Psychopathic Personality Disorder & Risk Assessment

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What is Psychopathy?
Personality Disorder

- Chronic disturbance in relating to self, others, and the environment
  - Culturally abnormal
  - Evident in multiple domains of functioning
  - Evident across situations
  - Clinically significant distress or impairment
  - Early onset and stable over time
  - Not due to another mental disorder
  - Not due to medical condition
Psychopathic Personality Disorder

Psychopathy is a personality disorder with a specific symptom pattern:

- Arrogant Interpersonal Style
- Deficient Affective Experience
- Impulsive Behavioral Style
Psychopathic PD

- Synonymous with
  - Antisocial PD (*DSM-IV*)
  - Dyssocial PD (*ICD-10*)
  - Sociopathic PD

- “This pattern [of pervasive disregard for others] has also been referred to as psychopathy, sociopathy, or dyssocial PD.” (APA, 2000, p. 702)
Psychopathy Checklist - Revised vs. DSM-IV

ASPD Criteria (65%) vs. PCL-R Criteria (25%) vs. All Offenders (100%)
Clinical Forensic Psychopathy Assessment Tools

The HARE PCL:SV
Psychopathy Checklist: Screening Version

HARE-2,3
Technical Manual and Administration Guide
Psychopathy is Dimensional

Hare Psychopathy Checklist (PCL-R; 2003)

Gold standard forensic assessment conducted using all available information (file + interview)

- 20 items rated on 3-point scale
  - Absent = 0; Possible/partial = 1; Present = 2
  - Glibness/superficial charm
  - Grandiose sense of self-worth
  - Lack of remorse or guilt
  - Callous/lack of empathy

- Total scores range from 0 to 40
Psychopathy: The Paralimbic Dysfunction Hypothesis (Kiehl, 2006)

- Error-related negativity
- Emotional lexical decision
- Affective memory task
- Affective picture task
- Abstract lexical decision
- Visual oddball task
- Auditory oddball task
Lexical Decision Task

Letter strings presented
50% nonwords; 50% words

ISI of 1 - 2 secs
What Causes Psychopathy?

- Birth complications/fetal brain damage lead to executive dysfunction (Moffitt)
- Inherited (Viding)
- Trauma induced (Porter)
OKAY .... SO WHAT DOES PSYCHOPATHY HAVE TO DO WITH ME?
Clinical Relevance

- Prevalence of psychopathy ranges from 10% to 12% among male forensic patients (PCLR M = 21.5)
- Negatively correlated or uncorrelated with MI
  - Bipolar Disorder \( r = .17 \)
  - Depression \( r = -.17 - .04 \)
  - Schizophrenia \( r = -.15 - .00 \)
- Highly correlated with
  - substance abuse
  - cluster B PD’s, and
  - attempted malingering
Clinical Relevance: Institutional Misconduct

- On average, male forensic psychiatric patients with high PCL-R or PCL:SV scores, relative to low scorers, are more likely to
  - Be physically and verbally aggressive
  - Have violent & non-violent infractions ($r=0.25 - 0.35$)
  - Require restraint or seclusion
  - Violate hospital rules
  - Complain about staff (35% of complaints)

- Suicide Risk?
Legal Relevance

**Recommended use:** Institutional & community risk management & treatment

- **Pretrial** – not recommended
  - Diversion, bail, CST, NGRI, juvenile waiver

- **Sentencing**
  - Alternative sanctions, indeterminate (DO) or capital sentencing, placement decisions

- **Corrections**
  - Institutional classification, parole hearings, community supervision/notification
Legal Relevance

- Civil law
  - Civil commitment & release
  - Inpatient, outpatient, indeterminate (SVP, SPD)
  - Restraining orders
  - Immigration/deportation
  - Workplace violence
  - Parenting capacity
Implementation of the PCL

- Field study of PCL-R’s conducted for sexually violent predator cases found unacceptable reliability (ICC = .39; Boccaccini et al., 2008; Murrie et al., 2008)
  - Compared to ICCs = .86 to .94 in the lab
- Implementation must be methodical to maintain the integrity of the tool
  - Intensive training and booster trainings
  - Written policy about “when” and “how” it will be used
PSYCHOPATHY AND RISK ASSESSMENT
Psychopathy: Causal Risk Factor for Violence?

- Relative to other offenders, psychopathic adult male offenders, as assessed by a Hare Psychopathy Checklist (PCL-R/PCL:SV),
  - Start their criminal careers earlier,
  - Are 5 to 10 times as likely to violently reoffend,
  - Commit more severe acts of violence, and
  - Different types of violence – different victims.

- Meta-analyses show the relation between PCL scores and violence is $r = 0.30$ to $0.35$
Causal Mechanisms

- **Impulsivity** - sensation-seeking, failure to consider alternatives to or consequences of crime
- **Unemotionality** - inability to consider or appreciate consequences of crime
- **Suspiciousness** - perception of hostile intent in others
- **Arrogance** - desire to exert power or control over others
Psychopathy is the Best “Single” Predictor of General Violence

“Indeed, failure to consider psychopathy when conducting a risk assessment may be unreasonable (from a legal perspective) or unethical (from a professional perspective).” (Hart, 1998, pg. 17)
Conclusions: Psychopathy & Risk Assessment

- Psychopathy should be assessed as part of comprehensive correctional or forensic risk assessments by trained professionals using proper procedures
  - The presence of psychopathy compels a conclusion of high risk
  - The absence of psychopathy does not compel a conclusion of low risk

- Risk, Need, & Responsivity factor
PSYCHOPATHY AND
TREATMENT
Adult Psychopaths in Treatment
(Skeem, Monahan, & Mulvey, 2002)

- **Dose – Response Relationship**
- Effect of Treatment dosage on N = 871 civil psychiatric inpatients
  - Potentially psychopathic (SV > 12), violence 2.5X as likely if ≤ 6 sessions
  - Confirmed psychopaths (SV > 18), violence 3.5X more likely if ≤ 6 sessions
- Conclusion: Adequate doses of treatment erased the moderating effects of psychopathy.
Aggressive Behavioral Control (ABC) Program, RPC, 5-year follow-up (Olver & Wong, 2009)
Importance of Early Intervention: Youth Treatment Study 2-year f-up (Caldwell et al., 2006)

Any recidivism
violent recidivism
All Serious Offenders; PCL:YV Total ≥ 27
What Seems to Work?

- Well-trained staff
- **Decrease attrition** - Keep those with psychopathic traits in treatment
- **Peer environment** - an even ratio of psychopaths to nonpsychopaths in group settings
- **Focus on motivational strengths**
  - Status orientation, novelty-seeking, need for interpersonal contact, need for control
- **Use highly structured** evidence-based trt
  - CBT, DBT, Relapse prevention model with self-monitoring
RISK ASSESSMENT IN GENERAL
Psychopathy is Not Enough

- Psychological factors can play a causal role

**Psychological factors**
- Antisocial attitudes
- Personality disorder
- Social disadvantage

**Crime and Violence**
- Substance use
- Social conflict
- Antisocial peers
Specificity of Risk Assessment

General Crime

Violence

Sexual Violence

Spousal Violence
Specificity of Risk Assessment

- Most risk factors for general criminality also are associated with violence.
- Some violence risk factors are not associated with general criminality.
- Some forms of violence have unique or specific risk factors.
Why is a Risk Assessment Tool Important?

- Need a method of decision-making that...
  - Promotes consistency between evaluators
  - Identifies outcomes of interest
  - Takes all relevant risk factors into account
  - Takes the individual patient into account
  - Can inform treatment, management, prevention
  - Can facilitate communication between parties
  - Is reviewable, accountable, or transparent
History of Decision-Making

- Unstructured Clinical/Professional Judgment
- Structured Decision-Making
  - Two types
Approaches to Decision-Making: Actuarial

- **Actuarial Assessment**
  - Prediction
  - Risk level is determined based on a formula
  - Generally contains factors based on the known empirical association with risk

- **Examples**
  - Violence Risk Assessment Guide (VRAG)
  - Static-99
Approaches to Decision-Making: Actuarial

- **Limitations:**
  - Items often lack relevance
  - Items often not capable of change
  - Do not account for idiosyncratic factors (unless **override** is an option)
  - Probability estimates have substantial margins of error
Structured Professional Judgment: A Model of Risk Assessment

- Relies on clinical expertise within a structured application (empirical risk factors + judgment)
- Logical selection of risk factors
  - Review of scientific literature
  - Not sample-specific (enhances generalizability)
  - Comprehensive
- Operational definitions of risk factors
  - Explicit coding procedures
  - Promotes reliability
## Instruments: Average AUCs (Guy, 2008)

<table>
<thead>
<tr>
<th>Instrument</th>
<th>Numeric Score</th>
<th>Summary Risk Ratings (L,M,H)</th>
</tr>
</thead>
<tbody>
<tr>
<td>SVR-20 (sexual violence)</td>
<td>.61</td>
<td>.70</td>
</tr>
<tr>
<td>RSVP (sexual violence)</td>
<td>.63</td>
<td>.73</td>
</tr>
<tr>
<td>SARA (spousal violence)</td>
<td>.63</td>
<td>.73</td>
</tr>
<tr>
<td>SAVRY (youth physical violence)</td>
<td>.75</td>
<td>.79</td>
</tr>
<tr>
<td>HCR-20 (adult physical violence)</td>
<td>.67</td>
<td>.79</td>
</tr>
</tbody>
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Caveats: Interpret With Caution

- Risk assessments cannot be used to make specific predictions about the behavior of individuals with any reasonable degree of accuracy
- A conclusion of high risk does not necessarily require incapacitation
Take Home Messages

- Psychopathy is a personality disorder that is a necessary, but not sufficient, part of risk assessment
  - High likelihood for institutional & community violence
  - It is one risk factor, not a risk assessment
  - Important for risk management, treatment, and release planning/decisions
  - Must be implemented into a system methodically
Take Home Messages

- Risk assessments increase consistency & validity of decisions
  - Preference in a forensic or civil psychiatric system towards structured professional judgment approaches
    - START – dynamic institutional risk
    - HCR-20 – community risk among mental health populations
    - SONAR or RSVP – sexual violence risk
    - SARA – spousal violence risk