The Supreme Court's Evolving Death Penalty Jurisprudence: Severe Mental Illness as the Next Frontier

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Abstract: The U.S. Supreme Court's recent death penalty jurisprudence displays the Court's willingness to invalidate the death penalty for certain offenses or classes of offenders, including those with mental retardation and those who were under eighteen at the time of the offense. The Court has noted that the death penalty in these cases constitutes a disproportionate punishment because it fails to adequately serve the two primary goals of the Cruel and Unusual Punishments Clause: retribution and deterrence. Because the cognitive and volitional impairments caused by severe mental illness result in a parallel diminution in culpability and deterrability, severe mental illness is an appropriate next frontier at which to apply the Court's emerging concept of proportionality. Social attitudes have only recently begun to shift toward opposing the death penalty for those with severe mental illness at the time of the offense. Nonetheless, the Court's recent death penalty cases teach that the Court may independently determine that execution of these offenders is a disproportionate punishment if it concludes that executing such offenders does not adequately serve the goals of retribution and deterrence.

INTRODUCTION

The U.S. Supreme Court began a significant new chapter in its death penalty jurisprudence in 2002, when the Court in Atkins v. Virginia held that the Eighth Amendment prohibits the imposition of capital punishment on those with mental retardation.¹ The Court, in effect, announced that the Constitution requires a per se finding of diminished

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¹ See 536 U.S. 304, 321 (2002).
responsibility. All people with mental retardation, the Court held, are constitutionally exempt from capital punishment based upon their diagnosis alone. The Court did not require any individualized showing of diminished responsibility or other functional impairment. After concluding that those with mental retardation are significantly less culpable and deterrable than others who commit capital murder, the Court prohibited capital punishment for this entire class of offenders. The Court highlighted the fact that people with mental retardation "have diminished capacities to understand and process information, to communicate, to abstract from mistakes and learn from experience, to engage in logical reasoning, to control impulses, and to understand the reactions of others." Reasoning that their execution does not "measurably contribute[] to one or both of [the] goals" of "retribution and deterrence of capital crimes by prospective offenders," the Court held that "the imposition of the death penalty on a mentally retarded person ... 'is nothing more than the purposeless and needless imposition of pain and suffering,' and hence an unconstitutional punishment."

In 2005, in Roper v. Simmons, the Court reached the same conclusion with regard to juveniles who were under the age of eighteen at the time of the offense. In Roper, the Court held that juveniles similarly lack sufficient culpability and deterrability to permit execution consistent with the Eighth Amendment. Once again, the Court's rule was categorical. Like those with mental retardation, all juveniles under age eighteen are presumed to be insufficiently culpable and deterrable. The Court again did not require individualized findings of functional inability.

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2 See id. at 318, 320-21; see also Kennedy v. Louisiana, 128 S. Ct. 2641, 2650 (2008) ("[The Court] held in [Roper v. Simmons, 543 U.S. 551 (2005)] and Atkins that the execution of juveniles and mentally retarded persons are punishments violative of the Eighth Amendment because the offender had a diminished personal responsibility for the crime."). modified, 129 S. Ct. 1 (2008) (mem.).
3 See Atkins, 536 U.S. at 318.
4 See id.
5 See id. at 306, 318-21.
6 Id. at 318.
7 Id. at 319 (quoting Enmund v. Florida, 458 U.S. 782, 798 (1982)).
8 Atkins, 536 U.S. at 319 (quoting Gregg v. Georgia, 428 U.S. 153, 183 (1976) (3-3-1-2 decision) (Stewart, Powell & Stevens, J., announcing the judgment of the Court)).
9 Id. (quoting Enmund, 458 U.S. at 798).
10 See 543 U.S. at 578.
11 Id. at 569-72.
12 See id. at 578.
13 See id. at 569-72; see also supra note 2.
14 See Roper, 543 U.S. at 569-72.
The *Roper* Court concluded that the death penalty is a disproportional punishment for juveniles, and hence cruel and unusual, because of several significant differences between juveniles and adults. First, juveniles are more susceptible to immature and irresponsible behavior, so their conduct is not as morally reprehensible as that of adults. Second, they are considerably more vulnerable to the influence of others and lack control over their immediate surroundings. Consequently, their inability to escape negative influences in their environments can be forgiven more easily. Third, a juvenile's personality and sense of identity are still developing, which makes the commission of even heinous crimes insufficient evidence of an "irretrievably depraved character." The reduced culpability of juveniles, in the Court's view, renders them less deserving of retribution, and their immaturity, lack of future perspective, and reduced impulse control make them less subject to deterrence. These deficiencies, comparable to those experienced by offenders with mental retardation, supported the Court's conclusion that the juvenile death penalty lacks a sufficient relationship to the purposes of capital punishment to allow its imposition consistent with the Eighth Amendment.

*Kennedy v. Louisiana*, decided in 2008, is the most recent case in the Supreme Court's evolving death penalty jurisprudence. In it, the Court imposed a categorical limitation not on a class of offenders subject to capital punishment, but on the types of crimes for which it may be imposed. The Court held that the Eighth Amendment prohibited the death penalty for the rape of a child where the crime "did not result, and was not intended to result, in death of the victim." The Court reiterated previous statements that the Eighth Amendment requires punishment to be "graduated and proportioned" to the crime, and that capital punishment "be limited to those offenders who commit 'a narrow category of the most serious crimes' and whose extreme
culpability makes them 'the most deserving of execution.'" 27 The first of these conditions is not satisfied, the Court held, when the offense does not, or is not intended to, produce the death of the victim. 28 After noting the paucity of statutes authorizing capital punishment for child rape and extensively analyzing the history of its imposition, the Court found the existence of a national consensus against capital punishment for this offense. 29 In terms of moral depravity and injury to the victim and the public, the Court distinguished between intentional first-degree murder and non-homicide crimes against individuals, even those crimes as devastating in their harm as child rape. 30 The Court concluded that capital punishment for this offense would not sufficiently satisfy the aims of retribution and deterrence that justify capital punishment. 31 Speaking broadly, the Court stated that the proportionality principle of the Eighth Amendment requires that capital punishment be limited to the "worst of crimes," which in the case of offenses against individuals result in the death of the victim. 32

These three cases give new meaning to the proportionality requirement imposed by the Eighth Amendment. 33 They reveal an emerging conception of the proportionality requirement that the Court could extend to other capital punishment contexts. 34 Severe mental illness is a compelling next frontier at which to apply the Court's evolving death penalty jurisprudence. Certain mental illnesses bear some striking similarities to both mental retardation and juvenile status. 35 Severe mental

27 Id. at 2650 (quoting Roper, 543 U.S. at 568).
28 See Kennedy, 128 S. Ct. at 2662 ("The incongruity between the crime of child rape and the harshness of the death penalty poses risks of overpunishment and counsels against a constitutional ruling that the death penalty can be expanded to include this offense.").
29 See id. at 2651-58.
30 See id. at 2660.
31 Id. at 2662-64.
32 See id. at 2661 ("[T]he resulting imprecision and the tension between evaluating the individual circumstances and consistency of [death penalty] treatment have been tolerated where the victim dies. It should not be introduced into our justice system, though, where death has not occurred."); id. at 2665. The Court's broad statement would exclude the death penalty for crimes such as kidnapping for ransom, torture, repeated acts of domestic violence, and first-degree felonies with a hate crime component. See id. at 2661, 2665.
33 See Kennedy, 128 S. Ct. at 2649-51; Roper, 543 U.S. at 569-72; Atkins, 536 U.S. at 318-21.
34 See Kennedy, 128 S. Ct. at 2649-51; Roper, 543 U.S. at 569-72; Atkins, 536 U.S. at 318-21.
35 See infra notes 322-374 and accompanying text. Although some similarities exist between mental illness and mental retardation, the two are not identical. "The essential feature of Mental Retardation is significantly subaverage general intellectual functioning . . . ." Am. Psychiatr. Ass'n, Diagnostic and Statistical Manual of Mental Disorders 41 (4th ed. text rev. 2000) [hereinafter DSM-IV-TR]. By contrast, a diagnosis of men-
illness at the time of the offense may significantly diminish the offender's blameworthiness and amenability to deterrence in ways not unlike mental retardation and juvenile status. This Article analyzes this evolving death penalty jurisprudence and examines whether the Court could apply it to limit the application of capital punishment to defendants with severe mental illness.

At least five leading professional associations—the American Bar Association ("ABA"), the American Psychiatric Association ("APsyA"), the American Psychological Association ("APA"), the National Alliance on Mental Illness ("NAMI"), and Mental Health America ("MHA") (formerly known as the National Mental Health Association)—have adopted policy statements that recommend prohibiting the execution of those with severe mental illness. These organizations recommend a
non-categorical, case-by-case determination of whether the severity of a defendant’s mental illness at the time of the crime should bar the prosecution from seeking the death penalty. Although this joint recommendation might prompt future legislative change, it has not yet succeeded in doing so.

Another important difference exists between severe mental illness and the death penalty contexts addressed in Atkins, Roper, and Kennedy. In the three cases in which the Court applied its emerging conception of proportionality, it relied in part upon the objective indicia of “evolving standards of decency” reflected in legislative practices. As the Court recently reiterated in Kennedy, the “existence of objective indicia of consensus against making a crime punishable by death was a relevant concern in Roper, Atkins,” and prior cases. In both Atkins and Roper, the Court stressed the trend of statutory change in the direction of abolishing the death penalty for those with mental retardation or who were juveniles at the time of the offense. This echoed the Court’s similar reliance on legislative action in its earlier determinations that the death penalty could not be imposed for such offenses as the rape of an adult woman where death of the victim did not result, or felony murder where the defendant himself neither took the life of the victim from capital punishment in limited circumstances. See id. at 688. In addition to representatives of the ABA, the Task Force included representatives from the APsyA and APA. See id. at 669. Additionally, the APsyA and APA, as well as the NAMI and MHA, have independently approved those Task Force Report recommendations pertaining to the exemption of those with severe mental illness from capital punishment. See Nat’l Alliance on Mental Illness, Public Policy Platform of the National Alliance on Mental Illness § 10.9.1.2, at 56-57 (8th ed. 2008); Am. Psychiatric Ass’n, Position Statement: Diminished Responsibility in Capital Sentencing, Dec. 2004, http://www.psych.org/Departments/EDU/Library/APAOfficialDocumentsandRelated/PositionStatements/200406.aspx; Am. Psychological Ass’n, Council Policy Manual: Public Interest, Feb. 2006, http://www.apa.org/about/division/cpmpubint2.html; Mental Health Am., Position Statement 54: Death Penalty and People with Mental Illnesses, June 11, 2006, http://www.nmha.org/go/position-statements/54.

See supra note 37.

See Kennedy, 128 S. Ct. at 2651-58; Roper, 543 U.S. at 563-67; Atkins, 536 U.S. at 312-16.

102 S. Ct. at 2651.

See Roper, 543 U.S. at 566 (“[I]t is not so much the number of these States [banning imposition of the death penalty on defendants with mental retardation] that is significant, but the consistency of the direction of change.” (quoting Atkins, 536 U.S. at 315)); see also infra notes 58-59.

See Coker v. Georgia, 433 U.S. 584, 596-97 (1977) (plurality opinion) (“The current judgment with respect to the death penalty for rape is not wholly unanimous among state legislatures, but it obviously weighs very heavily on the side of rejecting capital punishment as a suitable penalty for raping an adult woman.”).
nor intended that a homicide occur. And the Court followed this approach in its recent decision in Kennedy, concluding that the death penalty could not be available for the rape of a child whose death did not occur, noting that forty-four of the fifty states do not impose capital punishment for this offense. There simply is no comparable legislative trend toward abolishing the death penalty for those with severe mental illness. Indeed, many prisoners on death row, and many who have been executed, have suffered from demonstrable mental illness. This Article accordingly examines the Supreme Court's evolving death penalty jurisprudence to analyze whether, in the absence of legislative action indicating a consensus against applying the death penalty for those with severe mental illness, or of other objective indicia of evolving social norms on this issue, the Court could nonetheless employ its independent judgment to determine that capital punishment for those with severe mental illness is a disproportionate penalty, and hence cruel and unusual, in violation of the Eighth Amendment.

Scholars who have examined this issue have concluded that in the absence of a legislative trend toward abolishing the death penalty for severe mental illness, the Court could not hold that the application of the death penalty in this context violates the Eighth Amendment. I

43 See Enmund, 458 U.S. at 792-93 ("While the current legislative judgment . . . [is not] as compelling as the legislative judgments considered in Coker, it nevertheless weighs on the side of rejecting capital punishment for the crime at issue.").

44 See 128 S. Ct. at 2652.

45 See infra note 47.

46 See Amnesty Int'I, United States of America: The Execution of Mentally Ill Offenders 170 (2006), available at http://www.amnesty.org/en/library/info/AMR51/003/2006 (naming and describing the conditions of one hundred prisoners with mental illness executed in the United States between 1984 and 2005); Richard J. Bonnie, Mentally Ill Prisoners on Death Row: Unsolved Puzzles for Courts and Legislatures, 54 Cath. U. L. Rev. 1169, 1192 (2005) ("Although firm estimates are not available, the prevalence of serious mental illness on death row is likely higher than most readers imagine—perhaps as high as five to ten percent at any point in time."); Liliana Lyra Jubilut, Death Penalty and Mental Illness: The Challenge of Reconciling Human Rights, Criminal Law, and Psychiatric Standards, 6 Seattle J. for Soc. Just. 353, 367 (2007) ("The more conservative studies find that up to 10 percent of inmates on death row suffer from serious mental illness. However, other studies suggest that the proportion of prisoners on death row who have been treated for some kind of psychiatric disorder can be as high as one-third."); Christopher Slobogin, Mental Illness and the Death Penalty, 1 Cal. Crim. L. Rev. 3, ¶ 2 (2000), http://www.boalt.org/bjcl/v1/v1slobogin.htm ("[A] significant proportion of death row inmates are mentally ill . . . even when mental illness is defined in the narrow sense . . . ."); Am. Civil Liberties Union, Mental Illness and the Death Penalty in the United States, Jan. 31, 2005, http://www.aclu.org/capital/mentalillness/10617pub20050131.html ("While precise statistics are not available, it is estimated that 5 to 10 percent of people on death row have a serious mental illness.").

47 See, e.g., Risdon N. Slate & W. Wesley Johnson, The Criminalization of Mental Illness 342 (2008) ("The Supreme Court will undoubtedly be reticent to exempt people
disagree. This Article argues that, although severe mental illness in itself should not categorically disqualify an offender from capital punishment, in cases in which it produces functional impairments at the time of the offense that significantly reduce culpability and deterrability, Eighth Amendment principles should preclude the death penalty.

Part I of this Article examines the U.S. Supreme Court's emerging conception of proportionality under the Eighth Amendment. It argues that the absence of a record of legislative action toward abolishing the death penalty for those with severe mental illness need not preclude the Court from concluding that executing these offenders violates the proportionality principle. Instead, as previous cases overwhelmingly demonstrate, the Court may reach such a conclusion in the exercise of its own independent judgment. Part II probes the analogies between severe mental illness and mental retardation and juvenile status, and concludes that the Court's proportionality approach should bar the death penalty for offenders whose mental illness at the time of the crime produced functional impairment that likewise significantly diminished their culpability and deterrability. Part III begins by analyzing the standard that should apply in making the Eighth Amendment determination and by discussing those mental illnesses that in principle could satisfy the standard. It then addresses the procedural question of how the issue should be determined and argues that it should be resolved by the trial judge on a pretrial motion, rather than by a special jury convened for this purpose or by a jury determination made at the penalty phase.

with mental illnesses from the death penalty until it sees a similar trend in legislation enacted in a majority of states.

48 See infra notes 54–209 and accompanying text.
49 See infra notes 97–209 and accompanying text.
50 See infra notes 97–209 and accompanying text.
51 See infra notes 210–271 and accompanying text.
52 See infra notes 272–431 and accompanying text.
53 See infra notes 432–478 and accompanying text.
I. WHEN IS CAPITAL PUNISHMENT DISPROPORTIONATE WITHIN THE MEANING OF THE EIGHTH AMENDMENT?

As previously noted, clear similarities exist between mental illness (at least severe mental illness) and mental retardation and juvenile status. All can be seen as reducing culpability and deterrability. Yet the effects of mental illness vary so considerably that the categorical approach adopted by the U.S. Supreme Court in 2002, in Atkins v. Virginia, and in 2005, in Roper v. Simmons, seems inappropriate. Moreover, though it may be argued that a social consensus has emerged condemning capital punishment for those with mental retardation or who were juveniles at the time of the offense, no such consensus exists with regard to capital punishment and mental illness.

The Supreme Court’s application of Eighth Amendment principles in Atkins, Roper, and its 2008 decision in Kennedy v. Louisiana was supported by the majority’s conclusion that an emerging national consensus rejected imposition of the death penalty on those with mental retardation, on those who were juveniles at the time of the offense, and on those who were juveniles at the time of the offense, and

54 See supra note 35 and accompanying text.
55 See infra notes 249-271 and accompanying text.
56 See Roper v. Simmons, 543 U.S. 551, 575 (2005); Atkins v. Virginia, 536 U.S. 304, 321 (2002); see also Indiana v. Edwards, 128 S. Ct. 2379, 2386 (2008) ("Mental illness itself is not a unitary concept. It varies in degree. It can vary over time. It interferes with an individual's functioning at different times in different ways."); DSM-IV-TR, supra note 35, at xxxiii (noting that impairments vary widely within diagnostic categories).
57 See supra note 47.
58 See Atkins, 536 U.S. at 315-16. The Atkins majority noted that "the large number of States prohibiting the execution of mentally retarded persons (and the complete absence of States passing legislation reinstituting the power to conduct such executions) provides powerful evidence that today our society views mentally retarded offenders as categorically less culpable than the average criminal." Id. The majority opinion extensively details the evolution of federal and state legislation forbidding the imposition of death on individuals with mental retardation since the Court originally held, in Penry v. Lynaugh, 492 U.S. 302 (1989), that such executions were not unconstitutional. See Atkins, 536 U.S. at 314-16. The Court concluded that the practice of executing mentally retarded persons "has become truly unusual, and it is fair to say that a national consensus has developed against it." Id. at 316. Atkins also relied upon public polling data and the amicus briefs of "several organizations with germane expertise" that "have adopted official positions opposing the imposition of the death penalty upon a mentally retarded offender," including the APA, the United States Catholic Conference, and the European Union. See id. at 316-17 n.21.
59 See Roper, 543 U.S. at 564-67. In Roper, the Court found "evidence of national consensus against the death penalty for juveniles [to be] similar, and in some respects parallel, to the evidence Atkins held sufficient to demonstrate a national consensus against the death penalty for the mentally retarded." Id. at 564. The Court recognized the slower "rate of change in reducing the incidence of the juvenile death penalty, or in taking specific steps to abolish it." Id. at 565. This trend the majority attributed to the fact that in 1989, when the Court rejected an Eighth Amendment challenge to the juvenile death penalty in
for the offense of rape not involving the death of the victim. These cases demonstrate that the Court takes a dynamic approach to measuring what constitutes cruel and unusual punishment under the Eighth Amendment.

Stanford v. Kentucky, 492 U.S. 361 (1989), the number of states already outlawing juvenile capital punishment was so much greater than that of states outlawing the imposition of capital punishment on persons with mental retardation. See Roper, 543 U.S. at 566-67. In 1989, twenty-seven states prohibited death sentences for those under seventeen (twelve of which also prohibited death sentences for those under eighteen), but only two prohibited imposing capital punishment on those with mental retardation. See id. at 566. The Roper majority also found the infrequent sentencing of juvenile offenders to death in states allowing for it, coupled with the trend toward legislative abolition of juvenile capital punishment, to be "sufficient evidence that today our society views juveniles, in the words Atkins used respecting the mentally retarded, as 'categorically less culpable than the average criminal.'" Id. at 567 (quoting Atkins, 536 U.S. at 316).

60 See Kennedy v. Louisiana, 128 S. Ct. 2641, 2650-53 (2008), modified, 129 S. Ct. 1 (2008) (mem.). Although Kennedy acknowledged that 455 defendants in the United States were executed between 1930 and 1964 for the crime of child rape, it also highlighted the fact that no one had been executed for it since 1964. See id. at 2651. Although, post-Furman, a few state legislatures have instituted or reinstituted the death penalty as a possible punishment for child rape, the overwhelming majority of states have not. See id. The Court did recognize one major difference between this case and Atkins and Roper. See id. at 2566. Whereas prior to those decisions, state legislatures were already moving in the direction of abolishing the death penalty for persons with mental retardation and those who were not yet eighteen years of age when they committed their crimes, states prior to Kennedy were moving, albeit very slowly and sporadically, toward adding rape of a child as a capital offense. See id. Yet the majority found it more "significant that, in 45 jurisdictions, petitioner could not be executed for child rape of any kind. That number surpasses the 30 States in Atkins and Roper ... that prohibited the death penalty under the circumstances those cases considered." See id. at 2653. In addition, the Court noted that the number is also greater than the 42 states that, prior to its decision in Enmund v. Florida, 458 U.S. 782 (1982), already barred application of the death penalty for felony murder when the defendant does not himself kill the victim, attempt to do so, or intend that it occur. See Kennedy, 128 S. Ct. at 2653.

61 The Court's classic formulation of this dynamic approach to Eighth Amendment jurisprudence was first articulated in Trop v. Dulles, which declared that "[t]he Eighth Amendment must draw its meaning from the evolving standards of decency that mark the progress of a maturing society." See 356 U.S. 86, 101 (1958) (plurality opinion); see also Kennedy, 128 S. Ct. at 2649 ("Evolving standards of decency must embrace and express respect for the dignity of the person, and the punishment of criminals must conform to that rule."). As expressed by Justice Stevens in his concurring opinion in Roper:

Perhaps even more important than our specific holding today is our reaffirmation of the basic principle that informs the Court's interpretation of the Eighth Amendment. If the meaning of that Amendment had been frozen when it was originally drafted, it would impose no impediment to the execution of 7-year-old children today. ... That our understanding of the Constitution does change from time to time has been settled since John Marshall breathed life into its text.

543 U.S. at 587 (Stevens, J., concurring).
A. Historic Background: The Dynamic Nature of Proportionality Analysis

The history underlying the Eighth Amendment suggests that it was designed to outlaw only barbarous forms of punishment. Capital punishment was a common criminal penalty in 1791 when the amendment was adopted, and the penalty applied to a wide variety of offenses and offenders. Yet, as in other areas of constitutional interpretation, originalism has not carried the day in the Supreme Court's construction of its meaning. The Court has repeatedly acknowledged that what the Eighth Amendment prohibits as "cruel and unusual punishment" may change over time. As such, "the Court has not confined

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63 See id., at 176-77. In their joint opinion in Gregg, Justices Stewart, Powell, and Stevens noted:

In the earliest cases raising Eighth Amendment claims, the Court focused on particular methods of execution to determine whether they were too cruel to pass constitutional muster. The constitutionality of the sentence of death itself was not at issue, and the criterion used to evaluate the mode of execution was its similarity to "torture" and other "barbarous" methods.

Id. at 170; see also Anthony F. Granucci, "Nor Cruel and Unusual Punishments Inflicted": The Original Meaning, 57 CAL. L. REV. 839, 842 (1969) ("Following adoption [of the Eighth Amendment], state and federal jurists accepted the view that the clause prohibited certain methods of punishments... Attempts to extend the meaning of the clause to cover any punishment disproportionate to the crime were rebuffed throughout the nineteenth century... ").

64 See, e.g., Planned Parenthood of Se. Pa. v. Casey, 505 U.S. 833, 847 (1992) (rejecting the argument that the "Due Process Clause protects only those practices, defined at the most specific level, that were protected against government interference by other rules of law when the Fourteenth Amendment was ratified" as "inconsistent with our law"); id. at 848 ("Neither the Bill of Rights nor the specific practices of States at the time of the adoption of the Fourteenth Amendment marks the outer limits of the substantive sphere of liberty which the Fourteenth Amendment protects."); Brown v. Bd. of Educ., 347 U.S. 483, 492 (1954) ("[W]e cannot turn the clock back to 1868 when the [Fourteenth Amendment] was adopted..."); Rochin v. California, 342 U.S. 165, 171 (1952) ("To believe that this judicial exercise of judgment could be avoided by freezing 'due process of law' at some fixed stage of time or thought is to suggest that the most important aspect of constitutional adjudication is a function for inanimate machines and not for judges...").

65 See, e.g., Kennedy, 128 S. Ct. at 2649 (holding that whether the Eighth Amendment proscription against cruel and unusual punishments applies "is determined not by the standards that prevailed when the Eighth Amendment was adopted in 1791 but by the norms that currently prevail" (internal quotations omitted)); Furman v. Georgia, 408 U.S. 238, 382 (1972) (Burger, C.J., dissenting) ("The Eighth Amendment prohibition cannot fairly be limited to those punishments thought excessively cruel and barbarous at the time of the adoption of the Eighth Amendment... The standard itself remains the same, but its applicability must change as the basic mores of society change."); see also Granucci, supra note 63, at 842-43 (discussing the history of the expansion of the Court's initially constricted view of the Eighth Amendment).
the prohibition embodied in the Eighth Amendment to [just those] 'barbarous' methods that were generally outlawed in the 18th century." As early as 1910, the Court noted that the Eighth Amendment is "progressive," and that it "may acquire meaning as public opinion becomes enlightened by a humane justice." Because the language of the prohibition is not "precise" and its "scope is not static," the Court held that "[t]he Amendment must draw its meaning from the evolving standards of decency that mark the progress of a maturing society." The Court regards the Eighth Amendment's proscription of cruel and unusual punishments as "an evolving constitutional norm which changes over time to reflect society's changing moral judgments concerning the limits of appropriate punishment." As the Court recently stated in Kennedy, the standard of cruelty "is not merely descriptive, but necessarily embodies a moral judgment. The standard itself remains the same, but its applicability must change as the basic mores of society change."

The Supreme Court's 1910 decision in Weems v. United States demonstrates its early approach to determining proportionality under the Eighth Amendment. In Weems, the Court held a punishment of twelve to twenty years in irons and at hard labor for the offense of falsifying official records to be excessive. The penalty infringed the "precept of justice that punishment for crime should be graduated and proportioned to offense." In its modern death penalty jurisprudence, the Court has frequently invoked this "proportionality principle," which dictates that criminal punishment be proportionate to the offense. This principle limits both the offenses for which capital punishment (and other harsh punishments) may be imposed and the class of offenders to which it

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66 Gregg, 428 U.S. at 171 (Stewart, Powell & Stevens, JJ., announcing the judgment of the Court).
68 See id. at 100-01 (plurality opinion).
70 See id. at 382.
71 See Kennedy, 543 U.S. at 560; Atkins, 536 U.S. at 311.
72 See, e.g., Kennedy, 128 S. Ct. at 2664 ("[T]he death penalty is not a proportional punishment for the rape of a child."); Solem v. Helm, 463 U.S. 277, 303 (1983) (holding a sentence of life without the possibility of parole for a convicted nonviolent felon issuing a worthless check for $100 to be "significantly disproportionate to [the] crime, and ...
may be applied. What constitutes "disproportionality" in any given instance is based, in part, on the Court's objective determination of society's "evolving standards of decency." At the same time, the proportionality principle also requires the Court ultimately to make its own independent determination of the degree to which the criminal penalty fits the crime and the offender. The Court has acknowledged this responsibility in Kennedy, Roper, and Atkins, all of which reflect the dynamic quality of the Court's approach to proportionality analysis.

B. The Role of "National Consensus": Legislative Action and Other Objective Criteria

The U.S. Supreme Court has frequently relied on objective evidence of social norms in determining whether imposition of the death penalty is consistent with the Eighth Amendment proportionality principle. This approach is reflected in its evolving positions on whether

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Therefore prohibited by the Eighth Amendment); Enmund, 458 U.S. at 801 (holding a death sentence for felony murder, where the offender does not himself commit the homicide, attempt to do so, or intend that it occur, to be cruel and unusual punishment); Eberheart v. Georgia, 433 U.S. 917, 917 (1977) (mem.) (holding a death sentence for the rape and kidnapping of an adult woman to be cruel and unusual punishment); Coker v. Georgia, 433 U.S. 584, 600 (1977) (plurality opinion) (holding a death sentence for the rape of an adult woman to be cruel and unusual punishment); Robinson v. California, 370 U.S. 660, 667 (1962) (holding ninety days imprisonment for narcotics addiction to be cruel and unusual punishment); Weems, 217 U.S. at 382 (holding a sentence of fifteen years hard labor for falsifying an official, public document "repugnant to the bill of rights").

See, e.g., Roper, 543 U.S. at 564, 578 (finding that "the death penalty is a disproportionate punishment for juveniles"); Atkins, 536 U.S. at 321 (finding a sentence of death "excessive" punishment for mentally retarded offenders).

See, e.g., Kennedy, 128 S. Ct. at 2650; Roper, 543 U.S. at 564; Atkins, 536 U.S. at 312.

See Kennedy, 128 S. Ct. at 2650 ("[T]he Court has been guided by objective indicia of society's standards . . . . The inquiry does not end there, however: Consensus is not dispositive. Whether the death penalty is disproportionate to the crime committed depends as well upon the standards elaborated . . . by the Court's own understanding and interpretation of the Eighth Amendment's text, history, meaning, and purpose." (internal quotations omitted) (emphasis added)); Roper, 543 U.S. at 564 ("We then must determine, in the exercise of our own independent judgment, whether the death penalty is a disproportionate punishment for juveniles." (emphasis added)); Atkins, 536 U.S. at 312 ("[O]bjective evidence, though of great importance, did not 'wholly determine' the controversy, 'for the Constitution contemplates that in the end our own judgment will be brought to bear on the question of the acceptability of the death penalty under the Eighth Amendment.'" (quoting Coker, 433 U.S. at 597 (plurality opinion)) (emphasis added)).
the Eighth Amendment bars capital punishment for juveniles and for those with mental retardation. In 1989, the Court in Stanford v. Kentucky rejected the contention that the Eighth Amendment bars capital punishment for those who were under eighteen at the time of the offense. The same day that it decided Stanford, the Court also held, in Penry v. Lynaugh, that the Eighth Amendment does not bar the death penalty for those with mental retardation. Yet within sixteen years, in Atkins and then in Roper, the Court concluded that social attitudes concerning the propriety of imposing punishment for these two classes of offenders had changed. The majority in both latter cases concluded that in the intervening years, state legislative action barring the death penalty for these two categories of offenders and state practices in the administration of the death penalty indicated that execution of individuals in these two classes had become so unusual that a national consensus had emerged rejecting capital punishment in these contexts.

There have been no comparable state statutory changes relating to capital punishment for those with mental illness. At this time, only one state provides a statutory exemption from the death penalty for serious mental illness. Other states’ death penalty statutes consistently recog-
nize mental illness at the time of the offense as a possible mitigating circumstance.\textsuperscript{89} Statutory inclusion of mental illness as a mitigator, however, does not reflect a social consensus that mental illness, even when serious or severe, should disqualify an offender from capital punishment outright. Death penalty statutes, although listing mitigating and aggravating factors, allow the capital jury, with little or no guidance, to balance them in determining whether a death sentence is warranted.\textsuperscript{90}

Legislative action, of course, is not the only evidence of evolving social norms. The U.S. Supreme Court has used statistics concerning the frequency of jury-imposed death sentences as at least a partial basis for declaring some death penalty statutes constitutional\textsuperscript{91} and others unconstitutional.\textsuperscript{92} The Court has also demonstrated a willingness to prohibit imposing the death penalty on a defendant with a severe mental illness. See S.B. 310, 115th Gen. Assemb., 2d Reg. Sess. (Ind. 2008); H.B. 553, 2007 Gen. Assemb., 2007–2008 Sess. (N.C. 2007); S.B. 1075, 2007 Gen. Assemb., 2007–2008 Sess. (N.C. 2007); Dan Kane, \textit{Death Penalty Curb Debated}, \textit{NEWS & OBSERVER} (Raleigh, N.C.), Jan. 14, 2009, at B3. In addition, thirty-four states recognize that mental illness, in appropriate cases, may negate the mens rea element of the offense. See Brief of Appellant at 21 apps. 1–5, \textit{Jackson v. State}, 160 S.W.3d 568 (Tex. Crim. App. 2005) (No. PD-1655-03) (providing a statutory compilation). This Article addresses the question of whether those who suffered from serious mental illness at the time of the offense and were convicted of capital murder should be exempted from the death penalty under the Eighth Amendment. That states allow mental illness as a defense to the charge when it negates mens rea does not reflect a legislative consensus concerning whether those with mental illness who are convicted of capital murder should be given capital punishment.

\textsuperscript{89} See Slobogin, supra note 46, ¶ 2.

\textsuperscript{90} For instance, the Capital Jury Project ("CJP"), which researches capital jury decision making based on interviews with former capital jurors, has noted:

[F]undamental to the post-Furman [capital punishment] experiment is the premise that jurors [sic] sentencing decisions be guided by understandings and procedures that will make the punishment a reasoned moral choice. The CJP interviews reveal that many jurors misunderstand sentencing guidelines, ... wrongly apply the fact finding decision rules for guilt to the punishment decisions, and consequently approach the punishment decision with a "tilt" toward death.


\textsuperscript{91} See, e.g., Gregg, 428 U.S. at 182 (Stewart, Powell & Stevens, JJ., announcing the judgment of the Court) ("[T]he actions of juries in many States ... are fully compatible with the legislative judgments, reflected in the new statutes, as to the continued utility and necessity of capital punishment in appropriate cases.").

\textsuperscript{92} See, e.g., \textit{Kennedy}, 128 S. Ct. at 2657 ("Statistics about the number of executions ... confirm our determination ... that there is a social consensus against the death penalty for the crime of child rape."); \textit{Enmund}, 458 U.S. at 794–96 (detailing the "overwhelming" statistical evidence "that American juries have repudiated imposition of the death penalty
consider the actions of prosecutors in charging capital offenses as an indication of social norms.\textsuperscript{93} Moreover, because trial judges typically are elected, the determinations of sentencing judges in capital cases in the seven states in which the judge plays a role in sentencing may also reflect evolving social norms.\textsuperscript{94}

Do the actions of capital juries, prosecutors, or capital sentencing judges concerning the imposition of the death penalty for those with mental illness reflect an emerging pattern rejecting the death penalty in such cases? This is an interesting empirical question, yet data is scant or non-existent in this area. For now, the legislative action and jury behavior that led the Court in \textit{Atkins} and \textit{Roper} to conclude that offenders with mental retardation and juveniles should be exempted from capital punishment under the Eighth Amendment are not present in the context of mental illness.\textsuperscript{95}

Nonetheless, to the extent that severe mental illness imposes functional impairments that significantly diminish culpability and deterrability, a strong analogy exists to mental retardation and juvenile status that may in the future lead the U.S. Supreme Court to bar execution in this context as well. The Court based its decisions in \textit{Atkins} and \textit{Roper} both on its determination that a national consensus had emerged rejecting capital punishment for these two categories of offenders and on its own independent conclusion that members of these categories were significantly less culpable and deterrable than the average murderer.\textsuperscript{96} It is this latter ground that may permit the Court to hold that capital punishment for some seriously mentally ill offenders is a disproportionate penalty, even in the absence of evidence of evolving social norms.

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\textsuperscript{93} \textit{See} \textit{Enmund}, 458 U.S. at 795-96.

\textsuperscript{94} Seven states permit a judge to play a role in capital sentencing: Alabama, California, Florida, Kansas, Ohio, South Carolina, and Virginia. Bowers et al., supra note 90, at 413 n.1. In Virginia and South Carolina, the state legislature appoints trial judges, so there are five states in which popularly elected judges play a role in capital sentencing. See S.C. Const. art. V, § 13; Va. Const. art. VI, § 7.

\textsuperscript{95} \textit{See} \textit{SLATE & JOHNSON}, supra note 47, at 342; Slobogin, supra note 47, at 297.

\textsuperscript{96} \textit{See} \textit{Roper}, 543 U.S. at 564-75; \textit{Atkins}, 536 U.S. at 313-21.
C. The Supreme Court's Exercise of Independent Judgment

The Court inevitably will face a future Eighth Amendment challenge to the imposition of the death penalty on those with severe mental illness. In recent cases, the Court has always been able to point to objective indicators of a national consensus that the death penalty is a disproportionate punishment for certain classes of offenders or categories of crime. If, however, the Court independently concluded that severe mental illness imposed cognitive and behavioral deficits comparable to those associated with mental retardation and juvenile status, could it hold that the Eighth Amendment was violated, even in the absence of a legislative trend or other objective indicia of changed social attitudes demonstrating a consensus against imposition of the death penalty for this population? Could the Court independently find capital punishment disproportionate for those whose culpability and deterrability are significantly compromised by mental illness, even if objective evidence, such as a record of capital punishment legislation exempting such offenders, failed to emerge? Although Kennedy, Roper, and Atkins do not clearly answer this question, they provide considerable guidance. All involved legislative data that provided a basis for the Court to detect social norms. But in all three cases, the Court also made an independent judgment that capital punishment would be a disproportionate penalty in view of the culpability and deterrability of the offender. In particular, in Roper and Atkins, the Court noted the cognitive and behavioral defects that make juvenile offenders and those with mental retardation categorically less culpable and deterrable than the typical capital offender. Because these three cases all involved both the Court's independent judgment concerning proportionality and objective evidence of social norms, the cases leave unanswered the question of whether, on its own, the Court's independent judgment of disproportionality would suffice to ban the execution of those with severe mental illness. Although the Court might decline to extend its precedent to cover mental illness in the absence of a legislative trend, considerable language in Kennedy, Roper, Atkins, and other cases supports the contention that a finding of disproportionality alone would

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97 See Kennedy, 128 S. Ct. at 2651; Roper, 543 U.S. at 564–67; Atkins, 536 U.S. at 313–17.
98 See Kennedy, 128 S. Ct. at 2658–64; Roper, 543 U.S. at 568–75; Atkins, 536 U.S. at 317–21.
99 See Kennedy, 128 S. Ct. at 2651–53; Roper, 543 U.S. at 564–67; Atkins, 536 U.S. at 313–17.
100 See Kennedy, 128 S. Ct. at 2658–64; Roper, 543 U.S. at 568–75; Atkins, 536 U.S. at 317–21.
101 See Roper, 543 U.S. at 569–75; Atkins, 536 U.S. at 317–21.
102 See Kennedy, 128 S. Ct. at 2651–64; Roper, 543 U.S. at 564–75; Atkins, 536 U.S. at 313–21.
suffice to enable a willing Court to extend these decisions to the context of severe mental illness.103

Kennedy, Roper, and Atkins provide the most relevant and recent guideposts for thinking about whether the Eighth Amendment should apply to capital punishment for those with severe mental illness.104 Before examining the opinions in those cases, however, it is instructive to consider their Eighth Amendment predecessors to place them in proper perspective. In 1962, in Robinson v. California, the U.S. Supreme Court invoked the Eighth Amendment to invalidate a statute that made the status of being a narcotics addict a criminal offense.105 The Court concluded, based exclusively on its own independent analysis, that the Eighth Amendment was violated because narcotics addiction “is apparently an illness ....”106 Analogizing the statutory prohibition of addiction to that of other illnesses, a six-to-two majority struck down the California statute.107 “Even one day in prison,” the Court noted, “would be a cruel and unusual punishment for the ‘crime’ of having a common cold.”108 In arriving at its conclusion, the Court made no attempt to determine whether other statutes or ordinances, in California or elsewhere, imposed criminal punishment for the status of being a narcotics addict.109 Additionally, the Court made no attempt to ascertain whether any objective indicators of social attitudes concerning the acceptability of such a statute existed.110 Although a plurality of the Court had articulated the “evolving standards of decency” test in Trop v. Dulles four years earlier,111 the Robinson Court did not explicitly invoke this standard or seek to ground its decision in any social consensus.112 Rather,

103 See Kennedy, 128 S. Ct. at 2650; Roper, 543 U.S. at 564; Atkins, 536 U.S. at 312.
104 See Kennedy, 128 S. Ct. at 2651–64; Roper, 543 U.S. at 564–75; Atkins, 536 U.S. at 313–21.
105 370 U.S. at 667.
106 Id.
107 See id. at 666, 668.
108 Id. at 667.
109 See id. at 664–67.
110 See Robinson, 370 U.S. at 364–67. The majority noted the unlikelihood “that any State at this moment in history would attempt to make it a criminal offense for a person to be mentally ill, or a leper, or to be afflicted with a venereal disease.” Id. at 666. The Court, however, provided absolutely no objective support for its determination that “in the light of contemporary human knowledge, a law which made a criminal offense of such a disease would doubtless be universally thought to be an infliction of cruel and unusual punishment in violation of the Eighth and Fourteenth Amendments.” See id. Moreover, the Court gave no objective basis for its assertion that contemporary standards inform its viewpoint of the California statute’s unconstitutionality. See id. at 664–67.
111 See 356 U.S. at 101 (plurality opinion).
assuming that an individual could suffer the "illness" of narcotics addiction even in the absence of much or any personal responsibility for being in that state, the Court independently concluded that penalizing illness alone would violate the Eighth Amendment.\textsuperscript{113}

In more recent Eighth Amendment cases involving the death penalty, the U.S. Supreme Court has continued to conduct this independent analysis, even as it noted objective indicia of evolving social standards.\textsuperscript{114} For example, in 1976, in \textit{Woodson v. North Carolina}, the Court invalidated mandatory death penalty statutes.\textsuperscript{115} Justice Stewart, in a plurality opinion, concluded that the mandatory statute before the Court "depart[ed] markedly from contemporary standards," noting that "jury determinations and legislative enactments . . . both point conclusively to the repudiation of automatic death sentences."\textsuperscript{116} At the same time, the plurality also independently concluded that the statute violated "the fundamental respect for humanity underlying the Eighth Amendment"\textsuperscript{117} by failing to take into account "the character and record of the individual offender and the circumstances of the particular offense."\textsuperscript{118}

Similarly, in 1977 when the Court in \textit{Coker v. Georgia} invalidated a statute that made the death penalty available for rape not involving the death of the victim, Justice White's plurality opinion stressed the legislative consensus rejecting the death penalty for rape alone.\textsuperscript{119} But the plurality also stated that "the legislative rejection of capital punishment for rape \textit{strongly confirms our own judgment}, which is that death is indeed a disproportionate penalty for the crime of raping an adult woman."\textsuperscript{120}

In significant language, the plurality opinion noted that the objective indicia of evolving standards of decency reflected in the actions of state legislatures and sentencing juries "do not wholly determine this controversy, for the Constitution contemplates that in the end \textit{our own judgment will be brought to bear} on the question of the acceptability of the death penalty under the Eighth Amendment."\textsuperscript{121} Justice Powell, in a concurring and dissenting opinion in \textit{Coker}, objected to the sweeping

\begin{thebibliography}{12}
\bibitem{113} See \textit{id}.
\bibitem{114} See, e.g., \textit{Enmund}, 458 U.S. at 789–801; \textit{Coker}, 433 U.S. at 593–97 (plurality opinion); \textit{Woodson}, 428 U.S. at 289–93, 303–04 (Stewart, Powell & Stevens, JJ., announcing the judgment of the Court).
\bibitem{115} See \textit{Woodson}, 428 U.S. at 305–06.
\bibitem{116} \textit{Id.} at 293, 301.
\bibitem{117} \textit{Id.} at 304.
\bibitem{118} \textit{Id}.
\bibitem{119} 433 U.S. at 593–96 (plurality opinion).
\bibitem{120} \textit{Id.} at 597 (emphasis added).
\bibitem{121} \textit{Id.} (emphasis added).
\end{thebibliography}
nature of the Court’s holding that all death penalties for rape violate the Eighth Amendment. Nonetheless, Justice Powell agreed with the plurality’s method, noting that, “objective indicators are highly relevant, but the ultimate decision as to the appropriateness of the death penalty under the Eighth Amendment... must be decided on the basis of our own judgment in light of the precedents of this Court.”

The Court followed this same approach in 1982 in Enmund v. Florida, in which the Court held unconstitutional the imposition of the death penalty for felony murder where the defendant does not himself commit the killing, attempt to do so, or intend that it occur. Once again, the Court examined legislative action and jury behavior. It also demonstrated a willingness to examine the actions of prosecutors. At the same time, the Court conducted its own independent evaluation of the Eighth Amendment issue, noting that “it is for us ultimately to judge whether the Eighth Amendment permits imposition of the death penalty” in this situation. The Court concluded that the death penalty in this context would be excessive and disproportionate to the offender’s culpability and deterrability.

These cases suggest that, even though its judgment is guided by evidence concerning social attitudes, the Supreme Court has a significant independent role to play in ascertaining whether a criminal sanction challenged under the Eighth Amendment fails the proportionality test. Other opinions, however, have placed greater emphasis on legislative indicia of social norms. In its 1989 decisions in Stanford v. Kentucky and Penry v. Lynaugh, the Court rejected proportionality chal-
challenges to the application of death penalty statutes to juvenile offenders over fifteen but under eighteen, and to those with mental retardation, respectively.\textsuperscript{132} In rejecting both Eighth Amendment challenges, the Court noted that a national consensus on the issue was lacking at the time, suggesting perhaps that absent objective evidence of such a consensus an Eighth Amendment proportionality challenge could not be sustained.\textsuperscript{133} Yet in neither case did a majority of the Court agree that the inquiry stops at evidence of national social norms.\textsuperscript{134}

In the Stanford plurality opinion, Justice Scalia, on behalf of himself, Chief Justice Rehnquist, and Justices White and Kennedy, "emphatically" rejected the suggestion that the Court should independently judge the "desirability of permitting the death penalty for crimes by 16- and 17-year-olds."\textsuperscript{135} The plurality explained that it "is not this Court but the citizenry of the United States," speaking through its legislatures, "who must be persuaded" that sentencing seventeen-year-olds to death is cruel and unusual.\textsuperscript{136} In the plurality's view, the Court was powerless "to substitute [its] belief . . . for . . . society's."\textsuperscript{137}

\textsuperscript{132} See Stanford, 492 U.S. at 380; Penry, 492 U.S. at 340 (opinion of O'Connor, J.).

\textsuperscript{133} In Stanford, for example, the Court stated, "First among the objective indicia that reflect the public attitude toward a given sanction are statutes passed by society's elected representatives." 492 U.S. at 370 (internal quotations omitted). The Stanford Court noted that, at the time, twenty-five of the thirty-seven death penalty states permitted capital punishment for seventeen-year-olds, and twenty-two of these also permitted it for sixteen-year-olds. Id. The Court concluded those numbers did "not establish the degree of national consensus" sufficient to support an Eighth Amendment challenge. Id. at 371. Further, a plurality of the Court refused to consider opinion poll data or the position statements of interest groups and professional organizations, declining to "rest constitutional law upon such uncertain foundations." Id. at 377 (plurality opinion).

Similarly, the Penry majority declared that there was "insufficient evidence of a national consensus against executing mentally retarded people convicted of capital offenses for us to conclude that it is categorically prohibited by the Eighth Amendment." 492 U.S. at 335. The Court found "evidence of the general behavior of juries with respect to sentencing mentally retarded defendants" to be lacking, as was information on the "decisions of prosecutors" in this regard. Id. at 334. Additionally the Court noted that, at the time, only two states (Georgia and Maryland) and the federal government barred executions of defendants with mental retardation. Id. In making its determination, the Penry Court refused to consider opinion poll data showing "strong public opposition" to executing mentally retarded persons as objective evidence of a national consensus independent of state legislative action. Id. at 334–35. Musing that "public sentiment expressed in these . . . polls may ultimately find expression in legislation," the Penry majority held firm in its declaration that legislation, and not polling, is the "objective indicator of contemporary values upon which we can rely." Id. at 335.

\textsuperscript{134} See Stanford, 492 U.S. at 378 (plurality opinion); Penry, 492 U.S. at 351 (Scalia, J., concurring in part and dissenting in part).

\textsuperscript{135} See 492 U.S. at 378 (plurality opinion).

\textsuperscript{136} See id.

\textsuperscript{137} See id.
Although Justice O'Connor concurred with the Stanford plurality's rejection of the Eighth Amendment challenge, she criticized the plurality's refusal "to judge whether the 'nexus between the punishment imposed and the defendant's blameworthiness' is proportional." Significantly, though she agreed with the plurality on the merits of its Eighth Amendment holding, Justice O'Connor pointedly disagreed with its attempt to reshape the method of interpretation for the Eighth Amendment, noting that beyond assessing the actions of legislatures and juries, the Court has a "constitutional obligation to conduct proportionality analysis" to judge for itself whether capital punishment is a proportionate response to the defendant's "blameworthiness." Justice O'Connor was unable to conclude, however, that such punishment was categorically disproportionate in this context.

The Court in Penry likewise refused to hold that executing those with mental retardation violates the Eighth Amendment. As had occurred in Stanford, the Court in Penry concluded that because a majority of states then permitted capital punishment for those with mental retardation, a national consensus rejecting the death penalty for this category of offenders was lacking. But only four justices voted to end the inquiry there. Justice O'Connor, writing for herself, agreed that a social consensus was lacking, but reiterated her view that the Court has a responsibility to make its own proportionality determination. She joined with the plurality to uphold the death penalty, but only after independently concluding that the death penalty in this context was not always disproportionate. Justice Brennan, joined by Justice Marshall, and Justice Stevens, joined by Justice Blackmun, disagreed with the latter conclusion, but stood behind Justice O'Connor's view that the

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138 See id. at 382 (O'Connor, J., concurring). Justice O'Connor disagreed with the dissent's assertion that the two death penalty states that, at the time Stanford was decided, disallowed the sentencing of juveniles to capital punishment, plus the fourteen that had rejected the death penalty altogether, could constitute sufficient evidence of a national consensus. Id. at 381. Justice O'Connor further disagreed with the dissent's willingness to accept the independent argument that the juvenile death penalty was constitutionally disproportionate to the blameworthiness of juveniles. Id. at 382.

139 Id. at 382 (quoting Thompson v. Oklahoma, 487 U.S. 815, 853 (1988) (O'Connor, J., concurring)).

140 See Stanford, 492 U.S. at 382 (O'Connor, J., concurring).

141 See id.

142 See 492 U.S. at 340.

143 See id. at 330–35.

144 See id. at 351 (Scalia, J., concurring in part and dissenting in part).

145 See id. at 335 (opinion of O'Connor, J.).

146 See id. at 335–40.
Court has a responsibility to conduct its own proportionality analysis. Thus in both Stanford and Penry, five justices shared this view on the Court's duty to independently analyze the proportionality question.

In 2002, in Atkins v. Virginia, the Court overruled the result in Penry and held that the Eighth Amendment bars the imposition of the death penalty on those with mental retardation. The Court noted that since Penry, the total number of states rejecting capital punishment for those with mental retardation had risen from two to eighteen, which led the Court to conclude that the number and the "consistency of the direction of change" provided sufficient evidence of a national consensus. This consensus confirmed the Court's independent determination that offenders suffering from mental retardation are "categorically less culpable" and deterrence than typical murderers and that capital punishment therefore would constitute a disproportionate penalty in this context.

Justice Stevens's majority opinion in Atkins rejected the Stanford plurality's suggestion that a national consensus reflected in legislation and jury behavior is the sole basis for the Court to invalidate a capital punishment statute on Eighth Amendment proportionality grounds. Writing for a six-justice majority, Justice Stevens agreed that a proportionality review should be informed by "objective factors to the maximum possible extent." But, Justice Stevens wrote, the Court "relies in part on such legislative evidence." According to the Atkins majority, "objective evidence, though of great importance, [does] not 'wholly determine' the controversy; for the Constitution contemplates that in the end [the Court's] own judgment will be brought to bear on the question of the acceptability of the death penalty under the Eighth Amendment." This approach requires that the Court "first review the judg-

147 See Penry, 492 U.S. at 343–44 (Brennan, J., concurring in part and dissenting in part); id. at 350 (Stevens, J., concurring in part and dissenting in part).
148 See supra notes 134–147 and accompanying text.
149 See Atkins, 536 U.S. at 321.
150 See id. at 314–15. Prior to the Penry decision, the U.S. Congress in 1988 also outlawed the death penalty for defendants with mental retardation who were found guilty of capital murder. See Anti-Drug Abuse Act of 1988 ("ADAA"), 21 U.S.C. § 848(l) (2000) (repealed 2006). This proviso, which also prohibited sentencing to death those who commit a capital offense as juveniles, remained in every revision or expansion of the ADAA from 1988 until the provision was repealed in 2006 after Roper and Atkins were handed down. See id.
151 See Atkins, 536 U.S. at 315.
152 Id. at 316, 318–20.
153 See id. at 312–13.
154 Id. at 312.
155 See id. (emphasis added).
156 See Atkins, 536 U.S. at 312 (quoting Coker, 433 U.S. at 597 (plurality opinion)).
ment of legislatures that have addressed the suitability of imposing the
death penalty" on the category of offenders in question, "and then con-
sider reasons for agreeing or disagreeing with their judgment."\(^{157}\) Under
this view, even if the predominant legislative judgment is to allow
the death penalty for a particular offense or class of offenders, the
Court, after conducting an independent proportionality review, could in
theory disagree with the legislative judgment and invalidate it under the
Eighth Amendment.\(^{158}\)

The Court's statements concerning its independent role may, of
course, be considered dicta, as the Court in *Atkins* found that the legisla-
tive trend in the thirteen years following *Penry* constituted sufficient evi-
dence that a national consensus had rejected the death penalty for
those with mental retardation.\(^{159}\) Although the Court's independent
analysis concluded that death is a disproportionate penalty for those
with mental retardation, it is unclear whether it would have reached the
same result in the absence of what it considered to be an emerging legis-
lative consensus. Two dissenting opinions in *Atkins* help answer that
question.\(^{160}\) Both dissents, each joined by the same three justices, ques-
tioned the majority's conclusion that there was a national consensus by
pointing out that only eighteen states, constituting 47 percent of the
thirty-eight states that permit capital punishment, had statutorily barred
execution for those with mental retardation.\(^{161}\) This led Justice Scalia,
author of one of the dissents, to label the majority's independent propor-
tionality analysis as "the genuinely operative portion of the opin-
ion."\(^{162}\) This analysis strongly suggests that the *Atkins* majority's state-
ments about the Court's independent role in proportionality review
under the Eighth Amendment are not dicta, but were in fact central to
the Court's holding.\(^{163}\)

The Court's decision in *Roper*, the juvenile death penalty case, pro-
vides further support for the proposition that an independent propor-
tionality analysis by the Court can justify invalidation of a capital pun-
ishment statute under the Eighth Amendment, even in the absence of a

\(^{157}\) See id. at 313.
\(^{158}\) See id. at 312-13.
\(^{159}\) See id. at 313-17, 321.
\(^{160}\) See id. at 321-22 (Rehnquist, C.J., dissenting); id. at 342 (Scalia, J., dissenting).
\(^{161}\) See Atkins, 536 U.S. at 321-22 (Rehnquist, C.J., dissenting); id. at 342 (Scalia, J., dis-
semiting). These dissenting justices joined one another's dissents, and Justice Thomas
joined both. See id. at 321 (Rehnquist, C.J., dissenting); id. at 337 (Scalia, J., dissenting).
\(^{162}\) See id. at 349 (Scalia, J., dissenting).
\(^{163}\) See id.; see also Slobogin, supra note 47, at 294-96.
national consensus exemplified by legislative action. The Roper Court described its prior opinion in Atkins as having “neither repeated nor relied upon the statement in Stanford that the Court’s independent judgment has no bearing on the acceptability of a particular punishment under the Eighth Amendment.” Instead, the Court continued, in Atkins “we returned to the rule, established in decisions predating Stanford, that the Constitution contemplates that ‘in the end our own judgment will be brought to bear’ on the question of the acceptability of the death penalty under the Eighth Amendment.”

Roper went on to overrule Stanford, holding the juvenile death penalty unconstitutional under the Eighth Amendment. The “beginning point” of Roper’s analysis was its “review of objective indicia of consensus, as expressed in particular by the enactments of legislatures that have addressed the question.” It viewed the “evidence of a national consensus against the death penalty for juveniles” as “similar, and in some respects parallel,” to the evidence Atkins had relied on in invalidating the death penalty for those with mental retardation. Just as the Court in Atkins determined that sentencing persons with mental retardation to death had become “truly unusual” since Penry had been decided thirteen years earlier, the Roper Court saw from the objective data that, since the decision in Stanford upholding the juvenile death penalty had been handed down sixteen years earlier, “even in the 20 States without a formal prohibition on executing juveniles, the practice [was] infrequent.” This led the Roper Court to conclude that the “objective indicia of consensus” provided “sufficient evidence” that society had come to “view[] juveniles . . . as ‘categorically less culpable than the average criminal.’”

The Roper Court then proceeded to “determine, in the exercise of [its] own independent judgment, whether the death penalty is a disproportionate punishment for juveniles.” In so doing, the Court repudiated the Stanford plurality’s dismissal “of the idea that [the] Court

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164 See 543 U.S. at 563–64, 568–75.
165 See id. at 563.
166 Id. (quoting Atkins, 536 U.S. at 312).
167 See id. at 578.
168 Id. at 564.
169 See Roper, 543 U.S. at 564; see also supra note 59.
170 See Atkins, 536 U.S. at 316.
171 See Roper, 543 U.S. at 564–65 (“Since Stanford six States have executed prisoners for crimes committed as juveniles. In the past 10 years, only three have done so . . . .”)
172 See id. at 567 (quoting Atkins, 536 U.S. at 316).
173 See id. at 564.
is required to bring its independent judgment to bear on the proportionality of the death penalty for a particular class of crimes or offenders."\(^{174}\) The *Stanford* plurality's "rejection" was, the Court stated, "inconsistent with prior Eighth Amendment decisions" and "with the premises of ... Atkins."\(^{175}\) *Stanford* was therefore overruled based on the intervening changes in the objective indicia of consensus on the issue, as well as on the Court's independent conclusion that capital punishment constituted a disproportionate penalty for juvenile offenders.\(^{176}\)

Justice O'Connor dissented in *Roper*, finding no genuine national consensus on the juvenile death penalty issue and disagreeing with the conclusions of the majority's "moral proportionality analysis," the ground that she concluded was the ultimate basis for the Court's decision.\(^{177}\) Although disagreeing with the majority's conclusions, she explicitly agreed with its method of interpretation of the Eighth Amendment—individually determining whether "the magnitude of the punishment imposed [is] related to the degree of the harm inflicted on the victim, as well as to the degree of the defendant's blameworthiness."\(^{178}\) Justice O'Connor also used her dissent in *Roper* to illuminate her view of *Atkins* and explain why, in that case, she had joined the six-member majority.\(^{179}\) In her *Roper* dissent she noted that the "objective evidence of a national consensus" in *Atkins* was "weaker" than it was in prior Eighth Amendment cases, and "standing alone, was insufficient to dictate the Court's holding" in that case.\(^{180}\) "Rather," she continued, "the compelling moral proportionality argument against capital punishment of mentally retarded offenders played a decisive role in persuading the Court"—and Justice O'Connor—"that the practice was inconsistent with the Eighth Amendment."\(^{181}\) Thus, for Justice O'Connor, the Court may, and indeed is constitutionally required to, invoke the Eighth Amendment to invalidate death penalty legislation—even in the absence of objective evidence that a national consensus condemns it in the

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\(^{174}\) See id. at 574.

\(^{175}\) See id. at 574–75.

\(^{176}\) See *Roper*, 543 U.S. at 564–75.

\(^{177}\) See id. at 588 (O'Connor, J., dissenting).

\(^{178}\) See id. at 590 (internal quotations omitted); see also *Enmund*, 458 U.S. at 823 (O'Connor, J., dissenting) ("[T]he Eighth Amendment concept of proportionality involves more than merely a measurement of contemporary standards of decency. It requires in addition that the penalty imposed in a capital case be proportional to the harm caused and the defendant's blameworthiness.").

\(^{179}\) See *Roper*, 543 U.S. at 597–98 (O'Connor, J., dissenting).

\(^{180}\) See id.

\(^{181}\) Id. at 598.
particular context—if its own independent proportionality review leads it to conclude that there is an insufficient nexus between capital punishment and the blameworthiness of the particular offender or category of offenders.182 In Justice O'Connor's view that the Court must analyze whether such punishment is "consistent with contemporary standards of decency."183 In doing so, Justice O'Connor stated, the Court is "obligated to weigh both the objective evidence of social values and [its] own judgment as to whether death is an excessive sanction in the context at hand."184 Although the Court must "weigh" any existing objective evidence of consensus, the lack of such evidence is not "decisive" when the Court independently determines that there is a "compelling proportionality argument against capital punishment" in the context in question.185

Six of the Justices in Roper—the five in the majority and Justice O'Connor in dissent—therefore arguably shared this view of the Court's independent constitutional role in conducting a proportionality review under the Eighth Amendment.186 Although Justice O'Connor is no longer on the Court, having been replaced by the more conservative Justice Alito, five of these six justices remain. The above analysis suggests that a future Court could extend this approach to the context of those with severe mental illness.187 To the extent that a future Court were to find that such illness, like mental retardation and juvenile status, diminishes an offender's culpability and deterrability such that there is an insufficient nexus between capital punishment and his or her blameworthiness, it could invoke the Eighth Amendment to exclude capital punishment as a constitutionally acceptable sanction.188

This conclusion finds further support in the Court's 2008 decision in Kennedy v. Louisiana, which barred application of the death penalty for the rape of a child not involving death.189 As only six states authorized capital punishment for this crime, the Court discerned a national consensus rejecting capital punishment in this context.190 Yet the Court

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182 See id. at 597-98.
183 See id. at 605.
184 See Roper, 543 U.S. at 605 (O'Connor, J., dissenting) (emphasis added).
185 Id. at 605-06.
186 See id. at 564 (majority opinion); id. at 590 (O'Connor, J., dissenting).
187 See supra notes 97-186 and accompanying text.
188 See supra notes 97-186 and accompanying text.
189 See 128 S. Ct. at 2650, 2658-64.
190 See id. at 2652-53 (stating that "44 states have not made child rape a capital offense"). The Kennedy majority opinion acknowledges some ambiguity as to whether Geor-
made clear that "[c]onsensus is not dispositive." Whether the death penalty is a disproportionate punishment "depends as well upon the standards elaborated by controlling precedents and the Court's own understanding and interpretation of the Eighth Amendment's text, history, meaning, and purpose." Thus in holding that the death penalty could not apply to the offense of child rape not involving the death of the victim, the *Kennedy* Court relied "both on consensus and [its] own independent judgment." *Kennedy* was a five-to-four decision, but the five justices in the majority embraced the principle that "[i]t is for [the Court] ultimately to judge whether the Eighth Amendment permits imposition of the death penalty" in particular circumstances.

*Kennedy* offered several considerations to guide an independent proportionality analysis. A penalty is excessive, the Court noted, "when it is grossly out of proportion to the crime or it does not fulfill the two distinct social purposes served by the death penalty: retribution and deterrence of capital crimes." Although the Court conceded that the death penalty for child rape could serve some retributive or deterrent function, it nonetheless did not serve these ends sufficiently to avoid the conclusion that it was disproportionate in the circumstances. Neither retribution nor deterrence, the Court concluded, would justify the harshness of applying the death penalty in this circumstance. Indeed, the majority went further than the context of

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191 *Id.* at 2650.
192 *Id.* (citing *Euumund*, 458 U.S. at 788; *Gregg*, 428 U.S. at 182–83 (Stewart, Powell & Stevens, J., announcing the judgment of the Court); *Coker*, 433 U.S. at 597–600 (plurality opinion)).
193 *See id.* at 2650–51. The Court reiterated that the Constitution "contemplates that in the end our own judgment will be brought to bear on the question of the acceptability of the death penalty under the Eighth Amendment." *See id.* at 2658 (quoting *Coker*, 433 U.S. at 597 (plurality opinion)).
194 *See Kennedy*, 128 S. Ct. at 2658 (quoting *Euumund*, 458 U.S. at 797).
195 *See id.* at 2661.
196 *See id.* (citing *Gregg*, 428 U.S. at 173, 183, 187 (Stewart, Powell & Stevens, J., announcing the judgment of the Court)).
197 *See id.* The *Kennedy* majority also acknowledged "moral grounds to question a rule barring capital punishment" for the crime of child rape, citing "the victim's fright, the sense of betrayal, and the nature of her injuries" that "caused more prolonged physical and mental suffering than, say, a sudden killing by an unseen assassin." *Id.* at 2568.
198 *See id.* at 2658 ("It does not follow, though, that capital punishment is a proportionate penalty for the crime.").
199 *See Kennedy*, 128 S. Ct. at 2662 ("The incongruity between the crime of child rape and the harshness of the death penalty poses risks of overpunishment . . . . The goal of retribution . . . does not justify the harshness of the death penalty here.").

*See id.*
child rape to state broadly that the death penalty should be reserved “at this stage of evolving standards and in cases of crimes against individuals, for crimes that take the life of the victim.” The *Kennedy* majority thus fashioned a new *per se* rule of proportionality, one derived from its own independent assessment of the history and purposes of the Eighth Amendment.

The four dissenters in *Kennedy* disagreed with this view of the Court’s role under the Eighth Amendment. They conceded, however, that in the view of the majority, the Court’s independent judgment is dispositive, even in the absence of objective indicia of evolving standards of decency. Justice Alito, dissenting on behalf of himself, Chief Justice Roberts, and Justices Scalia and Thomas, lamented that the majority was “willing to block the potential emergence of a national consensus in favor of permitting the death penalty for child rape because, in the end, what matters is the Court’s own judgment regarding the acceptability of the death penalty.” Justice Scalia also recognized that the dispositive element in the Court’s decision was its own independent judgment.

A majority of the Court in *Kennedy*, *Roper*, and *Atkins* thus has embraced an independent conception of proportionality that the Court could apply in the context of severe mental illness to conclude, even in the absence of objective legislative, jury, judicial, or prosecutorial indicia of a social consensus, that the death penalty is inappropriate for this population. These three cases advance the view that the Court must independently determine whether the death penalty for a particular class of cases satisfies the Eighth Amendment’s proportionality requirement. They collectively reject the *Stanford* plurality’s contrary suggestion that a legislative consensus or similar objective evidence of a trend in this direction is necessary for the Court to invalidate a death penalty.

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200 See id. at 2665.
201 See id.
202 See id. at 2673 (Alito, J., dissenting).
203 See id.
204 See *Kennedy*, 128 S. Ct. at 2673 (Alito, J., dissenting) (emphasis added) (internal quotations omitted).
205 See *Kennedy v. Louisiana*, 129 S. Ct. 1, 2 (2008) (denial of rehearing) (statement of Scalia, J., joined by Roberts, C.J.) (voting against reconsideration because “the views of the American people on the death penalty for child rape were, to tell the truth, irrelevant to the majority’s decision in this case” and “there is no reason to believe that absence of a national consensus would provoke second thoughts”).
206 See supra notes 79, 149–205 and accompanying text.
207 See supra notes 79, 149–205 and accompanying text.
sentence as disproportionate.208 In this respect, these three decisions breathe new life into the proportionality requirement.209

II. PROBING THE ANALOGY BETWEEN SEVERE MENTAL ILLNESS AND MENTAL RETARDATION AND JUVENILE STATUS

The U.S. Supreme Court’s evolving death penalty jurisprudence would allow the Court to determine independently that the death penalty, for at least some cases of severe mental illness, would be a disproportionate punishment, and hence cruel and unusual, even in the absence of objective evidence of a changed social norm.210 Even if the Court’s recent proportionality jurisprudence would allow it to reach this conclusion, the question remains whether it should do so. Does severe mental illness impact the offender’s blameworthiness and deterrability sufficiently to compel the Court to bar capital punishment, as it has with mental retardation and juvenile status? In some cases the answer is “yes,” but such a conclusion must be reached on a case-by-case basis.211

Mental illness is similar to mental retardation and juvenile status because it may diminish both individual culpability and deterrability. Defendants may suffer from severe mental illness, yet still be able to appreciate the wrongfulness of their conduct, thereby failing to satisfy the standard for the legal insanity defense.212 Yet when severe mental illness impairs judgment, rationality, and the ability to foresee consequences and control behavior, similar to mental retardation and juvenile status, it is similarly less justifiable to impose the death penalty as retribution for past crimes or as a deterrent to future ones.213 To the extent that mental illness produces effects that reduce voluntary control and blameworthiness to the same degree as mental retardation and juvenile status, the imposition of the death penalty is insufficiently related to the purposes of capital punishment to allow its application consistent with the Eighth Amendment.214

Yet, even though the Supreme Court has recently imposed categorical exclusions from capital punishment for certain categories of offenders or offenses, because they lack the culpability and deterrability.

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208 See supra notes 79, 149–205 and accompanying text.
209 See supra notes 79, 149–205 and accompanying text.
210 See supra notes 97–209 and accompanying text.
211 See infra notes 244–271 and accompanying text.
212 See Task Force Report, supra note 37, at 672.
214 See Roper, 543 U.S. at 568–75; Atkins, 536 U.S. at 317–21.
necessary for the imposition of capital punishment, even severe mental illness—
mentally ill—cannot support such a categorical exclusion. Some offenders
would, however, meet this standard, and for those who do, the Eighth Amendment
should likewise prevent their execution. To the extent that severe mental illness
imposes effects on judgment and functioning parallel to those caused by mental retardation and
juvenile status, the death penalty similarly lacks a sufficient connection
with the purposes of capital punishment—retribution and deterrence—
to justify its imposition consistent with the Eighth Amendment.

A. The Absence of Strong Objective Evidence of Evolving Social Consensus

Objective indicia of a social consensus rejecting execution for
those with severe mental illness have not yet emerged. At this time
only Connecticut statutorily provides a process for exempting offenders
suffering from severe mental illness from the death penalty. In assessing
whether legislative action reflects a national consensus rejecting the
death penalty for a particular offense or class of offenders, the U.S. Su-
preme Court in both Roper v. Simmons, decided in 2005, and Atkins v.
Virginia, decided in 2002, considered the total number of states explicitly
exempting capital punishment for the category in question plus those states that had abolished the death penalty altogether. But adding
Connecticut to these states would total only seventeen jurisdictions
(sixteen states plus the District of Columbia), compared to the thirty-five, including the federal government, that authorize the death
penalty without exempting those with mental illness. Death penalty states
allow capital juries to consider mental illness as a mitigating factor in
weighing whether a death sentence should be imposed in a particular case; the federal government does as well. This provides some evi-

(mem.); Roper, 543 U.S. at 568–75; Atkins, 536 U.S. at 317–21.
216 See infra notes 244–271 and accompanying text.
217 See infra notes 244–271 and accompanying text.
218 See SLATE & JOT, supra note 47, at 342; Slobogin, supra note 47, at 297.
219 See CONN. GEN. STAT. ANN. § 53a-46a(h) (3) (West 2007); see also supra note 88.
220 See Roper, 543 U.S. at 564; Atkins, 536 U.S. at 313–15.
221 The jurisdictions that currently prohibit imposition of the death penalty are Alaska,
Hawaii, Iowa, Maine, Massachusetts, Michigan, Minnesota, New Jersey, New Mexico, New
York, North Dakota, Rhode Island, Vermont, West Virginia, Wisconsin, and the District of
Columbia. DEATH PENALTY INFO. CTR., FACTS ABOUT THE DEATH PENALTY 1 (2009), avail-
able at http://www.deathpenaltyinfo.org/FactSheet.pdf.
222 See Slobogin, supra note 46, ¶ 2; Berkman, supra note 87, at 296–98.
to be imposed on a defendant, the finder of fact shall consider any mitigating factor, in-
dence that legislatures may intend to preclude capital punishment when mental illness is severe, but such evidence is ambiguous inasmuch as juries are instructed to weigh mitigating circumstances against aggravating circumstances with little or no guidance as to how that weighing should occur. Statutes specifying mental illness as a mitigating factor thus may provide some objective evidence that legislatures intend to preclude the death penalty for the most serious cases of mental illness, but that evidence is equivocal and fairly weak. Moreover, unlike in Atkins and Roper, there is no legislative trend in the direction of exempting those with severe mental illness from the death penalty.

Furthermore, no clear record of jury behavior exists that supports the inference that capital juries have rejected the death penalty for those with mental illness. In fact, anecdotal evidence suggests that many defendants on death row suffer from serious mental illness or neurological impairment. When mental illness is raised as a mitigating factor at the penalty phase, it sometimes proves to be a double-edged sword, leading capital juries to assume that the offender is dangerous and that the death penalty is an appropriate means of community protection.

Capital juries undoubtedly sentence people with

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224 See Bowers et al., supra note 90, at 436-49.
225 See SLATE & JOHNSON, supra note 47, at 342; Slobogin, supra note 47, at 297.
226 See AMNESTY INT’L, supra note 46, at 170; Bonnie, supra note 46, at 1192; Jubilut, supra note 46, at 367; Slobogin, supra note 46, ¶ 2; Am. Civil Liberties Union, supra note 46.

[I]n many cases an offender’s mental illness, although presumptively mitigating, might also be directly connected with an aggravating circumstance. For instance, an offender’s risk for violence might be the result of mental illness. Similarly, the “heinousness” of the murder might in some way be related to mental disorder. ... [T]here is voluminous research indicating that jurors often perceive evidence of mental illness as an aggravating circumstance (usually because they believe it correlates with dangerousness), rather than as a mitigating circumstance.

Id.; see also SLATE & JOHNSON, supra note 47, at 339 (“[E]vidence has emerged suggesting that mental illness may in fact be construed as an aggravating factor by juries considering the death penalty. In other words, the presence of a serious mental illness may increase the chance that the death penalty will be imposed.”); Jubilut, supra note 46, at 377 (“Juries pose additional problems ... . First, as much as 75 percent of the public view people with mental illness as violent... . There is still pervasive stigma and fear of people who suffer from mental illness due to lack of knowledge about various disorders; this stigma and fear may influence jurors to believe that the behavior of the defendant will lead to future violent behavior.”); Michael L. Perlin, The Sanest Lies of Jurors in Death Penalty Cases: The Puz-
mental illness to death, but there is little or no data on how frequently this occurs and none that examines mental illness in such cases in terms of the degree of its severity or functional impairment. Prosecutorial action in charging capital offenses also could provide objective indicia of social attitudes, but there appear to be no studies examining how prosecutors view severe mental illness in the exercise of their capital charging discretion. Offenders who are severely mentally ill may succeed in making an insanity defense, of course, and in cases in which the evidence of legal insanity is strong, prosecutors sometimes entertain guilty pleas that avoid the death penalty or may not charge capital murder. There is no data, however, on prosecutorial behavior in this regard. Similarly, capital sentencing by judges in the small number of states in which the judge participates in the death penalty determination might provide evidence of social norms in this area, but once again, studies have not examined how trial judges have made capital sentencing decisions in cases involving mentally ill offenders. The question of whether Atkins and Roper should be extended to those with severe mental illness may prompt social scientists to conduct future research concerning jury, prosecutorial, and judicial behavior in this area, but such research is lacking at the present time.

The Court in Atkins also noted the recommendations and position statements of relevant professional associations in support of its assessment of evolving social norms on the propriety of imposing capital punishment for those with mental retardation. Recent statements by the

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zling Role of Mitigating Mental Disability Evidence, 8 Notre Dame J.L. Ethics & Pub. Pol'y 239, 274 (1994) (noting that "mental illness—rather than serving as a mitigating factor—can be seen as an aggravating factor"); Slobogin, supra note 46, ¶ 39 ([M]any death sentences imposed on people with mental illness violate due process because their mental illness is treated by the factfinder as an aggravating factor, either directly or to bolster a separate aggravating circumstance."); Slobogin, supra note 47, at 305 ("Apparently, sentencing juries and judges focus more on the perceived dangerousness of such individuals than on their diminished culpability and deterrability."); id. at 313 (noting that most people view those with mental illness "to be abnormally dangerous"); Scott E. Sundby, The Jury as Critic: An Empirical Look at How Capital Juries Perceive Expert and Lay Testimony, 83 Va. L. Rev. 1109, 1165-70 (1997); Berkman, supra note 87, at 299-300 (discussing examples of how "mental illness can contribute to the finding of aggravating circumstances").

See Am. Civil Liberties Union, supra note 46 ("Over 60 people diagnosed as mentally ill or with mental retardation have been executed in the United States since 1983.").

See Bowers et al., supra note 90, at 413 n.1.

ABA, APsyA, APA, NAMI, and MHA recommend that the states bar execution for those with serious mental illness, reflecting the beginning of an emerging consensus in this area. These five professional organizations recommend exempting offenders from the death penalty if at the time of the offense, their mental illness "significantly impaired their capacity (a) to appreciate the nature, consequences or wrongfulness of their conduct, (b) to exercise rational judgment in relation to [the] conduct, or (c) to conform their conduct to the requirements of the law." This joint recommendation of these five important professional associations whose expertise bears most closely on the issue certainly provides some evidence of evolving social norms on this question.

Moreover, both Roper and Atkins considered, as further evidence of contemporary standards, the general consensus in the law of other countries and of international human rights that rejected imposing capital punishment for juveniles and those with mental retardation. The Court has also looked to such international practices in prior cases involving the death penalty for juveniles under the age of sixteen, felony murder, and rape not involving the death of the victim. In the context of mental illness, most countries have either abolished the death penalty or rarely impose it. "More than two-thirds of the countries in the world have now abolished the death penalty in law or practice." In particular, ninety-three countries have abolished the death penalty for all crimes, nine have abolished it for ordinary crimes only, and an additional thirty-six have abolished it in practice. A minority of fifty-nine countries retain capital punishment for at least some offenses.

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231 See Task Force Report, supra note 37, at 668; see also supra note 37.
233 See Task Force Report, supra note 37, at 668, 670-73.
234 See Roper, 543 U.S. at 575-78; Atkins, 536 U.S. at 316 n.21.
239 Id.
240 Id. Amnesty International USA defines "ordinary crimes" as the opposite of "exceptional crimes such as crimes under military law or crimes committed in exceptional circumstances." See id.
241 Id.
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defendants with severe mental illness. The U.N. Commission on Human Rights, for example, has adopted a resolution urging all countries that still maintain capital punishment "[n]ot to impose the death penalty on a person suffering from any form of mental disorder."

B. The Court Should Exercise Its Independent Judgment

Although imposing the death penalty for those with severe mental illness has not become "truly unusual" in the United States, nor has our society rejected the imposition of capital punishment for those within this class of offenders, the above developments suggest the beginning of movement in this direction. Irrespective of these developments, however, the Supreme Court's Eighth Amendment jurisprudence would allow it to invoke the cruel and unusual punishment clause to exempt those with severe mental illness from the death penalty, even in the absence of more developed objective indicia of contemporary values. It could do so under the language in Roper, Atkins, and its 2008 decision in Kennedy v. Louisiana—should it independently determine that capital punishment is a disproportionate penalty for this category of offenders or some subset thereof.

In the absence of further legislative developments or emerging evidence concerning jury, prosecutorial, and judicial behavior in this area, the Court admittedly may be reluctant to impose a constitutional limit on state action, preferring instead to allow the issue to percolate further within the democratic process until a more definitive social consensus emerges. Nonetheless, given the compelling similarities between severe and persistent mental illness and mental retardation and juvenile status, the Court should follow the direction of Kennedy, Roper, and Atkins to limit the death penalty for this population. This conclusion is compelled by Eighth Amendment principles, which are violated when there is an insufficient relationship between the purposes of capital punishment and an offender's blameworthiness and

243 See id.
244 See supra notes 230-243 and accompanying text.
245 See supra notes 97-209 and accompanying text.
246 See Kennedy, 128 S. Ct. at 2658–64; Roper, 543 U.S. at 568–75; Atkins, 536 U.S. at 317–21.
247 See SLATE & JOHNSON, supra note 47, at 342.
248 See Kennedy, 128 S. Ct. at 2658–64; Roper, 543 U.S. at 568–75; Atkins, 536 U.S. at 317–21.
deterrability. Under the Eighth Amendment, "punishment must be tailored to [the offender's] personal responsibility and moral guilt." Capital punishment violates the Eighth Amendment when it is "so totally without penological justification that it results in the gratuitous infliction of suffering." Unless it "measurably contributes" to the goals of retribution or deterrence, a death sentence would be "nothing more than the purposeless and needless imposition of pain and suffering." Kennedy demonstrates that even if capital punishment can be said to contribute somewhat to retribution and deterrence, it may nonetheless be a disproportionate punishment under the Court's evolving capital punishment jurisprudence. The Kennedy Court conceded that capital punishment may deter some instances of child rape, and it certainly would exact retribution on child rapists. Yet the Court determined that a disproportionate relationship exists between capital punishment and retribution and deterrence where the rape of a minor does not result in the death of the victim. Similarly, although executing those who were juveniles at the time of the crime or those with mental retardation would undoubtedly achieve some degree of retribution and deterrence, the Court in Roper and Atkins deemed that correlation to be disproportionate.

In at least some cases of severe mental illness, the requisite relationship between the punishment of death and the goals of retribution and deterrence is similarly lacking. Retribution is inappropriate and deterrence would be ineffective for those whose mental illness significantly impair their ability to understand the nature and consequences of their conduct, to appreciate its wrongfulness, or to exercise control over it. The concepts of responsibility and blameworthiness that justify punish-

249 See Kennedy, 128 S. Ct. at 2658-64; Roper, 543 at U.S. 568-75; Atkins, 536 U.S. at 317-21.
250 See Enmund, 458 U.S. at 801.
251 See Gregg v. Georgia, 428 U.S. 153, 183 (1976) (3-3-1-2 decision) (Stewart, Powell & Stevens, JJ., announcing the judgment of the Court).
252 Enmund, 458 U.S. at 798.
253 Coker, 433 U.S. at 592 (plurality opinion).
254 See 128 S. Ct. at 2661-62.
255 See id. (citing Coker, 433 U.S. at 592 n.4 (plurality opinion)) ("[I]t cannot be said with any certainty that the death penalty for child rape serves no deterrent or retributive function.").
256 See id. at 2668 ("It does not follow, though, that capital punishment is a proportionate penalty for the crime."); id. at 2662 ("The incongruity between the crime of child rape and the harshness of the death penalty poses risks of overpunishment .... The goal of retribution .... does not justify the harshness of the death penalty here.").
257 See Roper, 543 U.S. at 572; Atkins, 536 U.S. at 318-21.
258 See infra notes 259-271 and accompanying text.
259 See Task Force Report, supra note 37, at 668, 670-73.
ment require that the individual have been capable of doing other than what was done. Punishment for an act prohibited by the criminal law is appropriate only when, at the time of the offense, an individual possesses "the normal capacities, physical and mental, for ... abstaining from what it forbids, and a fair opportunity to exercise these capacities." Unless an individual can control his behavior, it is inappropriate for him to receive the moral condemnation and punishment applied in the criminal justice system of social control. Punishment is only justified for those who have the capacities of awareness and control needed to be moral agents. When mental illness materially deprives the individual of these capacities, subjecting him to the death penalty does not sufficiently serve the retributive or deterrence goals of capital punishment, and therefore is cruel and unusual punishment under the Eighth Amendment. Those with severe mental illness that significantly limit their ability to understand the wrongfulness of their conduct, or to control it, like those with mental retardation or who were juveniles at the

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that only a certain kind of agent qualifies as a moral agent and is thus properly subject to ascriptions of responsibility, namely, one who possess [sic] a capacity for decision. For Aristotle, a decision is a particular kind of desire resulting from deliberation, one that expresses the agent's conception of what is good. The remainder of Aristotle's discussion is devoted to spelling out the conditions under which it is appropriate to hold a moral agent blameworthy or praiseworthy for some particular action or trait. His general proposal is that one is an apt candidate for praise or blame if and only if the action and/or disposition is voluntary. According to Aristotle, a voluntary action or trait has two distinctive features. First, there is a control condition: the action or trait must have its origin in the agent. That is, it must be up to the agent whether to perform that action or possess the trait—it cannot be compelled externally. Second, Aristotle proposes an epistemic condition: the agent must be aware of what it is she is doing or bringing about.

Id. (citing ARISTOTLE, NICOMACHEAN ETHICS 1110a-1113b3 (Terence Irwin trans., Hackett Publishing 1985)) (internal citation omitted); see also Peggy Sasso, Implementing the Death Penalty: The Moral Implications of Recent Advances in Neuropsychology, 29 Cardozo L. Rev. 765, 774 (2007) (citing ARISTOTLE, NICOMACHEAN ETHICS).
264 See Roper, 543 U.S. at 569-75; Atkins, 536 U.S. at 317-21.
time of the offense, have diminished responsibility for their actions.265 All warrant punishment, but not the extreme penalty.266

Although the Supreme Court concluded in Roper and Atkins that juveniles and those with mental retardation should be categorically exempt from capital punishment under the Eighth Amendment,267 such a categorical approach is inappropriate in the context of mental illness, even severe mental illness. It should be noted that mental illness is considerably more varied in its symptomatology and resulting degree of functional impairment than are mental retardation and juvenile status.268 Moreover, mental illness is more difficult to diagnose than mental retardation,269 and easier to feign.270 Evidence of juvenile status is, of

265 See Roper, 543 U.S. at 569-75; Atkins, 536 U.S. at 517-21.
266 This conclusion also may be required by principles of equal protection. See Slobo- gin, supra note 47, at 298-303; cf. Skinner v. Oklahoma, 316 U.S. 535, 541-42 (1942) (in- voking the Equal Protection Clause to invalidate the punishment of sterilization applied to those who commit repetitive larceny offenses but not to those who commit repetitive acts of embezzlement). Equal protection requires that like cases be considered alike, see, e.g., Vacco v. Quill, 521 U.S. 793, 799 (1997), and to the extent that severe mental illness im- poses parallel deficits in culpability and deterrence to mental retardation and juvenile status, offenders suffering these effects also should be exempt from capital punishment. The differences between mental illness and mental retardation and juvenile status, how- ever, may limit the force of an equal protection argument. In Heller v. Doe, the Court re- jected an equal protection attack on a statute requiring a higher standard of proof for the civil commitment of those with mental illness than those with mental retardation. See 509 U.S. 312, 321-22, 324-25 (1993). The Court found this distinction to be rationally related to important differences between mental illness and mental retardation, notably different times of onset and different treatment methods. See id.
267 See Roper, 543 U.S. at 575; Atkins, 536 U.S. at 321.
268 See supra notes 35, 56, and accompanying text (commenting on the variability of mental illness). People with mental retardation display considerable variability in capabili- ties, thinking styles, and intelligence, but an individual with mental retardation will not vary in these faculties over time. All people within a particular psychiatric diagnostic cate- gory will display certain common symptoms (e.g., all people with depression will display depressive symptoms). In contrast to those with mental retardation, however, those with mental illness will exhibit considerable variability in capacities and symptoms from time to time. See, e.g., Lidz et al., supra note 35, at 198-99 (noting that effects of mental illness are intermittent, fluctuating, and variable).
269 See Heller, 509 U.S. at 321 (noting that the "general proposition" that "mental retro- dation is easier to diagnose than ... mental illness" should "cause little surprise").
270 See Richard Rogers & Daniel W. Shuman, Conducting Insanity Evaluations 90 (2d ed. 2000) (noting that mental retardation is more difficult to feign than mental illness); id. at 105 (noting that mental retardation is more difficult to feign than mental illness in part because the former is typically corroborated by records going back to early childhood, like "school records and past achievement tests"); Richard Rogers, Introduction to Clinical Assessment of Malingering and Deception 1, 1 (Richard Rogers ed., 2d ed. 1997) (noting that diagnosis of mental illness relies "heavily on the honesty, accuracy, and completeness of patients' self-reporting" and that "[d]istortions, both intentional and unintentional, complicate greatly the assessment process"); cf. Medina v. California, 505
course, relatively straightforward and objective, and more difficult to manipulate. These considerations distinguish mental illness, which requires individualized determinations rather than categorical ones, and additional scrutiny of the validity of claims of disproportionality. Whether severe mental illness renders imposition of capital punishment a disproportionate penalty should therefore be determined on a case-by-case basis. Yet to the extent that, following fair procedural hearings, offenders with severe mental illness are determined to have parallel functional impairments, Eighth Amendment principles require their exemption from the death penalty.271

III. DETERMINING WHEN SEVERE MENTAL ILLNESS AT THE TIME OF THE OFFENSE SHOULD DISQUALIFY AN OFFENDER FROM CAPITAL PUNISHMENT UNDER THE EIGHTH AMENDMENT

To be exempt from the death penalty on the basis of severe mental illness, the offender’s illness at the time of the offense must produce impairments that render him less culpable and deterrable than the average offender.272 The standards for legal insanity and incompetence to stand trial are relevant in this regard, as they both focus on cognitive and volitional impairments caused by mental illness.273 These same impairments may render a defendant insufficiently culpable and deterrable to allow the imposition of capital punishment.274 Under this standard, only those illnesses that cause severe cognitive and volitional impairments, such as schizophrenia, major depressive disorder, and bipolar disorder, qualify.275 Other conditions that do not produce such impairments, including the personality disorders and the paraphilias, do not qualify.276 Procedurally, Eighth Amendment values, combined with considerations of efficiency, cost, and therapeutic jurisprudence, dictate that the exemption issue be determined by the trial judge in a pretrial motion.277

271 See Roper, 543 U.S. at 569–75; Atkins, 536 U.S. at 317–21. Moreover, equal protection principles may also require such an exemption. See supra note 266.
272 See infra notes 278–290 and accompanying text.
273 See infra notes 291–355 and accompanying text.
274 See infra notes 356–359 and accompanying text.
275 See infra notes 360–376 and accompanying text.
276 See infra notes 377–424 and accompanying text.
277 See infra notes 432–478 and accompanying text.
A. The Standards That Should Apply, and Those Mental Illnesses That in Principle Could Satisfy Them

To be disqualified from capital punishment under the Eighth Amendment, the offender's mental illness must significantly diminish his culpability and ability to respond to the deterrent of criminal punishment. Only then will the death penalty constitute disproportionate punishment. It is not sufficient that the offender suffered from a severe mental illness at the time of the offense. That illness must produce effects that so interfere with functioning that the offender’s responsibility for the crime and susceptibility to deterrence are significantly diminished. To put it somewhat differently, there must be a causal connection between the offender’s illness and the offense in ways that significantly diminish his blameworthiness and deterrability.

1. Competency to Stand Trial and the Legal Insanity Defense: The Outlines of the Standard

The Task Force Report endorsed by the ABA, APsyA, APA, NAMI, and MHA provides a starting point for the inquiry. The Task Force Report sets forth a functional test, not a categorical one. It calls for an individualized determination of whether a defendant charged with a capital crime lacks sufficient culpability and deterrability to allow capital punishment to be imposed consistent with its underlying rationale. This requires a value judgment, more than a clinical judgment, and poses a legal rather than a diagnostic question.

In this respect, determining whether the Task Force-endorsed standard applies is like determining competency to stand trial and criminal responsibility, issues the criminal justice system routinely addresses. Typically, the trial judge determines competency to stand trial in a pretrial hearing, and the jury determines criminal responsibility at trial when it determines whether the defendant has established an

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279 See Roper, 543 U.S. at 569–75; Atkins, 536 U.S. at 317–21.
280 See Roper, 543 U.S. at 569–75; Atkins, 536 U.S. at 317–21.
281 See Roper, 543 U.S. at 569–75; Atkins, 536 U.S. at 317–21.
283 See id.
284 See id.
285 See id.
286 Melton et al., supra note 227, at 131; Bruce J. Winick, Reforming Incompetency to Stand Trial and Plead Guilty, in THERAPEUTIC JURISPRUDENCE APPLIED 233, 233 n.1 (1997).
affirmative defense of legal insanity. In both instances, although a legal body—the judge or the jury—makes the final judgment, it is informed by a clinical determination. In both cases psychiatrists or psychologists offer opinion testimony concerning the ultimate issue. They base their testimony upon clinical evaluations of the defendant, and provide both a diagnosis and an explanation of whether they believe that the defendant's mental disability impairs functioning to the extent that he qualifies for the status of incompetency to stand trial or legal insanity. These are value judgments.

Moreover, these value judgments must be made on a case-by-case basis, as not all psychiatric diagnostic categories will produce the same functional impairments, and the existence of such functional impairments will vary within diagnostic categories. The key question in any legal context in which mental illness is relevant is the degree of functional impairment presented in a particular case. In the Eighth Amendment context, the question must be whether the defendant's mental illness impaired his cognitive or volitional abilities at the time of

287 See id. at 63 (noting that, in deciding an insanity question, a jury primarily makes a moral inquiry); Richard J. Bonnie & Katherine Gustafson, The Challenge of Implementing Atkins v. Virginia: How Legislatures and Courts Can Promote Accurate Assessments and Adjudications of Mental Retardation in Death Penalty Cases, 41 U. RICH. L. REV. 811, 815 (2007) ("In the usual forensic context, it is well understood that adjudications of competence and responsibility rest ultimately upon value judgments and that there is often no right answer."); Bruce J. Winick, Reforming Incompetency to Stand Trial and Plead Guilty: A Restated Proposal and a Response to Professor Bonnie, 85 J. CRIM. L. & CRIMINOLOGY 571, 620 (1995) ("Assessing competency ... involves cultural, social, political, and legal judgments which are more normative in nature than clinical.")
288 See DSM-IV-TR, supra note 35, at xxxiii ("It is precisely because impairments, abilities, and disabilities vary widely within each diagnostic category that assignment of a particular diagnosis does not imply a specific level of impairment or disability.").
289 See id. ("In determining whether an individual meets a specified legal standard (e.g., for competence, criminal responsibility, or disability), additional information is usually required beyond that contained in the DSM-IV diagnosis. This might include information about the individual's functional impairments and how these impairments affect the particular abilities in question."); RONALD ROESCH & STEPHEN L. GOLING, COMPETENCY TO STAND TRIAL 82 (1980) (stating that "determination of competency is context-dependent and needs to be decided on a case-by-case basis"); Gerald T. Bennett & Arthur F. Sullwold, Competency to Proceed: A Functional and Context-Determinative Decision, 29 J. FORENSIC SCI. 1119, 1121-22 (1984); Bruce J. Winick, Restructuring Competency to Stand Trial, 32 UCLA L. REV. 921, 974 (1985) [hereinafter Winick, Restructuring Competency] ("Competency to stand trial, like all tests of competency, should focus on the defendant's functional ability to perform a particular task, and its application should depend on the specific case and the skills that will be required of the defendant in that case."). See generally Bruce J. Winick, Ambiguities in the Legal Meaning and Significance of Mental Illness, 1 PSYCHOL. PUB. POL'y & L. 534 (1995) [hereinafter Winick, Ambiguities] (analyzing civil commitment standards and the right of patients to refuse treatment).
the crime to such a degree that his legal culpability or deterrability was sufficiently diminished.\textsuperscript{290}

The functional impairments produced by mental illness vary considerably and are well-established in the context of both competency to stand trial and legal insanity.\textsuperscript{291} For example, in competency to stand trial settings some, though not all, defendants with schizophrenia,\textsuperscript{292} major depressive disorder,\textsuperscript{293} and bipolar disorder\textsuperscript{294} suffer such severe cognitive or communicative impairments as a result of their illness that they are deemed unfit to stand trial.\textsuperscript{295} In contrast, those diagnosed only with antisocial personality disorder ("ASPD"),\textsuperscript{296} one of the other

\textsuperscript{290} See Roper, 543 U.S. at 569-75; Atkins, 536 U.S. at 317-21.
\textsuperscript{291} See infra notes 292-310 and accompanying text.
\textsuperscript{292} See infra note 360.
\textsuperscript{293} See infra note 361.
\textsuperscript{294} See infra note 362.
\textsuperscript{295} See Melton et al., supra note 227, at 144; see also United States v. Adams, 297 F. Supp. 596, 597 (S.D.N.Y. 1969) (holding that a finding of paranoid schizophrenia does not automatically require a finding of incompetency); Roesch & Golding, supra note 289, at 18-24; Bennett & Sullwold, supra note 289, at 1122; Winick, Restructuring Competency, supra note 289, at 923 n.4 (stating that "a psychiatric diagnosis of psychosis ... is not dispositive of the legal question of competency-to-stand-trial").

\textsuperscript{296} As defined in the DSM-IV-TR, ASPD is exclusively behavioral in nature, involving certain behavioral manifestations and personality traits. See DSM-IV-TR, supra note 35, at 706. A diagnosis of ASPD is appropriate when the individual is at least age eighteen and has exhibited evidence of certain conduct before age fifteen as shown by a history of three of fifteen specified behaviors, a pattern of irresponsible behavior since age fifteen as evidenced by three of seven specified behavioral patterns, and antisocial behavior that did not occur during a superimposed schizophrenic or manic episode. See id. For further discussion of ASPD, see generally International Handbook on Psychopathic Disorders and the Law (Alan R. Felthous & Henning Saß eds., 2007); Stephen D. Hart, Psychopathy, Culpability, and Commitment, in MENTAL DISORDER AND CRIMINAL LAW: RESPONSIBILITY, PUNISHMENT, AND COMPETENCE 159 (Robert F. Schopp et al. eds., 2009) [hereinafter MENTAL DISORDER AND CRIMINAL LAW]; Winick, Ambiguities, supra note 289.

ASPD is characterized as a "colorblindness" to the feelings of others. See Robert D. Hare, Without Conscience: The Disturbing World of the Psychopaths Among Us 27-28 (1993). Those diagnosed with ASPD display a "stunning lack of concern for the devastating effects their actions have on others." Id. at 40. They lack the capacity to feel guilt, shame, genuine remorse, or concern for the feelings of others. Id. at 40, 44. What is now known as ASPD has been, and continues to be, known by other names, including psychopathy, sociopathy, and dysocial personality. See DSM-IV-TR, supra note 35, at 702; Seymour L. Halleck, Psychiatry and the Dilemmas of Crime 99 (1967); Robert D. Hare et al., Psychopathy and the DSM-IV Criteria for Antisocial Personality Disorder, 100 J. Abnormal Psychol. 391, 391 (1991); Hart, supra, at 160; Norval Morris, Keynote Address: Predators and Politics, 15 U. Puget Sound L. Rev. 517, 519 (1992); Gerald Uelman, The Psychiatrist, the Sociopath and the Courts: New Lines for an Old Battle, 14 Loy. L.A. L. Rev. 1, 2 (1980). Some distinguish ASPD, referring to a "cluster of criminal and antisocial behavior," from the more general term "psychopathy," which is defined as a "cluster of both personality traits and socially deviant behavior." See Hare, supra, at 25; see also John Monahan, A Jurisprudence of Risk Assessment: Forecasting Harm Among Prisoners, Predators, and
personality disorders,\textsuperscript{297} or one of the paraphilias\textsuperscript{298} generally do not qualify for this status.\textsuperscript{299}

Similarly, in the context of the legal insanity defense, those diagnosed with schizophrenia,\textsuperscript{300} major depressive disorder,\textsuperscript{301} or bipolar disorder\textsuperscript{302} sometimes, although far from always, suffer sufficient cognitive impairment to satisfy the test of legal insanity,\textsuperscript{303} which in most jurisdictions requires that the defendant be unable to understand the
nature of his conduct or that it was wrong. In addition, these defendants may suffer sufficient volitional impairment to qualify for the additional legal insanity standard, applied in a minority of jurisdictions, that requires a significant diminution in the ability to "conform [their] conduct to the requirements of the law." On the other hand, the personality disorders, paraphilias, and temporary insanity induced by

304 See id. at 206-08; see also infra note 327 and accompanying text.
306 See Melton et al., supra note 227, at 207-08; see also infra note 332 and accompanying text.
307 See Model Penal Code § 4.01(2) (1962) ("As used in this Article, the terms 'mental disease or defect' do not include an abnormality manifested only by repeated criminal or otherwise antisocial conduct."); Melton et al., supra note 227, at 214 (noting that "antisocial personality disorder is rarely an adequate predicate for insanity"); id. at 233 (noting that a diagnosis of personality disorder is "least likely to be associated with clinical opinions favoring an insanity finding"); Michael L. Perlin, Mental Disability Law: Civil and Criminal 162 (2d ed. 2002) (noting that the Model Penal Code definition of mental disease or defect was intended to exclude psychopaths or sociopaths from qualifying from the defense); Emily Campbell, The Psychopath and the Definition of "Mental Disease or Defect" Under the Model Penal Code Test of Insanity: A Question of Psychology or a Question of Law?, in Law and Psychology: The Broadening of the Discipline 139, 143 (James R.P. Ogloff ed., 1992); Stephen J. Morse, Culpability and Control, 142 U. Pa. L. Rev. 1587, 1602 (1994); Winick, Ambiguities, supra note 289, at 594-95.
308 See, e.g., People v. Hopper, No. G033190, 2005 WL 1100422, at *5 (Cal. Ct. App. May 10, 2005); State v. Armstrong, 789 N.E.2d 657, 666 (Ohio Ct. App. 2003); see also Stephen J. Morse, Uncontrollable Urges and Irrational People, 86 Va. L. Rev. 1025, 1027 (2002) (noting that "even if their sexual violence is in part caused by a mental abnormality, they do not meet the usual standards for an insanity defense"). Those diagnosed with one or more of the paraphilias suffer from neither the cognitive nor the volitional impairments that are necessary to satisfy the criteria for the legal insanity defense. See Schopp, supra note 262, at 38, 141; Winick, supra note 305, at 528-24 (explaining that for those diagnosed with paraphilia, "nothing in the diagnostic criteria" implies the existence of a "cognitive impairment" that "renders them irrational in any respect or unable to control their actions").
drug or alcohol consumption generally do not qualify for the insanity defense.

The functional impairments relating to culpability and deterrability that are relevant to the Eighth Amendment question differ from those relating to competency to stand trial and legal insanity. For incompetence to stand trial, the question is whether the defendant's mental illness prevents him from understanding the nature of the proceedings or assisting in his own defense. With the legal insanity defense, the question is whether the defendant's mental illness prevented him from understanding the nature of his conduct or that it was wrong, or in a minority of jurisdictions, whether it substantially prevented him from "conform[ing] his conduct to the requirements of the law." In contrast, the Eighth Amendment inquiry focuses on the extent to which the offender's mental illness diminishes culpability and deterrability. Despite these differences, however, it is likely that the same mental disorders that tend to satisfy the incompetency and legal insanity tests will also satisfy Eighth Amendment requirements because the cognitive and volitional defects caused by these illnesses affect an individual's blameworthiness and susceptibility to deterrence. Similarly, those that fail to satisfy these legal standards also will fail to justify an exclusion from capital punishment. This conclusion requires further analysis, however, and a better understanding of how, if at all, the vari-

See [reference to a legal text].
uous mental disorders may compromise culpability and deterrability enough to make mental illness sufficiently analogous to mental retardation and juvenile status to justify exclusion from capital punishment.

2. The Need for an Eighth Amendment Phenomenology of Mental Disorder

The APsyA's Diagnostic and Statistical Manual of Mental Disorders ("DSM-IV-TR"), although a helpful starting point for this analysis, is designed to aid clinicians in making diagnostic and treatment decisions, and its description of the various mental disorders does not focus on functional impairment for Eighth Amendment or other legal purposes.\(^{316}\) The introduction to the DSM-IV-TR notes that there is an "imperfect fit" between clinical diagnoses and "the questions of ultimate concern to the law."\(^{317}\) In determining satisfaction of a legal standard, additional information "is usually required," including "information about the individual's functional impairments and how these impairments affect the particular abilities in question."\(^{318}\) Similarly, legal objectives are not the focus of the Global Assessment of Functioning ("GAF") Scale, a diagnostic rating scale that is used in diagnosis and treatment to rank functioning.\(^{319}\) Consequently, although this scale measures functional impairment for certain clinical purposes, it does not seek to measure functional impairment for legal purposes.\(^{320}\) An individual's GAF score, therefore, will provide little assistance in resolving the Eighth Amendment question.\(^{321}\) As a result, what is needed is a

\(^{316}\) See DSM-IV-TR, supra note 35, at xxxii–xxxiii. As noted in the introduction to the DSM-IV-TR:

> When the DSM-IV categories, criteria, and textual descriptions are employed for forensic purposes, there are significant risks that diagnostic information will be misused or misunderstood. These dangers arise because of the imperfect fit between the questions of ultimate concern to the law and the information contained in a clinical diagnosis. In most situations, the clinical diagnosis of a DSM-IV mental disorder is not sufficient to establish the existence for legal purposes of a "mental disorder," "mental disability," "mental disease," or "mental defect." In determining whether an individual meets a specified legal standard (e.g., for competence, criminal responsibility, or disability), additional information is usually required beyond that contained in the DSM-IV diagnosis.

\(^{317}\) Id. at xxxiii.

\(^{318}\) Id.

\(^{319}\) See id. at 34.

\(^{320}\) See id. at 32–34.

\(^{321}\) See DSM-IV-TR, supra note 35, at 32–34.
new analysis of the degree to which mental disorder impairs functioning in the constitutionally relevant ways: literally, a phenomenology of mental disorder.

What functional impairments must mental illness produce to justify an exemption from the death penalty under the proportionality principle of the Eighth Amendment, and which psychiatric diagnoses are capable of producing these impairments? The U.S. Supreme Court's analysis in 2002, in Atkins v. Virginia, of the impairments associated with mental retardation and in 2005, in Roper v. Simmons, of those associated with juvenile status point the way. In these cases, the Court concluded that, because certain categories of offenders were significantly less culpable and deterrable than the average offender, applying the extreme penalty to members of these two groups would insufficiently achieve either of the two principal justifications for capital punishment: retribution and deterrence. For offenders suffering

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322 See 536 U.S. at 317–21. The majority in Atkins deferred to the definition of mental retardation given by the American Association on Mental Retardation:

*Mental retardation* refers to substantial limitations in present functioning. It is characterized by significantly subaverage intellectual functioning, existing concurrently with related limitations in two or more of the following applicable adaptive skill areas: communication, self-care, home living, social skills, community use, self-direction, health and safety, functional academics, leisure, and work.

*Id.* at 308 n.3 (internal quotation omitted). Additionally, the Atkins majority noted the "similar" definition given by the APsya:

The essential feature of Mental Retardation is significantly subaverage general intellectual functioning (Criterion A) that is accompanied by significant limitations in adaptive functioning in at least two of the following skill areas: communication, self-care, home living, social/interpersonal skills, use of community resources, self-direction, functional academic skills, work, leisure, health, and safety (Criterion B). Mental Retardation has many different etiologies and may be seen as a final common pathway of various pathological processes that affect the functioning of the central nervous system.

*Id.* (internal quotation omitted).

323 See 543 U.S. at 569–75.

324 See *id.* at 571 ("Retribution is not proportional if the law's most severe penalty is imposed on one whose culpability or blameworthiness is diminished, to a substantial degree, by reason of youth and immaturity."); Atkins, 536 U.S. at 319 ("If the culpability of the average murderer is insufficient to justify the most extreme sanction available to the State, the lesser culpability of the mentally retarded offender surely does not merit that form of retribution." (emphasis added)).

325 See Roper, 543 U.S. at 571 ("[T]he same characteristics that render juveniles less culpable than adults suggest as well that juveniles will be less susceptible to deterrence."). The Court in Atkins also stated:
from severe mental illness at the time of the offense, the question thus becomes whether mental illness causes a parallel diminution of culpability and deterrability. The standards for the legal insanity defense are relevant here, but not dispositive. A majority of American jurisdictions apply a form of the "M'Naghten test," originally adopted in England in 1842. This test focuses exclusively on cognitive impairment, asking whether, at the time of the offense the defendant suffered from "such a defect of reason" as a result of mental illness, "as not to know the nature and quality of the act he was doing; or if he did know it, that he did not know he was doing what was wrong." In addition, fourteen jurisdictions apply the Model Penal Code approach, under which an offender is excused from criminal responsibility if mental illness prevented him from appreciating the nature and consequences of his conduct or its wrongfulness. Both the M'Naghten and Model Penal Code tests focus on cognitive impairment produced by mental illness that reduces culpability to the extent that the offender is not blameworthy for his conduct. They express the view that moral condemnation

Exempting the mentally retarded from [capital] punishment will not affect the "cold calculus" that precedes the decision of other potential murderers. Indeed that sort of calculus is at the opposite end of the spectrum from behavior of mentally retarded offenders. . . . [I]t is the same cognitive and behavioral impairments that make these defendants less morally culpable . . . that also make it less likely that they can process the information of the possibility of execution as a penalty and, as a result, control their conduct based upon that information.

536 U.S. at 319–20 (internal citations omitted).


527 See M’Naghten, 8 Eng. Rep. at 722; see also Melton et al., supra note 227, at 206–18; Perlin, supra note 307, at 149–54.

528 See Model Penal Code § 4.01(1); see also Melton et al., supra note 227, at 207–18; Christopher Slobothin et al., Law and the Mental Health System: Civil and Criminal Aspects 548–49 (5th ed. 2009). The Model Penal Code test is based on M’Naghten but broadens it in several respects. Perlin, supra note 307, at 161–62. Its use of the word “substantial” was a rejection of case law construing the M’Naghten test to require a showing of total impairment. Id. at 161. The use of the word “appreciate” instead of the word “know” reflected a broadening beyond intellectual understanding to encompass emotional awareness of the nature and consequences of the defendant’s conduct. Id. The test also uses a broader notion of mental impairment, thereby including both cognitive and affective aspects of impairment. Id. In addition, it substitutes the word "wrongfulness" for "criminality," thereby encompassing a defendant's impaired moral sense, not merely an impaired sense of legal wrong. Id. at 161–62.

529 See M’Naghten, 8 Eng. Rep. at 722; Model Penal Code § 4.01(1).
and criminal sanctions are inappropriate when the individual, as a result of illness, is unable to understand the nature and consequences of his actions and that they are wrong. Deterrability also is captured by the standard inasmuch as criminal sanctions are unlikely to deter people from actions they do not appreciate are unlawful or whose consequences they do not understand. In a small minority of jurisdictions, an offender also can meet the standards for legal insanity if mental illness substantially impairs his ability to "conform his conduct to the requirements of the law." An offender whose mental illness prevents him from controlling his conduct is neither deterrable nor blameworthy for having failed to do so.

Those impairments that should be required to bar the death penalty under Eighth Amendment proportionality principles, though similar, are not identical to those that satisfy the requirements of the legal insanity defense. The Eighth Amendment question arises only for those who have been convicted of a capital offense, which excludes those who are able to raise a successful insanity defense or whose mental illness negates mens rea. Although an offender's serious mental illness may satisfy the insanity defense, not all jurisdictions recognize the defense. Moreover, even in those that do, the defense is an exceedingly narrow one, and juries rarely acquit by reason of insanity.

330 See Richard J. Bonnie, The Moral Basis of the Insanity Defense, 69 A.B.A. J. 194, 195 (1983) (“It is fundamentally wrong to condemn and punish a person whose rational control over his or her behavior was impaired by the incapacitating effects of mental illness.”).

331 See supra notes 326-330 and accompanying text.

332 MODEL PENAL CODE § 4.01(1). This volitional prong of the Model Penal Code test, although it appeared to be gaining acceptance prior to United States v. Hinckley, Crim. No. 81-306 (D.D.C. June 21, 1982) (acquitting by reason of insanity the attempted assassin of President Reagan), has since been rejected in many jurisdictions. See Winick, Ambiguities, supra note 289, at 535 n.4, 599 n.263.

333 See Bonnie, supra note 330, at 196 (arguing for abolition of the volitional prong of the insanity defense, but conceding that "a person who ‘cannot help’ doing what he did is not blameworthy").

334 See supra notes 300-310 and accompanying text.

335 Thirty-four states permit the admission of evidence of mental impairment at trial to negate the mens rea element of the offense. See Brief of Appellant, supra note 88, at 21 apps. 1-5.

336 See Melton et al., supra note 227, at 208. Five states—Kansas, Idaho, Montana, North Dakota, and Utah—have abolished the insanity defense. See id.

337 Approximately 60 percent of the states, along with the federal government, apply the narrow M'Naghten test of legal insanity. See supra note 326 and accompanying text. This test is considerably more narrow than the Model Penal Code test applied in fourteen of the states. See Perlin, supra note 307, at 161-62; see also supra note 328.
Eighth Amendment exemption from capital punishment is not the same as an excuse from criminal responsibility; rather, it is a form of diminished responsibility.\textsuperscript{339} The question is when the effects of mental illness, although not sufficient to excuse the offender for his offense, make it inappropriate to execute him. Because the Eighth Amendment question concerns a reduced culpability—not an absence of culpability—a lesser showing than that required to satisfy the legal insanity standard should be required in the Eighth Amendment context.\textsuperscript{340} The threshold question for the Eighth Amendment analysis, therefore, is whether the offender's mental illness at the time of the offense produced parallel, although lesser, cognitive and volitional impairments as those required for legal insanity.

The U.S. Supreme Court's 2007 decision in Panetti v. Quarterman, which involved a different but related legal test—the standard for competency to be executed—offers further guidance.\textsuperscript{341} The competency to be executed issue arises for defendants sentenced to death who become so mentally ill while awaiting execution that it would constitute cruel and unusual punishment to carry out the death penalty.\textsuperscript{342} In Panetti, the U.S. Court of Appeals for the Fifth Circuit had foreclosed the prisoner from showing that his mental illness "obstructs a rational understanding of the State's reason for his execution."\textsuperscript{343} The Supreme Court found the court of appeals' standard for competency for execution—whether the prisoner is aware that he is going to be executed and why—too restrictive.\textsuperscript{344} The Court remanded the case but declined to specify a rule for governing all competency-for-execution determinations.\textsuperscript{345} Nonetheless, the Court noted that execution of a severely mentally ill prisoner may violate the Eighth Amendment for several reasons, includ-

\textsuperscript{338} See id. at 2862.

\textsuperscript{339} See Roper, 543 U.S. at 569–71; Atkins, 536 U.S. at 318.

\textsuperscript{340} See Roper, 543 U.S. at 569–71; Atkins, 536 U.S. at 318.

\textsuperscript{341} See id.


\textsuperscript{343} See id.

\textsuperscript{344} See id.

\textsuperscript{345} See id. at 2862.
ing that it "serves no retributive purpose." In other words, executing a condemned prisoner whose "mental state is so distorted by a mental illness" that he is prevented from recognizing the severity of his offense "call[s] in question" "the objective of community vindication" because "his awareness of the crime and punishment has little or no relation to the understanding of those concepts shared by the community as a whole." Thus, the Panetti Court concluded that a prisoner’s "awareness of the State’s rationale for an execution is not the same as a rational understanding of it," and that it was error for the lower court to have foreclosed inquiry into whether the prisoner suffered from a severe mental illness "that is the source of gross delusions preventing him from comprehending the meaning and purpose of the punishment to which he has been sentenced." "Gross delusions stemming from a severe mental disorder," the Court noted, "may put an awareness of a link between a crime and its punishment in a context so far removed from reality that the punishment can serve no proper purpose."

Panetti sheds some light on when severe mental illness may deprive an offender of sufficient culpability and deterrability to make capital punishment a disproportionate penalty under the Eighth Amendment. Panetti’s language suggests that when such illness produces gross delusions or other cognitive defects that significantly distort the offender’s understanding and appreciation of his conduct and of its wrongfulness, capital punishment will serve no retributive purpose, and therefore is cruel and unusual. The Court’s statements in Panetti concerning the impairing effects of mental illness that might render a prisoner incompetent for execution parallel the legal insanity standard in some respects, and both inform the Eighth Amendment inquiry here. Both emphasize serious cognitive impairment that substantially

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546 See id. at 2861 (citing Ford, 477 U.S. at 408).  
547 See id.  
548 See id.  
549 Id.  
550 See id. at 2860–62.  
551 See id. at 2861–62.  
552 Compare id. at 2861 (noting that a severely distorted mental state "call[s] into question" the retributivist objective that the prisoner understand "the severity of the offense and the objective of community vindication" (emphasis added)), and id. at 2862, with M’Naghten, 8 Eng. Rep. at 722 (holding that a person is not responsible if mental illness prevented him from appreciating the "nature and quality" of his act, or that it was wrong), and MODEL PENAL CODE § 4.01(1) (providing that a person is not responsible if, due to mental illness, he lacked "substantial capacity to appreciate the criminality [wrongfulness] of his conduct").
interferes with the individual's understanding and rationality. By stressing gross delusions that significantly impair comprehension, *Panetti* seemed to limit its standard to the major mental illnesses often labeled “psychoses.” Likewise, the legal insanity defense typically is limited to the major mental illnesses that significantly impair the individual's understanding of the nature and consequences of his actions or of their wrongfulness, excluding conditions defined exclusively by their behavioral manifestations.

The ABA, APsAyA, APA, NAMI, and MHA, in discussing the mental illnesses and degrees of impairment that should qualify for exemption from capital punishment, propose a standard that is a variant on the legal insanity test. The Task Force Report recommends that only those with "severe' disorders or disabilities are to be exempted from the death penalty," and specifically excludes those diagnosed “only with conditions that are primarily manifested by criminal behavior and those whose abuse of psychoactive substances, standing alone, renders them impaired at the time of the offense." The recommendations are limited to "severe" mental illnesses—those that are often called "psychoses." To qualify, the condition must also substantially impair defendants' ability, at the time of the offense, to “appreciate the nature, consequences, or wrongfulness of their conduct” or “to exercise rational judgment in relation to conduct” or “to conform their conduct to the requirements of the law.”

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354 See Panetti, 127 S. Ct. at 2861-62. The Court pointed out that its foundation ("the beginning of doubt") for calling into question the petitioner's competence was not mere antisocial qualities ("misanthropic personality or an amoral character"), but rather "a psychotic disorder." See id. at 2862. Psychosis is [a] severe mental disorder characterized by gross impairments in reality testing, typically manifested by delusions, hallucinations, disorganized speech, or disorganized or catatonic behavior, ... Among these illnesses are schizophrenia, delusional disorders, some secondary or symptomatic disorders ("organic psychoses") and some mood disorders.

American Psychiatric Glossary 161 (Narriman C. Shahrokh & Robert E Hales eds., 8th ed. 2009); see also DSM-IV-TR, supra note 35, at 297 (most definitions of psychosis involve "delusions or prominent hallucinations"). This term is no longer used in the DSM-IV-TR as a formal diagnostic category but remains in use among clinicians.

356 See supra note 306 and accompanying text.
357 See Task Force Report, supra note 37, at 668, 670-73.
358 See id. at 670-71; see also supra note 354.
359 Task Force Report, supra note 37, at 668.
What conditions, in principle, can satisfy these requirements? Plainly, schizophrenia, major depressive disorder, bipolar disorder, the dissociative disorders, dementia, and delirium could

\[360\] Schizophrenia, the most serious of the major mental disorders, is a thought disorder frequently accompanied by hallucinations and delusions that distort reality and prevent or seriously interfere with rational decision making. See DSM-IV-TR, supra note 35, at 298. A diagnosis of schizophrenia is appropriate when the condition lasts six months or more and includes at least one month of symptoms such as delusions, hallucinations, disorganized speech, or grossly disorganized or catatonic behavior. See id. Two or more of these active symptoms must be found. Id. "Behavior is considerably influenced by delusions or hallucinations [or] serious impairment in communication or judgment ...." Id. at 34. Schizophrenia is now thought to have a biochemical etiology. Office of Tech. Assessment, U.S. Cong., The Biology of Mental Disorders: New Developments in Neuroscience 77-82 (1992), available at http://purl.access.gpo.gov/GPO/LPS26815.

\[361\] Major depressive disorder, a mood disorder, may be diagnosed following the occurrence of at least one major depressive episode, requiring a depressed mood for two or more weeks and the existence of at least four other symptoms of depression. DSM-IV-TR, supra note 35, at 345. A nonexhaustive list of such symptoms includes a change in weight, appetite, sleep patterns, or psychomotor activity; decrease in energy; feelings of worthlessness or guilt; difficulty with thought, concentration, or decision making; or recurring suicidal thoughts or attempts. Id. at 349. There is increasing acceptance of the hypothesis that one or more of the neurotransmitters—the biochemical substances that relay messages throughout the central nervous system—are implicated in the etiology of schizophrenia and the mood disorders. See Office of Tech. Assessment, supra note 360, at 77-88 (discussing neurotransmitter imbalances and other biological factors hypothesized to play a role in schizophrenia and the mood disorders).

\[362\] Bipolar disorder is a mood disorder classified by the occurrence of one or more manic episodes, characterized by an elevated, expansive, or irritable mood, usually accompanied by one or more major depressive episodes and serious interference in functioning. DSM-IV-TR, supra note 35, at 382. As with schizophrenia, see supra note 360, and major depressive disorder, see supra note 361, it appears that the etiology of bipolar disorder is biochemical. See Office of Tech. Assessment, supra note 360, at 82-88.

\[363\] An individual with one of the dissociative disorders—which include dissociative amnesia and dissociative identity disorder (formerly multiple personality disorder)—suffers generally from the disruption of the normal integration of consciousness, memory, identity, or perception. DSM-IV-TR, supra note 35, at 519. See generally Elyn R. Saks with Stephen H. Behnke, Jekyll on Trial: Multiple Personality Disorder and Criminal Law (1997) (analyzing how traditional legal concepts of insanity and competency were not formulated with multiple personality disorder in mind).

\[364\] The central characteristic of dementia is the existence of multiple defects in cognition as a direct result of a medical condition (e.g., Alzheimer's disease, head trauma, HIV, Huntington's disease) or substance abuse. DSM-IV-TR, supra note 35, at 147-48. Resultant defects include memory impairment and one or more of the following: aphasia (inability to comprehend or articulate spoken or written words due to a brain injury or disease), apraxia (inability to perform previously learned, purposeful acts), agnosia (inability to recognize persons, sounds, shapes, or smells not attributable to memory loss, even though sensory functioning is normal), or impaired executive functioning (e.g., memory, learning, language, or reasoning). See id. at 148; American Psychiatric Glossary, supra note 354, at 6, 18-19. A diagnosis of dementia is inappropriate, however, where all cognitive impairments occur while in a state of delirium. DSM-IV-TR, supra note 35, at 148; see also infra note 365.
qualify. In appropriate circumstances, all provide a predicate for a legal insanity defense inasmuch as they may produce effects that could satisfy the insanity standard.\textsuperscript{366} Moreover, all produce effects that, in appropriate circumstances, could satisfy the test for incompetence to stand trial.\textsuperscript{367} Yet, even if the effects caused by a defendant's mental illness are not severe enough to satisfy the legal insanity or incompetency to stand trial standards, they may still render him significantly less culpable and deterrable than the typical offender.\textsuperscript{368} As the Task Force Report noted, "all of these disorders," at least in their acute state, "are typically associated with delusions (fixed, clearly false beliefs), hallucinations (clearly erroneous perceptions of reality), extremely disorganized thinking, or very significant disruption of consciousness, memory and perception of the environment."\textsuperscript{369} A person with mental illness may experience distortions of reality that significantly reduce his ability to appreciate the wrongfulness of his conduct or to understand its consequences, such as when psychosis causes a person to mistakenly believe that his victim is attacking him or involves hallucinations commanding him to kill the victim.\textsuperscript{370} Similarly, an offender's symptomatology may create such gross irrationality that it significantly impairs his judgment at the time of the crime. A mother who kills her children, for example, due to her belief that the devil otherwise would transport them to hell and that by killing them, they will enter heaven, may be less culpable and deterrable even if she understands that her conduct is against the law.\textsuperscript{371} In addition, in

\textsuperscript{365} Delirium is a disruption in conscious thought processes or perceptions, leading to a diminished awareness of one's surroundings and accompanied by cognitive changes not attributable to dementia. DSM-IV-TR, supra note 35, at 136–37; see also supra note 364.

\textsuperscript{366} See supra notes 300–310 and accompanying text.

\textsuperscript{367} See supra notes 292–299 and accompanying text.

\textsuperscript{368} See Task Force Report, supra note 37, at 670–72.


\textsuperscript{370} See Task Force Report, supra note 37, at 671.


Andrea Yates was found not guilty by reason of insanity Wednesday in the bathtub drownings of her [five] young children.

... [Her attorneys] said she suffered from severe postpartum psychosis and, in a delusional state, believed Satan was inside her and was trying to save [her children] from hell.
extreme cases, people suffering from these conditions may experience such cognitive impairment or impairment of mood that, even if they understand the nature and consequences of their acts and appreciate their wrongfulness, their ability to control their conduct is dramatically diminished.\textsuperscript{372} Other conditions that may produce similar effects include drug- or alcohol-induced psychosis\textsuperscript{373} and post-traumatic stress disorder.\textsuperscript{374}

The Task Force Report also recognizes that in rare instances, people suffering not from mental illnesses, but from certain personality disorders,\textsuperscript{375} experience psychotic-like symptoms at times of stress, which could produce similar impairments at the time of the offense, also reducing the culpability or deterrability of the offender.\textsuperscript{376} In general,

\ldots [A] forensic psychiatrist \ldots testified \ldots that she did not know killing the children was wrong because she was trying to save them from hell.

\textit{Id.}

\textsuperscript{372} \textit{See} Task Force Report, \textit{supra} note 37, at 671.

\textsuperscript{373} DSM-IV-TR, \textit{supra} note 35, at 338-39.

\textsuperscript{374} See \textit{id.} at 463-64. Post-traumatic stress disorder ("PTSD") develops from the sense of extreme fear, revulsion, or helplessness after facing a highly stressful or traumatic experience, for example military combat, torture, natural or manmade disaster, or being the victim of a disturbing or violent crime. \textit{See id.} Those suffering from this condition deliberately avoid exposure to any stimuli that could cause "flashbacks" of the traumatic experience. \textit{See id.} at 464. PTSD has been accepted as a predicate for the insanity defense. Winick, \textit{Ambiguities, supra} note 289, at 596-97. PTSD is viewed as having a psychosocial, rather than a biological, etiology. \textit{See id.} at 596. "Many studies have indicated that a high percentage (up to 80 percent) of patients with PTSD had one or two concurrent psychiatric diagnoses." J. David Kinzie, \textit{Post-Traumatic Stress Disorder, in 1 Comprehensive Textbook of Psychiatry, supra} note 35, at 1000, 1006. An individual with PTSD who commits a criminal act while under the delusion that he is responding appropriately in the context of a prior traumatic situation may be regarded as unable to appreciate the wrongfulness of his conduct. Winick, \textit{Ambiguities, supra} note 289, at 597 n.257.

\textsuperscript{375} \textit{See supra} note 297.

\textsuperscript{376} \textit{See} Task Force Report, \textit{supra} note 37, at 671. As stated in the Task Force Report:

\begin{quote}
Some conditions that are not considered [severe] might also, on rare occasions, become "severe" as that word is used in this Recommendation. For instance, some persons whose predominant diagnosis is a personality disorder \ldots may at times experience more significant dysfunction. Thus, people with borderline personality disorder can experience "psychotic-like symptoms \ldots during times of stress."
\end{quote}

\textit{Id.} "Other \ldots diagnoses that might produce psychotic-like symptoms include Autistic Disorder and Asperger's Disorder." \textit{Id.} at 671 n.22 (internal citations omitted). Both autistic disorder and Asperger's disorder are types of pervasive developmental disorders. DSM-IV-TR, \textit{supra} note 35, at 40. Identifiable characteristics of autistic disorder include markedly weak social interactive skills and limited personal interests. \textit{See id.} at 70. Those diagnosed with Asperger's disorder are limited to restricted, repetitive behavioral patterns. \textit{Id.} at 80. Additionally, "people with borderline personality disorder can experience 'psychotic-like symptoms \ldots during times of stress.'" \textit{Id.} at 671 (quoting DSM-IV-TR, \textit{supra} note 35, at 708).
however, many of the personality disorders, the paraphilias, and sub-
stance abuse will not produce such psychotic-like effects. As a result,
the Task Force Report exempts from its recommendation offenders
whose disorder is “manifested primarily by repeated criminal conduct or
attributable solely to the acute effects of voluntary use of alcohol or
other drugs.” This language exempts offenders whose only diagnosis
is antisocial personality disorder. It also exempts those whose im-
pairment at the time of the offense is due to voluntary intoxication,
unless their “substance abuse has caused organic brain disorders” or
unless they “have other serious disorders that, in combination with the
acute affects of substance abuse, significantly impaired appreciation or
control at the time of the offense.”

In light of the foregoing analysis, those suffering from ASPD, the
paraphilias, and voluntary intoxication should not qualify, in general,
for an exemption from capital punishment under the Eighth Amend-
ment. ASPD is defined as “a pervasive pattern of disregard for, and
violation of, the rights of others that begins in childhood or early ado-
lescence and continues into adulthood.” The diagnosis is exclusively
behavioral, requiring “fail[ure] to conform to social norms with respect
to lawful behavior” as indicated by repeatedly performing “acts that are
grounds for arrest.” Individuals with this diagnosis are indifferent to
the interests of others and are unable to empathize with them. Many
people receiving capital punishment may qualify for this diagnosis.
Many serial killers, for example, Ted Bundy, who was executed for
murdering and mutilating multiple female college students, carried

577 See FINGARETTE & HASSE, supra note 309, at 112 (stating that “in cases of drug in-
toxications there is, of course, no ‘mental disease’”); BRUCE J. WINICK, CIVIL COMMITMENT:
A THERAPEUTIC JURISPRUDENCE MODEL 128 (2005) (“Although some people diagnosed
with pedophilia . . . will experience serious difficulty in controlling their sexual urges, most
will not.”); Winick, Ambiguities, supra note 289, at 568 (ASPD); id. at 592 (paraphilias);
Winick, supra note 305, at 523–24 (paraphilias); Bruce J. Winick et al., Should Psychopathy
Qualify for Preventive Outpatient Commitment?, in 2 INTERNATIONAL HANDBOOK ON PSYCHO-
PATHIC DISORDERS AND THE LAW, supra note 296, at 61, 64–65 (ASPD).
578 Task Force Report, supra note 37, at 672.
579 Id.
580 Id.
581 See supra notes 377–380 and accompanying text.
582 DSM-IV-TR, supra note 35, at 701.
583 Id. at 702. The DSM-IV-TR cites, as illustrations and not limitations of such unlawful
behaviors, “destroying property, harassing others, stealing, or pursuing illegal occupa-
tions.” See id.
584 See id.
this diagnosis.\textsuperscript{385} Many mass murderers, for example Adolf Hitler and Saddam Hussein, also probably can be so diagnosed.\textsuperscript{386} Whether this "condition" should be considered an illness or a disability has been questioned.\textsuperscript{387} Regardless, the diagnosis alone does not include symptoms producing cognitive impairment of any kind or inability to control conduct.\textsuperscript{388} Although some have claimed that this condition is associated with various forms of brain damage, most research fails to confirm this hypothesis.\textsuperscript{389}

Research shows that psychopathy,\textsuperscript{590} a somewhat wider term, is associated with some degree of cognitive impairment.\textsuperscript{391} These impairments include "problems perceiving and processing abstract and emotional information, especially linguistic information."\textsuperscript{392} Research also shows that psychopathy may impair volitional functioning.\textsuperscript{393} Such impairments include difficulty considering the likely consequence of one's actions, "inhibiting impulses, implementing plans, and learning from
punishment."\textsuperscript{394} These cognitive and volitional deficits, however, are "restricted in nature or scope and moderate in severity."\textsuperscript{395} ASPD or psychopathy does not impair those diagnosed with these conditions from understanding the potential consequences of their actions and alternatives.\textsuperscript{396} Moreover, they can "perceive alternative courses of action, make choices, and compensate for or overcome their volitional impairment."\textsuperscript{397} Thus, whatever cognitive, behavioral, or volitional deficits those with ASPD or psychopathy may suffer from, it is not clear that those deficits materially contribute, in a way that the law should recognize, to the antisocial conduct these individuals repeatedly display.\textsuperscript{398} The law requires them to "use their intact cognitive skills and abilities to overcome their impairments" and resist their antisocial urges.\textsuperscript{399} These deficits should not constitute a basis for considering that their culpability or deterrability has been reduced. People suffering from colorblindness, for example, may have difficulty, when driving, determining the color of traffic signals.\textsuperscript{400} This deficit, even though physiological, however, would not be considered to reduce their culpability should they run a red light and cause an accident.\textsuperscript{401} The law would expect them to overcome whatever deficit in color vision they had in this regard.\textsuperscript{402} Similarly, even if there is a physiological basis such as a decrease of

\textsuperscript{394} Id.
\textsuperscript{395} Id. at 166.
\textsuperscript{396} See Hart, \textit{supra} note 296, at 166.
\textsuperscript{397} Id.
\textsuperscript{398} See id.
\textsuperscript{400} See id.
\textsuperscript{401} See Hart, \textit{supra} note 296, at 166.
\textsuperscript{402} See id. As Professor Stephen Morse has observed:

If an agent knows from experience that the urges are recurrent and that on previous occasions the agent has acted on those urges in a state of diminished rationality, the agent also knows during more rational moments that he is at risk for acting in such a state in the future. It is a citizen's duty in such circumstances to take all reasonable steps to prevent oneself from acting wrongly in an irrational state in the future, including drastically limiting one's life activities if such an intrusive step is necessary to prevent serious harm. If the agent does not take such steps, the agent may indeed be responsible, even if at the moment of acting he suffers from substantially compromised capacity for rationality. The situation would be analogous to the case of a person who suffered from a physical disorder that recurrently produced irrational mental states or blackouts during which the person caused harm, but who did not take sufficient steps to prevent such harm in the future. We would surely not excuse such an agent.

autonomic arousal, that causes those diagnosed with ASPD or psychopathy to lack empathy for others, this deficiency is not a sufficient ground for reduced culpability or deterrability. We would expect them to overcome this deficit and conform their conduct to the requirements of the law just as we would expect people with color vision deficits to overcome their difficulties when driving by taking appropriate precautions to prevent accidents. Those diagnosed with ASPD or psychopathy "may have problems fully appreciating the emotional meaning or consequences of their actions and using their emotions to make choices and plans," but the law considers that "they ought to know better than to commit serious crime and violence." Those with this diagnosis who commit heinous murders thus are worthy of retribution, and their conduct is sufficiently voluntary that it is subject to deterrence.

A diagnosis of paraphilia also does not produce diminution of culpability or deterrability sufficient to justify an exclusion from the death penalty under the Eighth Amendment. Certainly the most serious of these conditions is pedophilia, sexual excitement related to sexual activity with young children. When an individual with this diagnosis sexually assaults a child and then murders the victim, the crime is often viewed by juries as sufficiently heinous, atrocious, and cruel as to

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403 See, e.g., J. Reid Meloy, Antisocial Personality Disorder, in GABBARD'S TREATMENTS OF PSYCHIATRIC DISORDERS 775, 777-78 (Glen O. Gabbard ed., 4th ed. 2007), available at http://www.psychiatryonline.com/resourceTOC.aspx?resourceID=31 (postulating that "chronic cortical underarousal" may produce a diminution of anxiety and attachment in those with ASPD); Adrian Raine et al., Reduced Prefrontal Gray Matter Volume and Reduced Autonomic Activity in Antisocial Personality Disorder, 57 ARCHIVES GEN. PSYCHIATRY 119, 123-24 (2000) (finding that a subset of those with ASPD have low levels of autonomic arousal—i.e., heart rate, blood pressure, and skin conductants); see also Adrian Raine et al., Reduced Prefrontal and Increased Subcortical Brain Functioning Assessed Using Positron Emission Tomography in Predatory and Effective Murders, 16 BEHAV. SCI. & L. 319, 327-30 (1998); Snead, supra note 338, at 1294-95 (discussing neuroimaging studies showing diminished activity of the prefrontal cortex, and associating this with reduced impulsivity and aggression); Yaling Yang et al., Brain Abnormalities in Antisocial Individuals: Implications for the Law, 26 BEHAV. SCI. & L. 65, 74 (2008) (discussing brain imaging studies of a sample of patients with ASPD finding impaired prefrontal cortex, thereby reducing executive functioning and cognitive control, suggesting lowered impulse control for aggression).

404 See Morse, supra note 307, at 1602.

405 See Hart, supra note 296, at 166; Morse, supra note 307, at 1602; cf. Candeub, supra note 402, at 100-01 (applying a cost-benefit approach to determine when society expects actors to overcome defects in practical reasoning ability).

406 Hart, supra note 296, at 169.

407 See supra note 298.

408 See DSM-IV-TR, supra note 35, at 566.
deserve capital punishment.\textsuperscript{409} "[N]othing in the diagnostic criteria for pedophilia or ... the other paraphilias suggests that individuals diagnosed with these disorders suffer from any cognitive impairment that affects their ability to understand the wrongfulness of their conduct or that renders them irrational ... or unable to control their actions."\textsuperscript{410} People with these diagnoses may experience strong urges to gratify their aberrant sexual desires, but nothing in the diagnostic criteria suggests that they are unable to avoid acting on their urges.\textsuperscript{411} The actions of sex offenders are "purposeful, planned, and goal-directed" and are in no way beyond their ability to control.\textsuperscript{412} The clinical literature indicates that sex offenders are able to exercise self control, and that teach-

\textsuperscript{409} The rape of a child alone, according to some commentators, "may present an even stronger emotional case for capital punishment than the ordinary murder." Douglas A. Berman & Stephanos Bibas, Engaging Capital Emotions, 102 Nw. U. L. Rev. Colloquy 355, 361 (2008), http://www.law.northwestern.edu/lawreview/colloquy/2008/17/.

Precisely because children are innocent and defenseless, adults feel special affection and solicitude and responsibility toward them. We are to protect them, so any exploitation—especially sexual violation—outrages that trust. Denouncing and punishing that violation in the strongest possible terms repudiates the breach of trust and tries to repair it. Id. at 362. See generally Susan A. Bandes, Child Rape, Moral Outrage, and the Death Penalty, 103 Nw. U. L. Rev. Colloquy 17 (2008), http://colloquy.law.northwestern.edu/main/2008/08/child-rape-mora.html (considering the role of emotion in capital jurisprudence and discussing whether child rape should be a capital crime). It is thus no surprise that, if the child victim is killed subsequently, these strong emotions run even higher. They fan the flames of moral outrage and the human desire for retribution, thereby allowing juries to justify imposition of the ultimate punishment of death.

\textsuperscript{410} Winick, supra note 305, at 523-24; see also SCHOPP, supra note 262, at 38; Winick, supra note 377, at 127. Many pedophiles suffer from cognitive distortions. For example, they may suggest that their child victim seduced them and actually enjoyed the experience. See Gregory P. Ryan et al., Cognitive Mediational Deficits and the Role of Coping Styles in Pedophile and Ephebophile Roman Catholic Clergy, 64 J. CLINICAL PSYCHOL. 1, 13 (2008). A cognitive distortion, however, is not a cognitive impairment. The individual may misperceive the situation, but his reality testing remains intact. A psychological defense mechanism cannot be the basis for an excuse from criminal responsibility. See Stephen J. Morse, Addiction, Genetics, and Criminal Responsibility, LAW & CONTEMP. PROBS., Winter/Spring 2006, at 165, 206.

\textsuperscript{411} See DSM-IV-TR, supra note 35, at 566-77; Morse, supra note 307, at 1624 ("If the [paraphilic's] motive for satisfying the desire is purely pleasure, then there is no threat and no compulsion, no matter how strong the desire is."); Stephen J. Morse, Fear of Danger; Flight from Culpability, 4 PSYCHOL. PUB. POL'Y & L. 250, 263 (1998) ("Sexual urges, including 'abnormal' sexual urges, and strong urges of other types are not irresistible forces that render human beings automatons." Arguments to the contrary are "conceptually and empirically unsupported."); Morse, supra note 308, at 1070-71; Winick, supra note 305, at 521-22, 524 n.118.

ing them to do so is the objective of sex offender treatment. Their difficulty in controlling their sexual urges may make them appropriate candidates for civil commitment under sexually violent predator laws but does not justify their exclusion from the death penalty under the Eighth Amendment. They are worthy of retribution, and because their actions are voluntary, they are subject to the deterrent effects of capital punishment.

A similar analysis applies to those who engage in criminal conduct while voluntarily intoxicated. Alcohol consumption or substance abuse can reduce impulse control, and a high percentage of heinous murders may be committed under the influence of these intoxicants. Nonetheless, even if an offender's substance abuse results from an addiction or genetic predisposition, and even if intoxication reduced his impulse control in the context of committing a capital crime, this does not reduce his culpability or deterrability sufficiently to exempt him from capital punishment. Even though addiction to alcohol and illegal drugs can be considered an illness, the abuse of these substances is voluntary conduct. An individual who commits a crime while intoxicated is therefore responsible for whatever diminution in cognitive or volitional capacity may have contributed to the crime, and thus for the crime itself. Further, capital punishment serves the same deterrent function it does in other capital cases: it discourages a course of action—the abuse of alcohol or drugs—that is within the offender's power to control, even if his illness makes it difficult.


415 See Task Force Report, supra note 37, at 672; Morse, supra note 410, at 185, 193.

416 See Morse, supra note 410, at 165.

417 See id. at 185, 193.

418 See id. at 193–95; see also Powell v. Texas, 392 U.S. 514, 550 (White, J., concurring in the result); Candeub, supra note 402, at 91.

419 See id. at 193–95; see also Powell v. Texas, 392 U.S. 514, 550 (White, J., concurring in the result); Candeub, supra note 402, at 91.

420 See Task Force Report, supra note 37, at 672.
In the Eighth Amendment context, the key question is whether the individual’s condition produces a functional impairment of cognition or volition that significantly reduces his culpability or deterrability.421 The major mental illnesses can have these effects, but ASPD, psychopathy, and pedophilia do not, unless those diagnosed with these conditions also are given a co-occurring diagnosis of a major mental illness.422 Although the immediate effects of intoxication may impair cognition and impulse control, if the individual chose voluntarily to become intoxicated, he is generally responsible for conduct taken while under the influence of the substances he has consumed.429 In essence, he should have known better and could have refrained, and therefore he is blameworthy for his conduct and subject to deterrence.424

Expert clinical testimony may assist in understanding the offender’s illness and the degree to which it probably produced certain functional impairments that were related to the crime. Ultimately, however, the concepts of culpability and deterrability have a significant normative content, and the final determination is a legal one. These are essentially value questions, and society tends to believe that people should take precautions to overcome their deficits when it is possible and within their control, and holds them responsible when they fail to do so.425 Based on present knowledge of mental illness, unless the offender is diagnosed with one of the major mental illnesses, he rarely, if at all, should qualify for the Eighth Amendment proportionality exemption from capital punishment.426 When the offender does suffer from one of the major mental illnesses, clinical testimony should assist the trier of fact to determine whether, at the time of the offense, the effects of the offender’s illness so diminished his culpability and deterrability as to render the death penalty a disproportionate punishment.

As our understanding of the nature and causes of mental illness advances over time, new knowledge may change the way we view some of the disorders and whether we consider those who suffer from them to have diminished responsibility for their conduct.427 Moreover, social

421 See Roper, 543 U.S. at 569-75; Atkins, 536 U.S. at 317-21.
422 See Task Force Report, supra note 37, at 670-72.
423 See supra notes 415-422 and accompanying text.
424 See supra notes 415-422 and accompanying text.
425 See Morse, supra note 307, at 1602.
426 See Task Force Report, supra note 37, at 670-72.
427 See generally Sasso, supra note 263 (discussing recent neuropsychological research purporting to show a relationship between neurological abnormality and capital crime in certain offenders); Snead, supra note 338 (describing and critiquing neuroimaging studies seeking to discredit retributive theories of criminal punishment).
norms concerning the concepts of culpability and deterrability remain in flux. The question of the extent to which reduced culpability and deterrability would render capital punishment a disproportionate penalty in violation of the Eighth Amendment is an essentially normative question, and social views on this question will inevitably change as our understanding concerning the nature and causes of mental illness changes. Indeed, the Eighth Amendment, informed as it is by the "evolving standards of decency that mark the progress of a maturing society," embraces a dynamic conception of proportionality and of cruel and unusual punishment.

Clear social consensus on which mental illnesses should exempt an offender from capital punishment and in what circumstances is probably lacking at this point in time. Values are largely shaped by often sensational media portrayals of mental illness and by stereotypes and irrational prejudice against those with mental illness, which Michael Perlin has described as "sanism." These social attitudes will change over time as we increasingly come to understand many mental illnesses as medical illnesses producing effects that are outside the individual's control, rather than being due to moral depravity. What constitutes sufficiently severe mental illness to disqualify an offender from capital punishment may start as a small category, but one that expands over time as social norms in this area change. If the Supreme Court extends Atkins and Roper to serious mental illness, as argued here, then the process of determining this issue on a case-by-case basis will constitute a form of structural due process, allowing us to monitor and measure evolving social norms in this area. In addition, the determination of this issue in individual capital cases will provide a series of morality plays that themselves will shape evolving community standards on the propriety of the death penalty in this context.
B. How Should Disqualification from Capital Punishment for Mental Illness Be Determined Procedurally?

Assuming that the U.S. Supreme Court extends the Eighth Amendment ban decreed in *Atkins* and *Roper* to at least some offenders with severe mental illness, the Court must also decide how this case-by-case determination should be made. Should it be determined by the trial judge at a pretrial hearing, by a special jury convened for purposes of making such a pretrial determination, by the capital jury at the penalty phase, or by some combination of these? In every jurisdiction allowing for death penalty sentences, capital cases are bifurcated trials in which the trial on guilt or innocence is followed, for those who are convicted, by a separate penalty phase at which the same jury hears evidence concerning aggravating and mitigating circumstances and is asked to recommend life or death.

In the present context, a pretrial determination of disproportionality would remove the death penalty from consideration, and the case would proceed as a non-capital homicide case. In the alternative, the Eighth Amendment issue could be folded into the penalty phase, and the capital jury could be asked to make the determination, either at the outset of the penalty trial or as part of its weighing of aggravating and mitigating circumstances.

The Supreme Court's recent proportionality jurisprudence does not dictate a preferred procedural method. When the Court in *Atkins* declared the death penalty for those with mental retardation unconstitutional, it declined to specify procedures for determining whether a particular offender was mentally retarded, preferring to leave this procedural question to the states. In designing the process for making the mental illness death penalty determination, those procedures should be followed that would best effectuate the underlying Eighth Amendment values of accuracy and proportionality.

Portions of this subpart originally appeared in Bruce J. Winick, Determining When Severe Mental Illness Should Disqualify a Defendant from Capital Punishment, in Mental Disorder and Criminal Law: Responsibility, Punishment, and Competence, supra note 296, at 45 (addressing procedural issues in making the capital punishment mental illness exemption determination).

See Bowers et al., supra note 90, at 425–26.

See Winick, supra note 432, at 47.

See id.

See *Atkins*, 536 U.S. at 317.

See id.

See Winick, supra note 432, at 47–48.
tion, the process should take into account considerations of efficiency, cost, and therapeutic jurisprudence.\textsuperscript{439}

A pretrial determination by the trial judge best serves these values and has been the general approach adopted by the states in the wake of\textit{Atkins} for determination of the mental retardation exclusion issue.\textsuperscript{440} The Supreme Court has frequently noted that "death is different," requiring heightened procedural protections to minimize the risk of erroneous execution.\textsuperscript{441} Accuracy is critical in that regard. For several reasons, having the issue decided pretrial by the trial judge, rather than at the penalty phase by the capital jury, would increase the accuracy of the determination made.\textsuperscript{442} Capital jury selection procedures bias resulting juries in favor of capital punishment,\textsuperscript{443} and empirical research has

\textsuperscript{439} See id. Therapeutic jurisprudence is an interdisciplinary field of legal research and law reform that focuses attention on the psychological well-being of those affected by law, legal processes, and how the law is applied. See generally JUDGING IN A THERAPEUTIC KEY: THERAPEUTIC JURISPRUDENCE AND THE COURTS (Bruce J. Winick & David B. Wexler eds., 2003); LAW IN A THERAPEUTIC KEY: DEVELOPMENTS IN THERAPEUTIC JURISPRUDENCE (David B. Wexler & Bruce J. Winick eds., 1997); PRACTICING THERAPEUTIC JURISPRUDENCE: LAW AS A HELPING PROFESSION (Dennis P. Stolle, David B. Wexler & Bruce J. Winick eds., 2000); WINICK, supra note 377 (offering a therapeutic jurisprudence model for civil commitment).

\textsuperscript{440} See James W. Ellis, Mental Retardation and the Death Penalty: A Guide to State Legislative Issues, 27 MENTAL & PHYSICAL DISABILITY L. REP. 11, 15 (2003); see also Death Penalty Info. Ctr., States That Have Changed Their Statutes to Comply with the Supreme Court's Decision in\textit{Atkins} v. Virginia, http://www.deathpenaltyinfo.org/states-have-changed-their-statutes-comply-supreme-courts-decision-atkins-v-virginia (last visited Mar. 18, 2009) (showing a table of states that have changed death penalty statutes after\textit{Atkins}).


\textsuperscript{442} See infra notes 443–448 and accompanying text.

demonstrated that capital juries also are biased by having heard and determined the facts of the heinous murder. Such juries have been shown to apply a presumption in favor of death and to misunderstand or disregard their role with regard to mitigating circumstances. Juries also may misunderstand clinical evidence concerning the offender’s mental illness and its impact on his functioning at the time of the offense, may incorrectly equate mental illness with dangerousness, and may incorrectly think that the death penalty is the only way to protect the community from the defendant’s future violence. The trial judge is presumptively less subject to these biases and misconceptions, and better able to understand the clinical testimony and decide the legal issue in question. As a result, Eighth Amendment values would be furthered by having the issue determined at a pretrial judicial hearing, and frustrated by allowing the issue to be determined by the capital jury.

The Eighth Amendment value of avoiding disproportionate punishment also factors into the question of what procedures should be used to make the mental illness exclusion determination. The Supreme Court, in assessing the constitutionality of capital punishment, has frequently emphasized the importance of jury behavior in capital


See Bowers et al., supra note 90, at 427, 431-32, 440.

See id. at 437-38, 440.

See Perlin, supra note 227, at 274; Slobogin, supra note 46, ¶ 19-23; Slobogin, supra note 47, at 309, 313; see also supra note 227 and accompanying text.

See Winick, supra note 432, at 53. Trial judges are much more likely than juries to understand and correctly apply complex legal standards, to be neutral and due-process oriented, to understand expert testimony, and to be free of the biasing effects of the death-qualification process that juries alone are subjected to. See id. at 52-53.

See id. at 65-67.
sentencing as an indication of community values, and thus of what constitutes a proportionate punishment.\textsuperscript{450} Although not as significant as legislative behavior in this regard, jury behavior is, and has been treated by the Court as, important evidence of whether evolving standards of decency have rejected capital punishment as an appropriate criminal sanction.\textsuperscript{451} At first glance, this consideration may support having the jury decide the mental illness death penalty exemption question because jury behavior could provide evidence of community attitudes on the continued acceptability of capital punishment for this category of offenders.\textsuperscript{452} Because juries reflect the “conscience of the community” more than do judges, one might argue that the jury should determine whether an offender should be exempt from capital punishment.\textsuperscript{453}

Justice Breyer made a similar argument in 2002 when the Supreme Court invalidated judicial fact finding in capital cases in \textit{Ring v. Arizona}.\textsuperscript{454} Although the majority relied on the Sixth Amendment right to jury trial, Justice Breyer, in a concurring opinion, relied instead on the Eighth Amendment’s emphasis on the jury’s role as the “conscience of the community.”\textsuperscript{455} The main purpose of capital punishment is retribution, Justice Breyer asserted, and jury sentencing in such cases is essential because juries have a “comparative advantage” over judges in determining, in a particular case, whether a death sentence would serve that end.\textsuperscript{456} This advantage, according to Justice Breyer, stems from juries’ superior ability to “reflect more accurately the composition and experiences of the community as a whole,” thereby making them a better barometer of “the community’s moral sensibility.”\textsuperscript{457}

Justice Breyer’s argument, however, is vulnerable to the realities of jury behavior, which make leaving the mental illness exclusion determination to the jury less serving of Eighth Amendment values.\textsuperscript{458} First,

\begin{itemize}
  \item \textsuperscript{450} See, e.g., \textit{Enmund v. Florida}, 458 U.S. 782, 794–95 (1982); \textit{Coker}, 433 U.S. at 596–97 (plurality opinion); \textit{Woodson}, 428 U.S. at 293 (Stewart, Powell & Stevens, JJ., announcing the judgment of the Court).
  \item \textsuperscript{451} See \textit{Enmund}, 458 U.S. at 794; \textit{Coker}, 433 U.S. at 596–97; \textit{Woodson}, 428 U.S. at 293 (Stewart, Powell & Stevens, JJ., announcing the judgment of the Court).
  \item \textsuperscript{452} See \textit{Enmund}, 458 U.S. at 794; \textit{Coker}, 433 U.S. at 596–97; \textit{Woodson}, 428 U.S. at 293 (Stewart, Powell & Stevens, JJ., announcing the judgment of the Court).
  \item \textsuperscript{453} See \textit{Enmund}, 458 U.S. at 794; \textit{Coker}, 433 U.S. at 596–97; \textit{Woodson}, 428 U.S. at 293 (Stewart, Powell & Stevens, JJ., announcing the judgment of the Court).
  \item \textsuperscript{454} See 536 U.S. 584, 614–16 (2002) (Breyer, J., concurring).
  \item \textsuperscript{455} See id. at 615–16 (quoting \textit{Witherspoon v. Illinois}, 391 U.S. 510, 519 (1968)).
  \item \textsuperscript{456} See id. at 614.
  \item \textsuperscript{457} See id. at 615–16 (quoting \textit{Spaziano v. Florida}, 468 U.S. 447, 481, 486 (1984)).
  \item \textsuperscript{458} See \textit{Winick}, supra note 432, at 65–68; see also \textit{supra} notes 443–448 and accompanying text.
\end{itemize}
Justice Breyer's analysis is undermined by the biased death penalty qualification process that characterizes American jury selection practices in capital cases. These practices produce juries more willing to impose death and to favor conviction than juries as a whole. As a result, these jury selection practices result in juries that do not reflect the conscience of the whole community. Instead, they reflect "community sentiment purged of its reluctance to impose a death sentence." The systematic exclusion from capital juries of the substantial percentage of citizens who oppose the death penalty "biases jury composition, resulting in a distorted exaggeration of the community's willingness to impose the death penalty." Were the capital jury assigned the task of determining whether a defendant's mental illness at the time of the offense should exempt him from capital punishment, its determination would provide only a distorted picture of community attitudes on the appropriateness of the death penalty in this context.

In addition, empirical studies demonstrate that capital juries also are biased by having already heard and determined the heinous facts of the crime, frequently misunderstand or disregard their role in making death penalty decisions, reject or diminish the importance of mitigating circumstances, and misunderstand or ignore the jury instructions they are given. These tendencies compromise the jury's ability to accurately reflect the "conscience of the community" on capital punishment. Because judges are not subject to the distorting influences of the capital jury selection process or to these other biases or misconceptions, their decision on the mental illness death penalty exclusion question actually may more accurately reflect the moral attitudes of the community.

In any event, under the procedure envisioned here, the trial judge's role in the death penalty exemption question would be limited to pretrial motions. Should the judge deny such a motion, the capital

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459 See supra note 443 and accompanying text.
460 See supra note 443 and accompanying text.
461 See Winick, supra note 69, at 80–81.
462 Id. at 80.
463 Id. at 81.
464 See Winick, supra note 432, at 66.
465 See supra note 444 and accompanying text.
466 See Bowers et al., supra note 443, at 962–63.
467 See Bowers et al., supra note 90, at 437–38, 440.
468 See id. at 437–40; Eisenberg & Wells, supra note 444, at 10–12.
469 See Winick, supra note 432, at 66–67.
470 See id. at 67.
jury, at the penalty phase that would follow any verdict of guilt, would also have the opportunity to determine whether the defendant deserved the death penalty. In making this determination, the capital jury would thereby reflect the “conscience of the community” to the extent that it would be able to.

The Eighth Amendment values of accuracy and proportionality coalesce with considerations of efficiency, cost, and therapeutic jurisprudence to support assigning this task to the trial judge at a pretrial hearing. A pretrial judicial determination would be considerably more efficient and less costly than having the issue resolved by the capital jury at the penalty phase. Capital trials are much more expensive than non-capital trials. Thus, determining the exclusion question early on can avoid much needless trial time and associated cost. Considerations of therapeutic jurisprudence also justify resolving the issue at an early point. Because capital trials are significantly more stressful than non-capital trials, determining the issue at an early point would avoid much stress for the trial judge, the attorneys, the jury, and the defendant. Moreover, although victims’ families often seek the death penalty, rather than providing closure and enabling them to come to terms with their loss, capital trials and the long delays between capital sentencing and execution may actually prevent their wounds from healing. Should the death penalty be removed from consideration at an early time based on the defendant’s mental illness at the time of the offense, this may better allow family members to come to terms with their loss, perhaps reducing their anger at the offender and permitting them to deal more effectively with their grief and sadness.

471 See id. at 57–65.
473 See Winick, supra note 432, at 60–65; see also supra note 439.
Thus, a variety of considerations favor having the death penalty exclusion issue determined pretrial by the trial judge. The determination involves understanding complex clinical testimony and reaching conclusions that are largely legal and constitutional in nature. 475 Trial judges are accustomed to making such mixed law and fact determinations in a variety of pretrial hearing contexts. 476 They presumably would be more neutral decision makers than capital juries and less subject to either the biasing effects of capital jury selection and trial processes or the misunderstandings and irrational prejudice against those with mental illness that many jurors would have. 477 Because of the high social disutility of erroneous execution, and the economic and psychological value of avoiding inevitably lengthy capital trials and penalty trials that may be unnecessary, the issue should be resolved on pretrial motion by the trial judge. 478

CONCLUSION

The Eighth Amendment's ban on cruel and unusual punishments, as presently construed, does not prohibit the death penalty outright. 479 Although the Eighth Amendment is dynamic, and may some day be read to ban capital punishment altogether, the U.S. Supreme Court is not yet ready to conclude that contemporary standards have rejected the extreme penalty, rendering it cruel and unusual. 480 The Court has acknowledged, however, that death is different; it is "a punishment different from all other sanctions in kind rather than degree." 481 This basic conception of the uniqueness of capital punishment has animated the Court's jurisprudence in this area. For example, the Court has insisted that more in the way of due process is required to impose the death penalty.

475 See Winick, supra note 432, at 48.
476 See id.
477 See supra notes 442–448 and accompanying text.
478 See Winick, supra note 432, at 48–67.
480 The Supreme Court's Eighth Amendment jurisprudence would permit reconsideration of the constitutional question should society reject capital punishment in the future. See Gregg, 428 U.S. at 173 (Stewart, Powell & Stevens, JJ., announcing the judgment of the Court) (quoting Trop v. Dulles, 356 U.S. 86, 101 (1958)).
penalty than any other criminal sentence. In addition, this basic conception of the uniqueness of death has led the Court to invoke the Eighth Amendment to limit the ability of legislatures to impose death for certain offenses where the penalty would be disproportionate to the offense, or to require a mandatory death sentence upon conviction of certain crimes. Thus, the Court's practice since the mid-1970s has been to recognize the basic constitutionality of the death penalty, but to place procedural limits on how the death penalty determination is made and substantive limits on the offenses for which it may be imposed.

The Court's decisions in Atkins v. Virginia and in Roper v. Simmons, however, set a new course. The Court now is willing to use the Eighth Amendment to invalidate death sentences when imposed on certain classes of offenders—those with mental retardation and who were juveniles at the time of the offense. For these two categories of offenders, capital punishment would be cruel and unusual because it would constitute a disproportionate penalty in view of the diminished culpability and deterrability of such offenders. This Article has analyzed this emerging conception of proportionality under the Eighth Amendment and has argued that it can and should be extended to offenders with severe mental illness at the time of the offense. At least some (although by no means all) offenders suffering from severe mental illness, like those with mental retardation and juveniles, have sufficiently diminished culpability and deterrability at the time of the offense to render capital punishment a disproportionate penalty under the Eighth Amendment. In the context of mental illness, unlike in that of mental retardation and juvenile status, there is no legislative trend in the direction of abol-

482 See supra note 441 and accompanying text.


484 See Roberts v. Louisiana, 431 U.S. 633, 636 (1977) (per curiam) (holding it unconstitutional to require the death penalty for the intentional killing of a firefighter or peace officer engaged in performance of duties); Woodson, 428 U.S. at 304 (Stewart, Powell & Stevens, JJ., announcing the judgment of the Court) ("[T]he fundamental respect for humanity underlying the Eighth Amendment requires consideration of the character and record of the individual offender and the circumstances of the particular offense as a constitutionally indispensable part of the process of inflicting the penalty of death." (citation omitted)).


486 See Roper, 543 U.S. at 578; Atkins, 536 U.S., at 321.

487 See Roper, 543 U.S. at 568–75; Atkins, 536 U.S. at 317–21.
ishing capital punishment, and there is only the beginning of other objective indicia that contemporary social standards would reject the death penalty. Nonetheless, the Court’s Eighth Amendment jurisprudence, properly understood, would allow the Court to reach this conclusion based upon its own independent proportionality analysis, even in the absence of evidence of changed social norms. In at least some cases, severe mental illness diminishes culpability and deterrability in ways that are quite parallel to the effects of mental retardation and juvenile status. Severe mental illness, therefore, is the next frontier for the Court’s new Eighth Amendment jurisprudence.

The effects of severe mental illness may negate a defendant’s criminal responsibility altogether. In such instances, the overwhelming majority of jurisdictions recognize an insanity defense. Yet when that defense is unavailable or has been unsuccessfully asserted, mental illness may so diminish responsibility that imposition of the death penalty would be inappropriate. All of the most knowledgeable leading organizations and professional associations have recommended that legislatures exempt from capital punishment those with such severe mental illness at the time of the offense. But such a mental illness exemption also should be recognized as a constitutional matter. Imposing capital punishment on those whose mental illness significantly diminished their blameworthiness would insufficiently achieve the goals of retribution and deterrence that underlie the death penalty. In such instances, execution would be a disproportionate penalty. It would constitute an affront to human dignity. It should be banned as cruel and unusual punishment.

Unlike for mental retardation and juvenile status, however, the determination of when the death penalty would be disproportionate to the offender’s culpability and deterrability should be made on a case-by-case basis. The effects of mental illness are quite variable, and not all mental illnesses will diminish responsibility sufficiently to satisfy the Eighth Amendment standard. The major mental illnesses sometimes will have these effects, but the personality disorders, the paraphilias, and voluntary intoxication should not qualify. Determination of when an offender’s mental illness at the time of the offense should prevent capital punishment will require a factual determination based upon clinical testimony. Such a determination should be made pretrial by the trial judge, rather than by the capital jury either before trial or during the penalty phase. Capital jury selection processes would bias the capital

488 See Task Force Report, supra note 37, at 671.
489 See id.
jury's ability to determine the mental illness question fairly and impartially, as would the fact that the jury already will have found the defendant guilty of a heinous murder and may harbor prejudice against those with mental illness. Trial judges are less subject to such biases and are better able to make the essentially legal determinations. Moreover, having the trial judge decide the issue pretrial would be considerably less expensive and psychologically damaging to all participants in the capital trial process, including the family of the victim, compared to having the issue determined post-conviction by the capital jury. Having the trial judge determine the issue pretrial also would be more consonant with Eighth Amendment values. It would promote accuracy in the determination of the critical life or death question, and in view of existing capital jury selection practices, would produce decisions that more accurately reflect the conscience of the community on the death penalty question.

If severe mental illness is the next frontier of the Court's evolving Eighth Amendment jurisprudence, what frontiers will follow? As our understanding of the brain and human behavior progresses, we may come to regard other conditions or impairments as justifying a diminished responsibility excuse from capital punishment. Indeed, there may come a day when the Court reaches the conclusion that, compared to life imprisonment without the possibility of parole, capital punishment fails to produce sufficient retribution and deterrence to be justified in a manner consistent with the Eighth Amendment. The Court is likely to look to evolving social norms on the question of whether capital punishment has itself become a disproportionate penalty. Our faith in the accuracy of criminal adjudications has been shaken by DNA exonerations that increasingly have occurred, including for offenders on death row.490 New Jersey491 and New Mexico492 have recently repealed their death penalty statutes, and juries are imposing death less frequently.493 Although principles of democracy and federalism may incline the Court to leave to the states the basic question of the death penalty's ac-

490 See Adam Liptak, Consensus on Counting the Innocent: We Can't, N.Y. TIMES, Mar. 25, 2008, at A14; see also DEATH PENALTY INFO. CTR., supra note 221 (showing that there have been 130 death row exonerations in the United States since 1973).
ceptability, its emerging conception of proportionality could allow a future Court to respond to evolving values by concluding that it has become per se cruel and unusual.