Psychopathy as a Predictor of Relational Aggression

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EXECUTIVE SUMMARY

A large number of offenders have an identifiable history of antisocial criminal behavior, and the prevalence rate for Antisocial Personality Disorder (ASPD) in prisons is estimated to be 50% to 80% (Ogloff, 2006). Among inmates who meet criteria for ASPD, 15% are estimated to also meet the threshold for psychopathy (Ogloff, 2006). Psychopathy reflects behavioral difficulties that often pertain to chronic aggressive criminal behavior. The majority of research to date has focused on the use of psychopathy to predict physical violence or overt aggression in community samples (e.g., Czar et al., 2011; Helfritz & Stanford, 2006; Skeem & Mulvey, 2001). In addition to physical violence, there is evidence that relational aggression is exhibited by both female and male prisoners (e.g., Ben-Horin, 2001; Isoma, 2010; Wheaton, 2009). Relational aggression can be observed among social groups in which there is purposeful withdrawal of friendship, outright exclusion of others, and spreading of rumors intended to harm another individual within the group (Crick & Grotpeter, 1995). Interpersonal deficits found in psychopathy overlap with various forms of relational aggression: specifically, callousness and manipulative interpersonal style (Walsh & Kosson, 2008).

Purpose of the Current Study
- Investigate the utility of interpersonal factors of psychopathy (i.e., antisocial behavior, manipulativeness, lack of empathy, etc.) for predicting relationally aggressive behavior.

Sample
- Male inmates were eligible to participate if they:
  - (a) were 18 years of age and older;
  - (b) had gone through the prison intake process, and completed the PAI, within five years; and
  - (c) were able to speak and read English at a fifth-grade level.
- The final sample consisted of 136 male inmates:
  - 54% housed in Minimum security at Snake River Correctional Institution (SRCI)
  - 46% housed in Medium security at SRCI.

Materials
- All participants completed two surveys:
  - Psychopathy Personality Inventory-Revised
    - Ratings to assess psychopathic personality traits on a 4-point Likert Scale (with anchors of *false, mostly false, mostly true,* and *true*).
  - Inmate Relational Aggression Inventory
    - Ratings to assess the experience of inmate relational aggression as (a) victim and (b) aggressor on a 3-point Likert Scale (0 = *Never,* 1 = *Once or twice,* 2 = *Three or more times*).

Findings

Relational Aggression Categories by Security Level

	Minimum (n = 72)		Medium (n = 67)		Total (N = 139)	
	n	*%*	*n*	*%*	*n*	*%*
Pure Aggressor	2	3	3	5	5	4
Pure Victim	26	36	19	28	45	32
Aggressor/Victim	34	47	32	48	66	47
Not Involved	10	14	13	19	23	17
Total	72	100.0	67	100.0	139	100.0

Types of Victimization Experienced by Inmates
- Receiving the silent treatment — 55.8%
- Being avoided — 45.8%
- Being lied about — 44.9%
- Having rumors spread about them — 44.2%
- Being betrayed — 40.1%
- Being "ratted on" to a guard — 31.2%
- Having property stolen from them — 26.1%
- Being purposely excluded from activities and/or games — 22.1%
- Being threatened by a group of inmates — 21.4%
- Having their secrets told to another inmate — 19.3%
- Being purposely ignored — 15.0%
- Being excluded because of their ethnicity — 14.3%
- Having bullies harass them systematically and repeatedly — 13.6%
- Having other inmates refuse to be their partner during activities — 13.6%
- Being blackmailed — 10.8%
- Being harassed or cussed at because of their ethnicity — 10.7%
- Being hurt by not receiving an invitation to an event — 7.1%
- Having a friend make friends with someone else to get back at them — 5.8%
- Having a message written about them on walls in bathrooms, etc. — 0.7%

Inmate's Aggressive Behavior Towards Other Inmates
- Refusing to speak to another inmate — 48.2%
- Suggesting boycotting, shunning, or ostracizing another inmate — 13.6%
- Ignoring another inmate in order to hurt him — 12.2%
- Spreading rumors about another inmate — 5.0%
- Harassing or cussing at another inmate because of his ethnicity — 4.3%
- Systematically and repeatedly bullying weaker inmates — 3.6%
- Telling another inmate's secrets in order to hurt him — 3.6%
- Lying about another inmate you wanted to hurt — 2.1%
- Making friends with someone else for the purpose of revenge — 1.4%
- Blackmail an inmate to give you food, valuables or buy something for you — 1.4%
- Stealing personal equipment or property from another inmate — 0.7%

Psychopathic Personality Inventory Total and Factor Scores by Security Level

Scale	Minimum (n = 73)		Medium (n = 63)		Total (n = 136)		
	M	*SD*	*M*	*SD*	Range	*M*	*SD*
Total	50.93	12.27	47.86	10.17	[20, 79]	49.51	11.41
Fearless Dominance	51.11	13.82	47.24	13.15	[17, 85]	49.32	13.60
Self-Centered Impulsivity	50.01	8.70	49.00	9.83	[28, 70]	49.54	9.21
Coldheartedness	51.22	10.75	50.06	7.29	[33, 80]	50.30	9.30

Correlations Among the Predictor Variables

Variable	1	2	3
1. Social Influence	--	.37*	.48*
2. Fearlessness		--	.23*
3. Stress Immunity			--

*p < .01

Regression Coefficients, Correlation and Confidence Intervals of Poisson-Regression

	B	*p*	CI 95%
Social Influence	.02	.03*	[.002, .032]
Fearlessness	.02	.05*	[.000, .032]
Stress Immunity	-.03	.00**	[-.046, -.015]

* $p < .05$; **$p < .01$

Results & Conclusions

The interpersonal subscales of the PPI-R predicted the likelihood of relational aggression in male inmates. The Poisson-regression correlations represent the proportion of total variance in relational aggression explained uniquely by each predictor variable (i.e., Social Influence, Fearlessness, Stress Immunity). The Poisson-regression indicated that all three content scales were significant predictors of relational aggression. The results therefore suggest that specific personality traits inherent in psychopathy can help predict frequency of relational aggression. This information may be useful in preventing relationally aggressive victimization in prison which is oftentimes unnoticed due to the covert nature of the behavior. These data may help raise awareness of the prevalence of relational aggression among inmates and consequently change administrative perspectives on bullying among its inmates. That is, rather than punishing bullying, proactive intervention can be applied to prevent it.

PSYCHOPATHY AS A PREDICTOR OF RELATIONAL AGGRESSION IN MALE

INMATES

A THESIS

SUBMITTED TO THE FACULTY

OF

SCHOOL OF PROFESSIONAL PSYCHOLOGY

PACIFIC UNIVERSITY

HILLSBORO, OREGON

BY

ELOISE ADELINE HOLDSHIP

IN PARTIAL FULFILLMENT OF THE

REQUIREMENTS FOR THE DEGREE

OF

MASTER OF SCIENCE IN CLINICAL PSYCHOLOGY

JULY 20, 2012

APPROVED:

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Abstract

Research on psychopathy has primarily focused on the use of the pathological characteristics (e.g., antisocial behavior, impulsivity, lack of remorse) as predictors of overt aggression and violence; however, research on the subtle interpersonal traits of psychopathy is growing. To date, little research exists regarding psychopathy as a predictor of relational aggression. In the current study, the usefulness of the interpersonal scales on the Psychopathic Personality Inventory Revised (PPI-R) to predict the frequency of relational aggression was examined among male inmates. Interpersonal scales used as predictors were the Social Influence, Fearlessness, and Stress Immunity subscales of the Fearless Dominance content scale. Using a Poisson-regression model, results indicated that the subscales that comprise Fearless Dominance were all strong predictors of relational aggression. Further research on this topic is necessary to better understand the covert behaviors inherent in psychopathy as well as how institutions can better ensure safety within their walls and within the community.

Key Words: psychopathy, relational aggression, male inmates, predictor, PPI-R

Acknowledgements

There is absolutely no way I could take sole credit for having completed this project. I want to give my deepest appreciation, gratitude and respect to Genevieve Arnaut, Ph.D, Psy.D, for her understanding, insight, patience and inhuman editing abilities even in the 11th hour. To my "stage mom," colleague and friend, Kate Wyman-Chick who not only picked me up when I was ready to quit, but pushed me right back into the thick of things: I could not have done it without you. To my Maman, you have always been there for me and have always believed in me, je t'aime tellement, de tout mon cœur et pour toujours. To my Dad, even with the distance of oceans, land and languages between us, you continue to provide me strength and self-determination; I hope to make you even half as proud to have me as your daughter as I am to have you as my father. To Dru, who has patiently waited, sincerely listened and actively offered help and support through one of the most challenging experiences of my academic life: I love you, CPP. Lastly, I want to thank the Oregon Department of Corrections for allowing Lynette Hamilton and me to conduct our research and not only welcoming us, but supporting us through the weekend of data collection. I could not have successfully completed this project without the aforementioned positive forces in my life. I thank you.

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Introduction

In 2009, the U.S. prison population exceeded 1.6 million prisoners (BJS, 2010).

The imprisonment rate in 2009 was 497 inmates per 100,000 U.S. residents, and 93% of

the U.S. prison population was male (BJS, 2010). A large number of offenders have an

identifiable history of antisocial criminal behavior and the prevalence rate for Antisocial

Personality Disorder (ASPD) in prisons is estimated to be 50% to 80% (Ogloff, 2006).

Among inmates who meet criteria for ASPD, 15% are estimated to also meet the

threshold for psychopathy (Ogloff, 2006). Broadly, psychopathy was initially defined as

a "general term personality disorder [under] the subtype antisocial personality"

(Cleckley, 1941, p. 228). The construct is best characterized as a constellation of

behavioral traits such as manipulativeness, irresponsibility, self-centeredness,

shallowness, and a lack of empathy or remorse. Psychopathy reflects behavioral

difficulties that often pertain to chronic aggressive criminal behavior. Research has

suggested that psychopathy is associated with impulsivity, violation of the rights of

others, and physical aggression (Blonigen et al., 2010).

Although the Census of State and Federal Correctional Facilities maintained that

prison assaults leading to death decreased from 1995 to 2002, nonlethal inmate-on-inmate

assaults increased by 32% during the same period (BJS, 2003). The overrepresentation

of men in prison, in combination with the likelihood that a male inmate can exhibit a

range of antisocial and aggressive behaviors (to the point of fatal injury), indicates a need

to better understand predictors of a variety of forms of aggression in male prison

populations. The majority of research to date has focused on the use of psychopathy to

predict physical violence or overt aggression in community samples (e.g., Czar et al., 2011; Helfritz & Stanford, 2006; Skeem & Mulvey, 2001). In a meta-analysis of risk assessments, methodological issues confounded the ability to consistently predict violent or overtly aggressive behaviors using Factor 2 of the Psychopathy Checklist Revised (PCL-R; Hare, 1991) in forensic settings (Kennealy, Skeem, Walters, & Camp, 2010; Yan, Wong, & Coid, 2010). The majority of research on the use of psychopathy to predict physical violence or overt aggression in correctional populations has demonstrated inconclusive results.

In addition to physical violence, there is evidence that relational aggression is exhibited by both female and male prisoners (e.g., Ben-Horin, 2001; Isoma, 2010; Wheaton, 2009). An act of relational aggression is one of "harming others through purposeful manipulation and damage of their peer relationships" (Crick & Grotpeter, 1995, p. 711). This form of aggression is often observed in bullying behavior. Relational aggression can be observed among social groups in which there is purposeful withdrawal of friendship, outright exclusion of others, and spreading of rumors intended to harm another individual within the group (Crick & Grotpeter, 1995). Although there is no consensus within the literature on a universal definition of relational aggression, the term is often used interchangeably with social aggression, covert aggression, indirect aggression, and instrumental aggression (Archer & Coyne, 2005).

Relationally aggressive traits have been compared to antisocial traits such as manipulation and lack of remorse found in adult offenders with distinguishable psychopathic features (Burton, Hafetz, & Henninger, 2007). Interpersonal deficits found in psychopathy overlap with various forms of relational aggression: specifically,

callousness and manipulative interpersonal style (Walsh & Kosson, 2008). To date, no researchers have directly assessed psychopathy as a predictor of relational aggression. Thus, the focus of the current study was to determine whether there is an association between psychopathy and relational aggression in a male inmate population.

Literature Review

In this literature review, I explore the concept of relational aggression and its relationship with psychopathy and antisocial traits.   Research on relational aggression will be discussed as it is exhibited across the lifespan as well as in relationship to gender. Additionally, behavioral traits of relational aggression will be discussed within the context of specific personality disorder traits. Finally, approaches to assessing psychopathy in this study will be discussed.

Relational Aggression and Gender

Much of initial research on relational aggression was conducted with youths. Crick and Grotpeter (1995) conducted a study to develop a measure of relational aggression (i.e., harm through manipulation and damage of peer relationship) separate from overt aggression (i.e., physical harm and verbal threats). They assessed the degree of differences between overt aggression and relational aggression, assessed gender differences in relational aggression, and examined the relationship between relational aggression and psychosocial maladjustment. The study included 491 third- through sixth-grade boys and girls from four public schools. Social adjustment was measured by a peer-nomination instrument consisting of 19 items. Four subscales assessed relational aggression, overt aggression, prosocial behavior, and isolation. Children were given a class roster and asked to nominate up to three classmates for each item listed in the subscales.

Crick and Grotpeter (1995) hypothesized that relational aggression would be related to, but distinct from, overt aggression. Additionally, they hypothesized that girls would be more relationally aggressive than boys based on the suggestion that girls are

more focused on utilizing social interactions as a means of inflicting harm on peers (i.e., spreading rumors, slander) than are boys. Finally, Crick and Grotpeter predicted that relationally aggressive children would be more psychosocially and psychologically maladjusted relative to their nonaggressive peers. Results showed that relational aggression was a distinct characteristic that was discernible from overt aggression in addition to being significantly related to gender and psychosocial maladjustment. Supporting their hypothesis, girls appeared to be more relationally aggressive than boys. Additionally, relationally aggressive children were significantly more isolated, disliked by others, and socially maladjusted than were their peers who were not relationally aggressive.

In an early study of relational aggression and its effects on social psychological adjustment, Werner and Crick (1999) assessed these two factors in adolescents and young adults. The authors expected higher levels of rejection, antisocial personality traits, and depression combined with low peer acceptance and prosocial behavior to be related to relationally aggressive tendencies. These factors were measured by three separate indices of general adjustment: life satisfaction, stress, and perceived social support. A second objective of the study was to provide a more gender balanced assessment of the negative social psychological effects of relational aggression between genders, considering that most prior studies failed to show specific consequences for relationally aggressive women. Werner and Crick provided two assessments of traits known to be particularly salient with female populations: features of borderline personality disorder (BPD) and disordered eating patterns. Utilizing a sample of 225 male and female undergraduate students, Werner and Crick designed a peer nomination instrument to assess relational

aggression and social adjustment in a young adult population. They assessed borderline personality features with the Personality Assessment Inventory (PAI; Morey, 1991) which includes an assessment of stress, depression, perceptions of nonsupport, antisocial personality features, affective instability, self-harm, and identity disturbances.

Results indicated that not only was relational aggression significantly associated with multiple indexes of maladjustment, but the pattern of associations varied across gender (Werner & Crick, 1999). When the researchers assessed participants for ASPD, they noted that men engaged in antisocial and stimulus-seeking behavior more frequently than did women; however, when relational aggression was included, there was no difference between men and women in regard to antisocial behavior. Additionally, men and women who scored in the top third of the relational aggression peer estimation scale engaged in equal levels of antisocial and stimulus-seeking behavior. These results are similar to findings with children in which boys and girls were found to be more similar than different in terms of antisocial behavior when they scored high on relational aggression (Crick & Grotpeter, 1995). Werner and Crick found relational aggression to be associated with maladjustments specific to borderline features, such as anger management, "stormy" (p. 621) interpersonal relationships, and higher levels of impulsive, self-destructive behavior. The authors suggested that these social maladjustments may also serve to maintain and possibly exacerbate the use of relational aggression in the context of social relationships. Relationally aggressive young adult men appeared to be as likely as relationally aggressive young women to be at risk for adjustment difficulties.

In a similar study, Wheaton (2009) assessed the prevalence rates and demographic factors of relational aggression in female inmates using a self-report survey. Wheaton developed the Inmate Relational Aggression Inventory (IRAI; Wheaton, 2009) after receiving permission from Thomas Gumpel, author of the School Violence Inventory (SVI; Gumpel, 2008). The IRAI, in addition to a demographics questionnaire, was administered to 110 female inmates from both minimum and medium-security facilities at Oregon Department of Corrections (ODOC) Coffee Creek Correctional Facility (CCCF). Wheaton found that, of the 110 inmates surveyed, 103 (93.6%) endorsed that they had engaged in relational aggression either as an aggressor, victim, or both. The number of inmates who reported that they had engaged in relationally aggressive behavior (70%), and the number who reported that they had been victims of relational aggression (90%), indicated higher rates than had been found in previous research on bullying among female inmates. The findings in Wheaton's study suggest that relational aggression is highly prevalent in female prison populations.

In sum, the body of empirical literature reviewed suggests that, although young girls exhibit more relationally aggressive behavior than young boys, adult males engage in relational aggression at similar rates as do adult females. Additionally, rates of relational aggression are equal when considering sex differences; however, men are more likely to engage in overt physical aggression.

Psychopathy

It is important to differentiate psychopathy from the diagnosis of ASPD as defined in the *DSM-IV* (APA, 2000). In a thorough and early conceptualization of psychopathy, Hervey Cleckley defined 16 distinct traits (*The Mask of Sanity,* 1941).

Cleckley assessed a small group of civil psychiatric patients and observed a subtype of

ASPD that was particularly severe. The behaviors he observed included "superficial

charm and good intelligence, absence of 'nervousness', lack of remorse, inadequately

motivated by antisocial behavior, and poverty in major affective experience" (p. 338).

Cleckley argued that psychopathy, although inherently pathological, also contains

advantageous personality traits (e.g., good intelligence and social charm, lack of

anxiousness, low rate of suicide) that reflect positive social adjustment.

Psychopathy was first defined clinically in the *Diagnostic and Statistical Manual*

of Mental Disorders (*DSM-I*; American Psychiatric Association, 1952*)* as a sociopathic

personality disturbance with antisocial reaction under general personality disorders.

According to the *DSM-I*, individuals who are chronically antisocial, hedonistic, and

callous and who lack the ability to take responsibility, empathize, and maintain any close

ties to persons or society were classified as psychopathic (APA, 1952). The disorder was

later precluded from *DSM* revisions. In contrast, a diagnosis of ASPD is a reflection of

behavioral traits that do not conform to social norms (i.e., deceitfulness, impulsivity,

aggressiveness, recklessness, irresponsibility and/or lack of remorse), without

necessitating criminal behavior (Ogloff, 2006). Robert Hare, a pioneer in the literature

on psychopathy and creator of the PCL-R (Hare, 1991), argued that, although most

psychopaths meet the criteria for ASPD, those diagnosed with ASPD are not necessarily

considered psychopathic (Hare, 1996). ASPD is often associated with criminal activity

due to the antisocial component of the disorder; however, psychopathy contains a

constellation of personality traits that will, more often than not, lead to criminal behavior

(Hare, 1996). Unfortunately, the diagnosis of ASPD has often been used interchangeably

with psychopathy, and it has become a diagnostic category that unnecessarily pairs behavioral difficulties with criminality (Ogloff, 2006).

Psychopathy has traditionally been defined by two identified factors of interpersonal affect and antisocial behavior. Hare, Hart, and Harpur (1991) defined psychopathy using two distinct factors to assess severely aggressive and antisocial individuals. Hare subsequently developed the PCL-R utilizing Factor 1 to assess for interpersonal and affective maladaptive behaviors (i.e., glibness, grandiosity, lack of remorse) and Factor 2 to assess for social deviance (i.e., proneness to boredom, impulsivity, juvenile delinquency). The PCL-R was revised once more to expand the two-factor model into four distinct facets of psychopathy: Interpersonal, Affective, Lifestyle, and Antisocial (Hare, 2003).

A discussion of every conceptualization of psychopathy is beyond the scope of this study. Cleckley's (1941) core conceptualization of psychopathy will be utilized for the purposes of this study; however some additional views will be mentioned briefly. Other models of psychopathy (often derived from research conducted with the PCL-R) have been developed, including but not limited to a three-factor model (Cooke & Michie, 2001) and a triarchic model (Patrick, Fowles, & Krueger, 2009). According to Cooke and Michie (2001), psychopathy can be conceptualized as three factors that divide core personality traits into two dimensions while ultimately excluding antisocial behavior. In this model, core personality traits of psychopathy are Arrogant Deceitful Style; Deficient Affective Experience; and Irresponsible, Impulsive Lifestyle. There are nine subscales within the three core factors: Superficial, Grandiose, Deceitful, Lacks Remorse, Doesn't Accept Responsibility, Lacks Empathy, Impulsive, Irresponsible, and Lacks Goals. In

this conceptualization, antisocial behavior is not a characteristic of psychopathic personality; rather, it is a consequence of these three core traits.

The Triarchic Model developed by Patrick et al. (2009) utilizes Cleckley's (1941) conceptualization and combines Cooke and Michie's (2001) model to describe three components of psychopathy (i.e., Disinhibition, Boldness, Meanness). Unlike previous conceptualizations, the Triarchic Model is based on theory rather than factor analysis. Patrick et al. suggested that psychopathy is a result of a failure to learn from social modeling paired with a genetic predisposition for antisocial behavior and fearless temperament.

Similar to Patrick et al.'s (2009) concept of environmental influences on the development of psychopathy, other researchers have argued the existence of primary and secondary psychopathy (Cleckley, 1976; Lykken, 1995; Newman, MacCoon, Vaughn, & Sadeh, 2005). Primary psychopathy is primarily characterized by genetically predisposed low levels of neurotic anxiety, and according to Cleckley (1976) such individuals are "very sharply characterized by the lack of anxiety (remorse, uneasy anticipation, apprehensive scrupulousness, the sense of being under stress or strain) and, less than the average person, show what is widely regarded as basic in the neurotic" (p. 257). Conversely, secondary psychopathy is characterized by high levels of neurotic anxiety, impulsiveness, and thrill seeking, with average levels of fearfulness and passive avoidance (Newman et al., 2005).

The most common measure for assessing psychopathy is the PCL-R. However, Skeem and Cooke (2010) have argued that although the PCL-R is only a measure of psychopathy, it has subtly been transformed into the very construct of psychopathy.

They suggested that, until researchers can identify a correlate (e.g., overt violence, impulsive behavior) within the PCL-R that generalizes to other psychopathy measures, researchers will not know if their findings represent an outcome unique to the PCL-R or if they truly tap into psychopathy as a theoretical construct. One alternative to the PCL-R as a measure of psychopathy is the self-report PPI-R measure, which operationalizes psychopathy using three distinct Content scales (Lilienfeld & Widows, 2005). A detailed description of the measurement is provided in the Method section of this study.

Relational Aggression and Cluster B Personality Disorders

Although many researchers have studied psychopathy as a predictor of overt aggression (e.g., Czar et al., 2011; Helfritz & Stanford, 2006; Skeem & Mulvey, 2001), the implications of psychopathic personality traits for relational aggression are not well understood. In an attempt to discern antisocial and narcissistic traits of psychopathic variants by comparing psychopathy to Borderline Personality Disorder (BPD), authors have argued that there is a significant amount of overlap between psychopathic and BPD features (e.g., Kernberg, 1975; Meloy, 1988; Skeem, Poythress, Edens, Lilienfeld, & Cale, 2003).

Schmeelk, Sylvers, and Lilienfeld (2008) explored the difference between relational aggression and overt aggression related to psychopathy. They assessed the overlap of the three personality disorder clusters with relational aggression, examined gender differences in relational aggression, and aimed to delineate personality disorder correlates of relational aggression in adults. According to the *Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition, Text Revision* (*DSM-IV-TR*; American Psychiatric Association, 2000), three separate personality disorder clusters can be

defined: odd or eccentric behavioral traits (Cluster A); dramatic, emotional, or erratic behavioral traits (Cluster B); and anxious or fearful behavioral traits (Cluster C). Schmeelk et al. hypothesized that relational aggression would correlate more with Cluster B (emotional and dramatic) features than with either Cluster A (eccentricity) or Cluster C (anxiety and fear) features. Of the four distinct personality disorders contained within Cluster B, they focused on Borderline Personality Disorder (BPD) and ASPD. BPD is characterized by dichotomous thinking, unstable relationships, and disruption in self-image and identity that often can lead to self-harm and impulsivity. ASPD is characterized by pervasive disregard for the welfare of others, a lack of empathy, and history of criminal activity. Additionally, male offenders' scores on self-report measures of psychopathy, such as the PPI, have been associated with BPD features, such as primitive defense mechanisms, identity diffusion, and poor reality testing (Edens, Poythress, & Watkins, 2001).

Schmeelk et al. (2008) hypothesized that relational aggression would correlate with psychopathic personality traits, though more so with Factor 2 (i.e., antisocial behavior) than with Factor 1 (i.e., lack of empathy, self-centeredness). They also predicted that comorbid Cluster B traits and Factor 2 traits with higher relationally aggressive behavior would more likely occur with females. The study included 220 undergraduate student participants (152 females, 68 males). Relational aggression was measured using the Relational Aggression Scale (RAS; Markon, 2003, as cited in Schmeelk et al., 2008) and the Self-Report of Aggression and Social Behavior (SRASB; Morales, 1999). Psychopathic traits were assessed using the Psychopathic Personality Inventory (PPI; Lilienfeld & Andrews, 1996). Overt aggression was assessed using the

Aggression Questionnaire (AQ; Buss & Perry, 1992), and personality disorder traits were measured using the Short Coolidge Axis II Inventory (SCATI; Coolidge & Merwin, 1992).

Similar to Crick and Grotpeter's (1995) results, relational aggression was distinguishable from overt aggression. Supporting their hypothesis, relational aggression was also correlated more highly with Cluster B personality disorder traits than with Cluster A or Cluster C traits. Additionally, relational aggression was not only correlated significantly with psychopathic traits, but it was also correlated only with Factor 2. This finding is notable considering that Factor 2 does not include explicit aggression. Concerning gender differences, the researchers found that, contrary to other studies (e.g., Crick & Grotpeter, 1995), male participants scored significantly higher on relational aggression scores than did female participants. Schmeelk et al. provided no possible reasons for the gender difference and noted the need for further investigation.

To summarize, the accumulation of empirical data on cluster B personality traits and relational aggression indicates that there may be positive correlations between relational aggression and features of both BPD and ASPD. Although BPD is more often diagnosed in females and ASPD in males (American Psychiatric Association, 2000), there are specific cluster B traits that correlate with higher rates of relational aggression shared by both sexes.

Psychopathy and Relational Aggression

In a review of psychopathy variants, Skeem, Poythress, Edens, Lilienfeld, and Cale (2003) stated that "psychopathic traits have been associated with higher rates of community violence, violent and nonviolent criminal recidivism, institutional

management difficulties, and poor treatment outcomes" (p. 514). For the purpose of the current study, violence or overt aggression is defined as any behavior that involves overt physical harm or intimidating force that is intended to harm, damage, violate, or kill. Research utilizing the PCL-R in community, prison, and forensic hospital settings has consistently shown that the measurement is a reliable and valid predictor of violence and recidivism (Nicholls, Ogloff, Brink, & Spidel, 2005). However, research findings on specific psychopathy variables as valid predictors of violent behavior have been inconsistent, due in part to the method of assessing the relationships between predictors and criteria (Blonigen et al., 2010). For instance, in a meta-analysis by Yan et al. (2010), various assessment tools used to predict violence in forensic settings (e.g., PCL-R) have been found to be methodologically unsound, despite predicting violence at above chance levels. Overall, when analyzing the predictive efficacy of instruments for violence and future recidivism, study samples are typically not large. Additionally, of the nine psychopathy assessments in the meta-analysis, none were found to be the better predictor. The use of risk assessments to predict violence has mostly been studied broadly; current researchers are now assessing specific variable traits of psychopathy, and the factors that assess them, as possible predictors of violence in incarcerated populations.

There has been an increasing focus on comparing interpersonal scales with social deviance scales of the PCL-R and PPI-R to assess their predictive validity for future violence (Blonigen et al., 2010; Kennealy et al., 2010). Results from Kennealy et al.'s (2010) study indicated that there was strong predictive validity in social deviance as defined by Factor 2 of the PCL-R; however, interpersonal affect did not interact with social deviance to predict violence. Blonigen et al. (2010) assessed the predictive

validity of externalized psychopathology (ASPD, substance abuse disorder) and internalized psychopathology (depression, anxiety disorders). Within the broader study, they studied the interaction of the social deviance factor of psychopathy with externalized psychopathology. Scores on both the PCL-R Factor 2 and the PPI-II were positively correlated with externalized antisocial behavior, supporting the relationship between social deviance and future offending.

In a study conducted by Isoma (2010), the prevalence and relationship between relational aggression and psychopathy was assessed in both male and female populations. It was hypothesized that female inmates would be more likely to engage in relationally aggressive behaviors than would male inmates based on prior literature supporting higher levels of relational aggression in females. Additionally, it was hypothesized that relational aggression would be strongly correlated with psychopathy and that therefore there would be a positive correlation between psychopathy and relational aggression in female inmates. The sample in this study comprised of 93 male inmates and 152 female inmates. All 245 inmates were administered the PCL-R and the Prison Violence Inventory (PVI; Warren, Hurt, Loper, Bale, Friend, & Chauhan, 2002). Although the PVI is comprised of a violence score and a victimization score, only six items specific to relational aggression (PVI-RA) were utilized for the purposes of the study.

The findings indicated that male inmates were more likely to endorse relationally aggressive behavior than female counterparts. Additionally, there was no correlation between relational aggression and psychopathy when controlling for sex; however, there was a strong relationship between relational aggression and Factor 1 of the PCL-R for female inmates who endorsed high scores on both the PVI and the PCL-R. Conversely,

Factor 2 of the PCL-R (behavioral and antisocial features) has typically been the stronger

correlate of criminal behavior in prior literature (Edens, Poythress, Lilienfeld, & Patrick,

2008). Although the findings from Isoma's study offer opposing findings to current

literature on correlating Factor 2 of the PCL-R with aggression, it adds to the general

research on using specific factors of psychopathy assessments to predict future aggressive

behavior.

To summarize, a growing body of evidence supports utilizing specific

psychopathological traits related to psychopathy (e.g., social deviance, antisocial

behavior) and relating them to the relevant factors of either PPI-R or PCL-R to predict

future overt aggression. There is currently a paucity of research on psychopathy as a

predictor of relational aggression; however, some studies have been conducted to assess

the possible correlation between relational aggression and interpersonal traits of

psychopathy. Utilizing Crick and Grotpeter's (1995) definition of relational aggression,

Burton et al. (2007) conducted a study with university students. A sample of 93 female

and 41 male university students completed the Relational Aggression Questionnaire

(RAQ; Werner & Crick, 1999), the Physical Aggression Questionnaire (PAQ; Buss &

Perry, 1992), in addition to the NEO Five-Factors Inventory (NEO FFI; Costa & McCrae,

1992) and the Bar-On Emotional Quotient Inventory (Bar-On EQI; Bar-On, 1997). Prior

research has indicated conflicting findings about gender differences in relational

aggression (Archer & Coyne, 2005; Crick & Grotpeter, 1995; Czar, Dahlen, Bullock, and

Nicholson, 2011; Schmeelk et al., 2008; Werner & Crick, 1999); therefore, the purpose of

the study was to further evaluate gender differences in patterns of personality and

emotional behavior related to relational and physical aggression.

Burton et al. (2007) found considerable differences in personality traits associated with higher physical aggression. Higher rates of physical aggression (as indicated by the PAQ) in men were correlated with lower Agreeableness and lower Extraversion on the NEO-FFI. Women with higher physical aggression on the PAQ reported higher Conscientiousness (NEO-FFI), some depression, lower stress management, and greater Adaptability (Bar-On EQI) relative to women who scored lower on the PAQ. Conversely, there were commonalities in relational aggression across gender. Contrary to prior findings on gender and relational aggression (Crick & Grotpeter, 1995; Schmeelk et al., 2008), for both men and women higher relational aggression was related to both lower Agreeableness and low total scores on the Bar-On, suggesting that weaker emotional understanding and poorer overall functioning was related to higher relational aggression. The only notable personality trait difference between genders was the finding of higher Neuroticism (NEO-FFI) in relationally aggressive men than in relationally aggressive women. Comparably, women who had relational aggression scores that were similar to men's relational aggression scores had lower Bar-On EQI Interpersonal and Conscientiousness scores than did women whose relational aggression scores were lower than men's scores. Each of the scores obtained on the Bar-On EQI reflects subscales of Empathy, Social Responsibility, and specific Interpersonal skills that tap into the constellation of psychopathy.

Burton et al.'s (2007) findings provided further information that, although relational aggression is more likely to manifest in young girls than in boys (Crick & Grotpeter, 1995), this form of aggression is exhibited equally in both genders in adult populations. Additionally, personality traits related to the expression of relational

aggression (e.g., disregard for the rights of others, instability in interpersonal relationships, etc.) are also found in the pathological constellation of Cluster B personality disorder traits.

Expanding the study of psychopathy and relational aggression, Czar et al. (2011) examined the potential role of psychopathic personality traits in relational aggression. The researchers aimed to provide evidence that two forms of relational aggression (i.e., romantic and general/peer), separate from overt aggression, would correlate with psychopathy assessment scores. The researchers controlled for physical aggressiveness in order to be sure the relationship between psychopathic traits and relational aggression would not be an artifact of shared variance. A total of 291 college students (171 women, 120 men) were selected for the study. To assess relationally aggressive behaviors, the Self-Report Measure of Aggression and Victimization (SRMAV; Morales & Crick, 1998) was used. Similar to Schmeelk et al.'s (2008) study, the AQ was administered to assess physical aggressiveness. Finally, the Levenson Self-Report Scale (LSRP; Levenson, Kiehl, & Fitzpatrick, 1995) was used to assess psychopathic personality traits.

Czar et al.'s (2011) results supported their hypothesis that both males and females who scored higher on the LSRP would be more likely than peers with lower psychopathic traits to report that they had engaged in relational aggression, regardless of physical aggressiveness. The researchers found no evidence that either gender or overt aggression influenced the prediction of relational aggression in individuals who scored high on the LSRP. Unlike the studies by Schmeelk et al. (2008) or Crick and Grotpeter (1995), results indicated no evidence to suggest that gender influenced the relationship between psychopathic traits and relational aggression. Similar to the results of Crick and

Grotpeter, the results found by Czar et al. support the possibility that relational

aggression is related to social maladjustment. Czar et al.'s study provides further

evidence of an association between relational aggression and both antisocial and

borderline personality traits among college students.

In sum, current research suggests that the co-occurrence of psychopathy and

relational aggression may be specific to personality disorders associated with Cluster B

traits. Although it is too soon to conclude that relational aggression is attributable only to

the two personality traits found in Cluster B features, the findings provide additional

evidence of a possible positive correlation between personality disorder traits (similar to

those found in psychopathy) and relational aggression.

The PPI and Prediction of Relational Aggression

Skeem et al. (2003) provided a detailed literature review on variants of

psychopathy as defined by varying symptomatology, etiology, and affective capacities.

They suggested that defining variants of psychopathy in terms of a variety of risk factors

that explain antisocial and violent behavior creates opportunities for risk assessment and

treatment. As a result, current research now looks at specific factors of psychopathy

assessments to help predict certain behaviors. Of the current measures, the PCL-R and

the PPI-R are often used to assess psychopathy.

Although the majority of psychopathy researchers to date have utilized the PCL-R

to assess psychopathy, this instrument has practical and theoretical limitations (Edens et

al., 2008). The PCL-R is described as labor intensive, can only be used by a well-trained

examiner, and relies heavily on access to extensive historical data and criminal records

for a comprehensive assessment. In addition, when exploring the relationship between

psychopathic variants and violence, the PCL-R may conflate these two factors because the clinical ratings of psychopathy rely on a history of patterned criminal activity, including information concerning violent acts (Patrick & Zempolich, 1998). Researchers have argued that the use of the PCL-R to assess psychopathy and violence in the nonviolent variant of psychopathy causes criterion contamination because the PCL-R includes items related to criminal behavior (e.g., Hart, 1998; Patrick & Zempolich, 1998; Skeem et al., 2003; Skeem & Mulvey, 2001).

A self-report psychopathy measure that excludes criminal behavior separates the two factors of psychopathy without conflating the personality traits with inherent violent behavior (Skeem et al., 2003). The PPI (Lilienfeld & Andrews, 1996) is a self-report inventory that focuses on personality traits, dispositions, and attitudes related to psychopathy that was developed using noncriminal college student populations. The PPI represents a more economical approach than the PCL-R, and it uniquely assesses personality traits associated with psychopathy. The primary disadvantage of the PPI is the self-report nature of the test.

Lilienfeld and Widows revised the PPI in 2005 in order to lower the reading level, shorten the administration time, re-assess the psychometric properties of certain items and update the scales to be more culturally appropriate (Ray, Weir, Poythress, & Rickelm, 2011). The PPI-R has three content scales that are comprised of Self-Centered Impulsivity, Fearless Dominance, and Coldheartedness. Fearless Dominance is considered the PPI-I factor (Social Influence, Fearlessness, and Stress Immunity subscales). Due to the revision, the most revamped content scale was the Stress Immunity scale. Impulsive Antisociality is considered the PPI-II factor (Nonplanfulness,

Impulsive Nonconformity, Machiavellian Egocentricity, and Blame Externalization subscales). Literature suggests that the PPI-I represents personality traits that appear socially adaptive (i.e., Social Influence, Fearlessness and Stress Immunity), similar to Cleckley's aforementioned conceptualization of the socially adjusted psychopath (Edens et al., 2008; Edens & McDermott, 2010).

Kruh et al. (2005) examined the construct validity of the PPI with insanity acquittees at a state forensic hospital. The authors found that, unlike other self-report psychopathy measures, the PPI measured psychopathy in a manner similar to the Psychopathy Checklist: Screening Version (PCL:SV; Hart, Cox, & Hare, 1995). The PPI total score was strongly correlated with PCL:SV Factor 2 ($r = .65$) and PCL:SV total scores ($r = .62$) and moderately correlated with PCL:SV Factor 1 ($r =. 45$). The PPI may uniquely measure psychopathy as measured by antisocial behavior and high levels of trait psychopathy without including levels of past overt violence. Due to the shared variance with the PCL:SV, however, the authors noted that it was still unclear whether the PPI could distinguish Factors 1 and 2 of the PCL. Furthermore, it was unknown whether the PPI was a better measure of either Factor 1 or 2.

Edens et al. (2008) conducted a prospective comparison of the PCL-R and the PPI for predicting institutional misconduct. The predictive ability of aggressive and nonaggressive behavior was examined using the PCL-R's dichotomous factors. In prior studies, the relationship of the PPI to institutional adjustment had been the main focus; however, retrospective analysis provided data supporting a relationship between PPI-II and history of physical violence, and PPI-I with nonaggressive infractions. Edens et al.

hypothesized that both PPI-I and PPI-II would predict nonaggressive misconduct, but that PPI-II would have a stronger correlation with aggressive or violent behavior.

Edens et al. (2008) recruited 50 male participants, ages 17 to 21 years, from both juvenile and adult prison systems. Three types of aggressions were assessed: Physical Aggression, Verbal Aggression/Acts of Defiance, and Nonaggressive. The combination of both Physical and Verbal Aggression was the resulting category that encompassed any infraction. Results suggested that, generally, the total PPI score was significantly associated with future institutional behavior problems. Specifically, inmates who scored high on the PPI-I factor were more prone to discrete forms of misconduct (i.e., more covert activities, lying to staff, theft, and possession of contraband) than were inmates who scored high on PPI-II. Conversely, high PPI-II scores were indicative of overt forms of confrontation (physical and/or verbal) compared to high scores on the PPI-I. Although the terminology differs, there is a connection between the findings of the PPI-II factors of nonaggressive misconduct and similar behaviors found in relational aggression (as defined by Crick & Grotpeter, 1995). Edens et al. further related the dichotomous factors and aggression scales of the PPI to primary and secondary psychopathy. PPI-I subscales were attributed by the authors to primary psychopathy due to the fearless temperament and low anxiety. Conversely, PPI-II was better attributed to secondary psychopathy because the subscales indicated a higher likelihood of interpersonal conflict (i.e., blaming others, ruthlessness and impulsivity) than primary psychopathy. This correlation therefore attributed the characteristic of higher levels of emotional maladjustment and distress to secondary psychopathy.

Purpose of the Current Study

Current research indicates that individuals who engage in relationally aggressive behavior are likely to suffer psychosocial difficulty, such as antisocial behavior, peer rejection, social isolation, loneliness, stormy interpersonal relationships, stimulus-seeking behavior, and affective instability across their lifespan (Crick & Grotpeter, 1995; Werner & Crick, 1999). Research has primarily been conducted with child and young adult populations, with inconsistent findings regarding gender differences and the behavioral expression of relational aggression (e.g., Archer & Coyne, 2005; Crick & Grotpeter, 1995; Czar et al., 2011; Schmeelk et al., 2008; Werner & Crick, 1999). However, there is evidence from the literature that adult men and women are equally likely to engage in relationally aggressive behavior (Burton et al., 2007, Werner & Crick 1999). Additionally, some research indicates that relational aggression is positively correlated with Cluster B personality traits (e.g., Kernberg, 1975; Meloy, 1988; Skeem et al., 2003; Schmeelk et al., 2008). A more limited body of research suggests that high levels of relationally aggressive behavior overlap with high levels of psychopathic traits (e.g., Burton et al., 2007; Czar et al., 2011; Isoma, 2010).

Most research on psychopathy has focused on predicting violence within community samples (e.g., Czar et al., 2011; Helfritz & Stanford, 2006; Skeem & Mulvey, 2001). Within forensic populations, research on psychopathy as a predictor of violence has produced inconclusive results (e.g., Kennealy et al., 2010; Yan et al., 2010). To date, there are no published studies of the utility of psychopathy as a predictor of relational aggression within community samples, and only one researcher to date has examined the relationship between psychopathy and relational aggression in both male and female

incarcerated populations (Isoma, 2010). Therefore, the purpose of the current study is to investigate the utility of interpersonal factors of psychopathy (i.e., antisocial behavior, manipulativeness, lack of empathy, etc.) for predicting relationally aggressive behavior.

Based upon the empirical literature to date, I hypothesized that higher scores on the PPI-I Fearless Dominance scale (i.e., Social Influence, Fearlessness and Stress Immunity) would predict more endorsements of relationally aggressive behavior.

Method

Participants

Data were collected from 73 minimum-security and 68 medium-security male inmates at the ODOC Snake River Correctional Institution (SRCI) located in the Pacific Northwest. Although there were 141 participants, all of whom completed the demographics questionnaire, two participants did not complete the IRAI and five participants did not complete the PPI-R. Inmates were only included in the final analysis if all measures were complete, resulting in a final sample of 136 participants.

To participate in the study, inmates had to be male, 18 years old or older, and able to speak and write in English at the fifth-grade level or higher. Additionally, each participant must have gone through a prison intake process, and completed the PAI within the last five years. Participants were excluded if they were unable to understand or read the testing procedures or if they had been processed into the corrections system more than five years prior to the study. Participants had to correctly answer multiple-choice questions on the Informed Consent Form (see Appendix A) in order for their data to be included.

Looking at demographics and other characteristics of the survey sample and the overall population of male inmates at SRCI at the time of the study, inmate race and ethnicity were comparable; however, there was a lower proportion of Hispanic/Latino participants in the study sample than in general population (see Table 1). The sample and the general population at SRCI were similar in terms of the proportion of other ethnic groups (i.e., Black/African American, and American Indian/Alaskan Native; see Table 1).

Ages of inmates in the study sample generally appeared comparable to ages of general

population inmates. However, the minimum-security sample did not contain any inmate

under the age of 31, whereas the medium-security sample contained inmates between the

ages of 25 to 30 years (26%) and 18 to 24 years (12.3%). The sample differed from the

general population in that Hispanic/Latino and 18- to 24-year-olds were underrepresented

and White/Caucasian and 46- to 60-year-olds were overrepresented. Additionally, the

survey sample and the general population differed in terms of violent versus nonviolent

offenses. The proportion of inmates with nonviolent offenses was overrepresented in the

sample (30.5% in the sample versus 15.4% in the general population). It should be noted

that type of crime was coded by categorizing into two types: Any offense against persons

was considered to be a violent offense, and any other offense (i.e., property, statute, drug

offense, other) was listed as nonviolent.

As listed in Table 2, incarceration-related variables of the sample of inmates were

divided by security level (i.e., minimum and medium). Average sentence length of

medium-security inmates ($M = 107.15$ months; $SD = 95.71$) was double that of

minimum-security inmates ($M = 54.89$ months; $SD = 21.01$). Similarly, the average

number of previous incarcerations for medium-security inmates ($M = 2.71$; $SD = 2.60$)

was double that of minimum-security inmates ($M = 1.54$; $SD = 0.50$). Age at first

incarceration, number of Minor Disciplinary Reports (DRs), and number of Major DRs

were similar between security levels. Minor DRs are defined as Level 3 infractions which

are typically characterized as less severe property and contraband violations that result in

loss of privileges not to exceed 45 days. Major DRs are defined as Level 2 or 1

infractions, which are typically characterized as more severe rule infraction that often

resulting in solitary confinement not to exceed 15 days and possible security increase.

Minor and Major DRs in minimum and medium-security occurred equally .002 and .03

per month, respectively. However, the average number of DRs with another inmate was

slightly elevated among medium-security inmates ($M = 0.47$) compared with minimum-

security inmates ($M = 0.14$). The monthly average rate of Inmate DRs was .004 in

minimum-security and .01 in medium-security. Average time spent incarcerated on the

current sentence differed by six to seven months: approximately 30 months ($SD = 19.19$)

for minimum-security and 23 months ($SD = 16.89$) for medium-security inmates (see

Table 2).

Table 1
Demographics of the Sample of Inmates (N = 141) and the Total Population (2,870 Inmates)

	Minimum (n = 73)	Medium (n = 68)	Total (N = 141)	Gen Pop (N = 2,870)
Variable				
Ethnicity				
White/Caucasian	84.9%	82.4%	83.7%	65.6%
Black/African American	9.6%	7.4%	8.5%	9.2%
Hispanic/Latino	4.1%	7.4%	5.7%	21.2%
American Indian/	1.4%	2.9%	2.1%	2.3%
Alaskan Native				
Age				
<17	0%	0%	0%	0%
18 to 24	0%	12.3%	6.4%	11.6%
25 to 30	0%	26.0%	18.4%	18.7%
31 to 45	22.1%	42.5%	32.6%	39.1%
46 to 60	69.1%	16.4%	41.8%	23.7%
+61	8.8%	2.7%	5.7%	6.8%
Type of Crime				
Nonviolent	32.9%	27.9%	30.5%	15.4%
Violent	67.1%	72.1%	69.5%	85.0%

Table 2

Institutional Descriptors of Minimum and Medium-security Inmates (N = 136)

Variable	Minimum (n = 73)		Medium (n = 68)		Total (N = 141)	
	M	*SD*	*M*	*SD*	*M*	*SD*
Sentence (months)	54.89	21.01	107.15	95.71	79.71	72.33
Current Time Served	29.90	19.19	23.38	16.89	26.76	18.35
Previous Incarcerations	1.54	0.50	2.71	2.60	1.69	2.32
Age at First Incarceration	29.51	10.31	31.29	12.16	30.37	11.24
Minor DR	0.10	0.38	0.12	0.41	0.11	0.39
Monthly Avg.	0.002	0.01	0.002	0.01	0.002	0.01
Major DR	0.62	1.13	0.87	1.74	0.74	1.45
Monthly Avg.	0.03	0.08	0.03	0.07	0.03	0.07
Inmate DR	0.14	0.46	0.47	1.42	0.31	1.04
Monthly Avg.	0.004	0.01	0.01	0.04	0.01	0.03

Note. DR = disciplinary report.

Measures

Demographic Information Questionnaire. The Demographic Information

Questionnaire (see Appendix B) was developed by Wheaton (2009) to obtain information

from female inmates in the ODOC. The questionnaire was altered for this study to

change female pronouns to male. Items related to age, marital status, education, sexual orientation, mental health, and aspects of current incarceration (offense type, previous incarcerations, mental health, and institutional infractions) were retained. The name of the correctional facility was also altered for the purpose of this study.

   The Inmate Relational Aggression Inventory (IRAI). The IRAI (see Appendix C) was developed by Wheaton (2009) as a means of assessing relational aggression among female ODOC inmates. This measurement was an adaptation of the SVI (Gumpel, 2008). The inventory includes 43 items that measure covert behaviors of both aggressors and victims. There are 20 Relational Aggression Victim items and 10 Relational Aggression Aggressor items. These items are scored on a nominal scale. Frequency of relationally aggressive behavior is counted as *Never* (0), *Once or twice* (1), and *Three or more times* (2). The range that can be scored under the Relational Aggression Victim category is 0 to 40. The range that can be scored under the Relational Aggression Aggressor category is 0 to 20. Respondents are then categorized into one of four ordinal categories: Pure Aggressor, Aggressor/Victim, Pure Victim, and Not Involved. The inventory also includes items related to the response and outcome of the alleged incidents of relational aggression. Items assessing aggressor characteristics include questions such as *While you have been at this facility, how often did you suggest boycotting, shunning, or ostracizing another inmate?* And *While you have been at this facility, how often did you steal personal equipment or property from another inmate?* Items assessing victim characteristics include questions such as *While you have been at this facility, how many times did an inmate blackmail you?* and *While you have been at this facility, how many times did a group of inmates threaten you?* It appeared that some

participants in Wheaton's (2009) study misunderstood 30 of the items, therefore these items were altered for the purposes of this study (e.g., the item *Since you have been at Coffee Creek this time, how many times did another inmate lie about you?* was changed to *While you have been at this facility this time, how many times did another inmate lie about you?*). There are no psychometric data available for this inventory.

Psychopathy Personality Inventory Revised (PPI-R). The PPI-R is the revised version of the Psychopathic Personality Inventory (PPI) that was developed by Lilienfeld and Widows (2005) to assess and delineate global and component traits of psychopathy within forensic and nonclinical (i.e., community, student) populations. The inventory consists of 154 self-report items that can detect response styles relevant to psychopathy (i.e., impression management). There are a total of eight Content Scales (i.e., Machiavellian Egocentricity, Rebellious Nonconformity, Blame Externalization, Carefree Nonplanfulness, Social Influence, Fearlessness, Stress Immunity, and Coldeheartedness). Added together, the Content scales scores are known as the PPI-R Total raw score. The PPI-R does not provide cutoff scores similar to the PCL-R (Lilienfeld & Widows, 2005); however, level of endorsement for each subscale and total PPI-R score provides an indication of whether an individual exhibits levels of psychopathy above the clinical range (*t*-score between 50 and 65).

The PPI-R has three factors labeled Self-Centered Impulsivity, Fearless Dominance and Coldheartedness. Eight subscales combine to comprise the three Content Scales. Self-Centered Impulsivity is made up of Machiavellian Egocentricity, Rebellious Nonconformity, Blame Externalization and Carefree Nonplanfulness. This Content Scale is also known as the PPI-II which characterizes the social deviance facet of psychopathy

(Benning, Patrick, Hicks, Blonigen, & Krueger, 2003). Fearless Dominance contains Social Influence, Fearlessness and Stress Immunity. This Content Scale is also known as the PPI-I which characterizes the emotional-interpersonal facet of psychopathy (Benning et al., 2003). Coldheartedness is an isolated content scale and subscale. The validity scales are made up of Virtuous Responding, Deviant Responding, and two Inconsistent Responding scales. Participants are asked to respond to items using a 4-point Likert scale (with anchors of *false*, *mostly false*, *mostly true*, and *true*). The PPI-R protocol is considered invalid if there are more than 30 inconsistent items. In various undergraduate samples, the PPI-R has demonstrated adequate test-retest reliability (.93) and internal consistency (.92 community sample and .84 offender sample), with positive correlations with self-report, structured interview, and peer-rating indices of psychopathy (Lilienfeld & Andrews, 1996).

Procedure

After obtaining approval from both Pacific University's Institutional Review Board (IRB) and ODOC's IRB, participants were randomly selected from a list of male inmates at SRCI provided by ODOC staff. Data were collected over the span of two consecutive days in March 2012. Research was conducted within the Minimum-security facility on the first day and at the medium-security facility on the second day. Minimum-security inmates were asked to report to the cafeteria in groups of 25 during their specified walk hour. Medium-security inmates were escorted by correctional staff in groups of 25 to the inmate visitation room in between the full hour of lock-down. Both the cafeteria and the visitation room were used solely for the purposes of the study during the periods of data collection.

The study began after the number of inmates expected was accounted for and the doors to the respective meeting rooms were shut. One ODOC staff member and one corrections officer were present along with both researchers during each session. All inmates were invited to participate in the voluntary study. The researchers verbally reviewed each section of the surveys and informed the inmates that, if they chose to participate, they could withdraw at any point during the study. The inmates were asked not to provide any identifying information about self or perpetrators on the surveys.

Inmates were informed that the researchers would be present during the duration of the proceeding and available to answer any questions as well as collect the surveys and Informed Consent forms. Informed Consent was verbally reviewed with the inmates, and those who chose to participate completed and signed the form. Inmates who chose not to participate were required to stay in the meeting rooms during the session. During this time, the nonparticipating inmates read magazines, played cards, or conversed quietly. After completing the Informed Consent form, participants were asked to complete the Demographic Information Questionnaire, the IRAI, and the PPI-R. In general, it took 30 to 50 min for inmates to complete the measures. After participants completed the questionnaires, they returned them to the researchers and waited for correctional staff to allow them to return to their respective housing units. Medium-security inmates were escorted back to their units from the visitation area and minimum-security inmates were free to leave the cafeteria.

Results

Relational Aggression

Adapting the categorization scheme from the School Violence Inventory (SVI; Gumpel, 2008) and replicating Wheaton's (2009) study, inmates were categorized into one of four mutually exclusive groups: Pure Aggressor, Aggressor/Victim, Pure Victim, or Not Involved. The total of items for each respective category (i.e., Victim RA, Aggressor RA) per security level (see Table 3). According to Wheaton's criteria, inmates were categorized as Pure Aggressors when they responded positively to one or more aggressor items on the survey but did not endorse any victim items. Conversely, inmates were categorized as Pure Victims if they endorsed one or more victim items but did not endorse any aggressor items. Inmates were considered Aggressor/Victims when they endorsed both aggressor and victim items. Finally, inmates who responded *never* on all items were considered Not Involved. Average endorsement of items is shown in Table 3. The range that can be scored under the Victim RA category is 0 to 40. The range that can be scored under the Aggressor RA category is 0 to 20. Therefore, the range that can be scored within the Total RA category is 0 to 60.

The level of relational aggression endorsement was approximately equal between security levels. Notably, the average scores in each category are low. The range of scores for the minimum-security sample for Victim RA was 0 to 24, Aggressor RA was 0 to 8, and total RA was 0 to 27. The range of scores for the medium-security sample for Victim RA was 0 to 26, Aggressor RA was 0 to 9, and Total RA was 0 to 30. There were

fewer endorsements of total Aggressor RA items in both security levels than total Victim

RA items (see Table 3).

Table 3
Means of Relational Aggression Levels per Security Level (N = 136)

RA Subscale	Minimum		Medium		Total		
	M	*SD*	*M*	*SD*	Range	*M*	*SD*
Total	6.26	6.30	6.70	7.10	[0, 30]	6.47	6.67
Victim RA	5.08	5.52	5.50	6.01	[0, 26]	5.28	5.74
Aggressor RA	1.18	1.68	1.19	1.79	[0, 9]	1.18	1.73

Note. RA = relational aggression.

Incarceration-related variables for the four groups were examined. Mean and

standard deviations for incarceration-related variables between the four categories of

relational aggression were reported (see Table 4). Pure Victims had longer sentences on

average compared to inmates in the Pure Aggressor, Aggressor/Victim and Not Involved

categories. The average numbers of major disciplinary reports for Pure Victim inmates

(over the average monthly rate of 0.04) were nearly double those of Pure Aggressor (per

0.02 months), Aggressor/Victim (per 0.02 months), or Not Involved inmates (per 0.05

months).

Table 4
Incarceration-Related Variables of the Four Categories of Inmates (N = 139)

Variable	Pure Aggressor		Pure Victim		Aggressor/Victim		Not Involved	
	M	*SD*	*M*	*SD*	*M*	*SD*	*M*	*SD*
Sentence (Months)	76.88	32.11	90.73	93.64	78.74	72.14	62.55	31.27
Previous Incarcerations	1.40	0.55	1.40	0.50	1.30	0.46	1.35	0.49
Minor DR	0.00	0.00	0.13	0.41	0.08	0.32	0.17	0.58
Monthly Avg.	0.00	0.00	0.003	0.01	0.002	0.007	0.003	0.01
Major DR	0.40	0.55	1.11	1.93	0.59	1.19	0.57	1.08
Monthly Avg.	0.02	0.03	0.04	0.06	0.02	0.04	0.05	0.14
Inmate DR	0.20	0.45	0.37	8.74	0.35	1.38	0.09	0.29
Monthly Avg.	0.02	0.03	0.02	0.03	0.01	0.03	0.002	0.006

Note. DR = disciplinary report.

Of the 139 inmates who completed the IRAI, 116 (83%) reported being involved in relational aggression in some way during their time at SRCI. Additionally, 45 inmates (32%) reported being the victim of relational aggression, five inmates (4%) reported being relationally aggressive toward another inmate, and 66 inmates (47%) reported being both a perpetrator and victim of relational aggression (see Table 5). There were fewer Pure Aggressors than Pure Victims across security levels. The most common type of relational aggression endorsement was both aggressor and victim across security levels.

Table 5
Relational Aggression Categories by Security Level

	Minimum (n = 72)		Medium (n = 67)		Total (N = 139)	
	n	*%*	*n*	*%*	*n*	*%*
Pure Aggressor	2	0.03	3	0.05	5	0.04
Pure Victim	26	0.36	19	0.28	45	0.32
Aggressor/Victim	34	0.47	32	0.48	66	0.47
Not Involved	10	0.14	13	0.19	23	0.17
Total	72	--	67	--	139	--

Responses to questions about inmates' experiences as victims of relational

aggression are presented in Table 6, listed from most to least common. Answers to

questions about having engaged in aggressive behavior toward other inmates are

presented in Table 7, listed from most to least common.

Table 6
Types of Victimization Experienced by Inmates

Experience	%
Receiving the silent treatment	55.8
Being avoided	45.8
Being lied about	44.9
Having rumors spread about them	44.2
Being betrayed	40.1
Being "ratted on" to a guard	31.2
Having property stolen from them	26.1
Being purposely excluded from activities and/or games	22.1
Being threatened by a group of inmates	21.4
Having their secrets told to another inmate	19.3
Being purposely ignored	15.0
Being excluded because of their ethnicity	14.3
Having bullies harass them systematically and repeatedly	13.6
Having other inmates refuse to be their partner during activities	13.6
Being blackmailed	10.8
Being harassed or cussed at because of their ethnicity	10.7
Being hurt by not receiving an invitation to an event	7.1
Having a friend make friends with someone else to get back at them	5.8
Having a message written about them on walls in bathrooms, etc.	0.7

Table 7
Inmate's Aggressive Behavior Toward Other Inmates (%)

Behavior	% of Participants
Refusing to speak to another inmate	48.2
Suggesting boycotting, shunning, or ostracizing another inmate	13.6
Ignoring another inmate in order to hurt him	12.2
Spreading rumors about another inmate	5.0
Harassing or cussing at another inmate because of his ethnicity	4.3
Systematically and repeatedly bullying weaker inmates	3.6
Telling another inmate's secrets in order to hurt him	3.6
Lying about another inmate you wanted to hurt	2.1
Making friends with someone else for the purpose of revenge	1.4
Blackmail an inmate to give you food, valuables or buy something for you	1.4
Stealing personal equipment or property from another inmate	0.7

Comparability of Groups

Of the 136 inmates who completed the PPI-R, scores on each content scale were relatively comparable. A *t*-test was conducted with scores on the PPI-R to compare minimum and medium-security participants. Levene's Test for Equality of Variances provided a significance of .09, therefore equal variance can be assumed. However, there was no significant relationship between PPI-R outcome and security level ($r = .11$). Therefore, the means and standard deviations for each content scale and raw score were comparable between minimum- and medium-security groups, and therefore the data were combined for analysis (see Table 8).

The range of each Content Scale and Total PPI scores for minimum-security were as follows: Fearless Dominance (17-85), Self-Centered Impulsivity (28-68), Coldheartedness (34-80), and Total PPI (27-79). The range of each Content Scale and Total PPI scores for medium-security were as follows: Fearless Dominance (21-84),

Self-Centered Impulsivity (28-70), Coldheartedness (33-65), and Total PPI (20-71).

Additional total ranges for each Content Scale and Total PPI are listed in Table 8.

Table 8
Psychopathic Personality Inventory Total and Factor Scores by Security Level

Scale	Minimum (n = 73)		Medium (n = 63)		Total (n = 136)		
	M	*SD*	*M*	*SD*	Range	*M*	*SD*
Total	50.93	12.27	47.86	10.17	[20, 79]	49.51	11.41
Fearless Dominance	51.11	13.82	47.24	13.15	[17, 85]	49.32	13.60
Self-Centered Impulsivity	50.01	8.70	49.00	9.83	[28, 70]	49.54	9.21
Coldheartedness	51.22	10.75	50.06	7.29	[33, 80]	50.30	9.30

Regression Analysis

A regression was conducted to evaluate the ability of subscales of the PPI-I Fearless Dominance content scale (i.e., Social Influence, Fearlessness, Stress Immunity) to predict levels of relational aggression in male inmates The three subscales of the PPI-I were continuous predictor variables. Relational Aggression was measured using an ordinal scale. Frequency of relationally aggressive behavior was counted as *Never* (0), *Once or twice* (1), and *Three or more times* (2). A final total raw score of RA Aggressor Total was used as the outcome/dependent variable.

The Poisson Regression Model is commonly used modeling tool for analyzing crime statistics, such as projecting prison populations, analyzing the rates of conviction, and estimating the size of the criminal population (Osgood, 2000), because it takes into account the nature of distributions based on behavioral counts.

The scores on the three interpersonal factors (i.e., the content scales comprising the Fearless Dominance Factor) on the PPI-R are presented in Table 9. The mean response rates of each subscale were unremarkable. Fearlessness showed the highest scores, and Social Influence showed the lowest scores. Specifically, scores on the Social Influence scale ranged from 20 to 72 in minimum-security and 17 to 76 in medium-security. Scores on the Fearlessness scale ranged from 36 to 82 in minimum-security and 33 to 79 in medium-security. Finally, scores on the Stress Immunity scale ranged from 21 to 67 in both minimum and medium-security samples.

Table 9
Levels of Content Scales on PPI-R Fearless Dominance Factor (N = 136)

Variable	Range	*M*	*SD*
1. Social Influence	[17, 76]	44.33	12.11
2. Fearlessness	[33, 82]	55.88	10.69
3. Stress Immunity	[21, 67]	48.49	11.10

Pearson's correlation coefficients for participants' scores on the predictor variables are presented in Table 10. The three bivariate correlations were positive and ranged from .23 to .48 and all were significant.

Table 10
Correlations Among the Predictor Variables (N = 136)

Variable	1	2	3
4. Social Influence	--	.37*	.48*
5. Fearlessness		--	.23*
6. Stress Immunity			--

*$p < .01$

The Pearson's Chi-Square value indicated that the model fits because the goodness-of-fit chi-squared test was not statistically significant ($\chi^2(3, N = 136) = 2.57$, $p < .05$). The Omnibus Test indicated that all of the estimated coefficients were equal to zero ($p = .000$). The Poisson-regression correlations represent the proportion of total variance in relational aggression explained uniquely by each predictor variable (i.e., Social Influence, Fearlessness, Stress Immunity). The Poisson-regression indicated that all three content scales were significant predictors of relational aggression (see Table 11).

Table 11
Regression Coefficients, Correlation and Confidence Intervals of Poisson-Regression (N = 136)

	B	*p*	CI 95%
Social Influence	.02	.03*	[.002, .032]
Fearlessness	.02	.05*	[.000, .032]
Stress Immunity	-.03	.00**	[-.046, -.015]

* p < .05; **p < .01

Discussion

The goal of this study was to investigate the utility of interpersonal factors of psychopathy (i.e., antisocial behavior, manipulativeness, lack of empathy, etc.) for predicting relationally aggressive behavior. I hypothesized that higher scores on the PPI-I Fearless Dominance factor (as measured by the content scales of Social Influence, Fearlessness, and Stress Immunity) would predict relationally aggressive behavior as measured on the IRAI. The findings supported this hypothesis.

Relational Aggression

Of the 139 inmates who completed the IRAI, 83% reported being involved in relational aggression in some way during their time at SRCI: 32% reported being a victim of relational aggression but not a perpetrator, 4% reported being relationally aggressive toward another inmate and never being a victim of relational aggression, and 47% reported being both a perpetrator and victim of relational aggression. Only 17% reported being Not Involved. Thus, there were fewer Pure Aggressors than Pure Victims across security levels. The most common type of relational aggression endorsement across security levels was being both an aggressor and a victim. The average endorsement of total victim items was nearly three times the amount of endorsed total aggressor items.

As noted earlier, Wheaton (2009) reported that 93.6% of female ODOC inmates in her sample endorsed having engaged in some form of relational aggression: 70% of inmates reported that they had engaged in relationally aggressive behavior and 90% reported that they had been victims of relational aggression. Approximately 4% of inmates reported being Pure Aggressors, 66% reported being both Aggressor/Victim,

24% reported being Pure Victims, and 6% reported being Not Involved. Four inmates (approximately 4%) reported being Pure Aggressors. Comparing the findings from Wheaton's study and those found in the current study, both male and female inmates were most likely to endorse being both aggressor and victim of relational aggression (47% and 66%, respectively). In addition, in both samples the next most frequently endorsed category was Pure Victim (32% and 24%, respectively), then Not Involved (17% and 6% respectively), and finally Pure Aggressor (4% in both samples). The percentages between samples vary, however. For example, 19% more women than men identified themselves as Aggressor/Victims, whereas 8% more men than women identified as Pure Victims and 11% more men than women identified as Not Involved. One reason for the higher rates of victimization compared to aggressive endorsement outcome in both the male/female and male-only samples might be that inmates are less likely to endorse aggressive behaviors out of fear of earning a disciplinary infraction, despite confidentiality.

Comparing demographics in the present study between each of the four relational aggression categories indicated minor differences. Interestingly, Pure Victims had the longest average sentence (90.73 years) compared to Pure Aggressor (76.88 years), Aggressor/Victim (78.74 years), and Not Involved (62.55 years) inmates. Although the differences in rates of inmate-on-inmate DRs were unremarkable, Pure Victims indicated the highest rate of total Major DRs among participants (1.11 DRs per 0.04 months) compared to Pure Aggressors (0.40 DRs per 0.02 months), Aggressor/Victims (0.59 DRs per 0.02 months) and Not Involved (0.57 DRs per 0.05 months). Pure Victims also indicated the highest rate of total Inmate DRs among participants (0.37 DRs per 0.02

months) compared to Pure Aggressors (0.20 DRs per 0.02 months), Aggressor/Victims (0.35 per 0.01 months) and Not Involved (0.09 per .002 months). These findings are not similar to Wheaton's (2009) finding that female Aggressor/Victim inmates endorsed the highest rate of DRs (51.4%).

Inmates categorized as Not Involved endorsed a slightly higher number of Minor DRs (0.17 per 0.003 months) than did inmates categorized as Pure Victim (0.13 per 0.003 months) among all participants. This discrepancy may be too small to be meaningful, or it may reflect inmates receiving DRs that had nothing to do with another inmate. Finally, inmates in the Pure Aggressor category endorsed the lowest rate of both Minor (0.00 per 0 months) and Major DRs (0.40 per 0.02 months) among all participants. This finding replicates findings in Wheaton's (2009) study. One reason for the lower endorsement of DRs for Pure Aggressors may be the nature of relationally aggressive behavior; that is, Pure Aggressors may have developed more covert ways to aggress against other inmates without being caught by correctional officers.

Overall frequencies of relational aggression within each relational aggression category (i.e., Pure Aggressor, Pure Victim, Aggressor/Victim, Not Involved) were comparable between security levels. As noted above, across all inmates, the Aggressor/Victim category (47% of respondents) was the most frequently endorsed by inmates. A much larger percentage of inmates endorsed being a Pure Victim (32% of respondents) than a Pure Aggressor (4% of respondents). These findings support prior research indicating that relational aggression is a phenomenon observed in men (Burton et al., 2007; Werner & Crick 1999), in addition to supporting the prior finding of higher

endorsements of Aggressor/Victim and Pure Victim items than of Pure Aggressor items in female inmates (Wheaton, 2009).

In terms of victim experiences, Wheaton (2009) found that being lied about was the most commonly endorsed item among female inmate victims (74.3% of respondents) whereas the silent treatment was the most frequently endorsed experience for male inmate victims (55.8% of respondents) in the current study. In the present study, the least common experience for male inmates was having a message written about an inmate on the walls (0.7% of respondents), whereas the same experience occurred for 2.8% of female inmates (Wheaton, 2009). Although more research is necessary, these findings suggest some variability in how relational aggression is experienced, and to what degree, between genders.

The most commonly endorsed relationally aggressive behavior in the current study was to refuse to speak to another inmate (48.2% of respondents). The same behavior was the most frequently endorsed, though at a higher rate, by female inmates in Wheaton's (2009) study (68.2% of respondents). In the present study and Wheaton's study, the least frequently endorsed behavior was stealing personal equipment/property (0.7% and 2.7%, respectively). This finding may reflect the fact that the inmates may have been more likely to act in ways that would be less likely to result in a DR (e.g., giving the silent treatment rather than stealing). In addition, although confidentiality was stressed in this study, inmates may still have been less likely to endorse behaviors that would earn them a DR than to endorse behaviors that would not, regardless of the actual frequency of occurrence of these behaviors.

Prediction of Relational Aggression

Results indicated that the three interpersonal content scales of the PPI-R (i.e., Social Influence, Fearlessness, Stress Immunity) were significant predictors of relational aggression. The results suggest that the subscales of the PPI-I are a strong predictor of relational aggression in male inmate populations. This finding supports prior findings of Edens et al. (2008) that inmates who scored high on the PPI-I factor were prone to discrete forms of misconduct. The significant relationship between interpersonal psychopathy traits and relational aggression also supports results associating higher rates of Cluster B Personality traits with a higher likelihood of relational aggression (Czar et al., 2011).

Strengths and Limitations

Several limitations to the current study must be considered. The clearest limitation is likely the way in which relational aggression was measured. The IRAI is an assessment tool adapted from the SVI. Although there are psychometric data available for the SVI, the IRAI was substantially altered and there are no psychometric data available to assess for reliability and validity on the IRAI.

Additionally, the measures used in this study were all self-report measures. Although there is support for the validity of self-report measures, there may still have been biases inherent in response style. Inmates appeared wary of responding to the self-report measures honestly and consistently. For example, throughout data collection, participants commented aloud that they did not want to be considered to be "rats" or "snitches" by other inmates. One participant noted that word would spread about the study to the rest of the population and, due to intimidation and group affiliations, inmates

would likely decline participating due to the possible consequence of physical intimidation or assault. Therefore, answers may have been less than honest, which was perhaps evidenced by the disproportionately large number of Pure Victims compared to the much lower numbers of Pure Aggressors.

Finally, this sample included only adult male inmates housed in a secure facility in the Pacific Northwest region of the United States. Although the results are notable, a replication of this study is necessary before one can generalize the findings. Additionally, inmates were selected based on the recency of intake. A short stay leaves little time to develop the social connections necessary to engage in relationally aggressive behavior. Future researchers should collect data from general population inmates who have been housed for longer periods of time and who have had opportunities to engage in relationally aggressive behaviors with other inmates.

There are notable strengths to this study, in spite of aforementioned limitations. This research was the first study known to assess psychopathy as a predictor of relational aggression among male inmates. Prior researchers have focused primarily on the possible relationship between psychopathy and relational aggression by assessing differences between groups; there is no known study that assessed for prediction of psychopathy. Additionally, the sample size was large enough to detect differences and two levels of security were represented. Future researchers could expand the study sample to include maximum-security inmates.

An additional strength of the current study was the use of the PPI-R to measure interpersonal traits that overlap with relational aggression. As the literature suggests, the PPI-R may be a better measure of interpersonal characteristics of psychopathy than the

PCL-R because it excludes criminal behavior, thereby creating two distinct factors of psychopathy without conflating personality traits with violent criminal behavior (Skeem et al., 2003).

Directions for Future Research

The current findings indicate that the three distinct subscales (i.e., Social Influence, Fearlessness, Stress Immunity) of the PPI-R Fearless Dominance factor each significantly predicted levels of relational aggression. Future researchers should examine the generalizability of these findings to high-security male inmates, female inmates, civil psychiatric populations, juvenile offenders, and even community samples.

In addition, it would be beneficial to assess how primary and secondary psychopathy might serve as predictors of relational aggression. Research has suggested that primary and secondary psychopathy are experienced and exhibited differently; specifically, individuals high on primary psychopathy show little to no neurotic anxiety or reaction to stress, whereas individuals high on secondary psychopathy are characterized by high anxiety, impulsiveness and thrill seeking (Cleckley, 1976; Edens et al., 2008; Lykken, 1995; Newman, MacCoon, Vaughn, & Sadeh, 2005). Literature suggests that the PPI-I is attributed to primary psychopathy due to the fearless temperament and low anxiety (Edens et al., 2008). Further research into primary psychopathy as measured by the subscales of the PPI-I may be used to assess differences in relational aggression prevalence when compared to secondary psychopathy.

Conclusion

In this study, the interpersonal subscales of the PPI-R predicted the likelihood of relational aggression in male inmates. The results therefore indicate that specific

personality traits inherent in psychopathy can help predict frequency of relational aggression. This information may be useful in preventing relationally aggressive victimization in prison which is oftentimes gone unnoticed due to the covert nature of the behavior. These data may help raise awareness of the prevalence of relational aggression among inmates and consequently change administrative perspectives on bullying among its inmates. That is, proactive intervention can be applied to prevent bullying, rather than punished after the fact. With necessary evidence of psychopathy as a predictor of relational aggression, the ultimate goal would be to promote systemic change that would impact both aggressors and victims of countless acts of aggression while in prison.

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APPENDIX A
Informed Consent

1. Study Title

Relational Aggression Among Male Inmates (IRB #124-11)

2. Study Personnel

Name	Lynette Hamilton, MA	Eloise Holdship, BA	Genevieve Arnaut, PsyD, PhD
Role	Student Investigator	Student Investigator	Faculty Advisor
Institution	Pacific University	Pacific University	Pacific University
Program	School of Professional Psychology	School of Professional Psychology	School of Professional Psychology
Telephone	503-352-2900	503-352-2900	503-352-2900

3. Study Invitation, Purpose, Location, and Dates

You are invited to participate in a research study. This study will help other people gain a better understanding of the different types of aggressive behaviors in prison. The project has been approved by the Pacific University IRB and will be completed by August 2012. The study will take place at Snake River Correctional Institution. The results of this study will be used to learn about experiences in prison.

4. Participant Characteristics and Exclusionary Criteria

You can participate in this study if you are male, at least 18 years old, can speak and read English, and have completed the intake process no more than five years ago. You cannot participate if you are younger than 18 years old, cannot speak or read English fluently, or if you have completed the intake process more than five years ago.

5. Study Materials and Procedures

You will be asked to fill out three surveys. One survey will ask you questions about demographic information, such as your age, race, marital status, education level, and sexual orientation.

The second survey will ask you questions about these topics:
- Behaviors other inmates have directed towards you.
- Behaviors you have directed towards other inmates.

- Consequences of those behaviors.

The third survey will ask you questions about different personality characteristics.

About 250 other inmates like you will participate in the study. Participation will take about 60 minutes. It will not cost you anything to be a part of the study. If you do not wish to participate in the study, correctional staff will escort you back to your housing unit (if you are in medium-security) or you will be free to leave (if you are in minimum-security). A researcher will be present at all times to answer any questions you might have.

6. Risks, Risk Reduction Steps and Clinical Alternatives

a. **Unknown Risks:**
It is possible that participation in this study may expose you to currently unforeseeable risks.

b. **Anticipated Risks and Strategies to Minimize/Avoid:**
Some of the questions on the survey may remind you of a hard time you had in the past and may cause you to feel angry, sad, or anxious. If you begin to feel this way, you can talk to a counselor at Behavioral Health Services or a staff member you trust. In addition, other inmates might misunderstand why you are participating in this study. If you experience problems with another inmate because of this, you can talk to a staff member you trust.

c. **Need for follow-up examination or care after the end of study participation:**
There is no anticipated need for a follow-up examination or care after participation has ended.

d. **Advantageous Clinical Alternatives:**
This study does not involve an experimental clinical trial.

7. Adverse Event Handling and Reporting Plan

The IRB office will be notified by the next normal business day if an adverse event occurs. The IRB will be contacted via telephone at (503) 352-1478. Should an unexpected and/or adverse reaction occur, the Principal Investigator will notify a correctional officer or staff member to assist in contacting Behavioral Health Services. The Principal Investigator will provide only the information necessary to assist the appropriate personnel to attend to your needs.

8. Direct Benefits and/or Payment to Participants

It is important for you to understand that parole boards will not take into account your participation in this project in making decisions regarding your parole in any way.

a. **Benefit(s):**
There are no benefits for your participation.

b. **Payment(s) or Reward(s):**
You will not be paid or compensated for participating in the study.

9. Promise of Privacy

The results of this study will be confidential. A private number, not your name or State Identification Number (SID) number, will identify the answers to your survey, so that no one can

match your name or SID number with your answers except for the investigators. Your SID number and name, which we need so we can keep track of who takes the survey, will be kept on a separate piece of paper in a locked file cabinet inside a locked office. Your name and study ID number will also be kept on an electronic list, which will be kept on a password-protected computer that only the investigators have access to. The lists with your name, SID number, and study ID number will be destroyed once the data has been analyzed and the study is complete. All the surveys will be carried in and out of ODOC in a locked briefcase that nobody but the principal investigator can open. When we write or talk about what we learned in this study, we will leave things out so no one will be able to tell we are talking about you.

While you are taking the survey, all rules and regulations of ODOC still count. For example, if you write on the surveys or tell the researcher that you or someone else was physically harmed the researcher will have to tell a staff member. The researcher will also have to notify the IRB at Pacific University within 24 hours.

10. Medical Care and Compensation In the Event of Accidental Injury

During your participation in this project it is important to understand that you are not a Pacific University clinic patient or client, nor will you be receiving complete mental health care as a result of your participation in this study. If you are injured during your participation in this study and it is not due to negligence by Pacific University, the researchers, or any organization associated with the research, you should not expect to receive compensation or medical care from Pacific University, the researchers, or any organization associated with the study.

11. Voluntary Nature of the Study

Your decision whether or not to participate will not affect your current or future relations with Pacific University or ODOC. If you decide to participate, you are free to not answer any question or withdraw at any time without prejudice or negative consequences. If you choose to withdraw after beginning the study we will not use your answers on the surveys you already completed. We will keep all surveys for our records in a locked cabinet for 5 years.

12. Contacts and Questions

The researchers will be happy to answer any questions you may have at any time during the course of the study. If you are not satisfied with the answers you receive, please call Pacific University's Institutional Review Board, at (503) 352-1478 to discuss your questions or concerns further. You will have to contact a staff member or your counselor in order to reach the Institutional Review Board. If you become injured in some way and feel it is related to your participation in this study, please contact the investigators and/or the IRB office. All concerns and questions will be kept in confidence.

13. Statement of Consent

Yes   No
○   ○   I am 18 years of age or over.
○   ○   All my questions have been answered.
○   ○   I have read and understand the description of my participation duties.
○   ○   I have been offered a copy of this form to keep for my records.

○ ○ I agree to participate in this study and understand that I may withdraw at any time without consequence.

_____

Participant's Signature   Date

_____

Investigator's Signature   Date

APPENDIX B
Demographic Information

Participant Number: _____

Marital Status: _____ Single and never married
                                            _____ Divorced or legally separated
                                            _____ Widowed
                                            _____ Married or in a long-term relationship

Highest level of education completed:_____ Grade school; last grade completed _____
                                            _____ High school diploma/GED
                                            _____ Some college; # of years completed_____
                                            _____ College degree; degree earned _____

Sexual Orientation (On Street):   _____ Heterosexual
                                            _____ Bisexual
                                            _____ Homosexual
                                            _____ Other; please specify

Sexual Orientation (In prison):   _____ Heterosexual
                                            _____ Bisexual
                                            _____ Homosexual
                                            _____ Other; please specify

Mental Health/Developmental Disability: _____ Depressive Disorder
                                            _____ Bipolar Disorder
                                            _____ Anxiety Disorder
                                            _____ Psychotic Disorder
                                            _____ Personality Disorder
                                            _____ Developmental Disorder
                                            _____ Other; please specify
                                            _____ N/A

Previous Incarceration(s):   _____ Yes
                                            _____ No

    If yes:
    Age at first incarceration: _____

Number of times in prison on separate convictions (not including this one)? _____

How many Disciplinary Reports have you received since you've been here this time?

_____

How many of these Disciplinary Reports involved a problem with another inmate?

_____

        Amount of funds on books: _____

APPENDIX C
Inmate Relational Aggression Inventory
Inmate Relational Aggression Inventory
Viva R. Wheaton, 2008
Pacific University

INTRODUCTION

Thank you for volunteering to participate in this study. My goal is to understand more about different types of aggressive behaviors in the prison setting among male inmates. In order to bring awareness to this topic and help make appropriate suggestions for change within the system, I need to know a few details about your life in prison.

I understand that talking about these types of things can be uncomfortable. Please remember that, if at any point you do not want to answer a question, you can pass. If you have any questions or concerns at any point, please feel free to ask me. DO NOT WRITE YOUR NAME OR ANY IDENTIFYING INFORMATION ON THIS SURVEY. That way no one will know how you answered the questions. Do you have any questions before we begin?

While you have been at SRCI this time, how many times…	Never	Once or twice	Three times or more
1. …did another inmate lie about you?	☐	☐	☐
2. …did another inmate betray you?	☐	☐	☐
3. …did another inmate steal things from you?	☐	☐	☐
4. …have you received the silent treatment from another inmate?	☐	☐	☐
5. …did another inmate write messages about you on walls, in	☐	☐	☐

bathrooms, etc.?

6. …did an inmate "rat" on you to a correctional officer? □ □ □

7. …did an inmate spread rumors about you? □ □ □

8. …did a friend of yours make friends with someone else to get back at you? □ □ □

While you have been at SRCI this time, how many times…	Never	Once or twice	Three times or more
9. …did an inmate harass or cuss at you because of your ethnicity?	□	□	□
10. …did a group of inmates threaten you?	□	□	□
11. …did an inmate exclude you because of your ethnicity?	□	□	□
12. (If you are an immigrant)…did another inmate cuss at you because of your immigrant status?	□	□	□
13. …did an inmate blackmail you?	□	□	□
14. …did an inmate ignore you in order to hurt you?	□	□	□
15. …were you not invited to an event that other inmates were attending in order to hurt you?	□	□	□

16. …did other inmates avoid you? ☐ ☐ ☐

17. …did other inmates purposefully exclude you from activities and/or games? ☐ ☐ ☐

18. …did an inmate tell another inmate or inmates your secrets? ☐ ☐ ☐

19. …did an inmate or inmates refuse to be your partner during activities? ☐ ☐ ☐

20. …were you a <u>victim</u> to a situation in which bullies harassed you systematically and repeatedly? ☐ ☐ ☐

21. What happened after these events? (Check all that apply.)

☐ ☐ ☐ ☐ ☐ ☐

Events like that did not happen	I was worried	I was afraid	I changed my behavior	I got back at them	These events did not affect me

If incidents of harassment and aggression have occurred since you've been at SRCI this time, answer the next questions regarding those incidents.

22. To whom did you turn regarding the matter? (Check all that apply.)

_____ Nothing like that has ever happened to me so I can't answer

_____ I went to another inmate

_____ I did not complain or tell anybody

_____ I went to a correctional officer

_____ I went to a staff person other than a correctional officer

_____ Other; please explain _____

23. How was the incident dealt with? (Check all that apply.)

_____ Nothing like that has ever happened to me so I can't answer

_____ I did not report it and the incident occurred again

_____ I reported it and the problem was dealt with to my satisfaction

_____ I reported it and the problem was not dealt with to my satisfaction

_____ I reported it but the problem wasn't dealt with

_____ Other; please explain _____

24. With whom do you discuss incidents of harassment and persecution?

_____ I do not discuss these matters with anyone

Why not? _____

_____ I discuss these matters with other inmates

How often? _____

_____ I discuss these matters with officers and/or other staff members

How often? _____

25. If other inmates have hurt / insulted / pushed / hit you since you have been at SRCI this time, where did it happen? (Check all that apply.)

_____ Cell/Room

_____ Dormitory

_____ Shower

_____ Service Area (e.g., storage room, hallway, laundry, cafeteria, kitchen, workshop);

Specify: _____

26. If other inmates have harassed / insulted / excluded / bullied you since you have been at SRCI this time, during what time of day did it happen? (Check all that apply.)

_____ Midnight to 6:00 a.m.

_____ 6:00 a.m. to Noon

_____ Noon to 6:00 p.m.

_____ 6:00 p.m. to Midnight

27. If other inmates have harassed / insulted / excluded / bullied you, who did it? (Check all that apply.)

_____ Nothing like that has ever happened to me so I can't answer

_____ An inmate from my housing unit

_____ An inmate from a different housing unit

_____ An inmate I knew

_____ An inmate I didn't know

_____ Other; specify: _____

28. If a group of inmates harassed / insulted / excluded / bullied you, who were they? (Check all that apply.)

_____ Nothing like that has ever happened to me so I can't answer

_____ A group from my housing unit

_____ A group from a different housing unit

_____ A group I knew

_____ A group I didn't know

_____ Other; specify: _____

29. What do you usually do if another inmate betrays you, harasses you, or threatens you? (Check all that apply.)

_____ Nothing like that has ever happened to me so I can't answer

_____ Go to another inmate

_____ Do not complain or tell anybody

_____ Go to a correctional officer

_____ Go to a staff person other than a correctional officer

_____ Find a way to get back or take revenge

_____ Other; specify: _____

Up until now I asked about things that happened to you since you've been at SRCI for your current charges. Now I'm going to ask you about things <u>you</u> may have done here.

While you have been at SRCI this time, how often did you…	Never	Once or twice	Three times or more
30. …lie about another inmate you wanted to hurt?	☐	☐	☐
31. …steal personal equipment or property from another inmate?	☐	☐	☐
32. …harass or cuss at another inmate because he was an immigrant or because of his ethnicity?	☐	☐	☐

33. …ignore another inmate in order to hurt him? ☐ ☐ ☐

34. …spread rumors about another inmate? ☐ ☐ ☐

35. …suggest boycotting, shunning, or ostracizing another inmate? ☐ ☐ ☐

36. …made friends with someone else for the purpose of revenge? ☐ ☐ ☐

37. …told another inmate's secrets in order to hurt him? ☐ ☐ ☐

38. …refuse to speak to an inmate? ☐ ☐ ☐

39. …blackmail an inmate to give you food, valuables, or buy something for you at the commissary? ☐ ☐ ☐

40. …participate as bully systematically and repeatedly toward weaker inmates than yourself? ☐ ☐ ☐

41. What is the worst punishment you have received since you arrived at SRCI?

_____ I have never been punished

_____ I have been scolded by a staff member

_____ I have received a DR

_____ I have been suspended from certain activities

_____ I have received disciplinary segregation

_____ My personal belongings have been confiscated

_____ Other; please specify: _____

42. How many good friends do you have at SRCI? _____

43. Do you feel less popular than other inmates in your housing unit?

_____ Never

_____ Seldom

_____ Sometimes

_____ Frequently

_____ Always