



## Using the Psychopathic Personality Inventory to identify subtypes of antisocial personality disorder

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### ARTICLE INFO

Available online 11 January 2013

### ABSTRACT

**Purpose:** Poythress, Edens, et al. (2010) recently used cluster analysis to identify subtypes of antisocial and psychopathic offenders using a diverse collection of theoretically important clustering variables. Two predicted subtypes, primary and secondary psychopathy, were identified, in addition to non-psychopathic and (unexpectedly) “fearful” psychopathic offenders. The purpose of the present research was to determine whether these clusters could be replicated using a single self-report measure, the Psychopathic Personality Inventory (PPI; Lilienfeld & Andrews, 1996).

**Method: Study 1:** We used discriminant function analysis (DFA) to predict cluster membership for the Poythress et al. subtypes based solely on the eight subscales of the PPI.

**Results: Study 1:** Though overall classification accuracy with the original clusters was poor, PPI-derived subtypes differed from each other in theoretically consistent ways on several criterion measures.

**Method: Study 2:** We used the PPI-based DFA to classify a separate sample of prison inmates from a prior PPI study (Edens et al., 2008).

**Results: Study 2:** As predicted, inmates classified into the secondary psychopathy subgroup demonstrated the highest rates of aggressive misconduct whereas non-psychopathic were the least prone to engage in misconduct.

**Conclusion:** The PPI may serve as a relatively simple method of identifying theoretically meaningful subtypes of psychopathic offenders.

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### Introduction

Mental health professionals have been interested in the prevention of delinquent and criminal behavior and the rehabilitation of offenders for centuries (e.g., Raphael, Jacoby, Harryman, & Raphael, 1924). The dominant classification system for mental disorders in use in the United States today, the Diagnostic and Statistical Manual of Mental Disorders—4th Edition-Text Revision (DSM-IV-TR; American Psychiatric Association, 2000), categorizes most of those who engage in repetitive criminal conduct to be suffering from Antisocial Personality Disorder (ASPD). Multiple controversies bedevil the validity and utility of the ASPD diagnosis, however, with one frequent criticism being that it comprises a very heterogeneous group of individuals who share little in common other than a propensity to engage in irresponsible behavior, including crime. A considerable amount of recent research suggests

that people who meet criteria for ASPD can be meaningfully subtyped into more homogeneous groups (described below) based on psychological characteristics. However, the clinical utility of these subtypes to inform treatment and management decision-making requires further investigation.

Another controversy surrounding the categorization of persons who engage in chronic antisocial behavior is the utility of self-report personality and attitudinal measures. Self-report measures have been criticized as problematic on a number of grounds, even though extant research suggests that many have considerable utility in identifying offenders who are prone toward violence or recidivism (Walters, 2006). Self-report measures offer numerous advantages over more labor-intensive assessment methods such as standardized interviews (Lilienfeld & Fowler, 2006) and a method for identifying subtypes of antisocial offenders based largely on self-report would be a major contribution to the assessment literature.

The present study builds on recent subtyping research by Poythress, Edens, et al. (2010), who cluster analyzed a large sample of individuals

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diagnosed with ASPD into more conceptually meaningful subgroups based on a complex combination of personality measures, including interview data and self-report questionnaires. In this report, we investigate the utility of a single, widely used self-report measure, the Psychopathic Personality Inventory (PPI; Lilienfeld & Andrews, 1996) to classify the original sample into these subtypes using discriminant function analysis (Study 1). In Study 2, we extend this work by examining the utility of this PPI-based system in a new sample of offenders who had completed the PPI as part of an earlier study (Edens, Poythress, Lilienfeld, Patrick, & Test, 2008). More specifically, we address whether prison inmates classified into subtypes are at differential risk for institutional misconduct.

Before presenting these findings, we provide a more extensive review of controversies concerning ASPD. We begin by highlighting conceptual debates regarding the relationship between ASPD and the related concept of psychopathic personality (psychopathy).

### *ASPD and psychopathy*

Historically, there has been considerable debate concerning the relationship between ASPD and psychopathy (Lilienfeld, 1994). Hervey Cleckley's (1941) conceptualization of psychopathy included such traits as superficial charm, insincerity, low levels of anxiety, and a failure to learn from mistakes. However, a number of authors (Cloninger, 1978; Spitzer, Endicott, & Robins, 1975) argued that this conceptualization placed too much emphasis on inferred and unobservable traits. This perception influenced the core framework of ASPD in the Diagnostic and Statistical Manual-Third Edition (DSM-III; American Psychiatric Association, 1980) which identified criminal, delinquent and irresponsible behaviors as primary characteristics of the disorder.

Hare, Hart, and Harpur (1991) argued that the behavioral criteria of ASPD were overinclusive and encompassed a variety of disordered pathology. Research conducted with offenders supports the differentiation between ASPD and the more personality-based construct of psychopathy. For example, Hart and Hare (1989) administered the Psychopathy Checklist (PCL-R; Hare (1991/2003)) to 80 forensic psychiatric patients who were evaluated and given DSM-III Axis I and Axis II diagnoses. Approximately half of the participants met criteria for ASPD, whereas only 12.5% met the PCL cut-off for a diagnosis of psychopathy. Furthermore, evidence from the DSM-IV field trials suggested that personality features associated with psychopathy added incremental validity over behaviorally based criteria in clinician impressions of psychopathy and ASPD among prison inmates (Widiger et al., 1996).

### *Variants of psychopathy*

Although debate about the differentiation between ASPD and psychopathy continues, a separate area of research has considered whether psychopathy might consist of two or more subtypes. Traditionally psychopathy often was treated as a unitary concept captured by a total score on Hare's (1991/2003) PCL-R and other measures, a growing body of research suggests that there are at least two common variants of psychopathy (for a review, see Skeem, Poythress, Edens, Lilienfeld, & Cale, 2003), generally referred to as "primary" and "secondary" psychopathy. Primary psychopathy closely mirrors Cleckley's conceptualization interpersonally and emotionally. Individuals within this subtype are typically regarded as socially dominant extroverts with low levels of anxiety (Blackburn, 1975, 1987; Karpman, 1948; Lykken, 1995). Conversely, secondary psychopaths are believed to be more impulsive, anxious, socially withdrawn, and reactive to negative emotions (Blackburn, 1975, 1987; Lykken, 1995). In his writings, Karpman (1948) argued that secondary psychopathy often develops in response to an abusive or neglectful caregiver during early childhood. He maintained that, interpersonally, secondary psychopaths are prone to emotional conflict and, particularly in confinement (e.g., prisons,

psychiatric hospitals), more likely to experience difficulties adjusting to highly controlled and authoritarian environments.

Although theorists have opined about psychopathy variants or subtypes for decades, only recently have empirical investigations focused on the examination of these subgroups. For example, Skeem, Johansson, Andershed, Kerr, and Eno Loudon (2007) examined adult offenders' scores on a number of measures, including the PCL-R<sup>1</sup> (Hare, 1991/2003) and an index of trait anxiety (Karolinska Scales of Personality; KSP; Gustavsson, Weinryb, Goransson, Pedersen, & Asberg, 1997). Participants included 123 male offenders incarcerated in Sweden for a violent offense and obtaining a total PCL-R score equal to or greater than 29. A model-based cluster analysis (Banfield & Raftery, 1993) yielded two distinct clusters with a high (87%) posterior probability that individuals were correctly classified. These clusters largely mirrored theoretical conceptualizations of primary and secondary psychopathy. Specifically, the group labeled secondary psychopathy exhibited higher levels of anxiety and lower levels of psychopathic traits than the group labeled primary psychopathy. Importantly, the clusters also differed on theoretically relevant criterion-related variables: secondary psychopaths exhibited higher levels of irritability (as measured by the KSP), social withdrawal (KSP), borderline traits (as measured by the Diagnostic Interview of Personality Questionnaire; DIP-Q; Ottosson et al., 1995), major mental illness (as measured by the Historical, Clinical, Risk Management-20; HCR-20; Webster, Douglas, Eaves, & Hart, 1997) and lower levels of assertiveness (KSP) and clinical functioning (DIP-Q). Contrary to some theoretical conceptualizations of these subtypes, secondary psychopaths were not less narcissistic (DIP-Q) or more impulsive (KSP) than their primary counterparts.

In a study designed to identify psychopathy subtypes in male offenders, Vassileva, Kosson, Abramowitz, and Conrod (2005) administered the PCL-R and the Interpersonal Measure of Psychopathy (IM-P; Kosson et al., 1997) to 200 adult jail inmates. Analyses revealed four clusters, two of which appeared consistent with primary and secondary subtypes. The "primary psychopath" cluster was comprised of individuals with higher scores on both the PCL-R Factor 1 (13.30 compared with 10.37 for the secondary group) and the IM-P (41.82 vs. 29.17), lower levels of trait anxiety, and less severe substance abuse problems. This group was also distinguished by more violent offenses and more incarcerations and greater criminal versatility than individuals in the non-psychopathic clusters. In contrast, the "secondary psychopath" cluster obtained higher scores on PCL-R Factor 2 (13.84 compared with 13.19 for the primary group), higher levels of trait anxiety, and more severe substance abuse. This group was also characterized by more non-violent offenses and greater criminal versatility than the non-psychopathic groups. A third cluster, labeled "non-psychopathic criminals with alcohol and drug problems," consisted of offenders with lower levels of trait anxiety, lower Factor 1 and 2 scores relative to the other clusters, and lower IM-P scores relative to the psychopathy clusters. In addition, this group demonstrated higher levels of substance use and dependence, as measured by the Structured Clinical Interview for DSM-IV Axis I disorders (First, Gibbon, Spitzer, & Williams, 1995), but also less criminal versatility and fewer charges than both psychopathy clusters. Finally, a fourth group included individuals with higher Factor 1 and 2 scores than the non-psychopathic cluster but lower than both psychopathy clusters. Interestingly, this group was similar to the secondary psychopathy group in the number of charges for violent offenses. However, they exhibited fewer incarcerations and less criminal versatility than the psychopathy cluster.

Swogger and Kosson (2007) attempted to replicate Vassileva et al.'s (2005) findings using a cluster analytic approach developed by Steinley (2003; see Swogger & Kosson, 2007, for complete details). Participants included 258 European American county jail inmates convicted of a felony or misdemeanor. Consistent with the Vassileva et al. (2005) findings, four clusters emerged, with two clusters largely

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