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Direct and Indirect Influences of Defendant Mental Illness on Jury Decision Making

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ABSTRACT: It is a common misconception that individuals with schizophrenia are significantly more dangerous and violent than individuals free of mental illness. This stigmatization may lead to harsher sentences when people with schizophrenia are involved in criminal activities and sentenced by a jury. This study presented four conditions to which participants were randomly assigned, alone or in a group of three, and were asked to sentence a defendant, either with or without schizophrenia. It was hypothesized that group deliberations would result in more lenient sentences for defendants with schizophrenia as compared to individual deliberations. Furthermore, it was predicted that both group and individual deliberations would result in harsher sentences for defendants with schizophrenia than defendants who were described as free of mental illness. Results revealed that defendants with schizophrenia were sentenced in a more lenient manner than defendants with no mental illness. However, several additional findings indicated an indirect negative attitude toward the mentally ill defendant.

KEYWORDS: schizophrenia, sentencing, jury size, deliberation time, mental illness

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INTRODUCTION

The American criminal justice system relies on the judgments of juries during court proceedings. Thus, a defendant is at the mercy of a congregation of strangers with preconceived biases and stereotypes. Mental illness is no exception to these stereotypes. A defendant's mental health status may interfere with a jury's assessment in a manner that does not pertain to the defendant's guilt or innocence of a specific crime. This label remains throughout the trial and can mislead decisions made concerning the case. The stigmatization of schizophrenia stems from media sources, such as television shows and highly publicized extreme cases, among other sources (Angermeyer, Pott, & Matschinger, 2005; Bergman, Zack, & Serper, 2000; Knifton & Quinn, 2008).

According to Levey and Howells (1994), only 1% to 2% of people with schizophrenia are involved in criminal behavior and of these, non-violent crimes are more common than violent offenses. Angermeyer (2000) asserts that an extremely small proportion of violent crimes are committed by the severely mentally ill. Furthermore, people are at an even lower risk of being randomly and violently attacked by people with schizophrenia as compared to offenders free of mental illnesses (Angermeyer, 2000). While recent data shows an increase in people advocating for psychiatric treatment of the mentally ill (Pescosolido, Martin, Long, Medina, Phelan, & Link, 2010), public stigma remains in regard to keeping social distance from people with schizophrenia and viewing them as violent. Although it is statistically accurate that people with schizophrenia are slightly more likely to be violent individuals than people free of mental illness, research concludes that this is usually the case when substance abuse comorbidity (Fazel, Långström, Hjern, Grann, & Lichtenstein, 2009) and personality disorders (Fresán, Apiquian, Nicolini, & Cervantes, 2007; Nestor, 2002) are involved. Indeed, several studies have shown that people with substance abuse disorders are more than twice as likely to commit a violent offense as those with schizophrenia (Erkiran, Özünalan, Evren, Aytacılar, Kirisci, & Tarter, 2006; Swanson, Holzer, Ganju, & Jono, 1990). However, due to the public perception that schizophrenia is a violent condition, it is one of the most misunderstood mental disorders (Harrison & Gill, 2010; Pescosolido, Monahan, Link, Stueve, & Kikuzawa, 1999). A defendant who is known to have schizophrenia may thus be judged more harshly than a defendant free of this debilitating mental illness.

The current study stems from the long standing stigma associated with members of the mentally ill community. Past research has explored the effects of previous experience and knowledge regarding mental illness on the perception of dangerousness. For example, Penn, Kommana, Mansfield, and Link (1999) asked participants, who either had or had not been in contact with individuals with a mental illness, to read one of four information sheets (no, general, acute, and comparative information) on facts about mental illness. Next, participants read vignettes depicting individuals with schizophrenia and rated the level of dangerousness of the individuals. Participants who had previously interacted with individuals with a mental illness regarded the individuals with schizophrenia as less dangerous than participants who had not been in contact with individuals with a mental illness. Participants who, prior to reading the vignettes, read comparative information sheets describing the prevalence rates of violent behavior among individuals with schizophrenia and people with substance abuse disorders (as previously described and supported in Erkiran et al., 2006 and Swanson et al., 1990) rated mentally ill individuals as less dangerous than did subjects who did not read this information. These findings demonstrate that people uneducated in the facts of schizophrenic violence, or who have no life experience in relation to individuals with a mental illness, are quick to judge mentally ill individuals as dangerous beings (Penn et al., 1999).

In order to further isolate mental illness as a significant influence on sentencing decisions, it was crucial to the current study's internal validity to neutralize all possible confounding variables associated with the mock case and present all details as generally as possible. Demonstrating the need for such procedures, Edens, Desforges, Fernandez, and Palac (2004) tested six conditions that involved defendants who were psychotic, psychopathic, or had no mental disorder. Defendants were also described as being either low-risk or high-risk for violent reoffending. Participants were asked to rate the defendant's threat to society. Defendants with no mental disorder were rated as a lower risk than other defendants, but the actual facts of the case were more influential than mental disorder or risk level when rating the defendant's dangerousness. Although defendants' mental health status can influence the results, other factors (e.g., prior offenses, motive, and circumstances) may overshadow the label of a mental illness. Edens et al.'s research was a major guide to creating a mock case for the current study that kept the facts of the crime constant and equal across

conditions, which maintains the defendant's mental health status as the principal influencing variable in the sentencing outcomes.

Many individuals with schizophrenia have difficulty displaying remorseful expressions due to the impact of the negative symptoms of schizophrenia (Mäkinen, Miettunen, Isohanni, & Koponen, 2008). These symptoms include blunted or flat affect (lack of facial expression, poor eye contact, and voice modulation), alogia (poverty of speech), avolition (lack of motivation), anhedonia (inability to experience closeness and pleasure), and asociality (reduced social interaction, poor relations with friends) (American Psychiatric Association [DSM-IV-TR], 2000; Mäkinen et al., 2008). MacLin, Downs, MacLin, and Caspers (2009) explored the influence of facial expressions on jury sentencing and noted the advantage that defendants free of mental disorders have over defendants with schizophrenia. Specifically, their study investigated the effect of a defendant's perceived remorsefulness on jury sentencing. Using twenty-two photos of the same man depicting an array of emotions (e.g., angry, sad, resentful, happy, remorseful, boastful, fearful), participants reviewed the man's case and a randomly assigned picture of the man. They completed a questionnaire assessing their verdict confidence and their perceptions of the defendant (e.g., likeability, truthfulness, remorse, likelihood of committing another crime). The angry photographs produced the harshest verdicts, whereas the remorseful photographs produced the most lenient verdicts. Although the researchers did not conduct a questionnaire after the sentencing to determine what the true influence was, they concluded that facial expressions and the ability to display remorse, a behavior that is sometimes inhibited by schizophrenia, may be an important influencing factor in the outcome of a trial (MacLin et al., 2009). Some studies show a mitigating effect of mental illness in sentencing outcomes. Barnett, Brodsky, and Davis (2004) demonstrated that groups of participants gave more lenient punishments to defendants with schizophrenia than to defendants with no mitigating circumstances attached to their case. These findings indicate that circumstances viewed as being outside the defendant's control are strong determining factors involved in sentencing decisions. However, White (1987) found that jurors exposed to a mental illness defense were the most punitive as compared to jurors exposed to no defense at all. In this case, a defendant's mental illness was not a mitigating factor in the sentencing outcome.

The group dynamics that play a part in jury sentencing are as crucial as the defendant's mental health status in determining a judgment (Nemeth & Goncalo, 2005). Several studies arose from the Supreme Court's *Williams v. Florida* (1970) ruling that six-member juries would be no different from those of twelve-member juries and would not operate to the disadvantage of a defendant. Results regarding the effects of jury size on verdicts and sentencing varied greatly. Valenti and Downing (1975) found that six-member juries were considerably more likely to render a guilty verdict than were twelve-member juries when guilt was apparent (strong evidence presented in favor of conviction). Kerr and MacCoun (1985) concluded that the likelihood of a hung jury was lower for open polling in smaller groups (three jury members) versus an increased likelihood of a hung jury in larger groups (twelve jury members). According to these two studies, smaller groups are more conviction-prone and more likely to agree on a verdict when open polling is utilized. Conversely, Padawer-Singer, Singer, & Singer (1977) determined that six-member juries rendered more acquittals than twelve-member juries. Moreover, additional studies posit that smaller group deliberations result in less confident (Stasser & Davis, 1981) and less concurring group decisions (Kerr & Watts, 1982). According to these contradictory findings, smaller groups are more lenient and less assertive in their decision making.

Given the previous studies' findings regarding group effects, individual participants are likely to form an opinion concerning sentencing outcome without being influenced by other participants' opinions and possible objections. Therefore, an individual's personal stigma toward a mentally ill defendant would not be challenged due to the lack of group deliberation. Moreover, it can be inferred that the greater the number of subjects participating in the sentencing process, the higher the likelihood that one of them would be educated in the facts of violence in people with schizophrenia. Accordingly, the following hypotheses were presented:

- (1) Participants deliberating in groups will punish a defendant with schizophrenia more leniently than a single participant sentencing the same defendant.
- (2) Both group and individual deliberations will deliver significantly harsher sentences when the defendant is described as having schizophrenia than when no mental illness is mentioned. Although previous studies have explored the influence of mental illnesses and the influence of group dynamics on sentencing, the current study combined these variables to determine if there is

an interaction between the two. Furthermore, this study attempted to determine what, if any, factors were involved in the outcome of harsher sentences (e.g., demographics, personal experience). Discovering such determinants will ideally lead the psychology community towards more efficient ways to dispel or prevent unnecessary and detrimental prejudices toward the mentally ill within the criminal justice system (Penn, Chamberlin, & Mueser, 2003; Penn et al., 1999).

METHOD

Participants

The sample consisted of 126 University of Central Florida undergraduate students. Students enrolled in psychology classes received extra credit for their participation through SONA Systems. A specific demographic of participants was not targeted; therefore, any undergraduate student 18 years of age or older was allowed to complete the study. The sample included 94 females (74.6%) and 32 males (25.4%) with a mean age of 18.83 years ($SD=3.20$). Participants were primarily Caucasian (54.8%), followed by Hispanic (14.3%), and African Americans (13.5%) participants.

Procedure

This study used a 2 (schizophrenia versus no mental illness) X 2 (single mock juror versus group of three mock jurors) between subjects design. The independent variables presented were defendant mental illness, operationalized as a defendant described as having schizophrenia versus a defendant described as having no mental illness, and jury size, operationalized as a group of three participants versus a single participant. Thus, the four conditions were: (a) one participant sentencing a case with a defendant with schizophrenia, (b) one participant sentencing a case with a defendant free of mental illness, (c) three participants sentencing a case with a defendant with schizophrenia, and (d) three participants sentencing a case with a defendant free of mental illness. The dependent variable was the sentencing outcome as written by the participants in an open-ended question. The cases used in the study were identical to one another with the exception of the defendant's mental health status. The case depicted a 35-year-old Caucasian male who accidentally shot and killed an employee while attempting to rob a store. The defendant, described as having no prior criminal record, pled guilty to

manslaughter and required sentencing. The description of the case was kept simple and straightforward to avoid extraneous variables. As this study presented four conditions, four different case-detail forms were utilized, differing only in discussion instructions for group versus individual conditions, as well as the defendant's mental health status. All four case-detail forms mentioned that the defendant was found mentally competent to stand trial.

Prior to reviewing the case, participants were given an informed consent form explaining the study and were able to ask any questions. Participants had a time limit of fifteen minutes to review the facts of the case and, either alone or with a group, determine a sentence. They were not given a choice of sentencing options but rather had to write one out on the case details form (e.g., the sentencing form). Participants were instructed to arrive at a unanimous decision and were provided with examples of sentencing (e.g., probation, a certain number of months or years in prison, life in prison, or the death penalty). Participants in the group conditions were given the opportunity to discuss the case and determine an outcome together. All group conditions were audio-taped in order to review the decision-making process. The experimenter left the room for the group conditions to allow participants to discuss their sentencing decision privately. All verbal instructions to the participants were scripted to expose all conditions to the same wording.

After sentencing had occurred, participants were asked to sit at designated desks and were given a confidential questionnaire intended to assess personality characteristics and demographics including age, gender, race/ethnicity, academic major, religious affiliation, political affiliation, and psychology courses completed by the participant. The questionnaire included a 22 statement Legal Opinions scale (Kassin, Tubb, Hosch, & Memon, 2001) and a 27 statement Attitude Towards the Mentally Ill scale (Angermeyer & Matschinger, 2004); both assessments were rated on a Likert scale ranging from 1 (strongly agree) to 5 (strongly disagree). Open-ended questions were included at the end of the questionnaire to determine if any disagreement occurred in the group discussions and if such opinions were voiced; these questions were included to determine whether the sentencing decisions clearly reflected each of the participants' beliefs. Other open-ended questions were asked; e.g., "During the discussion process, were there additional details you wished to know about the case or the defendant?" as well as "What details regarding the case or the

defendant, if any, would have altered your sentencing decision and why?" Lastly, participants were asked if they had ever personally encountered someone who had committed a robbery, as well as personally encountered someone with schizophrenia and, when affirmatively answered, were asked to describe those relationships. All questions were posed to determine what specific factors influenced, or would have influenced, the participants' sentencing decisions.

RESULTS

The data was analyzed to determine the effects of defendant mental illness as well as group dynamics on jury sentencing. Several Analyses of Variance (ANOVA) tests were conducted, to determine the main effects and interactions, as well as post-hoc tests to determine where any differences occurred. The alpha level was set to .05 for all analyses. The primary hypothesis stated that participants would deliver significantly harsher sentences when the defendant was described as having schizophrenia than when no mental illness was mentioned, and that participants in group deliberations would punish a defendant with schizophrenia in a more lenient manner than a single participant sentencing the same defendant.

Sentencing time was split into categories due to participants giving non-numerical decisions (e.g., "life in prison") and sentencing ranges (e.g., "5-10 years in prison"). Sentences were coded into the following six categories defining harshness of sentencing: 1 - extreme leniency for sentences of one year or less in prison ($n=8$); 2 - leniency for sentences of 2-5 years in prison ($n=8$); 3 - moderate leniency for sentences of 6-10 years in prison ($n=16$); 4 - moderately harsh for sentences of 11-24 years in prison ($n=31$); 5 - harsh for sentences of 25 years or more in prison ($n=40$); and 6 - extremely harsh for sentences of life in prison ($n=20$).

ANOVA results showed a marginally significant effect of mental illness, $F(1, 119) = 3.08, p = .08$, on sentencing decisions as measured by the number of years a defendant was sentenced to prison and as coded in the aforementioned six sentencing categories. Post-hoc comparisons indicated that defendants with schizophrenia received slightly more lenient sentences ($M = 3.97, SD = 1.57$) than did defendants with no mental illness ($M = 4.42, SD = 1.15$). These results were inconsistent with the study's primary hypothesis. No

significant effect of jury size, $F(1, 119) = 1.47, p = .23$, was observed such that participants in group conditions ($M = 4.31, SD = 1.36$) did not sentence their defendants in a significantly different manner than did participants in individual conditions ($M = 4.00, SD = 1.43$). Furthermore, no interaction was observed between mental illness and group size for sentencing decisions, $F(1, 119) = .001, p > .05$.

As part of their sentencing decisions, a substantial number of participants gave their defendant the possibility of parole. This trend led to the creation of a "parole variable" indicating a form of leniency within the sentencing outcome; exploratory analyses were subsequently run on this variable. Results showed a significant interaction of jury size and mental illness, $F(1, 119) = 3.85, p = .05$, on parole (as measured by any mention of granting parole in the sentencing decisions and coded as 1 = parole, 2 = no parole). Post hoc comparisons indicated that participants in group conditions were more likely to grant parole to their defendant free of mental illness ($M = 1.69, SD = 0.47$) than individual participants to their defendant free of mental illness ($M = 1.91, SD = 0.29$). No significant differences regarding parole decisions were found, $F(3, 119) = 1.76, p > .05$, between participants in group conditions that included a defendant with schizophrenia ($M = 1.85, SD = 0.37$) and individual participants that included a defendant with schizophrenia ($M = 1.78, SD = 0.43$).

An additional exploratory ANOVA indicated a significant effect of sentencing decision, as measured by the six harshness of sentencing categories (coded as 1, being one year or less, through 6 being life in prison), $F(5, 115) = 6.36, p < .001$, on time to sentence, as measured by minutes of deliberation time measured on a continuum. Post-hoc comparisons indicated that participants who sentenced their defendants to life in prison used a significantly less amount of time to arrive at a sentencing decision than participants in several other sentencing categories (Table 1).

<i>Descriptives of time to sentence on sentencing category</i>			
Sentencing Category	N	Mean time to sentence	Standard Deviation
1 year or less	8	5.59	1.20
2-5 years	8	3.70	1.49
6-10 years	15	3.66	1.40
11-24 years	30	4.80	2.27
25 years and up	40	5.19	2.34
Life in prison	20	2.57	0.99
Total	121 ^a	4.40	2.15

Note. ^a One group condition did not specify a number of years for their sentencing decision, and, therefore, these three participants' decisions could not be classified into a sentencing category. Time was not properly recorded for two individual conditions and therefore these two participants' data was excluded from this analysis.

Further ANOVA results showed that participants who replied that no additional details of the case would have altered their sentencing decision rated their defendants significantly harsher ($M = 4.95$, $SD = 1.05$) than did participants who specified that additional details would have altered their sentencing decision ($M = 4.03$, $SD = 1.40$), $F(1,121) = 8.50$, $p = .004$. Moreover, participants who sentenced their defendants to one year or less in prison or between two and five years in prison always answered that some details would have altered their sentencing decisions ($M = 2.00$, $SD = 0.00$). Participants who sentenced their defendants to life in prison were the least likely to report that additional details would have altered their sentencing decision ($M = 1.60$, $SD = 0.50$), as compared to all other sentencing categories, including participants who sentenced their defendant to 6-10 years in prison ($M = 1.81$, $SD = 0.40$), 11-24 years in prison ($M = 1.90$, $SD = 0.30$), and 25 years and up in prison ($M = 1.80$, $SD = 0.41$).

Participants' perceptions of people with schizophrenia were determined from their scores on the Attitudes Toward the Mentally Ill questionnaire (ATMI; Angermeyer & Matschinger, 2004) and participants' perceptions of the criminal justice system were determined

from their scores on the Legal Opinions scale (Kassin et. al., 2001). Both sets of scores were coded into a median split (1 = negative view of the mentally ill, 2 = positive view of the mentally ill and 1 = harsh view on crime, 2 = lenient view on crime). There were no significant effects of participants' ATMI and Legal Opinion scores on sentencing decisions.

Several analyses were run to assess possible demographic effects (e.g., gender, age, race, political affiliation, religious affiliation), on sentencing decisions. However, no significant effects were apparent in the demographic variables on sentencing decision.

DISCUSSION

As this study did not reflect an actual mock jury with a live defendant, the length or location of a trial, nor the correct number of jury members, the findings are not intended to determine the behaviors

of an actual jury. Rather, the intent of this study was to explore how people's misconceptions about schizophrenia were likely to affect their judgment regarding violent crimes. The current study hypothesized that: (1) participants deliberating in groups would punish a defendant with schizophrenia more leniently than a single participant sentencing the same defendant, and (2) both group and individual deliberations would deliver significantly harsher sentences when the defendant was described as having schizophrenia than when no mental illness was mentioned. As results indicate, participants sentenced their defendants with schizophrenia in a more lenient manner than did participants with defendants free of mental illness, group dynamics had no significant effect on sentencing decisions, and no interaction effects were observed. The effects of mitigating circumstances, as previously stated in Barnet and Davis (2004), seem to have influenced sentence outcomes. Perhaps this effect can also be attributed to the participants' exposure to general psychology classes and knowledge about the aspects and details of schizophrenia. In contradiction to this supposition, the majority of participants (86.8%) had never taken a psychology course prior to the experiment, with only slightly over 10% of participants having taken two or more psychology classes.

Although there were no significant effects of jury size, other factors were brought to light through exploratory analyses. For example, participants in group conditions were more likely to mention parole than participants in individual conditions but only when the defendant was free of mental illness. Mentioning parole in the sentencing decision shows a certain form of leniency by allowing defendants a chance for rehabilitation. As originally stated in the main hypothesis, groups were expected to be more lenient in their sentencing decisions due to the higher likelihood of disagreement and compromises between the group members (Kerr & Watts, 1982; Padawer-Singer et al., 1977; Stasser & Davis, 1981).

Deliberation Time

Using an electronic timer, deliberations were carefully timed and recorded. Clark, Boccaccini, Caillouet, and Chaplin (2007) found that juries rendering verdicts of not guilty deliberated for the longest amount of time. One explanation for their findings was that jury members who encouraged lengthy deliberations were likely to discuss a wider range of perspectives and carefully analyze evidence than jury members who encouraged a quick decision. From these results, combined with the current study's findings depicting a relationship between brief sentencing times and harshness of sentencing, it can be assumed that all aspects of the case were not fully explored in shorter deliberations. It seems that participants with preconceived notions of punishment hastily decided on harsher verdicts. It should also be noted that the sentencing category of 25 years or more in prison held the most participants ($n = 40$) and that its mean sentencing time was 5.19 minutes. It is interesting that this "harsh" category used a mean time to sentence almost as lengthy as the "extremely lenient" category of one year or less in prison ($M = 5.59$), but that the subsequent "extremely harsh" category of life in prison used such a dramatically less amount of time ($M = 2.57$).

Although the relationship between deliberation time and sentencing category is non-linear, the extremes show an interesting link between time and harshness of sentencing. This phenomenon can be attributed to the radical nature of sentencing a defendant to life in prison; this sentence bears no actual numbers indicating incarceration, but rather holds the sentiment that the defendant deserves to live out the remainder of his life behind bars. Participants who did not believe the

defendant deserved the chance to experience freedom again are the ones who utilized the least amount of time to arrive to this conclusion. This underlying finality supported the reasoning of classifying "life in prison" as a separate category from sentences of above 25 years in prison. One participant stated her sentencing decision as "definitely incarceration for at least 50 years," and although this incarceration time would leave the prisoner close to the end of his life, the participant did not articulate the belief that the defendant should receive a life sentence. These distinctions demonstrate a pronounced barrier between the gradations of harshness within sentencing decisions.

Another intriguing finding was the significant effect between the "No Details Altering" factor and harshness of sentencing. As presented in the results section, participants who stated that no additional or different details would have altered their sentencing decisions rendered the harshest sentences. These details represent mitigating circumstances, which have been proven to be an influencing factor in sentencing decisions (Eisenberg, Garvey, & Wales, 1998). Although interaction results were not statistically significant, these "No Details Altering" participants took an average of 3.83 minutes to sentence their defendant, whereas participants who specified details that would have altered their decision took an average of 4.48 minutes to sentence their defendant. These two factors combined—short deliberation time and being conclusive on sentencing decision despite any additional details—contribute to a harsher sentence for the defendant, regardless of his mental health status. Remaining anchored to one's sentencing decision despite additional details coincides with the previous statement regarding short deliberation time and sentencing life in prison. These types of participants display a certain tone of finality through their expeditious and unwavering sentencing decisions.

Negative Symptoms of Schizophrenia

A trend in the data was also found in relation to participant responses to the questions “*What details regarding the case or the defendant, if any, would have altered your sentencing decision and why?*” and “*Were there additional details you wished to know about the case or the defendant?*” Responses to these questions included mention of the defendant’s family ($n = 20$), motive ($n = 16$), and display of remorse ($n = 11$). Sixteen percent of participants stated that if the defendant had a family (specifically children and/or a wife), they would have rendered a lesser sentence, 9% of participants stated that the defendant’s display of remorse in the courtroom would have mitigated their decisions, and 13% of participants stated that they would have liked to know the motive behind the robbery. These factors involved in sentencing the defendant and influencing jury perceptions are extremely prejudicial to people suffering from schizophrenia, as these individuals are frequently unable to maintain a family or display remorse, and may have no motive behind some of their behaviors.

People afflicted with schizophrenia display a number of negative symptoms that may influence how they are perceived in society. These aforementioned negative symptoms have been found to affect anywhere from one in three (Mäkinen et al., 2008) to two in three people suffering from schizophrenia (Selten, Wiersma, & van den Bosch, 2000). Defendants who suffer from asociality and anhedonia are likely to have difficulties having or maintaining a family life, as it is extremely difficult for such individuals to form close relationships (Gao, Phillips, & Wang, 2005; Mueser & Brunette, 2003). As previously stated in the literature (e.g., MacLin et al., 2009), remorseful defendants are given more lenient sentences. Therefore, defendants who suffer from flat affect are far more likely to be sentenced in a harsher manner than defendants who are able to display (or mangle) feelings of remorse. Eisenberg et al. (1998) found that remorse is considered to be a mitigating factor because it indicates that the defendant is taking his or her first step towards rehabilitation and is therefore less likely to be dangerous in the future.

Furthermore, a strong relationship seems to exist between jurors’ conjecture of the defendant’s remorse and their belief in the defendant’s love for his or her family. This correlation, inferring that the defendant’s

ability to love is the same as the ability to regret an act of violence, is also detrimental to an individual with schizophrenia who is unlikely to display either of these mitigating factors (Eisenberg et al., 1998).

As the current study did not physically expose participants to the negative symptoms of schizophrenia, overt discrimination was not observed in the sentencing decisions. However, according to participants’ statements, had they been exposed to a live trial, their sentencing decisions might have been considerably altered to show harsher sentences for the mentally ill defendant. Some notable participant comments pertaining to remorse included “If the person showed actual remorse, [I] may have lessened the sentence,” as well as “The sentence might have been shorter if he was truthfully a good citizen,” and finally “seen more remorse/guilt in the defendant during trial, I may have lowered my opinion on his sentencing.” Other noteworthy comments pertaining to family included “I would have probably given him a shorter sentence if he was providing for a family” and “If he had kids I would lower his sentence because he needs to be with them.” This last statement is intriguing, because merely having children does not mean one is involved in their upbringing. The issue of motive was often connected to whether the defendant has a family in statements such as “His motives would have altered my decision because maybe he has little children who are starving.” A general review of participants’ open-ended replies indicate that all participants who mentioned schizophrenia as a deciding factor did so with a mitigating view of mental illness. Most participants stated they would have lessened the sentence had the defendant been off his medication and/or found incompetent to stand trial. Although a generally mitigating view towards mental illness seems apparent within the results, the factors of family, remorse, and motive suggest participants would have felt otherwise had they been face to face with a mentally ill defendant. Other deciding factors influencing sentencing decisions were the defendant’s lack of prior criminal record and the defendant’s assumed intent of causing harm by being in the possession of a loaded weapon.

Study Limitations and Further Research

This study had several limitations, including the small number of participants involved and the lack of generalization, due to the fact that college students are not representative of the population and jury members do not deliberate alone or in groups of three. Funding permitting, future research would entail appropriate random sampling of a larger number of participants throughout the country. A broader sample would also render a wider range of ages; this sample size consisted primarily of eighteen-year-old students ($n = 96$). Additionally, several minute clarifications should have been made in the scripted instructions and the case detail handout in regard to word choice.

Replication of the current study should also include the completion of a risk assessment scale for the defendant, including questions such as “How likely is it that the defendant will commit another crime if released from prison?” and “Rate the dangerousness of the defendant.” Although an Attitudes Toward the Mentally Ill scale (Angermeyer & Matschinger, 2004) was included, an additional scale could have additionally assessed participants’ knowledge of schizophrenia in a quiz format including statements of common misconceptions about the mentally ill.

The current study explored the variables influencing sentencing behaviors and attempted to determine whether group deliberations are more helpful than detrimental within the criminal justice system. Random sampling is well utilized in the initial stage of the jury selection process, yet personal biases, stigmas, and discrimination overshadow the intended fairness of the justice system when incarcerating another human being. As a diverse society, we cannot hope to find a foolproof method of fair sentencing, but we can at least be aware of the personal judgments that are encountered inside the courtroom. This study aimed to determine such prejudices against the mentally ill as well as other factors that may have unfairly influenced sentencing outcomes, and lead the world of psychology towards more comprehensive empirical research on sentencing procedures. Further studies should take steps towards ameliorating the criminal justice system by dispelling common misconceptions and educating jurors on the deteriorating effects of mental illness.

REFERENCES

- American Psychiatric Association. (2000). *Diagnostic and statistical manual of mental disorders* (Revised 4th ed.). Washington, DC.
- Angermeyer, M. C. (2000). Schizophrenia and violence. *Acta Psychiatrica Scandinavica*, *102*, 63-67.
- Angermeyer, M. C., Dietrich, S. S., Pott, D. D., & Matschinger, H. H. (2005). Media consumption and desire for social distance towards people with schizophrenia. *European Psychiatry*, *20*, 246-50.
- Angermeyer, M., & Matschinger, H. (2004). The stereotype of schizophrenia and its impact on discrimination against people with schizophrenia: Results from a representative survey in Germany. *Schizophrenia Bulletin*, *30*, 1049-61.
- Barnett, M., Brodsky, S., & Davis, C. (2004). When mitigation evidence makes a difference: Effects of psychological mitigating evidence on sentencing decisions in capital trials. *Behavioral Sciences & the Law*, *22*, 751-70.
- Bergman, A. J., Zack, H. J., & Serper, M. (2000). Violence and the severely mentally ill. *NYS Psychologist*, *12*, 17-19.
- Clark, J., Boccaccini, M., Caillouet, B., & Chaplin, W. (2007). Five factor model personality traits, jury selection, and case outcomes in criminal and civil cases. *Criminal Justice and Behavior*, *34*, 641-60.
- Edens, J., Desforges, D., Fernandez, K., & Palac, C. (2004). Effects of psychopathy and violence risk testimony on mock juror perceptions of dangerousness in a capital murder trial. *Psychology, Crime & Law*, *10*, 393-412.
- Eisenberg, T., Garvey, S. P., & Wells, M. T. (1998). But was he sorry? The role of remorse in capital sentencing. *Cornell Law Review*, *83*, 1599-637.
- Erkiran, M., Özünelan, H., Evren, C., Aytacılar, S., Kirisci, L., & Tarter, R. (2006). Substance abuse amplifies the risk for violence in schizophrenia spectrum disorder. *Addictive Behaviors*, *31*, 1797-805.
- Fazel, S., Långström, N., Hjern, A., Grann, M., & Lichtenstein, P. (2009). Schizophrenia, substance abuse, and violent crime. *Journal of the American Medical Association*, *301*, 2016-23.
- Fresán, A. A., Apiquian, R. R., Nicolini, H. H., & Cervantes, J. J. (2007). Temperament and character in violent schizophrenic patients. *Schizophrenia Research*, *94*, 74-80.
- Gao, S., Phillips, M., & Wang, X. (2005). Experience of stigma among patients with schizophrenia and their family members and attitudes of different groups about this stigma. *Chinese Mental Health Journal*, *19*, 82-85.
- Harrison, J. J., & Gill, A. A. (2010). The experience and consequences of people with mental health problems, the impact of stigma upon people with schizophrenia: A way forward. *Journal of Psychiatric and Mental Health Nursing*, *17*, 242-50.
- Kassin, S., Tubb, V., Hosch, H., & Memon, A. (2001). On the "general acceptance" of eyewitness testimony research: A new survey of the experts. *American Psychologist*, *56*, 405-16.
- Kerr, N., & MacCoun, R. (1985). The effects of jury size and polling method on the process and product of jury deliberation. *Journal of Personality and Social Psychology*, *48*, 349-63.
- Kerr, N. L., & Watts, B. L. (1982). After division, before decision: Group faction size and predeliberation thinking. *Social Psychology Quarterly*, *45*, 198-205.
- Knifton, L., & Quinn, N. (2008). Media, mental health and discrimination: A frame of reference for understanding reporting trends. *International Journal of Mental Health Promotion*, *10*, 23-31.
- Levey, S., & Howells, K. (1994). Accounting for the fear of schizophrenia. *Journal of Community & Applied Social Psychology*, *4*, 313-28.
- MacLin, M., Downs, C., MacLin, O., & Caspers, H. (2009). The effect of defendant facial expression on mock juror decision-making: The power of remorse. *North American Journal of Psychology*, *11*, 323-32.

- Mäkinen, J., Miettunen, J., Isohanni, M., & Koponen, H. (2008). Negative symptoms in schizophrenia: A review. *Nordic Journal of Psychiatry*, *62*, 334-41.
- Mueser, K. T., & Brunette, M. F. (2003). Schizophrenia-spectrum disorders. In D. K. Snyder, M. A. Whisman, D. K. Snyder, M. A. Whisman (Eds.), *Treating difficult couples: Helping clients with coexisting mental and relationship disorders* (pp. 137-58). New York: Guilford Press.
- Nemeth, C., & Goncalo, J. A. (2005). Influence and persuasion in small groups. In T. C. Brock, M. C. Green, T. C. Brock, M. C. Green (Eds.), *Persuasion: Psychological insights and perspectives*, 2nd ed (pp. 171-94).
- Nestor, P. G. (2002). Mental disorder and violence: Personality dimensions and clinical features. *American Journal of Psychiatry*, *159*, 1973-78.
- Padawer-Singer, A. M., Singer, A. N., & Singer, R. L. (1977). Legal and social-psychological research in the effects of pre-trial publicity on juries, numerical makeup of juries, non-unanimous verdict requirements. *Law & Psychology Review*, 371-79.
- Penn, D. L., Chamberlin, C., & Mueser, K. T. (2003). Effects of a documentary film about schizophrenia on psychiatric stigma. *Schizophrenia Bulletin*, *29*, 383-91.
- Penn, D., Kommana, S., Mansfield, M., & Link, B. (1999). Dispelling the stigma of schizophrenia: II. The impact of information on dangerousness. *Schizophrenia Bulletin*, *25*, 437-46.
- Pescosolido, B. A., Martin, J. K., Long, J., Medina, T. R., Phelan, J. C., & Link, B. G. (2010). "A disease like any other?" A decade of change in public reactions to schizophrenia, depression, and alcohol dependence. *American Journal of Psychiatry*, *167*, 1321-30.
- Pescosolido, B. A., Monahan, J., Link, B. G., Stueve, A., & Kikuzawa, S. (1999). The public's view of the competence, dangerousness, and need for legal coercion of persons with mental health problems. *American Journal of Public Health*, *89*, 1339-45.
- Selten, J., Wiersma, D., & van den Bosch, R. J. (2000). Distress attributed to negative symptoms in schizophrenia. *Schizophrenia Bulletin*, *26*, 737-44.
- Stasser, G., & Davis, J. H. (1981). Group decision making and social influence: A social interaction sequence model. *Psychological Review*, *88*, 523-51.
- Steadman, H. (1981). Critically reassessing the accuracy of public perceptions of the dangerousness of the mentally ill. *Journal of Health and Social Behavior*, *22*, 310-16.
- Swanson, J. W., Holzer, C. E., Ganju, V. K., & Jono, R. T. (1990). Violence and psychiatric disorder in the community: Evidence from the Epidemiologic Catchment Area surveys. *Hospital & Community Psychiatry*, *41*, 761-70.
- Valenti, A., & Downing, L. (1975). Differential effects of jury size on verdicts following deliberation as a function of the apparent guilt of a defendant. *Journal of Personality and Social Psychology*, *32*, 655-63.
- White, L. (1987). Juror decision making in capital trials. *Law and Human Behavior*, *11*, 113-30.
- Williams v. Florida, 399 U.S. 78 (1970)