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Psychopathy and developmental instability

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Abstract

Psychopaths are manipulative, impulsive, and callous individuals with long histories of antisocial behavior. Two models have guided the study of psychopathy. One suggests that psychopathy is a psychopathology, i.e., the outcome of defective or perturbed development. A second suggests that psychopathy is a life-history strategy of social defection and aggression that was reproductively viable in the environment of evolutionary adaptedness (EEA). These two models make different predictions with regard to the presence of signs of perturbations or instability in the development of psychopaths. In Study 1, we obtained data on prenatal, perinatal, and neonatal signs of developmental perturbations from the clinical files of 643 nonpsychopathic and 157 psychopathic male offenders. In Study 2, we measured fluctuating asymmetry (FA, a concurrent sign of past developmental perturbations) in 15 psychopathic male offenders, 25 nonpsychopathic male offenders, and 31 male nonoffenders. Psychopathic offenders scored lower than nonpsychopathic offenders on obstetrical problems and FA; both psychopathic and nonpsychopathic offenders scored higher than nonoffenders on FA. The five offenders from Study 2 meeting the most stringent criteria for psychopathy were similar to nonoffenders with regard to FA and had the lowest asymmetry scores among offenders. These results provide no support for psychopathological models of psychopathy and partial support for life-history strategy models. © 2001 Elsevier Science Inc. All rights reserved.

Keywords: Psychopathy; Developmental instability; Fluctuating asymmetry; Obstetrical problems; Adaptation

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1. Introduction

Psychopaths are deceitful, selfish, manipulative, irresponsible, impulsive, and aggressive individuals who have no concern for the welfare of others and who experience little remorse or guilt as a result of their injurious and antisocial behavior (Gacono, 2000; Hare, 1991). Psychopaths are mostly male and are quite rare (estimated as less than 1% in the general population). Approximately 11% of the forensic psychiatric population and 23% of the correctional population are psychopaths (Hare, 1991). The following abbreviated case history shows many features of psychopathy as currently defined in the clinical literature. Some details have been modified to protect anonymity:

Since kindergarten, Frank was a problem. He bullied smaller pupils, disobeyed school rules, and was often truant. He quit school during the 11th grade, then traveled the continent using money he borrowed from friends (but never repaid). He also had many short-term jobs, fraudulently collected welfare, and dealt drugs. He had many heterosexual relationships, fathering at least one child by the time he was 16. He was first incarcerated at 15 for stealing a car, and by 18, he had a criminal record that included violent offenses, theft and possession of stolen goods, and drug trafficking. When he was 19, Frank was arrested for the brutal rape of an acquaintance. The victim barely survived severe internal injuries, but Frank always maintained that the sex was mutually consenting. He was found not guilty by reason of insanity. After many years in a maximum security institution, Frank was transferred to a less secure hospital. While there, he persuaded a nurse that he was innocent and misunderstood. Believing Frank was in love with her, she helped him escape by unlocking the door and hiding him in the trunk of her car. Frank stayed the weekend with her, then left while she was out buying groceries; she never heard from him again. After being apprehended, Frank was returned to the maximum security facility but, within a few years, he was again transferred to a less secure hospital. During his stay there, he sexually assaulted three fellow female patients and a staff member. While on a pass, he viciously raped a young woman in the local community. Again, he was returned to maximum security. Since then he has written a two-volume autobiography featuring a portrait of himself on the cover. He reads all of our published research from which he tries to use out-of-context quotations to convince the Review Board to release him again. Recently, a nurse on his unit lost her job after Frank convinced her to smuggle testosterone tablets to him.

Offenders scoring high on measures of psychopathy have extensive and versatile criminal histories (Hare, Forth, & Strachan, 1992; Hare & Jutai, 1983; Hare & McPherson, 1984a; Hare, McPherson, & Forth, 1988) and are more likely than low-scoring offenders to commit crimes upon release or discharge (Harris, Rice, & Cormier, 1991a; Serin, 1991, 1996; Serin, Peters, & Barbaree, 1990). As well, the crimes committed by psychopaths are different from those committed by nonpsychopaths: They are more often goal-oriented, more often involve weapons and violence, more often involve nonkin and stranger victims, and more often involve male victims (Cornell et al., 1996; Hare & McPherson, 1984a; Serin, 1991; Williamson, Hare, & Wong, 1987; reviewed in Patrick & Zempolich, 1998).

Most of the research on psychopathy has been conducted in prisons or secured hospitals. The few studies of psychopathic men recruited from the general community also show that they engage in more antisocial and criminal activities than nonpsychopathic men (Belmore &

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