

GOVERNMENT OF THE DISTRICT OF COLUMBIA
DEPARTMENT OF MENTAL HEALTH



April 23, 2012

Our Reference: DMH/SEH/MG/pas
Your Reference: Criminal Case Number

Albrecht Muth (#927,405)
2011 CF1 15683; PDID#: 448-998

The Clerk
Criminal Division
Superior Court
of the District of Columbia
500 Indiana Avenue, NW, Room 4110
Washington, D.C. 20001

Dear Sir:

We wish to call to your attention the case of Albrecht Muth, who was admitted to Saint Elizabeths Hospital by Court order on February 15, 2012 under the provisions of Title 24, Section 531.03 of the D.C. Code for mental examination, with report due on or before March 13, 2012, with a charge of First Degree Murder pending.

Reference is made to our most recent letter to the Court dated March 13, 2012, in which we reported that Mr. Muth was incompetent to stand trial. Subsequently, we received notice that the case was continued until April 25, 2012.

On April 20, 2012, Michele P. Godwin, Ph.D., Licensed Clinical Psychologist, evaluated Mr. Muth for competency to stand trial. Also present for the interview were Erik Hansen, Psy.D, and KyleeAnn Stevens, M.D., Director of Forensic Services and member of the Hospital's Forensic Consultation Service. Prior to this interview, Mr. Muth was informed that the information shared during the assessment would be communicated to the Court and was not confidential. He expressed an understanding and agreed to participate in the evaluation.

Mr. Muth was able to state his charge as "First Degree Murder." He knew the circumstances surrounding his arrest, the location and time frame of the alleged offense. Mr. Muth indicated that his charge is classified as a felony and that a person convicted of this type of offense could receive "thirty years to life." He also indicated the correct minimum and maximum sentences for a defendant convicted of a misdemeanor offense (one day to one year in jail). Mr. Muth correctly identified possible plea options of Guilty, Not Guilty, and Not Guilty By Reason Of Insanity (NGBRI) and correctly identified the consequences associated with each plea option. For example, he understood that a

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inconsistent manner to items with very similar content. His response pattern significantly elevated the Inconsistency (ICN) Scale, thus invalidating the results. This pattern of response could be due to carelessness, confusion, language problems, and a failure to attend to the items. More specifically, while reading the items on the PAI, Mr. Muth raised several objections. For example, after reading an item about taking advantage of others, Mr. Muth explained, "Professionally? Yes, it was my job to use people. But personally? No, of course not." When encouraged to answer the items from a personal perspective, he replied "It makes more sense to answer from a professional perspective because I am two-thirds professional and one-third personal." Despite being informed to answer the questions from the viewpoint of his personal thoughts and feelings, Mr. Muth continued to report that he would answer the items from a "professional perspective." This may have, in part, contributed to the inconsistent style of responding that invalidated the results. Regardless, results from the PAI could not provide any valid or interpretable information.

Mr. Muth was also administered the Millon Clinical Multiphasic Inventory—Third Edition (MCMI-III), which is a 175 item, true-false self report measure of personality patterns and clinical syndromes. Mr. Muth responded in a way that provided valid and interpretable information about his personality. His response pattern elevated three personality pattern scales and one of the clinical syndrome scales. His responses are similar to individuals who report feeling socially detached, tend to be aloof, isolative, and have difficulty forming and maintaining close relationships. Individuals with similar response styles are often described as self-centered, arrogant, and exploitative. These individuals often appear pretentious and may exploit or manipulate others. Mr. Muth's response style is similar to individuals who are described as orderly, organized, over-conforming, self-righteous, and relatively inflexible. These individuals are often emotionally restrained and may suppress feelings of anger and resentment. Finally, individuals with similar response styles are likely delusional and may demonstrate irrational thinking. Their delusions may be of a persecutory or grandiose nature. These individuals may become belligerent and express irrational ideas of reference.

Overall, the results from psychological testing indicate that Mr. Muth is not feigning cognitive impairment as evidenced by his obtaining scores on the TOMM that were within normal limits. Results from personality testing were mixed given that Mr. Muth's approach to the two measures (PAI, MCMI-III) administered provided different information. The PAI was invalid because of his responding in an inconsistent manner likely as a result of his endorsing items from his "professional" perspective. On the MCMI-III, Mr. Muth did not respond in a manner that indicated that he was trying to present in an overly positive or negative manner, thus, this test was valid. Most notable on this measure was his elevation on the Delusional Disorder scale, which is consistent with his clinical presentation when interviewed.

Mr. Muth was also administered the Evaluation of Competency to Stand Trial-Revised (ECST-R) by Dr. Godwin on April 19, 2012. The ECST-R is a semi-structured interview designed to assess psycholegal domains relevant to the *Dusky* standard. This measure consists of 18 items that yield four scales to assess for competency to stand trial such as Consult with Counsel (CWC), Factual Understanding of the Courtroom (FAC), Rational Understanding of the Courtroom Proceedings (RAC), and Overall Rational Ability (Rational). Additionally, 28 items are also administered to assess five Atypical Presentational Styles (ATP). Mr. Muth endorsed items in the Very Extreme range of impairment for his being able to rationally consult with counsel (CWC, T score = 96). This level of impairment is almost always found with defendants who are incompetent. When

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defendant pleading Guilty would proceed to sentencing without a trial and a defendant pleading Not Guilty would have a trial. He knew the process surrounding a plea of NGBRI, including that a defendant would be returned to Saint Elizabeths Hospital until such time as he or she is deemed to be no longer dangerous due to a mental illness. He knew the purpose of a trial and the court officials who would be involved in a trial, including a judge, jury, prosecuting and defense attorneys, and witnesses. Mr. Muth continued to express skepticism about the neutrality of a judge stating, "Judges come through the political hierarchy and they carry that baggage to the bench...they make decisions based on 49/51(%) or 45/55(%) depending on the gray areas of the benefit of the doubt." He expressed similar sentiments about a jury, further stating, "I don't believe in the impartiality of a jury...they come from different backgrounds and it is cooked up to placate the onset of neutrality...a juror is thrown at you after perfunctory challenges have been exhausted." Mr. Muth was able to state the role of a witness during a trial and identified possible witnesses in his case that could potentially be called for either the prosecution or defense. He also indicated that he could be a witness for himself if he chose. Mr. Muth described evidence as being "material that pertains to the case such as photographs or fingerprints." He stated that to date that he was not aware of any evidence that could be used for or against him. He appeared to understand the concept of plea bargaining, though he continued to demonstrate inflexibility when discussing his intended plea despite the possible consequences of proceeding with such a plea. Mr. Muth expressed an understanding of appropriate courtroom decorum and there is little indication based on his current presentation that he would not be able to maintain appropriate behavior in court.

Mr. Muth continued to express unusual beliefs about his criminal case and where he believed the focus of his defense strategy should be. More specifically, he vehemently expressed his belief that the alleged offense was a result of his professional activities prior to August of 2011. When queried further, he indicated that the murder of his wife occurred as a result of a hit by the Iranian government because of the work that he did with the Iraqi Army, of which he is a member. In order to best proceed with his defense, Mr. Muth stated that the following individuals or governments would need to be contacted: the National Security Advisor to the Vice President, General David Petraeus, Officials affiliated with the Iraqi Government, and possibly "my Iranian brothers." He described feelings of frustration about these individuals not being contacted to date by his current defense team as he believes that such evidence would exonerate him. Mr. Muth described being at an impasse with his current attorneys because neither believes the other is going about this case in the proper manner.

In order to aid in diagnostic clarification and to explore the possibility of feigned psychological problems, psychological testing was conducted by Erik Hansen, Psy.D, Licensed Clinical Psychologist on April 9, 11, and 19, 2012. Highlights from this evaluation are provided below.

Mr. Muth was administered the Test of Memory Malinger (TOMM), which is a recognition test of common objects designed to distinguish between legitimate memory-impaired patients and malingerers. On this measure, Mr. Muth earned scores of 48/50 and 50/50. These scores suggest Mr. Muth gave good effort and that he did not appear to be exaggerating or feigning problems related to his memory.

Mr. Muth was also administered the Personality Assessment Inventory (PAI), which is a 344 item self report inventory designed to measure facets of personality structure and psychiatric functioning. Results of Mr. Muth's PAI suggest that he responded in an

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taking into account estimated error rates, there is a very high probability (99.9%) that Mr. Muth has markedly diminished ability on this component of competency to stand trial. Furthermore, on the Atypical Presentational Style, Mr. Muth endorsed the most responses on the ATP-Realistic scale which assesses common concerns that a defendant may experience. He did not endorse items on the ATP-Psychotic, ATP-Nonpsychotic, or ATP-Impairment suggesting that he was not attempting to feign psychotic impairment.

At present, Mr. Muth continues to possess a factual understanding of the court proceedings. What remains of concern is his ability to rationally understand the proceedings against him or consult with his attorneys to a reasonable degree of rational understanding. Thus, it is opined that Mr. Muth is currently incompetent to proceed with his case. However, there is a probability that he will attain competence or make progress toward that goal with an additional period of time.

Mr. Muth is diagnosed with Delusional Disorder, Persecutory Type and Schizotypal Personality Disorder. He is currently receiving medication for the treatment of these illnesses. It is recommended that he continue to receive medications for treatment of his condition. In addition, it is our recommendation that he remain hospitalized for competency restoration since an inpatient setting is necessary to provide appropriate evaluation and treatment and he is unlikely to comply with outpatient treatment.

Sincerely,

Patrick J. Canavan, Psy.D.
Chief Executive Officer
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By:


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