

2019

Is Criminal Sentencing Influenced by Type of Disorder?

Christopher Koch

George Fox University, ckoch@georgefox.edu

Tessa Jones

Follow this and additional works at: https://digitalcommons.georgefox.edu/psyc_fac



Part of the [Psychiatry and Psychology Commons](#)

Recommended Citation

Koch, Christopher and Jones, Tessa, "Is Criminal Sentencing Influenced by Type of Disorder?" (2019). *Faculty Publications - Psychology Department*. 55.
https://digitalcommons.georgefox.edu/psyc_fac/55

This Article is brought to you for free and open access by the Department of Psychology at Digital Commons @ George Fox University. It has been accepted for inclusion in Faculty Publications - Psychology Department by an authorized administrator of Digital Commons @ George Fox University. For more information, please contact arolfe@georgefox.edu.

Is Criminal Sentencing Influenced by Type of Disorder?

Christopher Koch & Tessa Jones
George Fox University

Abstract

Differences in sentencing due to disorder and gender were examined. Four scenarios were randomly presented for each disorder type. Participants indicated the sentence length for each scenario and whether they would parole the individual. Men with personality disorders received longer sentences while women with psychotic or neurological disorders received longer sentences. Perpetrators with personality disorders were less likely to be paroled than those with a psychotic or neurological disorder. Parole decisions about psychotic women were made faster than any other condition.

Introduction

Determining how long a person should be sentenced to prison is an extremely complicated and stressful process. Trying to account for the role a disorder may have had on behavior further complicates this process. Judging a person with a diagnosed disorder has previously been shown to decrease sentence lengths, as well as increasing the amount of rehabilitation support included in sentences (Berryessa, 2018). Twenty-one California Superior Court judges were interviewed in a study examining judicial attitudes towards offenders with High Functioning Autism Spectrum Disorder (HFA). Fifteen judges believed HFA would be an important factor in determining sentences, while nine judges explained HFA would be a potential mitigating factor in determining sentences (Berryessa, 2016). If a disorder is thought to be the cause of a criminal act, sentencing may likely decrease as a result. However, the disorder typically must be the main connection to the crime. Some disorders have been found to decrease sentences more than others, such as neurocognitive disorders, PTSD, and FASD (Verdun-Jones & Butler, 2013). Age may additionally play a role in smaller sentences, as judges have been found to focus more on treatment with younger offenders (Verdun-Jones & Butler, 2013). This study compares sentence lengths for three general types of disorders (i.e, psychotic, personality, neurological). Based on previous research, we anticipated shorter sentence lengths for psychotic disorders but those decisions would take longer to make.

Method

Participants

Participants were 35 introductory psychology students. The sample had a mean age of 20.46 (SD=5.67) and was predominately female (88.57%).

Design

This experiment was a 3 (disorder) x 2 (sex) within-subject design. Four scenarios were created for each disorder category. There were two male and two female perpetrators for each category. The crime (murder) was held constant across all scenarios.

Procedure

The 12 scenarios were randomly presented across participants. After each scenario was presented, participants selected a sentence length and indicated whether they would possibly parole the individual. RTs were recorded for both decisions.

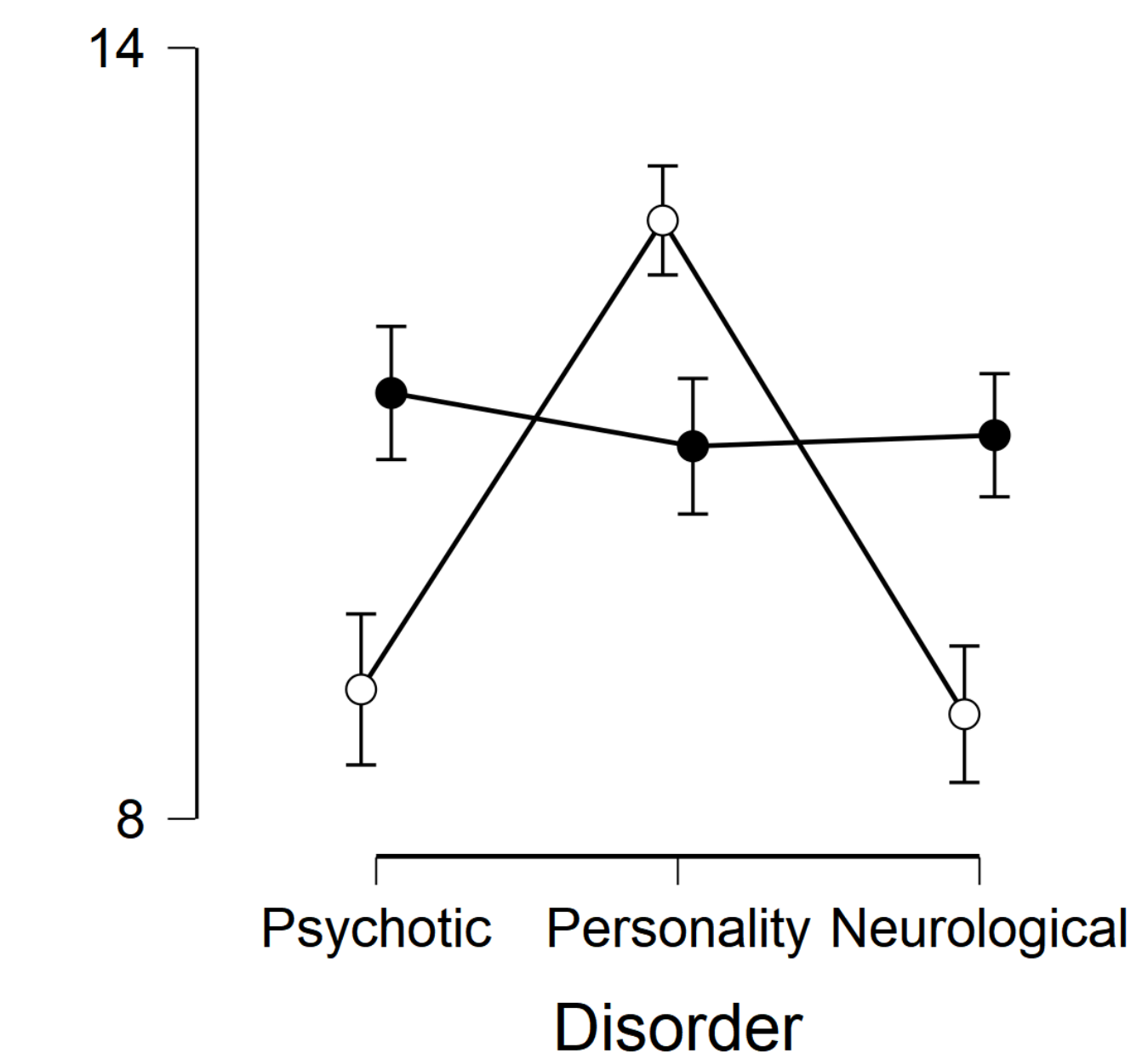
Psychotic Disorder	
Sophia	Psychotic Delusional Disorder
Kailey	Dissociative Identity Disorder
Noah	Brief Psychotic Disorder
Nate	Schizoaffective Disorder
Personality Disorder	
Ella	Bipolar Disorder
Hailey	Obsessive-Compulsive Disorder
Lucas	Borderline Personality Disorder
Brian	Schizotypal Personality Disorder
Neurological Disorder	
Olivia	Spinocerebellar Ataxia
Alexandria	Huntington's Disease
Logan	Cerebellar Cognitive-Affective Syndrome
Shane	Brain Tumor (Prefrontal)

Olivia developed spinocerebellar ataxia type 8 around the age of 18. It is a neurodegenerative disease that has developed over decades and brought on personality change, unstable moods, and a loss of balance and coordination. She has aggressive outbursts and has difficulty controlling her movements during these outbursts. She has a history of violence towards others, and one day lashes out at a man during a doctor's checkup. She was arrested after taking the life of a nurse in the office. She appeared in court a week later.

Ella started showing signs of Pediatric Bipolar Spectrum Disorder around late elementary school. In middle school she was diagnosed with Bipolar Disorder II, and over the years it has progressed into severe patterns of major depressive episodes and major manic episodes. She stops trying to control her episodes and her symptoms elevate and become out of control. She is arrested several times and is eventually sentenced to anger management groups and therapy. One day she has an outburst in therapy and sends her therapist to the ER in critical condition. The therapist dies the next morning and Ella is located and taken into custody.

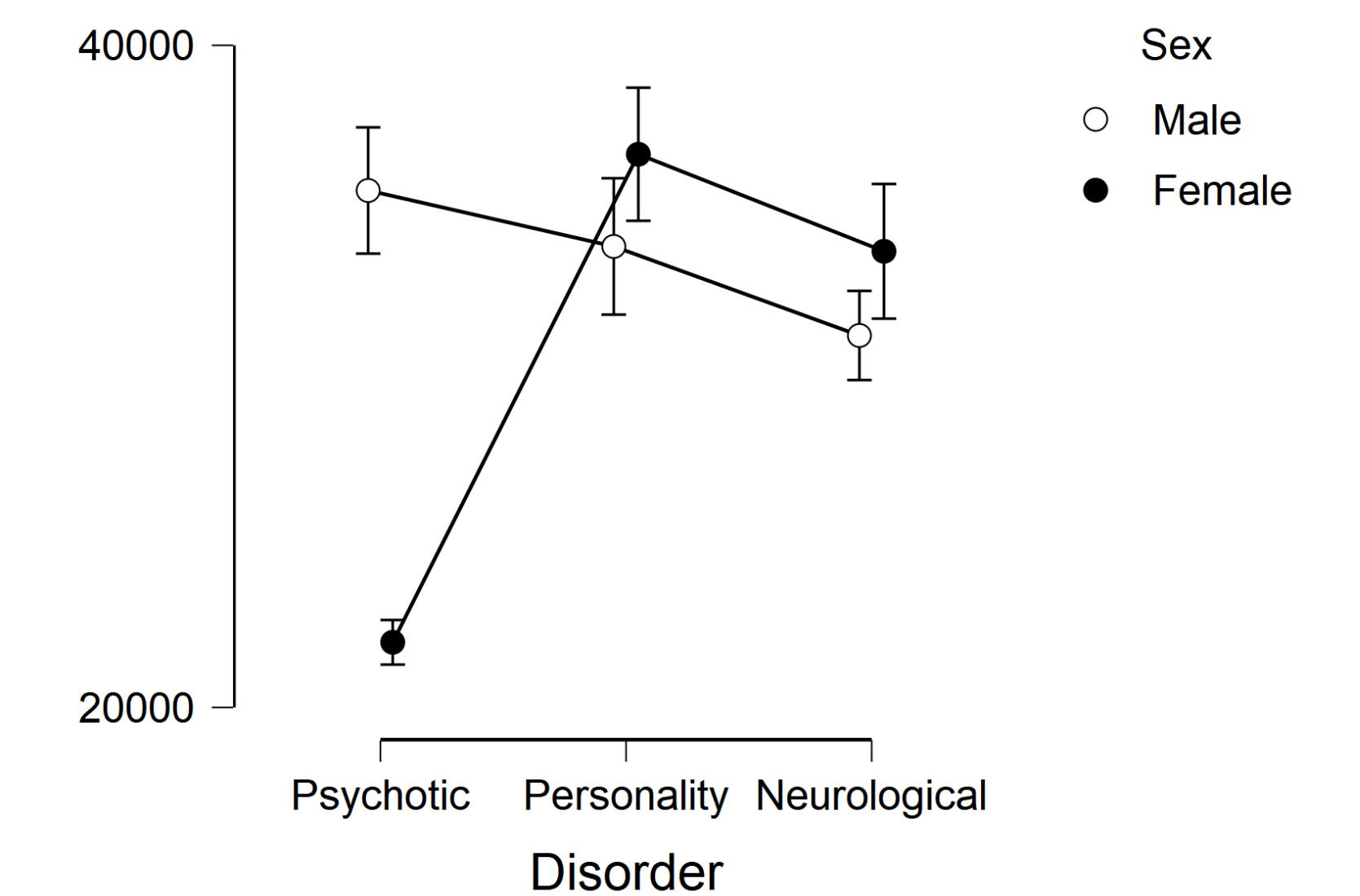
Nate has been diagnosed with Schizoaffective disorder since the age of seventeen. He has symptoms of both schizophrenia and depression. Nate firmly believes that his whole family has been taken and replaced with cloned robots, and that he will soon be the next to be taken. He stops taking his medication for fear it had been replaced with something else as well. When his parents drive him to a weekly doctor's appointment, he begins to have a panic attack and attempts to break away once at the hospital. When his doctor attempts to bring down his heart rate with a shot, Nate attacks and kills the doctor.

Results & Discussion



There was a significant interaction between disorder and sex of the perpetrator ($F(2, 68)=13.29$, $p<.001$; $\eta^2_p=.28$). The sentence length was generally longer for females than for males but was longest for males with a personality disorder. There were no differences in RTs across conditions.

There was also a significant interaction between disorder and sex for time to determine parole status ($F(2, 68)=14.35$, $p<.001$; $\eta^2_p=.30$). The quickest decisions were made for female perpetrators with a psychotic disorder.



Sex	Disorder	Mean	SD	N
Male	Psychotic	31855.600	13492.550	35
	Personality	30099.929	12223.451	35
	Neurological	27616.371	8608.694	35
Female	Psychotic	32293.571	9424.721	35
	Personality	33405.757	13266.425	35
	Neurological	30240.400	12257.363	35

Participants were generally more likely to parole individuals with a neurological or psychotic disorder than individuals with a personality disorder.

Disorder	f	%	Lower	Upper
Psychotic	41	58.57%	47.03%	70.11%
Personality	35	50.00%	38.29%	61.71%
Neurological	45	64.29%	53.06%	75.51%

Overall, it does appear that participants, similar to judges, use disorders as mitigating factors in when making sentencing and parole decisions.

