



## Gender issues in the assessment and manifestation of psychopathy

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## Outline

- I. Psychopathy: different in women?
- II. Multicenter study gender
- III. Case Lisa



## Psychopathy in risk assessment

- Psychopathy is an important risk factor for violence / recidivism
- Psychopathy often incorporated as risk factor in risk assessment tools



## Psychopathy Checklist-Revised (PCL-R)

<b>INTERPERSONAL</b> Glibness, superficial charm Grandiose sense of self-worth Pathological lying Conning / manipulative	<b>IMPULSIVE</b> Need for stimulation / proneness to boredom Parasitic lifestyle Lack of realistic, long-term goals Impulsivity Irresponsibility
<b>AFFECTIVE</b> Lack of remorse or guilt Shallow affect Callous / lack of empathy Failure to accept responsibility of own actions	<b>ANTISOCIAL</b> Poor behavioral controls Early behavioral problems Juvenile delinquency Revocation of conditional release Criminal versatility
<b>OTHER</b> Promiscuous sexual behavior Many short-term marital relationships	



## Psychopathy Checklist-Revised (PCL-R)



40 = **prototype psychopath**  
 } = **high on psychopathy**  
 30  
 } = **traits of psychopathy**  
 20  
 } = **low on psychopathy**  
 0

## Different manifestation psychopathy in women?

**Example item 1**  
*Glibness, superficial charm*

Some inmates create an image of being a **macho** or a **thoug guy**




### Different manifestation of psychopathy in men and women?




“What drives both psychopathic men and women is: power over others, the expectation of gain and glorification of the self”  
*Logan & Weizmann-Henelius, 2012, p. 107*

### Different manifestation of psychopathy in women?

- **Behavioral expression:** more histrionic, manipulative sexual behavior, lure others to criminal behavior
- **Interpersonal symptoms** like grandiose sense of self-worth more muted
- **Psychological meaning:** promiscuity as strategy
- Societal norms may affect coding (e.g. financial dependency)



Forouzan & Cooke, 2005; Kreis & Cooke, 2011; Roberts & Coid, 2007

### PCL-R in women

- Lower scores and prevalence rate psychopathy (9-23% ♀ vs 15-30% ♂)
- Interrater reliability: moderate to good
- Predictive validity: equivocal
- Factor structure: 3 factor model better fit

True lower prevalence psychopathy in women, or is the PCL-R not optimally fit to assess psychopathy in women?

Logan, 2009; Logan & Weizmann-Henelius, 2012; McKeown, 2010; Nicholls et al., 2005; Vitale et al., 2002; Warren et al., 2005

### Women high on psychopathy

#### Summary research results

- Compared to **women** low on psychopathy
  - More instrumental violence / to strangers
  - More chronic offenders, less often murder
- Compared to **men** high on psychopathy
  - More fraud, deceit
  - More often a score 2 on the items:
    - Conning / manipulative
    - Promiscuous sexual behavior



Roberts & Coid, 2007; Strand & Belfrage, 2005; Warren et al., 2005; Weizmann-Henelius et al., 2010

### Psychopathy and violence risk assessment in women

- Significant differences men / women in the expression of violence, violence risk factors and manifestation of psychopathy
- Most tools developed / validated in males
- PCL-R item descriptions focus on 'male' (overt antisocial) behavior

Are commonly used tools, like the HCR-20 or PCL-R well enough suited for use in women?

Garcia-Mansilla et al., 2009; McKeown, 2010

### Female Additional Manual (FAM)

Additional guidelines to HCR-20 / HCR-20<sup>V3</sup> for women:

- New items and additional final risk judgments
- Additional guidelines to several Historical factors, e.g., use of lower PCL-R cut-off score (M + SD; experimental)

No Possible Yes

PCL-R = 0-14  
 PCL-R = 14-23  
 PCL-R ≥ 23

de Vogel et al., 2012; 2014

### FAM Gender-specific items



<p><b>Historical items</b></p> <ul style="list-style-type: none"> <li>• Prostitution</li> <li>• Parenting difficulties</li> <li>• Pregnancy at young age</li> <li>• Suicide attempt / self-harm</li> <li>• Victimization after childhood*</li> </ul>	<p><b>Clinical items</b></p> <ul style="list-style-type: none"> <li>• Covert / manipulative behavior</li> <li>• Low self-esteem</li> </ul> <p><b>Risk management items</b></p> <ul style="list-style-type: none"> <li>• Problematic child care responsibility</li> <li>• Problematic intimate relationship</li> </ul>
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\* This item is no longer needed with HCR-20<sup>13</sup>

### II Dutch Multicenter study

Characteristics of women in forensic psychiatry



### Importance of more knowledge female offenders

- **Rising numbers**
- **Intergenerational transfer**
  - Children of violent / antisocial mothers: high risk of multiple problems (criminal, mental health, addiction, risk taking behavior)
- **Recognition of victims of female offending**
  - The experience of female perpetrated (sexual) abuse is harmful and damaging. Sometimes reported by victims to be even worse because it led to a deeper sense of betrayal

De Vogel & Nicholls, 2016

### Acknowledgments



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- Jeantine Stam (Van der Hoeven)
- Nienke Verstegen (Van der Hoeven)

### Multicenter study

Method

- Five Dutch forensic psychiatric settings
- N = 275 female forensic psychiatric patients
- N = 275 males matched on year of birth, admittance, judicial status
- Comprehensive questionnaire including several tools (PCL-R, Historical items HCR-20 / FAM) was coded based on file information by trained researchers

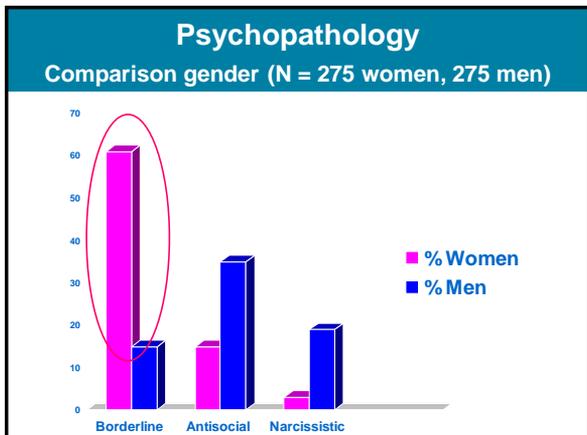


de Vogel et al., 2015

### Multicenter study

Aims

- To gain more **insight** into criminal and psychiatric characteristics of female forensic psychiatric patients, especially characteristics that may function as risk or protective factors for violence.
- Possible **implications** for psychodiagnostics, risk assessment and treatment in forensic psychiatric settings, but possibly also in general psychiatry or in the penitentiary system.



### Subgroups women Psychopathology

- **Borderline Personality Disorder**
  - More severe victimization history
  - More incidents during treatment, dropout
- **Intellectual disability**
  - More prostitution
  - More stranger victims, less homicide, filicide
  - More 'vulnerable'
  - More severe victimization history

Karsten et al., 2015; de Jong et al., 2014 All  $p < .05$

### Subgroups women Offenses

- **Filicide**
  - Less criminal history
  - Less often previous treatment
  - More often depression / PTSS, lower on PCL-R
  - Less violent incidents during treatment
- **Arson**
  - Psychiatric problems prevailing (Borderline)
  - More incidents during treatment, dropout
- **Sexual**
  - Small group (4%)
  - Always with (male) co-offender

All  $p < .05$

### Two studies into psychopathy

1. Comparison 221 women with and without psychopathy (Klein Tuente, de Vogel, & Stam, 2014)
2. Gender differences manifestation psychopathy 197 ♀ and 197 ♂ (de Vogel & Lancel, 2016)

### Results Study 1

Psychopathic vs. non-psychopathic women (N = 221)

**Criminal characteristics:**

- Younger age at first conviction
- More criminal versatility
- More often stranger victims
- Less often arson and lethal violence
- More often 'bad' motives for offenses less often 'sad'

All  $p < .05$ ; Klein Tuente et al., 2014

### Study 2

Comparison men and women with psychopathy

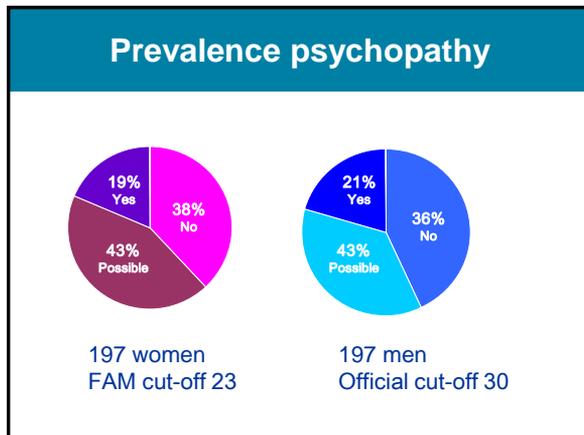
**Procedure**

- N = 197 women and 197 matched men
- PCL-R was used (66% in consensus)
- Psychopathy was defined as:
  - Women: PCL-R  $\geq 23$
  - Men: PCL-R  $\geq 30$
- Taxonomy of motivations inspired by Coid (1998)

de Vogel & Lancel, 2016

### Prevalence psychopathy

	Women	Men
Mean PCL-R score	16.5 (6.7)	21.4 (8.6)
Range	0 - 33.3	1- 38.9
Official cut-off score	3.0%	20.8%
FAM cut-off score	19.3%	49.2%



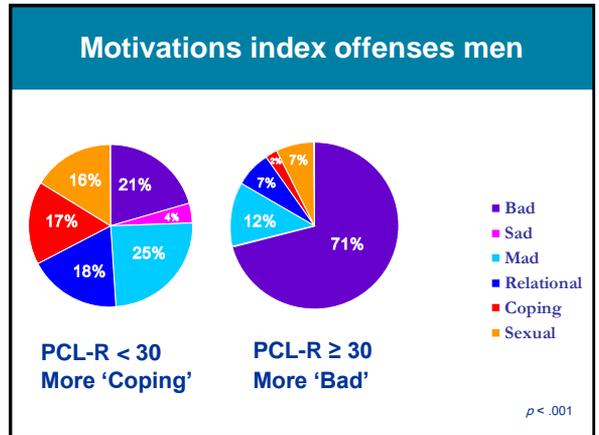
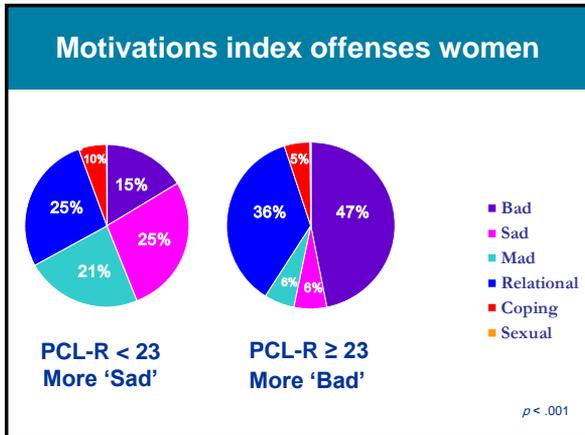
- ### Gender differences in PCL-R scores
- 197 women / 197 men
- Women significantly higher scores on:
    - Many short term marital relationships
  - No significant differences:
    - Conning / manipulative
    - Poor behavioral control
    - Impulsivity
  - Men significantly higher scores on all other items
- p* < .01

- ### Summary Study 2
- 197 women / 197 men
- Clear differences between women and men high versus low on psychopathy**
- **History:** more often unemployed, no diploma, financial problems
  - **Criminal history:** younger age first conviction, criminal versatility, strangers as victims, less often arson and lethal violence, bad motivations
  - **Treatment:** more dropout, manipulative behavior and less self-destructive behavior
- p* < .01

- ### Summary Study 2
- 197 women / 197 men
- Psychopathic women are more 'like men', but still several gender differences:**
- Offending: more fraud, less sexual, motivations: more relational frustration, less instrumental
  - Psychopathology: more BPD
  - Treatment: more incidents during treatment of manipulative and self-destructive behavior
- p* < .001

### Taxonomy of motivations inspired by Cold (1998)

<b>Mad</b>	Psychotic, Compulsive urge to harm/kill
<b>Bad</b>	Expressive aggression, Power domination and control, Illicit gain, Excitement, Undercontrolled aggression
<b>Sad</b>	Cry for help/attention seeking, (Extended) suicide, Despair, Influenced by partner
<b>Relational frustration</b>	Revenge, Jealousy, Threatened/actual loss, Displaced aggression, Victim precipitation
<b>Coping</b>	Relief of tension/dysphoria, Hyperirritability
<b>Sexual</b>	Paraphilia, Sexual gratification, Sexual conflict

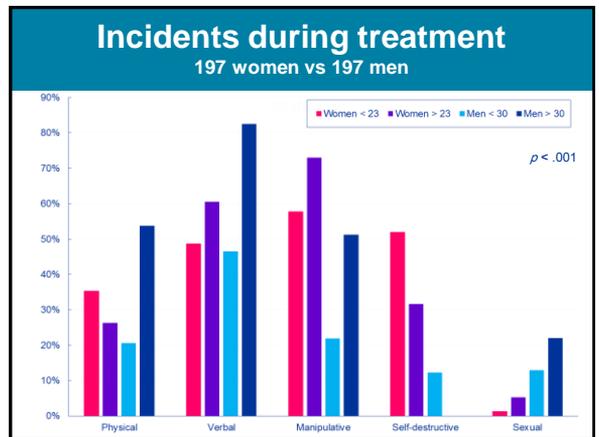


### Gender differences motivations Psychopathic women versus men

Women ≥ 23  
 More Relational frustration

Men ≥ 30  
 More 'Bad'

$p < .01$



### Predictive validity Incidents during treatment

**Women:**

- PCL-R total score **moderate** predictor of manipulative behavior, but good when verbal violence / threats was included

**Men:**

- PCL-R total score **good** predictor of violence, verbal violence / threats, manipulative behavior and internal transfer

All  $p < .05$

### Case Lisa

### Case Lisa

- 35 year old woman
- Youth: domestic violence, neglect, sexual abuse
- 18 y: prostitution
- Unstable and violent relationships
- Suicide attempts
- Previous offenses: murder (child 1 y), drug smuggling
- Index-offense: stalking (ex-husband, children, ex-family in law, friends ex)
- Mandatory treatment with maximized duration (4y)

### Case Lisa

- Diagnoses: Borderline PD, Narcissistic PD and traits Antisocial PD
- PCL-R = 26
- Treatment:
  - Emotional outbursts
  - Manipulative, passive aggressive
  - Turmoil surrounding Lisa
  - Victim role

### HCR-20<sup>V3</sup> Lisa

Coding:  
 Yes, present  
 Partially / maybe  
 No, not present

<b>Historical items</b> H1 Violence H2 Other antisocial behavior H3 Relationships H4 Employment H5 Substance abuse H6 Major mental disorder H7 Personality disorder H8 Traumatic experiences H9 Violent attitudes H10 Treatment or supervision reponse	<b>Clinical items</b> C1 Insight C2 Violent ideation or intent C3 Symptoms of major mental disorder C4 Instability C5 Treatment or supervision reponse  <b>Risk management items</b> R1 Professional services and plans R2 Living situation R3 Personal support R4 Treatment or supervision reponse R5 Stress / coping
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### SAPROF Lisa

Coding:  
 Not present  
 Partially / maybe  
 Present

<b>Internal factors</b> 1. Intelligence 2. Secure attachment in childhood 3. Empathy 4. Coping 5. Selfcontrol  <b>Motivational factors</b> 6. Work 7. Leisure activities 8. Financial management 9. Motivation for treatment 10. Attitudes towards authority 11. Life goals 12. Medication; n.a.	<b>External factors</b> 13. Social network 14. Intimate relationship 15. Professional care 16. Living circumstances 17. External control
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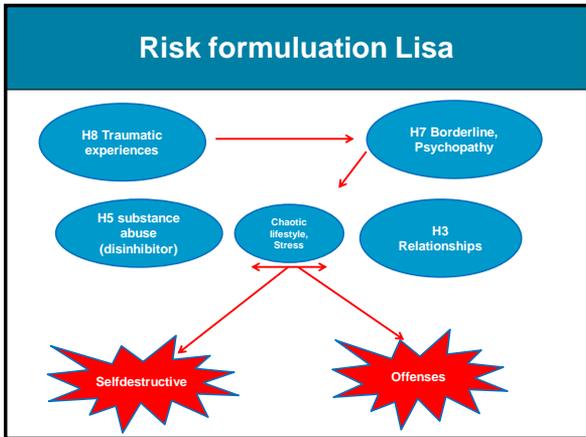
### FAM Gender-specific items Lisa

Coding:  
 Yes, present  
 Partially / maybe  
 No, not present

<b>Historical items</b> <ul style="list-style-type: none"> <li>• Prostitution</li> <li>• Parenting difficulties</li> <li>• Pregnancy at young age</li> <li>• Suicide attempt / self-harm</li> <li>• Victimization after childhood</li> </ul>	<b>Clinical items</b> <ul style="list-style-type: none"> <li>• Covert / manipulative behavior</li> <li>• Low self-esteem</li> </ul> <b>Risk management items</b> <ul style="list-style-type: none"> <li>• Problematic child care responsibility</li> <li>• Problematic intimate relationship</li> </ul>
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### Case Lisa: Conclusions

- Risk of violence to others:
  - Context with mandatory treatment: moderate
  - Context without mandatory treatment: high
- Additional value of FAM:
  - Psychopathy and Covert / manipulative behavior
  - Problematic child care responsibility = crucial risk factor
  - Risk for Self-destructive behavior
- Protective factors: mostly external
- Risk management: control, cost/benefit analyses



### Psychopathy in women

#### Overall conclusions

- Manifestation in women more nuanced and hidden, but still highly destructive to others
- PCL-R has relevance in violence risk assessment in women, but more research and refinement in assessment is necessary

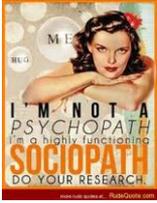


### Future studies



**More research is needed**

- Different populations: Company, healthcare?
- Adapted version of PCL-R for women?
- Dynamic risk and protective factors
- Predictive validity tools for women
- Effect on staff
- Effect on children



### Thank you

**More information:**  
[vdevoegel@dfzs.nl](mailto:vdevoegel@dfzs.nl)  
[www.violencebywomen.com](http://www.violencebywomen.com)

### Extra slides

### General dilemma's

#### Female forensic patients

- How to deal with **intimate relationships** in the hospital?
- **Children?**
- Effect on **staff** (e.g., risk of being falsely accused sexual intimidation)?
- **Biological factors** (birth control, hormones, menopause, pms, other effects of medication?)
- Risk of **victimization**: do we see enough?
- Social desirability / adaptive skills more prevalent in women?

## Specific dilemma's female forensic patients with psychopathy

- Manipulative skills?
- Effect on environment
- Do we see enough?
- Social desirability / adaptive skills more prevalent in women



## Treatment women with psychopathy

Richards et al. 2003

- 404 female inmates in substance abuse treatment program
- Psychopathy related to poor treatment response:
  - Rule violation
  - Noncompliance
  - Low attendance / drop out
  - Violent incidents

## Treatment women with psychopathy

Richards et al. 2003

### Recommendations:

1. Feedback results PCL-R to woman
2. Psychopathy as responsivity factor; e.g., emotional bonding and empathy training not effective
3. Alert to signals of psychopathic behavior and effect on group / climate; intervene when needed



## Treatment women with psychopathy

Recommendations Logan & Weizmann-Henelius (2012)

### Clinical practice

1. One to one meeting: prepare strategy and verify with colleagues
2. Group processes: structured observation
3. Acknowledgement of challenges / burden for staff
  - Being cognizant about toll on staff
  - Insight in own behavior and feelings



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