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Using A Flow-Chart to Reduce Juror's Pre-Existing Biases In Cases Utilizing The Insanity Defense

Lauren M. Schlumper

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USING A FLOW-CHART TO REDUCE JUROR'S PRE-EXISTING BIASES IN
CASES UTILIZING THE INSANITY DEFENSE

by

LAUREN M. SCHLUMPER

(Under the Direction of Amy Hackney)

ABSTRACT

Many people believe that the insanity defense is used to avoid responsibility for committing a crime and that it returns dangerous individuals back to the streets. Due to the fact that it is difficult to separate such pre-existing attitudes from evidence presented throughout the trial, many jurors use their attitudes to assist them when deciding a verdict and punishment. For example, Steblay, Hosch, Culhane & McWethy (2006) found that not only is it difficult for jurors to disregard information that is not relevant or presented during trial, but that pre-trial information and attitudes can actually influence their verdict. The present study examines how dispositional instructions affect juror decision making in an insanity case. Participants completed a scale that assessed their attitudes toward the insanity defense and read a case description, determined a verdict, and recommended a sentence. Participant's attitudes toward the insanity defense influenced their verdict suggestions and recommended sentences. The type of dispositional information given to participants affected the amount of knowledge about defendants using the insanity defense, but did not affect verdicts or sentences. The implications of dispositional information presented to participants are discussed as well as the influence of pre-existing attitudes towards the insanity defense on verdict determination.

INDEX WORDS: Insanity defense, Juror attitudes, Flow-chart, Biases

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CASES UTILIZING THE INSANITY DEFENSE

by

LAUREN M. SCHLUMPER

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LAUREN M. SCHLUMPER

Major Professor: Amy Hackney

Committee: C. Thresa Yancey

Rebecca Ryan

Electronic Version Approved:

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DEDICATION

I would like to dedicate this work to a few different people. First, I devote this to my family, who has always supported me in everything I wanted to do, including graduate school. Thank you for all your love, support and help throughout my whole life. Second, to my friend and mentor Amy Hackney, who has been with me every step of the process of graduate school. I can never thank you enough for all your help, all your answers to my many questions and all your support over the last two years. I can truly say you have been the most helpful and influential person in my entire collegiate career and for that I am, and will always be, grateful.

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CHAPTER 1

INTRODUCTION

On January 8, 2011 Jared Loughner allegedly shot and killed six people, including a U.S. District Court judge, while injuring 14 others in Tucson, Arizona. It is likely he will enter a plea of not guilty by reason of insanity. Such a plea may cause some people to feel that justice will not be served. Many people believe that the insanity defense is used to avoid responsibility for committing a crime. Because of this belief, the insanity defense has been altered, banned, and reintroduced multiple times throughout United States' history. The numerous changes to the insanity defense description have influenced the beliefs of lawmakers as well as the general public. Some common, but incorrect, beliefs about the insanity defense include that it is used to avoid responsibility, it is exercised far too frequently, and that the majority of defendants who use the defense are found not guilty by reason of insanity.

Negative media attention focused on the insanity defense, such as the media coverage of the John Hinkley trial (and likely in the near future, the Jared Loughner trial), make it difficult for potential jurors to put aside their beliefs about the insanity defense; such publicity increases the perception that the insanity defense is unjust (Bloechl, Vitacco, Neuman, & Erickson, 2007). Due to the fact that it is difficult to separate pre-existing attitudes from evidence presented at trial, many jurors use their attitudes to assist them when deciding a verdict and punishment. For example, Steblay, Hosch, Culhane, & McWethy (2006) found that not only is it difficult for jurors to disregard information that is not relevant or information not presented during trial, but that such information can actually influence their verdict. Research still needs to be conducted regarding the extent these pre-existing attitudes actually affect verdict and sentence determinations when the defendant on trial is utilizing the insanity defense. The current study

aims to reduce the impact of inaccurate beliefs about the insanity defense by providing mock jurors procedural information about not guilty by reason of insanity (NGRI) cases.

History of the Insanity Defense

The insanity defense has long been a part of legal history, though it has been known by different names. In England during the thirteenth century a test existed known as the “wild beast test;” this test was used to assess a defendant’s ability to know better than an “infant, brute or wild beast” (p. 292) what the laws were and that they had to be followed (Allnutt, Samuels, & O’Driscoll, 2007). Criminal responsibility, or the ability to know laws should be followed, has two parts: *actus reus* and *mens rea*. *Actus reus* is the actual physical act associated with criminal responsibility, while *mens rea* involves the intent in addition to the physical act of the crime (Carson & Felthous, 2003). By the sixteenth century, lack of *mens rea* due to mental defect was grounds for dismissing criminal responsibility (Carson & Felthous, 2003).

In 1843 Daniel M’Naughten killed the secretary of the British Prime Minister, mistakenly believing that the man murdered was the Prime Minister. Until the 1800s when the M’Naughten trial was held, insanity as defined by law was a very loose term that was difficult to actually apply to legal cases (Allnutt et al., 2007). M’Naughten reported a belief that the Prime Minister was part of a conspiracy to kill him. He was found not guilty by reason of insanity and, because of this case, criteria were established to determine the possible mental illness of a defendant and how to apply those findings to legal responsibility (Allnutt et al., 2007). The rules put in place due to this case included that 1) people are assumed sane unless proven otherwise; and 2) that in order to prove insanity, facts must be presented to show that at the time of the crime, the accused person had a disease of the mind preventing them from reasoning. Defendants also had to show that they could not tell right from wrong at the time of the crime (Allnutt et al., 2007).

The M’Naughten rule was used frequently in the United States beginning in the 1850s, but due to the lack of support from the general public, the United States started using a test of “irresistible impulse” in addition to the M’Naughten rule. This test was designed to help determine insanity by assessing the degree to which a defendant could control their impulse to kill or commit other crimes. Because this test of insanity also received much opposition due to its broad definition of insanity, the United States added the “product” test, or Durham rule, which stated that the suspect’s responsibility for a crime could be removed if it was due to, a “product” of, mental disease. This is rarely used today because it relies on the definition of mental disease, which was never clearly established (Allnutt et al., 2007).

The three rules and tests mentioned above all raised concerns. As a result, a compromise known as the American Law Institute (ALI) rule was created (Towers, 1997). This rule states that a person cannot be held responsible for a crime if during the time of the crime, the defendant could not understand the wrongfulness of the act because of a mental disorder, and therefore could not follow the law. Today, most states use some version of the ALI rule when determining sanity of defendants (Towers, 1997).

Defendants Using the Insanity Defense

Boehnert (1989) found defendants who successfully entered a plea of not guilty by reason of insanity (meaning they were found not guilty by reason of insanity) were more likely to be white males with an average 10th-grade education, being defended by a public defender, older than the typical inmate population, and had a prior arrest record. It was also found that defendants who used a private attorney were accused of trying to buy their way out of taking responsibility for the crime. These beliefs show that negative opinions about the insanity defense are often present when hearing cases in which the defense is used (Boehnert, 1989).

Studies show that the gender of the defendant is a significant factor in the outcome of an insanity defense trial (Breheney, Groscup, & Galietta, 2007; Yourstone, Lindholm, Grann, & Svenson, 2008). However, there are conflicting research findings regarding the impact of gender. Yourstone et al. (2008) found that if the participants were clinicians and psychology students, they were more likely to find a female defendant not guilty by reason of insanity. Participants reading a case vignette and deciding whether the defendant was legally insane or not determined female defendants to be legally insane in 35% of cases, where men were found legally insane in only 18% of cases (Yourstone et al., 2008).

Breheney et al. (2007) however, found that participants thought female defendants were more aware, and therefore more responsible for their actions. When participants were asked to act as jurors and read six case vignettes, determine a verdict (guilty, not guilty, not guilty by reason of insanity), and then answer questions about trial facts and evidence, they found that female defendants were found guilty more often, which follows the belief that women are more aware and in control of what they are doing during a crime (Breheney et al., 2007). Gender of the juror may also affect outcomes, with female jurors more likely to say the defendant was acting on an impulse, and therefore the mental illness was responsible for the crime (Breheney et al., 2007). The researchers also found that women are more likely to attribute less responsibility to the defendant, especially if the jurors are made aware that the defendant has a history of psychological disorders; more likely to be accepting of psychiatry in the court room; and more likely to find a defendant not guilty by reason of insanity when the option is present (Breheney et al., 2007).

Insanity Defense Attitudes

The insanity defense often evokes strong attitudes. The public asks questions such as “are people using the defense as an ‘out?’” and “is the defense overused?” Judges usually assume that jurors can be unbiased when deciding the verdict of a trial and that jurors will only use the information presented during the trial when making their decision. However, jurors often use pre-existing beliefs to decide verdicts instead of the facts and evidence presented during the trial. For example, Skeem and Golding (2001) found that jurors’ preexisting prototypes of insanity interfered with the jurors’ ability to act impartially and had a greater effect on verdict determination than the facts presented during the trial.

Skeem, Louden & Evans (2004) built upon jurors’ prototypes to develop a scale to measure the actual beliefs of potential jurors. The scale, known later as the Insanity Defense Attitudes Scale (IDA), consists of two subscales.

The first subscale, “strict liability,” measures the participant’s belief that an individual’s mental illness is linked with the inability to make rational decisions and gain control of the situation. This subscale measures the belief that defendants should be held accountable regardless of mental illness. The second subscale, “injustice and danger,” assesses the participant’s belief that the insanity defense is misused to the extent that those found not guilty by reason of insanity will be let out and continue to be a danger to society (Skeem et al., 2004).

One inaccurate belief potential jurors have is that the insanity defense is used too frequently (Skeem et al., 2004). Janofsky, Dunn, Roskes, Briskini and Rudolph (1996) examined the extent to which pleas of not guilty by reason of insanity were actually entered and taken to trial. The researchers found that 190 defendants in Baltimore City entered a plea of not guilty by reason of insanity. Of those defendants, all but 8 dropped the plea before they went to trial, and

in all 8 of those cases, the prosecution and defense decided the defendant should indeed not be held criminally responsible. Therefore, all 8 remaining cases resulted in charges being dropped or the defendant being found not competent to stand trial (Janofsky et al., 1996).

Another inaccurate belief about the insanity defense is the overestimation of the number of defendants who are actually acquitted because of their use of the defense (Skeem et al., 2004). A majority of the population is under the impression that a defendant found not guilty by reason of insanity is simply let back into society. In actuality, fewer than 1% of cases involve the insanity defense, and of those, only 26% actually result in a NGRI verdict, in which the defendant is treated in a mental facility until a judge finds the defendant healthy enough to return to society (Silver, Cirincione, & Steadman, 1994).

Even if information is presented to jurors showing the low number of defendants who are found not guilty by reason of insanity and that research shows the belief that the defense is overused still stands (Skeem et al., 2004). These numbers show that the majority opinion of overuse of the insanity defense is unfounded (Borum, Fulero, & Soloman, 1999; Janofsky et al., 1996; McGinley & Blau, 1982). Clearly, data show that only a small number of defendants enter a plea of not guilty by reason of insanity, and even fewer make it to a trial by jury (McGinley & Blau, 1982). This inaccurate belief about the insanity defense can have negative effects on any defendant wishing to implement the insanity defense.

As previously mentioned, not only does the general public have inaccurate beliefs about the use of the defense, but people also have inaccurate beliefs about what happens to defendants found NGRI. For example, in one study, only 25% of participants accurately believed that defendants found not guilty by reason of insanity are confined, either in a jail or prison or in some form of mental health care facility, until they are determined ready and safe to be back in

the public by a doctor (Silver, Cirincione, & Steadman, 1994). The other 75% of participants erroneously believed that those found not guilty by reason of insanity are simply let free and allowed to go back into society. In actuality, research has found that a defendant found not guilty by reason of insanity and then sent to a mental health care facility is likely to stay confined twice as long as someone sent to prison for the same crime (Rodriguez, LeWinn, & Perlin, 1983).

The negative beliefs and attitudes toward the insanity defense may be due to the publicity of high profile cases in which the defense is used (Janofsky et al., 1996). People may become emotionally involved in such cases and believe that these “famous” criminals who get away with horrific crimes represent the norm in insanity defense cases. The M’Naughten case was highly publicized and many people opposed the use of the insanity defense after his case. More recently, John Hinkley, the attempted assassin of former U.S. president Ronald Reagan, was found not guilty by reason of insanity.

Further, Jeffrey Dahmer, who was convicted of killing, torturing and being involved in cannibalistic acts with 17 boys, entered the plea of not guilty by reason of insanity, but was ultimately found guilty (Janofsky et al., 1996). Some researchers have found empirical support for a belief in society that the insanity defense is so grossly overused due to the abnormal media attention these cases receive. This may be due to the type of criminal; criminals using the insanity defense who commit heinous acts are more likely to receive media attention because of the nature of the crime, which leads people to believe the insanity defense is used far more often than it really is (Janofsky et al., 1996).

If a juror has a negative opinion about the insanity defense, then that opinion tends to hold more weight in the determination of a verdict than the actual evidence and information presented in trial (Hawkins & Pasewark, 1983; Silver et al., 1994; Skeem et al., 2004). Not only

that, but these opinions tend to be very difficult to change, even when actual information about data on defendants found not guilty by reason of insanity are presented to the jurors (Skeem et al., 2004). It is important to understand the impact that jurors' pre-existing beliefs play in a jury situation, and that the jurors are not blank slates that only draw on case-presented facts when determining verdicts.

A study by Schlumper, Miller, and Hackney (2009) investigated the effects of perceptions of the insanity defense and verdict outcomes. Participants read case descriptions in which the defendant, a mentally ill man, pled not guilty or not guilty by reason of insanity to homicide. They also answered questions assessing their opinions of the insanity defense via the Insanity Defense Attitude Scale- Revised (IDA-R). Participants next had to determine a verdict: guilty, not guilty or not guilty by reason of insanity; estimate how likely it was that the defendant committed the crime (on a 1-7 scale); and determine how confident the participant was in their verdict, (also on a scale from one to seven). The participants also had to fill in a sentencing recommendation in an open-response format. Results showed a strong association between insanity defense attitudes and verdicts and insanity defense attitudes and recommended sentencing. Specifically, the lower participants scored on the strict liability subscale of the IDA-R, and the injustice and danger subscale of the IDA-R, the more likely they were to determine a verdict of not guilty by reason of insanity. Participants who scored low on the injustice and danger subscale were also more likely to recommend that the defendant be sentenced to a mental health care facility rather than a prison.

Preventing Biases from Entering the Courtroom

It is evident that even when jurors are instructed not to consider extra-evidential factors (Finkel, 1989), such as their inaccurate beliefs about the insanity defense, it is unlikely they will

heed this warning. Defendants wishing to enter a plea of not guilty by reason of insanity may choose a different route, simply because of the likelihood they will not receive the fair trial they are entitled to receive.

Negative biases affect a juror's ability to clearly and impartially process information from a trial (Silver et al., 1994; Skeem et al., 2004; Wheatman & Shaver, 2001). The question then becomes, how does one prevent these pre-existing biases from influencing juror decision making? That is, how can jurors' preexisting negative attitudes be kept out of their verdict determination process?

Wheatman and Shaffer (2001) provided mock jurors with dispositional instructions, that is, actual information about what happens to a defendant if they are found not guilty by reason of insanity. In their study, jurors watched a tape of a man on trial for murder who entered a plea of not guilty by reason of insanity. Half of the participants received information prior to verdict determination about what type of punishment the defendant would receive should he be found not guilty by reason of insanity, and the other half received no such information. Participants were also split as to whether they received the information before or after deliberation. Wheatman and Shaffer (2001) analyzed individual verdicts before deliberation and group verdicts after deliberation.

Results showed that prior to deliberation, the dispositional instructions made little difference in jurors' verdicts. Thirty-five percent of participants receiving punishment instructions believed that the defendant was NGRI compared to 27% of jurors who did not receive punishment instructions, a nonsignificant difference. After deliberation, however, 60% of the jurors that received the punishment instruction determined that the defendant was NGRI while 7% of jurors that did not receive punishment instructions voted NGRI. Thus, deliberation

led to a leniency shift for those jurors who received the punishment information and a harshness shift for those jurors who did not receive the punishment information. Content analyses of deliberations revealed that juries in the information condition were not concerned about the consequences of a NGRI verdict while juries not receiving punishment information were very concerned that the defendant would be released back to society after a NGRI verdict.

It is important to note that instructed jurors only seemed to recognize the true consequences of a NGRI verdict after deliberating with other jurors. This transformation in understanding will depend, however, on the nature of the deliberating juries. It is easy to imagine a scenario in which a juror opposed to the insanity defense controls the deliberation process. Thus, it seems imperative that more be done predeliberation to help individual jurors understand the consequences of a NGRI verdict. With that in mind, the current study proposes to enhance the Georgia Instruction by providing individual jurors with a flowchart detailing the procedure of NGRI decisions.

The Present Study

In a capital murder case, Wiener et al. (2004) found that presenting procedural information to jurors in a flowchart allowed them to see the natural progression of the law. Further, when the sentencing procedure was presented in a flowchart jurors were able to read in more detail what actually happens to a defendant once they are sentenced, allowing them to make a more informed decision than if the sentencing information was simply presented in a declarative manner (Wiener et al., 2004). In addition to research by Wiener et al. (2004), other research supports the use of using flowcharts to help jurors understand legal processes (Daftary-Kapur, Dumas, & Penrod, 2010). Because it appears that jurors may have a difficult time understanding a judge's verbal instructions or comprehending an abstract idea, such as what

exactly happens to a defendant once they are sentenced, a flowchart may help provide jurors with key elements, such as what happens to defendants once they are found not guilty by reason of insanity. This additional information may allow jurors to feel more confident when making judicial decisions (Daftary-Kapur et al., 2010). Based on this line of reasoning, we proposed the following hypotheses.

Hypothesis 1:

Pre-existing biases about the insanity defense would affect a mock juror's verdict determination and sentence recommendation. Specifically, those with an inaccurate opinion of the insanity defense would be more likely to say the defendant is guilty and recommend prison time while participants with positive or neutral opinions about the insanity defense would be more likely to say the defendant is not guilty by reason of insanity and recommend time in a mental health facility.

Hypothesis 2a:

Providing mock jurors with Georgia dispositional information about the outcome should a defendant be found NGRI would affect their verdict and sentence recommendation by increasing the number of NGRI verdicts and mental health facility sentences.

Hypothesis 2b:

If the Georgia dispositional information about defendants found NGRI is presented in a specific flow chart, the number of NGRI verdicts and mental health facility sentences should be further increased.

Hypothesis 3:

Participants who receive the Georgia dispositional information about the defendant found NGRI in a flowchart, and who have a positive attitude toward the insanity defense, would be most likely to prefer a NGRI verdict and to give a mental health facility recommendation.

Hypothesis 4:

Participants in the flow chart condition should have more correct knowledge and fewer false beliefs about a defendant found NGRI than participants in the Georgia dispositional group and the no information group.

Hypothesis 5: Participants in the flow chart condition should be least likely of all groups to believe that the defendant will continue to be a danger to society.

CHAPTER 2

METHOD

Participants

A convenience sample of 116 undergraduate students enrolled in Introduction to Psychology and other psychology courses at Georgia Southern University participated for course credit and/or extra credit. The participants were 32% male, 68% female, 29.3% African-American, 63.8% Caucasian-American, 1.7% Hispanic-American, .9% Asian-American, 1.7% other American and 2.6% were citizens from another country. The mean age of participants was 21 years old ($SD = 3.5$) and 26.7 % were freshman, 17.2% were sophomores, 25% were juniors and 31% were seniors. A majority (97.4%) had never served on a jury or received treatment for a mental illness (94.8%). However 62.1% of students indicated that someone in their family or a close friend had received treatment for mental illness.

Design

The design of the study for analyses was a 2 (negative attitude towards insanity: low vs. high) X 3 (dispositional instruction: no instruction vs. Georgia dispositional instruction vs. Georgia dispositional instruction plus flowchart).

Materials

The *Insanity Defense Attitude Scale-Revised* (IDA-R), developed by Skeem, Loudon, & Evans (2004), is a self-report measure used to assess attitudes toward the insanity defense (see Appendix A). There are two sub-scales; one, labeled “strict liability,” which includes questions assessing the belief that mental illness is associated with a lowered ability to make rational decisions (e.g., “I believe that people should be held responsible for their actions no matter what their mental condition.”) and the other, labeled “injustice and danger,” which includes questions

assessing the belief that the insanity defense is misused (e.g., “The insanity defense threatens public safety by telling criminals that they can get away with a crime if they come up with a good story about why they did it.”) (Skeem et al., 2004). Both subscales have been shown to have internal consistency ($\alpha = .68$ for strict liability, $\alpha = .88$ for injustice and danger) (Skeem et al., 2004).

The IDA-R also shows convergent validity with the similar Insanity Defense Support (IDS) scale, such that the strict liability scale on the IDA-R is strongly associated with the punishment scale from IDS ($r = -.75$) and the injustice and danger scale of the IDA-R is strongly associated with the IDS perceived danger scale ($r = .67$) (Skeem et al., 2004). Participants’ scores on the IDA-R are also a strong predictor of participants’ case judgments. This is especially true when looking at the strict liability subscale of the IDA-R, such that high scores on the IDA-R are related to more guilty verdicts, and low scores on the IDA-R are related to more NGRI verdicts, which can be seen across different samples (Skeem et al., 2004; Skeem et al., 2001). Cronbach’s alphas for the current sample were .88 for the strict liability subscale and .87 for the injustice and danger subscale. Cronbach’s alpha for the total IDA-R was .88.

Case description. Participants read a criminal case description in which a defendant is accused of committing murder. The case described a man who was mentally ill, as defined by mental health experts in court, and who was not aware that he had done anything wrong. The experts go on to say that at the time of the stabbing, which resulted in the victim’s death, the defendant more than likely believed he was being threatened which may have caused him to react violently. At the end of the case description, participants read that the defendant pled Not Guilty by Reason of Insanity (NGRI).

Dispositional instruction. After reading the case description, one third of participants were randomly assigned to the Georgia dispositional instruction condition in which they read a short sentence containing information about what happens to a defendant if they are actually found NGRI (permitted by Georgia Law (Georgia Annotated Code, 17-7-131 as cited in Wheatman & Shaffer, 2001)):

Should you find the defendant not guilty by reason of insanity at the time of the crime, the defendant will be committed to a state mental health facility until such time, if ever, that the court is satisfied that he should be released pursuant to law.

(see Appendix B). Another third of participants were randomly assigned to read the Georgia instructions plus a detailed flowchart depicting what happens to a defendant if they are found not guilty by reason of insanity (see Appendix C). The final third of participants were randomly assigned to receive no dispositional instructions with their materials. Participants did not receive judge's instructions about legal insanity because research by Skeem et al. (2004) found that verdict patterns were similar for mock jurors who received instructions and those who received no instructions.

All participants also received a demographics questionnaire and a questionnaire asking participants to indicate their verdict: not guilty, not guilty by reason of insanity, or guilty. Participants then chose a punishment from the following options: probation, life, death, or time in a mental health facility or prison. Participants who recommended time in a mental health facility or prison, were prompted to write in a number of years they suggested for the chosen punishment.

Participants also completed a manipulation check, in which they responded to an open-ended question asking what happens to a defendant found NGRI. Dispersal and collection of all packets was monitored by a researcher.

Procedure

Participants arrived in a classroom with no more than 40 other participants. After completion of informed consent, they were given packets. Participants were told that they should complete the materials in the order presented, and that they had a 50- minute time limit. The order of the questionnaires in the packet was as follows: IDA-R, case description, procedural information (when assigned), verdict and suggested punishment questionnaire, demographics questionnaire, and manipulation check. Participants were told not to go back to previously completed sections.

Upon completion of the packet, participants received a full debriefing which consisted of giving each participant a handout, and were asked not to discuss the study with other prospective participants. Finally, participants were thanked for their participation and dismissed.

CHAPTER 3

RESULTS

It was hypothesized that preexisting biases about the insanity defense, would have more impact on the juror's verdict determination than information presented during trial, that providing mock jurors with factual information about the result of a verdict of a defendant found not guilty by reason of insanity would increase the likelihood of a NGRI verdict, and if the information was presented about defendants found not guilty by reason of insanity in a more specific, flow chart manner this would increase not guilty by reason of insanity verdicts compared to the other conditions.

Preliminary analyses

Manipulation check: Comprehension of dispositional instruction. Participants were asked, "What happens to a defendant found not guilty by reason of insanity?" to assess participants' comprehension of dispositional information. If our manipulation was successful, participants who received the Georgia Instructions and the Georgia Instructions plus the flowchart should demonstrate more correct knowledge than participants who did not receive any dispositional information. Their responses to this question were coded for correct knowledge and false beliefs. Coders were blind to the hypotheses and the manipulation that the participants received. Cohen's Kappa was used to assess inter-rater reliability between coders. Kappa was acceptable, ranging from .81-.86.

There are two elements of correct knowledge of NGRI disposition. (1) knowledge that an NGRI defendant will be committed to a mental health facility; and (2) knowledge that the time of commitment is indeterminate; that is a judge must be satisfied that the person should be released. Participants' responses to the open-ended question were coded for this correct

knowledge. Participants received one point for each correct answer. Participants received 0.5 points on the second question if they indicated that someone had to determine that the acquitted-insane person had restored their sanity, but they did not correctly mention that this was determined by a judge or court. Thus, their knowledge scores could range from zero to two points.

Only two participants scored a perfect 2 points ($M = .81$, $Mdn = 1.0$, $SD = .56$). The false beliefs codes included (3) whether the participant stated that the defendant would or could be set free immediately, without treatment or punishment, (4) whether the participant stated that the defendant would or could commit more crimes, (5) whether the participant stated that the defendant would or could be let out too early or the consequences would not be harsh enough, (6) whether the participant stated that the defendant would or could ever go to prison, (7) whether the participant stated that the defendant would or could be put on probation or receive a sentence other than prison or mental health facility, and (8) whether the participant stated that he/she did not know what would happen or they were unsure of what would happen to the defendant (see Appendix H). Participants received one point for each false belief they mentioned. Scores could range from zero to six points. Participants' scores ranged from zero to two points ($M = .5$, $Mdn = 0$, $SD = .69$). Table 1 shows the frequency of each false belief by condition. False beliefs did not reliably vary by condition (all p 's > .05).

Attitudes towards the insanity defense. To assess whether participants' IDA-R scores were randomly distributed across conditions, a one-way ANOVA was conducted. Surprisingly, the analysis was significant, indicating that IDA-R scores were not randomly distributed, $F(2, 113) = 4.25$, $p = .02$. A post-hoc examination of the means showed that participants randomly assigned to the No Information condition scored significantly lower on the IDA-R ($M = 3.63$, SD

= .83) than did participants assigned to the Georgia Dispositional Instruction Condition ($M = 4.24$, $SD = 1.08$). Participants assigned to the Flowchart Condition ($M = 4.05$, $SD = .82$) scored similarly to participants in the other two conditions. Consequently, we analyzed the effects of the different dispositional instructions on the dependent variables with ANCOVAs, to control for IDA-R scores. All assumptions underlying the ANCOVA were tested and met before proceeding.

Participants' responses to the two subscales of the IDA-R were summed and averaged. Scores could range from one to seven. Average scores on the strict liability subscale ranged from 1.7 to 6.4 ($M = 3.74$; $SD = 1.03$). Average scores on the injustice and danger subscale ranged from 1.33 to 7 ($M = 4.14$; $SD = 1.08$). Because the subscales were strongly correlated, ($r = .53$) the IDA-R in its entirety was also summed and averaged, with averages ranging from 1.53 to 6.68 ($M = 3.98$; $SD = .94$).

Judgments of verdict and punishment. No participant chose a verdict of not guilty; verdict scores were dummy coded as either NGRI (0) or Guilty (1). No participant chose probation as a sentencing recommendation, only 11 participants recommended life in prison, and only 2 participants recommended the death sentence. Thus, recommendations for some prison time, life in prison, and death were combined into a Prison variable. Punishment scores were then dummy coded as either Mental Health Facility (0) or Prison (1). Participants were asked to rate their estimate that the defendant committed the crime on a scale from one to seven with scores ranging from 4 to 7 ($M = 6.35$, $SD = .82$) and confidence that the verdict chosen was appropriate with scores ranging from 2 to 7 ($M = 5.61$, $SD = 1.20$). Because there was a restriction of range of estimation scores, this variable was not analyzed further. Verdict confidence was not related to IDA-R scores, verdict, or punishment, and thus was dropped from further analyses.

Bivariate correlations were then calculated between IDA-R scores, IDA-R subscale scores, the dependent measures of verdict, punishment, and the manipulation check variables of correct knowledge, false beliefs, and belief in future dangerousness. As Table 2 shows, both subscales were positively correlated with sentence recommendation and verdict, with the strict liability subscale being more strongly correlated with both verdict and sentence. However, the injustice and danger subscale is more strongly positively correlated with the belief that the defendant will continue to be a danger to society than the strict liability subscale. The belief that the defendant will continue to be a danger to society is also positively correlated with the number of false beliefs, and the number of false beliefs is negatively correlated with the correct knowledge score.

Tests of hypotheses

Hypothesis 1 stated that pre-existing biases about the insanity defense would affect a mock juror's verdict determination and sentence recommendation. Specifically, it was hypothesized that those with an inaccurate opinion of the insanity defense would be more likely to say the defendant is guilty and recommend prison time while participants with positive or neutral opinions about the insanity defense would be more likely to say the defendant is not guilty by reason of insanity and recommend time in a mental health facility.

As shown in table 2 and described above, both subscales of the IDA-R were positively associated with verdict and punishment. To assess the percentage of low and high IDA-R participants that voted for either a NGRI verdict or a guilty verdict, a median split was used to classify participants as either low or high on the IDA-R ($Mdn = 4.16$) such that all participants scoring between 1 and 4.15 were classified as low ($N = 63$) and participants scoring between 4.16 and 7 were classified as high ($N = 53$).

As expected, results showed that IDA-R scores were reliably related to verdict preference, $\chi^2(1, N = 116) = 28.38, p < .001$. Of participants who were classified as low on the IDA-R, 79% said the defendant was NGRI while only 21% said guilty. Participants who were classified as high on the IDA-R had opposite results such that 30% said the defendant was NGRI and 70% said guilty.

Separate median splits were also conducted to classify participants as either low or high on the injustice and danger subscale ($Mdn = 4.33$) such that all participants scoring between 1 and 4.33 were classified as low ($N = 56$) and participants scoring between 4.34 and 7 were classified as high ($N = 60$). A median split was also conducted for the strict liability subscale ($Mdn = 3.9$) such that all participants scoring between 1 and 3.9 were classified as low ($N = 62$) and participants scoring between 4 and 7 were classified as high ($N = 54$).

Beliefs of injustice and dangerousness were reliably related to verdicts, $\chi^2(1, N = 116) = 5.30, p = .02$. Of participants who were classified as low on the injustice and dangerousness subscale, 68% said the defendant was NGRI while only 32% said guilty. Participants who were classified as high on the injustice and dangerousness were about evenly split, such that 47% said the defendant was NGRI and 53% said guilty.

Beliefs in strict liability were also reliably related to verdicts, $\chi^2(1, N = 116) = 26.6, p < .001$. Of participants who were classified as low on the strict liability subscale, 79% said the defendant was NGRI and 21% said the defendant was guilty. Participants who were classified as high on the strict liability subscale showed an opposite pattern, such that 31.5% preferred a NGRI verdict and 68.5% preferred a guilty verdict. Overall, the pattern of results shows that a high belief in strict liability is strongly predictive of a guilty verdict. See Table 3 for an examination of all verdict recommendations.

IDA-R scores were also reliably related to sentence recommendation, $\chi^2(1, N = 116) = 6.13, p = .01$. Of the participants who chose to sentence the defendant to a mental health facility, 61% were low in IDA-R scores and 39% were high. Of the participants who chose to sentence the defendant to a prison term, 34.5% were low in IDA-R scores and 65.5% were high.

We also examined the sentence recommendations of individuals low and high in each of the two subscales. Beliefs in injustice and dangerousness were not reliably related to sentence recommendations, $\chi^2(1, N = 116) = .74, p = .26$. The large majority of participants low in injustice and dangerousness beliefs (79%) and the large majority of participants high in injustice and dangerousness beliefs (72%) recommended that the defendant be sentenced to a mental health hospital. However, beliefs in strict liability were reliably related to sentence recommendations, $\chi^2(1, N = 116) = 10.39, p = .001$. Participants low in strict liability beliefs (87%) were more likely to recommend a mental health facility for the defendant than were participants high in strict liability beliefs (61%). See Table 4 for an examination of punishment recommendations.

To test hypotheses 2a, 2b, 4, and 5, the effects of the different dispositional instructions on verdict, sentence, dispositional knowledge, dispositional false beliefs, and the belief that the defendant would continue to be a danger to society if found NGRI, we conducted a one-way MANCOVA while controlling for IDA-R scores, $F(10, 216) = 2.16, p = .01, \eta^2 = .10$. Follow-up univariate tests showed that the dispositional instructions did not reliably affect verdict ($p = .60$) or the number of false beliefs about what happens to a defendant found NGRI ($p = .80$). Dispositional instructions had a marginally significant effect on sentence recommendation, $F(2, 111) = 2.92, p = .058, \eta^2 = .05$, with participants who received the flow chart being more likely

to recommend a prison sentence than participants who received the Georgia instructions or no instructions.

Follow-up univariate tests also showed a main effect of dispositional instructions on dispositional knowledge, $F(2,111) = 3.38, p = .04, \eta^2 = .06$. Participants who received no dispositional information were less knowledgeable about what happens to a defendant found NGRI ($M = .65, SD = .50$) than were participants who read the Georgia dispositional instructions ($M = .92, SD = .61$) or participants who read the Georgia dispositional instructions with a flowchart ($M = .86, SD = .54$). Follow-up univariate tests also showed a main effect of dispositional instructions on the belief that the defendant would continue to be a danger to society if found NGRI, $F(2, 111), = 3.69, p = .04, \eta^2 = .06$. Participants who received the flow-chart ($M = 4.95, SD = 1.37$) were less likely to believe that the defendant would continue to be a danger to society if they were released than participants receiving no information ($M = 5.24, SD = 1.38$) and participants receiving the Georgia instructions ($M = 5.29, SD = 1.35$).

We could not adequately test hypothesis 3, since the insanity defense attitudes were not randomly distributed across dispositional instructions. However, an examination of participants with low vs. high IDA-R scores within each of the three levels of dispositional instructions showed an interesting pattern. Participants who were classified as low on the IDA-R were more likely to choose a sentence of NGRI, while participants classified as high on the IDA-R were more likely to choose a sentence of guilty in all three dispositional instruction groups. Further, a majority of participants recommended a mental health facility sentence, regardless of IDA-R scores. The one exception was that participants in the flow-chart condition who were classified as high on the IDA-R were more likely to recommend a prison sentence (see Tables 5 and 6).

CHAPTER 4

DISCUSSION

The main goal in conducting this research was to examine the impact attitudes about the insanity defense have on verdict and sentencing and to assess a new way of delivering dispositional instructions so participants will use correct information instead of attitudes to help them when determining a verdict and recommending a sentence (Wheatman & Shaffer, 2001; Wiener et al., 2004). Similarly to Wheatman and Shaffer (2001), it was hypothesized that people who serve on juries may not accept insanity pleas because they do not fully understand what happens to the defendant should they be found NGRI, and therefore are worried that the defendant will simply be let free.

The first hypothesis stated that pre-existing biases about the insanity defense would affect a mock juror's verdict determination and sentence recommendation. This hypothesis was supported, such that participants scoring low on the IDA-R were more likely to suggest the defendant be detained to a mental health facility and participants scoring high on the IDA-R were more likely to suggest the defendant be detained to prison.

It was also hypothesized that if the information about defendants found NGRI was presented in a more specific way, such as a flow chart, the number of NGRI verdicts and lenient punishment suggestions should be even further increased. Contrary to hypotheses, dispositional instructions did not affect verdict choice. Surprisingly, participants who received the flowchart were more likely to recommend a prison sentence than were participants who received the Georgia instructions or no instructions. Verdict and punishment suggestions were driven by the Strict Liability subscale of the IDA-R, not the injustice and dangerousness subscale. Thus it

appears participants want the defendant to be held responsible for the crime, even if insane during the commission.

It was hypothesized that participants in the flow chart condition would have more correct knowledge and less false beliefs about a defendant found NGRI than participants in the Georgia dispositional group and the no information group. Participants who received no dispositional information were less knowledgeable about what happens to a defendant found than were participants who read the Georgia dispositional instructions or participants who read the Georgia dispositional instructions with a flowchart. Also, a main effect was found for dispositional instructions on the belief that the defendant would continue to be a danger to society if found NGRI. Participants who received the flow-chart were less likely to believe that the defendant would continue to be a danger to society if they were released than participants receiving no information and participants receiving the Georgia instructions. Further, it was expected that if the participant received no dispositional information and had a negative opinion of the insanity defense, then the participant would be more likely to render a guilty verdict. While the dispositional information did not have any effect on verdict, participants in the no information condition who scored high on the IDA-R were more likely to suggest the defendant go to prison.

These results add to the available literature because while it was expected that attitudes toward the insanity defense would affect verdict and sentence recommendation, it was also expected that if participants received the flow-chart their attitudes could be overcome and they would be able to use the information from the flow-chart rather than their false beliefs. This was not the case. In fact, the flow-chart seemed to have the opposite effect on participants. This may be due in part to participants simply glancing at the flow chart, and focusing on the overall image of the document and focusing on only one central aspect of it. If participants came in to the study

with a schema regarding NGRI verdict, they may have simply focused on the part of the flow chart that supported their schema and ignored everything else.

Also, in the Georgia dispositional instructions the words “if ever” are used when describing the time frame in which the defendant could be released. In the flow chart, the possibility of release is mentioned twice with no specific time period attached. Participants may have believed that the defendant would get out too early if they received the flow chart because the phrase “if ever” implies a long time which may have seemed more appealing to participants.

Future Research

This research displays the extent to which pre-existing attitudes about the insanity defense influences mock jurors when it comes to sentencing and determining punishment. It would be beneficial to further examine the relationship between attitudes and verdict and sentencing, to possibly discover a root cause and control for this phenomenon. Other researchers Wheatman & Shafer (2001;) Wiener et al., (2004;) Schlumper et al., (2009) have attempted to overcome the effect attitudes have on mock jurors; however pre-existing ideas seem to have a greater impact.

Any future interventions need to address the liability concerns presented in the strict liability subscale of the IDA-R. Participants need to be educated that an NGRI verdict, and a sentence to a mental health facility, will still hold the defendant accountable for what happened. Future research could also examine expanding on the flow chart used in the current study. While this study did not find significant results, altering the layout, wording or presentation of the flow chart to participants could yield more expected results. To enhance the retention of knowledge about the flow chart, future researchers could set up the presentation as a Powerpoint in which participants are shown one part of the flow chart on each slide. This would

allow the researcher to control the amount of time participants spend looking at each aspect of the flow chart, and it would help ensure that every part of the flow chart is read and understood, (not just one or two major points).

Also, because the Georgia dispositional instructions and the flow chart did not have an effect on verdict, future research should provide mock jurors with information on the meaning of a NGRI verdict. It may have been difficult for participants to understand that NGRI does not mean the person is innocent, but that they were unaware that what they were doing at the time the crime was committed was wrong. It was found that some participants said the defendant was guilty while still recommending a sentence in a mental health facility. This suggests that the participant might lean towards a guilty but mentally ill (GBMI) verdict, which is only allowed in 14 states (Melville & Naimark, 2002).

In these states, a defendant found GBMI serves their sentence in prison and is required to receive psychiatric treatment while serving their sentence, but they may also be restricted to a psychiatric ward, which is more restrictive than a regular prison block (Melville & Naimark, 2002). Further, prisons do not have the best psychiatric help because all inmates can get treatment, GBMI or not, so the defendant might not receive adequate treatment. If participants were made aware of the differences, they might be less inclined to render a verdict of guilty, knowing what the consequences are.

The relationship between attitudes, knowledge about the trial process and the type of defendant involved, and verdict determination needs to be studied further to ensure future jurors are as well educated as possible and eliminate everything all other factors aside from what information is presented during trial to provide defendants with a truly fair trial.

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APPENDIX A

Instructions: For each question below, circle the number that best represents your attitude.

1. The insanity defense returns disturbed, dangerous people to the streets.

1-----2-----3-----4-----5-----6-----7

Strongly	Disagree	Somewhat	Neither	Somewhat	Agree	Strongly
Disagree		Disagree	Disagree	Agree		Agree
			nor	Agree		

2. I believe that people should be held responsible for their actions no matter what their mental condition.

1-----2-----3-----4-----5-----6-----7

Strongly	Disagree	Somewhat	Neither	Somewhat	Agree	Strongly
Disagree		Disagree	Disagree	Agree		Agree
			nor	Agree		

3. Perfectly sane killers can get away with their crimes by hiring high-priced lawyers and experts who misuse the insanity defense.

1-----2-----3-----4-----5-----6-----7

Strongly	Disagree	Somewhat	Neither	Somewhat	Agree	Strongly
Disagree		Disagree	Disagree	Agree		Agree
			nor	Agree		

4. Most defendants who use the insanity defense are truly mentally ill, not fakers.

1-----2-----3-----4-----5-----6-----7

Strongly	Disagree	Somewhat	Neither	Somewhat	Agree	Strongly
Disagree		Disagree	Disagree	Agree		Agree
			nor	Agree		

5. The insanity defense threatens public safety by telling criminals that they can get away with a crime if they come up with a good story about why they did it.

1-----2-----3-----4-----5-----6-----7

Strongly	Disagree	Somewhat	Neither	Somewhat	Agree	Strongly
Disagree		Disagree	Disagree	Agree		Agree
			nor	Agree		

6. I believe that we should punish a person for a criminal act only if he understood the act as evil and then freely chose to do it.

1-----2-----3-----4-----5-----6-----7

Strongly Disagree Somewhat Neither Somewhat Agree Strongly
Disagree Disagree Agree Agree

nor Agree

7. The insanity plea is a loophole in the law that allows too many guilty people to escape punishment.

1-----2-----3-----4-----5-----6-----7

Strongly Disagree Somewhat Neither Somewhat Agree Strongly
Disagree Disagree Agree Agree

nor Agree

8. Some people with severe mental illness are out of touch with reality and do not understand that their acts are wrong. These people cannot be blamed and do not deserve to be punished.

1-----2-----3-----4-----5-----6-----7

Strongly Disagree Somewhat Neither Somewhat Agree Strongly
Disagree Disagree Agree Agree

nor Agree

9. Mentally ill defendants who plead insanity have failed to exert enough willpower to behave properly like the rest of us. So, they should be punished for their crimes like everyone else.

1-----2-----3-----4-----5-----6-----7

Strongly Disagree Somewhat Neither Somewhat Agree Strongly
Disagree Disagree Agree Agree

nor Agree

10. With slick attorneys and a sad story, any criminal can use the insanity defense to finagle his way to freedom.

1-----2-----3-----4-----5-----6-----7

Strongly Disagree Somewhat Neither Somewhat Agree Strongly
Disagree Disagree Agree Agree

nor Agree

11. A defendant's degree of insanity is irrelevant: if he commits the crime, then he should do the time.

1-----2-----3-----4-----5-----6-----7

Strongly	Disagree	Somewhat	Neither	Somewhat	Agree	Strongly
Disagree		Disagree	Disagree	Agree		Agree
			nor			
			Agree			

12. We should punish people who commit criminal acts, regardless of their degree of mental disturbance.

1-----2-----3-----4-----5-----6-----7

Strongly	Disagree	Somewhat	Neither	Somewhat	Agree	Strongly
Disagree		Disagree	Disagree	Agree		Agree
			nor			
			Agree			

13. For the right price, psychiatrists will probably manufacture a “mental illness” for any criminal to convince the jury that he is insane.

1-----2-----3-----4-----5-----6-----7

Strongly	Disagree	Somewhat	Neither	Somewhat	Agree	Strongly
Disagree		Disagree	Disagree	Agree		Agree
			nor			
			Agree			

14. I believe that mental illness can impair people's ability to make logical choices and control themselves.

1-----2-----3-----4-----5-----6-----7

Strongly	Disagree	Somewhat	Neither	Somewhat	Agree	Strongly
Disagree		Disagree	Disagree	Agree		Agree
			nor			
			Agree			

15. I believe that all human beings know what they are doing and have the power to control themselves.

1-----2-----3-----4-----5-----6-----7

Strongly	Disagree	Somewhat	Neither	Somewhat	Agree	Strongly
Disagree		Disagree	Disagree	Agree		Agree

nor Agree

16. It is wrong to punish people who commit crime for crazy reasons while gripped by uncontrollable hallucinations or delusions.

1-----2-----3-----4-----5-----6-----7

Strongly	Disagree	Somewhat	Neither	Somewhat	Agree	Strongly
Disagree		Disagree	Disagree	Agree		Agree
			nor Agree			

17. Many of the crazy criminals that psychiatrists see fit to return to the streets go on to kill again.

1-----2-----3-----4-----5-----6-----7

Strongly	Disagree	Somewhat	Neither	Somewhat	Agree	Strongly
Disagree		Disagree	Disagree	Agree		Agree
			nor Agree			

18. It is wrong to punish someone for an act they commit because of an uncontrollable illness, whether it be epilepsy or mental illness.

1-----2-----3-----4-----5-----6-----7

Strongly	Disagree	Somewhat	Neither	Somewhat	Agree	Strongly
Disagree		Disagree	Disagree	Agree		Agree
			nor Agree			

19. As a last resort, defense attorneys will encourage their clients to act strangely and lie through their teeth to appear “insane.”

1-----2-----3-----4-----5-----6-----7

Strongly	Disagree	Somewhat	Neither	Somewhat	Agree	Strongly
Disagree		Disagree	Disagree	Agree		Agree
			nor Agree			

APPENDIX B
Case Description

The defendant, Jim Green, has been charged with second-degree murder and has entered a plea of NOT GUILTY BY REASON OF INSANITY.

Robert Wilson, age 30, often walked to Stevenson's Grocery Store, which was across the street from his apartment building. One evening, he had a few of his friends over to watch a football game on TV. He offered to go to the store to get some snacks and beverages, but had not returned after several hours. One of his friends, Andrew, decided to go to the store himself to check if Robert was still there. Not finding him, he returned to Robert's apartment and called the police, who found Robert's body behind the store. The medical examiner confirmed that the victim had died as a result of being stabbed twice in the back. A knife found at the scene was confirmed to be the murder weapon. On the knife, the police found fingerprints, which matched those of Jim Green, who was picked up a block away from the store.

Jim Green was identified by the store clerk as having loitered around the store's parking lot for the past few days. The police had initially only wanted to question him, but decided to fingerprint him after the store clerk stated that Jim had left the area shortly after the victim did. Upon further inspection, the police noticed that he had blood on his hands. Additionally, two eyewitnesses stated that they saw Green wandering in the store's parking lot and then leave abruptly just after the victim left the store.

Two experienced mental health professionals (a psychologist and a psychiatrist)

were appointed by the court to examine the defendant. These professionals' reports and testimony were in agreement and indicated that the defendant was seriously mentally ill and not likely to improve with treatment. They testified that the defendant showed that he didn't know right from wrong and was not capable of understanding the harmful consequences of his actions. They also stated that the defendant did not know what he was doing at the time he committed the crime, and still wasn't sure that he had committed it at all and believed that the victim was probably threatening him in some way and that the killing was in self defense, or that the police were just making up the crime to put him away. The convenience store clerk testified that he had actually hired the defendant to clean the store's parking lot, which was part of the clerk's duties, but had changed his mind when the defendant had started harassing customers. The defendant's uncle testified that Green had been staying with him for the past two weeks since moving to town. The defendant's uncle also stated that Green had confided in him that he thought people were out to get him and that he often felt the need to protect himself. The uncle testified that he attributed the defendant's frequent episodes of bizarre behavior to drug use, but drug testing and medical records showed that the defendant was not on drugs. The uncle was not aware that for the past several years, Green had been in and out of mental hospitals where he was treated for various mental illnesses. His medical records indicated several hospital admissions where Green was given medication, which improved his condition only briefly. Once he was released, his problems seemed too much for him to control, even while he was medicated. At times during the trial, the defendant showed strange mood swings and appeared to argue with his lawyers.

APPENDIX C

Please read and consider the following information when determining a verdict.

Should you find the defendant not guilty by reason of insanity at the time of the crime, the defendant will be committed to a state mental health facility until such time, if ever, that the court is satisfied that he should be released pursuant to law.

APPENDIX E

Please answer the following question as completely as possible.

1) What happens to defendants found not guilty by reason of insanity?

Circle the number that best represents your attitude.

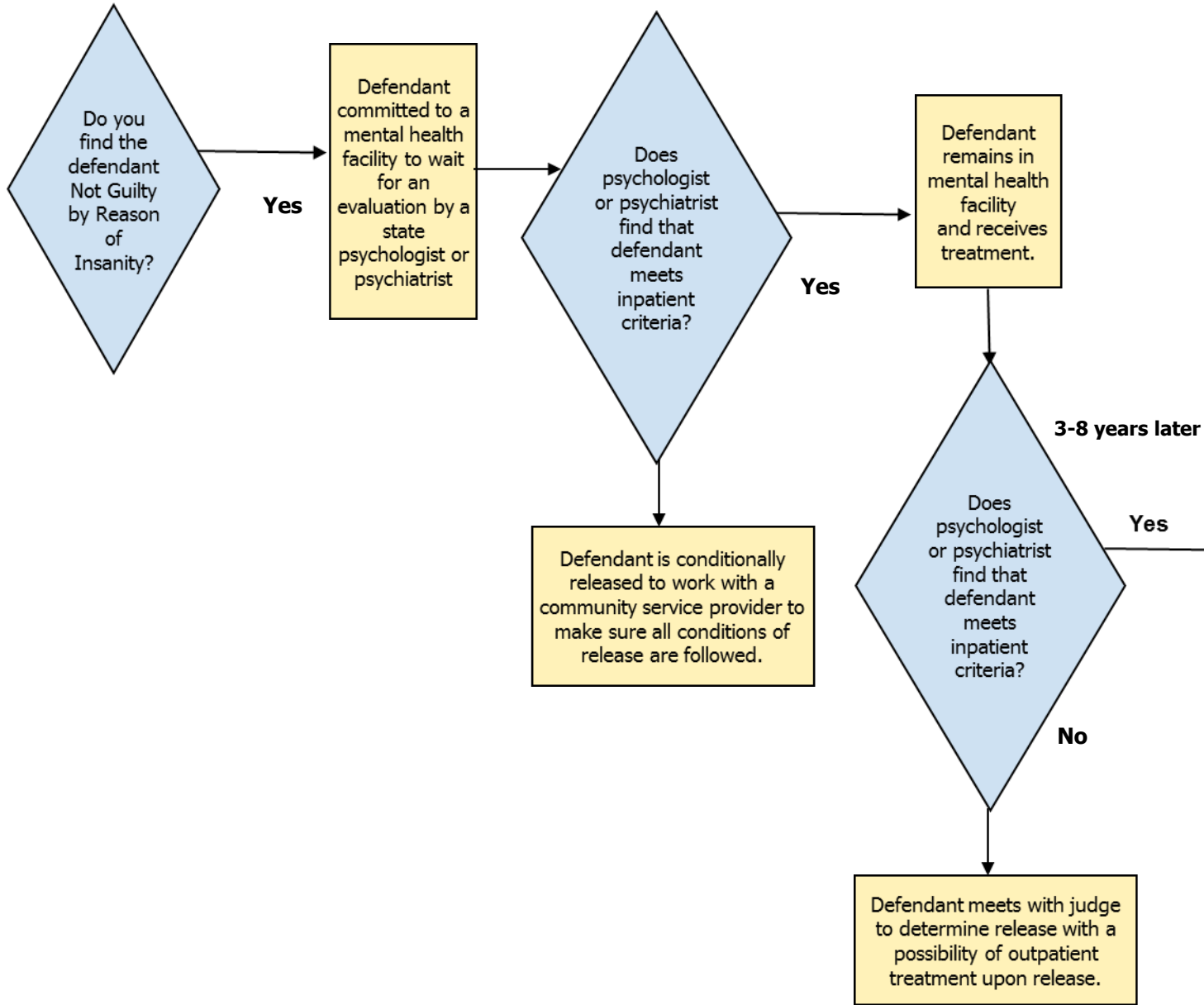
2) Defendants found not guilty by reason of insanity continue to be a danger to society.

1-----2-----3-----4-----5-----6-----7
Strongly Disagree Somewhat Neither Somewhat Agree Strongly
Disagree Disagree Disagree Agree Agree
nor Agree

APPENDIX F

Instructions: Please read the following judge's instructions and review the flowchart; consider this information when

Should you find the defendant not guilty by reason of insanity at the time of the crime, the defendant will be committed to a mental health facility until such time, if ever, that the court is satisfied that he should be released pursuant to law.



APPENDIX G

Demographics Questionnaire

Instructions: Please place an X next to the appropriate label that best describes you, and write your numerical age.

- 1.) Your sex: Male Female
- 2.) Your ethnicity: African American Native American
 Caucasian American Asian American
 Hispanic American Other American
 Citizen from another country
- 3.) Your age: _____
- 4.) Year in college: Freshman Sophomore
 Junior Senior
 Other
- 5.) Have you ever served as a juror in a criminal case? yes no
- 6.) Have you ever received treatment for a mental illness? yes no
- 7.) Have any of your close friends or family members received treatment for a mental illness? yes no

APPENDIX H

Coding Instructions **What happens to defendants found not guilty by reason of insanity?**

Read a participant's entire answer to the manipulation check.

Code 1: Code each answer on whether the participant showed knowledge that an NGRI defendant will be committed to a mental health facility.

0 = no

1 = yes

Code 2: Code each answer on whether the participant showed knowledge that the time of commitment is indeterminate; that is the court must be satisfied that the person should be released.

0 = no

0.5 = authority, professional, someone other than the court determines release

1 = yes

Code 3: Code each answer on whether the participant stated that the defendant would or could be set free immediately, without treatment or punishment.

0 = no

1 = yes

Code 4: Code each answer on whether the participant stated that the defendant would or could commit more crimes.

0 = no

1 = yes

Code 5: Code each answer on whether the participant stated that the defendant would or could be let out too early or the consequences would not be harsh enough.

0 = no

1 = yes

Code 6: Code each answer on whether the participant stated that the defendant would or could ever go to prison.

0 = no

1 = yes

Code 7: Code each answer on whether the participant stated that the defendant would or could be put on probation or receive a sentence other than prison or mental health facility.

0 = no

1 = yes

Code 8: Code each answer on whether the participant stated that he/she didn't know what would happen or they were unsure of what would happen to the defendant.

0 = no

1 = yes

Table 1
Frequency of false beliefs by condition

	Flow-Chart	Georgia Instructions	No Instructions
Defendant would or could be set free immediately	7.5%	20.5%	16.2%
Defendant would or could commit more crimes	5%	7.9%	8.1%
Defendant could or would be let out too early or punishment would not be harsh enough	5%	5.1%	0%
Defendant would or could go to prison	12.5%	7.7%	5.4%
Defendant would or could be put on probation	10%	2.6%	5.4%
Participant did not know what would happen to defendant	7.5%	5.1%	13.5%

Table 2
Correlation Matrix

	1	2	3	4	5	6	7	8
1. IDA total score	1.00	.786**	.817**	.521**	.303**	.584**	.220**	-.086
2. IDA injustice and danger subscale		1.00	.528**	.360**	.185*	.544**	.205*	-.137
3. IDA strict liability subscale			1.00	.546**	.405**	.442**	.258**	-.130
4. Verdict				1.00	.462**	.314**	.231*	-.220*
5. Sentence					1.00	.173	.087	.018
6. Belief defendant continues to be a danger						1.00	.219*	-.122
7. Number of false beliefs							1.00	-.544**
8. Correct knowledge score								1.00

** Correlation is significant at the .01 level (2-tailed).

* Correlation is significant at the .05 level (2-tailed).

Table 3

Verdict Suggestion

IDA-R Classification	Guilty	NGRI
Low IDA-R	21%	79%
High IDA-R	70%	30%

Verdict Suggestion

IDA Subscale Classifications	NGRI	Guilty
Low Injustice and Danger	68%	32%
High Injustice and Danger	47%	53%
Low Strict Liability	79%	21%
High Strict Liability	31.5%	68.5%

Table 4
Sentence Recommendation

IDA-R Classification	Prison	Mental Health Facility
Low IDA-R	35%	61%
High IDA-R	66%	39%

Sentence Recommendation

IDA Subscale Classifications	Mental Health Facility	Prison
Low Injustice and Danger	79%	21%
High Injustice and Danger	72%	28%
Low Strict Liability	87%	13%
High Strict Liability	61%	39%

Table 5

Relationships between low and high IDA-R and verdict within each condition

Flowchart

IDA-R Classifications	NGRI	Guilty
Low	81%	19%
High	26.3%	73.7%

Georgia Instructions

IDA-R Classifications	NGRI	Guilty
Low	72.2%	27.8%
High	38.9%	61.9%

No Instructions

IDA-R Classifications	NGRI	Guilty
Low	83.3%	16.7%
High	23.1%	76.9%

Table 6

Relationships between low and high IDA-R and sentence recommendation within each condition

Flowchart

IDA-R Classifications	Mental Health Facility	Prison
Low	81%	19%
High	42.1%	57.9%

Georgia Instructions

IDA-R Classifications	Mental Health Facility	Prison
Low	77.8%	22.2%
High	71.4%	28.6%

No Instructions

IDA-R Classifications	Mental Health Facility	Prison
Low	91.7%	8.3%
High	84.6%	15.4%