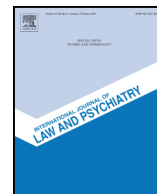




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Implicit vs. explicit dimensions of guilt and dominance in criminal psychopathy☆☆☆

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ABSTRACT

The current study investigated the relationship between psychopathy and two concepts that hold a central position in conceptualizations of this disorder, being guilt and dominance. Both constructs were measured using explicit measures (i.e., self-report), as well as indirect assessment (i.e., the Single Category Implicit Association Test; Sc-IAT). Our sample consisted of 43 psychopathic offenders, 42 nonpsychopathic offenders, and 26 nonoffender controls. Although no overall group differences emerged, the lifestyle/antisocial traits of psychopathy (Factor 2) predicted reduced self-reported guilt on a dimensional level. As hypothesized, such a relationship was absent for the interpersonal/affective dimension of psychopathy (Factor 1). Psychopathy was unrelated to implicit self-guilt associations. Regarding dominance, psychopathy was not significantly associated with indirectly or explicitly assessed dominance. These findings are interpreted in the light of empirical knowledge on moral emotions, insight and response distortion in highly antisocial offenders.

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1. Introduction

Psychopathy has a relatively low prevalence in the general population. This disorder is, however, highly overrepresented in individuals in the forensic system (i.e., <1% vs. 15–25%, respectively; Blair, Mitchell, & Blair, 2005). This discrepancy is not surprising considering the nature of psychopathic traits, which include emotional aberrances such as a lack of empathy and guilt, and behavioral characteristics like impulsivity and irresponsibility (Hare, 2003). Furthermore, psychopathic offenders display an interpersonal style that is typified by deceitfulness, manipulation, and an inclination towards pathological lying (Cooke, Michie, & Hart, 2006; Hare, 2003). These latter interactional features make the truthfulness of psychopaths' self-reported statements about one's own functioning a major concern for researchers and clinicians. Next to that, the accuracy of self-reported information might be

compromised in these offenders due to a lack of insight, which is thought to be characteristic of personality pathology in a broader sense (Lobbstaël, Arntz, Löbbs, & Cima, 2009; Millon & Davis, 2000).

Offenders presenting themselves in a way that is not reflective of their actual functioning can have drastic consequences. For example, expressing feelings of guilt might result in patients being more readily discharged from forensic mental health facilities (Niesten, Nentjes, Merckelbach, & Bernstein, 2015). Research into assessment strategies that are not solely dependent on offenders' self-report is therefore of crucial importance. One such assessment approach is the use of indirect measures, which are thought to produce outcomes that are less sensitive to deliberate cognitive influences than explicit assessment methods like self-report. Also, such measures are believed to be less dependent on the capacity for introspection (Greenwald, McGhee, & Schwartz, 1998; Roefs et al., 2011). Previous research using indirect assessment has proven useful in determining the external correlates of psychopathy, by showing, for example, that psychopathy is associated with relatively positive indirect attitudes towards aggression and violence (Snowden, Gray, Smith, Morris, & MacCulloch, 2004; Zwets et al., 2015). These attitudes are not necessarily related to psychopathy when assessed in a more explicit way (Snowden et al., 2004).

In the current study, we elaborated on such previous research by examining whether indirect measures can also be used in assessing dominance and guilt in relation to psychopathy, with the latter being assessed using the revised Psychopathy Checklist (PCL-R; Hare, 2003). As both indirect and explicit measures have shown to provide

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independent, incremental validity in predicting psychopathological behavior (Roefs et al., 2011), we adopted a multi-method approach that involved both of these assessment methods. We chose to focus on dominance and guilt for several reasons. First, although both of these concepts figure prominently in conceptualizations of psychopathy, they have received relatively little empirical attention in relation to this disorder. Second, studies that did examine guilt or dominance in psychopathy tend to show some inconsistencies, which may be at least partially explainable by the use of different (direct and indirect) measures. Last, both guilt and dominance show robust links to antisocial behavior on a theoretical and empirical level (e.g., Morrison & Gilbert, 2001; Tangney, Stuewig, Mashek, & Hastings, 2011), stressing the importance of a thorough understanding of the role that these constructs play in psychopathy.

1.1. Psychopathy and guilt

Guilt is evoked by (un)conscious self-evaluation and refers to the negative, emotional state that individuals experience when they feel that their actual or anticipated behavior violates internalized moral standards (Tangney, Stuewig, & Mashek, 2007). Guilt is thought to serve as an internal guide in behaving in a morally appropriate way, by providing individuals with feedback on the acceptability of their behavior. As such, this moral emotion has a strong interpersonal basis, playing a central role in preventing transgressions towards others or correcting such violations, by apologizing and undoing the damage done (Sheikh & Janoff-Bulman, 2010). Not surprisingly, guilt is positively related to prosocial behavior (Olthof, 2012) and the propensity to take responsibility for one's actions (Berndsen & Manstead, 2007). In contrast, the experience of guilt is negatively associated with antisocial attitudes and behavior (Tangney et al., 2011), as well as with criminal recidivism (Tangney, Stuewig, & Martinez, 2014).

Although guilt is thus considered a key motivating factor in preventing antisocial behavior, only a handful of studies have focused on this moral emotion in psychopathy. Some of these investigations found psychopathy to be related to guilt (Johnsson et al., 2014), whereas others did not (Batson, Gudjonsson, & Gray, 2010). These studies yielded inconsistent results and relied solely on self-report, stressing the need for the use of alternative measures. Such research was conducted by Cima, Tonnaer and Lobbstaël (2007), showing self-reported psychopathy to be correlated to reduced implicit guilt in an offender sample, as evidenced in an attention shift away from guilt-related words on a dot-probe task.

The current study further explored the relationship between psychopathy and guilt using both a self-report measure of guilt, as well as an indirect assessment method, being the Single Category Implicit Association Test (Sc-IAT; Karpinski & Steinman, 2006). The Sc-IAT assesses associations with a single target category, in which it differs from the original paradigm, the Implicit Association Test (IAT; Greenwald et al., 1998), which measures the relative strength of associations with two opposing concepts. Here we assessed the relative degree to which individuals associate themselves with guilt. Based on the aforementioned research, we hypothesized psychopathy to be associated with less strong guilt associations on the Sc-IAT. Factor analytic research suggests that psychopathy is represented by at least two underlying factors. Factor 1 describes affective and interpersonal traits, whereas Factor 2 covers behavioral characteristics (Hare, 1991). We expected the relationship between psychopathy and self-guilt association strength to be carried mainly by Factor 1, as this psychopathy dimension describes the lack of such moral emotion. On the explicit measure (i.e., on self-report), we did not expect to see a relationship with psychopathy (or its factors).

1.2. Psychopathy and dominance

We applied a similar multi-method approach to examine dominance in relation to psychopathy. Dominance refers to the degree to which

individuals feel a sense of influence or control over the environment (Jerram, Lee, Negreira, & Gansler, 2014). Psychopathic individuals are described as having a strong tendency to dominate interpersonal interactions (e.g., Nyholm & Häkkänen-Nyholm, 2012). Relatedly, previous empirical investigations show that psychopathy, especially Factor 1, is related to a self-reported dominant interpersonal style (Gullhaugen & Nøttestad, 2011; Patrick, Hicks, Nichol, & Krueger, 2007), as well as to dominant interpersonal behavior during interview situations (Kosson, Steuerwald, Forth, & Kirkhart, 1997; Vitacco & Kosson, 2010). Notably, this association seems stronger for observer-rated dominance than for self-report, again stressing the importance of alternative assessment strategies in forensic contexts. The need to explore the role of dominance in psychopathy is further underlined by a study by Morrison and Gilbert (2001). This research showed that offenders who report themselves to be more dominant and superior than others are prone to aggressive responding in the face of provocation, such as when being humiliated or rejected. Part of psychopaths' aggression might thus be explained by these individuals having a self-concept in which dominance plays an important role.

Building on these previous findings, the current study assessed self-dominance associations using a second variety of the Sc-IAT. We hypothesized psychopathy to be related to relatively strong self-dominance associations, and we expected this relationship to be explained mainly by Factor 1. In order to investigate potential discrepancies between implicit and explicit dominance we also adopted the Narcissistic Personality Inventory (NPI; Raskin & Terry, 1988). Although this self-report questionnaire was derived from Narcissistic Personality Disorder criteria, research shows a robust association between NPI scores and a variety of dominance measures (e.g., Cain, Pincus, & Ansell, 2008). We expected psychopathy to be positively related to NPI scores, with this association again being carried by Factor 1, as was also found in a previous study by Schoenleber, Sadeh, and Verona (2011).

In sum, the current study adopted a multi-method approach to investigate two constructs that hold a central position in the conceptualization of psychopathy, being guilt and dominance. We hypothesized to see a negative relationship between psychopathy (mainly Factor 1) and implicit, but not explicit feelings of guilt (reflective of a dissociation between actual and reported moral feelings). Last, we expected psychopathy (again, especially Factor 1) to be positively related to self-dominant associations and explicitly assessed dominance.

2. Method

2.1. Participants

Participants were 85 criminal offenders and 26 nonoffender controls. Forensic participants were recruited in six different forensic psychiatric centers and a prison in the Netherlands. Thirty-six of these offenders were also participating in an RCT on the effectiveness of forensic Schema Therapy versus Treatment as Usual (Bernstein et al., 2012). Exclusion criteria for the nonoffenders were a) insufficient understanding of the Dutch language; b) any current axis I disorder; c) the presence of threshold minus two criteria for any DSM-IV Personality Disorder (PD); d) a PD diagnosis Not Otherwise Specified (i.e., fulfillment of five or more criteria of different PD diagnoses), e) an IQ <80, (f) serious neurological impairment, (g) an autistic spectrum disorder (ASD), and (h) an increased level of self reported psychopathy. Inclusion criteria for the offenders were (a) the presence of a DSM-IV Antisocial, Narcissistic, Borderline, or Paranoid PD, or a PD not otherwise specified with at least five cluster B PD traits; and (b) good understanding of the Dutch language. Exclusion criteria were (a) the presence of current psychotic symptoms, (b) schizophrenia or bipolar disorder, (c) current drug or alcohol dependence, (d) an IQ <80, (e) serious neurological impairment, (f) an ASD, and (g) fixated pedophilia.

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