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The absolute majority of children behaves bad at times. However, some children show extreme and hence worrisome levels of ‘badness’. They lie, they bully, they fight or steal. These children are known to be at risk for developing a persistent pattern of antisocial behavior, delinquency and aggression. There are many risk-factors associated with these types of conduct problems. These include, personal, peer, familial and neighborhood factors. In particular, the study of children’s personality traits may help further our understanding of the different mechanisms that lead to serious problem behavior in youth. In adulthood and adolescence, a constellation of personality traits named ‘psychopathy’, has proven useful in identifying a particularly recalcitrant form of antisocial and criminal behavior (Cleckley, 1941; Das, de Ruiter, Lodewijks, & Doreleijers, 2007; Forth et al., 2003; Hare, 2003). While research on psychopathy to date has foremost focused on these age groups, there are a number of historical and developmental reasons to assume that psychopathic traits may already be observable in preadolescent children, and recent empirical findings have confirmed this.

This thesis aimed to enhance our understanding of the concept of psychopathic traits in preadolescent children. It did so in two ways. First, by developing a self-report instrument for measuring psychopathic traits in preadolescent children; and second, by providing a deeper understanding of socio-emotional functioning of children with psychopathic traits.

Self-reported psychopathic traits

Studying psychopathic traits through self-report is important because children are in the unique position to report on feelings, attitudes and behaviors across a range of situations, including the home, the classroom and the playground. Self-report may thus provide an important additional perspective on preadolescent children’s psychopathic traits to commonly used parent and teacher reports. However, no self-report instrument of psychopathic traits existed. The aim of the first three studies in this thesis was, therefore, to develop and validate a new instrument for measuring psychopathic traits in preadolescent children by means of self-report: the Youth Psychopathic traits Inventory-Child Version (YPI-CV) and its abbreviated version, the YPI-Short Child Version (YPI-SCV). Chapters 2 and 3 described the development and validation of the YPI-CV. This instrument is a downward extension of the adolescent Youth Psychopathic traits Inventory (Andershed et al., 2002). The results with respect to the instrument’s reliability, stability and construct validity, suggest that psychopathic traits can be measured reliably and validly through self-report in preadolescent children from the community.
Internal consistency and factor structure - A three factor structure, similar to that of the adolescent YPI and consistent with recent theoretical models (Cooke & Michie, 2001) was shown to fit the data well, in both boys and girls. Good to excellent internal consistencies were found for the YPI-CV total score and the three dimensions (chapter 2).

Stability - Moderate to high stability was found for the total score and all dimension scores of the YPI CV over 6- and 18 month-periods (chapters 2 and 3). Additionally, children with persistently high levels of psychopathic traits exhibited higher levels of problematic behaviors (conduct problems and proactive aggression) at follow-up (18-month-period) than those with unstable or stable low psychopathic traits (chapter 3).

Construct validity - The construct validity of the YPI-CV was assessed in two ways. First, the three dimensions of the YPI-CV were differentially validated by relating each of them to an external criterion measuring a similar, a-priori selected, construct (e.g. narcissism for the grandiose-manipulative dimension). The expected unique relationships between each of the three dimensions and their respective counterparts, were found in both boys and girls (chapter 2). Second, we provided additional evidence for the construct validity of the YPI-CV by investigating the concurrent and prospective associations between self-reported psychopathic traits and behaviors that have typically been associated with these traits in all age groups: conduct problems and aggression (chapter 3). As expected, self-reported psychopathic traits were related to higher rates of self, peer and teacher reported conduct problems both concurrently and at follow-up, 18 months later, even after controlling for initial levels on conduct problems. Self-reported psychopathic traits were also associated with higher levels of self-reported aggression at follow-up, particularly proactive aggression.

The research described in chapter 4 concerns the development of psychometrically sound and comparable short versions of both the adolescent and child YPI instruments. Step-wise parallel reduction of the items of both questionnaires resulted in two highly similar 18 items YPI short versions (YPI-S and YPI-SCV), which, despite the removal of around two-thirds of the items, were reliable and covered all core characteristics of the psychopathic personality construct. The short versions showed high convergence with the original long instruments, and similar correlations to external criterion measures were found for both the long and short versions. Furthermore, these findings cross-validated from one sample to another.

To conclude, the present research shows that children in this age group can be considered reliable and valid reporters of psychopathic traits.

The findings in these first three studies (chapter 2 to 4) have a number of implications (described in chapter 7). With respect to clinical practice, although the YPI and its child version were developed primarily as research instruments, they may prove to be useful as clinical assessment tools as well. In fact, our group has begun to test
the utility of the short version of the adolescent YPI (YPI-S; chapter 4) as part of a risk and mental health screening battery in a juvenile justice institute in The Netherlands. Second, with respect to their utility for research on psychopathic traits, the YPI instruments may be well suited for the longitudinal study of psychopathic traits over the lifespan. This type of study may answer the important question whether children with high psychopathic traits grow up to be adults with high psychopathic traits. The YPI instruments could prove to be particularly serviceable for this type of research because almost identical questionnaires are now available for children and adolescents, which may also work in adults (Kansi, 2003). First, however, further research is needed on the YPI-CV. For example, future research could compare the relative importance of judgments provided by each type of informant (parents vs. teachers vs. self report). Moreover, it may be worth investigating whether pooling information from multiple sources (i.e. parents, teachers and children) has greater diagnostic and predictive power than relying on a single source alone (Frick & Hare, 2001).

**Psychopathic traits and socio-emotional functioning in children**

The aim of the remaining studies (chapters 5 and 6) was to conduct a more in-depth investigation into how psychopathic traits relate to problematic socio-emotional functioning in this group.

Chapter 5 aimed to investigate the relationship between psychopathic traits, measured through the short version of the YPI-CV (YPI-SCV, chapter 4), to social functioning. Gaining insight into this relationship is important because various indicators of problematic social adjustment (e.g. low social standing, low social problem solving skills, poor perspective taking skill) were shown to be predictive of future psychological maladjustment and antisocial behavior. This is particularly important for children with psychopathic traits, as they are already at risk for an antisocial development. Recent evidence even shows that problematic social functioning may exacerbate psychopathic traits (Barry et al., 2008). In our study, children with psychopathic traits were less able and willing to empathize with others, had egocentric and instrumental motivations for acting kind to other children, and strived for dominance, admiration and respect from their peers rather than affiliation. Not surprisingly, they were not well liked by their peers. Thus children with high psychopathic traits suffered from impaired social functioning at different levels: emotionally (cognitive and emotional empathy), motivationally (social goals), and interpersonally (social status).

Previous research, including chapter 3 of the present thesis, had shown that psychopathic traits are positively related to aggression. However, the conditions under which these aggressive acts are likely to occur in children with psychopathic traits are not well understood. In chapter 6 we proposed that children with high psychopathic traits are aggressive because of their reduced sensitivity to other’s distress. In our experimental design, children with high levels of psychopathic traits administered
‘blasts’ of noise to their opponents that reached well above the level that was previously explicitly described as “hurting the opponents’ ears.” However, when the distress of the opponent was made salient, their aggression was reduced to levels that did not differ from their counterparts with low psychopathic traits. Our experiment thus showed that children with psychopathic traits are indeed prone to act aggressively, but that their aggression can be attenuated by stimulating them to focus on their victim’s pain and discomfort.

The findings in these last two studies (chapters 5 and 6) have a number of implications (detailed in chapter 7). In chapter 6 we demonstrated that aggression could be attenuated to normal levels if children with high psychopathic traits were stimulated to focus on their victim’s pain and discomfort (i.e. an empathy induction). One can speculate on how this finding may fuel intervention programs of tomorrow. For example, parents of children with high psychopathic traits could be stimulated to focus the attention of the transgressing child on the feelings of the victim by heightening the salience of the victim’s distress and emphasizing the responsibility of the transgressing child in causing these feelings (an empathy inducting parenting style, Hoffman, 2000). Additionally, emotion (recognition) skills teaching could be part of a personal curriculum in the preadolescent school years for children with high psychopathic traits (Sharp, 2008). The development of effective intervention strategies to tackle the emotional problems of children with psychopathic traits may require many more years of additional research. Meanwhile, another potentially effective approach may be taken. In chapter 5, we identified a number of variables relevant to the social functioning of children with psychopathic traits. As recent research has shown that problematic social functioning aggravates psychopathic traits in children (Barry et al., 2008), social emotions, social goals and social status may be important targets for intervention, in order to prevent negative chain reactions that could worsen the prospects of these children even further. We could therefore begin to target problematic social functioning rather than the psychopathic traits per se, given the availability of interventions that focus on peer-relations, social emotional functioning, or social cognitions.

The studies in chapter 5 and 6 aimed at a better understanding of developmental mechanisms and processes that may be useful for interventions. However, the direct implications of these findings are still speculative and many issues need to be addressed in future research. For example, more research is needed on the, most likely, complex interplay between psychopathic traits, social relationship problems, and problematic behaviors such as aggression. Reciprocal influences are likely, possibly resulting in a self-perpetuating downward spiral of psychopathic traits, social functioning and behavior. Future studies should further investigate these complex transactional models to find ways to break this cycle. In chapter 6 it was demonstrat-
ed that increasing the salience of the opponent’s distress results in lower levels of aggressive responding. However, the exact mechanism through which this happened was not directly examined. Both cognitive (perspective taking) or affective empathy mechanisms could have played a role. Furthermore, in order to have relevance for future treatment programs, it will need to be demonstrated that repeated empathy inductions (i.e. a empathy inducting parenting style), attenuates aggressive behaviors in the long run and outside of the laboratory.

Finally, the study of psychopathic traits in children is not without debate. Legitimate concerns have been raised regarding the potential harm of the use of the psychopathy-label, which has a particularly negative connotation, to children and adolescents. Therefore, one has to be very careful to avoid labeling children as ‘psychopathic’ or ‘psychopath’, which we have tried throughout this thesis. However, current insights including those presented in this thesis, underscore the need to continue research in this important and fascinating field of study.