Members' Corner

Psychopathy: Rediscovering Cleckley's Construct

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The fantastic antisocial exploits of some psychopaths has lured the attention of psychologists, corrections personnel, forensics specialists, novelists, and film makers. However, dramatic antisocial behavior is not really at the heart of

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psychopathy nor is it, in our opinion, the most fascinating aspect of the syndrome. As psychopathologists, curiosity about the type of psychological dysfunction that underlies psychopathic behavior is what captures our attention. In this regard, there is general agreement that Cleckley's (1976) classic portrayal of psychopathy provides the most valuable foundation.

In his book "The Mask of Sanity", Cleckley (1976) describes psychopathy as a "grave form of psychopathology" rivaling schizophrenia in depth of impairment. When discussing the severity of their disorder, Cleckley does not refer to the psychopath's violent or criminal behavior but to a "very serious disability" (p. 367) that gives ready expression to virtually any response inclination. For Cleckley, psychopathy was defined by a constellation of dysfunctional psychological processes as opposed to specific behavioral manifestations. The behavioral manifestations of the disorder portrayed in his case studies varied as a function of the person's age, gender, socioeconomic status, and trait-like tendencies which predisposed some exemplars toward aggressiveness, deviant sexual practices, excessive substance abuse, or get rich quick schemes. Though such trait-like tendencies may give rise to clinically significant problems owing to their exaggerated expression in the psychopathic individual, Cleckley did not regard them as intrinsic to the psychopathy construct.

Of course I am aware of the fact that many persons showing the characteristics of those here described do commit major crimes and sometimes crimes of maximal violence. There are so many, however, who do not, that such tendencies should be regarded as the exception rather than the rule, perhaps, as a pathologic trait independent, to a considerable degree, of the other manifestations which we regard as fundamental. It is, of course, granted that when serious criminal tendencies do emerge in the psychopath, they gain ready expression... (p. 262).

Though Cleckley's insight into the psychopath's dysfunctional processes was extraordinary, the subject matter is complex and it was clear from the outset that others would have difficulty grasping the nature of his concepts. This problem was further compounded by the psychopath's impressive "mask of sanity".

It is not easy to convey this concept, that of a biologic organism outwardly intact, showing excellent peripheral function, but centrally deficient or disabled in such a way that abilities, excellent at the only levels where we can formally test them, cannot be utilized consistently for sane purposes or prevented from regularly working toward self-destructive and other seriously pathologic results" (p. vii).

**Construct refinement or drift?** Given the complexities, it is not surprising that investigators had difficulty pursuing Cleckley's construct in a direct fashion. In the assessment domain, the authors of DSM-III regarded Cleckley's characterization of psychopathy as too vague and subjective and, thus, opted instead to employ specific behaviors indicative of chronic antisocial behavior. However, direct comparison of the DSM and Cleckley criteria indicates that these assessment procedures identify alternative rather than comparable diagnostic constructs.

Similarly, investigators had difficulty assessing the postulated dysfunction. In 1957, Lykken labeled Cleckley's characterization of psychopathy as too "subjective and unreliable" to be useful and proposed instead "expressing this putative defect...in terms of the anxiety construct of experimental psychology" (p. 6). The enhanced clarity and specificity of Lykken's anxiety construct made it easier to grasp which, in turn, fueled research but, here too, it may be argued that the more easily operationalized construct achieved clarity without capturing the essence of the core syndrome (Newman, 1998; Newman & Brinkley, 1997).

Historically, then, Cleckley's views of the psychopathy construct have been regarded as relatively inaccessible. As a result, investigators have drifted toward a conceptualization of the problem that emphasizes antisocial behavior. This drift is not without potentially significant consequences. One issue that has plagued psychopathy research throughout its history is the natural and widespread concern about attributing social deviance (i.e., criminal behavior) to psychopathology as
opposed to other factors. What distinguishes psychopaths from ordinary criminals is the presumption that dysfunctional psychological processes play an important role in promoting their inappropriate behavior (Blackburn, 1995). To the extent that psychopathy is defined in terms of chronic antisocial behavior as opposed to dysfunctional processes, this distinction is blurred. A second effect of this drift has been the tendency to focus on adult, male inmates with low socioeconomic status who, in contrast to other potential samples, are most inclined to chronic antisocial behavior. As noted by Widom (1977), excessive reliance on this sample may result in a psychology of the “unsuccessful psychopath”. Third, although the focus on psychopaths’ anticipatory fear and avoidance learning may help to explain their antisocial behavior, this narrow focus may provide a nonrepresentative sample of the psychopath’s psychobiological limitations. Overall then, this drift toward an antisocial conceptualization of psychopathy may be distorting our view of the problem and thus thwarting efforts to understand, identify, treat, and prevent the disorder.

Is Cleckley’s psychopathy construct still inaccessible? Forty-seven years have elapsed since Cleckley published the first edition of his book in 1941. During that time, psychological science has made huge theoretical and methodological advances. Thus, we may now have the tools to understand and test theoretical proposals that were inaccessible a half-century ago. Evaluating the construct validity of Cleckley’s psychopathy construct requires (a) a reliable assessment instrument for identifying individuals with the disorder; and (b) experimental methods for assessing the hypothesized psychological dysfunction (Gorenstein, 1992).

The Psychopathy Checklist (PCL; Hare, 1980) and PCL-Revised (PCL-R; Hare, 1991) were developed to “quantify the Cleckley conceptualization of psychopathy” (p.13) and they have been found to have excellent psychometric properties including high internal consistency (alpha) and inter-rater reliability (approximately .85-.90; Hare, 1996). As might be expected, the PCL is highly correlated ratings of Cleckley’s criteria for psychopathy (e.g., .83; Hare, 1991). Moreover, there is now a wealth of evidence documenting the PCL’s association with diverse forms of antisocial behavior including violent and nonviolent criminal behavior, criminal versatility, recidivism and substance abuse. While describing these developments in an article entitled “Psychopathy: A clinical construct whose time has come”, Hare (1996) concluded that despite a century of concern with the psychopathy construct, “it is only recently that scientifically sound psychometric procedures for its assessment have become available” (p. 25).

The existence of a reliable and widely accepted measure of psychopathy greatly facilitates investigation of its construct validity, but it is not sufficient. Determining whether psychopathy is associated with the type of psychological dysfunction which, for Cleckley, defined the essence of the disorder necessarily involves investigating the psychobiological correlates of the syndrome. Cleckley believed that psychopaths suffer from a “selective defect or elimination which prevents important components of normal experience from being integrated into the whole human reaction” (p. 374). More specifically, he referred to the problem as a “semantic deficit” that hampered the psychopath’s ability to attach meaning/affective significance to their words, thoughts and actions. As a result, the language and behavior of psychopaths are less likely to be influenced by their implications.

Investigators have used a variety of research strategies to evaluate this general hypothesis. One strategy has been to assess specific affects (e.g., fear) and evaluate their effects on behavior (e.g., avoidance learning). Psychopathic offenders typically display less electrodermal activity in anticipation of aversive events (see Arnett, 1998; Hare, 1978) and weaker inhibition of punished responses (see Fowles, 1980; Lykken, 1995). This sizable literature suggests that psychopaths are relatively unresponsive to fear stimuli when a threatened event is temporally remote (i.e., represented symbolically) or when responsiveness to the fear stimulus involves inhibiting behavior. More recent investigations of affective responding in psychopathy have examined the extent to which presentation of affective stimuli moderate participants’ response to startling probes (e.g., Patrick, 1994) or recall for various types of information (Christianson et al., 1996). The group differences observed provide further evidence for anomalous affective processing and suggest that such findings are not specific to fear.
A second strategy has been to focus on the semantic (i.e., meaning) element of Cleckley’s proposal using language processing tasks. For example, Williamson, Harpur & Hare (1991) examined the extent to which the affective valence of target words facilitated lexical decisions in psychopaths and controls and found that psychopaths displayed significantly less affect-related facilitation (see also Day & Wong, 1997). Using a categorization task, Hare and Jutai (1988) found that psychopaths had more difficulty deciding whether target words belonged to particular categories when the categories involved abstract concepts (e.g., living things). Here, too, there is preliminary but promising support for Cleckley’s characterization of the psychopath’s deficit. Moreover, these findings from the language domain suggest that the psychopaths’ difficulty attaching meaning to words and actions extends beyond the affective domain.

A third strategy has been to focus on the problem that “prevents important components of normal experience from being integrated into the whole human reaction”. Research in our lab suggests that psychopaths’ difficulty using cues for punishment to inhibit behavior is relatively specific to situations in which they are actively engaged in alternative goal-directed behavior (Patterson & Newman, 1993). More recently, we have found that the psychopath’s failure to be influenced by cues that are peripheral to their ongoing goal-directed behavior applies to affectively-neutral as well as affectively-significant contextual cues. On the basis of these and related findings, Newman (1998) proposed that the psychopath’s difficulty being guided by the meaning of their actions involves a problem suspending goal-directed behavior to accommodate peripheral information. This hypothesis may help to reconcile the apparent contradiction in Cleckley’s qualification of his proposal regarding the psychopath’s affective/semantic deficit.

In complex matters of judgment involving ethical, emotional, and other evaluational factors...(the psychopath) shows no evidence of a defect. So long as the test is verbal or otherwise abstract, so long as he is not a direct participant, he shows that he knows his way about...When the test of action comes to him we soon find ample evidence of his deficiency (p. 346)

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**The generality of Cleckley’s construct:**
Cleckley’s classic portrayal of the psychopath has provided the field with a template for assessing psychopaths and characterizing their dysfunction. Notably, this profile was compiled using a diversity of clinical cases seen in an outpatient setting. In contrast, the majority of research on the psychopathy construct has been conducted with adult, white, male offenders. If, as proposed by Cleckley, psychopathy entails psychological dysfunction as opposed to antisocial behavior per se, it should be possible to identify and study this dysfunction in a
wider range of individuals. Not only would such studies provide a more representative understanding of psychopathy, they would also serve to clarify the factors that moderate its expression (see Gorenstein & Newman, 1980).

One difficulty with pursuing this line of research is that the behavioral manifestations of the disorder appear to vary with age, gender, race, socioeconomic status, and temperament. Thus, further research is needed to determine whether the PCL-R or any other measure is suitable for identifying psychopathy in diverse samples. Fortunately, the progress that investigators have made using the PCL-R to identify the psychobiological correlates of the disorder in white, male offenders should make this task easier. That is, using the PCL-R to specify correlates in well validated groups of psychopaths and controls, provides the field with process-related indicators. Such indicators, in turn, may be used to evaluate the applicability of existing diagnostic criteria to diverse groups. If necessary, the same indicators could be used to evaluate modifications of the diagnostic criteria so that they are sensitive to expressions of psychopathy in diverse groups.

In the last few years, research on the generalizability of the psychopathy construct has begun in earnest. Using the PCL in conjunction with diverse psychological, social, and laboratory measures of the construct, Kosson, Smith, and Newman (1990) reported preliminary evidence for the generalization of the psychopathy construct to African American offenders. Others have focused on developing procedures for assessing psychopathy in children and adolescents (e.g., Forth & Burke, 1998; Frick & Hare, in press). Here too, investigators have recognized the importance of using psychobiological correlates linked to psychopathy in adult male offenders for evaluating the validity of their assessments with children (e.g., Frick, 1998; Lynam, 1997). Although similar work investigating the psychopathy construct in female offenders has begun (e.g., Rutherford, Cacciola, Alterman, & McKay, 1996; Salekin, Rogers, & Sewell, 1997), researchers have yet to publish evidence on the psychobiological correlates of the syndrome. Finally, investigators have begun using self-report measures of psychopathy to measure the essential features of psychopathy in non-offender groups including college students (e.g., Levenson, Kiehl, & Fitzpatrick, 1995; Lilienfeld & Andrews, 1996) and white-collar workers (Babiak, 1995). We agree with Lilienfeld and Andrews (1996) that an essential component of validating such measures involves examining their relation to the well-replicated psychobiological correlates of the disorder.

**Conclusion:** Cleckley's view of psychopathy as a psychological dysfunction that interferes with self-regulation and precludes the systematic pursuit of long-range personal goals represents an important clinical syndrome which is not adequate represented in DSM-IV. Nevertheless, the field is making impressive strides in (a) translating Cleckley's descriptive formulations into more theoretically precise formulations; (b) using these formulations to develop and test specific, alternative hypothesis; and (c) documenting the generality of the psychopathy construct by examining its manifestations in diverse groups. We regard these three endeavors as prescriptions for continued progress. Continued progress in these domains should eventually enable the early identification of relevant processing anomalies, examination of their developmental trajectories, and implementation of informed interventions to promote more favorable outcomes.
References


