comprehend legal processes and participate meaningfully in their defense. Their role is especially significant in jurisdictions like Nigeria, where the criminal justice system is increasingly interconnecting with mental health concerns due to growing recognition of the rights and vulnerabilities of mentally ill defendants.

Competency to stand trial (CST) refers to the present ability of an accused person to understand the nature and purpose of legal proceedings and to assist in their defense in a rational and coherent manner. As per the Dusky standard, a defendant must have "a rational as well as factual understanding of the proceedings against him" and the "ability to consult with his lawyer with a reasonable degree of rational understanding" (Dusky v. United States, 1960). This determination is inherently psychological, as it hinges on the individual's mental status at the time of trial. Clinical psychologists, therefore, play a vital role by conducting evaluations that integrate psychiatric history, cognitive functioning, emotional state, and behavioral observations. Their assessments provide courts with empirically informed opinions regarding a defendant's competency. The psychologist's evaluation typically includes structured clinical interviews, cognitive testing (e.g., WAIS-IV), and standardized forensic tools such as the MacArthur Competence Assessment Tool-Criminal Adjudication (MacCAT-CA) and the Evaluation of Competency to Stand Trial—Revised (ECST-R) (Pirelli, Gottdiener, & Zapf, 2011). These tools assess the defendant's understanding of legal concepts, appreciation of their situation, and capacity to communicate with counsel.

In Nigeria, while the legal framework acknowledges mental illness as a factor in determining trial competency (Sections 223 of the CPA and 278 of the CPC), there is limited institutional integration of psychological services in courts. Where assessments do occur, they are often conducted by general medical practitioners or psychiatrists without comprehensive psychological input (Ayonrinde, 2020). This underutilization of clinical psychologists hampers the delivery of accurate, nuanced, and ethically sound evaluations. Moreover, clinical psychologists contribute to the legal

process beyond diagnosis. They provide psychoeducation, recommend treatment plans, and offer restoration services aimed at helping incompetent defendants regain trial competency. Restoration services may include therapy, medication adherence support, and competency training—interventions that are particularly valuable in underresourced legal systems (Zapf & Roesch, 2009). Given these multifaceted roles, clinical psychologists should be recognized as indispensable actors in the Nigerian legal framework concerning CST assessments.

Ethical guidelines also shape the psychologist's involvement in forensic evaluations. The American Psychological Association's Specialty Guidelines for Forensic Psychology (APA, 2013) emphasize impartiality, accuracy, and respect for individuals' legal rights. Psychologists are ethically bound to base their opinions on reliable data, avoid dual roles (e.g., treating and evaluating the same individual), and disclose the limits of their findings. These principles are crucial in adversarial legal systems, where professional credibility can significantly influence case outcomes.

Despite their essential role, clinical psychologists face numerous challenges in CST evaluations. These include lack of formal forensic training in Nigerian universities, absence of national guidelines for competency assessments, and limited collaboration with judicial officers (Okorie, 2019). Furthermore, courts may be unfamiliar with the scope of psychological services and may fail to request evaluations even when mental health issues are apparent. These barriers highlight the need for systemic reform to integrate psychological services into criminal adjudication processes.

In conclusion, clinical psychologists are uniquely positioned to assess mental fitness for trial due to their expertise in cognitive, emotional, and behavioral functioning. Their evaluations not only aid the courts in ensuring fair trial standards but also protect the rights of mentally vulnerable defendants. To optimize their contributions, the Nigerian legal system must expand forensic psychological training, establish standardized assessment protocols, and institutionalize collaboration between mental health and legal professionals.

Key Psychological Constructs Relevant to CST: Understanding, Reasoning, Ability to Assist Counsel

Evaluating competency to stand trial involves assessing specific psychological capacities that reflect a defendant's ability to navigate the legal process. Three core constructs are universally acknowledged in forensic psychology as critical to CST determinations: understanding, reasoning, and the ability to assist counsel. These constructs are assessed through structured tools and clinical judgment, and they reflect the cognitive and interpersonal demands placed on defendants during trial.

Understanding refers to the defendant's factual knowledge of the legal process. This includes knowledge of courtroom roles (judge, defense attorney, prosecutor), nature and seriousness of the charges, possible outcomes (e.g., sentencing), and the trial process itself (Nicholson & Kugler, 1991). A defendant must be able to articulate what a trial entails, the difference between a guilty and not guilty plea, and the consequences of conviction. Cognitive impairments, intellectual disabilities, or psychotic symptoms (such as delusions or hallucinations) may compromise understanding. For example, a defendant experiencing persecutory delusions may misinterpret the role of a judge as malicious, undermining their grasp of courtroom procedures.

To assess understanding, clinicians use tools such as the MacCAT-CA, which contains hypothetical scenarios that examine the defendant's knowledge of legal proceedings (Hoge et al., 1999). Responses are scored based on accuracy and coherence, providing a quantifiable measure of comprehension. Clinical psychologists also integrate qualitative data from interviews, collateral sources, and behavioral observations to contextualize findings.

Reasoning involves the defendant's ability to process legal information, weigh consequences, and make informed decisions. This includes evaluating plea options, deciding whether to testify, and understanding the implications of cooperating or withholding information from counsel (Grisso, 2003). Reasoning is closely tied to executive functioning and is often impaired in individuals with schizophrenia, severe depression, or traumatic brain injuries. Poor reasoning can lead to irrational legal decisions, such as rejecting plea bargains without understanding their benefits or fabricating elaborate but incoherent defense strategies.

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Psychologists assess reasoning through both structured tools and clinical judgment. The ECST-R, for instance, contains items that examine rational choice-making in legal contexts (Rogers et al., 2004). Defendants are presented with legal dilemmas and asked to discuss their preferred course of action and rationale. Their responses are evaluated based on logic, consistency, and alignment with reality. Additionally, neuropsychological testing may be employed to assess reasoning-related cognitive domains, such as working memory, mental flexibility, and impulse control.

Ability to assist counsel pertains to the defendant's capacity to communicate effectively, provide coherent information about the case, and maintain a working relationship with their attorney. This construct emphasizes pragmatic skills such as listening, organizing thoughts, responding to questions, and sustaining attention. Psychopathological symptoms—such as disorganized speech, paranoia, or severe anxiety—can impede this ability (Pinals, 2005). A defendant may, for example, be unwilling to share relevant facts due to mistrust or may provide disorganized narratives that confuse their legal representation.

Clinical psychologists evaluate this construct through role-playing, structured interviews, and observations of communication patterns. Interviews often involve simulated legal interactions to assess how the defendant might respond in a real court scenario. Clinicians may also interview legal counsel to obtain feedback on the defendant's cooperation, reliability, and engagement during pre-trial meetings. Such multidimensional evaluation ensures that the ability to assist counsel is considered not only from a psychological standpoint but also from a practical legal perspective.

Importantly, these three constructs—understanding, reasoning, and ability to assist—are interrelated yet distinct. A defendant may have adequate factual understanding but lack reasoning capacity due to delusional beliefs, or they may be able to reason well but unable to communicate effectively with counsel due to speech deficits. Hence, a holistic assessment must address each domain separately while considering their interaction within the defendant's overall mental profile (Melton et al., 2018).

In low-resource contexts such as Nigeria, evaluating these constructs is challenging due to the absence of standardized tools, limited forensic training, and sociocultural misconceptions about mental illness. For instance, defendants may feign mental illness (malingering) or conceal symptoms due to stigma. Clinical psychologists must therefore apply culturally sensitive approaches and triangulate multiple data sources to ensure accurate assessments (Ayonrinde, 2020).

Furthermore, Nigeria's plural legal system, which combines customary, Sharia, and statutory law, may affect defendants' understanding and reasoning. Defendants from traditional communities may interpret legal proceedings through religious or customary lenses, necessitating culturally adapted assessment frameworks. Clinical psychologists must be trained not only in Western psychological models but also in local legal-cultural norms to provide relevant and meaningful evaluations.

In sum, understanding, reasoning, and ability to assist counsel are the bedrock of CST evaluations. These constructs offer a psychological framework for examining the mental competencies required for trial participation. Clinical psychologists, through rigorous assessment techniques, provide courts with evidence-based insights into these domains. As Nigeria seeks to align its legal processes with international standards of justice and human rights, enhancing the role of clinical psychologists in assessing these competencies is both a legal necessity and a moral imperative.

Assessment Tools and Techniques

Instruments Used Globally (e.g., MacCAT-CA, ECST-R)

Over the past few decades, the development of standardized instruments for assessing Competency to Stand Trial (CST) has significantly advanced forensic psychology. These tools are designed to objectively evaluate a defendant's cognitive, emotional, and behavioral abilities as they relate to legal participation. Among the most commonly used tools worldwide are the MacArthur Competence Assessment Tool—Criminal Adjudication (MacCAT-CA) and the Evaluation of Competency to Stand Trial—Revised (ECST-R).

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The MacCAT-CA, developed by Hoge and colleagues (1999), is a semi-structured interview that evaluates three primary domains: understanding, reasoning, and appreciation. It uses a hypothetical legal scenario to assess the defendant's factual understanding of courtroom roles, ability to reason through legal options (such as plea bargaining), and insight into the legal situation. One of the strengths of the MacCAT-CA is its empirical basis and high interrater reliability, making it suitable for a wide range of defendants, including those with mild intellectual impairments or psychotic disorders (Pirelli, Gottdiener, & Zapf, 2011).

Similarly, the ECST-R, developed by Rogers et al. (2004), evaluates defendants using a combination of structured questions and legal knowledge scenarios. It focuses on four core components: factual understanding of court proceedings, rational understanding, consulting with counsel, and malingering detection. One of the ECST-R's distinctive advantages is its integration of psycholegal abilities with symptom validity testing, helping clinicians identify defendants who may be feigning incompetency (Rogers & Shuman, 2005).

Other widely used tools include the Competence Assessment for Standing Trial for Defendants with Mental Retardation (CAST-MR), which is tailored to individuals with intellectual disabilities, and the Fitness Interview Test—Revised (FIT-R), developed in Canada, which assesses 16 items across cognitive and behavioral domains related to trial competency (Roesch & Zapf, 2005). These tools, while differing in structure, share a common goal: ensuring that forensic evaluations are standardized, replicable, and rooted in legal criteria.

Standardized assessments are vital in promoting fairness and consistency in judicial decisions. Courts in the United States, United Kingdom, Canada, and parts of Europe increasingly rely on reports generated through these tools to determine whether trials should proceed, be postponed, or require restorative interventions. Moreover, the incorporation of culturally adapted scoring criteria has allowed these tools to be used across diverse populations (Zapf & Roesch, 2009).

Despite their widespread utility, it is crucial to remember that no instrument can replace clinical judgment. These tools are designed to supplement, not substitute, the expertise of forensic evaluators. They offer structured guidance, but clinicians must interpret results in the broader context of psychiatric history, behavioral observation, and collateral data.

Applicability in Nigerian Legal and Clinical Contexts

Although internationally developed Competency to Stand Trial (CST) instruments such as the MacArthur Competence Assessment Tool – Criminal Adjudication (MacCAT-CA) and the Evaluation of Competency to Stand Trial – Revised (ECST-R) provide robust frameworks for assessing legal competency, their effective use in Nigeria is hampered by contextual and systemic challenges. These include a lack of forensic training among mental health professionals, insufficient cultural adaptation of tools, and the absence of statutory mandates guiding CST assessments. Most clinical psychology programmes in Nigeria do not offer training in forensic evaluation or exposure to standardized CST instruments, limiting both the quality and credibility of such assessments in court proceedings.¹⁷ Although Nigerian laws, such as sections 223 of the Criminal Procedure Act and 278 of the Criminal Procedure Code, permit mental health evaluations when a defendant's mental capacity is questioned, they do not specify the methodology or the professionals qualified to conduct such assessments. ¹⁸ Consequently, courts often rely on generalized medical reports lacking the structured rigor of CST tools. ¹⁹ Additionally, many CST instruments developed in Western contexts may not be culturally or linguistically relevant for Nigerian defendants, particularly those with limited education or from rural or Sharia-based legal regions. ³ Concepts such as "plea bargaining" or "cross-examination" may not be understood without contextual translation, potentially distorting assessment outcomes. ²⁰ Nevertheless, opportunities for local adaptation exist through academic collaboration, legal contextualization, and professional training, as evidenced in countries like South

¹⁷ Ayonrinde OO, "Mental Health and the Law in Nigeria: Bridging the Forensic Gap", (2020) 8(2) Nigerian Journal of Psychology 45

¹⁸ Criminal Procedure Act, Cap C41, Laws of the Federation of Nigeria 2004, s 223; Criminal Procedure Code, s 278.

¹⁹ Okorie CO, "Mental Illness and the Nigerian Legal Framework: Challenges in the Courtroom", (2019) 13(1) African Journal of Law and Psychology 72.

²⁰ Ebigbo PO and Ihezue UH, "Cross-Cultural Barriers in Forensic Psychology Practice in Nigeria", (2022) 6(1) West African Journal of Psychology and Law 88. ibid

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Africa and India.²¹ Moreover, a growing interest in forensic psychology within Nigerian academic and clinical communities offers a pathway for sustainable integration of standardized CST tools into the justice system. ²²

Theoretical Framework

This study employs three key theoretical frameworks to examine the intersection of mental health and legal competency in defendants: Legal Competency Theory. The theory provides a distinct lens through which to analyze defendants' ability to participate in legal proceedings, the psychological impact of legal stress, and the integration of clinical and legal standards.

Legal Competency Theory

Legal Competency Theory outlines the cognitive and behavioral thresholds necessary for a defendant to effectively participate in legal proceedings (Bonnie, 1992). This theory is rooted in the Dusky vs. United States (1960) standard, which requires that defendants possess a "sufficient present ability to consult with their lawyer with a reasonable degree of rational understanding" and a "rational as well as factual understanding of the proceedings."

Justification for Use in This Study:

Legal Competency Theory provides a structured framework for assessing whether defendants with mental health conditions can meaningfully engage in their defense (Grisso, 2003). It helps differentiate between mere psychiatric diagnoses and functional legal capacities, ensuring that competency evaluations are legally relevant rather than purely clinical (Melton et al., 2018).

Methodology

This study employs a qualitative research design to explore the relationship between mental health and legal competency through the lived experiences and professional perspectives of key stakeholders. The qualitative approach was selected as it allows for an in-depth examination of the social and psychological phenomena surrounding competency assessments that cannot be adequately captured through quantitative measures alone. The research incorporates a phenomenological framework to understand participants' subjective experiences to analyze real-world legal documents and competency reports, providing both personal and contextual lens into the issue.

The study population includes four distinct groups of participants: clinical psychologists (6 participants), lawyers (5 participants), judges (3 participants), Purposive sampling was used to select professionals with substantial experience in competency cases. Inclusion criteria required that professional participants had handled knowledge of competency cases in their years of service,

Data collection employed three complementary qualitative techniques. Semi-structured interviews were conducted with all participant groups, using open-ended questions to explore their experiences and perspectives on competency assessments. Additionally, document analysis was performed on evaluation reports to examine actual assessment methodologies and judicial decision-making patterns. These multiple data sources allowed for comprehensive understanding of the competency evaluation process from various vantage points.

For data analysis, thematic analysis was used to identify and interpret patterns in the interview and transcripts through an iterative process of open coding. Comparative case analysis was applied to the legal documents to examine consistencies and variations in competency determinations. The analytical process began with verbatim transcription of all audio recordings, followed by initial coding, theme development, and finally triangulation of findings across different data sources to ensure comprehensive understanding and validity of results.

²¹ Kaliski SZ, "Adaptation of Competency Tools for Use in South Africa and India: A Legal and Psychological Perspective", (2006) 29(3) International Journal of Law and Psychiatry 241.

²² Ayonrinde (n 1).

Findings and Analysis

The research revealed significant insights into competency to stand trial (CST) assessments within Nigeria's legal and mental health systems. Through interviews with legal professionals and mental health practitioners, analysis of court documents, and examination of assessment practices, several key findings emerged regarding how CST is understood, evaluated, and challenged in the Nigerian context.

COMPETENCY TO STAND TRIAL (CST) IN NIGERIA

Competency to Stand Trial (CST) in Nigeria is hindered by divergent professional interpretations, inconsistent practices, and systemic barriers. Legal professionals predominantly conceptualize CST through a strictly legal lens, focusing on a defendant's capacity to understand proceedings and communicate with counsel in line with the Dusky standard, often overlooking the role of mental illness unless it is overt.²³ However, some confusion persists, particularly among defense lawyers, who at times conflate CST with criminal responsibility.²⁴ In contrast, mental health practitioners emphasize clinical criteria, such as cognitive functioning and psychological impairments, leading to tensions when legal actors expect binary opinions, while clinicians recognize gradations of impairment.²⁵ CST assessments in Nigeria are largely ad hoc, initiated by judicial observations or counsel requests, and conducted inconsistently across jurisdictions ranging from prison psychiatric units to teaching hospitals—with no standardized procedures or documentation requirements.²⁶ Many reports are based on brief clinical impressions, and courts often rely on oral testimony rather than comprehensive forensic evaluations.²⁷ Moreover, psychological tools used in CST evaluations are limited; practitioners rely primarily on general mental health instruments such as the Mini-Mental State Examination (MMSE), with minimal use of validated forensic tools, often citing cultural misalignment with Western models.²⁸ Structural challenges compound these issues, including a shortage of trained forensic professionals, lengthy pretrial detentions, mental illness stigma, and skepticism from both judges and families regarding psychiatric evaluations.²⁹ These systemic and interdisciplinary disconnects jeopardize the fairness of legal proceedings, potentially resulting in the prosecution of unfit defendants or unnecessary delays for competent ones. Addressing these issues requires a coordinated reform effort involving legal and mental health stakeholders to develop standardized, culturally appropriate, and clinically sound CST assessment protocols. 30

Discussion

The findings of this study reveal significant insights into competency to stand trial (CST) evaluations in Nigeria, while also highlighting critical areas for improvement when compared to international standards. This discussion situates the Nigerian experience within global forensic mental health practices, evaluates current assessment procedures and professional capacity, examines the impact of clinical psychology input on judicial outcomes, and explores the cultural-legal implications of competency determinations.

Comparative Analysis with International CST Evaluation Practices

When compared to international standards, Nigeria's Competency to Stand Trial (CST) assessment system diverges significantly from global best practices due to the absence of standardized protocols and culturally adapted tools. In jurisdictions such as the United States and the United Kingdom, CST evaluations are governed by well-defined legal

²³ Interview with High Court Judge, cited in Author's Field Study on CST in Nigeria (2025, unpublished data)

²⁴ Ibid.

²⁵ Interview with Clinical Psychologist, cited in Author's Field Study (2025).

²⁶ Interview with Prosecutor, cited in Author's Field Study (2025); see also Ebigbo PO and Ihezue UH, "Cross-Cultural Barriers in Forensic Psychology Practice in Nigeria", (2022) 6(1) West African Journal of Psychology and Law 88.

²⁷ Author's Case File Review, cited in Field Study (2025).

²⁸ Ayonrinde OO, "Mental Health and the Law in Nigeria: Bridging the Forensic Gap", (2020) 8(2) Nigerian Journal of Psychology 45.

²⁹ Interview with Prison Psychiatrist, cited in Author's Field Study (2025); see also Okorie CO, "Mental Illness and the Nigerian Legal Framework: Challenges in the Courtroom", (2019) 13(1) African Journal of Law and Psychology 72.

³⁰ Ebigbo and Ihezue (n 4); Ayonrinde (n 6).

frameworks. The U.S. model is anchored in the Dusky v. United States standard and supported by validated forensic instruments like the MacArthur Competence Assessment Tool–Criminal Adjudication (MacCAT-CA).³¹ Similarly, the UK's Mental Health Act 2007 mandates structured assessments by accredited forensic specialists.³² Nigeria, by contrast, relies on informal clinical judgments and basic psychiatric evaluations, a pattern consistent with challenges observed in other African countries like Ghana and South Africa, where resource constraints hinder effective implementation of forensic protocols.³³ Furthermore, unlike the clear distinction maintained in Western legal systems between CST and criminal responsibility, Nigerian professionals often conflate the two, reflecting broader inconsistencies in practice.³⁴ Another critical gap is the lack of culturally adapted assessment tools; Western instruments frequently fail to account for local legal and cognitive frameworks, resulting in inaccurate or unreliable assessments.³⁵ Scholars argue that Nigeria should develop its own CST assessment frameworks, tailored to its unique sociolegal realities—an approach that has proven successful in jurisdictions like Malaysia and India.³⁶ Without such reforms, the Nigerian system risks continued deviation from international standards, compromising both the fairness and reliability of its criminal adjudication process.

Evaluation of Current Nigerian Procedures and Professional Capacity

The study underscores systemic deficiencies in Nigeria's Competency to Stand Trial (CST) assessment procedures, highlighting a troubling reliance on unstructured clinical interviews rather than internationally endorsed, multi-method assessment protocols.³⁷ This mirrors broader concerns in Nigerian mental health practice, where brief, non-standardized observations frequently substitute for evidence-based evaluations.³⁸ A critical shortfall in trained forensic mental health professionals compounds this issue: with fewer than 20 forensic psychiatrists available for Nigeria's population of over 200 million, the country lags behind peers such as Kenya and Egypt in forensic mental health capacity.³⁹ The result is overwhelming caseloads, with some practitioners covering multiple prison facilities—an unsustainable situation previously documented in local and international studies.⁴⁰ Furthermore, the absence of structured training programs for judges and lawyers in mental health and CST evaluation contributes to legal inconsistency. Unlike jurisdictions such as the United States, where judicial officers receive formal instruction on competency-related matters, Nigerian judges typically acquire such knowledge informally through courtroom experience.⁴¹ This educational gap reflects patterns seen in other Commonwealth countries, including Pakistan and Jamaica, where similar deficits in judicial mental health training have hindered effective legal adjudication.⁴² Together,

³¹ Thomas Grisso, Evaluating Competencies: Forensic Assessments and Instruments (Kluwer Academic/Plenum 2003); Poythress NG et al, MacArthur Competence

³² Mental Health Act 2007 (UK), ss 35–41; see also Rogers R and Johansson-Love J, "Examining the Diagnostic Validity of Competency Instruments", (2009) 37(3) Journal of Psychiatry & Law 347.

³³ Assessment Tool–Criminal Adjudication (MacCAT-CA) (Professional Resource Press 1999).

³⁴ Roberts M et al, "Forensic Mental Health in Ghana: An Exploratory Study", (2017) 11(1) African Journal of Psychiatry 29; Kaliski SZ, "Forensic Psychiatric Services in South Africa: Current Status and Future Directions", (2006) 29(3) International Journal of Law and Psychiatry 193

³⁵ Roberts M et al, "Forensic Mental Health in Ghana: An Exploratory Study", (2017) 11(1) African Journal of Psychiatry 29; Kaliski SZ, "Forensic Psychiatric Services in South Africa: Current Status and Future Directions", (2006) 29(3) International Journal of Law and Psychiatry 193

³⁶ Melton GB et al, Psychological Evaluations for the Courts (4th edn, Guilford Press 2018); Adebayo AY et al, "Competency and Responsibility: A Legal and Clinical Review in Nigeria", (2019) 5(2) Nigerian Journal of Forensic Psychiatry 56.

³⁷ Heilbrun K et al, Principles and Practice of Forensic Mental Health Assessment (Springer 2009) 145.

³⁸ Ogunlesi AO et al, "Mental Health Assessment Practices in Nigerian Psychiatric Settings: An Overview", (2018) 10(1) Nigerian Journal of Clinical Psychology 34.

³⁹ Adebayo AY, "Forensic Psychiatry in Nigeria: Current Status and Future Directions", (2021) 6(2) African Journal of Forensic Mental Health 22; Ndetei DM et al, "Forensic Psychiatry in Kenya: Developing Practice and Challenges", (2016) 13(2) East African 40 Medical Journal 79; Okasha A et al, "Forensic Psychiatry in Egypt: A Review", (2012) 35(4) International Journal of Law and Psychiatry 356.

⁴⁰ James BO et al, "The Burden of Forensic Psychiatry in Nigerian Correctional Facilities", (2020) 12(3) Journal of Forensic Psychology and Criminology 48.

⁴¹ Roach K and Davis D, "Judicial Education and Competency to Stand Trial in the U.S.: Models and Reforms", (2018) 56(1) American Journal of Forensic Psychology 17.

⁴² Roach K and Davis D, "Judicial Education and Competency to Stand Trial in the U.S.: Models and Reforms", (2018) 56(1) American Journal of Forensic Psychology 17.

these interlocking challenges highlight the urgent need for institutional reform, cross-sectoral training, and capacity-building to strengthen the credibility and fairness of CST determinations in Nigeria.

The Impact of Clinical Psychologist Input on Trial Fairness and Justice Outcomes

The study reveals that the minimal involvement of psychologists in Nigeria's Competency to Stand Trial (CST) assessments undermine the fairness and accuracy of criminal proceedings. In contrast to countries like Canada and Australia, where psychologists are integral to CST evaluations and offer detailed cognitive and functional analyses, Nigeria underutilizes their expertise. This gap neglects key psychological dimensions—such as reasoning, comprehension, and decision-making capacity—that are often overlooked in solely psychiatric assessments. That are serious consequences: the prosecution of defendants who lack trial competence and delays for those who are fit, both of which infringe upon due process and judicial efficiency. These trends echo early CST practices in the United States, where insufficient evaluation procedures prompted significant legal reforms. The study also found that, when psychologists were involved, their input often enriched assessments with critical insights into functional abilities, affirming international findings that multidisciplinary evaluation teams produce more reliable competency determinations. Therefore, the limited integration of psychological expertise in Nigeria's forensic system constitutes both a clinical oversight and an ethical concern, with significant implications for the rights of defendants and the integrity of legal outcomes.

Cultural and Legal Implications of Competency Assessment

The cultural dimensions of Nigeria's CST challenges warrant particular attention. The study revealed deep-seated stigma surrounding mental illness within the legal system, with some judicial officers expressing skepticism about mental health claims - a finding consistent with previous Nigerian research (Gureje et al., 2005). This cultural barrier mirrors challenges identified in other African contexts (Sorsdahl et al., 2010) and contrasts with more mental health-literate legal systems like those in Scandinavia (Høyer et al., 2016).

The tension between Western-derived legal standards and local cultural understandings of mental illness emerges as a critical issue. As Adebowale (2013) notes, Nigeria's legal framework for competency assessments remains rooted in colonial-era statutes that poorly align with indigenous conceptions of mental capacity. This disconnect creates practical challenges when evaluating defendants from rural backgrounds or with limited formal education, who may understand legal concepts differently from Western-educated professionals (Oshodi et al., 2014).

The legal implications of these cultural factors are profound. Without culturally sensitive assessment approaches, Nigeria risks violating international human rights standards regarding fair trial protections (UNODC, 2019). The current system's failure to adequately account for educational and cultural variations in legal understanding may disproportionately disadvantage certain defendant populations - a concern raised previously regarding competency assessments in multicultural societies (Redlich et al., 2010).

Conclusion and Recommendations

This discussion highlights how Nigeria's CST evaluation system lags behind international standards while facing unique local challenges. The comparative analysis reveals that Nigeria shares many assessment limitations with other

⁴³ Viljoen JL et al, "Psychologists' Roles in Adjudicative Competency Evaluations in Canada", (2010) 18(1) Canadian Journal of Psychiatry 35; Sullivan D et al, "Forensic Psychology in Australian Criminal Justice", (2013) 45(2) Australian Psychologist 128.

⁴⁴ Zapf PA and Roesch R, Evaluation of Competence to Stand Trial (Oxford University Press 2009) 52.

⁴⁵ Zapf PA and Roesch R, Evaluation of Competence to Stand Trial (Oxford University Press 2009) 52.

⁴⁶ Bonnie RJ, "The Competence of Criminal Defendants: Beyond Dusky and Drope", (1992) 47(4) University of Miami Law Review 539; Warren JI et al, "Assessing the Impact of Forensic Evaluations on Trial Processes", (2006) 34(4) Journal of the American Academy of Psychiatry and the Law 480.

⁴⁷ Bonnie RJ, "The Competence of Criminal Defendants: Beyond Dusky and Drope", (1992) 47(4) University of Miami Law Review 539; Warren JI et al, "Assessing the Impact of Forensic Evaluations on Trial Processes", (2006) 34(4) Journal of the American Academy of Psychiatry and the Law 480.

⁴⁸ Stone AA, "The Myth of the Incompetent Defendant", (1975) 3(2) Journal of Psychiatry and Law 135.

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developing nations, though its particular combination of resource constraints, professional shortages, and cultural factors creates distinct challenges.

To address these issues, Nigeria should prioritize three key reforms:

- 1. Development of standardized, culturally adapted assessment protocols that account for local variations in legal understanding and mental health conceptualization (following models from Malaysia and India)
- 2. Investment in forensic mental health training programs to address critical professional shortages, potentially through partnerships with established programs in South Africa or Egypt
- 3. Implementation of interdisciplinary education initiatives to improve legal professionals' understanding of mental health issues and mental health professionals' grasp of legal standards

These changes would align Nigeria's practices more closely with international standards while respecting local cultural contexts. As previous research has shown (Pirelli et al., 2011), such systemic reforms can significantly improve both the fairness and efficiency of competency determinations.

Future research should explore the development and validation of Nigerian-specific assessment tools, as well as the effectiveness of training programs for legal and mental health professionals. Longitudinal studies tracking the impact of potential reforms would provide valuable evidence for policy development in this crucial area of forensic practice.

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