THE ASSESSMENT OF PSYCHOPATHY
IN FEMALE OFFENDERS

by

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Abstract

The purpose of this study was to evaluate the reliability and validity of the Psychopathy Checklist-Revised (PCL-R) for use with a female population. Seventy-five women who were either incarcerated or on probation were assessed using interview and file information. In addition, all subjects completed a battery of self-report inventories that were theoretically relevant to the PCL-R. The results strongly supported the appropriateness of the PCL-R for use with female offenders. The psychometric properties were excellent indicating a homogeneous and unidimensional scale. The factor analysis confirmed a two factor structure representing two distinct aspects of psychopathy; the personological and behavioural dimensions. The pattern of correlations obtained from the self-report inventories was highly similar to that obtained with male samples, further suggesting that the same construct is being measured in both sexes. The implications of these findings in terms of the construct of psychopathy and explanations of women's criminality are discussed as well as future research and practical implications.
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Introduction

Much of what we know about psychopathy is based on the study of males, particularly male offenders. The lack of research into female psychopathy is closely linked to the neglect of female criminality as an important topic for research. Indeed, the most common laments in articles on female offenders have to do with the paucity of empirical work and the predominance of sex role biases in theories of female criminality. The reasons for the neglect of female psychopathy by the research community have much to with the general lack of interest in female criminality. For this reason, a brief overview of theory and research on female criminality is presented.

There are several factors that serve to reduce interest in female criminality. For example, the rate of female offending over time and across cultures is very low (Johnson, 1982; Smart, 1976; Wilson & Herrnstein, 1985). In Canada, the U.S. and Britain women account for only 15% of reported crimes. Moreover, only 3% of offenders incarcerated in Canada (Johnson, 1982) and 4% of those in the U.S. (Widom, 1984) are women. Consequently, unlike the high numbers of male offenders who have created a pressing need for assessment and treatment, female offenders have not demanded much attention. In fact, their low numbers have inadvertently contributed to
the indifference of the criminal justice system and society in general.

A second contributing factor to the neglect of research on female crime is the persistence of theories based on stereotypic and biased perceptions of women. These theories have indirectly influenced research on female psychopathy.

Theories of Female Criminality

Early criminologists were convinced that there was a biological or physiological basis for an inherent evil in female offenders. Lombroso (1895; cited in Smart, 1976) produced the first major work in this area, arguing that the biological constitution of women was incompatible with crime and that women, being more conservative than men by nature, did not commit crime. Men, on the other hand, were active and aggressive due to their evolutionary superiority, and crime was a natural extension of their less conservative nature. Thus, in order for a woman to commit a criminal act, she was assumed to have a biological abnormality, the presence of which was ascertained not only from the crime itself but from the offender’s obvious lack of maternal instinct.

Lombroso’s theory faded with a lack of empirical support, but his premise of biological determinism did not. Half a century later Pollak (1961) argued that the sex discrepancy in crime rates was false; women simply masked their crimes. Pollak believed that all women were inherently deceitful and
cunning and that this innate quality of womanhood was a direct result of their physiology. Pollak reasoned that while men were not able to hide their sexual arousal or lack of it, women were physiologically able to deceive men in this regard and, as a consequence, became adept at lying and manipulation. In fact, Pollak saw women as the instigators of crime, either through manipulating men into performing the criminal act for them or by committing their crimes against their husbands or children in the home where it would go undetected. Pollak further argued that menstruation, pregnancy and menopause would increase criminal activity because women would seek revenge against these constant reminders of their inferior status. Ironically, Pollak also believed that women went unpunished for their crimes largely because of male chivalry within the criminal justice system.

Thomas (1923) discussed female offenders with less contempt than did Lombroso or Pollack but nonetheless believed that these women were simply unable to adjust to the "natural" female sex role of passivity and nurturance. Although he demonstrated a compassionate paternalism toward his subjects and recognized the influence of "social" variables such as poverty and the desire for "pretty things", he also placed great emphasis on sexual promiscuity as being evidence of maladjustment and delinquency.

In the 1960s and 1970s there was a dramatic increase in crime rates in both Canada and the United States (Wilson &
Herrnstein, 1985). Criminologists pointed to the post war baby boom as a partial explanation for this phenomenon. They noted that the males born in those years arrived at the age group with the highest rate of criminal activity during the 60s and 70s. The increase in female crime, however, was not attributed to the population increase, but rather to the deleterious effects of the women’s movement (Adler, 1975). Adler proposed that as women strove to be more like their male counterparts, so would their crimes. She predicted that the advent of the women’s liberation movement would create a new breed of female criminals: more defiant, hardened, and violent as a result of women emulating male behaviour.

Adler’s theory continues to be a focal point for research, the results of which have failed to support her position (Campbell, Mackenzie & Robinson, 1987; Lasley, Kuhl, & Roberg, 1985; Widom, 1984). In fact, most studies have found the opposite relationship: Female offenders report greater acceptance of the traditional feminine role than do non-offenders and the severity of their crimes is directly related to their degree of adherence to a feminine or masculine identity. Streifel and Steffensmeier (1989), in a study of alternative explanations of sex differences in crime, found no support for the emancipation hypothesis (women’s liberation as a cause of increased crime rates) but did find support for the economic marginalization hypothesis: As
women's economic situation worsens, their involvement in crime increases.

By far the most popular and enduring biological explanation for women's criminality centers on the menstrual cycle. Beginning with Lombroso and Pollak (1961), reviews of female criminality invariably entertain a discussion of the potential havoc wrought by raging hormones (Widom, 1988; Wilson & Herrnstein, 1985). The contemporary version of this long-standing argument has taken the form of premenstrual syndrome or PMS. Researchers such as Dalton (1977) propose that the hormonal changes occurring with menstruation are causally related to an increase in antisocial or criminal behaviour. However, empirical support for the existence of PMS and its potential to facilitate criminal behaviour is largely non-existent.

The basic premise of PMS (that mood swings occur as a result of menstrual hormonal changes) and its proposed etiology (a progesterone deficiency) are questionable. Research using prospective designs has found no significant differences between men's and women's mood states throughout the month. For example, McFarlane, Martin and Williams (1988) found no sex differences in mood states across a two-month period; the greatest mood fluctuations for both men and women corresponded to a weekly cycle of mood elevations on Fridays and Saturdays. Furthermore, double-blind, cross-over studies of progesterone-supplement treatment programs (progesterone
and a placebo control) have found significant effects of equal magnitude for both progesterone and the placebo (Hamilton, Perry, Alagna, Blumenthal & Herz, 1984; Sampson, 1979).

The acceptance of PMS as an explanation of women's criminality is due largely to Dalton's (1977) research showing correlations between PMS and antisocial or criminal behaviour in British schoolgirls, women awaiting trial, and inmates at Holloway Prison. Dalton reported that acts of disobedience or criminality occur with disproportionately high frequency during the premenstrum and the paramenstrum phases of the cycle. However, Dalton has conducted only retrospective studies that are subject to the well-documented bias of stereotypic beliefs concerning menstruation (Ruble & Brook-Gunn, 1979; Slade, 1984). Harry and Balcer (1987), in their review of menstruation and crime, further criticized the empirical literature, including Dalton's work, and concluded that, "In our opinion, the existing studies are so severely flawed and have such inconsistent findings as to be virtually useless except to stimulate future research." (p. 318) In a more recent review Kendall (1991) examined—within a sociopolitical context—the role of PMS in the criminal justice system. She concluded that PMS should not be legally recognized because, although it may benefit individual women in having their sentences reduced, it promotes the oppression of women as a group by accepting the medicalization of women's social and political reality.
While PMS epitomizes the biological notion of an inherent female pathology, psychopathology has frequently been invoked as an explanation of female criminality. Widom (1978) reviewed several studies that attempted to ascertain the extent of emotional instability or mental imbalance among female criminals; some of these studies cited socioeconomic or situational variables, such as divorce or poor education, as signs of psychiatric abnormality. For example, Glueck and Glueck (1934) considered prostitution and illegitimate children to be evidence of a mental imbalance. Widom (1978) suggested that the origin of this perception lies partly in social and psychological variables. Because women offenders are so rare, they may be seen as especially abnormal and unstable, a perception that may be further bolstered by their deviance from the female sex role. Moreover, many behaviours that were considered diagnostic of instability, such as neurotic symptoms, were also associated with the feminine sex role. Control groups, however, were not used and the base rates of these "abnormalities" in the general population were not established. Unfortunately, this approach has had a hangover effect, with subsequent research being geared toward viewing female offenders as unstable neurotics and overshadowing other less sex role-compatible diagnoses, such as psychopathy.

Clearly, the majority of these theories have not contributed to an objective consideration of women's
criminality. Rather, the fixation on biological and sex-role based theories has, not surprisingly, contributed to an indifference toward researching alternative explanations.\(^1\) Meaningful research has been impeded by the necessity to empirically address these theories, and the resources that might have been spent on more realistic explanations have been wasted on correcting false stereotypes.

An additional reason for the neglect of research on psychopathy in female offenders may have been the use of sex-role stereotypes that rigidified society's view of women. Women were seen as inherently nurturant and self-sacrificing and, by implication, unable to be psychopathic. The concept of womanhood was the antithesis of psychopathy and, since women were viewed in terms of their sex-role stereotypes, the thought of a woman being so far removed from her "biological" role of loving caregiver was deemed almost impossible. Widom (1984) noted that the diagnosis of personality disorders is influenced to a large extent by sex role expectations, with the result that psychopathy is rarely diagnosed in women because of its incompatibility with the female sex role.

Consequently, psychopathy was, and to some extent still is,  

\(^1\)This is not to dismiss all biological theories of crime, but only those empirically unsupported theories based on stereotypes of women.
considered largely a male disorder.

Attitudes have changed considerably, particularly in light of the increase in women's crime in the 1970s. In fact, the upswing in female offenses and the media's mostly exaggerated coverage of this trend (Faith, 1987) have helped to promote the credibility of female psychopathy. In addition, the feminist movement has exposed the inaccuracies in women's sex role stereotypes and has campaigned for the acceptance of women in non-stereotypic roles. As a result, society appears to be more willing to accept the notion of female psychopathy.

Women and Psychopathy

Although the etiology and measurement of psychopathy have long been debated, there is a consensus as to its clinical features. Psychopathy is marked by a consistent pattern of antisocial, irresponsible and impulsive behaviours combined with an inability to experience strong affective ties to friends or family, to develop loyalties, or to experience anxiety or guilt (Cleckley, 1976; Hare, 1986). The psychopath is interpersonally glib, manipulative and charming, often in pursuit of an illegal and always self-serving goal. Because of the propensity for psychopaths to engage in antisocial behaviours, the construct is particularly useful in a forensic context. Studies with male inmates have found that psychopaths commit a greater number of criminal offenses than do non-psychopaths (Hart & Hare, 1989; Kosson, Smith & Newman,
and have a higher rate of conviction for violent offenses both inside and out of the prison setting (Hare & McPherson, 1984; Serin, 1991). Moreover, several studies have found that psychopathy is a strong predictor of recidivism and violence in male federal offenders (Harris, Rice & Quinsey, 1993; Hart, Kropp, & Hare, 1988; Serin, 1991; Serin, Peters & Barbaree, 1990; Wong, 1984).

Quite clearly, the construct of psychopathy could not be further removed from the stereotypes of femininity and motherhood. Yet, there are many women—well represented in the media—who exhibit the full array of psychopathic traits. Two examples are Diane Downs, convicted of murdering her daughter and of the attempted murders of her other two children in order to win back the affections of her lover, and Myra Hindley, the accomplice to Ian Brady, a serial child killer in Britain. Many people can recall one or two—perhaps less extreme—examples from their own experience: A family member or an acquaintance who possessed many psychopathic traits.

However, even when they satisfy most or all of the criteria for psychopathy, we still tend to avoid seeing women as psychopathic. Perhaps stereotypical thinking has narrowed our perceptions so that we require justification before we can see women outside of their typical sex roles. Consequently, we find ourselves trying to generate theoretical explanations for the obvious: That women may exhibit certain negative behaviours and personality traits usually attributed to men.
Nevertheless, it is surprising—given its discriminative and predictive abilities with male offenders—that the construct of psychopathy has not been incorporated into the study of female criminality. The 1960s and 1970s saw the beginning of work in this area, with a handful of studies that speculated as to the prevalence of psychopathy in female prison populations. However, the main objective of these studies was to examine some other aspect of female criminality, such as emotional instability or profiles of criminality; rates of psychopathy were reported as just one of several other diagnostic categories. For example, Woodside (1962) examined "instability" in women offenders and found that roughly 2% of the 139 women admitted to Holloway Prison over a six-month period were diagnosed as psychopathic, as defined by the British Mental Health Act (MHA) of 1959. Section 4 of the MHA (1959) describes Psychopathic Disorder as "a persistent disorder or disability of mind (whether or not including subnormality of intelligence) which results in abnormally aggressive or seriously irresponsible conduct on the part of the patient and requires or is susceptible to medical treatment." Similarly, Tennent, McQuaid, Loughnane and Hands (1971) reported that 39% of their sample of female arsonists were classified as psychopaths according to the MHA. In a study of shoplifters, Gibbens, Palmer and Prince (1971) found that psychopathic offenders made up approximately 5% of their sample.
Cloninger and Guze (1970) studied the relation between psychiatric illness and female criminality. Using exclusively behavioural criteria for sociopathy, they found that 65% of female offenders had a principal diagnosis of sociopathy. Sociopathy was defined as a history of police trouble plus at least two of the following: a history of excessive fighting; school delinquency; a poor job record; a period of wanderlust; being a runaway. For women, a history of prostitution was also acceptable (Guze, Goodwin and Crane, 1969). They also found that the prevalence of hysteria among female offenders was "20 times greater...than in the general population," (p.309) suggesting that there may be a strong association between hysteria and sociopathy. Cloninger & Guze (1973) found that 90% of recidivists from a sample of 66 female felons had a diagnosis of sociopathy. Moreover, in a six-year followup study, Martin, Cloninger & Guze (1978) found that sociopathy was one of the most powerful predictors of recidivism.

In a large scale longitudinal study, Robins (1966) followed sociopathic delinquents into adulthood. Although her sample was predominantly male, 27% of 141 girls were diagnosed as sociopaths in adulthood. These women reported having had more disturbed family backgrounds than did sociopathic men and, as juveniles, having been referred to the clinic for their sexual activity more often than boys. Robins' definition of sociopathy was based on satisfying at least five of 19 criteria or areas of the subject's life, only two of which
(lack of guilt and pathological lying) involved a personological trait. The remaining 17 items were specific behaviours, such as work history, arrests and drug use.

Daniel, Harris and Husain (1981) studied psychiatric disorders in female offenders, dividing their sample into a young age group (17–39 years of age) and a mid-life group (40–54 years of age). The authors used the Diagnostic and Statistical Manual of Mental Disorders (second edition; DSM-II) classification system in which antisocial personality was described in very general terms referring to socially deviant behaviours and personality traits, such as callousness, selfishness and an inability to feel guilt. There were no specific criteria given, only a general description of an unsocialized and callous individual with antisocial behaviour patterns. None of the women in the mid-life group received a diagnosis of antisocial personality; however, the sample size was quite small (n=18). Conversely, among the young age group, antisocial personality was the most common diagnosis, at 40%. In a similar study looking specifically at homicidal offenders, young offenders were most often diagnosed as antisocial personality with drug abuse (56.3%), whereas the mid-life offenders were characterized by a history of alcoholism and physical abuse by their spouses who, subsequently, became their victims (Husain, Daniel & Harris, 1983).
Similar results have been obtained in studies that used the Diagnostic and Statistical Manual of Mental Disorders (third edition; DSM-III, 1980) criteria for antisocial personality disorder (APD); see Appendix B for a complete list of criteria. Robertson, Bankier and Schwartz (1987) reported that 60% of their sample of 91 Canadian female offenders received a diagnosis of APD. In an American study, 29 of 100 female offenders were classified as APD; the only other diagnosis that was more common was that of alcohol abuse and/or dependence (36%). Brownstone and Swaminath (1989) also studied Canadian female criminals and, using the criteria of the International Classification of Diseases (Ninth Revision; ICD-9), found that 38.5% were personality disordered, the majority being Antisocial (8%) or Hysterical Personality Disorder (10%). The ICD-9 criteria for Antisocial Personality Disorder are cited in a single paragraph; no specific criteria are listed and the individual is described as affectively cold and callous with a disregard for social norms and a pattern of antisocial behaviour.

The above studies applied traditional diagnostic taxonomies to female offenders. Only a few studies have developed empirical typologies of female offenders. A study by Butler and Adams (1966) used the Jesness Psychological Inventory (Jesness, 1962) with delinquent girls. They identified three types of delinquents, two of which were characterized by psychopathic traits. In a study of adult
women, Chester (1976; cited in Widom, 1978) delineated four behavioural dimensions of criminality (an early onset of juvenile delinquency, recidivism, hostility, and socioeconomic status) but, unfortunately, did not focus on personality variables. To fill this gap, Widom (1978) developed an empirical taxonomy of female offenders based on personality variables and pathology. Using a variety of self-report inventories (Special Hospitals Assessment of Personality and Socialization; Blackburn, 1974, cited in Widom, 1978), Widom cluster-analyzed the data and identified four major types. One type typified the Cleckley-like psychopath, but it was the smallest group, consisting of only four out of 66 subjects (6.1%).

With respect to experimental research, there is little to report. Simon, Holzberg and Unger (1951) administered a social judgment task to psychopathic and "normal" women in which satisfying one's own needs was in conflict with the needs of others. Psychopathic women were identified by a psychiatrist's diagnosis, the basis of which was not specified. In an open-ended answer format, the responses from psychopathic women were more often concerned with satisfying their own needs than the needs of others. However, no group differences were obtained with a multiple-choice format (which the authors argued would provide clues to socially desirable answers). Apparently, the psychopaths were able to recognize the socially correct answer when prompted, but when they were
deprived of any situational clues they regressed to a more characteristically self-centered response.

Maas (1966) found that sociopathic women, defined on the basis of MMPI profiles, demonstrated a greater emotional distance from and lack of identification with significant others in their lives than did nonsociopaths. Bernard and Eisenman (1967) examined the effects of social versus monetary reinforcement in a learning paradigm; they predicted that female sociopaths would show better task performance when conditioned with the monetary reinforcement than with social reinforcement. However, the opposite occurred. The authors argued that the results did not support Cleckley's theory of semantic dementia—a dissociation between the affective and denotative meaning of language—as the primary deficit in psychopaths.

Methodological Issues

On balance, there is sufficient reason to believe that psychopathy is an important construct in female criminality. However, the literature review raised two major methodological issues. The first issue concerns the extent to which sex role stereotypes influence the assessment and/or diagnosis of women. Specifically, to what extent are women not labelled as psychopathic or APD due to sex role stereotypic expectations? Several authors have hypothesized that histrionic personality disorder (HPD) and/or hysteria are actually the female
equivalents of APD (Cloninger & Guze, 1970; Spalt, 1980; Widom, 1978). The underlying disorder is seen as the same for both sexes but the behavioural manifestations differ according to differential socialization (based on sex roles). APD is couched in more masculine terms and HPD in more feminine ones. Moreover, the criteria for HPD are remarkably similar to those of psychopathy, particularly in terms of personality traits. For example, HPD includes disturbances in interpersonal relationships, such as shallowness (although superficially appealing and charming), egocentricity, inconsiderate of others, quickly bored, prone to manipulative suicidal gestures and behaviours that are overly dramatic, a craving for novelty and stimulation, and irrational angry outbursts (DSM-III, 1980). This description does not differ markedly from that of psychopathy.

Warner (1978) found that even when the clinical features of their patients were the same, mental health professionals tended to label men more frequently as APD and women more frequently as HPD. In a replication of this study, Ford and Widiger (1989) confirmed that there was a sex-based bias in the diagnosis of APD and HPD. Although there was not a sex bias in terms of the presence or absence of individual criteria, clinicians' overall diagnoses were still influenced by the sex of the subject. These results suggest that previous estimates of psychopathy or APD among women may be
spuriously low and that they may reflect a trend to label female psychopaths as histrionic.

The second methodological concern is the definition of psychopathy and its operationalization into diagnostic criteria. As is evident from the above review, a variety of methods have been used to define and diagnose psychopathy in female offenders, each based on a different conception of the disorder and each with a unique set of criteria. These criteria have ranged from a single psychiatric decision or a score on a measure of socialization to MMPI profiles. Some classification systems require that a minimum number of specific criteria be met (DSM-III, APD, 1980; Guze, Goodwin & Crane, 1969; Robins, 1966), while other typologies have simply provided a general description of the disorder with few specific criteria (DSM-II, 1968; ICD-9, 1979; MHA, 1959). Consequently, the lack of conceptual and criterial consensus across studies reduces the utility of the empirical findings. In fact, it is impossible to interpret differing results or to summarize the research because it is not clear if the same disorder is being measured.

These measures of psychopathy are not only disparate, they also have a strong behavioural focus, to the neglect of characterological traits. For example, Guze, Goodwin and Crane (1969) and the English MHA (1959) both give brief descriptions of psychopathy couched exclusively in behavioural terms (Hare & Harpur, 1986).
One exception to the pervasive behavioural approach is a study by Martinez (1972) who converted Cleckley’s criteria into a 16-item checklist, with each item rated on a scale ranging from one to ten. Two sergeants and a correctional officer rated 45 female inmates. Unfortunately, the operationalization of the criteria was in terms of observable behaviours and the only instrument used as an external validity check was the MMPI. Martinez found that her scale was significantly correlated with the MMPI Ma (Hypomania) scale but not with the Pd (Psychopathic Deviate) scale. In spite of these problems the study is noteworthy because it is one of only a few attempts to include personological criteria in the assessment of psychopathy in female offenders.

Currently, most studies of female offenders use the DSM-III or DSM-III-R criteria for APD. However, many investigators (Hare, 1983; Millon, 1981; Wulach, 1983) have criticized APD for being too much a behavioural measure of social deviancy and for ignoring the more personological variables that are thought to be at the core of psychopathy. Cleckley (1976) placed great emphasis on personality traits in his description of psychopathy; he stated that simple acts of social deviancy do not necessarily signify the disorder, unless they are accompanied by the characteristic affective features. Moreover, the connection between APD and criminality is a circular argument because APD is defined in terms of criminal or antisocial behaviours, a problem that the PCL-R largely
avoids by including affective and interpersonal traits and behaviours in the assessment of psychopathy. Assessment tools that rely primarily on behavioural indications of social deviance cannot provide an incomplete picture of the disorder.

The Axis II Work Group of the American Psychiatric Association's Task Force on DSM-IV has acknowledged the shortcomings of the current APD criteria and suggested possible changes, including a need to simplify the criteria and to place less emphasis on antisocial behaviours. Field trials have been established to evaluate four criteria sets: 1) the current DSM-III-R criteria; 2) a shortened version of the DSM-III-R criteria; 3) ICD-10 criteria for dyssocial personality disorder; and 4) a set of criteria derived from the Hare Psychopathy Checklist-Revised (PCL-R; Hare, 1991).

The Psychopathy Checklist

An alternative measure for the assessment of psychopathy is the Psychopathy Checklist (PCL) and its revision, the PCL-R (Hare, 1991). Based on Cleckley's (1976) concept of psychopathy, it encompasses both personality and behavioural components (Hare, 1986; Harpur, Hakstian & Hare, 1989). The PCL-R consists of 20 items rated on three-point scales, with a total score that can range from 0 to 40 (see Appendix A). Ratings are based on interviews and inspection of institutional and medical files. A criterion cutoff score of 30 yields a prevalence rate of 15-20% among male inmates. The
reliability and validity of the PCL-R have been well established with male offenders. In forensic and psychiatric facilities PCL-R scores approximate a normal distribution, with means ranging from 20.1 to 23.9 and standard deviations from 6.7 to 9.0. The alpha coefficient ranges from .85 to .89 and the mean inter-item correlation is between .23 and .30. The interrater reliability is generally high, ranging from .85 to .94. Factor analysis of several different samples (five prison samples and three forensic psychiatric samples) has revealed an underlying two-dimensional structure: Factor 1 (items 1, 2, 4, 5, 6, 7, 8 and 16) reflects interpersonal and affective traits, whereas Factor 2 (items 3, 9, 10, 12, 13, 14, 15, 18, and 19) reflects social deviance (Hare, Harpur, Hakstian, Forth, Hart & Newman, 1990).

Measures of convergent and discriminant validity have used a variety of clinical and self-report measures, resulting in a pattern of correlations consistent with theoretical predictions (Harpur, Hare & Hakstian, 1989). Table 1 illustrates how the PCL/PCL-R and its factors correlate with APD ratings and six self-report measures of personality in male offenders. It is apparent that scales that measure personality traits are correlated most strongly with Factor 1 and those that measure social deviancy most strongly with Factor 2. For example, trait anxiety, as measured by the State Trait Anxiety Inventory (Spielberger, Gorsuch & Lushene, 1970), is most strongly correlated (negatively) with Factor 1,
which is congruent with the theory that psychopaths experience little anxiety or subjective distress. Similarly, measures of interpersonal behaviour, such as the Interpersonal Adjective Scale (IAS-R; Wiggins, 1979) and the Interpersonal Reactivity Index (IRI; Davis, 1983) are negatively correlated with Factor 1. Depression, as measured by the Beck Depression Inventory (Beck, Ward, Mendelson, Mock & Erbaugh, 1961), is negatively correlated with high PCL scores, possibly indicating an absence of emotions that can lead to depressive states such as severe anxiety, guilt or sadness. Conversely, prototypicality ratings of narcissism are positively correlated with Factor 1, reflecting an overlap between the diagnostic criteria for psychopathy and narcissistic personality disorder. Factor 2, however, is more highly correlated with behavioural measures of social deviancy, such as the socialization scale of the California Personality Inventory (CPI-So; Gough, 1969) and APD diagnoses.

Though the PCL-R is a reliable and valid measure of psychopathy in male inmates, it has rarely been applied to the study of female offenders. Loucks (1985) made PCL assessments of 86 women at the Kingston Penitentiary in Ontario. The overall mean of 19 was somewhat lower than that typically found for men, and the means and item-total correlations for items 1 (superficial charm) and 3 (grandiose) were low. Interrater reliability was not reported. In addition, a small number of subjects were included in the study even though they
<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th>2</th>
<th></th>
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</thead>
<tbody>
<tr>
<td>APD</td>
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<td>.32</td>
<td>.63</td>
<td>.54</td>
</tr>
<tr>
<td>BDI</td>
<td>247</td>
<td>-.12</td>
<td>-.09</td>
<td>-.14</td>
</tr>
<tr>
<td>SRP-II</td>
<td>100</td>
<td>.50</td>
<td>.44</td>
<td>.54</td>
</tr>
<tr>
<td>STAI-Trait Anxiety</td>
<td>247</td>
<td>-.22</td>
<td>-.02</td>
<td>-.13</td>
</tr>
<tr>
<td></td>
<td>111</td>
<td>-.20</td>
<td>.18</td>
<td>.01</td>
</tr>
<tr>
<td>NPI</td>
<td>100</td>
<td>.33</td>
<td>.34</td>
<td>.34</td>
</tr>
<tr>
<td>IRI</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>perpsective-taking</td>
<td>-.15</td>
<td>-.17</td>
<td>-.13</td>
</tr>
<tr>
<td></td>
<td>fantasy</td>
<td>-.05</td>
<td>.00</td>
<td>-.01</td>
</tr>
<tr>
<td></td>
<td>empathic concerns</td>
<td>-.32</td>
<td>-.27</td>
<td>-.33</td>
</tr>
<tr>
<td></td>
<td>personal distress</td>
<td>-.31</td>
<td>-.18</td>
<td>-.33</td>
</tr>
<tr>
<td>IAS-R</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>dominance</td>
<td>.35</td>
<td>-.01</td>
<td>.19</td>
</tr>
<tr>
<td></td>
<td>love</td>
<td>-.26</td>
<td>-.29</td>
<td>-.30</td>
</tr>
</tbody>
</table>

**Note.** Data for male offenders taken from Hare Psychopathy Checklist-Revised (Hare, 1991).
declined to participate: They were rated on the basis of the researcher's past interactions with the women. Given the irregularities in data collection and the lack of interrater reliability data, Loucks' findings are problematic.

Neary (1990) used the PCL-R to assess 60 black and 60 white female inmates in Missouri. She obtained a normal distribution of scores, with a mean of 21.1 and a standard deviation of 6.49, values that were similar to those reported for male offenders (Hare, 1991). The interrater reliability was very high (.94) but the mean inter-item correlation was slightly lower (.15) than the value of .20 or above usually indicative of a unidimensional scale. Neary (1990) did not factor analyze her data to examine the underlying structure of the scale, nor did she use a sufficiently extensive battery of self-report measures to establish convergent and discriminant validity for the PCL-R or its factors. She included the following scales, all of which are behavioural measures and relevant to Factor 2 only: the MMPI-Pd scale, the CPI-So scale, the Sensation Seeking Scale (SSS; Zuckerman, 1979), and APD diagnoses. Correlations between these measures and the PCL-R were similar to those previously obtained with male samples, and provide evidence of the validity of the PCL-R as a measure of at least the social deviance component of psychopathy.

To date, no study has properly evaluated the validity of the PCL-R with female offenders. Given the history of sex bias
in this area, the low rates of female offending, and the fact that the PCL-R was developed with a male population, it is essential that the issue of sex differences be carefully considered. Cloninger and Guze (1970) and Widom (1984) have stated that it is reasonable to assume that there are significant differences between male and female psychopaths, differences that should occur primarily in the behavioural manifestations of the disorder.

Cleckley (1976) describes the psychopath as a manipulator: A smooth talking con artist and prolific liar who feels no guilt or remorse for his or her antisocial acts. Unable to form close, lasting affective ties with others, these people use relationships as an opportunity to exploit people's trust. If psychopathy exists in women, and there appears considerable evidence to suggest that it does, and if a specific cluster of personality traits is at the core of the disorder as Cleckley (1976) and Hare (1986) contend, then it should be possible to identify this cluster in female offenders. However, there may be differences in the behavioural expression of these traits. For example, due to a more vigilant supervision of young girls and higher expectations for social conformity, female psychopaths may not demonstrate the same degree of early behaviour problems or juvenile delinquency as do their male counterparts.

In addition, women shoulder most of the responsibility for raising children. Because this is an important and time
consuming role for women, and because it involves strong affective attachments with others, it is likely that psychopathic women differ from nonpsychopathic women in their childrearing practices. In this regard, Robins (1966) reported that sociopathic women were less likely than other women to have children and, if they did have children, the children were more likely to be raised by foster or surrogate parents. Thus, some behavioural criteria established with a male sample may not be useful indicators of psychopathy in women, whereas other activities, such as parenting may prove to be better indicators.

The above discussion leads to the prediction that the personality traits described by PCL-R Factor 1 can be identified in female offenders and that the psychometric properties of Factor 1 will be consistent with those obtained from male offenders. Factor 2, however, may not reflect the behavioural component of psychopathy as accurately in females as it does in males. Unfortunately, it is difficult to predict specifically which Factor 2 items, if any, will differentiate between the sexes.

The present study had four objectives: (1) to assess the psychometric properties of the PCL-R in a population of female offenders; (2) to establish convergent and discriminant validity by examining the pattern of correlations between the PCL-R and self-report measures, prototypicality ratings of personality disorders, and DSM-III-R diagnoses and ratings;
(3) to determine if the factor structure of the PCL-R in female offenders is congruent with the structure found in male offenders; and (4) to determine if some PCL-R items are less appropriate for female than for male offenders.

In general, the psychometric properties and the correlates of the PCL-R should be much the same in female offenders as they are in male offenders. However, it is possible that not all of the Factor 2 items will prove as useful with females as they are with males.

Method

Subjects

The subjects were 75 female offenders either incarcerated or on probation in the Lower Mainland area of Vancouver, Canada. During the period of data collection the older institutions that housed female offenders were closed and new facilities were opened. As a result, inmates were recruited from several different facilities. Forty inmates from Lakeside Correctional Centre and two inmates from the Twin Maples facility participated prior to the closing of these institutions. Two women were on probation and 32 inmates from the new Burnaby Correctional Centre for Women also agreed to participate. All subjects were volunteers and each received $20.00 for her participation.
The age of the subjects ranged from 19 to 56 years, with an average of 31.4 years; 80% were below 39 years of age. The majority (69.3%) were White; 25.3% were Native Indian, 4% were Black and the remaining 1.3% were of mixed racial origin. Inmates suffering from serious mental disorders are usually incarcerated at forensic psychiatric hospitals and, therefore, the sample was relatively free of psychotic inmates (one inmate had been diagnosed with a psychotic disorder but was being treated with anti-psychotic medication at the time of the interview).

The average number of years of education was 10.5 years, with a minimum of grade 6 and a maximum of five years of university (one woman had obtained a teaching certificate). Only 26.7% of the subjects had completed grade 12. Thirty-nine of the 75 subjects were in a maximum security facility or unit within the institution, 34 were in a minimum or medium security unit, and two were on probation.

**Measures**

Subjects were first interviewed and then administered the questionnaires. Half of the women completed both parts of the study in one session lasting approximately three hours. The others completed the questionnaires in a second, one-hour session. Several questions were added to the PCL-R interview to address specific areas or problems of relevance to women and for possible use as material for new items. (Refer to
Appendix C for the modified version of the interview format.) The additional questions inquired about sexual assault in childhood and in adulthood, physical abuse in intimate relationships, and the extent of the subjects' involvement in raising her children.

The battery of self-report measures is briefly described below. (See Appendix D for details). Because of their theoretical relations to psychopathy, all of these measures (Interpersonal Reactivity Index; Davis, 1983; Davis, Hull, Young & Warren, 1987; California Personality Inventory-Socialization subscale; Gough, 1969; Narcissistic Personality Inventory; Raskin & Hall, 1979) have been used in the study of psychopathy in male offenders. I included the Beck Depression Inventory (Beck, Ward, Mendelson, Mock & Erbaugh, 1961) and the State-Trait Anxiety Inventory - Trait (Spielberger, Gorsuch & Lushene; 1970) even though their correlations with the PCL-R typically are relatively small and fluctuate across samples. Because of their theoretical relations to psychopathy, and because there are data on their correlations with male offenders, I decided to include them for comparative purposes. Each of these instruments has acceptable reliability (with the possible exception of the Interpersonal Reactivity Index for which little data are available).

1) Beck Depression Inventory (BDI; Beck, Ward, Mendelson, Mock & Erbaugh, 1961) is a well-established measure of
depression. There are 21 multiple-choice items. The subject circles one or more choices that best describe her emotional state over the past week. Total scores of 10 to 18 indicate a mild to moderate depression, scores of 19 to 29 indicate a moderate to severe depression, and scores of 30 or above indicate an extremely severe depression.

2) The Interpersonal Reactivity Index (IRI; Davis, 1983; Davis, Hull, Young & Warren, 1987) consists of 28 items. The subject rates, on a five-point scale, how well each item describes her. The IRI measures two types of empathy on four separate subscales: perspective-taking, fantasy, empathic concern, and personal distress. The first two scales are combined to provide a score on cognitive empathy and the last two scales provide a score on emotional empathy.

3) The Narcissistic Personality Inventory (NPI; Raskin & Hall, 1979) is designed to measure narcissism in a normal population. There are 40 pairs of statements. The subject chooses the member of each pair that best describes her. The NPI reflects several traits that are similar to psychopathy: grandiosity, self-centeredness, and a sense of entitlement.

4) The State-Trait Anxiety Inventory-Trait (STAI), developed by Spielberger, Gorsuch and Lushene (1970), measures self-reported trait anxiety (trait referring to the subject’s
general level of anxiety). It consists of 20 items, each rated on a four-point scale, indicating how often and in what circumstances she feels anxious.

5) The California Personality Inventory-Socialization subscale (CPI-So; Gough, 1969) consists of 54 true-false items based on Gough's role-taking model of personality. A low score indicates low socialization. In males, the So scale is negatively correlated with the social deviance component of psychopathy, as reflected in the PCL-R Factor 2.

6) The Interpersonal Adjective Scale (IAS-R, Wiggins, 1979; Wiggins, Trapnell & Phillips, 1988) is a self-report scale that assesses an individual's usual style of interpersonal behaviour. The revised version consists of 64 adjectives on which the subjects rate themselves. Scores are then computed on the two major dimensions of interpersonal behaviour—Dominance and Love—and are plotted on the interpersonal circumplex.

7) The revised version of the Self-Report Psychopathy (SRP-II) scale (Hare, 1985; Harpur & Hare, 1991) is based on the PCL-R. It contains 60 items, each rated on a seven-point scale.
Procedure

PCL-R. Two independent ratings on the PCL-R were obtained for each subject. Raters were either trained research assistants or trained graduate students. Subjects were interviewed following the format of the PCL-R interview schedule and all interviews were videotaped. Ratings were based on the interview material and file information and, in the event that information was not available to score an item, it was omitted and the total score was prorated. Each item was scored on a three-point scale (0 to 2) reflecting the degree to which the item applied to the individual. Potential scores could range from 0 to 40. All items were rated according to standard scoring procedures (Hare, 1991). The only item that required discussion among raters was item 9, parasitic lifestyle; raters were cautioned not to use, as a basis for scoring this item, evidence of dependency—such as homemaker—that could be consonant with traditional sex role expectations. High scores on this item required evidence of exploitation or of living off others quite distinct from the socially acceptable role of homemaker. Subjects also completed a battery of seven self-report questionnaires (described above) theoretically related to the construct of psychopathy, as measured by the PCL-R.

Because the sample was too small to conduct an exploratory factor analysis, a common factor analysis with a forced two-factor solution was performed. Congruence
coefficients with the male two-factor solution of greater than .85 were to be interpreted as indicating that the corresponding factors were equivalent (Havre & Ten Berge, 1977; cited in Harpur, Hare & Hakstian, 1988).

**Personality Disorders.** Prototypicality ratings of three DSM-III-R, Cluster B personality disorders (histrionic, narcissistic, and borderline) were obtained from a subsample of 40 offenders to examine the association between psychopathy and other personality disorders. Prototypicality ratings were based on the number and severity of DSM-III-R symptoms of the disorder and, unlike diagnosis, were not constrained by formal DSM-III-R decision-making rules (Hart & Hare, 1989). Ratings were based on the interview and file material and conducted by an independent rater, a Ph.D. level graduate student with considerable clinical experience. A three-point scale was used, with 0 indicating an absence of the symptom, 1 indicating its possible presence, and 2 indicating its definite presence. A total score was obtained for each personality disorder by summing the scores for each symptom.

In addition, two independent APD diagnoses, based on DSM-III-R criteria, were obtained for each subject (see Appendix B). Raters were blind to the PCL-R and other DSM-III-R ratings. Subjects were rated on a three point scale: 0 indicating definitely not APD, 1 indicating possibly APD, and 2 indicating definitely APD.
Results

Table 2 presents the descriptive and psychometric statistics for the PCL-R in the sample of female offenders, along with comparative data from the pooled sample of male offenders described in Hare (1991). The distribution of scores was very similar to that obtained with male offenders.

However, the percentage of scores (base rate) at or above the criterion (30) for psychopathy was greater for female than for male offenders. The interrater reliability was determined by computing intraclass correlation coefficients (ICC; Shrout & Fleiss, 1979) which take into account differences in the anchor points used by different raters. The ICCs for PCL-R total scores were uniformly high. The kappa coefficient for interrater agreement on the presence (a PCL-R score of 30 or above) or absence of psychopathy was .78.

Cronbach’s coefficient alpha and the mean inter-item correlation were very similar to those obtained with male offenders, suggesting that the PCL-R has high internal consistency and can be regarded as a homogeneous scale that measures a unidimensional construct in both female and male offenders.

The mean, standard deviation and base rate (26.7, 6.33 and 32% respectively) for Native Indian inmates did not differ markedly from the other three samples.
### Table 2

**Descriptive Statistics and Interrater Reliabilities of the PCL-R for Samples of Female and Male Offenders**

<table>
<thead>
<tr>
<th>Statistic</th>
<th>Female Offenders</th>
<th>Male Offenders</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Present sample</td>
<td>Neary sample</td>
</tr>
<tr>
<td>Mean</td>
<td>24.49</td>
<td>21.13</td>
</tr>
<tr>
<td>Standard Deviation</td>
<td>7.45</td>
<td>6.49</td>
</tr>
<tr>
<td>alpha coefficient</td>
<td>.87</td>
<td>.77</td>
</tr>
<tr>
<td>base rate</td>
<td>31%</td>
<td>11%</td>
</tr>
<tr>
<td>mean inter-item correlation</td>
<td>.25</td>
<td>.15</td>
</tr>
<tr>
<td>ICC single rating</td>
<td>.92</td>
<td>.83</td>
</tr>
<tr>
<td>averaged rating</td>
<td>.96</td>
<td>.91</td>
</tr>
</tbody>
</table>

**Note.** Data for male offenders based on pooled data from seven samples of prison inmates (N=1192) as described in the Hare Psychopathy Checklist-Revised (Hare, 1991). Base rate refers to the percentage of subjects who scored 30 or above on the PCL-R.
offenders (Harpur et al., 1989).

Individual item means, standard deviations and item-total correlations are presented in Table 3. Most item-total correlations were close to .5, with three exceptions. The item-total correlation for items 1 (glibness, superficial charm), 2 (grandiose sense of self) and 4 (pathological lying) was .08, .19 and .09, respectively. However, as indicated below, each of these three items loaded on Factor 1, and were moderately correlated with the Factor 1 total score (.46, .65, and .36, respectively). Inclusion of these items either increased or did not change the alpha coefficient for Factor 1.

Factor Structure

Previous research has shown that the PCL-R has two correlated factors, one consisting of the personality traits central to psychopathy and the other consisting of attributes reflecting social deviance. The two factors typically correlate approximately .5, and have different patterns of correlations with a variety of external variables. These patterns have been replicated in several male samples (for further descriptions of procedures and data, see Harpur, Hakstian & Hare, 1988). Unfortunately, the size of the present sample was considerably smaller than that required for a good exploratory factor analysis.

Instead, I conducted an unweighted least-squares common
Table 3

Descriptive Statistics and Item-Total Correlations for Each PCL-R Item for Samples of Female and Male Offenders

<table>
<thead>
<tr>
<th>Item</th>
<th>Female M</th>
<th>Female SD</th>
<th>Female r</th>
<th>Male M</th>
<th>Male SD</th>
<th>Male r</th>
</tr>
</thead>
<tbody>
<tr>
<td>1) Glibness/superficial charm</td>
<td>1.10</td>
<td>.62</td>
<td>.08</td>
<td>1.10</td>
<td>.62</td>
<td>.08</td>
</tr>
<tr>
<td>2) Grandiose</td>
<td>.91</td>
<td>.61</td>
<td>.19</td>
<td>.91</td>
<td>.61</td>
<td>.19</td>
</tr>
<tr>
<td>3) Proneness to boredom</td>
<td>1.47</td>
<td>.64</td>
<td>.71</td>
<td>1.39</td>
<td>.72</td>
<td>.57</td>
</tr>
<tr>
<td>4) Pathological lying</td>
<td>.96</td>
<td>.61</td>
<td>.09</td>
<td>.96</td>
<td>.76</td>
<td>.54</td>
</tr>
<tr>
<td>5) Conning/manipulative</td>
<td>1.40</td>
<td>.63</td>
<td>.39</td>
<td>1.02</td>
<td>.79</td>
<td>.57</td>
</tr>
<tr>
<td>6) Lack of remorse</td>
<td>1.50</td>
<td>.60</td>
<td>.61</td>
<td>1.45</td>
<td>.70</td>
<td>.51</td>
</tr>
<tr>
<td>7) Shallow affect</td>
<td>1.19</td>
<td>.67</td>
<td>.61</td>
<td>1.15</td>
<td>.75</td>
<td>.53</td>
</tr>
<tr>
<td>8) Lack of empathy</td>
<td>1.47</td>
<td>.61</td>
<td>.63</td>
<td>1.25</td>
<td>.72</td>
<td>.61</td>
</tr>
<tr>
<td>9) Parasitic lifestyle</td>
<td>1.19</td>
<td>.73</td>
<td>.64</td>
<td>1.11</td>
<td>.70</td>
<td>.39</td>
</tr>
<tr>
<td>10) Poor behavioural controls</td>
<td>1.31</td>
<td>.78</td>
<td>.62</td>
<td>1.23</td>
<td>.78</td>
<td>.42</td>
</tr>
<tr>
<td>11) Promiscuous sexual behaviour</td>
<td>1.26</td>
<td>.84</td>
<td>.52</td>
<td>1.12</td>
<td>.85</td>
<td>.38</td>
</tr>
<tr>
<td>12) Early behaviour problems</td>
<td>.67</td>
<td>.70</td>
<td>.39</td>
<td>.99</td>
<td>.85</td>
<td>.43</td>
</tr>
<tr>
<td>13) Lack of realistic plans</td>
<td>1.17</td>
<td>.68</td>
<td>.60</td>
<td>1.28</td>
<td>.74</td>
<td>.46</td>
</tr>
<tr>
<td>14) Impulsivity</td>
<td>1.59</td>
<td>.57</td>
<td>.68</td>
<td>1.52</td>
<td>.66</td>
<td>.51</td>
</tr>
<tr>
<td>15) Irresponsibility</td>
<td>1.48</td>
<td>.64</td>
<td>.63</td>
<td>1.41</td>
<td>.68</td>
<td>.51</td>
</tr>
</tbody>
</table>

(table continues)
Table 3 continues

Descriptive Statistics and Item-Total Correlations for Each PCL-R Item for Samples of Female and Male Offenders

<table>
<thead>
<tr>
<th>Item</th>
<th>Female</th>
<th>Male</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Item</td>
<td>Total</td>
</tr>
<tr>
<td></td>
<td>M</td>
<td>SD</td>
</tr>
<tr>
<td>16) Failure to accept</td>
<td>1.41</td>
<td>.54</td>
</tr>
<tr>
<td>responsibility</td>
<td></td>
<td></td>
</tr>
<tr>
<td>17) Many marital relationships</td>
<td>1.20</td>
<td>.83</td>
</tr>
<tr>
<td>18) Juvenile delinquency</td>
<td>.69</td>
<td>.78</td>
</tr>
<tr>
<td>19) Poor risk for release</td>
<td>1.33</td>
<td>.58</td>
</tr>
<tr>
<td>20) Criminal versatility</td>
<td>1.01</td>
<td>.86</td>
</tr>
</tbody>
</table>

Note. Data for male offenders based on a pooled sample of male inmates and forensic patients (N=1632) as described in the Hare Psychopathy Checklist-Revised (Hare, 1991).
factor analysis with an oblique rotation, which allows for correlations between factors (Harpur et al., 1989). Given that theory and past research predict a two-factor structure, a forced two-factor solution was performed. The pattern matrix is presented in Table 4. (Refer to Appendix E for the correlation matrix.) In order to assess factor equivalence, congruence coefficients for corresponding factors were calculated between the current sample and pooled factor loadings across a number of male samples (see Hare, Harpur, Hakstian, Forth, Hart & Newman, 1990), and between the current sample and Neary's (1990) sample of female offenders. The congruence coefficients are presented in Table 5.

A two-factor solution was clearly supported by the data and accounted for approximately 48% of the variance. The congruence coefficient for Factors 1 and 2 of the current sample and the pooled male samples satisfied the criteria of .85 for factor equivalence (Haven & Ten Berge, 1977; cited in Harpur, Hare & Hakstian, 1988). Similar results were obtained when the present data were compared with Neary's (1990) data. The item composition of the two factors was highly similar to that obtained with male samples. As expected, items 1, 2, 4, 5, 6, 7 and 8——core personality traits——loaded above .4 on

3The same analysis was performed on raw data kindly provided by Neary.
Table 4

Pattern Matrix for Unweighted Least Squares Factor Analysis

<table>
<thead>
<tr>
<th></th>
<th>Factor 1</th>
<th>Factor 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Item 1</td>
<td>.66997</td>
<td>-.25291</td>
</tr>
<tr>
<td>Item 2</td>
<td>.87478</td>
<td>-.22920</td>
</tr>
<tr>
<td>Item 3</td>
<td>.23665</td>
<td>.67962</td>
</tr>
<tr>
<td>Item 4</td>
<td>.44037</td>
<td>-.13919</td>
</tr>
<tr>
<td>Item 5</td>
<td>.55925</td>
<td>.10983</td>
</tr>
<tr>
<td>Item 6</td>
<td>.57769</td>
<td>.38763</td>
</tr>
<tr>
<td>Item 7</td>
<td>.61352</td>
<td>.36565</td>
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<tr>
<td>Item 8</td>
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<td>.43537</td>
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<tr>
<td>Item 9</td>
<td>-.02931</td>
<td>.77655</td>
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<tr>
<td>Item 10</td>
<td>-.00382</td>
<td>.71304</td>
</tr>
<tr>
<td>Item 11</td>
<td>-.04055</td>
<td>.62232</td>
</tr>
<tr>
<td>Item 12</td>
<td>.13752</td>
<td>.37749</td>
</tr>
<tr>
<td>Item 13</td>
<td>.04494</td>
<td>.66765</td>
</tr>
<tr>
<td>Item 14</td>
<td>.07931</td>
<td>.72192</td>
</tr>
<tr>
<td>Item 15</td>
<td>.04272</td>
<td>.71689</td>
</tr>
</tbody>
</table>

(table continues)
Table 4 continues

**Pattern Matrix for Unweighted Least Squares Analysis**

<table>
<thead>
<tr>
<th></th>
<th>Factor 1</th>
<th>Factor 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Item 16</td>
<td>0.33093</td>
<td>0.20612</td>
</tr>
<tr>
<td>Item 17</td>
<td>-0.08414</td>
<td>0.57095</td>
</tr>
<tr>
<td>Item 18</td>
<td>-0.10092</td>
<td>0.53517</td>
</tr>
<tr>
<td>Item 19</td>
<td>-0.01581</td>
<td>0.33663</td>
</tr>
<tr>
<td>Item 20</td>
<td>-0.24445</td>
<td>0.77459</td>
</tr>
</tbody>
</table>
Table 5

**Congruence Coefficients for Corresponding Factors Between The Present Sample and Other Samples of Female and Male Offenders**

<table>
<thead>
<tr>
<th></th>
<th>Present Sample</th>
<th>Pooled Male Sample</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Factor 1</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pooled male sample</td>
<td>.91</td>
<td>---</td>
</tr>
<tr>
<td>Neary’s female sample</td>
<td>.85</td>
<td>.85</td>
</tr>
<tr>
<td><strong>Factor 2</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pooled male sample</td>
<td>.91</td>
<td>---</td>
</tr>
<tr>
<td>Neary’s female sample</td>
<td>.90</td>
<td>.87</td>
</tr>
</tbody>
</table>

*Note.* The data for the male sample are based on pooled factor loadings across a number of male samples (see Hare et. al., 1990 for further details of sample composition). Neary’s data taken from Neary (1990).
Factor 1. Item 16 (failure to accept responsibility) loaded at .33. Items 6, 7, and 8, however, also loaded between .38 and .43 on Factor 2. However, their loadings on Factor 1 were much higher, ranging from .54 to .61.

Of the remaining 11 items, 9 loaded above .4 on Factor 2; the remaining items--12 and 19--loaded .37 and .33, respectively, on Factor 2. Items 11 (sexual promiscuity), 17 (many marital relationships) and 20 (criminal versatility) loaded on Factor 2 in the present sample whereas these items failed to load on either Factor 1 or Factor 2 in the pooled male sample. In Neary’s (1990) sample, only item 11 loaded above .4 on Factor 2. It thus appears that the entire set of items that loaded on Factor 2 in the present sample and in Neary’s (1990) sample was not identical to that found with male offenders. However, the two female samples were relatively small, and the fact that the Factor 2 item compositions of these samples were not identical to that obtained with pooled samples of male offenders may simply be the result of sampling error.

The descriptive statistics and interrater reliabilities for each factor are presented in Tables 6 and 7. The means and standard deviations for Factors 1 and 2 were very similar to those found in previous research with male offenders. The interrater reliability and internal consistency of Factors 1 and 2 were high. The internal consistency and item homogeneity were higher for Factor 2 than for Factor 1, perhaps a
reflection of the relatively objective, behavioural criteria for Factor 2 and the clinical judgments required to score the items in Factor 1.

**Concurrent Validity: Antisocial Personality Disorder**

Antisocial Personality Disorder (APD) is the category in the DSM-III-R which most closely resembles psychopathy, as defined here. The two are not conceptually equivalent, however; APD focuses mainly on antisocial behaviours, criminality, and social deviance and does not require the presence of personality traits described in the PCL-R. As a result, it is easier for an inmate to satisfy the criteria for APD than to receive a high PCL-R score. Not surprisingly, APD has been found to be more strongly correlated with Factor 2 than with Factor 1 in male offenders.

The Kappa coefficient of interrater agreement for the presence or absence of APD was .65, and the percentage of the sample that received a diagnosis of APD was 55%. A diagnosis of APD was based on the average of two independent ratings so that a score of 1.5 or greater indicated the presence of the disorder. This is somewhat lower than the prevalence of APD (approximately 70 - 80%) typically found in samples of male offenders. In Neary's sample of female offenders, the base rate of APD was 62%. Given that APD reflects largely criminal or antisocial activity and that women appear to engage in or be involved in crime to a lesser degree than are men, it is
### Table 6

**Descriptive Statistics and Interrater Reliabilities for the PCL-R Factor 1 for Samples of Female and Male Offenders**

<table>
<thead>
<tr>
<th>Statistic</th>
<th>Female</th>
<th>Male</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Factor 1</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mean</td>
<td>9.95</td>
<td>8.93</td>
</tr>
<tr>
<td>Standard Deviation</td>
<td>3.25</td>
<td>3.93</td>
</tr>
<tr>
<td>Alpha Coefficient</td>
<td>.82</td>
<td>.84</td>
</tr>
<tr>
<td>Mean Inter-Item Correlation</td>
<td>.35</td>
<td>.40</td>
</tr>
<tr>
<td>ICC single rating</td>
<td>.76</td>
<td>.72</td>
</tr>
<tr>
<td>averaged rating</td>
<td>.88</td>
<td>.86</td>
</tr>
</tbody>
</table>

**Note.** Data for male offenders are based on pooled data from seven samples of prison inmates. (N=1192; Hare, 1991).
Table 7

Descriptive Statistics and Interrater Reliabilities for the PCL-R Factor 2 for Samples of Female and Male Offenders

<table>
<thead>
<tr>
<th>Statistic</th>
<th>Female</th>
<th>Male</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mean</td>
<td>10.90</td>
<td>11.69</td>
</tr>
<tr>
<td>Standard Deviation</td>
<td>4.14</td>
<td>3.90</td>
</tr>
<tr>
<td>Alpha Coefficient</td>
<td>.85</td>
<td>.77</td>
</tr>
<tr>
<td>Mean Inter-Item Correlation</td>
<td>.39</td>
<td>.28</td>
</tr>
<tr>
<td>ICC</td>
<td></td>
<td></td>
</tr>
<tr>
<td>single rating</td>
<td>.88</td>
<td>.83</td>
</tr>
<tr>
<td>averaged rating</td>
<td>.94</td>
<td>.91</td>
</tr>
</tbody>
</table>

Note. Data for male offenders are based on pooled data from seven samples of prison inmates. (N=1192; Hare, 1991).
not surprising that the base rate for APD may be somewhat lower among female offenders than among male offenders. The pattern of correlations between the PCL-R and APD was similar to that found with male offenders (see Table 8). The probability of a PCL-R psychopath receiving a diagnosis of APD was .71. Conversely, the probability of a APD offender receiving a PCL-R diagnosis of psychopathy was .42 indicating that the concepts are similar but asymmetrically related, and that psychopathy is the more exclusive diagnosis. The same asymmetrical association between the PCL-R and APD is found with male offenders.

Concurrent Validity: Prototypicality Ratings

Prototypicality ratings (10-point scale) were obtained for three DSM-III-R Cluster B personality disorders relevant to psychopathy: Histrionic, narcissistic, and borderline. Hart & Hare (1989) found that the PCL-R total score was positively correlated with antisocial, narcissistic and histrionic (Cluster B) personality disorders but uncorrelated or negatively correlated with ratings of other personality disorders in a sample of male forensic patients. The correlation between the PCL-R and each personality disorder is presented in Table 9. As with male offenders, the PCL-R was strongly correlated with ratings of narcissistic and histrionic personality disorders. The PCL-R was correlated with borderline personality disorder in female offenders but not in male offenders.
Table 8

Correlations Between APD Diagnoses and the PCL-R and its Factors for Female and Male Offenders

<table>
<thead>
<tr>
<th></th>
<th>Female Offenders</th>
<th>Male Offenders</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>APD</td>
<td></td>
</tr>
<tr>
<td>PCL-R total score</td>
<td>.41**</td>
<td>.54</td>
</tr>
<tr>
<td>Factor 1</td>
<td>.02</td>
<td>.32</td>
</tr>
<tr>
<td>Factor 2</td>
<td>.52**</td>
<td>.63</td>
</tr>
</tbody>
</table>

Note. Data for male offenders based on sample 1 from the Hare Psychopathy Checklist-Revised (Hare, 1991). APD refers to DSM-III-R Antisocial Personality Disorder. ** p<.001.
Table 9

**Correlations Between Prototypicality Ratings of Three Personality Disorders and the PCL-R and Its Factors for Samples of Female and Male Offenders**

<table>
<thead>
<tr>
<th>Personality Disorder</th>
<th>Female PCL-R total score</th>
<th>Female Factor 1</th>
<th>Female Factor 2</th>
<th>Male PCL-R total score</th>
<th>Male Factor 1</th>
<th>Male Factor 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Histrionic</td>
<td>.45**</td>
<td>.37*</td>
<td>.38*</td>
<td>.33</td>
<td>.37</td>
<td>.27</td>
</tr>
<tr>
<td>Narcissistic</td>
<td>.42**</td>
<td>.40*</td>
<td>.33*</td>
<td>.39</td>
<td>.49</td>
<td>.24</td>
</tr>
<tr>
<td>Borderline</td>
<td>.47**</td>
<td>.17</td>
<td>.47*</td>
<td>.13</td>
<td>-.03</td>
<td>.26</td>
</tr>
</tbody>
</table>

*Note.* Data for male offenders based on data from sample 8 described in the Hare Psychopathy Checklist-Revised (Hare, 1991). ** p<.01, * p<.05.
Convergent Validity: Violent Crime

There is extensive evidence on the association between psychopathy and male violence. Hart and Hare (1989), for example, found that even when items related to criminal activities were omitted from the calculation of the total score, the PCL-R correlated .35 with the total number of offenses and .30 with the number of violent offenses in a sample of male offenders. Kosson, Newman and Smith (1990) obtained similar results with sample of male white and black inmates. Serin (1991) reported that the psychopathic inmates in his sample, as defined by the PCL-R, were significantly more likely to be violent and to have committed a violent offense than were other inmates. Given the personality of psychopaths, there is no reason to assume that a similar association does not occur with female offenders.

There was some difficulty in examining the psychopathy-crime relationship in the present sample: Many of the files did not contain a complete record of federal and provincial convictions, and it was not always possible to determine the total number of offenses committed by an inmate. For this reason, I scored each record for the presence or absence of prior convictions and for the presence or absence of convictions or charges for violent offenses for which the offender was currently incarcerated or on probation. Violent
offenses included murder, attempted murder, kidnapping, arson, escape, and assault (see Hart, Kropp & Hare, 1988).

All of the psychopaths, but only 69% of the nonpsychopaths, in this sample had one or more prior convictions (X²(1)=9.01, p<.005). Sixty-three percent of the psychopaths had been convicted of one or more violent offenses; the rate for the nonpsychopaths was 33%, (X²(1)=4.55, p<.04). The correlation between the PCL-R scores and the presence or absence of a violent offense (for which the offender was currently incarcerated) was significant at .35 (p<.002). (Item 10, poor behavioural controls, was eliminated for this calculation as it is often scored on the basis of violent behaviour.) The psychopaths were more likely to have had a prior conviction and clearly tended to be more violent than the nonpsychopaths.

**Convergent Validity: Demographic Variables**

Forty-one percent of all subjects reported that they had engaged in prostitution. Sixty-four percent stated that they had been addicted to cocaine and/or heroin, and 51% considered themselves alcoholic. Many women said they had experienced unwanted pregnancies and 44% said that they had had one or more abortions. The majority of women (68%) had one or more children and, of these, 61% reported that their children had been either apprehended or had voluntarily been given into someone else's care.
Psychopaths were significantly more likely to have engaged in prostitution ($X^2(1)=9.34, p=.002$), to have been addicted to cocaine and/or heroin ($X^2(1)=15.52, p<.0001$), and to have abdicated care of their children to another party ($X^2(1)=6.91, p<.009$) than were nonpsychopaths. Group comparisons were supplemented by correlational analyses where appropriate and Table 10 presents the correlations between these variables and the PCL-R.

Given the nature of psychopathy, it is not surprising that the psychopathic women engaged in prostitution and drug abuse. However, it could be argued that abdicating care of one’s children was the result of drug abuse or the lifestyle associated with prostitution rather than a direct consequence of psychopathy. In order to address this issue, semi-partial correlations among these variables (PCL-R, drug use and prostitution) were calculated. The results, shown in Table 11, indicate that the PCL-R was strongly related to the failure to parent even when the effects of drug abuse and prostitution had been removed. Psychopathy thus appears to be associated with the voluntary or involuntary abdication of parental responsibility. This finding is consistent with Robins’ (1966) report that the sociopathic women in her study were less likely than other women to have children, and that the children of the sociopaths were more likely to be raised by surrogate parents.
Table 10

Correlations Between PCL-R and Its Factors and Selected Demographic Variables

<table>
<thead>
<tr>
<th>Variable</th>
<th>PCL-R total score</th>
<th>Factors 1</th>
<th>Factors 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Failure to Parent (Children placed in other’s care)</td>
<td>0.62**</td>
<td>0.26</td>
<td>0.62**</td>
</tr>
<tr>
<td>Drug Addiction (cocaine/heroin)</td>
<td>0.53**</td>
<td>0.29*</td>
<td>0.44*</td>
</tr>
<tr>
<td>Prostitution</td>
<td>0.50**</td>
<td>0.21</td>
<td>0.47**</td>
</tr>
</tbody>
</table>

Note. Item 11 (sexual promiscuity) was removed for the calculation of the correlates with prostitution. ** p<.001, * p<.05.
<table>
<thead>
<tr>
<th>Variable</th>
<th>Semi-Partial Correlation</th>
</tr>
</thead>
<tbody>
<tr>
<td>PCL total score</td>
<td>.47**</td>
</tr>
<tr>
<td>Cocaine and/or Heroin Addiction</td>
<td>.06</td>
</tr>
<tr>
<td>Prostitution</td>
<td>-.03</td>
</tr>
</tbody>
</table>

**p<.001
Some additional demographic variables were examined. Thirty-one percent of the subjects reported that they had been physically abused in childhood; 46% reported that they had been sexually abused in childhood and 38% said they had been sexually assaulted in either adolescence or adulthood. There were no significant differences between the psychopathic and nonpsychopathic inmates on these variables.

In addition, 63 percent said they had been physically abused as adults. PCL-R scores of 30 or above were significantly associated with reports of having been physically abused in adult relationships ($X^2(1)=9.07, p=.003$). It may be that psychopathic women are more attracted than are other women to the often volatile and confrontative nature of violent relationships.

Concurrent, Convergent and Discriminant Validity: Self-Report Inventories

To examine concurrent, convergent and discriminant validity, correlations were measured with self-report questionnaires known to have a differential pattern of associations with the PCL-R. The pattern of correlations (see Table 12) was very similar to that found with male samples.

Convergent Validity. As expected, the California Personality Inventory-Socialization subscale was strongly correlated (negatively) with PCL-R total and Factor 2 scores,
Table 12

Correlations Between Five Self-Report Inventories and the PCL-R and Its Factors for Samples of Female and Male Offenders

<table>
<thead>
<tr>
<th>Variable</th>
<th>Female</th>
<th>Male</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>PCL-R total</td>
<td>Factor 1</td>
<td>Factor 2</td>
<td>PCL-R total</td>
</tr>
<tr>
<td>Beck Depression</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Inventory</td>
<td>.05</td>
<td>-.14</td>
<td>.12</td>
<td>-.14</td>
</tr>
<tr>
<td>STAI—Trait Anxiety</td>
<td>.13</td>
<td>-.14</td>
<td>.27*</td>
<td>-.13</td>
</tr>
<tr>
<td>CPI-Socialization Scale</td>
<td>-.48**</td>
<td>-.04</td>
<td>-.60**</td>
<td>-.31</td>
</tr>
<tr>
<td>Narcissism Personality</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Inventory</td>
<td>.18</td>
<td>.28*</td>
<td>.08</td>
<td>.34</td>
</tr>
<tr>
<td>Self-Report Psychopathy Scale—II</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SRP—Total</td>
<td>.64**</td>
<td>.21</td>
<td>.68**</td>
<td>.54</td>
</tr>
<tr>
<td>SRP—F1</td>
<td>.15</td>
<td>.14</td>
<td>.09</td>
<td>.54</td>
</tr>
<tr>
<td>SRP—F2</td>
<td>.65**</td>
<td>.19</td>
<td>.70**</td>
<td>.40</td>
</tr>
</tbody>
</table>

(table continues)
Table 12 continues

Correlations Between Five Self-Report Inventories and the PCL-R and Its Factors for Samples of Female and Male Offenders

<table>
<thead>
<tr>
<th>Variable</th>
<th>Female PCL-R Factor</th>
<th>Male PCL-R Factor</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>total 1 2</td>
<td>total 1 2</td>
</tr>
<tr>
<td>Interpersonal Reactivity Index</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Perspective taking</td>
<td>-.31* -.11 -.36*</td>
<td>-.13 -.15 -.17</td>
</tr>
<tr>
<td>Fantasy</td>
<td>.12 .15 .03</td>
<td>-.01 -.05 .00</td>
</tr>
<tr>
<td>Empathic Concern</td>
<td>-.22 -.09 -.24</td>
<td>-.33 -.32 -.27</td>
</tr>
<tr>
<td>Personal Distress</td>
<td>.20 .01 .27*</td>
<td>-.33 -.31 -.18</td>
</tr>
</tbody>
</table>

Note. Data for male offenders based on either sample 1 or sample A-1 as described in the Hare Psychopathy Checklist-Revised (Hare, 1991). SRP-II data for male offenders from Harpur & Hare (1991). ** p<.001, *p<.05
but was uncorrelated with Factor 1 scores. A similar pattern has been obtained with male offenders.

The Narcissism Personality Inventory was positively associated with Factor 1, reflecting the similarities between the psychopathic personality and the self-focused, self-aggrandizing nature of the narcissist. Studies with male offenders have found correlations between the Narcissism Personality Inventory and both factors suggesting that Factor 2 may include more personological traits in male samples than in female samples.

The revised edition of the Interpersonal Adjective Scale, which evaluates an individual's characteristic style of interpersonal interaction, provides scores on the two major dimensions of Dominance and Love; this interaction typically is plotted on the interpersonal circumplex. Table 13 presents the correlations between the PCL-R and the dimensions of Dominance and Love. The PCL-R total score correlated positively with the Dominance dimension and negatively with the Love dimension. Factor 1 correlated significantly with the Dominance dimension and Factor 2 correlated negatively with the Love dimension. Figure 1 shows the position of the PCL-R and its factors on the interpersonal circumplex. A similar pattern was observed by Foreman (1988) in a study of male inmates; the PCL-R total score and Factor 1 correlated with the Arrogant-calculating dimension and Factor 2 correlated with the Cold-hearted dimension.
Table 13
Correlations of the PCL-R and Its Factors with the Interpersonal Adjective Scale for Female and Male Offenders

<table>
<thead>
<tr>
<th>Dimension</th>
<th>PCL-R total score</th>
<th>Factor</th>
<th>Factor</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td><strong>Female Sample</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dominance</td>
<td>.25*</td>
<td>.32*</td>
<td>.16</td>
</tr>
<tr>
<td>Love</td>
<td>-.42**</td>
<td>-.16</td>
<td>-.42**</td>
</tr>
<tr>
<td><strong>Male Sample</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dominance</td>
<td>.19</td>
<td>.35</td>
<td>-.01</td>
</tr>
<tr>
<td>Love</td>
<td>-.30</td>
<td>-.26</td>
<td>-.29</td>
</tr>
</tbody>
</table>

*Note. Data for male sample based on Sample 1 as described in the Hare Psychopathy Checklist-Revised (Hare (1991)). ** p<.001, * p<.05*
Figure 1

Position of the PCL-R and Factors 1 and 2 on the Interpersonal Circumplex

---

Assured-Dominant

Arrogant-Calculting

F1

PCL-R total

F2

Gregarious-Extraverted

Cold-Hearted -.5

Warm-.5 Agreeable

Aloof-Introverted

Unassuming-Ingenuous

Unassured-Submissive

-.5
Concurrent Validity. The Self-Report Psychopathy Checklist (SRP-II) correlated strongly with the PCL-R total and Factor 2 scores. The SRP-II was designed as a self-report version of PCL-R Factors 1 and 2 (designated as SRP-F1 and SRP-F2 respectively). SRP-F1 and SRP-F2 have been found to correlate with the corresponding PCL factors in male samples. Similarly, SRP-F2 correlated with the PCL total and Factor 2 scores. However, SRP-F1 did not correlate with Factor 1 in the present sample. Perhaps women are more socialized to describe themselves in empathic and caring terms than are men and, therefore, are less likely to obtain high scores on a self-report subscale of psychopathic traits.

Discriminant Validity. Given that the affective deficit of psychopaths presumably makes it difficult for them to experience "true" depression, a negative correlation between the Beck Depression Inventory (BDI) and PCL-R scores was expected. As Table 12 indicates, the BDI was not significantly correlated with the PCL-R or its factors, although its association with Factor 1 was in the negative direction.

Similarly, trait anxiety (the STAI) was expected to correlate negatively with the PCL-R. According to theory, psychopaths should rarely experience anxiety due to their shallow affect and lack of remorse. The correlations between the STAI and the PCL-R total and Factor 1 scores were not significant, although Factor 1 showed a negative association with STAI scores similar to the trend found with male
offenders. A modest, positive correlation was found with Factor 2.

The Interpersonal Reactivity Index (IRI; Davis et. al., 1987) can be subdivided into two cognitive dimensions (fantasy and perspective-taking), and two affective dimensions (empathic concern and personal distress). Research with male offenders has found the PCL-R and Factors 1 and 2 to correlate negatively with all subscales of the IRI except the fantasy dimension. In the present sample, negative correlations were obtained between the PCL-R total and Factor 2 scores and the perspective-taking dimension. The dimension of empathic concern was negatively—but not significantly—correlated with PCL-R Total and Factor 2 scores. The dimension of personal distress correlated modestly with Factor 2. As suggested above, self-reports obtained from women may be heavily influenced by sex-based socialization processes that encourage them to see themselves as caring and nurturant individuals. Consequently, women may be less likely than men to self-report unempathic or uncaring thoughts or behaviours.

Discussion

The descriptive statistics, internal consistency, interrater reliability, factor structure, and correlates of the PCL-R in the present sample of female offenders were much the same as those typically found with samples of male
offenders (Hare, 1991). These results are consistent with the proposition that the PCL-R is a reliable and valid measure of the psychopathy construct in female offenders.

Although the mean PCL-R score in the present sample was not much different from that obtained with samples of male offenders, the percentage of female offenders (31) who received a score of at least 30 was higher than that found with male offenders (15 to 20). One reason for the high percentage of psychopathic female inmates may have been that over half the sample were classified as maximum security. During the course of data collection, Corrections Canada closed its local minimum security facility and kept only its maximum security facility operational in preparation for the opening of a larger institution. The new facility, the Burnaby Correctional Centre for Women, was meant to accommodate all security levels and was designed to service the entire province. The maximum security unit was opened first, and it received women from Lakeside, as well as some federal inmates from Kingston Prison for Women in Ontario. As a result, for a period of several months the only incarcerated offenders available for participation in this study were maximum security level inmates. An attempt was made to balance this by approaching probation services and enlisting women on probation in the community. This approach was relatively unsuccessful because few women were on probation at the time; only two women on probation participated in the study. Because
of these situational factors maximum security inmates were over-represented in this sample.

A maximum security assignment usually implies a greater perception of danger, threat of escape, or the anticipation of management problems and would logically be associated with a higher PCL-R score. In fact, Hare and McPherson (1984) found that inmates who scored in the high range of the PCL were significantly more likely to engage in violent and aggressive behaviour while in prison than were other inmates. Wong (1984) obtained similar results with samples of White and Native inmates: PCL total scores were strongly associated with the number of institutional offences and the degree of violence and threat involved in these offences. In addition, Wong found that PCL scores were higher in maximum security facilities than in lower security levels; as many as 30% of federal inmates in maximum security facilities were diagnosed as psychopathic.

With these considerations in mind, I reanalyzed the present data to determine if PCL-R scores were related to the security level of the subjects. The mean PCL-R score was 27.3 (SD = 5.07) for the maximum security inmates and 21.4 (SD = 8.42) for the minimum and medium security inmates. Forty-four percent of the maximum security inmates and 19% of the minimum and medium security inmates received a score of 30 or more.

It therefore appears that the high percentage of female psychopathic inmates was a reflection of the relatively large
number of high security—and possibly dangerous or troublesome—inmates in the sample.

The reliability of PCL-R assessments in this study, as well as in Neary's (1990) study, was as high as that usually obtained with male offenders. Researchers apparently have little difficulty in making reliable PCL-R assessments of female offenders. The two-factor structure found with male offenders was replicated, although several items that loaded on Factor 2 do not load on this factor in samples of male offenders.

The PCL-R and its factors were associated with other putative measures of psychopathy and related constructs, including DSM-III-R diagnoses of APD, prototypicality ratings of three DSM-III-R Cluster B personality disorders (narcissistic, histrionic, borderline), and a self-report psychopathy inventory. The PCL-R and its factors were also related to a variety of measures theoretically related to psychopathy. Thus, PCL-R and Factor 1 scores were related to self-report measures of narcissism, interpersonal behaviours and drug addiction. PCL-R and Factor 2 scores were related to self-report measures of socialization and interpersonal behaviours, violent crime, prior convictions, drug abuse and abdication of parenting.

Discriminant validation was partially provided by the lack of (or negative) correlation of the PCL-R with self-report measures of depression, anxiety and empathy. Although
PCL-R and Factor 2 scores were negatively correlated with the perspective-taking subscale of the Interpersonal Reactivity Index, most of the correlations with depression, anxiety and empathy were not significant. Research with male offenders has revealed modest, negative correlations between the PCL-R and depression, anxiety and empathy. One explanation for these findings is that all three scales (Beck Depression Inventory, State-Trait Anxiety Inventory and Interpersonal Reactivity Index) are self-report measures involving affect. Psychopaths appear to experience less affect than do most people, and we might expect this to be reflected in their self-reports of affect. But their self-reports may be less straightforward than this. Although psychopaths may have difficulty in experiencing normal emotions, they may be quite adept at using the same words that others use to describe emotional states. Consequently, their words may convey an emotional state that they in fact do not experience.

In a study of changes in voice patterns due to emotionality (Williamson, Alpert, Louth & Hare, 1993), psychopathic and nonpsychopathic inmates differed significantly. When speaking of affective as opposed to neutral events, the nonpsychopathic inmates exhibited an increase in expressiveness and decrease in pauses between words in their voice patterns typically found with normal subjects. The psychopathic subjects exhibited the opposite
patterns; less expressiveness and more pauses when speaking of emotional events.

In a similar study (Strachan, Harpur & Hare, 1991), psychopathic inmates were asked to write about an emotionally positive event and an emotionally negative one. Afterwards, subjects completed affect-rating scales. However, out of 27 affect ratings, only one (anxiety) differed significantly between the psychopathic and nonpsychopathic subjects. It would appear that psychopaths are able to select the appropriate affect in writing but when less obvious and less controllable indicators of affect are analyzed (e.g. changes in voice patterns), their affective deficit becomes apparent.

This may also be the case with self-report measures of depression, anxiety and empathy in which individuals are presented with written alternatives and required simply to indicate the extent to which these apply to themselves. With these written cues and their social knowledge of emotional events, psychopaths may be fairly adept at appropriately describing what would be—for most people—an emotional event.

In addition, this effect may be somewhat exacerbated in female offenders due to sex based socialization effects for women to describe themselves as more emotional and empathic than men. As a result, female offenders (including psychopaths) may be even less inclined to self-report low levels of empathy and emotional sensitivity.
Psychopathy and Women

The results of this study support the argument that it is possible to make reliable and valid assessments of psychopathy in female offenders. Not only were the PCL-R scores of the women in this sample as high as those comparable samples of male offenders, almost one-third of the women scored at or above the criterion for psychopathy. These women clearly exhibited a potent mix of "unfeminine" traits and behaviours: remorselessness, shallow affect, antisocial behaviour, lack of empathy, impulsivity and irresponsibility. In fact, it was surprising to find that there were few, if any, real sex differences in the personality traits or behaviours exhibited by offenders.

The manifestation of psychopathy.

Although there was no theoretical basis to expect sex differences in the core affective deficit of psychopathy, differential socialization theory and the low rates of female offending suggested that the behavioural expression of the disorder might be different in females than it is in males. Specifically, I expected that Factor 2 of the PCL-R might not adequately reflect socially deviant behavior in women. However, the data proved otherwise. The composition of Factor 2 appears to be appropriate for the assessment of social deviance in both male and female offenders.
I also expected that female offenders would have had fewer childhood behaviour problems than male offenders, based on the assumption that girls experience greater supervision and less tolerance for acting out or antisocial behaviour than do boys. Their relatively low scores on Items 12 (early behaviour problems) and 18 (juvenile delinquency) is consistent with this view (see Table 3). The female offenders in Neary's (1990) samples also obtained relatively low score on these two items.

The only PCL-R items that appeared at all problematic were in Factor 1: Items 1 (glibness/superficial charm), 2 (grandiose sense of self worth), and 4 (pathological lying). Their item-total correlations were low and did not appear to contribute to the scale's homogeneity. However, items 1, 2 and 4 were all highly correlated (.46, .65 and .36, respectively) with the Factor 1 total score. The low item-total correlations for items 1 and 2 are consistent with clinical impressions of the women: Few demonstrated the degree of charm and grandiosity so often seen with male offenders. Most of the women were quite talkative and open about their personal lives, attitudes and feelings—perhaps more so than male offenders. But these qualities are quite different from the grandiosity, glibness and superficial charm required to receive high scores on items 1 and 2.

It is unlikely that these findings reflect a genuine sex difference in the expression of psychopathy. In Neary's (1990)
study of female offenders, for example, the item-total correlations for items 1, 2, and 4 (.23, .41 and .48, respectively) were higher than they were in the present study. On the other hand, some of her other item-total correlations (items 5, 16, 17, 19) were lower than those found in this study. The most reasonable explanation of these sample differences, and of the differences between female and male offenders, is sampling variance. Additional, larger samples of female offenders are needed to settle the issue.

Prevalence rates in forensic and general populations.

Thirty-one percent of the females in the present sample, and 11% of those in Neary's (1990) American sample, received a PCL-R score of at least 30. Although it is not possible to draw firm conclusions from these findings about the prevalence of psychopathy in female offenders, it is apparent that a substantial proportion of these offenders meet the criteria for the disorder.

Without data from nonoffenders, it is impossible to provide responsible estimates of the prevalence of psychopathy in the general population, male or female. The DSM-III-R estimates a prevalence rate of APD of approximately 3% in the male general population and 1% in the female general population, and states that APD is much more common in males than in females. In a recent epidemiological study, Robins (1991) also found that base rates of APD in the general
population were five times higher in men than in women: 4.5% for men versus 0.8% for women. However, these rates refer to a disorder not entirely synonymous with psychopathy. Because APD is more a measure of socially deviant behaviours than of psychopathy, one interpretation is that in the general population there may be behavioural differences between men and women in the manifestation of psychopathy. Conversely, there may be fewer psychopathic women than men in the general population. But there are few empirical data currently available on the issue.

Limitations

A number of factors must be considered when evaluating the results of this study. First, the interviewers were all female, and it is therefore difficult to determine if the low item-total correlations obtained for several Factor 1 items reflect a sex difference in some personality traits or are simply the result of the psychopathic offenders not bothering to "turn on the charm" for the interviewers. Had the interviewers been male these women might have been more charming, manipulative, and self-aggrandizing. However, studies with male offenders have found that the level of charm and grandiosity exhibited by the offender is largely unaffected by the sex of the interviewer (Hare, 1991).

A second limitation of this study is that the sample was relatively small. Research on female criminality in British
Columbia is constrained by the low numbers of female offenders incarcerated at any given time. During the study this problem was compounded by an unexpected dip in female crime. As a result, the time and effort needed to obtain the sample were considerable. It may be necessary for researchers in different institutions and jurisdictions to combine their efforts in order to obtain large samples of female offenders.

In general, the PCL-R appears to be a good measure of psychopathy in female offenders. Nonetheless, a comprehensive research program on female psychopathy should include exploration of other possible traits or behaviours not included on the PCL-R that may be indicative of the disorder. The demographic information suggested that there are possible alternative areas that might prove useful as material for additional PCL-R items. For example, Robins' (1966) contention that the sociopathic women in her study were less likely than other women to have children and more likely to have their children raised by surrogate parents, is partially supported in this study. Though psychopathic and nonpsychopathic women did not differ in number of children, there was a strong association between abdicating care of one's children and the PCL-R total score. These findings suggest that behaviours other than those listed on the PCL-R might be reliable indicators of psychopathy in women.

Widom's (1978) study is an example of an approach that might address this possibility. As discussed briefly above,
Widom (1978) used empirical classification procedures to subdivide female offenders into homogeneous subgroups based on personality and personality pathology. She administered ten self-report personality inventories and employed a cluster analysis procedure to classify the personality profiles into mutually exclusive groups or profile types. The advantage of this method is that few prior assumptions are made of the personalities of the subgroups and, as a result, they are established based on the data rather than on theoretical assumptions or prior empirical findings. Using this method, Widom was able to identify a hostile, undersocialized, aggressive and impulsive subtype which she felt closely resembled the psychopath as described by Cleckley (1976) and Hare (1986).

Widom’s (1978) approach could be expanded by including not only self-report measures of personality, but also self-report inventories for various past and present behaviours, as well as others' reports on the subject’s behaviours and personality traits. With a broad range of information from multiple sources, cluster-analysis procedures might provide us with a broad description of the behaviours and personalities of the female psychopath. Given that Widom’s study supports the construct of psychopathy in female offenders (as described by the PCL-R), a more comprehensive study may provide even stronger validation of the current PCL-R items and/or suggest alternative ones.
Thus far, the discussion has been limited to those women convicted of a criminal offense, a highly select group that represents only a tiny fraction of the general female population. Although we may be able to draw some tentative conclusions about the manifestation of psychopathy among female offenders, there are no data to indicate the extent to which these findings apply to women in the general population. Given the large sex differences in criminal involvement and base rates of APD, it may be that psychopathic women in the general population demonstrate less criminal and overt antisocial behaviours, and find more socially acceptable behaviours through which to express the disorder, than do men.

Theoretical and Clinical Implications

The results of the present study indicate that psychopathy is a very robust construct cutting across many demographic boundaries. Studies with male offenders (Hare, 1991), young male offenders (Forth, Hart & Hare, 1990), racial groups (Kosson, Smith & Newman, 1990; Wong, 1984) and a number of cultures (af Klinterberg, Humble & Schalling, 1992; Haapasalo & Pulkkinen, 1992) consistently support the applicability and validity of the PCL-R with these diverse populations. Studies with nonoffender groups (Hart, Hare & Forth, 1993) and mentally disordered patients (Heilbrun, Hart, Hare, Gustafson, Nunez & White, 1992) have also found the PCL-R to be a reliable and valid measure.
Psychopathy, as measured by the PCL-R, appears equally applicable to women and men with surprisingly few, if any, modifications required. There are very little data available on women, but the two studies to date support psychopathy as an heuristic and appropriate construct with a female forensic population. Theoretically, there is no reason to assume that psychopathy is limited to any particular demographic group.

Theories of female crime.

Psychopathy may be as important for understanding female crime as it is for understanding male crime. Recognizing the existence of psychopathy may even have a positive impact on the study of female criminality. Theories of economic marginalization, poverty, and the recent recognition of many female killers as victims of spousal abuse portray female offenders in a highly sympathetic light. Psychopathy offers some balance to these portrayals allowing us to understand those offenders who are not sympathetic and offend for self-centered and callous reasons.

Treatment implications.

The distinction between psychopathic and other female offenders has some implications for treatment and intervention. Male psychopathic inmates are very poor candidates for treatment. For example, Ogloff, Wong and Greenwood (1990) found that psychopathic offenders showed
significantly less improvement and were less motivated than other inmates. A more recent study by Rice, Harris and Cormier (1992) found that treatment produced negative effects with psychopathic inmates; treated nonpsychopaths exhibited lower rates of recidivism but treated psychopaths exhibited higher rates of violent recidivism, than did their untreated counterparts. Given the stable, long-term nature of the disorder, these findings are consistent with clinical impressions that permanent, substantial changes are very difficult to create in psychopathic personalities.

Without research into treatment outcomes with female psychopaths, it is premature to assume that the results will be the same as with male offenders. However, it is likely that psychopathic women will produce equally disappointing treatment results. If female psychopathic inmates are not amenable to current treatment techniques but respond well to tight supervision, then resources might be redirected to developing effective supervision strategies. In addition, the evaluation of treatment programs for offenders may be more accurately appraised when psychopathic participants are identified and their progress, or lack thereof, is analyzed separately from nonpsychopathic participants.

These concerns also extend to the nonforensic clinical setting where the accurate diagnosis and treatment of women has often been clouded by irrelevant biases. Research such as the present study may encourage clinicians to diagnose women as
psychopathic or APD when appropriate, rather than to assign diagnoses on the basis of sex-role factors. Of particular concern to this study is the issue of sex bias in the criteria for histrionic personality disorder (HPD). Given the consistent finding that HPD is couched in terms more readily applicable to, and therefore more often diagnosed in, women than in men, estimates of APD and psychopathy among female offenders and women in the general population may be artificially low as a result of the tendency to overdiagnose HPD.

This is an important theoretical and practical issue because epidemiological data serve as a basis for explanations for female crime, social and rehabilitative programs, and treatment interventions. Certainly high base rates of psychopathy would lead to dramatically different conclusions as to the etiology, treatment and prognosis of female offenders than would high rates of histrionic personality disorder or other types of disorders. Continued research on the prevalence and manifestations of psychopathy in women may provide a credible diagnostic alternative, lessening reliance on sex biased categories and encouraging more realistic goals for treatment and rehabilitation.

Future Research and Practical Implications

Questions about prevalence, manifestation, and assessment in forensic and nonforensic settings can only be answered with
more research. In order to fully explore female psychopathy, it is important to continue to examine the ways in which psychopathic women are different from nonpsychopathic women, and, possibly, from psychopathic men.

The sorts of laboratory studies that have uncovered distinctive physiological and cognitive patterns in male psychopaths should also be used in the study of female psychopathy. On a more practical level, an important avenue for future research would be an analysis of the predictive power of the PCL-R in terms of response to treatment and rehabilitation, behaviour while incarcerated, and rates of recidivism upon release. Past research with male offenders has shown the PCL-R to be predictive of poor treatment outcome (Ogloff, Wong & Greenwood, 1990; Rice, Harris & Cormier, 1992), violent and aggressive institutional behaviour (Hare & McPherson, 1984; Serin, 1991) and high rates of recidivism (Hart, Kropp & Hare, 1988; Serin, Peters & Barbaree, 1990; Wong, 1984; Serin, 1991). It is reasonable to expect that if the PCL-R measures the same personality construct in female and male offenders, it will demonstrate similar predictive powers in both sexes. This type of research would have obvious practical implications for female forensic populations in terms of management issues while institutionalized, participation in rehabilitation programs and parole decisions.
Conclusion

Though the findings of this study are most appropriately seen as simply the beginning of the validation process of the PCL-R with female offenders, they are strengthened by the multi-method nature of the data, which included self-report ratings and other's ratings of personality traits and behaviours. The overall pattern of associations between the PCL-R and a variety of external criteria was theoretically consistent with the construct of psychopathy. The data were remarkably consistent with previous research with male offenders and suggest that the same construct is being measured in both sexes.

The present research examines the generalizability of psychopathy and the applicability of the PCL-R to a female forensic population. It provides an alternative theoretical basis for explanations of female criminality and offers further impetus for examining sex biases in the diagnoses of female offenders. Both the construct of psychopathy and the study of women in general should benefit from this study; the theoretical scope and application of psychopathy is broadened and, although it may seem somewhat ironic that a disorder as negative in nature as psychopathy might benefit women, the application of concepts (both negative and positive) to the study of women that are free from sex role stereotypes can be seen as useful.
References


Hare, R. (1986). Twenty years of experience with the Cleckley psychopath. In W. Reid, D. Dorr, J. Walk, J. Bonner (Eds.), *Unmasking the psychopath.* New York: Norton


Appendix A

PCL-R SCORESHEET

<table>
<thead>
<tr>
<th>Subject: ______________________</th>
<th>TOTAL SCORE: _<strong><strong><strong><strong>/</strong></strong></strong></strong></th>
</tr>
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<tbody>
<tr>
<td>Date:</td>
<td>Prorated score: _________/40</td>
</tr>
<tr>
<td>Rater: ______________________</td>
<td>Prototypicality: _________ (# of 2's)</td>
</tr>
</tbody>
</table>

ITEM:                       | SCORE:                      |
1. Glibness/superficial charm | 0 1 2 omit                  |
2. Grandiose sense of self-worth | 0 1 2 omit              |
3. Proneness to boredom/need for stimulation | 0 1 2 omit          |
4. Pathological lying         | 0 1 2 omit                  |
5. Conning/manipulative       | 0 1 2 omit                  |
6. Lack of remorse            | 0 1 2 omit                  |
7. Shallow affect             | 0 1 2 omit                  |
8. Lack of empathy            | 0 1 2 omit                  |
9. Parasitic lifestyle        | 0 1 2 omit                  |
10. Poor behavioral controls  | 0 1 2 omit                  |
11. Promiscuous sexual behavior | 0 1 2 omit            |
12. Early behavior problems   | 0 1 2 omit                  |
13. Lack of realistic long-term plans | 0 1 2 omit    |
14. Impulsivity               | 0 1 2 omit                  |
15. Irresponsibility          | 0 1 2 omit                  |
16. Failure to accept responsibility for own actions | 0 1 2 omit      |
17. Many marital relationships | 0 1 2 omit               |
18. Juvenile delinquency      | 0 1 2 omit                  |
19. Poor risk for conditional release | 0 1 2 omit |
20. Criminal versatility      | 0 1 2 omit                  |

VALIDITY RATING

On the basis of the quality of the interview and collateral information, indicate your confidence in the validity of your PCL rating:

___/___/___/___/___
Low Moderate High

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### DSM-III-R 301.70 (Antisocial Personality Disorder)

<table>
<thead>
<tr>
<th>Criteria Satisfied:</th>
<th>Final Diagnosis:</th>
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<tbody>
<tr>
<td>A</td>
<td>9 Unknown</td>
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<tr>
<td>B</td>
<td>0 Not APD</td>
</tr>
<tr>
<td>C</td>
<td>1 Possible APD</td>
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<tr>
<td>D</td>
<td>2 Definite APD</td>
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**A. Current age at least 18**

**B. Evidence of Conduct Disorder with onset before age 15, as indicated by a history of three or more of the following:**

1. Was often truant
2. Ran away from home at least twice while living in parental or parental surrogate home
3. Often initiated physical fights
4. Used a weapon in more than one fight
5. Forced someone into sexual activity with him or her
6. Was physically cruel to animals
7. Was physically cruel to other people
8. Deliberately destroyed others' property (other than by fire-setting)
9. Deliberately engaged in fire-setting
10. Often lied (other than to avoid physical or sexual abuse)
11. Has stolen without confrontation of a victim on more than one occasion (including forgery)
12. Has stolen with confrontation of a victim (e.g., mugging, purse-snatching, extortion, armed robbery)

**C. A pattern of irresponsible and antisocial behavior since the age of 15,**

as indicated by at least four of the following:

1. Is unable to sustain consistent work behavior, as indicated by any of the following (including similar behavior in academic settings if the person is a student):
   - Significant unemployment for six months or more within five years when expected to work and work was available
   - Repeated absences from work unexplained by illness in self or family
   - Abandonment of several jobs without realistic plans for others
(2) fails to conform to social norms with respect to lawful behavior, as indicated by repeatedly performing antisocial acts that are grounds for arrest (whether arrested or not), e.g., destroying property, harassing others, stealing, pursuing an illegal occupation .......... 9 0 1 2

(3) is irritable and aggressive, as indicated by repeated physical fights or assaults (not required by one's job or to defend someone or oneself), including spouse- or child-beating ........................................ 9 0 1 2

(4) repeatedly fails to honor financial obligations, as indicated by defaulting on debts or failing to provide child support or support for other dependents on a regular basis .................................................. 9 0 1 2

(5) fails to plan ahead, or is impulsive, as indicated by one or both of the following: ......................... 9 0 1 2

(a) traveling from place to place without a prearranged job or clear goal for the period of travel or clear idea about when the travel would terminate
(b) lack of a fixed address for a month or more

(6) has no regard for the truth, as indicated by repeated lying, use of aliases, or "conning" others for personal profit or pleasure ........................................ 9 0 1 2

(7) is reckless regarding his or her own or others' personal safety, as indicated by driving while intoxicated, or recurrent speeding ................................. 9 0 1 2

(8) if a parent or guardian, lacks ability to function as a responsible parent, as indicated by one or more of the following: ........................................ 9 0 2

(a) malnutrition of child
(b) child's illness resulting from lack of minimal hygiene standards
(c) failure to obtain medical care for a seriously ill child
(d) child's dependence on neighbours or nonresident relatives for food or shelter
(e) failure to arrange for a caretaker for young child when parent is away from home
(f) repeated squandering, on personal items, of money required for household necessities

(9) has never sustained a totally monogamous relationship for more than one year ....................... 9 0 2

(10) lacks remorse (feels justified in having hurt, mistreated, or stolen from another) .................. 9 0 2

D. Occurrence of antisocial behavior not exclusively during the course of Schizophrenia or manic episodes ........................................ 9 0 2
Appendix C

PCL Interview: p. 1

PCL-R Interview: Female Version

A. SUBJECT INFORMATION

1. ID#:

2. Ethnicity:

3. Age:

4. Date of Birth:

5. Place of Birth:

6. Gender:

7. Handedness:

8. First Language:

9. Education Level:

B. INTERVIEW INFORMATION

1. Interviewer:

2. Interviewed at:

3. Type of Setting:

4. Date of Interview:

5. Observed by:

C. RATER INFORMATION

1. Rater:

2. Date of Rating:

3. Interview Type:   a) Live
                      b) Audiotape
                      c) Videotape

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Department of Psychology
University of British Columbia
D. SCHOOL ADJUSTMENT

1. How many different elementary schools did you attend?
   ** Why did you change schools?

2. How many secondary schools did you attend?
   ** Why did you change schools?

3. What was your attendance like in school?
   ** How often did you skip out? Why? At what age(s)?

4. What kind of grades did you get in school?
   ** Did you ever fail a grade? Why? At what age(s)?

5. Did you like school?
   ** Did you find it boring? Did you have any trouble paying attention?
   ** How would your teachers have described you (day-dreamer, hyper, etc.)?

6. How did you get along with other kids at school?
   ** Did you have any close friends?
7. How was your behavior at school?

** Did you get into physical fights? How often? At what age(s)? What percent of the time did you start them? Have you ever used a weapon in a fight? How many times? Did you ever hurt someone badly? Age(s)?

** Did you get into trouble for anything else (disturbing the class, being drunk/stoned at school, cheating, stealing, etc.)? How often? At what age(s)?

** Were you ever suspended or expelled? How often? What for? At what age(s)?

8. Did you graduate from high school?

IF NO, ASK:
** Did you quit school? Why?

9. What did you do after leaving school?

10. Have you done any upgrading or taken any technical or vocational courses?

** Describe it. How did you do?
E. WORK HISTORY

1. What kind of work have you done in the past (including housewife and looking after children)?

2. How many different jobs do you think you have had?

3. What was your longest job? What was the shortest?

ASK THE FOLLOWING QUESTIONS ABOUT THREE OF FOUR OF THE INDIVIDUAL'S LONGEST OR MOST RECENT JOBS:

** If housewife was listed the following questions should still be asked **

** What was the position? What were the duties? **

** How long did you do that for? How old were you when you started? How old were you when you stopped? **

** Did you enjoy it? Did you find it boring? How was the money? **

** Why did you leave that job? Did you quit, or were you fired? **

<table>
<thead>
<tr>
<th>Position &amp; Duties</th>
<th>Ages/Dates</th>
<th>Financial/personal enjoyment</th>
<th>Why left?</th>
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</table>
IF INDIVIDUAL WORKED IN THE HOME THE FOLLOWING QUESTIONS CAN STILL BE ASKED.

4. Are you a reliable employee? (If applying to work at home might ask questions such as: Did you get your children off to school on time?)

** Are you a hard worker?

** Did you ever get in trouble at work (for being late or absent, drinking/using drugs at work, etc.)? How often? At what age(s)?

** Have you ever been fired? How often? At what age(s)?

5. Did you ever leave a job with no other job in sight?

** How often? Why? At what age(s)?

6. Have you ever been unemployed? (If was unemployed but at home looking after children then this should be noted)

** How often? At what age(s)? For how long? How did you support yourself?

** Were you looking for work? How seriously?

7. Have you ever collected UI, welfare, or some other form of social assistance?

** How many times? At what age(s)?

8. On the street, how do you usually support yourself?

** Did you ever rely on someone else for food, money or lodging? At what age(s)? For how long?

** Did you ever support yourself through crime (e.g., selling drugs, thefts, mugging or rolling people, prostitution, pimping, frauds)? At what age(s)?
F. CAREER GOALS

1. Is there any trade or occupation you would like to have?

** How long have you wanted to do this? Have you planned or prepared for this trade/occupation in any way? What training do you require?

2. What are your plans after release?

** Where are you going to live? How will you support yourself?

3. Do you have any long-term goals?

** Where would you like to be in ten years?

4. What problems might you have in achieving those goals?
G. FINANCES

1. Have you ever had a bank loan or a personal loan?

** How many? At what age(s)? Did you pay it (them) back? Why/why not?

2. How is your credit rating?

** Did you ever fall behind on payment of your bills? How often? At what age(s)?

H. HEALTH

1. Do you have any serious medical problems (seizures, severe headaches)?

** Describe them. When did they start? Are you presently on any medication?

2. How is your hearing and eyesight? Did you have any problems learning to read?

3. Have you ever been seen by a psychologist or psychiatrist?

** What for? At what age(s)? In prison, or on the street? What was the diagnosis? What treatment(s) did you receive?

** Have you ever been hospitalized for mental or emotional problems? What for? At what age(s)?
4. Were you ever on medications for your nerves?

** What medications? What dosages? What for? Who prescribed them?

5. As a child were you ever diagnosed as "hyperactive"?

** By whom? At what age(s)? Did you receive treatment?

6. As an adult or child were you ever diagnosed as being a "borderline" or "histrionic" personality?

** By whom? At what age(s)? Did you receive treatment?

7. As an adult or child have you ever cut or slashed your arms?

8. Have you ever tried to commit suicide?

** How many times? Why? At what age(s)? Were the attempts serious, or were they a means of getting attention?

9. Do you think you have PMS? If so, why?

10. Have you ever had an abortion? If so, how many? What made you decide to have an abortion.
I. FAMILY LIFE

1. Were you raised by your natural parents?

** Did you ever live with anyone else (step/adoptive/foster family, group home, etc.)? Who? At what age(s)? How did you come to live there?

ASK THE FOLLOWING QUESTIONS ABOUT THE PRIMARY PARENTAL HOME(S):

** What was your home life like?

** How did you get along with your parent(s)? Describe them. Were they affectionate towards you? What did they do for a living? Were they ever on welfare?

** Did they get along well together? Did they argue much? Did they ever have physical fights? Did they ever separate? How did this affect you?

** Do you have any brothers or sisters? How did you get along with them?

** Were things strict at your house? Were there lots of rules? How often did you break the rules (lie, run away, steal, etc.)? At what age(s)? Why? How were you punished? How was your behavior compared to your siblings?

** Did anybody in your home have any troubles with the law? Who? What happened?

** Did anybody in your home have any serious mental or physical problems? Who? What about problems with alcohol or drugs?
ASK THE FOLLOWING QUESTIONS ABOUT THE INDIVIDUAL'S PRIMARY SURROGATE HOME(S):

** What was life there like?

** Who else lived there? How did you get along with them?

** Were things strict there? Were there lots of rules? How often did you break the rules (lie, run away, steal, etc.)? At what age(s)? Why? How were you punished?

** Did anybody there have any troubles with the law? Who? What happened?

** Did anybody there have any serious mental or physical problems? Who? What about alcohol or drug problems?
2. Were you ever abused physically or emotionally?

** By whom? At what age(s)? What happened?

3. Did you ever run away from home overnight?

** Why? How many times? At what age(s)? Did you contact your parents?

4. How old were you when you left home?

** Why? At what age(s)? What did you do?

5. Have you ever "hit the road" and traveled without real plans?

** At what age(s)? What was the longest time you were gone? Where did you go?
What did you do? Did you tell anyone you were going?

6. What is the longest time you have lived without a fixed address? When?

7. What is your relationship with your family like now?

** How often do you have contact with them?

** What are they doing now? How are they?
J. MARITAL RELATIONSHIPS

1. How many live-in relationships have you had? (INCLUDE BOTH HETEROSEXUAL AND HOMOSEXUAL)

   ** How many times have you been married or lived common-law?

IF THE INDIVIDUAL HAS HAD NUMEROUS RELATIONSHIPS, ASK:
   ** Why have you had so many relationships?

IF THE INDIVIDUAL DENIES ANY LIVE-IN RELATIONSHIPS, ASK:
   ** Have you ever had a serious boyfriend (or girlfriend)?
   ** Have you ever had a homosexual relationship?

FOR THREE OF THE LONGEST OR MOST RECENT LIVE-IN RELATIONSHIPS, ASK:
   ** How long did the relationship last? How old were you when it started?
   ** Describe your partner. What did you like best about your partner? Were you in love with your partner, or was it just a physical relationship?
   ** Was the relationship stable? Did you argue much? Did you ever have physical fights?
   ** Why did the relationship end? How long did it take you to get over it?

<table>
<thead>
<tr>
<th>Type of Relationship</th>
<th>Ages/Dates</th>
<th>Description</th>
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</table>
2. Have you ever been deeply in love?

** With who?

3. Have you ever had relationships with more than one person at the same time?

** Tell me about it.

4. Have you ever been unfaithful to any of your partners?

** How often? At what age(s)?

** Did your partner ever find out? How did your partner react?
K. SEXUAL RELATIONSHIPS

1. Have you ever been sexually abused?
   ** By whom?
   ** Was it ongoing or just once?
   ** How many different abusers were there?

2. How old were you when you first had a sexual relationship?
   ** Was it with a stable partner, or a casual acquaintance?

3. How many different sexual partners have you had?
   ** How many were casual acquaintances ("one night stands")?

4. Before age 13, did someone ever force you into sexual activity?
   Did you ever force anyone into sexual activity?
L. CHILDREN

1. Do you have any children or step-children? Who was the father(s)? How long did you know him (them)?

2. How old are they now? What are their birthdates? What grade are they in at school?

3. How is your relationship with your children? How often do you have contact with them? Who has been primarily responsible for raising them?

4. Have you ever failed to take care of your children?
5. Have your children ever been apprehended?

6. Are their father(s) involved in their upbringing?

7. Do their father(s) pay child support? Have you ever had to pay child support?

8. Have you ever used your children to get money?

9. How do you support your children?
M. **DRUG USE, ETC.**

1. Do you use alcohol or drugs?

   **What types? Since what age(s)?**

2. **Did you ever seriously abuse alcohol or drugs? Were you ever addicted?**

3. **Why do you use drugs (stimulation, escape, relaxation, etc.)?**

4. **Did you ever do anything dangerous or get into trouble when drunk or stoned (drive while impaired, get into fights, get arrested, etc.)?**

2. Do you like to speed or take chances when you drive?

   **Have you ever been stopped by the police for speeding or reckless driving? How often?**

3. Do you ever do crazy or dangerous things for fun?

   **What types of things? At what age(s)?**

4. How often do you get into physical fights?

   **Have you ever "lost control"? What was the worst injury you ever caused someone?**
N. CHILDHOOD/adolescent antisocial behavior

1. When you were young, did you do anything like vandalize a school or someone else's property, set fires, hurt animals for fun, steal from your parents or tell a lot of lies?

** How often? At what age(s)?

** Did you ever get caught? How were you punished? How did it affect you?

** Were you alone, with a boyfriend, other girlfriends? Who was the leader?

2. Did you ever get into trouble with the police as a child? ("Child" means age 12 and below)

** What for? At what age(s)?

3. Were you ever arrested as a juvenile? ("juvenile" means age 17 and below)

** How many times? At what age(s)? What for? Were you convicted?

** Were you alone, with a boyfriend, other girlfriends? Who was the leader?

4. How old were you when you first started doing crime?

** What kinds of things did you do?

** Did you ever commit crimes and not get caught? What?
0. ADULT ANTISOCIAL BEHAVIOR

1. What are you serving time for right now? How long is your sentence?

FOR EACH SPECIFIC OFFENSE, ASK THE FOLLOWING QUESTIONS:
** What happened? What did you do? What do the police say that you did?  
** Was the offense spontaneous, or was it planned?  
** Were you the only person involved, with a boyfriend, or were you with others?  
** Did you know the victim?  
** Were you drunk or stoned at the time of the offense?  
** How did you get arrested?  
** Who was the leader?

<table>
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<tr>
<th>Offense</th>
<th>Description</th>
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2. Do you feel this sentence is fair? What kind of job did your lawyer do?

3. Do you think your current charges (or sentence) will have any effect on your life? What type?
4. What other types of offenses have you been arrested for as an adult?

** What is the most serious offense you have ever committed? Describe it.

5. Who or what is to blame for your offenses?

** Why do you commit crime?

** Why did you start crime?

IF THE INDIVIDUAL TAKES PERSONAL RESPONSIBILITY, ASK THE FOLLOWING QUESTIONS:
** What could you have done to avoid committing the offense?
** Have you ever tried to stop crime? How?

6. What factors would help keep you out of crime?

7. Do you regret having committed your offenses?

** Why/why not?
8. What effect have your crimes had on the victims?

** How do feel about the effect on the victims? Have you had contact with them?

9. Are your crimes usually impulsive (spur-of-the-moment) or planned?

10. How do you feel when you are doing a crime?

** Are you nervous? Excited? Scared?

** Do you like doing crime?

11. Did you ever commit crimes and not get caught?

** What types? How often? At what age(s)?

12. Have you ever breached parole or probation, escaped, gone UAL (unlawfully at large), or had a FTA (fail to appear at court)?

** Which one(s)? How often? At what age(s)?

13. Have you ever used aliases?

** How often? Why?
P. GENERAL QUESTIONS

1. Have you ever done anything that made you feel guilty or that you were sorry you had done (other than crime)?

   ** What did you do? Why did you feel badly about it?

2. If the price were right, is there anything you would not do?

   ** What?

3. When you work at something for a long time, do you get bored easily?

4. Do you lie a lot?

   ** How often? Are you good at it?

5. Do you think that people are easy to "con" or manipulate?

   ** Do you ever do it? What are some examples?

6. Do people tell you that you have a "bad-temper"?

   ** What types of things get you really angry?

   ** What do you do when you are angry?

7. How many close friends do you have?

   ** How long have you known them? Do you keep in touch with them?

   ** What makes a "close friend"? Is it important for you to have someone close?
8. How do you feel about yourself?

** How is your self-esteem? Rate your self-image on a scale of 1 to 10.

9. Has anyone close to you died?

** How did that affect you? How did you handle it? Did you go to the funeral?

IF NO, ASK:
** Has anyone close to you ever been seriously ill? How did that affect you? How did you handle it? Did you go to the hospital?

10. What is the most depressed you have ever been?

11. What is the happiest you have ever been?

12. Are you satisfied with your life so far?

** Is there anything missing in your life? What? What would you describe as your main failures?
**Appendix D**

**BECK INVENTORY**

<table>
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<tr>
<th>Name ___________________________</th>
<th>Date ___________________________</th>
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On this questionnaire are groups of statements. Please read each group of statements carefully. Then pick out the one statement in each group which best describes the way you have been feeling the PAST WEEK, INCLUDING TODAY? Circle the number beside the statement you picked. If several statements in the group seem to apply equally well, circle each one. Be sure to read all the statements in each group before making your choice.

1. 0 I do not feel sad.
   1 I feel sad.
   2 I am sad all the time and I can't snap out of it.
   3 I am so sad or unhappy that I can't stand it.

2. 0 I am not particularly discouraged about the future.
   1 I feel discouraged about the future.
   2 I feel I have nothing to look forward to.
   3 I feel that the future is hopeless and that things cannot improve.

3. 0 I do not feel like a failure.
   1 I feel I have failed more than the average person.
   2 As I look back on my life, all I can see is a lot of failures.
   3 I feel I am a complete failure as a person.

4. 0 I get as much satisfaction out of things as I used to.
   1 I don't enjoy things the way I used to.
   2 I don't get real satisfaction out of anything anymore.
   3 I am dissatisfied or bored with everything.

5. 0 I don't feel particularly guilty.
   1 I feel guilty a good part of the time.
   2 I feel quite guilty most of the time.
   3 I feel guilty all of the time.

6. 0 I don't feel I am being punished.
   1 I feel I may be punished.
   2 I expect to be punished.
   3 I feel I am being punished.

7. 0 I don't feel disappointed in myself.
   1 I am disappointed in myself.
   2 I am disgusted with myself.
   3 I hate myself.

8. 0 I don't feel I am any worse than anybody else.
   1 I am critical of myself for my weaknesses or mistakes.
   2 I blame myself all the time for my faults.
   3 I blame myself for everything bad that happens.

9. 0 I don't have any thoughts of killing myself.
   1 I have thoughts of killing myself, but I would not carry them out.
   2 I would like to kill myself.
   3 I would kill myself if I had the chance.
<table>
<thead>
<tr>
<th>Question</th>
<th>Options</th>
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</table>
| 10. 0     | I don't cry anymore than usual.  
1 I cry more now than I used to.  
2 I cry all the time now.  
3 I used to be able to cry, but now I can't cry even though I want to. |
| 11. 0     | I am no more irritated now than I ever am.  
1 I get annoyed or irritated more easily than I used to.  
2 I feel irritated all the time now.  
3 I don't get irritated at all by the things that used to irritate me. |
| 12. 0     | I have not lost interest in other people.  
1 I am less interested in other people than I used to be.  
2 I have lost most of my interest in other people.  
3 I have lost all of my interest in other people. |
| 13. 0     | I make decisions about as well as I ever could.  
1 I put off making decisions more than I used to.  
2 I have greater difficulty in making decisions than before.  
3 I can't make decisions at all anymore. |
| 14. 0     | I don't feel I look any worse than I used to.  
1 I am worried that I am looking old or unattractive.  
2 I feel that there are permanent changes in my appearance that make me look unattractive.  
3 I believe that I look ugly. |
| 15. 0     | I can work about as well as before.  
1 It takes an extra effort to get started at doing something.  
2 I have to push myself very hard to do anything.  
3 I can't do any work at all. |
| 16. 0     | I can sleep as well as usual.  
1 I don't sleep as well as I used to.  
2 I wake up 1-2 hours earlier than usual and find it hard to get back to sleep.  
3 I wake up several hours earlier than I used to and cannot get back to sleep. |
| 17. 0     | I don't get more tired than usual.  
1 I get tired more easily than I used to.  
2 I get tired from doing almost anything.  
3 I am too tired to do anything. |
| 18. 0     | My appetite is no worse than usual.  
1 My appetite is not as good as it used to be.  
2 My appetite is much worse now.  
3 I have no appetite at all anymore. |
| 19. 0     | I haven't lost much weight, if any, lately.  
1 I have lost more than 5 pounds.  
2 I have lost more than 10 pounds.  
3 I have lost more than 15 pounds.  
(If any, mark: I am purposely trying to lose weight by eating less.  
Yes     No)
20. 0 I am no more worried about my health than usual.
   1 I am worried about physical problems such as aches and pains, or upset stomach, or constipation.
   2 I am very worried about physical problems and it's hard to think of much else.
   3 I am so worried about my physical problems that I cannot think about anything else.

21. 0 I have not noticed any recent change in my interest in sex.
    1 I am less interested in sex than I used to be.
    2 I am much less interested in sex now.
    3 I have lost interest in sex completely.
Name or ID#_______________________ Male__ Female__ Age__

DAVIS IR1

Instructions:
The following statements inquire about your thoughts and feelings in a variety of situations. For each item, indicate how well it describes you by choosing the appropriate number on the scale at the top of each page. When you have decided on you answer, fill in the number next to the item.

ANSWER SCALE:

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<th>3</th>
<th>4</th>
<th>5</th>
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<tr>
<td></td>
<td>Does not Describe me well</td>
<td>Describes me very well</td>
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</table>

There are no "right" or "wrong" answers. Please read each item carefully and be sure to answer all items.
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<th>1</th>
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<th>3</th>
<th>4</th>
<th>5</th>
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<tr>
<td>1</td>
<td>Does not describe me well</td>
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<td>2</td>
<td>If I'm sure I'm right about something, I don't waste much time listening to other people's arguments.</td>
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<td>3</td>
<td>I really get involved with the feelings of the characters in a novel.</td>
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<td>4</td>
<td>Sometimes I don't feel very sorry for other people when they are having problems.</td>
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<td>5</td>
<td>I am often quite touched by things that I see happen.</td>
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<td>6</td>
<td>When I see someone being taken advantage of, I feel kind of protective towards them.</td>
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<td>7</td>
<td>I believe that there are two sides to every question and try to look at them both.</td>
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<td>8</td>
<td>I would describe myself as a pretty soft-hearted person.</td>
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<td>9</td>
<td>I am usually objective when I watch a movie or play, and I don't often get completely caught up in it.</td>
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<td>10</td>
<td>When I see someone being treated unfairly, I sometimes don't feel very much pity for them.</td>
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<td>11</td>
<td>Before criticizing somebody, I try to imagine how I would feel if I were in their place.</td>
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<td>12</td>
<td>After seeing a play or movie, I have felt as though I were one of the characters.</td>
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<tr>
<td>13</td>
<td>When I am reading an interesting story or novel, I imagine how I would feel if the events in the story were happening to me.</td>
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<td>14</td>
<td>I try to look at everybody's side of a disagreement before I make a decision.</td>
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<td>15</td>
<td>I sometimes find it difficult to see things from the &quot;other guy's&quot; point of view.</td>
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Does not Describe me very well

(015) Being in a tense emotional situation scares me.

(016) When I see someone who badly needs help in an emergency, I go to pieces.

(017) I sometimes try to understand my friends better by imagining how things look from their perspective.

(018) In emergency situations, I feel apprehensive and ill-at-ease.

(019) When I see someone get hurt, I tend to remain calm.

(020) When I watch a good movie, I can very easily put myself in place of a leading character.

(021) Becoming extremely involved in a good book or movie is somewhat rare for me.

(022) Other people's misfortune's do not usually disturb me a great deal.

(023) I sometimes feel helpless when I am in the middle of a very emotional situation.

(024) I tend to lose control during emergencies.

(025) I often have tender, concerned feelings for people less fortunate than me.

(026) I am usually pretty effective in dealing with emergencies.

(027) I daydream and fantasize, with some regularity, about things that might happen to me.

(028) When I'm upset at someone, I usually try to "put myself in his shoes" for awhile.
Name or ID#_____________________  Sex:  M  F
Age:

INSTRUCTIONS

Below are a number of pairs of statements with which you may or may not identify. Consider this example: A "I like having authority over people", versus B "I don't mind following orders". Which of these two statements is closer to your own feelings about yourself? If you identify more with "liking to have authority over other people" than with "not minding following orders", then you would choose option "A".

You may identify with both "A" and "B". In this case you should choose the statement which seems closer to your personal feelings about yourself. Or, if you do not identify with either statement, select the one which is least objectionable or remote. In other words, read each pair of statements and then choose the one that is closer to your own feelings. Indicate your answer by circling the letter ("A" or "B") corresponding to this statement. Please circle only one letter for each item and do not skip any items.
1. A I have a natural talent for influencing people.
   B I am not good at influencing people.

2. A Modesty doesn't become me.
   B I am essentially a modest person.

3. A I would do almost anything on a dare.
   B I tend to be a fairly cautious person.

4. A When people compliment me I sometimes get embarrassed.
   B I know that I am good because everybody keeps telling me so.

5. A The thought of ruling the world frightens the hell out of me.
   B If I ruled the world it would be a much better place.

6. A I can usually talk my way out of anything.
   B I try to accept the consequences of my behavior.

7. A I prefer to blend in with the crowd.
   B I like to be the center of attention.

8. A I will be a success.
   B I am not too concerned about success.

9. A I am no better or no worse than most people.
   B I think I am a special person.

10. A I am not sure if I would make a good leader.
    B I see myself as a good leader.

11. A I am assertive.
    B I wish I were more assertive.

12. A I like having authority over other people.
    B I don't mind following orders.

13. A I find it easy to manipulate people.
    B I don't like it when I find myself manipulating people.

14. A I insist upon getting the respect that is due me.
    B I usually get the respect that I deserve.

15. A I don't particularly like to show off my body.
    B I like to display my body.
16. A I can read people like a book. 
    B People are sometimes hard to understand.

17. A If I feel competent I am willing to take responsibility for making decisions. 
    B I like to take responsibility for making decisions.

18. A I just want to be reasonably happy. 
    B I want to amount to something in the eyes of the world.

19. A My body is nothing special. 
    B I like to look at my body.

20. A I try not to be a show off. 
    B I am apt to show off if I get the chance.

21. A I always know what I am doing. 
    B Sometimes I am not sure of what I am doing.

22. A I sometimes depend on people to get things done. 
    B I rarely depend on anyone else to get things done.

23. A Sometimes I tell good stories. 
    B Everybody likes to hear my stories.

24. A I expect a great deal from other people. 
    B I like to do things for other people.

25. A I will never be satisfied until I get all that I deserve. 
    B I take my satisfactions as they come.

26. A Compliments embarrass me. 
    B I like to be complimented.

27. A I have a strong will to power. 
    B Power for its own sake doesn't interest me.

28. A I don't very much care about new fads and fashions. 
    B I like to start new fads and fashions.

29. A I like to look at myself in the mirror. 
    B I am not particularly interested in looking at myself in the mirror.

30. A I really like to be the center of attention. 
    B It makes me uncomfortable to be the center of attention.
31. A I can live my life in any way I want to.
   B People can't always live their lives in terms of what they want.

32. A Being an authority doesn't mean that much to me.
   B People always seem to recognize my authority.

33. A I would prefer to be a leader.
   B It makes little difference to me whether I am a leader or not.

34. A I am going to be a great person.
   B I hope I am going to be successful.

35. A People sometimes believe what I tell them.
   B I can make anyone believe anything I want them to.

36. A I am a born leader.
   B Leadership is a quality that takes a long time to develop.

37. A I wish someone would someday write my biography.
   B I don't like people to pry into my life for any reason.

38. A I get upset when people don't notice how I look when I go out in public.
   B I don't mind blending into the crowd when I go out in public.

39. A I am more capable than other people.
   B There is a lot that I can learn from other people.

40. A I am much like everybody else.
   B I am an extraordinary person.
SELF-EVALUATION QUESTIONNAIRE
STAI FORM X-2

NAME __________________________________________________________________________ DATE

DIRECTIONS: A number of statements which people have used to describe themselves are given below. Read each statement and then blacken in the appropriate circle to the right of the statement to indicate how you generally feel. There are no right or wrong answers. Do not spend too much time on any one statement but give the answer which seems to describe how you generally feel.

21. I feel pleasant ........................................................................................................ 0 0 0 0
22. I tire quickly ........................................................................................................ 0 0 0 0
23. I feel like crying .................................................................................................. 0 0 0 0
24. I wish I could be as happy as others seem to be ............................................ 0 0 0 0
25. I am losing out on things because I can't make up my mind soon enough .... 0 0 0 0
26. I feel rested ........................................................................................................ 0 0 0 0
27. I am "calm, cool, and collected" ....................................................................... 0 0 0 0
28. I feel that difficulties are piling up so that I cannot overcome them .......... 0 0 0 0
29. I worry too much over something that really doesn't matter ...................... 0 0 0 0
30. I am happy ......................................................................................................... 0 0 0 0
31. I am inclined to take things hard ..................................................................... 0 0 0 0
32. I lack self-confidence ......................................................................................... 0 0 0 0
33. I feel secure ...................................................................................................... 0 0 0 0
34. I try to avoid facing a crisis or difficulty ........................................................... 0 0 0 0
35. I feel blue .......................................................................................................... 0 0 0 0
36. I am content ..................................................................................................... 0 0 0 0
37. Some unimportant thought runs through my mind and bothers me .......... 0 0 0 0
38. I take disappointments so keenly that I can't put them out of my mind .... 0 0 0 0
39. I am a steady person ......................................................................................... 0 0 0 0
40. I get in a state of tension or turmoil as I think over my recent concerns and interests ........................................................................................................ 0 0 0 0

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### S O SCALE

<table>
<thead>
<tr>
<th></th>
<th>I often feel that I made a wrong choice in my occupation.</th>
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</thead>
<tbody>
<tr>
<td>2</td>
<td>When I was going to school I played hooky quite often.</td>
</tr>
<tr>
<td>3</td>
<td>I think Lincoln was greater than Washington.</td>
</tr>
<tr>
<td>4</td>
<td>I would do almost anything on a dare.</td>
</tr>
<tr>
<td>5</td>
<td>With things going as they are, it's pretty hard to keep up hope of amounting to something.</td>
</tr>
<tr>
<td>6</td>
<td>I think I am stricter about right and wrong than most people.</td>
</tr>
<tr>
<td>7</td>
<td>I am somewhat afraid of the dark.</td>
</tr>
<tr>
<td>8</td>
<td>I hardly ever get excited or thrilled.</td>
</tr>
<tr>
<td>9</td>
<td>My parents have often disapproved of my friends.</td>
</tr>
<tr>
<td>10</td>
<td>My home life was always happy.</td>
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<tr>
<td>11</td>
<td>I often act on the spur of the moment without stopping to think.</td>
</tr>
<tr>
<td>12</td>
<td>My parents have generally let me make up my own decisions.</td>
</tr>
<tr>
<td>13</td>
<td>I would rather go without something than ask for a favor.</td>
</tr>
<tr>
<td>14</td>
<td>I have had more than my share of things to worry about.</td>
</tr>
<tr>
<td>15</td>
<td>When I meet a stranger I often think that he is better than I am.</td>
</tr>
<tr>
<td>16</td>
<td>Before I do something I try to consider how my friends will react to it.</td>
</tr>
<tr>
<td>17</td>
<td>I have never been in trouble with the law.</td>
</tr>
<tr>
<td>18</td>
<td>In school I was sometimes sent to the principle for cutting up.</td>
</tr>
<tr>
<td>19</td>
<td>I keep out of trouble at all costs.</td>
</tr>
<tr>
<td>20</td>
<td>Most of the time I feel happy.</td>
</tr>
<tr>
<td>21</td>
<td>I often feel as though I have done something wrong or wicked.</td>
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<tr>
<td>22</td>
<td>It is hard for me to act natural when I am with new people.</td>
</tr>
<tr>
<td>23</td>
<td>I have often gone against my parents wishes.</td>
</tr>
<tr>
<td>24</td>
<td>I often think about how I look and what impression I am making upon others.</td>
</tr>
<tr>
<td>25</td>
<td>I have never done any heavy drinking.</td>
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</table>

**S O SCALE**

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<td>25</td>
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</tbody>
</table>
26. I find it easy to "drop" or "break with" a friend.  
27. I get nervous when I have to ask someone for a job.  
28. Sometimes I used to feel that I would like to leave home.  
29. I never worry about my looks.  
30. I have been in trouble one or more times because of my sex behavior.  
31. I go out of my way to meet trouble rather than try to escape it.  
32. My home life was always very pleasant.  
33. I seem to do things that I regret more often than other people do.  
34. My table manners are not quite as good at home as when I am out in company.  
35. It is pretty easy for people to win arguments with me.  
36. I know who is responsible for most of my troubles.  
37. I get pretty discouraged with the law when a smart lawyer gets a criminal free.  
38. I have used alcohol excessively.  
39. Even when I have gotten into trouble I was usually trying to do the right thing.  
40. It is very important to me to have enough friends and social life.  
41. I sometimes wanted to run away from home.  
42. Life usually hands me a pretty raw deal.  
43. People often talk about me behind my back.  
44. I would never play cards (poker) with a stranger.  
45. I don't think I'm quite as happy as others seem to be.  
46. I used to steal sometimes when I was a youngster.  
47. My home as a child was less peaceful and quiet than those of most other people.  
48. Even the idea of giving a talk in public makes me afraid.  
49. As a youngster in school I used to give the teachers lots of trouble.
50. If the pay was right I would like to travel with a circus or carnival.

51. I never cared much for school.

52. The members of my family were always very close to each other.

53. My parents never really understood me.

54. A person is better off if he doesn't trust anyone.
On the opposite page is a list of words that are used to describe people's personal characteristics. Please rate how accurately each word describes you as a person. Judge how accurately each word describes you on the following scale:

1. Extremely Inaccurate
2. Very Inaccurate
3. Quite Inaccurate
4. Slightly Inaccurate
5. Slightly Accurate
6. Quite Accurate
7. Very Accurate
8. Extremely Accurate

For example, consider the word BOLD. How accurately does that word describe you as a person? If you think this is a quite accurate description of you, write the number "6" next to it:

6. BOLD

If you think this word is a slightly inaccurate description of you, write the number "4" next to it, if it is very inaccurate write the number "2" next to it, and so on.

Please be sure to do all of them. If you are uncertain of the meaning of a word, consult the definitions provided on the last page.
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<td><strong>Quite Accurate</strong></td>
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<td>(02) Undemanding</td>
<td>(24) Cunning</td>
<td>(46) Self-confident</td>
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<td>(03) Assertive</td>
<td>(25) Meek</td>
<td>(47) Outgoing</td>
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<td>(04) Unauthoritative</td>
<td>(26) Uncharitable</td>
<td>(48) Boastful</td>
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<td>(05) Uncalculating</td>
<td>(27) Unsy</td>
<td>(49) Bashful</td>
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<td>(06) Accommodating</td>
<td>(28) Unaggressive</td>
<td>(50) Firm</td>
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<td>(07) Kind</td>
<td>(29) Jovial</td>
<td>(51) Uncrafty</td>
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<td>(08) Charitable</td>
<td>(30) Crafty</td>
<td>(52) Unsociable</td>
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<td>(09) Shy</td>
<td>(31) Boastless</td>
<td>(53) Hard-hearted</td>
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<td>(10) Uncunning</td>
<td>(32) Domineering</td>
<td>(54) Wily</td>
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<td>(11) Coldhearted</td>
<td>(33) Unargumentative</td>
<td>(55) Calculating</td>
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<td>(12) Ruthless</td>
<td>(34) Tender</td>
<td>(56) Uncheery</td>
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<tr>
<td>(13) Dissocial</td>
<td>(35) Unsympathetic</td>
<td>(57) Sly</td>
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<tr>
<td>(14) Tender-hearted</td>
<td>(36) Timid</td>
<td>(58) Neighbourly</td>
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<td>(15) Soft-hearted</td>
<td>(37) Unbold</td>
<td>(59) Warmthless</td>
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<td>(16) Cheerful</td>
<td>(38) Forceful</td>
<td>(60) Distant</td>
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<td>(17) Dominant</td>
<td>(39) Unwily</td>
<td>(61) Cocky</td>
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<tr>
<td>(18) Antisocial</td>
<td>(40) Extraverted</td>
<td>(62) Sympathetic</td>
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<tr>
<td>(19) Iron-hearted</td>
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<tr>
<td>(20) Enthusiastic</td>
<td>(42) Persistent</td>
<td>(64) Tricky</td>
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<tr>
<td>(21) Self-assured</td>
<td>(43) Perky</td>
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<tr>
<td>(22) Cruel</td>
<td>(44) Friendly</td>
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</table>
Instructions:

On the following pages you will find a number of statements that have been used by people to describe their beliefs and behaviors, and the beliefs and behaviors of others. Read each statement carefully and decide whether you agree or disagree with it. Indicate how much you agree or disagree with each statement according to the following scale:

1. Disagree
2. Disagree
3. Disagree
4. Neutral
5. Agree
6. Agree
7. Agree

For example, if you disagree moderately with a statement, write the number "2" next to it. If you neither agree nor disagree with the statement, write the number "4", indicating Neutral.

There are no right or wrong answers to any of these questions and none of the questions have any trick to them. Some of the questions are similar to one another, but judge each one separately. It does not matter if you have answered a similar question differently - simply indicate how you would respond to the current statement.

Be sure not to miss any questions.
1 I enjoy driving at high speed.
2 I enjoy giving "bossy" people a hard time.
3 I think I could "beat" a lie detector.
4 Sometimes you have to be crafty or sly.
5 It's best to be dominant and assertive because no-one else is going to look out for you.
6 I worry a lot about possible misfortunes.
7 I like to change jobs fairly often.
8 I can be fairly cunning if I have to be.
9 Everybody likes to hear my stories.
10 I am usually very careful about what I say to people.
11 I have often done something dangerous just for the thrill of it.
12 I wish I were more assertive.
13 I expect a great deal from other people.
14 I'm not at all calculating.
15 I think of myself as self-assured and confident.
16 I didn't get into much trouble at school.
17 I get a kick out of "conning" someone.
18 I get in trouble for the same things time after time.
19 I am very good at most things I try to do.
20 I was never in trouble with the police when I was a kid.
<table>
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<th>Disagree Strongly</th>
<th>Disagree Moderately</th>
<th>Disagree Slightly</th>
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</table>

1. (21) It's more effective to be straightforward and honest if you want people to do things for you.
2. (22) Being unemployed would depress me.
3. (23) I enjoy taking chances.
4. (24) I wouldn't do anything dangerous just for the thrill of it.
5. (25) I often worry unnecessarily.
6. (26) I insist upon getting the respect that is due me.
7. (27) The best way to get things done is to be forceful and persistent.
8. (28) I got in a lot of trouble at school.
9. (29) Rules are made to be broken.
10. (30) I usually feel quite confident when meeting new people.
11. (31) Not hurting others' feelings is important to me.
12. (32) I would be good at a dangerous job because I like making fast decisions.
13. (33) I have used few, if any, hallucinogenic drugs.
14. (34) On average my friends would probably say I am a kind person.
15. (35) I see myself as a good leader.
16. (36) I can read people like a book.
17. (37) I can usually talk my way out of anything.
18. (38) I have used most of the hallucinogenic drugs.
19. (39) I have sometimes broken an appointment because something more interesting came along.
20. (40) I enjoy gambling for large stakes.
__ (41) I have a strong will to power.
__ (42) I would describe myself as a crafty individual.
__ (43) I prefer having many sexual partners rather than just one.
__ (44) I will never be satisfied until I get all that I deserve.
__ (45) One must live only for the present and not worry about the future.
__ (46) If I ruled the world it would be a much better place.
__ (47) Sometimes at night I get so worried about something that my heart pounds and I can't fall asleep.
__ (48) I don't think of myself as tricky or sly.
__ (49) I almost never feel guilty over something I've done.
__ (50) It's sometimes fun to see how far you can push someone before they catch on.
__ (51) People can usually tell if I am lying.
__ (52) I wouldn't describe myself as shy or timid.
__ (53) Conning people gives me the "shakes".
__ (54) When I do something wrong, I feel guilty even though nobody else knows it.
__ (55) I always know what I am doing.
__ (56) I find it easy to manipulate people.
__ (57) I'm a soft-hearted person.
__ (58) I enjoy drinking and doing wild things.
__ (59) Ideally people should be undemanding.
__ (60) I am the most important person in this world and nobody else matters.
### Correlation Matrix for the PCL-R Items

<table>
<thead>
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<th>1</th>
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Correlation Matrix for the PCL-R Items (continued)

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Correlation Matrix for the PCL-R Items (continued)

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