Killing the Willing:
“Volunteers,” Suicide and Competency

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I

INTRODUCTION

Since Gregg v. Georgia\textsuperscript{2} ushered in the “modern era” of capital punishment,\textsuperscript{3} there have been 822 executions,\textsuperscript{4} a number that would

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surprise few who have paid attention to the ongoing national debate about the death penalty. What may surprise some, however, is that 106 of those executions, including the first, involved “volunteers,” or inmates who chose to waive their appeals and permit the death sentence to be carried out. Moreover, for every successful volunteer, there have been numerous attempts, inmates who decided at some point to waive their appeals but subsequently changed their minds.

When Robert South, my client, decided to waive his appeals, I could understand why he might make that choice. Robert had a brain tumor which could not be surgically removed. It was not fatal, but the tumor disrupted

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4 Death Penalty Execution Database, Execution Database at http://www.deathpenaltyinfo.org/executions.php. (last visited March 4, 2004) (This figure includes all executions which took place through the end of 2003).
5 Gary Gilmore was executed on January 17, 1977, just five months months after the crime, and two months after the death sentence was imposed. Gilmore v. Utah, 429 U.S. 1012, 1019 (1977) (Marshall, J., dissenting). Gilmore waived all appeals and opposed the efforts of others, including his mother, to intervene on his behalf. Id.
6 “Volunteer” is the term generally used for a death row inmate who waives his or her appeals in the academic literature as well as in the capital defense community. See, e.g., Richard G. Strafer, Volunteering for Execution: Competency, Voluntariness and the Propriety of Third Party Intervention, 74 J. CRIM. L. & CRIMINOLOGY 860 (1983).
7 Interestingly, there have been almost the same number of death row inmates who have been exonerated. Nationwide, since 1973, 113 people have been released from death row due to evidence of innocence. Alan Gell, Innocence and the Death Penalty at http://www.deathpenaltyinfo.org/article.php?did=412&scid=6 (last visited March 04, 2004).
8 Christy Chandler, Voluntary Executions, 50 STAN. L. REV. 1897, 1903 (1998) (stating that many death row inmates express a desire to die, but most change their minds); Richard W. Garnett, Sectarian Reflections on Lawyers’ Ethics and Death Row Volunteers, 77 NOTRE DAME L. REV. 795, 801 (2002) (Most capital defendants “at one point or another, express a preference for execution over life in prison. Most of them, though, change their minds.”).
his sleep/wake cycle and had other negative physical consequences for his daily existence. He also had chronic and severe PTSD, due to a profound history of childhood physical and sexual abuse. Robert suffered from daily recurrent flashbacks of the abuse. He had been on death row for almost a decade, and his children were grown. In his own words, he was “tired,” and he no longer wanted to go on. Even though he almost certainly would have obtained a new sentencing trial, and a life sentence seemed clearly obtainable, I did not view his choice as irrational. But, it was suicidal. As a consequence, my feelings about his waiver were mixed; perhaps respect for him as a person should have led me to defer to, rather than resist, his choice. Rightly or wrongly, I did resist his choice by arguing that he was not competent to waive his appeals. But he was deemed competent, and, truth be told, correctly so. Despite my legal opposition to his choice, Robert asked me to be his “witness” at his execution, and I held his hand while the State took his life by means of lethal injection.

Robert’s case, and those of every other death row volunteer inevitably raise the following question: how should a death sentenced inmate who wishes to waive his appeals be viewed? As a client making a legal decision to accept the outcome of a prior proceeding, or as a person seeking the aid of the state in committing suicide?

Both characterizations are in some respects accurate. Were it not for the fact that the client’s choice, if unfettered, will result in his death, it would be clear that this is the kind of ultimate (as opposed to strategic) decision that a client is entitled to make for himself, regardless of the opinion of his lawyer. Viewed from the client-choice vantage point, the only question is whether the client is competent to make that choice. On the other hand, were it not for the fact that the inmate has been sentenced to death, it would be illegal in virtually every jurisdiction or anyone to assist

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9 A.B.A. CRIMINAL JUSTICE STANDARDS § 4-5.2 cmt. (noting that the client has the right to make “fundamental decisions” that are “crucial to the accused’s fate”).
the inmate in actively hastening his own death. From the assisted-suicide perspective, no death-sentenced inmate should be permitted to abandon his or her appeal. Whether (or how) these two models can be reconciled remains unclear.

Further reflection about Robert South’s case has led me to conclude that my own ambivalence, and its underlying reliance on rational choice, was and should be, irrelevant. The question is not the rationality of a volunteer’s choice - or its wisdom or morality. Instead, the question is whether laws relating to suicide apply, and those laws do not depend on the rationality of the desire to terminate one’s life. Even persons in extreme pain, persons with no hope of improvement, persons certain to lose their mental abilities, or persons imposing enormous financial or psychological costs on family members can be prevented from committing suicide, and others are prohibited from assisting suicide under those circumstances – in every state but Oregon. Moreover, even in Oregon, only when the suicidal person is terminally ill is he protected from intervention by the state; and only then are prohibitions against third party assistance relaxed. Unless and until legal norms governing suicide and assisted suicide change, if a court finds the volunteer is motivated by the desire to terminate his life, the rationality of his decision to do so should not be considered.

Although the volunteer phenomena has been the subject of a number of fractured judicial decisions, hotly debated among lawyers who represent death row inmates and in the legal literature, the discussion has been

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10 Washington v. Glucksberg, 521 U.S. 702, 117 S.Ct. 2258 (1997) (recognizing the near universal ban on assisted suicide, and holding that there is no constitutional right to physician-assisted suicide).
11 See, e.g., Gilmore, supra n. 4.
largely polemic, with little recognition (or at least acknowledgment) on either side that the volunteer phenomenon is not fully captured by either model. Those who either oppose, or wish to curtail, a death row inmate’s ability to waive his appeals refer to volunteer cases as nothing more than “state assisted suicide;” on the other hand, advocates of permitting inmates to choose execution reject the suicide label, instead focusing on respect for a death row inmate’s right to choose whether to accept his punishment.

This article does not attempt to re-plow the either-or debate, but does begin by summarizing these contrasting perspectives in Part II. Part III lays out the legal standards governing volunteers, and then, because those standards adopt the client choice/acceptance of-a-just-punishment model, briefly contrasts those standards with the standards governing assisted suicide. Part IV is the heart of the article: It asks how, and how often, volunteers are in fact similar to suicidal persons. Given the plausibility and prominence of the dissenting rhetoric of “assisted suicide” in cases involving volunteers, this article offers some empirical comparisons between the characteristics of death row inmates who have waived their appeals and been executed with those of people who commit suicide in the “free world.” Several similarities are quite striking. The overwhelming majority of both those who commit suicide and those who volunteer for execution are white males. Furthermore, most individuals who commit suicide have a mental illness or a substance abuse disorder; the same is true of death row volunteers.

In drawing these comparisons, this article considers primarily statistical data about death row. However, to a lesser degree it takes into account the results of a questionnaire sent to attorneys who have represented volunteers. As will be discussed in more detail in Part IV, there are limitations to both of these data sources. Nonetheless, demographic and epidemiological similarities between death row volunteers and free world

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13 See, e.g., Chandler, supra note 7; Garnett, supra note 7.
suicides strongly suggest that the present competency standard is wrong in its wholesale rejection of the suicide model, and should be altered to reflect the prevalence of suicidal motivation.

At this point, the existing data fall short of establishing that a death-sentenced inmate’s decision to forego further appeals is always the psychological equivalent of suicide. For this reason, even in jurisdictions that uniformly forbid assisted suicide, a complete prohibition against such waivers, and thus voluntary executions, is inappropriate. Part V proposes a standard for assessing waiver which takes into account the prevalence of suicidal motivation among volunteers, attempting to insure that a death row inmate is not permitted to use the death penalty as a means of committing state assisted suicide, but also protecting the right of a mentally healthy inmate to forego further appeals when motivated by acceptance of the justness of his punishment. Part V concludes by applying the standard to several hypothetical situations drawn from cases of actual volunteers.

II

FRAMING THE THEORETICAL DEBATE

When Gary Gilmore volunteered to be executed, he leapt to the head of the post-\textit{Gregg} execution line. Sentenced to death in Utah, Gilmore waived all appellate review of his death sentence, and as a result, his execution by firing squad was set to take place less than five months after the crime.\(^{14}\) By the time Gilmore’s case reached the Supreme Court, his motivation was transparently suicidal; he had attempted to kill himself six days after he personally told the Utah Supreme Court that he wished to withdraw an appeal previously filed without his consent.\(^{15}\) At that point, his mother attempted to file an appeal in the United States Supreme Court as his next

\(^{14}\) \textit{Gilmore}, 429 U.S. at 1019.

\(^{15}\) Id. at 1015 nn.4 & 5.
friend. The application for a stay, presented to Justice Marshall and referred by him to the Court, was denied, and Gilmore was executed.16

The majority rebuffed Gilmore’s mother’s attempts (as well as those of the Latter Day Saints Freedom Foundation) in a short per curiam opinion that simply stated, “[t]he Court is convinced that Gary Mark Gilmore made a knowing and intelligent waiver of any and all federal rights he might have asserted after the Utah trial court’s sentence was imposed. . . .”17 Chief Justice Burger, joined by Justice Powell, expanded slightly upon this declaration, reasoning that Gilmore’s explicit repudiation of his mother’s petition, in the absence of a demonstration of Gilmore’s incompetence, robbed her of standing to seek relief on his behalf.18

Justice Marshall dissented. In his view, “the Eighth Amendment not only protects the right of individuals not to be victims of cruel and unusual punishment, but . . . also expresses a fundamental interest of society in ensuring that state authority is not used to administer barbaric punishments.”19 He reasoned that without appellate review “an unacceptably high percentage of criminal defendants would be wrongfully executed – ‘wrongfully’ because they were innocent of the crime, undeserving of the severest punishment relative to similarly situated offenders, or denied essential procedural protections by the State.”20

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16 Not only the first, but also the youngest person executed in the modern era was a volunteer. Scott Carpenter was only twenty-two years old when his death sentence was carried out. Despite a documented history of significant head trauma and a seizure disorder which effected his behavior at the time of the offense, Carpenter was deemed competent to waive his appeals and was executed on May 8, 1997. Matthew T. Norman, Standards and Procedures for Determining whether a Defendant is Competent to Make the Ultimate Choice - Death; Ohio’s New Precedent for Death Row “Volunteers,” 13 J. L. & HEALTH 103, 114 (1998-99).
17 Gilmore, 429 U.S. at 1013.
18 Id. at 1013 (Burger, C.J., concurring).
19 Id. at 1019 (Marshall, J., dissenting).
Justice White’s dissent similarly reasoned that “the consent of a convicted defendant in a criminal case does not privilege a State to impose a punishment otherwise forbidden by the Eighth Amendment.”

The debate over the propriety of permitting death row inmates to voluntarily submit to execution has raged ever since. Justice Marshall reiterated his view in *Lehnard v Wolff* that “Society’s independent stake in enforcement of the Eighth Amendment’s prohibition against cruel and unusual punishment cannot be overridden by a defendant’s purported waiver.” He went on to object that “the Court has permitted the State’s mechanism of execution to be triggered by an entirely arbitrary factor: the defendant’s decision to acquiesce in his own death.” In Marshall’s view, “the procedure [approved by the Court] amounts to nothing less than state-administered suicide.”

Those who oppose a death row inmate’s right to waive his appeals and submit to execution generally echo Marshall’s two objections. First they characterize state efforts to honor the condemned’s death wish as “state assisted suicide,” often pointing out that state sanction of, and participation in, such suicidal behavior could even encourage imitation by other individuals who also wish to end their lives. Second, they argue that

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21 *Gilmore*, 429 U.S. at 1018 (White, J., dissenting).
23 *Id.* at 811.
24 *Id.* at 815.
25 *Id.; see also Hammett v Texas*, 448 U.S. 725, 732 (1990) (Marshall J., dissenting) (“The defendant has no right to ‘state-administered suicide’”); *Whitmore*, 495 U.S. at 172-73 (Marshall, J., dissenting) (“Because a wrongful execution is an affront to society as a whole, a person may not consent to being executed without appellate review.” A particular punishment – especially the death penalty – should be imposed “only where necessary to serve the ends of justice, not the ends of a particular individual.”).
26 Kathleen Johnson, Note, *The Death Row Right to Die: Suicide or Intimate Decision*, 54 S. CAL. L. REV. 575, 592 (1981). There are also those that argue that allowing capital defendants to waive their appeals and be executed will encourage other suicidal persons to
regardless of the defendant’s wishes, the state has a vital and fundamental interest in insuring that capital punishment, society’s most severe penalty, not be imposed or carried out except in the most extreme cases, noting that...
a person convicted of a crime has no right to choose his own sentence. 28 Opponents of permitting waiver have introduced a third theme: under the unique circumstances of death row – the conditions of confinement 29 and
dean sentence “transcends the desires of a particular inmate to commit state-assisted suicide”); Smith v. State, 686 N.E.2d 1264, 1275 (Ind. 1997) (although the court pointed out that society has an interest in executing only defendants who meet the statutory requirements and in not allowing the death penalty statute to be used as a means of state-assisted suicide, it determined that Smith’s negotiated plea agreement to death penalty was permissible); State v Dodd, 838 P.2d 86, 101 (Wash. 1992) (Utter, J., dissenting) (“[T]o give paramount weight to Mr. Dodd’s desires would, in effect, mean that the State is participating in Mr. Dodd’s suicide”).

28 People v. Kinkead, 168 Ill.2d 394, 416 (1995) (“Defendant’s request for the death penalty might be viewed as a plea for State-assisted suicide, and we do not believe the Illinois trial courts and juries should be put in the position of granting such requests as a matter of a defendant’s stated preference.”) Thus, the court remanded for a competency hearing in a case where the defendant had a history of suicide attempts, self-mutilation, psychiatric treatment, and was on anti-psychotic medication around the time of entering the guilty plea); Commonwealth v. McKenna, 383 A.2d 174, 181 (Pa. 1978) (court refused to allow execution of capital defendant sentenced under invalid death penalty statute, noting that the defendant’s right to waive certain rights “was never intended as a means for allowing a criminal defendant to choose his own sentence. Especially is this so where, as here, to do so would result in state aided suicide.”).

29 Conditions of confinement are frequently referred to as contributing to volunteerism. Dieter, supra note 26, at 800; Harrington, supra note 11, at 850. One experienced capital litigator noted that living conditions on death are so dismal that they “‘could cause the most stable person not to cope.’” Melvin I. Urofsky, 75 J. CRIM. L. & CRIMINOLOGY 553, 573 (1984) (quoting defense attorney Millard Farmer). There is some force to this contention. Most death row prisoners are housed under conditions designed for inmates who are disciplinary problems, and not intended to be used for long term incarceration. For example, most death row inmates are typically confined to their cells for 23 hours a day in very small cells. Sanitation and eating conditions can be very poor. Dieter, supra note 26, at 802. Death sentenced inmates are, with few exceptions, ineligible for prison jobs or correctional programs or even the usual forms of prison recreation, such as sports and movies. White, supra note 25, at 871; see also Dying Twice: Conditions on New York’s Death Row, (2001 report of the Association of the Bar of they City of New York), at http://www.abeny.org/currentarticle/dying%20_twice2.html (Last visited March 5, 2004). Generally death row inmates are not permitted “contact” visits with their family members, or if they are, the visits must occur under the close observation of numerous correctional officers. Renee Cordes, Confronting Death: More Inmates Give Up Appeals in Capital Cases, TRIAL, January 1994; Urofsky, 75 JOURNAL OF CRIM. LAW &
the pressure of living under a sentence of death 30 – a prisoner awaiting execution can never make an “unconstrained choice to be executed.”31 This argument, unlike the first two, implicitly accepts the client-choice model of volunteers, but then argues that by the models’ own terms, the choice is coerced, and therefore should not be dispositive.

30 According to one psychiatrist who studied death row conditions, “What all share equally, however, is the relentless regime of lockdown, loneliness, isolation, and hopelessness, while one awaits death, exacting a terrible psychic, spiritual, psychological, and familial toll. A flight to death, then, is often a flight from the soul-killing conditions of death row.” Robert Johnson, Condemned to Die: Life Under Sentence of Death 105 (Waveland Press) (1989). Albert Camus made a similar observation in his famous essay Reflections on the Guillotine, in Resistance, Rebellion, and Death, (Vintage Books) (1990 O’Brien translation), at 199: “For there to be equivalence, the death penalty would have to punish a criminal who had warned his victim of the date at which he would inflict a horrible death on him and who, from that moment onward, had confined him at his mercy for months. Such a monster is not encountered in private life.” See also Knight v. Florida, 528 U.S. 990 (1999) (Breyer, J. dissenting from the denial of certiorari) (“It is difficult to deny the suffering inherent in a prolonged waiting for execution – a matter which courts and individual judges have long recognized”); Furman v. Georgia, 408 U.S. 238, 288 (1972) (Brennan, J.) (discussing the “the inevitable long wait” that exacts a “frightful toll”).

31 Harrington, supra note 11, at 851; White, supra note 26, at 865 (noting that many capital defense attorneys believe that capital defendants are not able to make a rational judgment about whether they want to be executed).
Most arguments supporting a death row inmate’s right to waive his appeals, thereby hastening his death, focus on the condemned prisoner’s right of self-determination, and his freedom to choose whether to prolong his life. Often proponents of this form of self-determination argue that giving the condemned the right to choose enhances the dignity of their lives. One federal judge, for example, has said that it is completely rational for a death sentenced inmate to “forgo the protracted trauma of numerous death row appeals,” and that not honoring such a decision “denies the defendant’s humanity.” The purported parallel to suicide is

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32 As discussed more fully in Part IIIB, virtually no other citizens have the right to actively hasten their own death. See, e.g., Washington v. Glucksberg, 521 U.S. 702 (1997) (holding that there is no constitutional right to physician assisted suicide); see also Sampson v. Alaska, 31 P.3d 88 (Ak. 2001) (no state constitutional right to physician assisted suicide); Cass R. Sunstein, Essay, The Right to Die, 106 YALE L. J. 1123 (1997) (arguing that the Supreme Court should not invalidate laws forbidding physician assisted suicide). Although Oregon does allow assisted suicide under certain circumstances, those circumstances are extremely narrow, and would not encompass the volunteers under discussion here. Id.

33 Johnson, supra note 25, at 616; see also Richard J. Bonnie, The Dignity of the Condemned, 74 VA. L. REV. 1363, 1376 (1988) (a “prisoner has a right to control his own fate within the constraints established by the law”). One victim’s rights’ advocate, Dianne Clements, of Houston’s “Justice for All,” put it this way. “[T]here is no such thing [as a consensual execution] it a phrase coined by those who oppose the death penalty. It’s just not true. Why can’t death penalty opponents call it what it is: a person’s decision to end the appellate process.” Give Me Death — Rise of Volunteer Executions May Mean Death Isn’t Worst Punishment, USA TODAY Jan. 6, 2003.

34 Johnson, supra note 25, at 594. See also Milner, Dignity or Death Row: Are Death Row Rights to Die Diminished? A Comparison of the Right to Die for the Terminally Ill and the Terminally Sentenced, 24 NEW ENG. J. ON CRIM & CIV. CONFINEMENT 279, 283 (1998) (“the right to die with dignity should exist for competent terminally sentenced individuals”); Chandler, supra note 7, at 1926 (“the right to die with dignity on one’s own terms cannot be underestimated and must trump an attorney’s moral convictions”); Urofsky, supra note 28, at 582 (“the final decision on whether to pursue or terminate appeals should be left to one person - that person whose life is at stake”). Some volunteers have expressed similar sentiments. Frank Coppola, who was executed in Virginia in 1982 after being permitted to waive his appeals, said he wanted to die to “preserve his dignity and spare his family further agony.” Dieter, supra note 26, at 803.

distinguished first on the basis that society – through a jury or judge – has found the death penalty to be the appropriate punishment for the defendant’s crime, and second, on the basis that the desire to avoid “agonizing limbo in confinement” is not commensurate with a “specific intent to die.” In response to the objection that volunteers thwart the state’s interest in assuring that death sentences are carried out only in appropriate cases, some commentators have argued that a competent defendant’s right to refuse make his own legal decisions trumps that state interest, given that the state has already determined through trial proceedings that the sentence is appropriate.

Perhaps not surprisingly, those who argue that death-sentenced inmates should not be permitted to waive their appeals are overwhelmingly opposed to the death penalty, while those arguing for a generous waiver standard are, on the other hand, almost always supporters of the death penalty. “Death penalty abolitionists oppose [volunteering] because their goal is to prevent executions, even those seemingly chosen by inmates. Proponents of capital punishment support volunteering because they favor executions, [and] consensual ones simply expedite the process.” There is irony in both positions. Many who decry volunteer executions as “state-assisted suicide” would, truth be told, support a client’s decision to take his own life in a conventional way. Indeed, more than few would support physician-assisted suicide for the rest of the population. On the other hand, most who

36 Johnson, supra note 25, at 628.
37 Id. at 617.
38 Id. at 621.
39 At least one exception to this general rule would be Professor Michael Mello. Michael Mello, The United States of America versus Theodore John Kaczinski at 191-93 (Harper-Collins 1999).
40 This view is expressed by one capital defense lawyer as follows, “The state’s goal of killing someone is immoral.” White, supra note 26, at 859. Thus the defendant’s desire to die is not important because the primary objective is “to prevent the state from realizing its immoral goal.” Id.
41 Harrington, supra note 11, at 850.
support a death row inmate’s right waive their appeals are, in fact, not only staunch supporters of capital punishment for the non-willing as well as the willing (having little concern for the “dignity” of the non-willing) but would adamantly oppose a death sentenced inmate’s attempt at taking his own life, or for that matter, any person’s attempt to take his or her own life.\textsuperscript{42} Thus, at the end of the day, one suspects that the attractiveness of the state-assisted suicide model, as opposed to the acceptance-of-responsibility model, depends more on one’s attitudes toward the state’s power to kill than free-standing beliefs about which model more accurately captures the volunteer phenomenon.\textsuperscript{43} Posed as mutually exclusive alternatives, it is not surprising that the Supreme Court has adopted the acceptance-of-responsibility model.

\textsuperscript{42} A somewhat different aspect of this same general phenomena is the lengths prisons will go to in order to insure that a death sentenced inmate does not “cheat” the executioner by taking his own life. For example, once an execution date is issued, most states move the inmate to a special cell and place him under twenty-four hour surveillance. A guard may even be posted outside the cell to prevent the inmate from committing suicide. ROBERT J. LIFTON & GREG MITCHELL, WHO OWNS DEATH? CAPITAL PUNISHMENT, THE AMERICAN CONSCIENCE AND THE END OF EXECUTIONS (2000), p. 82. If a death row inmate does attempt suicide, even if his execution is imminent, the state will inevitably make every effort to save the inmate’s life and restore their health in order that the person can be executed. \textit{Id.} at 98. For example, one of my former clients--David Martin Long--hoarded his anti-psychotic medication and attempted to overdose the day before his scheduled execution. Texas prison officials provided emergency medical treatment, transported Mr. Long to a Department of Corrections’ medical center, pumped his stomach, revived him from a coma and then flew him back to Huntsville the next evening for his execution to be carried out.

\textsuperscript{43} Compare Gross, Update: American Public Opinion on the Death Penalty - It’s Getting Personal, 83 CORNELL L. REV. 1448, 1472 (1998). Professor Gross argues that attitudes about the death penalty “are about killing.” \textit{Id.} A majority of Americans favor capital punishment because they believe in a “life for a life;” those who oppose capital punishment believe that killing by the state is wrong. Both, he maintains, are “absolutist moral positions and unlikely to yield to information or argument.” \textit{Id.}
III

TWO COMPETING LEGAL STANDARDS: COMPETENCY AND ASSISTED SUICIDE

A. Competency

The Supreme Court has now clearly held that the only showing that a death row inmate must make in order to forego his appeals is that he is competent, though the evolution of this standard was surprisingly long. The Court first faced this issue not in Gilmore, but ten years prior to Gregg in Rees v. Payton. Rees, a Virginia death row inmate, directed his attorney to withdraw a petition for certiorari filed on his behalf, but counsel refused to do so, ostensibly due to doubts about his client’s competency. After reports from several mental health professionals were filed, the Supreme Court remanded the case to the district court for a hearing to determine whether Rees should be permitted to waive his appeals and let the death sentence be carried out, directing the district court to determine Rees’ “mental competence,” or whether “he has [the] capacity to appreciate his position and make a rational choice with respect to continuing or abandoning further litigation or on the other hand whether he is suffering from a mental disease, disorder, or defect which may substantially affect his capacity in the premises.”

Even a quick parsing of Rees foreshadows difficulties in application, largely because the two alternatives posed by Rees are not mutually

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44 Norman, supra note 15, at 122 (referencing the “confusing and conflicting line of cases concerning the standard to determine a defendant’s competency to waive death penalty appeals”).
46 Id. at 313. Since the Supreme Court is not a fact-finding court, the remand was necessary “in aid of the proper exercise of [the Supreme Court’s] certiorari jurisdiction.”
47 Id. at 314.
exclusive. A defendant could both have the capacity to “make a rational choice” and also be suffering from a mental illness which “substantially affect[s]” his capacity to make a decision. As the Eighth Circuit has noted, there is an “overlap” in these two categories.48 This logical difficulty may explain the Court’s odd reticence in Gilmore, where neither the majority nor the dissents even make reference to Rees. Instead, the majority says only that the Court was “convinced that Gary Mark Gilmore made a knowing and intelligent waiver of any and all federal rights he might have asserted after the Utah trial court’s sentence was imposed, and specifically, that the State’s determination of his competence knowingly and intelligently to waive any and all such rights were firmly grounded.”49

The Court further muddied the waters in Whitmore v. Arkansas,50 by both referring to Gilmore and its waiver standard of whether “the defendant has given a knowing, intelligent, and voluntary waiver of his right to proceed. . . .”, 51 and also citing Rees in the course of stating that “there was no meaningful evidence that [the defendant] was suffering from a mental disease, disorder, or defect that substantially affected his capacity to make an intelligent decision.”52 Eventually, however, in Demosthenes v. Baal,53 the Court embraced only that aspect of Whitmore which focused on whether

48 See Smith v. Armontout, 812 F.2d 1050, 1056 (8th Cir. 1987) (noting an “overlap” in the categories of cases established in Rees).
49 Gilmore, supra n. 4, 429 U.S. at 1013.
50 495 U.S. 149 (1990.)
51 Id. at 165. The proper interpretation of Whitmore was further complicated by its unusual procedural posture. The actual question before the Court involved the circumstances under which a third party could intervene to challenge a death sentenced’s inmates death sentence. The Court held that “next friend” standing could not be obtained “where an evidentiary hearing has established that the defendant has given a knowing, intelligent, and voluntary waiver of his right to proceed.” Id. Whether that standard is only applicable to next friend intervention, or whether it also governs the withdrawal of an appeal is not clear.
52 Id. at 166.
the defendant was competent to give a "‘knowing, intelligent, and voluntary waiver of his right to proceed.’"54

Finally, in Godinez v. Moran55 the Court attempted to rationalize its wandering precedents. According to the Court, the phrase “rational choice” in Rees was equivalent to “rational understanding”56 as used in Dusky v. United States.57 Dusky, which addressed the question of when a defendant is competent to stand trial, established a two-pronged test for competency. According to Dusky, a defendant is competent to stand trial if: 1) he has a rational and factual understanding of the charges; and, 2) he has the ability to assist counsel.58 Because the ability to assist counsel is not at issue in waiver of appeals, there is only one prong to competency: a defendant is competent to waive his appeals and permit the state to carry out the death sentence if he has a rational and factual understanding of the consequences of his decision. If he does, then he can waive his appeals – assuming of course that the waiver is knowing, intelligent and voluntary. Thus it was not until almost fifteen years after Gregg was decided that the standard for assessing waiver of a death row inmate’s appeals became relatively speaking, settled.

The concept of competency is, therefore, “squarely in the center of the debate,”59 not to mention the center of the litigation, in cases where death-sentenced defendants have attempted to drop their appeals.60 This, however, is not quite the end of the story. The relevance of mental illness tends to creep into both litigation and commentary. Lower courts have not always found the Godinez standard to provide adequate guidance, and have

54 Id. at 734 (quoting Whitmore).
56 Id. at 398, n. 9.
58 Id. at 402.
59 Harrington, supra note 25, at 855.
60 See, e.g., Dodd, supra, 838 P.2d at 101.
employed other decision paths that begin with the question of whether the defendant is mentally ill. Some commentators have maintained that the desire to forego appeals is per se evidence of incompetency, based on the view that a rational (or at least a mentally normal) person, if given a choice, would always prefer life over death. Some state courts, moreover, have expressed dissatisfaction with the competency standard in a different way, holding that a competent defendant can waive discretionary review, but may not waive any appeal as of right.

For example, some federal courts have adopted the following three-part analysis:

1. Is the person suffering from a mental disease or defect?
2. If the person is suffering from a mental disease or defect, does that disease or defect prevent him from understanding his legal position and the options available to him?
3. If the person is suffering from mental disease or defect which does not prevent him from understanding his legal position and the options available to him, does that disease or defect, nevertheless, prevent him from making a rational choice about his options?

If the answer is to the first question is no, the court need not go further, the person is competent. If both the first and second questions are answered in the affirmative, the person is incompetent and the third question need not be addressed. If the first questions is answered yes and the second is answered no, the third question is determinative; if yes, the person is incompetent, if no, the person is competent. See Rumbaugh v. Procunier, 753 F.2d 395, 398-99 (5th Cir. 1985) (footnote omitted); accord Ford v. Haley, 195 F.3d 603, 615 (11th Cir. 1999).


Johnson, supra note 25, at 599. Lester Maddox, a former Governor of Georgia, concluded that William Clark, a death row inmate who expressed a desire to die “must be nuts,” because “[e]ven animals want to live, I don’t believe any person who has any sense at all would want to die.” Urofsky, supra note 28, at 567.

64 See, e.g. Dodd, supra, 838 P.2d at 100 (“We hold that a defendant may waive general review, but may not waive review of his sentence, under RCW 10.95.100.”); Judy v. State, 416 N.E.2d 95, 101 (Ind. 1981) (same); McKenna, 383 A.2d at 180 (same). Most post-Gregg capital sentencing statutes have some statutorily required review of the death sentence in connection with the “direct appeal,” i.e., the first appeal, generally to the state’s highest court, following the conviction and imposition of sentence. S.C. Code §16-3-25(C) is fairly typical of these mandatory review provisions, and requires the court to determine whether: (1) “the sentence of death was imposed under the influence of
These persisting counter-currents, like the initial debate, pose the question of whether the competency standard is rich enough to adequately address the volunteer phenomenon. Most troubling are the cases that present active indications of suicide. Thus, for example, in United States v. Hammer, Judge Nygard, dissenting from the denial of rehearing, concluded that if courts allow capital defendants to waive their right to appeal, the courts must develop a standard that will better assure that the request for a waiver is “sound, certain, and appropriate.” According to Judge Nygaard, the defendant, whose waiver the majority approved, killed his cell mate for the purpose of obtaining a death sentence, and “plainly enlists the Court in his suicide.” In his opinion, the similarity between the defendant’s position and the pleas of the terminally ill for assisted suicide was inescapable.

B. The Law of Assisted Suicide

The law of assisted suicide is relatively easy to summarize. Under English common law, and the law of the early American colonies, suicide

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65 239 F.3d 302 (3rd Cir. 2001)
66 Id. at 304.
67 Id.
68 Id. at 306.
itself was a felony that resulted in the forfeiture of one’s property to the crown.\(^6\) Although no state now punishes suicide or attempted suicide, “[i]n almost every State—indeed in almost every western democracy—it is a crime to assist a suicide.”\(^7\) Some states forbid assisted suicide by treating it as a species of homicide through accomplice liability principles,\(^7\) or, more commonly, as the Model Penal Code provides, assisted suicide is statutorily defined as a lesser crime.\(^7\)

In recent years the increasing number of Americans who die protracted deaths in institutions has caused a reexamination of the assisted suicide ban, albeit only with respect to physician-assisted suicide. Overwhelmingly, this reexamination has led to reaffirmation of previous bans, even with respect to physician assisted suicide.\(^7\) Indeed, only Oregon has legalized

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\(^6\) Glucksberg, 521 U.S. at 711. This is not to say that there is not a great divide in the academy, as well as in public, opinion on the issue of assisted suicide. More nuanced discussions of this ambivalence about suicide, and other aspects of the ongoing death and dying debate, can be found in ROBERT BURT, DEATH IS THAT MAN TAKING NAMES (2002), and RONALD DWORFIN, LIFE’S DOMINION (1994).

\(^7\) Id. at 710.

\(^7\) See People v. Kevorkian, 527 N.W.2d 714 (Mich. 1994) (common law definition of murder included intentionally providing the means by which a person commits suicide overruled; only when death was the direct and natural cause of defendant’s act is he liable for murder).

\(^7\) MODEL PENAL CODE § 210.5 (providing that causing another to commit suicide is criminal homicide only if the actor purposely uses force, deception or duress to cause the suicide, but is otherwise the lesser crime of aiding or soliciting suicide).

\(^7\) Glucksberg, 521 U.S. at 716. Ballot initiatives in Washington and California both lost in the early 1990s, and in the last decade, bills to legalize physician-assisted suicide have been introduced in more than twenty states, all of which have either languished or been defeated. Timothy Egan, Assisted Suicide Comes Full Circle, to Oregon, N.Y.TIMES, Oct. 26, 1997 § 1 at 2; Ezekiel J. Emanuel & Linda L. Emanuel, Assisted Suicide? Not in My State, N.Y. TIMES, July 24, 1997, at A15.
any form of physician-assisted suicide, and Oregon has limited physician-assisted suicide to competent and terminally ill adults.74

Moreover, the Supreme Court has recently reviewed the constitutionality of criminal prohibitions of assisted suicide, and in Washington v. Glucksberg, squarely held that “the asserted ‘right’ to assistance in committing suicide is not a fundamental liberty interest protected by the Due Process Clause.”75 Justices O’Connor, Ginsberg, and Breyer wrote concurring opinions, and commentators have interpreted those opinions in various ways. For example, Professor Sunstein believes that Justice O’Connor “ signaled the possible existence of a right to physician-assisted suicide in compelling circumstances,”76 while Professor Yale Kamisar reads her opinion to be limited to the “more narrow and more focused [question of ] the liberty interest in obtaining needed pain relief or [whether] a state [may erect] legal barriers preventing access to such relief.”77 No matter; for our purposes, all of the justices, and even the litigants for the plaintiffs, were in agreement that the only right that might be recognized was a right for the terminally ill. 78 With rare exceptions, volunteers are not terminally ill, so neither the Oregon initiative nor any plausible claim of an evolving federal constitutional right would

74 Four years after the Oregon initiative passed, only eight persons had died after taking lethal medications and two more were awaiting the filling of their prescriptions; nine were terminally ill with cancer and the tenth was dying of degenerative heart disease. Sam Howe Verhovek, Legal Suicide Has Killed 8, Oregon Says, N. Y. TIMES Aug. 19, 1998 at A6.
75 Glucksberg, 521 U.S. at 728.
78 Id. at 912 (“From the outset of the litigation, the lawyers for the plaintiffs in the Washington and New York cases insisted that the right or liberty interest they claimed was limited to the terminally ill...”).
79 Some have argued that proponents of physician-assisted suicide should turn to state constitutional claims. See Charles H. Baron, Pleading for Physician-Assisted Suicide in
encompass a death-sentenced inmate’s decision to withdraw his appeals, if such a decision were considered assisted suicide.\footnote{Some readers may ask whether\textit{ Cruzan v. Director, Missouri Dept. of Health}, 498 U.S. 261 (1990) provides a better analogy.\textit{Cruzan} suggests (but does not hold) that competent patients have an absolute right to refuse life sustaining treatment, even when the absence of that treatment will result in their death. Thus, in the volunteer context, a potentially meritorious appeal might be thought of as being similar to refusing medical treatment. If the appeal is successful, it may “cure” the defendant by relieving him of the death sentence. If the appeal is forgone, the result will be similar to refusing life sustaining medical procedures: death. However, in my view the right to refuse medical life saving medical treatment, assuming there is such a right, is grounded in the individual’s right to bodily integrity, 498 U.S. at 269, which is not at issue in the volunteer context. Furthermore, in the refusal of treatment situation, a third party does not have to take action to bring about the person’s death, which again is not true in the volunteer context. Thus, I believe that the circumstances of a volunteer are more like assisted suicide, and thus the \textit{Glucksberg} analogy is more appropriate.}

Justice Stevens asked counsel representing the state of Washington whether the legislature had the constitutional authority to authorize assisted suicide, and he readily conceded that it did.\footnote{Kaminsar,\textit{ supra} note 74, at 896.} States could, of course, go far beyond any currently imaginable constitutional right to assisted suicide. A legislature could authorize not only physician-assisted suicide, but could extend that authorization to cases where the person asking for assistance was not terminally ill, and could extend immunity from prosecution beyond physician assistants. None have done so, however, and none seem remotely ready to do so. Thus, viewed from the assisted-suicide framework, there is neither a constitutional right nor statutory authorization for permitting a death-sentenced inmate to waive his appeals. The next question would

\textit{the Courts}, 19 W. NEW ENG. L. REV. 371 (1997). Thus far, no such attempt has been successful. Although Florida’s Privacy Amendment establishes a “much broader” right than does the Due Process Clause, see\textit{ Winfield v. Div. of Pari-Mutuel Wagering}, 477 So. 2d 544, 548 (Fla. 1985), the Florida Supreme adopted the rationale of \textit{Glucksberg} in rejecting a claimed state constitutional right of physician assisted suicide. \textit{Krischer v. McIver}, 697 So. 2d 97 (Fla. 1997).
seem to be: Is it appropriate to view death row volunteers as persons attempting to commit suicide?

IV

**Comparing Two Phenomenon: Suicide and Volunteering**

Albert Camus believed “[t]here is but one truly serious philosophical problem, and that is suicide.” Regardless of whether Camus was right or wrong, that “problem” is beyond the scope of this article. However, if we start with plain meaning, “suicide” would appear to encompass a death row inmate’s decision to forego his or her appeals and submit to execution. For example, the American Heritage College Dictionary defines suicide as “the act or an instance of intentionally killing oneself,” and Black’s Law Dictionary defines suicide as “self-destruction,” or “the deliberate termination of one’s existence.” Ideally, one would cross-check the dictionary and legal definitions against the psychiatric one, but psychiatry has no “standard nomenclature for self-harming acts or behaviors.” Nonetheless, it is clear that from a psychiatric point of view, suicide includes indirect and passive termination of one’s existence, such as choosing not to take life-preserving medication or not moving out of the

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83 3rd Ed. at 1358.
84 6th Ed. at 1434.
86 However, this would be permitted under existing law. *Cruzan v. Director, Missouri Department of Mental Health*, 497 U.S. 261 (1990) (suggesting that a competent, terminally ill patient does have the right to refuse life sustaining treatment).
way of an oncoming train - as long as an intent to kill one’s self is present.87

This is a formal approach, and the problem with such formality is that it risks obscuring possible significant differences between committing suicide and volunteering for execution. Volunteering also formally resembles acceptance of responsibility/liability in other civil and criminal contexts. Thus, formal resemblances cannot tell us definitively which of the two different legal models ought to be applied. For that reason, it seems important to look at other ways in which the phenomenon of volunteering is – or is not – like the phenomenon of suicide.

A. Suicide

The government collects reliable demographic and etiological data about suicide. Suicide is a leading cause of death; in the last decade it has ranged from approximately the 8th to the 11th leading cause of death in the United States.88 Ironically, it outnumbers homicide as a cause of death.89 Nearly 30,000 people die each year from suicide,90 but suicide rates vary widely among population subgroups.

1. Demographic characteristics

87 COMPREHENSIVE TEXTBOOK OF SUICIDIOLOGY, supra, n. 81, at 31.
88 Suicide in the United States at http://www.cdc.gov/nipc/factsheets/suifacts.htm (last viewed March 5, 2004)
89 For example, in 1999, there were 29,199 suicides as opposed to 16,899 homicides.
90 Id. (www.psychon.net/depression.central.suicidefact.html); National Institute of Mental Health, Suicide Facts at http://www.nimh.nih.gov/research/suifact.cfm.
Those who commit suicide in the United States are overwhelmingly white and male. As a general matter, men are four times more likely to commit suicide than women. In 1997, 72% of all suicides were committed by white males. In 1998, 73% of all suicides involved white males; and in 1999, the percentage was again 72%. For white men, the annual suicide rate is 19.1 per 100,000. White men commit suicide at a higher rate than every other group except Native American men; and white men commit suicide at twice the rate of black or Latino men.

2. Etiological Factors

According to the Nation Institute of Mental Health, over ninety percent of suicide victims suffer from a diagnosable mental disorder, most commonly a depressive disorder or a substance abuse disorder. There is also a high prevalence of bi-polar disorder, post-traumatic stress disorder and other personality disorders. Substance abuse is found in 25 to 55 percent of suicides, though two-thirds of suicide victims who were substance abusers also suffered from a major depressive episode. One-

91 Supra, n. 87.
92 In Harm’s Way: Suicide in America at http://www.nimh.nih.gov/publicat/harmaway.cfm (last viewed March 5, 2004)
93 (www.psycom.net/depression.central.suicidefacts.html).
94 Suicide Facts, Supra, n. 87.
95 Supra, n. 91
96 Id (The overall national suicide rate is 10.7 suicides for every 100,000 people).
98 Kent R. Jamison, Suicide and Bipolar Disorder, J. CLINICAL PSYCHIATRY, 2000; 61.
100 George E. Murphy, Psychiatric Aspects of Suicidal Behavior: Substance Abuse, in THE INTERNATIONAL HANDBOOK OF SUICIDE AND ATTEMPTED SUICIDE, supra n. 94, at 135.
third of suicides by suicide victims suffering from substance abuse were precipitated by loss or anticipation of loss of a close personal relationship.  

Because schizophrenics are such a small percentage of the population, they do not comprise a large proportion of suicide victims. Nonetheless, schizophrenia strongly predisposes the individual to suicide: It is estimated that ten percent of all schizophrenic patients commit suicide. New research also indicates that alterations in neurotransmitters such as serotonin is associated with an increased risk of suicide.

In particular, hopelessness - the tendency to expect negative events to occur and to experience feelings of helplessness to change the likelihood of negative outcomes – is a strong predictor of suicide. Those that are married are also less likely to commit suicide than persons who are separated, divorced or widowed. Social isolation is also a predisposing factor. Suicide is also contagious. And it appears to be even more contagious among vulnerable populations, i.e., psychiatric patients and

101 *Id.* at 140.
103 In Harm’s Way: Suicide in America, *Supra* n. 91.
105 ([www.cdc.gov.epo.mmwr/preview.html](http://www.cdc.gov.epo.mmwr/preview.html)).
106 Suicide Contagion is defined as a “process by which exposure to the suicide or suicidal behavior of one or more persons influences others to commit or attempt suicide.” *Suicide Contagion and Reporting Suicide: Recommendation from a National Workshop at* [http://www.cdc.gov/mmwr/preview/mmwrhtml/00031539.htm](http://www.cdc.gov/mmwr/preview/mmwrhtml/00031539.htm); Marilyn Gould, *Suicide Contagion* ([www.afsp.org/research.articles/gould.html](http://www.afsp.org/research.articles/gould.html)). (“Evidence of suicide clusters and imitative deaths has been reported in accounts from ancient times through the twentieth century”); *see also* Sunstein, *supra*, n. 31,106 YALE L. J. At 1129 (“suicide seems remarkably contagious;” and noting the “bandwagon” or “cascade” effects of suicide).
prison inmates.\textsuperscript{107} Observers have noted that closeness to a person who commits suicide increases the likelihood of suicide. As does a “shared environmental stressor.”\textsuperscript{108} For juveniles, the contagion effect is particularly pronounced.\textsuperscript{109}

3. Non-Predictors of Suicide

Intuitively, one might expect that objectively worse conditions would prompt higher rates of suicide, but such an intuition would be wrong, at least viewed in the broadest terms. Thus, for example, poor people do not commit suicide at higher rates than do more wealthy people.\textsuperscript{110} Or to cite a more drastic example, rates of suicide at Auschwitz and other Nazi concentration camps were relatively low.\textsuperscript{111}

4. Attempted suicide

National data on attempted suicide are not compiled, but NIMH has expressed confidence in several interesting conclusions from more limited

\begin{itemize}
\item\textsuperscript{107} Marilyn Gould, Suicide Contagion (www.afsp.org/research.articles/gould.html).
\item\textsuperscript{108} Id.
\item\textsuperscript{109} Id.
\item\textsuperscript{110} Suicide Contagion and the Reporting of Suicide: Recommendations from a National Workshop at www.cdc.gov/epo/mmwr/preview/mmwrhtml (Last viewed March 5, 2004) In fact, suicide rates are inversely related to level of education. Id.
\item\textsuperscript{111} Ettinger, On Being a Psychiatrist and a Survivor, in CONFRONTING THE HOLOCAUST: THE IMPACT OF ELIE WIESEL 196-97 (A. Rosenfiedl & I. Greenberg eds. 1978) (noting that few people committed suicide and the majority of the prisoners in the death camps struggled to stay alive despite the fact that they lived in intolerable conditions where the likelihood of survival seemed non-existent).
\end{itemize}
studies. First, there are far more attempted suicides than completed suicides; estimates range from eight to twenty-five times as many attempts. Second, the ratios of attempts to completed suicides are higher in women and youth. Third, the strongest risk factors for attempted suicide in adults are depression, alcohol abuse, cocaine use, and separation or divorce.

B. Volunteering

Not surprisingly, the data on volunteers is not systematically gathered, and must be assembled using a variety of sources. As Appendix A demonstrates, there have been 106 successful volunteers in the modern era, a number that comprises almost 13 percent of the total number of executions during this period. It is difficult to calculate the overall rate of volunteering in a way that is comparable to the suicide rates of the general population.

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112 (www.nimh.nih.gov/research/siofact.htm).
113 Id.
114 Id.
115 Among younger people, the factors are the same, with one caveat: separation or divorce (not surprisingly) is not a predictor, but aggressive and disruptive behaviors are. Id.
116 The data regarding inmates who waived their appeals and submitted to execution used in this article was gathered as follows. I reviewed (and cross-checked) two lists of inmates who have been executed which are systematically maintained by the Death Penalty Information Center at www.deathpenaltyinfo.org/DRowInfo.html and by the NAACP Legal Defense Fund at www.naacpldf.org/pdfdocs/deathrow. Both lists designate which inmates were volunteers. Additional information regarding individual volunteers was obtained from reported state and federal decisions, from newspaper articles, and, in some cases, from discussions with or information provided by the inmate’s prior counsel.
117 Some readers might ask “why look at volunteers as opposed to actual suicides on death row?” In other words, if these inmates are truly suicidal, why don’t they take their own life? Some do, of course, and an estimate of the number of suicides on death row is contained in Appendix E. However, in my judgment, actual suicides are not an accurate measure of suicidal activity on death row. It is difficult for death row inmates to commit
One method would be to look at the percentage of death row inmates that successfully volunteers in any given year, but just a quick look at Appendix A reveals that this “rate” would range from a low of 0 per 100,000 in 1973-76, 1978, 1980, 1983-4, and 1991 to a high of 330 per 100,000 in 1999.\textsuperscript{118} It is hard to calculate an average rate over time, but it is clear that it would be enormously higher than suicide rates on the “free world.” One rough cut would be to use the total number of volunteers (106), the average death row population during the 1977 through 2002 period (2,230)\textsuperscript{119} and the number of years (27), which yields a rate of approximately 150 volunteers per 100,000 persons, a figure that is more than a ten-fold increase over ordinary suicide rates, which averages around 10.7 suicides per 100,000.\textsuperscript{120}

\textsuperscript{118} In 1999, there were 12 volunteers and 3625 death row inmates. (\texttt{www.deathpenaltyinfo.org/DRowInfo.html})
\textsuperscript{119} Death Row Inmates by State, \texttt{www.deathpenaltyinfo.org/DRowInfo.html} (March 4, 2004)
\textsuperscript{120} \textit{Supra} n. 93. Since volunteers who attempt to waive their appeals are—if competent—virtually always successful in ending their own lives, one might ask whether the better comparison is to attempted, rather than completed, suicides. There are no failed
The problem with such a comparison is that its meaning is less than clear. On one side of the debate, it could be argued that death row conditions produce these disparities; on the other side, it could be argued that the phenomenon is not suicide at all, but acceptance of the justness of one’s punishment. Because death row hardly comprises a random sample of the American population, it is impossible to know whether these volunteers, if on the outside, would be more suicide-prone than their neighbors, as well as impossible to know if they would be “volunteering” had they not committed a horrible crime.

1. Demographic Data

What may shed more light on the “assisted suicide v. acceptance of responsibility” debate, however, is to look at subgroups within death row, to see whether their rates of volunteering vary, and whether any such variations resemble those found in the suicide literature. Table 1 summarizes this information.

<table>
<thead>
<tr>
<th>Race &amp; Gender</th>
<th>Number of Volunteers</th>
<th>Percentage of inmates voluntarily executed</th>
<th>Number executed</th>
<th>Percentage of inmates involuntarily executed</th>
</tr>
</thead>
</table>

overdoses or non-fatal gunshot wounds in the execution chamber. As noted previously, the data on the number of attempted suicides is admittedly unreliable, but it is estimated that there are 8-25 times more attempted suicides than actual suicides. If the rate of attempted suicides is the comparison baseline, then the rate of volunteering closely resembles the attempted suicide rate in the free world.
The table is interesting, but some caution is in order, particularly with respect to groups that have few individuals on death row, such as Native Americans or women. Looking for similarities with suicide data, one might compare the number of Native American volunteers with the number of Native Americans on death row, and observe that they have volunteered at twice the rate their numbers would predict; looking for departures from the patterns of suicide, one might observe that the number of women volunteers is commensurate with their representation on death row. In both cases, however, only two volunteers are involved, too few from which to draw many supportable inferences. Proportionate or disproportionate representation rides on so few cases that chance cannot be excluded as the
explanation. Indeed, with respect to suicide, the Center for Disease Control cautions that “rates based on 20 or fewer deaths may be unstable.”

There are, however, two striking patterns not based upon small numbers. Indeed, it was casual observance of these patterns that originally prompted me to consider measurable similarities between suicide and volunteering. Almost eighty-five percent of those who were executed after waiving their appeals are white males, despite the fact that white males account for only about forty-five percent of all death row inmates. Looked at from the perspective of the other major racial group on death row, African-Americans, the pattern is equally stark: Only three percent of volunteer executions involved black men, who comprise forty-three percent of the current death row population. There has been no discussion of the reason for the racial disparity in the legal literature.

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121 Examination of the two female volunteer cases is instructive. Both are atypical in at least two respects: the crime committed and the timing of the attempt to volunteer. Christina Riggs was sentenced to death for the murder of her two children, murders that were accompanied by a failed (but clearly genuine) suicide attempt. Riggs asked her jury for a death sentence. See Riggs v. Arkansas, 3 S.W.3d 305 (Ark. 1999). Aileen Wuornos was a serial killer with multiple death sentences, and pled guilty to capital murder. See Wuornos v. Florida, 676 So. 2d 946 (Fla. 1996).

122 http://webapp.cdc.gov/cgi-bin/broker.exe (emphasis added).

123 Interviews by the author with numerous capital defense attorneys also reveals that most death row inmates who threaten or attempt to waive their appeals, and who then change their minds, are also white males.

124 Race of Death Row Inmates Executed Since 1976, Race of Death Row Inmates at http://www.deathpenaltyinfo.org/article.php?scid=5&did=184#inmaterace (last viewed) Latinos are slightly under-represented (10 percent of death row compared to 6.7 percent of successful volunteers) and Native Americans are over-represented by a factor of 2, but as discussed in the text, the small numbers make these comparisons of unreliable.

125 Id. While the number of death row inmates has generally risen over the years, the overall racial composition of death row has remained relatively constant.

126 The only discussion of this phenomenon is from a current death row inmate, who has argued that the most volunteers are white because prison is more of a stigma to white
2. Etiological Factors

a. Mental Illness

The fact that many death row inmates have mental diseases or disorders is well documented,\textsuperscript{127} which appears to be a likely explanation of the high rates of volunteerism, if volunteering is seen as a form of suicide. But whether volunteering should be seen as a form of suicide is the question. Thus, it becomes necessary to look at volunteers to ascertain with what frequency they suffer from mental illness. According to one psychiatrist, “[w]hen you look at people who are either asking for the death penalty or are not actively fighting it, many of them are depressed and, in fact, suicidal.”\textsuperscript{128} According to another, many volunteers come from abusive families and accept death as a way of punishing themselves.\textsuperscript{129} As Appendix B reveals, of the 106 volunteers, at least 93 (88%), had documented mental illness or severe substance abuse

\begin{flushright}
\textsuperscript{127} Norman, \textit{supra} n. 15, 13 J. L & \textsc{Health} at 134; Harrington, \textit{supra}, n. 11, 25 \textsc{Law \& Soc. Inquiry} at 867. However, there is no reliable statistical data which captures the precise rate of mental illness among the men and women of death row.


\textsuperscript{129} \textit{Id.} (quoting San Francisco clinical psychologist Joan Cartwright)
\end{flushright}
Table 2

<table>
<thead>
<tr>
<th>Volunteers - Mental Illness</th>
<th>Total #</th>
<th>Total # of Volunteers</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Volunteers - Mental Illness</td>
<td>82</td>
<td>106</td>
<td>77.36%</td>
</tr>
<tr>
<td>Volunteers - Substance Abuse</td>
<td>56</td>
<td>106</td>
<td>52.83%</td>
</tr>
<tr>
<td>Volunteers - Mental Illness and/or Substance Abuse</td>
<td>93</td>
<td>106</td>
<td>87.74%</td>
</tr>
</tbody>
</table>

What is even more striking is the prevalence of the most severe (and suicide-prone) of mental illness: 14 cases involved schizophrenia, and several more reported delusions that may reflect schizophrenia. Depression, and its half-sibling, bi-polar disorder, accounted for at least 23 other cases, and post-traumatic stress disorder is likely that many, if not most, of the remaining 30 volunteers also had a psychiatric or substance abuse disorder, or both. The reported figure is based on the currently available information found in reported opinions, newspaper articles, relevant web sites and, in some instances, from the structured questionnaire submitted to counsel for all volunteers that could be identified and located. Of the 56 volunteers with substance abuse problems, 40 also suffered from mental illnesses. It could be asserted that the presence of a substance abuse disorder as a predisposing factor to suicide has a different meaning in the prison setting due to the fact that death row inmates do not have access to illicit substances. Unlike non-incarcerated persons, death row volunteers will not be able to take his or her life while on a drug or alcohol binge. While true to some degree, researchers have noted that many persons with a known substance abuse disorder do not actually commit suicide while intoxicated. T. Allan Pearson, *Substance Abuse and Suicide* (www.lakeshore-counseling.com). The link between substance abuse and suicide is more complex, and researchers hypothesize that substance abuse is often an attempt to self-medicate symptoms of depression or other mental illness, which in turn is linked to suicide. *Id.* It has also been theorized that substance abuse frequently indicates low impulse control and lowered tolerance for frustration and stress which may also trigger suicidal behavior. *Id.*

while they are even those per among persons with a known substance abuse disorder

130 See Appendix B.

131 Of the 56 volunteers with substance abuse problems, 40 also suffered from mental illnesses. It could be asserted that the presence of a substance abuse disorder as a predisposing factor to suicide has a different meaning in the prison setting due to the fact that death row inmates do not have access to illicit substances. Unlike non-incarcerated persons, death row volunteers will not be able to take his or her life while on a drug or alcohol binge. While true to some degree, researchers have noted that many persons with a known substance abuse disorder do not actually commit suicide while intoxicated. T. Allan Pearson, *Substance Abuse and Suicide* (www.lakeshore-counseling.com). The link between substance abuse and suicide is more complex, and researchers hypothesize that substance abuse is often an attempt to self-medicate symptoms of depression or other mental illness, which in turn is linked to suicide. *Id.* It has also been theorized that substance abuse frequently indicates low impulse control and lowered tolerance for frustration and stress which may also trigger suicidal behavior. *Id.*

132 Appendix B.
disorder was present in another 10 cases. Finally, at least thirty had previously attempted suicide.\textsuperscript{133}

\section*{b. Hopelessness}

Commentators have argued that many decisions to elect death are the result of despair and loneliness rather than acceptance of responsibility,\textsuperscript{134} and certainly such a motivation would be consistent with the phenomenon of suicide. Official reports, however, provide no measure of the frequency of hopelessness. To attempt to address this vacuum, as well as several other missing pieces of the picture, I constructed a questionnaire for attorneys for the volunteers which may be found in Appendix C. There is of course some risk these attorney comments in particular will reflect defense lawyer’s prior beliefs about volunteers rather than attitudes they have actually observed, and, at the end of the day, my ultimate conclusions do not hinge on the information which was obtained from counsel for the volunteers. On the other hand, the attorney for the volunteer will, in many instances, have the best perspective regarding the individual’s actual motivation. Therefore, it seemed prudent to ask.\textsuperscript{135} Thirty-nine per cent cited a sense of hopelessness in the inmate’s decision to forego his appeals.

\section*{c. Contagion}

\textsuperscript{133} Appendix B. Recent research links suicide and violence. Nock & Marzuk note that the psychiatric illnesses usually associated with suicidal behavior are the same illness linked to violent behavior. Nock & Marzuk, supra n. 93, at 438-39. They posit that the “common thread” underlying violence and suicide is increased impulsiveness, affective ability, disinhibition and problems with reason and decision-making. \textit{Id.} at 439. Furthermore, the research indicates abnormal serotonin levels are present in a significant number of cases involving both suicide and violence toward others. Kaplan & Sadock, \textit{COMPREHENSIVE TEXTBOOK OF PSYCHIATRY} 5\textsuperscript{th} Ed. 279 (Williams & Wilkins 2000).

\textsuperscript{134} White, \textit{supra} n. 26, 48 \textit{PITT. L. REV.} at 857.

\textsuperscript{135} The information was gathered as follows. Based upon news reports, reported opinions and relevant web sites, I identified counsel for the volunteer in all of the 106 cases. Questionnaires were sent to all attorneys for whom regular mail or e-mail addresses could be found. Responses were received from attorneys in 44 of 106 volunteer cases.
Attorneys who represent death row inmates often comment on what the suicide literature refers to as the contagion effect. Part of the conventional wisdom among capital defense attorneys is that when one death row inmate waives his appeals, others frequently do so as well, or put differently, one volunteer begats another. It is difficult to know how to objectively measure contagion. A perusal of Appendix D does provide support for the contention that volunteerism is highly contagious. During one eight month stretch in 1999, for example, the State of Texas executed four men who waived further appeals,136 and on two other occasions Texas saw three other volunteer executions in a twelve month period.137 Four of the five volunteer executions in South Carolina took place in little more than a year in 1996-97.138 There have been groupings of volunteers in other states as well.139 And, attorneys for the condemned almost uniformly report that attempts to and threats of volunteering for execution significantly increase after a volunteer is executed.140

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136 Aaron Foust (4/28/99); Charles Tuttle (7/1/99); Richard Wayne Smith (9/21/99); Robert Atwood (12/14/99). In addition, three other volunteers were executed between February of 1996 and February of 1997. Leo Jenkins (2/9/96); Joe Gonzales (9/18/96); Richard Brimage (2/10/97). Appendix D.
137 Jeffrey Barney (4/16/86); Ramon Hernandez (1/30/87); Eliseo Moreno (3/4/87). Leo Jenkins (9/18/86); Richard Brimage (2/20/97); Benjamin Stone (9/25/97). Appendix D.
138 Robert South (5/31/96); Michael Torrence (9/6/96); Cecil Lucas (11/15/96); Michael Elkins (6/13/97). Appendix D. The author knew all four of the South Carolina volunteers, and discussed their decisions to waive their appeals with each of them at some point prior to their execution. Similarly, these four men each discussed their decision to waive their appeals with each other. While the reasons that these four men ultimately decided to waive their appeals varied, it was evident that their persistence in foregoing further appeals—despite significant pressure from their attorneys, and in some instances their family members, to change their minds—was influenced by the resolve of the other volunteers.
139 For example, Virginia had 3 volunteer executions in a 13 month period from March of 2001 to April of 2002. Thomas Akers (3/1/01); James Earl Patterson (3/14/02); Daniel Zirkle (4/2/02). Oklahoma had 3 volunteer executions in an 11 month period, and 2 others in a two month period. Scott Carpenter (5/8/97); Michael Long (2/20/98); Stephen Wood (8/5/98); Floyd Medlock (1/16/01); Ronald Fluke (3/27/01). Florida had two sets of two volunteers coming on the heels of each other. In fact, there were two in one week. Dan Hauser (8/25/00); Edward Castro (12/7/00); Rigoberto Sanchez-Velasco (10/2/02); Aileen Wournos (10/9/02). The 2 volunteer executions in Oregon took place during an eight month stretch. Douglas Wright (9/6/96); Harry Moore (5/16/97). Appendix D.
140 Interviews with capital defense attorneys (on file with author). It is possible, of course, that some of these apparent instances of contagion are statistically predictable extremes in a normal distribution. But that does not appear to be the case. For example, to assess the degree of clustering in the South Carolina
3. Non-Predictors? Objective Conditions

As described in Part II, some commentators have argued that abysmal conditions of confinement create a sense of hopelessness and desperation that produce volunteering. As noted previously, many liken death row confinement to torture. In some measure, this claim is in tension with the claim that volunteering resembles suicide, because suicide does not seem to be strongly predicted by some intuitively obvious objective factors. And indeed, to the extent the claim can be tested, it appears that external conditions do not clearly predict volunteer rates. Appendix E presents the volunteer rates of the various states, but an examination of the rates of volunteering in each of the states reveals little or no pattern, or at least no pattern that can be clearly associated with objective conditions.

Because commentators have focused on the harshness of prison conditions, I first looked for a pattern in volunteer rates that reflected varying conditions; I found none. Thus, for example, it is clear that death row conditions in Texas are very severe, whether measured by recreation time, isolation, opportunity for visitation, or volunteers' executions, I examined the gap times between the individuals' execution dates. A two-sample t-test was applied which demonstrated that the gap times are significantly shorter (i.e. execution dates are consequently clustered together) for the volunteers (p=.07). In the data analysis I used the logarithmically transformed gap times and bootstrap critical values with 10,000 replications. Several of my colleagues and I are currently examining rates of executions (including volunteer executions) nationally, and in the various states, in search of similar statistically significant patterns that may exist.


For purposes of this article, the rate of volunteerism was calculated in two ways. The first was to determine the percentage of volunteers in relation to the total number of people sentenced to death in the jurisdiction. The second was to determine the percentage of volunteers in relation to the number of executions in the jurisdiction. Both rates are reflected in Appendix E. The first would appear to be the more accurate measure, since some states have had only a handful of executions due to several different factors including: a small population; low death sentencing rates; and high success rates in the appellate process. For a more detailed discussion of death sentencing rates and reversal rates in capital cases see John Blume & Theodore Eisenberg, Judicial Politics, Death Penalty Appeals, and Case Selection: An Empirical Study, 72 S. CAL. L. REV. 465 (1999).
physical characteristics of the cell. Yet Texas has a moderate rate of volunteers. Even more striking are the rates of Alabama, Florida, Georgia and California; despite less than decent death row conditions, the volunteer rates are strikingly low. And a number of states have had no volunteers, e.g., Louisiana and Mississippi, despite the fact that conditions on death row in both states are harsh. On the other end of the continuum, Utah has a phenomenally high rate of volunteers, almost 10 times the national average, but its prisons have not been particularly castigated; moreover, Delaware and Washington, number and two and three in rates of volunteers, are also unexceptional death row environments.

In fairness, this may well be attributable to the fact that while the conditions of confinement on various death rows do vary to some degree, virtually all inmates on all death rows experience life as described previously in this article. In virtually every state, death row inmates are “locked down” in their cell for most of the day, have little or no access to educational or other prison programs and experience great isolation and loss of relationships. The theory that conditions of confinement motivates inmates’ decisions to waive their appeals is clearly supported by reported statements made by a number of volunteers, as well as by the results of the defense attorney questionnaires. Twenty-six of 44 respondents, or 59%, indicated that conditions of confinement played a significant role in the inmate’s decision to submit to execution. Thus, the fact that conditions on death row in some states is relatively better than it is in other states may not overcome the basic threshold level of conditions of confinement on death row across the board. Death row inmates are undoubtedly socially isolated, and, as noted above, isolation is a risk factor for suicide. In a similar vein, most death row inmates are not married (either never having been married or currently divorced), and individuals that are not married commit suicide at higher rates than those who are married.

Fans of the harsh conditions theory of volunteers might object that it is not the physical conditions that matter, but psychological

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143 See, e.g., Robert S. Phillips, Volunteering for Death: The Fast Track to the Death House, Crime Magazine (www.crimemagazine.com/deathrowvolunteers.htm). (noting that the one of the most prevalent reasons cited by death row volunteers is the conditions of confinement on death row).

144 And, as noted previously, this may also explain why the rate of volunteerism among death row inmates is so much higher than the suicide rate.
ones: it is the inevitability, or at least the great likelihood of execution that prompts volunteers. At least as a comparative matter, this claim is also unsupported by the facts. Appendix E shows, by state, the percentage of those sentenced to death and executed who volunteered. The percentage of those executed who are volunteers ranges from one hundred per cent (Idaho, New Mexico, Oregon, and Pennsylvania) to zero percent (Colorado, Louisiana, Wyoming, Mississippi, Montana, Nebraska and Tennessee), but there is no readily apparent pattern. Texas is again instructive. Texas has imposed more death sentences (816) and executed far more inmates (313) than any other state, yet its rate of volunteerism is quite ordinary. Another way to look at prospects for relief is to consider the federal circuit in which the defendant’s case will ultimately be heard. In the Fourth Circuit, those chances are the worst, and the Ninth Circuit, the best. Nonetheless, Nevada and Washington, both in the Ninth Circuit, have very high rates of volunteers, and North Carolina, in the Fourth Circuit, has an unusually low rate of volunteers. In fact, the overall rate of volunteers is slightly higher in the Ninth Circuit than it is in the Fourth Circuit. This is not to say that at the margin, neither prison conditions nor ultimate likelihood of execution do not matter; these rough numbers do not permit such a sweeping assertion. It may be, for example, that controlling for race would reveal some pattern associated with prison conditions. What can be said at this point is that the stark numbers clearly support a volunteers-are-like-suicide hypothesis, but do not seem to support a prison-conditions-and/or-inevitably-of-execution-causes-volunteers hypothesis.

4. Acceptance of the justness of the punishment.

None of the data thus far discussed bears on the question of whether inmates who volunteer are motivated by acceptance of the justness of their punishment. The questionnaire attempted to probe that possibility in two ways, first by looking at whether the

147 Appendix E.
148 Appendix F reflects the number and rate of volunteers by Federal Judicial Circuit.
punishment is likely to be a just one, and second by asking directly whether the attorney observed evidence of that motivation. In 16 of the 44 cases (36%), attorneys for the volunteer stated that acceptance of responsibility or acknowledgement of guilt was a factor in the inmate’s decision to submit to execution. Thus, it does appear to be the case that some volunteers are motivated by acceptance of the justness of the death sentence.

IV.

TOWARD A RICHER LEGAL MODEL OF VOLUNTEERS

A. Distinguishing Acceptance of Responsibility From Suicidal Motivation

In the end, the conclusions which I draw from a comparison of those who commit suicide and those who waive their appeals and submit to execution are relatively modest. I do not think that I have shown — or that subsequent data will show — that volunteering is inevitably a suicidal act. The data set complete enough to permit such a conclusion does not yet exist, and absent a change in the legal standard, likely never will. My previous discussions with attorneys for volunteers (discussions which may not be random, but certainly are numerous), and the questionnaires obtained from attorneys for volunteers, provide further evidence that many, if not most, volunteers are motivated by the desire to kill themselves. But judgements about motivation are controversial, and readers may question the impartiality of the volunteers’ attorneys’ judgments.

What I think the data does demonstrate, however, is that there are disturbing similarities between persons who commit suicide and those who volunteer for execution. Volunteers resemble those who commit suicide in ways that are extremely unlikely to be attributable to chance. Race is a very strong predictor of suicide and a very strong predictor of volunteering, and the numbers are large enough that we can be certain the association is not a matter of chance in either case. The role of mental illness and substance abuse cannot be as precisely quantified, due to the difficulty in calculating the base rates for all persons sentenced to death. Nonetheless, it provides another striking and not easily dismissed similarity. Mental illness and substance abuse is strongly associated with suicide, and volunteers suffer from extremely high rates of mental illness and
substance abuse, clearly higher than the rates that prevail among non-volunteers. What is particularly noteworthy is the high rate of schizophrenia among volunteers, given the apparent causal link between schizophrenia and suicide, as well as the high incidence of other mental disorders (depression, bi-polar disorder and PTSD) that make someone prone to commit suicide in the “free world.” These similarities, along with the reports of capital defense attorneys, make the case that suicidal desires are a more likely explanation for volunteering than is the desire to accept the justness of a death sentence - a motive for which there is some anecdotal information, but little empirical evidence.

The law, therefore, rather than closing its eyes to the possibility of suicide, should investigate it. Nothing compels a the use of a one size fits all legal standard. If, in a particular case, a desire to accept the justness of the imposed punishment motivates the individual, then the only barrier to waiver of further appeals should be incompetency. But if a desire to commit suicide motivates the particular death row inmate, then that desire should not be accommodated. In determining whether client prerogative or the prohibition against suicide should govern, courts should ask whether acceptance of a just punishment explains the client’s choice. This requires two distinct inquiries, one objective and one subjective.

First, in order for acceptance of a just punishment to legitimate what appears to be (and has the same consequences as) suicide, the punishment must be just. The question of what makes a punishment just has provoked vast literatures in a number of disciplines, and obviously many participants in the debates about volunteers would not accept that capital punishment is ever just. Even persons who agree that some capital punishment is just will inevitably disagree over which cases merit it. Thus, for example, one person might deem prior military service a strong mitigating factor, and another might deem a history of childhood deprivation more significant. These differences of opinion are normally resolved by the jury.

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150 See, e.g., n. 39.
For the purpose of sorting suicide from acceptance, however, I think a “floor” rather than a “ceiling” approach is in order. Many punishments that the law allows may be unjust. But at the very least, a punishment is not just if American law would preclude it. Put differently, whatever else a volunteer might be doing, he is not “accepting” a societal determination of the “justness of his punishment” if the society actually deems that punishment unjust. There are three species of reasons that a particular death sentence would be precluded on this objective prong: factual innocence; “innocence of the death penalty,” which generally refers to the absence of an aggravating factor that renders a crime death eligible;152 and the defendant’s categorical ineligibility for the death penalty.153

But even if a punishment is arguably objectively just, motivation for the waiver of appeals might have nothing to do acceptance of the punishment’s justness. Therefore, before allowing a competent volunteer to waive further appeals, a court should conduct a second, subjective inquiry: why does the volunteer want to waive his appeals? If the answer is that, with due regard for individual variation in phrasing, he accepts that death is the appropriate punishment for his crime, then he should be permitted to waive his appeals. If, on the other hand, the motivation appears suicidal, then waiver should not be permitted.

I postpone briefly the matter of how this two-pronged test should be applied. First it seems desirable to explain why I reject alternative formulations of the objective and subjective prongs that when I began this project seemed very attractive. On further reflection, I reject the alternative formulation of the objective prong because it makes volunteering too difficult, and I reject the alternative formulation of the subjective prong because it makes volunteering too easy.

153 For example, the Supreme Court has determined that defendants under the age of 16 are not eligible for the death penalty. Thompson v. Oklahoma, U.S. 487 U.S. 815 (1988). The Court has also held that, in the felony-murder context, a defendant is not eligible for the death penalty unless he was a major participant in the offense and demonstrated a reckless indifference to human life. Tison v. Arizona, 481 U.S. 137 (1987). Last term, the Court held that mentally retarded offenders were not eligible for the death penalty. Atkins v. Virginia, 536 U.S. 304 (2002).
Instead of asking whether the punishment is arguably “unjust,” one could ask whether the volunteer has “viable claims.” This is a much broader standard, encompassing numerous procedural claims, such as ineffective assistance of counsel, unconstitutional jury composition, juror misconduct, defective jury instruction, selective prosecution, and prosecutorial misconduct claims. This standard, I think, goes too far, given the distinction our system recognizes between just outcomes and fair procedures. An outcome may be just even if arrived at by improper procedures, and a person therefore could accept an outcome as just even if the attendant procedures were deeply flawed. If death were not the consequence of waiver, clearly a client could choose to forego “viable” claims for any number of reasons, including acceptance of the substantive correctness of a procedurally compromised judgment. Thus, a “viable claim” formulation of the objective prong results in rejection of a client-choice model even when the client is motivated by acceptance of a just punishment rather than suicidal desires. Just as the currently reigning competency standard ignores the resemblance between volunteering and suicide, a “viable claims” prong ignores the resemblance between volunteering and other valid client choices; given the plausibility of both comparisons, and the likelihood of individual differences, neither unitary model should be employed by courts facing volunteers.

The immediately obvious alternative for the subjective prong would seem to be: Is the volunteer’s choice rational? To some, a rational choice test for volunteers is an oxymoron: they would contend that the choice to die is never the product of rational thinking. Others would argue that choosing death sometimes is rational, depending on what dire circumstances – extreme pain, a terminal illness, mental incompetence, shame or exorbitant cost to one’s family – are the consequences of sustaining one’s life.

Thus the plausibility of both the client choice and the assisted suicide models of volunteering, and concomitant fidelity to their implications, brings us back to the two-prong test with which this section began: the requirement of an objectively just punishment and the requirement of subjective acceptance of the justness of that

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154 This standard might resemble the standards governing issuance of certificates of appealability in habeas corpus cases. See 28 U.S.C. §2253(c)(2) (asking whether the “applicant has made a substantial showing of the denial of a constitutional right”).

155 See, e.g., n. 61.
punishment. That these are the two hurdles to waiver by a competent death row inmate does not tell us how high each hurdle is; we are left with the question of what, and upon whom, are the burdens of proof?

With respect to the “objectively just” prong, previous assertion\(^{156}\) of any non-frivolous claim that precludes imposition of the death penalty on this individual for this crime is sufficient to trigger further inquiry into the objective justness of the punishment. In many post-conviction cases there are no claims of factual innocence,\(^ {157}\) innocence of the death penalty, or categorical ineligibility for the death penalty; certainly in the majority of post-conviction cases there are no such non-frivolous claims. But in those cases in which there are non-frivolous claims, a court is obliged to determine those claims on their merits before permitting waiver. The nature and placement of the burden of persuasion depends then upon previous assignments of those burdens under the law governing the specific claim.

With respect to the “subjective acceptance” prong, such a borrowing of the appropriate burden is not possible. In assigning that burden, three considerations seem relevant; two of which point toward assigning the burden of proof to the proponent of waiver, and one of which is ambiguous. First, one might ask who has the best access to information about the motivation for the waiver. Clearly, this is the volunteer who is attempting to waive his appeals, so this consideration argues to assigning the burden to the proponent of waiver. Second, one might ask what is most likely to be the correct interpretation of the volunteer’s motivation, and assign the burden of persuasion to the side advocating the less commonly correct interpretation. Here, the available empirical evidence may be inconclusive, but the evidence that does exist points to suicidal

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\(^{156}\) The diligent reader may note the use of the passive voice. I do not here embark upon questions of third party standing. Instead, I address the most common kind of volunteer case, in which the defendant’s attorney has previously asserted claims on his behalf. In the less typical case, a defendant may attempt to waive all of his rights from a very early point in legal proceedings, a point at which meritorious claims of innocence, death penalty innocence, and categorical ineligibility may not yet have been asserted. My impulse is that similarities to suicide should prompt some special procedure, perhaps appointment of a guardian ad litem to assert such claims, but that those similarities do not justify self-designated third parties’ intervention.

\(^{157}\) But see n. 6 (102 former death row inmates have been released due to newly discovered evidence of innocence).
motivation rather than acceptance of a just punishment. So, this consideration also argues for placing the burden on the proponent of waiver. Finally, one might consult the relative costs of erroneous determination of suicidal motivation versus erroneous determinations of a desire to accept a just punishment. Viewed in pecuniary terms, the costs of erroneously finding suicidal motivation are higher, but viewed in terms of loss of human life — one of the few “compelling governmental interests” recognized by the Supreme Court\textsuperscript{158} — the costs of erroneously finding acceptance of a just punishment are higher, and thus this factor does not conclusively point in either direction. Nonetheless, considering all three factors strongly suggests that the burden of persuasion regarding subjective motivation should be upon the proponent of waiver. In other words, the condemned prisoner must demonstrate that the desire to waive his appeals is not motivated by the desire to commit suicide.

B. Applying the Test

In order to concretely explore my proposal, I will next examine several different hypothetical scenarios drawn from real cases. Because all of these cases are ones in which the volunteer would pass the bare competency standard now in effect, they also offer an opportunity to consider whether the current standard is sufficiently rigorous to protect against death row inmates using the legal system as a means of suicide.

1. Freddie: Factual Innocence

Imagine a death row inmate. To make it easier, call him Freddie. Freddie has been on death row for ten years. He is now 38 years old. Freddie was convicted of murder and sentenced to death for the burglary, sexual assault and murder of an 82 year old woman. The prosecution’s theory at trial was that Freddie, a methamphetamine addict, needed money to support his drug habit, and that he knew the victim had a large amount of cash hidden in the house because he had previously worked for her doing odd jobs. So, he broke in to

\textsuperscript{158} Cruzan v. Director, Mo. Dept. of Health, 497, U.S. 261, 282 (1990) (referring to the state’s “unqualified interest in the preservation of human life”).
steal the money. When the victim awoke and found him in the house, Freddie raped her and stabbed her numerous times.

Freddie was arrested on an anonymous tip, and eventually gave a statement, which although not directly incriminating, included the following assertion: “If I did it, I don’t remember it.” The evidence against Freddie, in addition to the statement, was a hair comparison expert’s testimony that pubic hair found on the victim’s bed was in all respects consistent with Freddie’s pubic hair, and a state serologist’s testimony that Freddie had type A blood and that the semen found in the victim’s vaginal vault also came from a person with type A blood. Freddie did not testify, but his lawyers presented an alibi defense. In reply, the prosecution presented a jailhouse informant who testified that Freddie confessed to him that he had committed the murder while high on drugs. Freddie was convicted of all charges.

At the sentencing phase of the of the trial, the prosecution presented evidence of Freddie’s prior criminal record, including his release from prison for a prior robbery only six months earlier, as well as several other “unadjudicated” robberies Freddie supposedly had committed before and after the murder to support his drug habit. Freddie’s attorneys presented his history of mental illness as evidence in mitigation. Freddie had been diagnosed with bi-polar disorder in his late teens, and for the next twenty years he had been in and out of mental institutions. Defense experts explained that Freddie’s use of methamphetamines was a failed attempt at “self-medication.” Evidence was also presented of several prior suicide attempts. The jury sentenced Freddie to death. Following the trial, Freddie was convicted of the other robberies, and he was sentenced to life imprisonment without possibility of parole under the state’s recidivist statute.

On appeal, his convictions were affirmed, but the death sentence was reversed due to an instructional error. Freddie was represented by the same attorneys at his sentencing retrial, and he was again sentenced to death. This time the state court affirmed the death judgment, and the United States Supreme Court denied certiorari. By now, Freddie had been on death row for almost a decade.

New attorneys are appointed to represent Freddie in post-conviction proceedings. Freddie tells his new lawyers during their
first meeting that he is innocent, but that he is ready to die. He asks for their help in having the death sentence carried out as soon as possible. Freddie explains that life on death row is intolerable; that he only gets out of his cell for an hour a day; that there are no opportunities to work; that his family no longer visits; and that he just cannot live anymore with the pressure of impending death. Counsel’s review of Freddie’s prison records reveals that two years ago Freddie attempted suicide by taking an overdose of Tylenol. He was discovered vomiting in his cell. Freddie was rushed to a hospital, his stomach was pumped, and his life was saved. Despite the prior history of bi-polar disorder, he is currently not being medicated or treated for his mental illness. A prison psychiatrist who examined. Freddie after the suicide attempt determined that he was malingering.

Freddie’s new attorneys don’t believe he is innocent. But in an attempt to stall Freddie’s decision to waive his appeals, they request DNA testing – which was not available at the time of trial– on the hair and semen. The state court grants the motion, and everyone is surprised to learn that Freddie is telling the truth: The hair and semen are not his. Counsel rush to the prison to tell Freddie the great news. To their amazement, he is less than enthusiastic. In fact, Freddie still wants to die. He explains to his attorneys that he will still have to live the rest of his life in prison due to the life sentences on the subsequent robbery convictions. He has thought about it a great deal, and he would rather die than spend the rest of his life in prison. Freddie says that he would commit suicide if he could, but he prefers a more certain and painless method.

Freddie’s attorneys leave, optimistic that Freddie will change his mind. The next week, however, they receive a letter Freddie has written to the judge and the Attorney General asking that counsel be discharged and the sentence carried out. The judge, following state law, orders a competency evaluation. The designated mental health experts conclude that although Freddie is bi-polar and currently depressed, he is competent. Although the competency determination did not require any further findings, the experts report that if Freddie’s depression is treated appropriately, he is likely to change his mind. Although reluctant to do so, the court believes that since Freddie is competent, he has no choice but to grant Freddie’s motion. He dismisses the case, and pursuant to state law, an execution date is scheduled.
His attorneys, still hopeful, request executive clemency from the Governor. But, according to state law, the inmate himself must request clemency. Freddie refuses to do so, still insisting he would rather die than live his life in prison. Several weeks later, he is executed.

The reader who doubts that such cases are common would be right to be skeptical. Demonstrably innocent defendants rarely volunteer, but occasionally, they do. Interviews with attorneys for other exonerated former death row inmates reflect that others attempted, or expressed the desire, at some point in the proceedings to forego their appeals and let the sentence be carried out. Undoubtedly there are even more volunteers who, though factually guilty of some offense, are innocent of the death penalty.

Because Freddie was deemed competent, under current law a court could, and likely would, deem the waiver knowing and intelligent, and thus clear the way for execution. In contrast, Freddie’s attempted waiver would fail both prongs of the standard advanced in this article. First, Freddie cannot accept the justness of his punishment because he is demonstrably not guilty of the underlying offense. Thus the punishment is objectively unjust. On the subjective prong, there is ample evidence that Freddie wishes to waive his appeals in order to commit suicide. His motivation seems clear -- he wants to end his life -- and foregoing his appeals is just another in a line of suicide attempts. He would, therefore, be unable to demonstrate that the primary motivation for waiver is the desire to accept the justness of his punishment.

2. Lemuel: Categorical Exemption.

Let’s think about another hypothetical death row inmate, Lemuel. Lemuel was convicted of murder and sentenced to death for killing a neighbor in a dispute over the proceeds of a welfare check. Lemuel confessed almost immediately after initially being questioned

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159 There are several cases where inmates who were subsequently exonerated attempted to waive their appeals. Isidore Zimmerman came within a few minutes of electrocution. A stay was entered, much to his disappointment. He was later exonerated. Strafer, supra n. 5, 74 J. CRIM. L. & CRIMINOLOGY at 869. See also State v. Dodd, 838 P.2d 86, 102 (Wash. 1992) (Acknowledging that “the lure of ceasing to resist the death penalty may be as great for the innocent as for the guilty”).

160 Interviews with capital defense attorneys (on file with author).
by the police. He told the authorities that he needed money to buy crack cocaine. Lemuel led police to the bloody knife used to kill the victim, which was buried in the yard near the house where he lived with his parents and siblings. He also had money in his pants’ pocket at the time of his arrest which was approximately the amount of the victim’s recently cashed check. At trial, the defense presented no evidence, and did not otherwise contest Lemuel’s guilt. The jury found him guilty of murder in short order.

At the sentencing phase of the proceedings, the prosecution presented evidence that Lemuel previously had been convicted of manslaughter, for which he served ten years of a twenty year sentence. Lemuel’s trial counsel called a psychologist who testified that Lemuel was mentally retarded, that he failed several grades, including the first, and that he had been placed in special education classes until he dropped out of school in the eighth grade. The prosecution did not dispute Lemuel’s mental retardation, but argued extensively that Lemuel has been, was, and would continue to be, dangerous. After several hours of deliberation, the jury sentenced Lemuel to death.

Throughout the state and federal post-conviction proceedings, Lemuel’s attorneys raised a variety of challenges to Lemuel’s death sentence based on his mental retardation. Those appeals were all unsuccessful. But, three weeks before Lemuel’s scheduled execution, the United States Supreme Court decided Atkins v. Virginia, which held that mentally retarded persons could not be executed. Not surprisingly, Lemuel’s attorneys were elated, and they immediately filed a second state post-conviction petition maintaining that carrying out Lemuel’s death sentence would be cruel and unusual punishment. The court stayed the execution. Within days, however, Lemuel informs his attorneys that he does not want to pursue any new appeals (or “apples” as he calls them). He has recently become a “born again” Christian through the efforts of a prison chaplain. The chaplain, a fundamentalist Christian, believes in “blood atonement,” and he has convinced Lemuel that since he is clearly guilty (which Lemuel does not dispute), he must accept his punishment in order to enter the kingdom of heaven. With the chaplain’s assistance, Lemuel files a motion asking the court to dismiss the new post-conviction petition, relieve counsel and set an execution date.

Lemuel’s attorneys challenge their client’s competency, and the court, as is required under state law, orders a competency evaluation. The experts conclude that Lemuel is mildly mentally retarded; his I.Q. is tested at 68. However, the experts also agree that Lemuel has the ability to make a rational decision about whether to waive his appeals. After a hearing, the trial court dismisses the petition, as he is required to do under state law, and an execution date is scheduled. Lemuel will not permit his attorneys to seek executive clemency, and he is executed.162

Again, since Lemuel was deemed competent, current law would permit him to forego his appeals and let the death sentence be carried out. Despite his mental retardation, the waiver would almost certainly be deemed knowing, voluntary and intelligent; persons with mental retardation, for example, are routinely determined to be competent to waive their Miranda rights or their right to trial and plead guilty.163 However, Lemuel’s attempted waiver would fail under the objective prong of the proposed standard. The punishment is not just since persons with mental retardation are no longer eligible for capital punishment in light of Atkins. The question of whether Lemuel’s motivation is suicidal, as opposed to accepting the appropriateness of his punishment, is a closer question than in Freddie’s case. One could argue that Lemuel’s stated reason for waiver – that he accepts his punishment in order to obtain blood atonement so that he may enter the Kingdom of God – is not suicidal, but rather is an acceptance of the justness of the sentence. Although the relationship with the prison minister and Lemuel’s mental retardation does raise concerns about coercion, a court may, or may not, determine that Lemuel has carried his burden of demonstrating that the motivation is not to commit suicide.164

162 Joey Miller, a former Pennsylvania death row inmate, came within 48 hours of being executed before he relented and allowed a federal habeas corpus petition to be filed on his behalf. In December of 2002, Mr. Miller’s death sentence was modified to a sentence of life imprisonment due to his mental retardation. Interview with Robert Dunham, Assistant Federal Public Defender, Capital Habeas Unit, Philadelphia, Pennsylvania (on file with author). Despite his mental retardation and brain damage, Mr. Miller had been found competent to waive his appeals. Id.

163 See, e.g., Merrill v. State, 482 So.2d 1147 (Miss. 1986) (mentally retarded defendant found competent to waive Miranda rights).

164 The questionnaires revealed that religion was a factor in the inmate’s decision to waive his appeals in 13 cases (29%). In a number of these cases, prison chaplains were influential in the volunteer’s decision and encouraged the inmate to forego any further appellate review of his convictions or death sentence. Most of these chaplains are fundamentalist Christians. This is not a new
Nevertheless, because the waiver does not satisfy prong one, Lemuel would not be permitted to waive his appeals, and his death sentence would, in the course of those appeals, inevitably be modified to life imprisonment due to his mental retardation.

3. Delbert: Suicidal Motivation

Our third hypothetical death row inmate is Delbert. Delbert, 55, was convicted and sentenced to death for the murder of his 3 year old daughter, Melissa. At the time of Melissa’s death, Delbert was separated from his wife, Karol, who was substantially younger than Delbert. The couple’s marriage dissolved as a result of Delbert’s alcoholism. Depressed over the failure of his marriage – his third – Delbert contemplated suicide. He finally decided that he would kill himself and Melissa, leaving Karol behind to suffer for abandoning him. Delbert decided that he would drive his car into a lake, and he and his daughter would drown together. One Friday evening, after picking Melissa up from Karol, he did just that. Delbert’s own survival instincts kicked in, however, and he swam out of the car. He tried to save Melissa, but he was unable to do so. Extraordinarily remorseful, Delbert pled guilty to Melissa’s murder, and ordered his attorneys to present no mitigating evidence on his phenomena. Since colonial times, ministers have been an integral part of the execution process. See Stuart Banner, The Death Penalty: An American History (2002) p. 17 (noting that a death sentence was deemed to be of “inestimable value” in leading a man to God). Samuel Johnson noted, somewhat satirically, that “when a man knows he is to be executed in a fortnight, it concentrates his mind wonderfully.” Id. Another minister stated: “There is no place in the world where such Pains are taken with condemn’s Criminal to prepare them for their death; that in the Destruction of the Flesh, the Spirit may be saved in the Day of the Lord Jesus.” Id. In a number of cases, ministers would encourage the accused to plead guilty, a step that was tantamount to suicide due to the mandatory nature of most colonial sentencing systems. Id. at 15. One inmate who pleaded guilty to a capital offense and was executed stated: “I was so pressed in my Conscience to take the Guilt of Blood from the Land, on my self, that nothing could prevail with me to deny the Fact.” Id. The access to and influence these prison chaplains have over death sentenced inmates does raise legitimate questions of coercion. In the context of euthanasia, for example, Ronald Dworkin has commented that those who are facing death due a terminal illness are “especially vulnerable to pressure” from family members or even their own physicians to end their lives quickly. Dworkin, supra n. 68 at 190. There is no reason to believe that death sentenced inmates are any less vulnerable to pressure to end their lives. An exhaustive discussion of this issue, however, is beyond the scope of this article.
KILLING THE WILLING

behalf. Delbert asked the judge to sentence him to death. The judge obliged him.

Once on death row, Delbert’s mother persuaded him to pursue his appeals. He did so temporarily, and was denied relief in state post-conviction proceedings. His mother has since died, and he has no other visitors. Delbert’s attorneys filed a federal petition for writ of habeas corpus, and his case is now pending in the federal district court.

Delbert, however, no longer wants to challenge his death sentence; he is ready to die. He has recently learned that he has Alzheimer’s disease, and Delbert is desperately afraid of what will happen to him in prison as the illness progresses. His attorneys, unlike most other capital defense attorneys, support Delbert’s decision. They present an affidavit from a psychiatrist attesting to Delbert’s competency. The affidavit indicates that Delbert is depressed, both over the death of his daughter and the news that he has Alzheimer’s, but that he is not psychotic or delusional. In the doctor’s opinion, Delbert’s decision is rational. Since Delbert has never been deemed incompetent, and since neither the prosecution or the defense are contesting his competency, the court does not order any additional evaluations and grants the motion dismissing Delbert’s appeals. He is subsequently executed.

Since Delbert is competent, there is no obstacle under the current legal regime to the waiver of his appeals. Applying the standard advanced in this article, the attempted waiver satisfies the justness prong. Delbert is guilty of a death eligible offense, and he does not fall into any category of offenders for whom the death penalty is not a permissible punishment. However, he would not be able to meet his burden on the second prong, acceptance of the justness of his sentence, since his clear purpose in waiving the appeals is to end his own life. Despite the rational reason Delbert advances for desiring to die, if he took his own life it would clearly be deemed a suicide. Furthermore, no other member of society, upon discovery that they have Alzheimer’s, would be able to go to a hospital and obtain a lethal injection. That “right,” under existing law, belongs only to death row inmates.

For our final hypothetical death row inmate, let’s imagine Michael. Michael, was convicted of the strangulation and rape of a nine year old girl. The child was abducted in broad daylight from a convenience store in rural New Mexico. Michael did not deny guilt, and DNA evidence established he had sexual relations with the victim. He also confessed shortly after his arrest, which was based on descriptions of the kidnapper and the license tag of the car into which several witnesses saw the perpetrator force the victim.

At the sentencing phase of the trial, the prosecution presented evidence of Michael’s prior conviction for criminal sexual conduct with a minor, as well as the testimony of a psychiatrist who maintained, based on Michael’s record and violent child pornography found during a search of his home, that Michael was a pedophile who, if released, would inevitably commit other sexual offenses against children. In mitigation, the defense presented evidence of Michael’s service in the Navy and several commendations he received. The defense also presented evidence of Michael’s good prison record during his previous incarceration. The defense presented their own psychiatrist, who acknowledged that Michael was a pedophile, but explained that the etiology of the disorder lay in the fact that Michael had been sexually abused by a priest when he was a child. The doctor also testified that most of the time Michael was able to control his sexual urges, but that he had become dis-inhibited a few days before the crime when he had suffered a closed head injury during an automobile accident. Finally, evidence was presented of Michael’s cooperation with law enforcement in locating the victim’s body, and his deep remorse for having committed the crime. After two days of deliberation, the jury returned a death verdict.

Michael’s convictions and sentence were affirmed on direct appeal. In state post-conviction proceedings, he expresses a desire to be executed. The court, as required by state law, orders a competency evaluation. Michael tells the court appointed experts that he no longer wishes to challenge his sentence. He acknowledges his guilt, and indicates that he is plagued by remorse both due to the crime and his inability to control his sexual arousal when viewing television programs displaying young girls. Michael explains that he has no interest in a life sentence, since he is well aware how pedophiles are treated in the general population, and he also says
that he hopes his execution will give the victim’s family some closure. He also expresses a fear that if he is ever released, he will harm other children. Michael tells the examiners that if he had been a juror, he too would likely have voted for the death penalty in his case.

The experts conclude that Michael is competent. They agree that he is a pedophile. While he is somewhat depressed, the experts believe Michael’s depression is situational, and stems from his deep remorse and feelings of guilt. However, his decision to die is, in their opinion, rational. The court permits Michael to waive his appeals, and he is executed.

Utilizing the current competency standard, Michael is clearly able to volunteer for execution. His waiver is knowing, voluntary and intelligent. Furthermore, under the standard advanced in this article, Michael would also be permitted to waive his appeals and permit the state to carry out the death sentence. There is no question of factual innocence, and he is clearly eligible for the death penalty under existing law. Thus the just punishment prong is satisfied. Furthermore, the weight of the evidence suggests that Michael accepts the appropriateness of the death penalty in his case. He desires to bring closure to the victim’s family, and his statement that if he were a juror he too would have voted for the death penalty indicate as much. There is nothing in the fact pattern (prior suicide attempts, a documented history of depression or other significant mental illness) which indicates the statements should be taken at anything other than face value. Some concern might arise from Michael’s stated fears of how he would be treated in the general prison population were he to ever obtain a life sentence and that he might harm other children were he to be released, but even if that is deemed to be suicidal, it does not, on balance, appear to be his primary motivation. Thus Michael would carry his burden on the second prong as well.

C. Addressing Potential Objections

One response to the preceding four hypotheticals might be: Why not let them all waive? For that matter, why not let incompetent defendants waive as well? It is possible to view death
row inmates as such different creatures from the rest of us that their deaths, however timed or motivated, do not diminish the rest of us. Another possible response is the mirror opposite of the first: Never permit waiver. For such readers, opposition to capital punishment trumps any consideration of individual choice. If one believes that capital punishment is never just, one need not tarry long over the costs of thwarting acceptance of a just punishment. Perhaps nothing more can usefully be said to either of these groups.

But for the reader whose reaction depends in part upon the particular story, this article’s proposal has some appeal. Three related concerns, however, might give that reader pause over the particular standard I have proposed: indeterminancy; malingering; and, cost. Experience with the standard will provide more information about each of these concerns, but viewed at the outset, none are especially problematic.

1. Indeterminancy

In one sense, questions of motivation are familiar to the courts. Thus, for example, a conviction of burglary requires determining whether the defendant had the purpose of committing a crime inside the building into which he broke.\footnote{See, e.g., S.C. Code §16-11-311 (A).} Such questions of intent may, on the same facts, be decided differently by different fact finders, but we tolerate that indeterminancy, and we likewise can tolerate the indeterminancy in deciding intent in this context.

Perhaps, however, the concern is that the motivation at stake here is inherently less graspable. The last story, that of Michael, has provoked different responses. Some readers have thought, contrary to a literal reading of the “facts,” that suicidal motivation was present and should preclude a waiver. In part, this is because a desire to spare the victims’ family further pain can be construed either as wanting-to-die-to-spare-them-pain, or accepting-the-justness-of-their-feelings-that-his-death-is-right. The first construction suggests this is suicide, just as the person who kills himself to spare his family the pain of watching him die slowly from a terminal illness is suicide; the second suggests a victim-focused view of what justice is, but is consistent with accepting the justness...
of his punishment. This may be the time to acknowledge that in some cases, acceptance of the justness of a punishment can coexist with suicidal desires. Indeed, if a person appreciates the terribleness of his crime, that appreciation may spawn both a belief that death is a just punishment and a desire to die to escape feelings of shame and guilt.

In such cases, waiver should be permitted, in part because the desire to die stems from appreciation of the moral severity of what the person has done, which is closely akin to acceptance of the justness of the punishment. The second reason for permitting waiver in these circumstances flows from our understandings of suicide: if one jumps in front of a car to save a child, we do not view such a death as suicide even if the person no longer has the will to live. So long as there is a legitimate acceptance of the justness of one’s punishment – not a feigned acceptance designed to get a waiver accepted – the subjective prong is met.

2. “Malingering well”

The next problem is feigned acceptance. The concern is sometimes expressed in criminal cases that the defendant is feigning mental illness to preclude or mitigate his punishment, that is, that he is “malingering.” But defendants may also “malinger well” when they are sick, often because they wish to avoid the stigma of mental illness. Initially, it might seem that a defendant could feign the permissible motivation — acceptance of a just punishment — in order to bring about the termination of his life. For an intelligent defendant, such “malingering well,” e.g., articulating a desire to “accept responsibility for his actions, may be possible, but it would be difficult.

First, unlike the situation with mental illness, there is little common knowledge of what corroborating behaviors would be exhibited by a person who in fact accepted the justness of his punishment. Second, defense lawyers are unlikely to want to coach their clients on this matter, and the State is unlikely to be effective in doing so, given the adversariness that generally marks the relationship between prosecutors and death row inmates. Finally, suicide victims usually talk about suicide, or show other distinct
signposts of suicide, prior to committing the act. The desire to waive appeals is unlikely - whatever its source - to spring forth fully formed. Rather, there are likely to be conversations with attorneys and family members that can document suicidal motivation even if the volunteer denies it. Moreover, a history of suicide attempts, mental illness, or drug abuse may be helpful to the court in sorting out acceptance from feigned acceptance.

3. Cost

The last question might be cost. Death penalty cases are extraordinarily protracted and expensive as compared to other cases, especially other criminal cases. Whether the time and money involved are well spent is subject to debate, but one might reasonably ask if, given the existence of capital punishment, imposing a further procedure is worth the suicides it will ferret out. My guess is that the overwhelming majority of volunteers are suicidal, which, if one accepts the desirability of deterring suicide, renders the cost-benefit tradeoff a very positive one. It may turn out that so few volunteers are motivated by acceptance of the justness of their punishment that courts will devise a quick screen for the handful of such cases. In any event, it must be remembered that unless the procedure for weeding out suicides is much more cumbersome than the present procedure for determining competency, the only cost of rejecting a volunteer is a return to the costs of the death penalty as ordinarily imposed. Given that most defense attorneys feel obliged to contest competency in every volunteer case, the marginal costs are likely to be small.

VI

CONCLUSION

166 ROBERT D. GOULDING, PREDICTION OF SUICIDE AND ATTEMPTED SUICIDE, in THE INTERNATIONAL HANDBOOK OF SUICIDE AND ATTEMPTED SUICIDE, supra n. 93, at 588 (noting that suicidal ideation, evidence of clinical depression, insomnia, panic attacks, difficulty concentrating, history of suicide attempts, social isolation and schizophrenia are all predictors of suicide among individuals who are suicidal).
167 Id.
Death row inmates are not fungible, and their differences must be taken into account. This seemingly simple principle is a lesson that those on both sides of the capital punishment wars have resisted. For death penalty advocates, the Supreme Court’s declaration that mandatory capital punishment schemes violate the constitution should have signaled the wrong-headedness of broad generalizations. Nonetheless, the states fought truly individualized culpability determinations for decades, as the Court was forced to repeat over and over that any factor that might legitimately become the basis for a sentenced less than death could not be kept from the jury.

For death penalty opponents, the promise of wholesale abolition has been thwarted not only by Gregg, but by McCleskey; if lives are to be saved, it will be one at a time, or maybe, as recent decisions in Atkins and Ring promise, occasionally a few hundred at a time - but not all at once. After the euphoria of Atkins and Ring, just as after the defeat of Stanford, defense lawyers have to go back to the hard, everyday task of

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172 Ring v. Arizona, 536 U.S. 584 (2002) (holding that the jury must unanimously find the existence of any factor which makes a capital defendant eligible for the death penalty). Ring effectively invalidated the capital sentencing scheme in Arizona and several other judge sentencing states. Its implications for other capital sentencing mechanisms where the jury plays an “advisory” role is currently being litigated in Alabama, Florida and Indiana.

173 Stanford v. Kentucky, 492 U.S. 361 (1989) (holding that the Eighth Amendment did not prohibit the execution of sixteen and seventeen year old offenders). However, the Supreme Court recently granted certiorari in Roper v. Simmons, No. 03-633 (Jan 26, 2004), to re-examine whether the execution of juveniles is permitted by the Eighth Amendment.
making the least sympathetic individual seem understandable, or at least human.\textsuperscript{174}

The lesson of volunteers is yet one more iteration of the fundamental lesson of death penalty jurisprudence: individualization. It is understandable both why death penalty abolitionists want to think of volunteers as state-assisted suicide, and why death penalty retentionists want to think of it as acceptance of the justness of punishment; each model gives its proponent a simple picture that justifies on the one hand preventing (or at least delaying) and on the other hand increasing (or at least accelerating) executions for a relatively large class of capital defendants. But once more, sweeping generalizations are misleading. The right answer to the volunteer question – as opposed to the larger capital punishment question – can only be arrived at by looking at the individual volunteer.

One commentator has opposed the right to physician assisted suicide on the basis that “a decent society seeks to inculpate a strong norm in favor of preserving life even when things are extremely bad.”\textsuperscript{175} The same principle holds true in the volunteer context. There should be a strong norm in favor of preserving life even when people have done extremely bad things. When a volunteer is both competent to make legal choices and motivated to accept the justness of his or her punishment, then he should be permitted to waive his further appeals. There are some such defendants, and their decisions should, in fact must, be respected, at least so long as other litigants have the power to override their attorney’s recommendations. On the other hand, even if the volunteer is competent, when suicidal desires rather than acceptance motivates him, courts should not permit waiver.\textsuperscript{176} There are even more such defendants, and their decisions should not, indeed must not, be honored, at least so long assisted suicide is not available to other

\textsuperscript{174} Austin Sarat, When the State Kills 174 (2001) (referring to the successful narrative strategy of the capital defense lawyer as being to change the narrative “from a horror story to a sentimental tale, from a story that evokes fear and disgust to one that evokes pity or identification”).

\textsuperscript{175} Sunstein, supra n. 31, 106 Yale L. J. at 1129.

\textsuperscript{176} One commentator made the following relevant observation: the “power to execute is a power that can be wrongly used and justifications for wrongful use can be the products of self-deception.” Steffenn, supra n. 138 at 115. \textsuperscript{177} Death Penalty Information Center, US Department of Justice, Bureau of Statistics, January 2004. This is the number of death sentences as of December 31, 2002. 2003 Sentencing Statistics are not yet available.
persons in the jurisdiction. When all is said and done, we must treat volunteers like other human beings.
APPENDIX E
NUMBER OF VOLUNTEER EXECUTIONS BY STATE- 1973-2003

<table>
<thead>
<tr>
<th>State</th>
<th>Total Number Sentence to Death</th>
<th>Total Number of Executions</th>
<th>Number of Volunteers</th>
<th>Percentage of those Sentenced to Death who Volunteered for Death</th>
<th>Total Number of Suicides on Death Row</th>
<th>Total Number of Natural Deaths on Death Row</th>
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<tr>
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<td>17</td>
<td>7</td>
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These numbers, provided by both the U.S. Department of Justice, Bureau of Statistics, as well as individual state agencies, the Death Penalty Information Center, and the Legal Defense Fund are almost certainly a low estimate, as most of these agencies, admittedly, have not kept accurate count regarding the cause of death of some prisoners. Thus some of the “natural” deaths on death row were, in all likelihood, suicides.
<table>
<thead>
<tr>
<th>State</th>
<th>Totals</th>
<th>For Death</th>
<th>Voluntary</th>
<th>Federal Government</th>
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## APPENDIX F

### NUMBER OF VOLUNTEER EXECUTIONS BY FEDERAL JUDICIAL CIRCUIT

1973-2002

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<th>Federal Circuit</th>
<th>Total Number of Death Sentences</th>
<th>Total Number of Executions</th>
<th>Number of Volunteers</th>
<th>Number of Volunteers who volunteered</th>
<th>Percentage of inmates executed who volunteered</th>
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