

COMMENTARY

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Survey of Physician Members of The American Academy of Forensic Sciences*

ABSTRACT: There are approximately 1000 physician members of the American Academy of Forensic Sciences (AAFS) dispersed into all but one of the ten AAFS Sections. Section membership does not necessarily define their disciplines, specialties, interests or activities. A survey was performed to explore the demographics of the physician members and their views on their Sections and the Academy as a whole. The responses were predominantly favorable but some areas of improvement were suggested. The detailed results also indicate the increasing globalization of the physician membership and the catholicity of medicolegal interests.

KEYWORDS: forensic science, American Academy of Forensic Sciences, membership demographics, physician specialties, forensic disciplines, forensic medicine

In July 2003, there were 983 physician members of AAFS. Of these 130 reside outside the United States in 39 countries, ranging from Azerbaidzhan to the United Arab Emirates. The largest numbers of these non-U.S. residents live in Canada, followed by France and Italy (tied for second place) and Australia and Switzerland (tied for third). As would be expected, the largest numbers of non-U.S. physicians are found in the Pathology/Biological Sciences Section (Path/Bio). However, larger percentages of non-U.S. physician members, compared to U.S. physician members, are found in the other sections, excepting Psychiatry/Behavioral Sciences (Psych) and Engineering Sciences (Eng). All but one (the exception being Questioned Documents) of the 10 Sections of AAFS claims at least one physician member and the 101 physicians in Psych must be psychiatrists or residents in training.

Of the 823 physicians in Path/Bio, the vast majority are specialists in Pathology; however, the Section admits physicians actively engaged "in the field of Forensic Science including pathology, forensic pathology, veterinary pathology, serology, immunohematology, microhistology, or other biological sciences" (emphasis added) (1).

Little is known about these "non-pathologist" physicians (Non-Path) in Path/Bio or of those physicians in other Sections of AAFS. The major aims of the survey were:

- To learn about these non-pathologist, non-psychiatrist physician members,
- To determine physicians' satisfaction with their membership in the various Sections and in the Academy as a whole,
- Their response to the scientific and educational content of meeting programs, and

- Their opinion of opportunities for participation, advancement and collegiality within the Academy.

Suggestions for improvement or change were also solicited. It was also anticipated that responses to this survey could also assist the Academy and its Committee on Continuing Education meet the essential requirements for accreditation by the Accreditation Council for Continuing Medical Education.

Physicians were identified from files at AAFS Headquarters as members listing any of the following "degrees": M.D., D.O., M.M.B.S., M.B.Ch.B., B.M.S.B.M., M.B.B.S., Dr. med., D.Obst., D.R.C.O.G., and M.R.C. Path.

A single-page questionnaire (Table 1) and a cover letter were distributed to all physician members by email, facsimile or letter mail according to available addresses. This was re-circulated five weeks later to non-respondents. Finally, individual letters were sent to those who still had not responded from the Sections of Criminalistics (Crim), Odontology (Odont), Jurisprudence (Juris) and Physical Anthropology (Phys Anthrop). No special mailing was made to physicians in the General Section (Gen) since a 50% response had already been attained. The final response rate was 36%, ranging from 11% (1 in 9) in Crim. to 67% (2 in 3) in Phys. Anthrop. The response rate in the two Sections, Path/Bio and Psych, with the largest number of physician members was 36% (296 in 823) and 32% (32 in 101) respectively.

The major findings of this survey were:

- Of the 296 responses from Path/Bio, 19 could be identified as non-pathologists. Assuming that this proportion applies to the total physician population it can be estimated that there are about 55 non-pathologist physicians (Non-Path) in that section. If this assumption is extrapolated further there are approximately 115 "other physicians" members of AAFS who are neither pathologists or psychiatrists, or 12% of the total physician membership.

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TABLE 1—*Questionnaire.*

**SURVEY OF PHYSICIAN MEMBERS of the AMERICAN ACADEMY OF
FORENSIC SCIENCES**

1. a. Medical Degree ____ Year Awarded ____ In What Country? _____
b. Additional Professional or Doctorate level degree(s) _____
2. a. Affiliated with which AAFS Section: _____ Since ____
b. Provisional Member ; Member ; Fellow
3. a. Major medical interest, practice or specialty _____
b. Board Eligible ; Board Certified ; Neither, but practice limited
c. Do you maintain a current license to practice medicine? Yes ; No
Country _____
4. What is your major field of activity, interest or occupation in the Forensic Sciences? M.E. ; Coroner ; Odontology ; Psychiatry ; Pathology . Other (please specify) _____
5. What percentage of your professional activity is devoted to the Forensic Sciences? ____% of a _____ hour week.
6. Does the AAFS Section to which you belong provide satisfactory:
 - a. Opportunity for Participation? Yes ; No ; How could it be improved? _____
 - b. Opportunity for Advancement? Yes ; No ; How could it be improved? _____
 - c. Scientific Content of Programs? Yes ; No ; How could it be improved? _____
 - d. Educational Content of Programs? Yes ; No ; How could it be improved? _____
 - e. Collegiality, Commonality of Interests? Yes ; No ; How could it be improved? _____
7. Do you think you could be better served/satisfied in another existing Section of AAFS? Yes ; No ; Which _____
Would you like the opportunity to transfer? Yes ; No
8. Do you think you would be better served/satisfied in a new Section made up of all physician members except pathologists and psychiatrists? Yes ; No
9. Other suggestions to improve the quality of your membership? _____

10. OPTIONAL Name _____
Country of Residence _____

Please return AS SOON AS POSSIBLE by mail (outside U.S.A. via Air Mail please), or to Fax # XX-251-471-7882, or by email to: gbrogdon@usouthal.edu

- Of AAFS physicians identifying themselves as pathologists or psychiatrists, 80% and 89% respectively claim board certification or equivalent (by non-U.S. physicians). Of the other physicians, 64% are board-certified or equivalent.
- The major fields of activity, interest or occupation in the forensic sciences were identified as medical examiner (M.E.) 41%; coroner, 9%; pathology (non-M.E., non-coroner), 29%; psychiatry, 12%; and other, 7%.
- Because of membership requirements in Engin, Juris, Odont and Phys Anthrop, physician members of those sections must

have dual doctorate level degrees. In Psych 13% of the physicians had two doctorate level degrees, and in Path/Bio 15% (for pathologists) and 20% (for non-pathologists).

- Although only one of the nine physician members responded there were a high percentage of non-U.S. resident physicians in Crim (7 of 9). This may reflect the relatively large number of medical schools outside the U.S. having Departments or Institutes of Forensic Medicine or Legal Medicine, allowing development of broad skills and interests in forensic science. Only two U.S. medical schools, Duke University and Virginia

Commonwealth University (Personal Communication, Office of Communication, Association of American Medical Colleges, Washington, D.C.) have such departments while there are 150-200 such institutes or departments in Europe alone. (Personal Communication, Professor. R. Dirnhofer).

- The two respondents of the five physicians in Juris have J.D. degrees and are not practicing attorneys.
- The two respondents of three physicians in Phys Anthrop have Ph.D's in Anthropology and devote 5% of their time to forensics.
- The one Odont physician who responded has DDS, M.D. and Ph.D. degrees and practices forensic odontology full time.
- Respondents from Path/Bio and Psych are more likely to be involved in forensic science full-time than those from other sections.

The survey participants were asked to express their satisfaction or dissatisfaction with the membership activities of the Academy and its Sections:

- Only a small percentage (7.7%) of respondents were dissatisfied with their opportunity to participate in the activities of their Section or the Academy. Complaints included difficulty in attending meetings because of workload and costs; that "cliques" ran things and made it difficult to get on committees, programs or slates for election to office. Some, especially in Path/Bio, felt that their interests were not well-represented; there were requests for an advance agenda for business meetings since some respondents felt "manipulated."
- There was some confusion on the question dealing with opportunity for advancement, but most respondents recognized that the question related to the requirements for promotion. Some respondents (7.7%) commented that such opportunities were reserved for members of favored "cliques." In addition several suggested that advancement should be allowed on the basis of research or professional achievement; and there were some who objected to a "meeting attendance" or a "presentation" hurdle for promotion.

The following responses were received for questions 6 c) to e), which related to the Annual Meeting:

- There were several complaints that the meeting simply was too large to permit the establishment of meaningful collegial relationships:
- There was the expected dichotomy on 6 c). Some respondents wanted more prospective research studies to be presented and others more clinical reports. However, there were thoughtful expressions of hope for better quality work in selection of topics, better abstracts (including results), and improved presentations. Some commented that if there was an improved focus on coherent scientific and educational goals, it might permit more emphasis on basic research and innovative techniques, and allow more discussion time. As expected the non-pathology respondents in Path/Bio commented that their fields of interest were not well covered in programs.
- As expected similar comments to those detailed above were received for 6 d) dealing with the educational content of the Program. Additionally some respondents requested the involvement of other medical specialties and/or the exclusion of repetitious offerings from year to year.

One other finding of the Survey was that ten respondents commented that they would be better off in another AAFS Section and twelve respondents would like to transfer from their current Section because of a change in their interests or because they believed their interests would be better served. Additionally 13 respondents favored a "new" Section made up of physicians who are neither pathologists nor psychiatrists. The majority of these responses to questions 7 and 8 came from non-pathologists in Path/Bio and from the General Section, which has the second largest pool of physicians who are neither pathologists nor psychiatrists.

The final item on the questionnaire asked for suggestions "to improve the quality of your membership." Several of those responses addressed issues of non-U.S. members:

- AAFS should have a different Section to represent the interests of members from countries other than the U.S., e.g., a Foreign Members Section;
- Establish small groups of experts in many fields with whom foreign members could consult on problems;
- Improve relationship with foreign members;
- Develop an electronic chat room/forum for discussion of unusual problems encountered.

Other suggestions were more general:

- More member benefits, i.e., free C.M.E.;
- Development of a dual dues system according to whether or not the member wishes to receive the *Journal of Forensic Sciences*;
- Establishment of a regional organization with officers—similar to a chapter system practiced by other organizations;
- Change Path/Bio to Path/Med to include all physicians except psychiatrists and move entomology to Phys Anthrop;
- Development of "on line" activities for those who cannot attend meetings;
- Establishment of a new Section on Clinical Forensic Medicine; and
- The need for objective methods to review and evaluate the quality of members' testimony

Comments on the Annual Meeting Program were inconsistent. Opinions seemed divided between a desire for more research and review papers vs. more anecdotal case reports. More multidisciplinary programs seemed to be favored.

A larger response to this questionnaire would have been desirable. Still, an average return of 10% is expected from physicians for a survey of this type even in a homogenous "single-interest" organization (Personal Communication, Jonathan Sunshine, Director of Research, American College of Radiology, Reston, VA.); thus, our 36% response rate is noteworthy for a multi-disciplinary membership with disparate interests. Of note it compares favorably with the 31% return achieved from the survey of the entire AAFS membership conducted by the Long Term Planning Committee in 1998 (2).

This survey, for the first time, affords significant information concerning the demography and attitudes of the physicians who constitute about one-sixth of the total Academy membership and who influence and have influenced the Academy and its operations. Of note One-third of the Academy's Presidents have been physicians.

This survey of physician members of the AAFS emphasizes the increasing globalization of the organization. At the 2004 Annual Meeting in Dallas, there were 60 physician registrants from outside

the United States. Eleven of those were Canadians; the other 49 physicians came from 43 other countries. The Academy may not be doing an optimal job of assimilating these "foreign" physicians, who have much to offer. Some come from countries where there is better conceptualization, coordination and cooperation in interdisciplinary efforts than currently exist in the U.S. At the Section and Academy levels more effort is needed to insure that these members enjoy equal opportunity to influence, participate and advance in the programs of the organization. At the same time, there are expressions of interest by non-U.S. physicians for opportunity to meet together in order to recognize common concerns and develop initiatives of common interests.

Perhaps the AAFS leadership should provide non-U.S. physician members a place at the annual meeting to assemble at will, discuss interests, and meet informally with officers and Board members. This is a pattern successfully initiated by other medical organizations with a substantial number of non-U.S. attendees.

Physician members generally seem comfortable within their parent Section and with the Academy as a whole. Only a few negative responses to questions regarding satisfaction with current opportunities for participation and advancement, or with the scientific and educational content of meeting programs were obtained.

The more than 100 physician members who are not pathologists or psychiatrists and in some professional respect "homeless," should not be ignored. Last year, by October 2003, 51 physician applications for membership had been received, 21% outside the Path/Bio or Psych Sections. The final numbers accepted are un-

known to this author, but it is fairly safe to predict at least 150 Non-Path, non-Psych physician members of AAFS by the end of this decade, of whom about one-half may be dissatisfied with the status quo. The Academy leadership and the various Sections may need to begin considering *now* improved ways to accommodate their varied interests and needs.

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References

1. American Academy of Forensic Sciences. American Academy of Forensic Sciences membership requirements. Colorado Springs, CO: American Academy of Forensic Sciences, undated.
2. American Academy of Forensic Sciences. 1998 AAFS membership survey summary. *Academy News* 1999;29:48-51.

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