

# Commentary: You Can Observe a Great Deal by Just Looking

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*J Am Acad Psychiatry Law* 29:387-9, 2001

Recent events have drawn increasingly urgent attention to violence among adolescents. The occasional sensational media account is a reminder that violent youths are to be found across the boundaries of location, class, and race. It is widely viewed as a growing problem, and fortunately there is also a growing research effort bearing on it. Each new contribution makes a welcome addition to our understanding of juvenile violence and our potential to develop effective approaches to reducing its harmful impact.

The present paper adds to the continuing valuable series from Dr. Richard Rogers' group, in that it joins in the necessarily gradual process of understanding delinquent behavior. It enables us to grasp more coherently how specific clinical and psychological attributes of acknowledged offenders correlate with the nature and extent of their psychopathy. In the process of doing so, it provides a telling demonstration of how to extend our knowledge without elaborate research procedures. Instead, these authors thoughtfully applied some of the results taken from a well-developed institutional protocol for initial evaluation of its new residents whose cases are newly adjudicated. They have put to work the adage that you can observe a lot by just looking.

Of course the adage works best for those who know where to look. This research viewed the results of three self-report protocols that yield information on sensation seeking or hypoarousability, impulsivity, and a symptom checklist based on diagnostic criteria for the DSM-IV triad of attention-deficit/hyperactivity disorder (ADHD), conduct disorder

(CD), and oppositional defiant disorder (ODD). The research explored the correlations from these results with those from the Psychopathy Checklist, Screening Version (PCL:SV).

The three probes, based on self-reporting, produce results free of bias from the external observer, and the authors demonstrate a praiseworthy approach to overcoming the subjectivity of self-reports. They explicitly sought to establish rapport by beginning with the semistructured interview required to obtain the PCL:SV score. That the scores obtained did not show a correlation with ethnicity may perhaps reflect their success. They also join in the commendable trend toward referring to study subjects as participants. Although their success at establishing rapport and its influence on the ultimate soundness of their results may remain difficult to judge, the praiseworthiness of their attitude is readily apparent.

## Reasons for Caution

Much remains to be worked out concerning the use and meaning of psychopathy as applied to adolescents. Its intended use is with adult evaluatees whose personalities are taken to be stable enough for a meaningful assessment. We are at an early stage in assessing the usefulness of the PCL in any version for younger populations. The single supporting reference for the PCL:SV's construct validity comes from last year. To their credit, the authors cite a very recent reference highlighting the possible instability of adolescents' psychopathy scores. They also include in their list of clinical implications the point that a single measurement of an adolescent's PCL:SV score has little predictive value, either of later violence or even of later PCL:SV scores. In this light, we may not be particularly surprised that the rates of violent instant offenses were identical for the high-psychopa-

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thy and moderate-psychopathy groups. Also relevant is that an item for adult criminal behavior is part of the PCL:SV.<sup>1</sup>

Although the habit of doing so is not uncommon, it can be misleading to refer to correlations as predictions. In the context of a statistically oriented discussion, it may of course be entirely appropriate to refer to an independent variable as predicting the value of a dependent one. This the authors do throughout their paper. It is important to note that they do not refer to prediction in the second paragraph of the discussion, where they capture their findings most succinctly. They also articulate very well the limitations of their cross-sectional design, in contrast to the longitudinal approach that would be appropriate to generate temporal predictions. Nonetheless, the repeated references to prediction, including in the title, convey something other than the subject of the paper.

A closely related source of confusion for the reader is the interchangeable use of "conduct problems" and "conduct disorder." Except for its indirect contribution as part of the PCL:SV score, the behavior of study participants in the institution was not in the investigators' purview. Yet phrases referring to "the prediction of conduct problems" may give the impression that the probability of violent or disruptive behavior is contemplated when it is only an association with self-reporting the presence of diagnostic criteria for CD.

### Further Questions

A further significant contribution of the paper is the interesting failure to confirm Lynam's model of adolescent psychopathy. It seems likely that this discrepancy flows from the authors' choice to study a group of adolescents who have already had adjudication for some serious form of antisocial behavior. This is a point the authors articulate only indirectly, yet it supports and agrees well with their useful suggestion of a "two-stage model" with conduct symptoms as a pivot between impulsivity (primarily) and psychopathy. There is elegance in the authors' parallel between their model and the relationship of CD to antisocial personality disorder.

Having shown the importance of impulsivity, the authors recommend measuring it as they did, using the Barratt Impulsiveness Scale. However, they do not explain their selection of the total impulsivity

score from this scale when, as they inform the reader, it is two of its subscales that have been correlated with youthful aggression.

We should note the reality of at least two dimensions of aggressive behavior. When we are considering a particular individual's risk of engaging in it, we evaluate the level of imminent risk and/or the ongoing long-term risk. The common term for this work is risk assessment.<sup>2</sup> Success at assessment of imminent risk is well developed,<sup>3</sup> but as would be expected, it is more difficult for the long term.

Beyond this individual dimension, there is also a distinction to be made when considering groups, as in this study. When assessing aggressiveness in regard to a group, one confronts the need to distinguish acutely aggressive individuals from those who are chronically or repetitively so.<sup>4</sup> Most mentally ill patients who become aggressive do so suddenly or acutely, and through treatment, environmental change, or the passage of time they readily revert to being no more aggressive than anyone else and are able to remain so. A few, however, remain chronically dangerous, continually at varying degrees of elevated risk for an aggressive outburst. So far, as forensic professionals, we are far more able to perform risk assessments than we are to address differences in severity and etiology among the chronically aggressive.<sup>5</sup> Recent research is shedding some light on this problem, including such highly regarded tools as the Historical-Clinical-Risk (HCR)-20 from Simon Fraser University (Burnaby, British Columbia, Canada) and the Violence Risk Appraisal Guide (VRAG) from Simcoe County Mental Health Education, Mental Health Centre, Research Department (Penetanguishene, Ontario, Canada), as well as newer work by the MacArthur group.<sup>6</sup>

As Vitacco and Rogers remind us, the PCL:SV has contributed to our understanding of chronically aggressive adults and is thus worth exploring, as they have done, in order to explore chronic aggression in the younger age group. However, despite its acknowledged successes, few would expect the PCL alone to suffice for the assessment of chronic aggressiveness. It failed to do so in a group of 89 patients discharged from Broadmoor Hospital in the United Kingdom.<sup>7</sup> Previous findings of Rogers' group showed only a modest correlation between adolescents' PCL-R scores and physical aggression.<sup>8</sup>

## Additional Factors in Adolescent Violence

Vitacco's and Rogers' work also reminds us that adolescent violence can and does arise from multiple factors that often interact. As with adults, substance abuse increases this risk, and fortunately there is new work to guide increasingly effective interventions.<sup>9</sup> The importance of gang membership is increasingly clear as are ways to deal with it.<sup>10</sup> We hear young people explain and even try to justify their aggressive responses in terms of being disrespected by the victim, reminiscent of a similar justification among violent adults.<sup>11</sup> Research continues to clarify the roles of multiple endocrine problems in youth violence.<sup>12</sup> The interesting observation that some violent young people have unusually low heart rates continues to draw attention.<sup>13</sup>

One of the symptom areas important to this work, ADHD, has turned up interesting abnormalities on functional magnetic resonance imaging (fMRI).<sup>14</sup> The use of this technique is a burgeoning area of mental health research, most notably in regard to schizophrenia. It can even be used to show how the normal brain activates different areas in the course of assessing the appropriateness of contrasting moral choices. These activation differences may suggest a plausible solution for a classic moral dilemma.<sup>15</sup> Perhaps, then, we may soon find ourselves able to make useful distinctions reliably among aggressive mentally disturbed adolescents, by using fMRI. Bearing in mind the plasticity of the youthful brain, it may be reasonable to anticipate change after the normalizing effects of treatment.

The work of Vitacco and Rogers serves to raise the basic question of the role of adolescent psychopathy as a construct at the present stage of our understanding, and it answers by illustrating its heuristic value.

It suggests and prompts the imagination for places where it will be useful to look in order to observe.

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