

Current Scientific Views of Psychopathy

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The elegantly written monograph that follows first summarizes historical views of the concept of psychopathy and gives an authoritative review of the current scientific literature having to do with the nature and causes of psychopathy—dating especially from Cleckley’s conceptualization. Second, it critically evaluates current policy and practice concerning the application of the psychopathy construct in forensic contexts. These topics are not independent, as the conclusions from the first topic have major implications for the second.

To appreciate the importance of the first part, it is helpful to contrast two radically different views. In the “old” or traditional view, psychopathy is seen as a unitary construct that is discrete and qualitatively different from nonpsychopathy. One either is or is not a psychopath. This kind of model works best with a single-gene etiology (causal development) without too much influence from the environment. One either has the genetic vulnerability or does not—as is the case with the single dominant gene for Huntington’s chorea or the homozygous recessive genotype for phenylketonuria. In contrast, contemporary approaches to developmental psychopathology focus on individual differences in (often multiple) normal temperaments as *risk factors* that interact in complex ways with social (and possibly physical) environments. Usually a given risk factor can have multiple adult manifestations or outcomes (phenotypes)—a phenomenon known as multifinality. Similarly, different childhood risk factors often result in somewhat similar adult phenotypes—called equifinality. The developmental literature strongly supports this model.

To illustrate this model applied to psychopathy, I will describe what the monograph implies are the most likely risk factors for the two factors and place them in the context of developmental models. We are not certain about the details of these models, and they are undoubtedly simpler than reality, but they illustrate the nature of theorizing about psychopathy, which is the major point.

The Psychopathy Checklist-Revised (PCL-R) has dominated research on psychopathy. Factor analyses revealed two factors with a correlation of about 0.5. Factor 1 seems to capture Cleckley’s concept of psychopathy much better than Factor 2 (although as the following monograph shows, the PCL-R fails to include some of the positive adjustment features in Cleckleyan psychopathy). A large amount of research now suggests that the etiological contributors to the two factors are different—a conclusion with dramatic implications.

The unique features of Factor 1 capture the unemotional-predator concept of psychopathy, widely thought to reflect a low-fear temperament as a core risk factor for this pattern of behavior. However, a low-fear temperament does not inevitably lead to adult predation (multifinality). Fearlessness in a *prosocial* personality represents a positive outcome, not unlike the fictional character of James Bond (or the “hero” as described in the article). A second trait (in addition to fearlessness) of what the authors call “feckless disregard” toward others is a critical minimal component of Cleckleyan psychopathy, and many authors would require a more severe callous predation. This feckless disregard may totally reflect a failure of socialization, in which the low-fear temperament represents a challenge to socializing agents, who are unable to produce a positive developmental trajectory. Alternatively, it is quite possible that another temperament dimension of affiliation (closeness to others) may be important, such that the combination of low fear and low affiliation constitutes a major challenge to socializing agents. Additionally, peer groups may influence whether a criminal trajectory is involved. Thus, we have three possible contributors (fearless temperament, low-affiliation temperament, the results of socializing agents) that come as continuous variables and interact to produce a developmental outcome involving behavior that we call psychopathic.

The unique features of Factor 2 reflect a dimension of life-long disinhibition or impulsivity combined with high negative affect (anxiety, depression, fear, anger, alienation) and antisocial behavior. Theories about these processes focus on a failure of a regulatory system that normally inhibits maladaptive behavior and emotional responses. The strength of reward-seeking and emotionally reactive temperaments that are regulated by this system are also important—for example, unregulated strong reward seeking will cause more problems than unregulated weak reward seeking. Socialization processes also are important. Again, we have multiple, continuously variable conditions that can, in nonoptimal combinations, result in antisocial behavior that will be labeled as psychopathy by the PCL-R.

In neither developmental model is psychopathy an entity or single thing that is powerfully different from those who do not

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quite meet the criteria. Also, the two models indicate heterogeneity of the etiology of those diagnosed as psychopaths by the PCL-R (equifinality). The monograph's discussion of whether the antisocial outcomes of Factor 2 processes represent a "true" psychopath makes clear that deciding who is a psychopath is a matter of theoretical preference. The Cleckley perspective probably would limit the term psychopath to the fearless etiology associated with Factor 1. If the PCL-R is taken as the criterion, both pathways necessarily are labeled as psychopaths.

The term psychopathy has been valuable in identifying individuals who are distinctive enough to reflect interesting temperament contributions to antisocial behavior, but the construct refers to an outcome from a multidimensional, continuously variable set of etiological factors. It should not be reified and seen as some qualitatively distinct category, as if the word "psychopath" could be found somewhere inside the brain.

In a forensic context, the authors document that the construct of psychopathy is often reified and used as if it communicates surplus meaning that predicts negative future trajectories of criminal behavior. Surprisingly, they also show that Factor 1 has little independent predictive value in a forensic context. In contrast, and ironically, Factor 2 seems to have some independent predictive value. Thus, the dimension that is not characteristic of what many regard as "true psychopathy" actually carries most of the predictive power, negating the notion that "psychopathy" as some uniform entity predicts future bad behavior.

Another central concern is that the criteria for scores on Factor 2 include past criminal behavior. It is axiomatic that past behavior is a predictor of future behavior of the same type, and the inclusion of past criminal behavior in Factor 2 confounds

this atheoretical prediction with any theoretical interpretation of Factor 2's prediction of future criminal behavior. To the extent that the predictive value of Factor 2 scores reflects some type of trait related simply to criminal behavior, such predictions do not necessarily support some unitary conception of psychopathy. As the authors suggest, such predictions should be compared with scales that simply assess past criminal behavior, without reference to psychopathy.

As these findings reveal, so far there is little established validity to the idea that the construct of psychopathy predicts an especially negative future trajectory—only Factor 2 has predictive value, as just discussed. Similarly, there is not convincing evidence that either factor (or their combination) predicts adverse treatment outcomes. Yet this assumption that "psychopaths" (operationally, high scores on the PCL-R) have a worse trajectory than other, equally criminal prisoners, combined with an assumption that psychopaths are untreatable, is widely applied in the criminal justice system—profoundly affecting the lives of the juveniles and adults branded with that label. For many people involved in making these decisions, the concept of psychopathy is reified. They tend not to think in terms of more complex models of multiple factors influencing the individual's criminal behavior . . . and certainly not in terms of multiple etiologies with equifinal outcomes.

It is *not impossible* that there is some value in making diagnoses of psychopathy in a forensic context, but this review should give everyone pause until research has actually established the validity of such applications. If in fact the construct of psychopathy does not have important predictive value, it is morally dubious to make important decisions on the basis of the diagnosis.