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THE IMPACT OF JURY SERVICE ON SCOTTISH JURORS' HEALTH AND WELLBEING

Abstract: Research by Robertson et al., (2009) suggested a minority of jurors in English and Welsh courts experience significant short and longer term distress from undertaking jury service. This study extended the research to jurors in Scottish trials, with their distinct conventions and procedures. Jurors completed web-based questionnaires measuring juror distress, trauma symptoms, and personal resilience. Results replicated those from England and Wales, showing that some Scottish jurors also experience deterioration in physical and psychological wellbeing, with female jurors, those sitting in longer trials, and dealing with crimes against the person being most affected. Trait resilience did not mitigate such effects.

Keywords: juries; stress; trauma; Scottish incidence

In the United Kingdom, the USA and most Commonwealth countries, jury service is considered a civic duty which all citizens should undertake (Bornstein & Greene, 2017; Scottish Government, 2008; Vidmar, 2000) Involvement in jury service means jurors are displaced from their normal routines, placed among strangers, listen to sometimes distressed witnesses giving harrowing evidence, and then face the responsibility of reaching a group decision on the guilt of the accused. Throughout this process, jurors are forbidden under the penalty of law to share their concerns and reactions with others outside the jury room, then and in the future.

All these stages of the jury process have the capacity to impact on the mental health and well-being of the individuals involved (Dabbs, 1992; Robertson, Davies and Nettleingham, 2009), both in the short-term and for more vulnerable individuals, their long-term mental health and well-being (Diamond, 1993; Sicafuse, Chomos and Miller, 2013). Given the centrality of the jury in Common Law practice, it is surprising how little research has been conducted on the consequences of jury service, particularly in the United Kingdom

Juror Stress and Trauma Research

Literature which addresses the health implications of jury service remains sparse (Sicafuse et al., 2013). This is surprising, given the widespread recognition that traumatic events impact not just on victims, but also those who witness the trauma of others-vicarious or secondary trauma (McCann and Pearlman, 1990). Research has shown symptoms of vicarious trauma in such diverse groups as first responders and prison officers (Brough & Briggs, 2010); jurors, too, might also be affected through exposure to harrowing testimony or grisly exhibits. Most juror studies emanate from the United States. Early research tended to focus on juries serving on high-profile cases, such as murder or child abuse (Dabbs, 1992; Kaplan & Winget, 1992; Feldmann & Bell, 1991, 1993). Kaplan and Winget (1992), for example, interviewed 40 jurors after four "highly charged criminal trials" (p.332) and found that 68% of jurors reported stress-related symptoms including sleeplessness, headaches, heart palpitations, and depression. Similarly, when Feldmann and Bell (1993) interviewed jurors serving on sensational murder cases, common reactions included intrusive thoughts, feelings of restlessness and agitation; sleep difficulties, and disturbing dreams. Both studies also found that reports of such symptoms were more frequent among female jurors. The negative aspects of jury experience may contribute to the widespread attempts by Americans to evade jury summons (Cutler & Hughes, 2001; Reiben, Schwartz and Silverman, 2003) and to procedural changes in jury management in some states (Anand & Manweiller, 2005; Beinen, 1993; Bornstein & Greene, 2017; Shuman, Hamilton, & Daley, 1994).

Later US research sought to sample juror experience in a more representative range of trials. Shuman, Hamilton, and Daley (1994) examined the reactions of jurors in the Dallas area to involvement in either "traumatic" (trials involving serious inter-personal assaults) or "non-traumatic" trials. At each stage of the trial, jurors in traumatic trials reported

significantly more negative health symptoms, and were six times more likely to develop symptoms consistent with a diagnosis for depression, than jurors on non-traumatic trials (12.3% vs. 2.6% respectively). Shuman et al. also found that female jurors reported significantly more adverse symptoms than males.

Again in the USA, a major survey undertaken by the National Center for State Courts (1998) canvassed the views of 401 jurors sitting in both civil and criminal courts in six jurisdictions to rate their reactions on a series of scales relating to jury duties and potential stressors associated with jury service. Both civil and criminal cases were perceived as eliciting stress, with higher levels being associated with longer and more complex trials. Trials involving offences against the person were generally associated with high reported stress, with the highest ratings being reserved for murder cases where, in addition to reaching a verdict, the jury had to decide upon whether the death penalty should be invoked (86%). For civil trials, the sources of stress were somewhat different, with participants reporting significant anxiety and irritation over taxing detail and boredom. Irrespective of the type of trial, jurors rated 'deciding on a verdict' and 'juror deliberations and discussions' as their two most demanding tasks.

American courts have sought to mitigate the impacts of adverse experience among jurors involved in high profile cases through the process known as 'juror debriefing'. Subsequent to trial, mental health professionals are brought in to listen to jurors' concerns and to offer reassurance and strategies for coming to terms with their experiences (Dabbs, 1992; Feldmann & Bell, 1991, 1993; Miller & Bornstein, 2004; National Center for State Courts, 1998). Juror debriefing derives its rationale from the controversial 'critical incident stress debriefing' developed to deal with those exposed to traumatic incidents such as emergency service personnel (Feldmann & Bell, 1993). Some research suggests that such interventions can make the individuals concerned feel worse, rather than better (Kagee,

2002). Its effectiveness with jurors is equally equivocal (Bertrand et al., 2008; Nordgren & Thelen, 1999). In a major study, Bornstein Miller, Nemeth, Page, and Musil, (2005) recorded levels of jurors' stress, anxiety, and depression immediately after completion of a trial; after a subsequent 'juror debriefing' session, and finally, one month later. While jurors reported the sessions as helpful, their rated stress levels were not reduced by the intervention. The same study again found that female jurors were generally more adversely effected, reporting more often 'feeling emotionally numb', having 'upsetting thoughts', and 'feeling distant or cut off' than males. As in earlier research, trial complexity, severity and duration adversely influenced stress levels; 40% of those questioned reported some stress, with little perceptible difference between the civil and criminal trials.

In conclusion, these American-based studies yield copious evidence that jurors, during the course of a trial, can experience elevated stress and anxiety, sufficient in some instances to fulfil the criteria necessary for a diagnosis of post-traumatic stress disorder (Kaplan & Winget, 1992; Shuman et al., 1994), Further, these symptoms can persist and are not readily dissipated through a debriefing process (Bornstein et al., 2005). However, caution should be exercised before these conclusions are extended to juries in the United Kingdom. There are numerous differences between US practice and United Kingdom legal process (Duff, 2000; Hans, 2008; Kaplan & Martin, 2006). These include:

- The range of cases eligible for jury trial, which are much broader in the US
- The way that juries are selected: 'peremptory challenge' enables US counsel to influence jury composition in a way thought sympathetic to their cause
- Most US criminal courts demand unanimous, rather than majority verdicts

- The requirement in some cases that juries determine not only guilt, but also the punishment, which can include the death penalty in those states which retain capital punishment
- In many states, jurors are not legally constrained from discussing their experiences and reactions subsequent to trial

Are British Jurors Subject to the Same Stressors?

Until recently, there had been no published research on the mental health impact for those who undertake jury service in the Untired Kingdom, perhaps because of Section 8 of the Contempt of Court Act 1981, which prohibits jurors from obtaining, soliciting, or disclosing any particulars of jury deliberations during or after the trial under penalty of imprisonment (Duff, 2000). The limitations imposed by this legislation arguably serve to isolate jurors in the UK more than in the US, as they are unable to discuss with family members or friends the burden they bear (Bienen, 1993; Chopra & Ogloff, 2000). The wide-ranging restrictions of the Act also inhibit research. In the words of an official publication (Thomas, 2010), the Act 'has created confusion about what jury research can and cannot be conducted and has contributed to an information vacuum about juries in this country' (p.1). Researchers in the UK, therefore, have to consider their methodology carefully if they seek participation from real jurors (Duff, 2008).

Robertson, Davies, and Nettleingham (2009) conducted the only published survey of juror experiences in the UK. The authors sought to explore the prevalence and longevity of juror distress in England and Wales in the light of US experience. Robertson et al. (2009) invited participants to complete an extensive web-based questionnaire about their jury experiences, which included measures of trauma and stress during the trial, trait anxiety, and

prior trauma. Some 68 participants were solicited through media appeals for those who had served recently as jurors. Informed by previous literature (Bornstein et al., 2005; Shuman et al., 1994), respondents were classified as having served on 'person-centred' or 'property-centred' trials. Participants completed a series of questionnaires, including The *Jury Duty Stress Scale* adapted from the NCSC study and a number of standardised measures of anxiety and trauma. Some personal information, such as age, gender and ethnicity was collected but submissions were anonymous. A Professor of Criminal Law adjudicated on what questions could be asked in the light of the Section 8 legislation.

Despite differences in procedure, the results reported by Robertson et al.'s (2009) survey were strikingly consistent with the US findings. Jurors reported experience of diverse trauma symptoms during and after their jury service, including sadness, headaches, feeling isolated, flashbacks, and disrupted sleep (Robertson et al., 2009). Jurors who had served on person-centred trials reported significantly higher levels of stress than those on property-centred trials. Both gender and length of trial mediated juror's reported stress levels, with both women and jurors on longer trials reporting the highest stress levels. Robertson and colleagues (2009) were cautious in representing their findings as a national picture, given the modest sample size and differences in legal procedure North and South of the Border.

The Current Research

To date, there has been no systematic survey of juror experiences in Scotland. Though research conducted in England and Wales (Robertson et al., 2009) is likely applicable to jurors who serve in Scottish courts, a number of variations in Scots law and procedure make this assumption questionable. Differences between the two jurisdictions include the availability of the 'not proven' verdict to Scottish jurors, which might ease the pressures on decision making; the larger size of Scottish juries (15 rather than 12 persons) and the

availability in Scotland of a verdict on a simple majority, which might lead to greater diffusion of individual responsibility (see Duff, 2000; Gane. 2001 for further details).

The current study is modelled upon the study of Robertson et al. (2009) and uses some of the same measures, both to examine the factors which might predispose Scottish jurors to experience psychological symptoms, and to compare them to jurors from England and Wales. In addition, given many jurors appear robust to stressors inherent in jury service, opportunity was taken to examine a protective factor which might mitigate distress- trait resilience-which has been associated with successful psychological and physiological adaptation to stress (Bonanno, 2008; Campbell-Sills, Cohan, & Stein, 2006). Jurors who scored highly on a measure of trait resilience might be expected to demonstrate lowered sensitivity to jury stressors.

Based on the existing jury research, it was predicted that levels of stress and trauma would be higher among:

- Scottish female compared to male jurors
- in person-centred rather than property-crime, and
- longer (greater than one week) rather shorter trials.

In addition, there would be a negative correlation between levels of juror distress and resilience scores.

Recruitment and Nature of the Sample

Poster adverts and appeals on social media were used to recruit 50 adults who had experience of jury service in Scotland and were prepared to answer questions regarding their feelings and experiences of the event. The British Psychological Society, the Scottish Centre for Criminal

Justice Research, and Victim Support Scotland all assisted in circulating the invitation. The demographic characteristics of participants are detailed in Table 1.

Table 1 about here	

Questionnaires Employed

Participants completed a series of web-based questionnaires. Respondents were first directed to an *information page* and *consent form* to confirm their understanding of the research, their right to withdraw, that no details of the particular case should be disclosed, and that all responses would be anonymous They were reminded of the Contempt of Court Act (1981) which bans disclosure of any juror deliberations during or subsequent to the trial, and were assured that questions would focus solely on their personal experience as a juror and not include any questions which would infringe Section 8 of the Act, :They then were invited to provide: (i) Demographic information: covering age, gender, ethnicity and employment status (ii) Trial characteristics: length in days, time since the trial, type of court and the broad category of offence charged (iii) Trauma Symptoms Checklist (Briere & Runtz, 1989): jurors checked any of a range of psychological and physical symptoms they had experienced during and/or after the trial (e.g. 'headaches'; 'insomnia'; 'anxiety attacks'); (iv) Jury Duty Stress Scale (Bertrand et al., 2008): the original was adapted for use in Scotland and required jurors to rate 28 different facets of jury service (e.g., 'jury selection'; 'grisly evidence'; 'changes in daily routine') on five-point Likert scales from 'not at all stressful' to 'extremely stressful', and (v) Ego-Resilience Scale (Block & Kremen, 1996): this measured trait resilience by

asking jurors to rate 14 different personal character statements (e.g. 'I am generous with my friends', 'I am more curious than most people') on four-point Likert scales from 'does not apply at all' to 'applies very strongly'. On completion of the questionnaire, they were taken to a debrief page which invited any participant who had been distressed by completing the questionnaires to seek help from their GP or the Samaritans. A pilot study suggested that the questionnaires took approximately 15 minutes to complete

Crime and Trial Characteristics

Table 2 shows the length of trials in days experienced by our respondents and the type of court (Sheriff/High Court) where the trial took place. Some 68% of participants served on trials of five days or less, but 18% sat on trials which lasted over two weeks. Trial experiences were coded as "short" if they were one week or less, with anything over one week coded as "long": the average trial length in Scotland was 6 days (Scottish Court Service, 2015). All participants in this study had served on criminal trials and their jury experience dated from less than one month, to over five years previously. Regarding court type, 60% of participants (n= 30) had served on trials within Scottish Sheriff Courts, the remaining 40% (n= 20) in the High Court. There was considerable variation in participant's reports of the type of crime on trial (see Table 2), the most common being assault (28%), rape (14%), grievous bodily harm (10%), and murder (10%). Using the classification employed by Robertson et al..(2009), 84% were classified as person-centred offences and the remaining 16% dealt with property-crime.

Table 2 about here	

Trauma Symptoms Reported

Analysis of the responses from the *Trauma Symptoms Checklist* confirmed that Scottish jurors experienced a range of symptoms of distress, both during and after the trial. Among the most common were sadness (44% during; 22% after); waking early in the morning (22% during; 4% after); headaches (20% during; 2% after); restless sleep (20% during; 10% after); not feeling rested in the morning (18% during; 8% after); feeling tense all the time (16% during; 0% after); feelings of guilt (16% during; 14% after), and 'spacing out' (thinking irrelevant thoughts during the trial) (16% during; 12% after). Most symptoms occurred during the trial, but some persisted after its conclusion.

As predicted, female jurors (M= 4.84, SD= 6.36) reported experiencing more trauma symptoms than males (M= 1.46, SD= 1.85). A Student's t-test confirmed this difference was statistically significant, t (48) = 1.87, p < .05 (one-tail test). Chi-square tests revealed statistically significant relationships between gender and some trauma symptoms. A higher proportion of female jurors reported sleep disturbances during the trial than male jurors: a significant relationship was found between gender and reports of restless sleep (χ^2 = 4.39, df= 1, p < 0.05) and not feeling rested in the morning (χ^2 = 3.86, df= 1, p < 0.05).

Consistent with the second prediction, jurors in trials involving person-centred crimes (M=4.19, SD=5.80) reported more trauma symptoms than jurors on property crime trials (M=2.75, SD=5.52), although this overall difference fell short of statistical significance. There was a significant relationship between crime-type and reports of sadness during the trial. Jurors on person-centred trials reporting more sadness (52.4%) than jurors trying property-crimes (0%) $(\chi^2=7.48, df=1, p<0.01)$.

The final prediction, that jurors on longer trials (M= 5.19, SD= 5.64) would experience more trauma symptoms than those on shorter trials (M= 3.38, SD= 5.76), was again in the expected direction, but fell short of statistical significance. Consistent with the hypothesis, jurors involved in longer trials more frequently reported experiencing 'spacing out' (χ^2 = 4.07, df= 1, p < 0.05), headaches during the trial (χ^2 = 8.29, df= 1, p < 0.01), feeling sad both during (χ^2 = 9.17, df= 1, p < 0.01) and after (χ^2 = 6.49, df= 1, p < 0.01) the trial than jurors on shorter trials.

Reported Stress

Analysis of the *Jury Duty Stress Scale* confirmed that the most stressful aspects of a trial for Scottish jurors were associated with the deliberation phase (see Table 3). The top three stressors were 'deciding on a verdict' (M= 2.90, SD= 1.282), 'jury discussion and deliberations' (M= 2.84, SD= 1.184), and 'fear of making a mistake' (M= 2.84, SD= 1.299). Independent *t*-tests determined there were significant gender differences on a number of items: female jurors were significantly more likely to report being stressed by deciding on a verdict, t (48) = 2.58, p < 0.01; fear of making a mistake, t (48) = 2.31, p < 0.05; jury selection, t (48) = 2.19, p < 0.05; disturbing or grisly evidence, t (48) = 2.09, p < 0.05, and reaching a majority, not unanimous verdict, t (48) = 1.99, p < 0.06. Furthermore, jurors' levels of reported stress differed significantly by the type of crime: jurors on trials involving property crimes were more likely than those with person-centred crimes to highlight being distressed by sitting on a boring trial, t (48) = 3.24, p < 0.01; trial interruptions or delays, t (48) = 2.01, p < 0.05, and the jury being unable to reach a verdict, t (48) = 2.89, p < 0.01. Finally, jurors on longer trials reported being significantly more stressed by jury deliberations and discussions, t (48) = 2.28, p < 0.01, than jurors on shorter trials.

Table 3 about here

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A Pearson's correlation coefficient between overall stress levels and number of trauma symptoms was highly significant, $r_s = .69$, N= 50, p < 0.01, indicating a strong correlation between a jurors' exposure to perceived stressors and their consequent symptoms. Overall scores on the Ego-Resilience Scale (M= 41.58, SD= 6.24) were high. According to the trait resilience test (Block & Kremen, 1996), the majority of participants (82%) were classified as 'highly' or 'very highly' resilient. Spearman rank correlations were run between participants' resiliency scores and total number of trauma symptoms reported and their overall scores on the Juror Duty Stress Scale. Resilience was not found to correlate significantly with either reported trauma ($r_s = .10$, N = 50, ns) or reported jury stressors ($r_s = .14$, N= 50, ns).

Are Scottish Jurors a Distinct Group?

The results from this analysis of Scottish experiences of jury service suggest that, despite differences in legal procedures and the demands on jurors, the same concerns are prevalent as those previously reported for the US and England and Wales. Scottish jurors exhibit the same somatic symptoms of stress, particularly sadness, disturbances in sleep, and headaches as their counterparts in other jury-based legal systems (Antonio, 2008; Feldmann & Bell, 1993; Kaplan & Winget, 1992; Robertson et al., 2009; Shuman et al., 1994).

In accord with previous findings (e.g. National Center for State Courts, 1998; Robertson et al 2009; Shuman et al., 1994), female jurors reported more trauma symptoms overall than did males, particularly restless sleep and not feeling rested in the morning. Also consistent was the impact of type of trial, with person-centred trials tending to report more stress overall than property-centred (e.g. Bornstein et al., 2005; National Center for State Courts, 1998; Robertson et al., 2009; Shuman et al., 1994), with notably elevated levels of sadness being reported in the current study. Finally, jurors involved in trials lasting over a week reported somewhat higher levels of stress overall relative to shorter trials (Bornstein et al., 2005; Robertson et al, 2009); though this difference again fell short of statistical significance. Jurors on longer trials did report significantly more instances of 'spacing out', headaches, and sadness symptoms compared to those who sat on shorter trials.

Overall levels of reported trauma were less elevated in these Scottish jurors than those found in the English and Welsh sample. This may reflect limited sample size and/or the unequal distribution across grouping variables. A larger scale study is needed to determine if this is a sampling issue or whether it points to greater resilience or better preparation among Scottish jurors.

As regard the impact of various stages of the trial process, results from *the Jury Duty Stress Scale*, found that issues around decision-making, particularly deciding on a verdict, jury discussion and deliberations and fear of making a mistake, aroused greatest concern. These findings mirror those from North America (Shuman et al, 1994; Bornstein et al., 2005) and England and Wales (Robertson et al. 2009) and suggest that for most jurors, deliberation, rather than harrowing evidence, is the greatest source of potential stress in many trials. Interestingly, receiving a summons for jury duty, reporting for jury service, and jury selection were also rated as significant sources of stress for some Scottish jurors. These findings substantiate claims made by the National Center for State Courts (1998) that juror stress can arise before the commencement of the trial, and highlights the importance of effective pretrial communication and management of expectations for jurors. Pre-trial aspects of jury

service did not figure as substantial sources of stress among English and Welsh jurors (Robertson et al., 2009) and might suggest more effective jury management by the Jury Summoning Bureau in England and Wales, compared to the Scottish Courts and Tribunals Service.

Given the strong positive correlation between an individual's score on the Trauma Symptoms Check List and their overall ratings on the Jury Duty Stress Scale, it might be expected that factors like gender, trial type and length which impact on trauma might also influence ratings on the Stress Scale, Detailed examination of the individual items on the Scale confirms this. Female jurors reported being significantly more affected than males by jury selection, disturbing or grisly evidence, deciding on a verdict, fear of making a mistake, and reaching a majority, not unanimous, verdict than did males. These and other gender effects may reflect real differences in how men and women respond to the trial process, but could also reflect gender-driven differences in a readiness to disclose fears (Smith & Torstensson, 1997). As regards trial type, those sitting on property crime trials reported significantly more stress from being on a boring trial, trial interruptions or delays, and being unable to reach a verdict, than jurors on person-centred trials. As regard trial length, longer trials were associated with more reported stress during jury deliberations and discussions compared to shorter trials, probably reflecting the length and complexity of jury deliberations typically observed during longer trials.

The findings provided no support for the view that level of emotional resilience, as measured by the Ego Resilience Scale (Block & Kremen, 1996) had any overall influence on reported trauma or ratings of jury stress. Scale scores in the current sample were skewed toward high resilience which may have militated against finding significant effects. However, given the high levels of resilience shown, it is notable that participants still reported significant amounts of stress and trauma from jury service.

Caution should be exercised in drawing sweeping conclusions from a relatively small and self-selected sample of participants. Relatedly, the demographic characteristics of the sample (the lack of ethnic minority representation; the over-representation of female jurors and under-representation of property crimes) are a further constraint. However, as has been noted, the general profile of concerns which emerge from the study are consistent with earlier research in other jurisdictions which rely upon jury decision-making. Future research might wish to draw upon a larger and more representative sample through recruitment of participants at court subsequent to trial, but such a study would be problematic given the traditional sensitivities surrounding juries in the UK (Duff, 2008)

Conclusions

Overall, the results from this first survey suggest that the concerns for the mental health of some jurors raised by previous research and in particular the study by Robertson et al (2009) of jurors from England and Wales also pertain to Scotland, with its own distinctive legal system. It is important to stress that this research does not seek to challenge the principle of trial by peers which is one of the central features of British Common Law. As Robertson et al. noted, some moderate level of stress is inherent in the legal process, whether as defendant, witness or juror. Rather, it underlines the importance of the Crown Office and Procurator Fiscal Service exercising as much care of jurors as they do of witnesses, paying due attention to their concerns and wellbeing.

There are suggestions in the current data that jurors in Scotland found the process of juror summoning and selection to be a significant source of distress; measures to reduce such fears and concerns would be beneficial to the effectiveness of the judicial process as a whole. In the USA, where a culture of evading jury duty is prevalent (Bornstein & Greene, 2017; Sams, Neal & Brodsky, 2013), the courts have sought to improve pre-court support for jurors,

through more careful preparation for the role, clear directions as to where and when to attend court and the provision of dedicated parking spaces for those unable to use public transport.

The results of this study are consonant with the earlier findings of Robertson et al. (2009) that a minority of British jurors suffered adverse effects from jury service which could affect their long-term mental health, particularly when the evidence resonated with incidents from their own life histories. They noted the general absence of juror support in England and Wales and suggested the appointment of dedicated supporters, similar to those available for vulnerable witnesses, who could discuss specific concerns under the privilege of a shared oath. Scotland, however, has already moved to address these issues: the Rivers Centre run by Lothian Health Board provides a specialist service covering the health, social and welfare needs of people affected by psychological trauma. For some years, the Scottish courts have had provision to refer jurors who have been adversely affected by their experiences to this facility. No data is publicly available as to the frequency of such referrals, but in the authors' experience, it is a unique facility in the United Kingdom and recognition of the concerns generated by jury service, which the current research highlights.

Note: We are grateful to a senior academic lawyer, practicing in Scotland, for his assistance in ensuring that the questionnaires employed did not infringe Section 8 of the 1981 Act.

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TABLE 1

Demographic characteristics of participants.

Demographic	characteristic	n	%
Age	18- 24	8	16
	25- 44	27	54
	45- 64	12	24
	65 and over	3	6
Gender	Male	13	26
	Female	37	74
Ethnicity	White	49	98
	Mixed race	1	2
Employment	Employed	44	88
Status	Student	2	4
	Retired	4	8

TABLE 2

Length of trial and type of court experienced by participant jurors

Trial characteristic		n	%
Trial length	1-2 days	11	22
	3-5 days	23	46
	1-2 weeks	7	14
	2-3 weeks	3	6
	> 3 weeks	6	12
Time since	< 1 month	1	2
trial	1-6 month	8	16
	6-12 month	6	12
	1-5 years	16	32
	> 5 years	19	38
Court type	Sheriff Court	20	40
	High Court	30	60

TABLE 3 Top-ten sources of stress rated by jurors (N=50)

Source of stress	M	SD	n
Deciding on a verdict	2.90	1.282	41
Jury discussion and deliberations	2.84	1.184	41
Fear of making a mistake	2.84	1.299	43
Jury selection	2.72	1.278	40
Reporting for jury service	2.60	1.294	37
Disagreements/differences amongst jurors	2.46	1.182	37
Sentencing a criminal defendant	2.28	1.310	31
Receiving a summons to jury service	2.26	1.084	37
Disturbing/grisly evidence	2.12	1.206	49
Being on a long trial	2.08	1.259	27

(Notes: M= mean; SD= standard deviation of the ratings. All ratings based on a five-point scale where 1= 'not at all stressful' and 5= 'extremely stressful'. Numbers (n) indicate the number of respondents who mention a given stress source, based on a maximum total of 50).