

JUDGEMENTS OF ATTRIBUTIONAL RESPONSIBILITY, SOCIAL DOMINANCE  
ORIENTATION, AND THE INSANITY DEFENSE.

By

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## Abstract

### JUDGEMENTS OF ATTRIBUTIONAL RESPONSIBILITY, SOCIAL DOMINANCE ORIENTATION, AND THE INSANITY DEFENSE

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Issues of race, law, and mental health meet at a cross-section when it comes to cases involving the not guilty by reason of insanity (NGRI) plea in which the defendant is a member of a marginalized group. Although the duty of a juror is to reach a fair and unbiased verdict, the reality is that there are many ways that a person's thoughts can be biased without them being aware of this (Bargh, 2001). This mock juror experiment (the first of its kind), investigated the role that Social Dominance Orientation (SDO) and attributional responsibility has in the success of NGRI pleas among African American and white defendants diagnosed with schizophrenia. Participants read a police report, a trial summary, and saw a photo where only skin color varied between condition, with either a white or African American defendant. Measures of SDO, attitudes about NGRI, attitudes about mental illness, and perceptions of attributional responsibility were taken. Results from ( $N = 320$ ) participants suggest negative attitudes about the insanity plea reduces the likelihood of a juror assigning NGRI,  $R^2 = .09$ ,  $F(1,318) = 31.75$ ,  $b = -.49$ ,  $p < .001$ . Also, higher SDO-D may be related to greater assignment of attributional responsibility to the defendant. Results revealed that as SDO-D rose, attributional responsibility rose  $R^2 = .10$ ,  $F(1,318) = 38.86$ ,  $b = 0.15$ ,  $p < .001$ . Although race did not moderate guilt, other

factors such as a holding negative attitudes toward the insanity plea itself, and toward mentally ill individuals did make a difference.

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## **Literature Review**

Racial discrimination in the legal system (Glasier et. al 2005, United States Bureau of Justice Statistics, 2013, United States Census, 2017), medical (Nelson, 2002) and mental health care system (Smedley, 2002; Write & Perry 2010) has been well documented by previous research. Issues of race, law, and mental health meet at a cross-section when it comes to cases involving the not guilty by reason of insanity plea (NGRI) in which the defendant is a member of a minority group. Although the duty of a juror is to reach a fair and unbiased verdict, the reality is that there are many ways that a person's thoughts can be biased without them being aware of this (e.g., Bargh, 2001). In addition, simple prejudice can effect a jurors' ability to make an impartial decision (Mazzella, 1994). Attitudes about those who have mental illness can affect the way in which a juror assigns responsibility to a defendant (Mosierre & Maeder, 2016). And a person's attitude toward the insanity plea could influence their decision making (Perlin, 1996). This study aims to investigate the role that judgements of attributional responsibility and Social Dominance Orientation (SDO) has in the success of NGRI pleas from African American and white criminal defendants diagnosed with schizophrenia.

### **Social Dominance and Attribution Theory**

Previous attribution research outlines the factors one considers when inferring responsibility for the behavior of others (Weiner, 1995). Attribution researchers have focused on the observation of behavior and the attribution of the perceived cause for a behavior (Jones & Davis 1965, cited in Weiner 1995). Work on attributional

responsibility has revealed that judgments of the amount of causality for a behavior determine the amount of responsibility a perceiver will assign to a target. It is important to note that in a transgression context, the quality and amount of remorse expressed from the transgressor will mitigate the causality-responsibility relationship (Gold & Weiner, 2000). According to Weiner (1995) there are three main factors perceivers draw on when making a judgment of responsibility. *Causality* refers to the perception that the behavior originates from internal forces (e.g. personality, mood, choice) or if the cause of behavior is external or originating from outside the person (e.g. force by others). Behavioral *stability* refers to the expectation that a person will behave in the same way in the future. And lastly, *controllability* is the perception of how much control the target had over their behavior. In the context of crime, stability is the belief that the defendant will reoffend again in the future. If a defendant is believed to be in control of their behavior, then they should be more likely to be assigned responsibility for their actions. Conversely, if a defendant was not in control of their behavior, then they are less likely to be perceived as responsible for the outcome of their behavior. In the contexts of this study, judgements of a defendant having internal locus of causality, perceived controllability, and perceived stability of the behavior should result in more perceived responsibility for their actions.

Those who have mental illness are often assigned an internal causal attribution which is not under their control (Weiner, 1995). However, there is evidence to suggest that this may not be true with all groups. Traditionally marginalized groups such as African Americans are often seen as responsible for their low status within society, and the associated negative consequences associated with that status (Sidanius & Pratto,

2004). Social Dominance Theory was proposed to describe the way in which groups with power maintain their privileges in society (Sidanius & Pratto, 2004). Hierarchy enhancing myths are one mechanism individuals use as justification for the low status of others and to further maintain privileges for the dominant group. The common narrative seen in these myths is that those who find themselves in difficult situations haven't worked hard enough or made choices that resulted in their misfortune. If society can be convinced that a subordinated group is somehow responsible for their position in society, it legitimizes the privileges that the dominant group has. Common themes within these myths maintain the status quo, support marginalization of subordinate groups, and endorse racial prejudice (Sidanius, Pratto, & Bobo, 1996). Social dominance orientation is an enduring characteristic that describes a person's willingness to endorse hierarchy enhancing strategies for maintaining the dominant group's high status. Historically, SDO has been measured on a high to low scale, wherein high SDO indicates more endorsement of hierarchy enhancing myths (such as the divine right of kings), and low SDO reflects egalitarian attitudes that see the hierarchy as unfair (Sidanius, Liu, Shaw, & Pratto, 1994). More recently, SDO has been measured using one scale with two parts. The first includes 4 items measuring SDO – Dominance (SDO-D) and the second 4 items that measure SDO- Egalitarianism (SDO-E) (Ho et al. 2012). The newer SDO-E scale was created for the purpose of capturing dominance-based attitudes through the lack of support for policies that would redistribute resources. Lower scores on the SDO-E scales indicate less supportive attitudes toward egalitarianism.



Research investigating SDO-D and SDO-E and jury decision making has shed light on when a juror is likely to make decisions that reflect anti-black bias.

Kemmelmeier (2005) found that white jurors SDO level predicted guilty verdicts in a mock jury assault case. However, this effect was only present in an interaction between SDO and the defendant's race. White jurors with high social dominance orientation (SDO-D) assigned more guilt to black defendants. White jurors with low social dominance orientation (High scores on the SDO-E scales), were more likely to assign guilt to a white defendant.

The current study aims to understand if those high in SDO-D and Low in SDO-E will be more likely to believe that a minority individual is responsible for their actions or mental illness. If true, we expect greater judgments of responsibility for an African American defendant with mental illness than a white defendant with mental illness. It is also expected that those with lower scores on the SDO-E scale would be more likely to assign guilty verdicts to the white defendant.

Social Dominance Theory and Weiner's theory of Judgements of Responsibility serve as a foundation for the hypotheses in the current study. This investigation expects to find that those found guilty should be more likely to be judged as having an internal locus of causality, be in control of behavior, and be perceived as behaviorally stable. Those found NGRI, should be more likely to be judged as having internal locus of causality, not in control of behavior, and be perceived as behaviorally unstable. In accordance with Social Dominance Theory white defendants should be held less responsible for their actions than will African American defendants due to myths that

marginalized groups are more responsible for the stigmatizing qualities like mental illness. However, these findings should depend on scores of SDO-D or SDO-E, in that those who have egalitarian attitudes (higher SDO-E scores) would be more likely to assign an NGRI verdict.

### **Legal Discrimination**

According to the NAACP, United States holds 2% of the world's population and 21% of its prisoners. Most prisoners are sent to jail through a plea bargain. A jury trial is expensive, time consuming, and due to the high volume of cases it would be impossible to give every defendant a full trial. Of those defendants that do receive a trial, conviction rates are moderated by defendant race, socioeconomic status, and gender (Mazzella, 1994). There is considerable racial disparity in who gets arrested, and what happens after that point. In the USA, African American males are being tried for federal crimes significantly more often than other races. Despite making up only 13.4 % of the population, in 2009 African American males accounted for 45% of all people tried for a felony offense, while whites accounted for 30% and Hispanic-Americans accounted for 24% (United States Bureau of Justice Statistics, 2013, United States Census, 2017). In addition, it has been shown that in comparison to white males, African American males are more frequently convicted, receive harsher sentences, and are more likely to receive a death sentence (Glaser, et. al 2015).

When there is a match between stereotypes, ethnicity, and the crime committed the disparity is exaggerated, an effect known the race-crime congruency effect. The race-

crime congruency effect describes what happens when a crime matches stereotypes about a particular race. For example, a white man would be race-crime congruent when committing a crime that most people associate with white criminals such as embezzlement or financial fraud. Because of this congruence, jurors tend to seek out less disputing information and assign more dispositional (internal) attributions for the defendant's behavior (Jones, 2003). Dispositional attributions can lead to more perceived stability (likelihood of doing it again) which in turn leads to more judgments of responsibility (Weiner, 1983).

### **Mental Health Discrimination**

African American men face discrimination not only in the criminal justice system, but also, in the mental health care system. When compared to white men, African American men have been shown to experience longer wait times, poorer quality care, and negative bias on behalf of the clinician (Smedley, 2002; Write & Perry 2010). This disparity is pronounced when looking at psychiatric diagnoses. African American patients disproportionately receive greater diagnoses of schizophrenia by white clinicians compared to white patients (Neighbors, 2003, Schwartz 2014). Misdiagnosis of a mental illness can create many problems including misguided stigmatization, an incorrect treatment plan, and harm to self-esteem.

Compared to other disorders, schizophrenia was rated higher in perceived dangerousness and “social distance” than were depression or substance abuse disorder (Silton, 2011). Social distance was measured by the amount the participant would be

willing to have a person with schizophrenia as a neighbor, coworker, partner, or in-law. Due to the common misconception that those who have a mental illness are dangerous, people often have a desire to keep mentally ill people away from their social network. The desire for social distance may lead jurors to make a decision that puts more distance between themselves and the defendant with a mental illness. Having schizophrenia may make a person more likely to be found guilty of crime they were accused of because of the perceived dangerousness and desire for social distance experienced by the juror.

### **Not Guilty by Reason of Insanity**

In some cases, an individual may have legal protection from being convicted of a crime due to the severity of their mental illness at the time a crime occurred. In these cases, the jury is given the option of assigning the Not Guilty by Reason of Insanity (NGRI) verdict instead of not guilty. Unlike a not guilty verdict, those who are given NGRI are often assigned additional requirements prior to their release. For example, a person may be required to participate in therapy or involuntarily committed to a mental hospital.

The rules for allowing the insanity defense are different depending on the state that the crime occurs in. The M'Naghten rule assumes that although a person could be held responsible, they were acting under a "deficit of mind" and did not understand what they were doing was wrong at the time of a crime (Coztanzo, 2018). The Durham Standard of 1954 stated that a person who has committed a crime as a product of their mental illness should not be held criminally responsible. Today the ALI standard and

variations of the M'Naghten rule is the most commonly used in the United States (depending on the state) when pleading NGRI. The ALI standard consists of two prongs. The first is the cognitive component, while the second is the volitional component. The cognitive component refers to the ability to understand the wrongfulness of one's actions, or *mens rea* "guilty mind". The volitional component refers to the inability to conform to the law due to an uncontrollable side effect of a mental illness (Cozanzo, 2016).

Although it is possible to defend oneself using a NGRI plea, it is rarely successful. According to Perlin (1996), 1% of felony cases attempt the insanity defense and only 25% of those that attempt it are successful. Additionally, Cirincione (1995) found that defendants successful at using the insanity plea were more likely to be male, white, "older", unmarried, and have been convicted of previous crimes. Along with age, race and criminal history being factors in a trial outcome, it appears that the type of mental illness may affect the outcome of an insanity plea. Research investigating the NGRI defense and mental illness type among participants acting as jurors found participants more willing to give NGRI verdicts to defendants with schizophrenia and depression than for those with substance abuse disorders (Mosier & Maeder, 2016). Schizophrenia has been identified as mental illness that is the most successful at using NGRI as a defense (Mossier et al., 2016). A mock jury study found participants more willing to give Not Criminally Responsible due to Mental Disorder (Canada's version of NGRI) for schizophrenia and bipolar disorder, however they were much less likely to give it to depression or substance abuse disorders (Mossier et al., 2016). This finding implies that schizophrenia may be seen as less controllable than substance abuse or

depression and therefore those with schizophrenia should be held less responsible for their criminal acts.

### **Attitudes about NGRI plea**

Beliefs about NGRI can impact a juror's willingness to hand down the verdict. The NGRI verdict has a long history of myths clouding the public's understanding. Such misunderstandings have been identified and studied by researchers. Common themes in false beliefs about those who plea insanity include concerns about overuse, faking mental illness, and dangerous individuals being allowed back into society. These beliefs have been shown to be enduring over time (Han, 1984, Perlin, 1997, Butler, 2006, Loudon & Skeem, 2007). What is more concerning than the misunderstandings themselves, is the impact they have on courtroom decision making. In a study conducted with 184 jurors, researchers wanted to determine if prototypes about mentally ill persons would guide decision making. In order to understand attitudes toward the insanity plea more fully they also measured support for the plea. The researchers were unable to find an effect for the jurors' prototype because the attitudes participants held about the insanity plea overwhelmingly predicted the verdict (Louden, 2007). In the context of this study, we will consider attitudes toward mental illness and the insanity plea as important sources of influence on jurors.

### **Hypothesis 1: defendant race**

Due to the long history of racial discrimination of African American men in the legal system (Glaser, et. al 2015, Mazzella, 1994, United States Bureau of Justice

Statistics, 2013, United States Census, 2017), we expect that an African American defendant will receive a higher likelihood of guilty verdicts than will the white defendant.

### **Hypothesis 2: social dominance orientation**

As social dominance orientation – dominance (SDO-D) increases, so should the likelihood of a guilty verdict over a NGRI verdict for the African American defendant. This is based on the evidence that those who are high in social dominance orientation should be more likely to maintain privileges for the dominant group through subordination of minority group individuals (Kimmelmeier, M. 2005, Sidanius & Pratto, 2004). In contrast, those who score high on social dominance orientation – egalitarianism (SDO-E), will be more likely to assign a NGRI verdict. This is based on previous evidence showing those who hold high SDO-E are more likely to endorse egalitarian attitudes and may attempt to attenuate the hierarchy by assigning NGRI (Kimmelmeier, M. 2005).

### **Hypothesis 3: verdict x attributions**

Being judged as having an internal locus of causality, being in control of their behavior, and being perceived as behaviorally stable should be related to higher likelihoods of a guilty verdict. Those with higher likelihood of a NGRI verdict, should be more likely to be judged as having internal locus of causality, not in control of behavior, and be perceived as behaviorally unstable. This hypothesis is justified by Weiner's (1995) research which describes that assigning responsibility for behavior depends on perceived locus of cause, controllability, and stability.

**Hypothesis 4: attitudes predicting verdict**

Those with higher negative attitudes toward the insanity plea will be less likely to assign a NGRI verdict regardless of ethnicity of defendant. In addition, those with negative attitudes toward mental illness, should be less likely to assign an NGRI verdict regardless of ethnicity of defendant. Previous research has shown that attitudes about mental illness (Mosierre & Maeder, 2016), and attitudes toward the insanity plea (Louden, 2007) could have a significant impact on the case outcome.



## Methods

### Participants

Four hundred twenty two participants were collected using Mechanical Turk. Forty five participants were masters level workers, which is a designation assigned to those who have a history with passing manipulation checks in previous surveys. Three hundred fifty five participants were non-masters level workers. They were screened for jury eligibility using the filtering software available on Mechanical Turk. Those who are not eligible to serve on a jury (age or other circumstance like felony convictions) were not be able to participate in this study. This was done by making available to survey to only those over the age of eighteen, and asking participants about their jury eligibility in the informed consent. Each participant was compensated 40 cents for participation. After data screening, a sample of three hundred twenty participants ( $M_{\text{age}} = 35.44$ ,  $SD = 12.39$ , 51% Men) were able to be used for the study (See data screening section). The sample was primarily white (64%), followed by Asian (21%), and African American or black (8%), other (3%), biracial white/black (< 1%) and biracial white/pacific islander (< 1%). A power analysis found that a sample of three hundred and sixteen was necessary reach power of .99 with a small effect size of .10 using a multiple regression with 3 predictors.

### Method

Participants were randomly assigned to one of two identical transcripts that included police narrative and summary of a trial. The narrative included information about a man with schizophrenia who has committed a violent offense. Race was

manipulated with images of either a white or a black man. The images were identical other than the darkness of the skin in order to control for differences in face structure that could influence the perception of guilt. These identical faces were achieved through face manipulation software. A composite image of 20 African and 20 Caucasian faces was rendered. The age of the man appeared to be mid to late twenties. After reading the transcript, the participants were first asked to assign a guilty or NGRI verdict, then they completed a series of measures assessing Social Dominance Orientation (Ho et al. 2012), attitudes toward mental illness (CAMI) (Taylor & Dear, 1981), attitudes toward NGRI pleas (IDAQ) (Roberts & Golding, 1991), and attributional judgements of responsibility. Finally, were asked demographic questions about their age, gender, and ethnicity.

## **Measures**

### **NGRI verdict**

To assess assigned guilt of the defendant, the participant was asked to indicate on a Likert scale from 1-7 how likely they would be to give a guilty (7) or NGRI (1) insanity verdict.

### **Narrative**

The narrative used in this study was adapted from a police narrative and trial summary used in a study assessing insight and insanity plea judgements (Jung et al. 2015). For the purposes of this study, language having to do with the insight manipulation was removed. In addition, there were two versions of the narrative,

differing only in ethnicity of defendant. Ethnicity were primed by use of images as described above.

### **Attitudes toward mental illness and the insanity plea**

The measure used to measure negative attitudes toward mental illness was the Community Attitudes toward Mental Illness questionnaire (CAMI) (Taylor & Dear, 1981). The CAMI is a 30 item 5 point Likert scale. For the purposes of this study, only the 10-item Community Mental Health Ideology subscale was included. A 20 item 7-point Likert scale Insanity Defense Attitudes Questionnaire (IDAQ) (Roberts & Golding, 1991), was used to measure support for the insanity plea. The original IDAQ included a case construal subscale that is not relevant to this study. Those items were included.

### **Attributional judgements of responsibility**

A formal scale measuring attributional judgements of responsibility had not yet been created in the form needed for this study. A 10-item Likert scale was created to measure the extent to which the participant agreed with several statements about the participant. Three items assessed locus of causality (e.g., *The defendant made mistakes in life that resulted in this crime*), three items assessed stability (e.g., *I believe that this defendant is likely to act violently again in the future*), three items assessed controllability (e.g., *I believe that the defendant had control over their behavior*), and one item asked about overall judgments of responsibility (*How responsible for their behavior do you believe the defendant is?*).

### **Social dominance orientation**

The scale used in this study to measure social dominance orientation was developed as a 16 item 7 point Likert scale (Ho et al. 2012). The first 8 items measure the extent to which the participant holds hierarchy supporting attitudes (Social Dominance Orientation – Dominance) (SDO-D). The next 8 items measure the extent to which the participant holds egalitarian attitudes, in turn attenuating the hierarchical structure of society (Social Dominance Orientation Egalitarian) (SDO-E).

## Results

### Data screening

Two separate samples were collected within two weeks of each-other through MTurk. The first sample was of forty-five participants who achieved a master qualification on MTurk. Masters qualifications are earned through consistently passing manipulation checks and completing a larger number of surveys. The second sample was of three hundred fifty-five participants using those who are non-masters. Four hundred participants total completed the survey. Nine declined to allow their responses to be used after being exposed to the debrief. It was observed that many of the non-masters had a very short completion time, indicating issues with attention. Twenty-one participants were removed from the dataset due to their completion times being considered outliers ( $> 2 SD$  away from the mean). Further, a 95% confidence interval was created around the mean completion time for the master MTurk participants (95% *CI* [215.4, 1374.8]). The purpose of this confidence interval was to identify any participants who took an unusually short amount of time to complete the survey. Completing the survey too quickly doesn't provide enough time to properly engage with the materials. Those in the master and non-master samples were removed if they fell below a completion time of 215 seconds (the lower bound of the confidence interval). The removal of participants due to unusually short completion times excluded 80 (2 from master and 78 non-master) participants from the analysis. After all screening was complete non-masters and masters sample were combined to create a sample size of  $N=320$ .

Data was screened for normality. The LNGRI variable was non-normally distributed with skewness value of  $-.67$  and no issues with kurtosis. LNGRI variable was not improved by using log, square root, or inverse transformations. The SDO-E variable was non-normally distributed with a skewness value of  $-.86$ . The SDO-D variable was non-normally distributed with a kurtosis value of  $-1.31$ . And again, the use of log, square root, or inverse transformations did not improve normality for either SDO-D or SDO-E. All other variables were found to have no notable normality issues.

### **Hypothesis 1 defendant race**

A t-test was conducted to determine if there was a difference in likelihood of assigning an NGRI verdict between the African American condition ( $M = 4.47, SD = 1.71$ ) and the White condition ( $M = 4.68, SD = 1.73$ ). Results revealed no significant difference in likelihood of assigning a NGRI plea,  $t(317) = -1.11, p = .26$ .

### **Hypothesis 2 social dominance orientation**

A moderated regression analysis was conducted to determine if the likelihood of assigning NGRI depended on an interaction between SDO and the ethnicity of the defendant. No significant interaction existed between race condition and SDO-D  $R^2 < .03, b = 0.17, p = .09$ . No significant interaction existed for race condition and SDO-E  $R^2 < .04, b = 0.001, p = .99$ .

A simple regression analysis was used to determine if scores on the SDO-D scale predicted the likelihood of assigning an NGRI verdict. Higher levels of SDO-D predicted an increased likelihood of assigning an NGRI verdict  $R^2 < .02, b = .13, p = .01$ .

A simple regression analysis was used to determine if scores on the SDO-E scale predicted the likelihood of assigning an NGRI verdict. Those with higher SDO-E scores were significantly more likely to assign an NGRI verdict,  $R^2 = .08$ ,  $b = 0.35$ ,  $p = .001$ .

### **Hypothesis 3 attributional responsibility**

Three composite variables were created from the attributional responsibility survey grouping items regarding causality, controllability, and stability. These composite variables were entered as predictors into a multiple regression analysis predicting likelihood of NGRI. Overall the model was significant  $R^2 = .29$ ,  $F(3,316) = 44.6$ ,  $p < .001$ . Attributions of internal causality related to a decrease in likelihood of NGRI verdict  $b^* = -0.38$ ,  $p < .001$ . More perceived controllability related to a decrease in likelihood of assigning NGRI  $b^* = -0.49$ ,  $p < .001$ . Perceived stability related to an increase in likelihood of assigning NGRI  $b^* = 0.17$ ,  $p = .003$ .

### **Hypothesis 4 mental health attitudes and insanity plea attitudes**

A composite variable was created from the responses on the IDAQ questionnaire. Results from a simple regression analysis revealed that increases in negative attitudes toward the insanity plea related to decreased likelihood of assigning NGRI,  $R^2 = .09$ ,  $F(1,318) = 31.75$ ,  $b = -.49$ ,  $p < .001$ .

A composite variable was created from the responses on the CAMI questionnaire. Results from a simple regression analysis revealed that positive attitudes toward the mentally ill individuals were related to an increase in likelihood of assigning NGRI,  $R^2 < .12$ ,  $F(1,125) = 45.71$ ,  $b = 1.00$ ,  $p < .001$ .

### **Exploratory analyses**

To better understand the relationship between social dominance orientation and attributional responsibility, exploratory analyses were conducted. Two simple regression analysis was conducted to determine if SDO-D or SDO-E predicted how much attributional responsibility was assigned to the defendant. Results revealed that as SDO-D rose, attributional responsibility rose  $R^2 = .10$ ,  $F(1,318) = 38.86$ ,  $b = 0.15$ ,  $p < .001$ . SDO-E was not a significant predictor of attributional responsibility  $R^2 < .001$ ,  $F(1,318) = 60.02$ ,  $b = -0.005$ ,  $p = .01$ .



## Discussion

Although race did not moderate guilt, other factors such as a holding negative attitudes toward the insanity plea itself, and toward mentally ill individuals did make a difference. It is logical that if jurors believe that the insanity plea is a loop-hole or an unjust defense, they would be less likely support it as a defense when deliberating. This is likely why many cases involving the insanity plea screen out jurors who hold strong opinions about the defense.

Further, these findings highlight the roll that SDO plays in cases where the culpability of the defendant is unclear. Those who rated higher on the SDO-D scale were less likely to assign the NGRI plea, and conversely, those who were higher in SDO-E were more likely to assign the NGRI plea. Ideological endorsement of status quo and hierarchy within society has implications for the way a juror conceptualizes guilt. In this case the presence of hierarchy endorsing attitudes or the absence of egalitarianism negatively impacts a defendants ability to defend themselves using the NGRI plea. Findings such as these add to the broad body of literature implicating SDO in courtroom decision making (e.g., Kemmelmeier, 2005).

In addition, to the theoretical contribution to SDO literature, this study tested a novel scale measuring attributional responsibility from three established domains. It was found that if the participants believed that the defendant had control over their behavior, and that the behaviors were caused by something internal to the defendant, they were then more likely to assign a guilty verdict. This was especially true for those who were high in SDO. The relationship identified between SDO and attributional responsibility is

important because this theoretical link has not been directly tested in previous work. The beliefs that a person earns their position within society can be explained by attributions of responsibility, and specifically we have found evidence for causality and controllability being especially important. Responsibility for one's position within society is a central theme in beliefs of dominance and legitimization of an unequal hierarchical system. Through the lens of judgements of responsibility, we are able to parse out the components that allow one high in SDO to justify their belief systems. Identifying these components inspires questions about how we can challenge these beliefs.

The aim of this study was to identify the factors that contribute to assignment of a NGRI plea when the defendant is member of a marginalized group. In this mock jury study, there was not a significant difference between the likelihood of assigning the NGRI plea between white and African American defendants. These findings are not surprising given the complex effect that race has on juror deliberation. There are several moderators found in previous research that this study did not account for. Previous research has shown that black defendants receive harsher sentences when the victim is white (Mazzella, & Feingold, 1994), and when the crime is racially charged (Sommers, & Ellsworth, 2000). The sample collected in this study did not contain enough participants who identified as black or African American to test for an interaction between defendant race and juror race. Future research should collect a more diverse sample in which additional analyses could be conducted. In addition, the hypothetical crime was not racially motivated or stereotypical (e.g., race-crime congruency effect). The neutral nature of the crime was purposeful in order to isolate the effect that race and mental

illness would have on the deliberation process. To investigate the effects of mental illness and crime, a comparison group to of defendants not diagnosed with mental illness and variance in crime type would be useful.

This study faces several limitations. The most glaring is that of the need for heavy handed data-screening procedures. Ideally participants would have undergone a more stringent manipulation checks and the need to screen participants based on amount of time they took to complete the study would have been unnecessary. Indeed, recent studies have questioned the validity of using MTurk workers for psychological research and a call for better data screening procedures has been made (Chmielewski & Kucker, 2020). Future directions should address better screening techniques and increase sample-size to allow for comparisons to be made along other dimensions such as juror race.

## References

- Bargh, J. A., Gollwitzer, P. M., Lee-Chai, A., Barndollar, K., & Trötschel, R. (2001). The automated will: Nonconscious activation and pursuit of behavioral goals. *Journal of Personality and Social Psychology, 81*(6), 1014-1027.  
doi:<http://dx.doi.org/10.1037/0022-3514.81.6.1014>
- Butler, B. (2006). NGRI Revisited: Venirepersons attitudes toward the insanity defense1. *Journal of Applied Social Psychology, 36*(8), 1833-1847.  
doi:10.1111/j.0021-9029.2006.00084.x
- Chmielewski, M., & Kucker, S. C. (2020). An MTurk Crisis? Shifts in data quality and the impact on study results. *Social Psychological and Personality Science, 11*(4), 464–473. <https://doi.org/10.1177/1948550619875149>
- Cirincione, C., Steadman, H. J., & McGreevy, M. A. (1995). Rates of insanity acquittals and the factors associated with successful insanity pleas. *Bull Am Acad Psychiatry Law, 23*(3), 339-409. Retrieved February 15, 2019.
- Criminal Justice Fact Sheet. (n.d.). Retrieved November 17, 2018, from <https://www.naacp.org/criminal-justice-fact-sheet/>
- Felony Defendants in Large Urban Counties, 2009 (2013, December). Retrieved November 17, 2018, from <http://www.bjs.gov/content/pub/pdf/fdluc09.pdf>

- Glaser J., Martin, K. D., & Kahn, K. B. (2015). Possibility of death sentence has divergent effect on verdicts for black and white defendants. *Law and Human Behavior, 39*(6), 539-546. doi:<http://dx.doi.org/10.1037/lhb0000146>
- Goode, E. (2012, March 22). Stronger hand for judges after rulings on plea deals. Retrieved from <https://www.nytimes.com/2012/03/23/us/stronger-hand-for-judges-after-rulings-On-plea-deals.html>
- Hans, V. P. (1986). An analysis of public attitudes toward the insanity defense. *Criminology, 24*(2), 393-414. doi:10.1111/j.1745-9125.1986.tb01502.x
- Ho, A. K., Sidanius, J., Pratto, F., Levin, S., & Thomsen, L. (2011, October 26). Social dominance orientation: Revisiting the structure and function of a variable predicting social and political attitudes. *Personality and Social Psychology Bulletin, 38*(5), 583-606. doi:10.1037/e514892012-001
- Jones, C. S., & Kaplan, M. F. (2003). The effects of racially stereotypical crimes on juror decision-making and information-processing strategies. *Basic & Applied Social Psychology, 25*(1), 1-13.
- Louden, J. E., & Skeem, J. L. (2007). Constructing insanity: Jurors prototypes, attitudes, and legal decision-making. *Behavioral Sciences & the Law, 25*(4), 449-470. doi:10.1002/bsl.760

- Lynch, M., & Haney, C. (2011). Mapping the racial bias of the white male capital juror: Jury composition and the “empathic divide.” *Law & Society Review*, 45(1), 69–102. doi:10.1111/j.1540-5893.2011.00428.x
- Kemmelmeier, M. (2005). The effects of race and social dominance orientation in simulated juror decision making. *Journal of Applied Social Psychology*, 35(5), 1030-1045. doi:10.1111/j.1559-1816.2005.tb02158.x
- Mazzela A., & Feingold, A. (1994). The effects of physical attractiveness, race, socioeconomic status, and gender of defendants and victims on judgments of mock jurors: A meta-analysis. *Journal of Applied Social Psychology*, 24(15), 1315-1338. doi:10.1111/j.1559-1816.1994.tb01552.x
- Mossière, A., & Maeder, E. M. (2016). Juror decision making in not criminally responsible on account of mental disorder trials: Effects of defendant gender and mental illness type. *International Journal Of Law & Psychiatry*, 4947-54. doi:10.1016/j.ijlp.2016.05.008
- Neighbors, H. W., Trierweiler, S. J., Ford, B. C., & Muroff, J. R. (2003). Racial differences in DSM diagnosis using a semi-structured instrument: the importance of clinical judgment in diagnosis of African Americans. *Journal of Health and Social Behavior*, 43, 237-256.
- Nelson, A. (2002). Unequal treatment: Confronting racial and ethnic disparities in health care. *Journal of the National Medical Association*, 94(8), 666-668. doi:10.17226/12875

- Perlin, M.L. (1996). Myths, realities, and the political world: The anthropology of insanity defense attitudes
- Schwartz, R. C. (2014). Racial disparities in psychotic disorder diagnosis: A review of empirical literature. *World Journal of Psychiatry, 4*(4), 133.  
doi:10.5498/wjp.v4.i4.133
- Sidanius, J., Pratto, F., & Bobo, L. (1996). Racism, conservatism, affirmative action, and intellectual sophistication: A matter of principled conservatism or group dominance? *Journal of Personality and Social Psychology, 70*(3), 476-490.  
doi:http://dx.doi.org/10.1037/0022-3514.70.3.476
- Sidanius, J., Liu, J. H., Shaw, J. S., & Pratto, F. (1994). Social dominance orientation, hierarchy attenuators and hierarchy enhancers: social dominance theory and the criminal justice system. *Journal of Applied Social Psychology, 24*(4), 338-366.  
doi:10.1111/j.1559-1816.1994.tb00586.x
- Sidanius, J., Pratto, F., Laar, C. V., & Levin, S. (2004). Social dominance theory: Its agenda and method. *Political Psychology, 25*(6), 845-880.  
doi:10.1111/j.14679221.2004.00401.x
- Silton, N. R. Flannelly, K. J., Milstein, G., & Vaaler, M. (2011). Stigma in America: Has anything changed? Impact of Perceptions of mental illness and dangerousness on the desire for social distance: 1996 and 2006. *The Journal of Nervous and Mental Disease, 199*, 361-366. <http://dx.doi.org/10.1097/NMD.0b013e3331821cd112>
- Smedley, B. D., Stith, A. Y., & Nelson, A. R. (2002). Institute of medicine (US). Unequal

treatment confronting racial and ethnic disparities in healthcare. Washington, DC: National Academies Press.

U.S. Census Bureau QuickFacts: UNITED STATES. (2017). Retrieved from <https://www.census.gov/quickfacts/fact/table/US/PST045217>

Weiner, B. (1999). *Judgments of responsibility: A foundation for a theory of social conduct*. New York: The Guilford Press.

Wright, E. R., & Perry, B. L. (2010). Medical sociology and health services research: past accomplishments and future policy challenges. *Journal of Health and Social Behavior*, *51*(1\_suppl). doi:10.1177/0022146510383504