



Psychopathy in Dutch female forensic psychiatric patients

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Introduction

There is considerable evidence that psychopathy is an important risk factor for violence in women, but that the effect is not as strong as it is for men. Important differences have been found between men / women in the expression of violence, risk factors and manifestation of psychopathy. It is questionable if widely used tools like the *Psychopathy Checklist-Revised* (PCL-R; Hare, 2003) are well enough suited for use in women, since these tools have been developed / validated in mainly male populations.

Recently, gender-sensitive risk assessment guidelines for female (forensic) psychiatric patients have been developed in addition to the HCR-20 / HCR-20^{V3} (Douglas et al., 2013): the *Female Additional Manual* (FAM; de Vogel et al., 2012). In the FAM, gender-specific items were added and some HCR-20 items were adapted, for instance, the cut-off score of the PCL-R was lowered.

Psychopathic women compared to:	
Non-psychopathic women	More chronic offending, instrumental violence and stranger victims
Psychopathic men	More histrionic, manipulative, conning, promiscuous and emotionally unstable

See Klein Tunte et al., submitted

Method

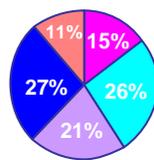
- Dutch multicentre study, 4 institutions (Van der Hoeven Kliniek, Oldenkotte, Woenselse Poort, FPK Assen)
- N = 221 female forensic psychiatric patients (tbs-order)
- Offenses: arson (29%); homicide (25%); attempted homicide (24%); sexual (4%); violence (16%); other (2%)
- Mean age 35; 83% Dutch; 51% discharged
- Extensive questionnaire coded based on file information:
 - General, psychiatric and criminal characteristics
 - Reported incidents during treatment
 - Historical risk factors HCR-20 / FAM
 - PCL-R (53% in consensus); lower cut-off score of FAM was used (23 instead of 30)
 - Taxonomy of motivations inspired by Coid (1998)
- PCL-R: mean score 16.4 (SD = 6.6, range 2-33.3); 2.7% ≥ 30
- FAM category: 16% psychopathic (PCL-R > 23)
47% possible psychopathy (PCL-R 14-23)
37% non-psychopathic (PCL-R < 14)

Taxonomy of motivations:	
Mad	Psychotic Intoxication Compulsive urge to harm/kill
Bad	Expressive aggression Power domination and control Excitement Undercontrolled aggression Illicit gain
Sad	Cry for help/attention seeking (Extended) suicide Despair Influenced by (male) partner
Relational frustration	Revenge Jealousy Threatened/actual loss Displaced aggression Victim precipitation
Coping	Relief of tension/dysphoria Hyperirritability

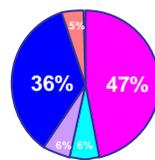
Results

Women with a high score on the PCL-R (> 23) compared to PCL-R ≤ 23 (all p < .01)

- Criminal history: more criminal versatility, younger at first conviction
- Index offense: more stranger victims, less often arson and fatal violence
- Violence risk factors: higher on 7 HCR-20 / FAM items, e.g., *Prostitution, Problematic behavior during childhood, Substance use problems*, but lower on *Major mental illness, Suicidality*
- Treatment: more drop out; more manipulative and less self-destructive behavior
- PCL-R total scores were predictive of incidents of manipulative behavior during treatment
- Motivations for offending: less often 'Sad', more often 'Bad'



PCL-R ≤ 23



PCL-R > 23

- Bad
- Sad
- Mad
- Relational
- Coping

Conclusions

Significant differences were found between women high versus low on psychopathy on criminal characteristics, motivations for offending, violence risk factors, treatment history and incidents during treatment. The lowering of the PCL-R cut-off score for women seems to be useful. More adaptations, for instance, in PCL-R item descriptions are to be examined.

This study has implications for treatment: e.g., train staff in recognizing the more subtle manipulative behavior of psychopathic women. Future studies will focus on: comparison with a male population, predictive validity of tools, dynamic risk factors and protective factors.

References

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- Douglas, K.S., Hart, S.D., Webster, C.D., & Bellfrage, H. (2013). *HCR-20^{V3}: Assessing risk of violence – User guide*. Burnaby, Canada: Mental Health, Law, and Policy Institute, Simon Fraser University.
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