

TECHNICAL NOTE

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Anger Experience, Styles of Anger Expression, Sadistic Personality Disorder, and Psychopathy in Juvenile Sexual Homicide Offenders

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ABSTRACT: Sexual homicide by juveniles is a rare phenomenon, and information regarding the psychological and behavioral characteristics of this group is limited. No studies exist which have investigated anger experience and styles of anger expression, and the relationship between anger, sadistic personality disorder, and psychopathy, in this type of youthful offender. These areas were explored by evaluating 14 juvenile sexual homicide offenders through clinical assessment, the State-Trait Anger Expression Inventory (STAXI), the Schedule for Nonadaptive and Adaptive Personality (SNAP), the Revised Psychopathy Checklist (PCL-R), and review of correctional records. Descriptive information for the STAXI scales and internal consistency data are presented. Trait Anger was significantly higher than State Anger for the youth, but still comparable to adolescent norms. The difference between Anger-In and Anger-Out scale scores was not significant. Unexpectedly, Anger Control scale scores were significantly higher than Anger Out scale scores, clinically consistent with efforts by some of these boys to resist sadistic impulses. Those four (31%) participants who met criteria for sadistic personality had significantly higher Anger-Out scale scores than those without the disorder, and were also higher on Trait Anger to a marginally significant degree. Psychopathy was significantly negatively associated with Anger Control. This study is intended to contribute to the scant literature on juvenile sexual homicide, and lends some support to the validity and utility of sadistic personality disorder as a diagnosis in younger forensic populations. The findings did not support the contention that this form of violence is necessarily an outgrowth of excessive anger.

KEYWORDS: forensic science, sexual homicide, murder, youth, adolescence, anger, STAXI, sadistic personality disorder, psychopathy

Sexual homicide involves murder in tandem with overt sexual assault and/or sexually symbolic behavior. Less than 1% of murders committed by juveniles are sexual homicides (1,2). Given the rare nature of these crimes, juvenile sexual homicide offenders have only recently attracted scientific attention beyond isolated

case reports (2,3). Consequently, information regarding the psychological and behavioral characteristics of this group is limited.

That violent behavior can be an outgrowth of excessive anger is a common theme in the mental health literature (4–6). Similarly, researchers have long noted the direct association between anger and psychopathy (7,8). Perpetrator anger as a causal factor in sexual homicide has been theorized for well over a century (9). Although the causes of sexual homicide remain uncertain, it is generally believed that these crimes are often related to sadistic fantasy (10,11). The presence of sexual sadism and psychopathic traits among such offenders are common findings (11,12). Clearly, the distorted experience and expression of anger may be regarded as major components of sadistic behavior.

One way to define a personality pattern manifested by persistent, maladaptive sadistic thoughts and behaviors is through the use of the sadistic personality disorder (SPD) diagnosis as defined in the Appendix of the American Psychiatric Association's DSM-III-R (13) (in general, criteria refer to cruel, demeaning, controlling, and aggressive qualities). Perhaps unfortunately, this diagnosis was dropped without a trace in the subsequent DSM version of 1994, DSM-IV. A survey of the 1390 members of the American Academy of Psychiatry and the Law (with 20% responding) found that those who had clinical experience with individuals with sadistic personality disorder believed that this diagnosis was useful for both clinical and forensic purposes (14). Moreover, the diagnostic criteria were found to have high sensitivity and specificity in this study. Other studies have reported on the reliability of and possible familial pattern in SPD, and a high prevalence rate of SPD (33%) in sex offenders (15,16).

To date, anger experience and styles of anger expression, and the relationship between anger, sadistic personality disorder, and psychopathy in juvenile sexual homicide offenders, have not been investigated. To help understand the deviant psychological underpinnings of youth who engage in this type of crime, this study looked at associations between anger characteristics, sadistic personality disorder, and psychopathy. Given the general assertion that anger and violent behavior are directly related, it was anticipated that these sexual homicide offenders would endorse high levels of characterological anger. It was also hypothesized that this group would be characterized by the tendency to express anger toward others in the environment. Furthermore, it was predicted that the youngsters in this sample with sadistic personality disorder (31%) would differ from those without the disorder by having a

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more angry temperament and a more externally-directed style of anger expression. Lastly, it was expected that psychopathy would be negatively associated with attempts to control anger expression.

Method

Participants were 14 offenders who had simultaneously committed sexual assault and homicide/attempted homicide while under 18 years of age (five cases in which the victim survived were included because the intent of the offenders was clearly to kill, and the victims' survival was merely by chance). The mean age of the sample at the time of the original crime was 15.2 years (range = 13–17 years); the mean age at the time of study participation was 18.2 years (range = 16–23 years). The average IQ of the sample was 101.4 (range 78–119).

Personality, behavioral, and criminal characteristics of this sample have been described previously in the first two parts of this research project (2,3). In brief, most of the boys met conduct disorder criteria (86%) at the time of their crimes. None of them had psychotic or major affective disorders. At follow-up, 62% of the participants were found to have a personality disorder diagnosis. Schizoid and schizotypal personality disorder were the most common Axis II diagnoses, both present in 38% of the group, followed by sadistic personality disorder in 31%. Antisocial and borderline personality disorder diagnoses were relatively rare, each present in only one subject.

This study was approved by the University of Florida Institutional Review Board. Study participants were identified through a state department of corrections computer search which cross-referenced the general categories of homicide and sexual assault. Written informed consent was obtained for the subjects. Participants were informed that the research results would not be available for parole or appeal purposes. Clinical assessments were conducted by the principal investigator at the youths' prison placements. Information including but not limited to family background, medical history, sexuality, criminal/violence history, and modus operandi was assessed through a clinical interview designed for this investigation.

Measures

State-Trait Anger Expression Inventory-Form HS (STAXI)—The STAXI (17) is a 44-item, self-report inventory designed to measure two domains of anger: anger experience and anger expression. Anger experience has two scales with 10 items each: State Anger (S-Anger) and Trait Anger (T-Anger). T-Anger has two subscales with four items each: Angry Temperament (T-Anger/T) and Angry Reaction (T-Anger/R). The second domain, anger expression (AX/EX) contains three scales with eight items each: Anger-In (AX/In), Anger-Out (AX/Out), and Anger Control (AX/Con). Each item's response score ranges from 1 to 4.

S-Anger measures anger intensity at the time of the evaluation, and T-Anger measures angry temperament. T-Anger/T reflects the experience and expression of anger when provoked, and T-Anger/R measures dispositional differences when provoked. AX/In indicates how often angry feelings are held in or suppressed. AX/Out measures how often angry feelings are expressed toward other people or objects. AX/Con measures how often anger expression is controlled (18,19). AX/EX yields a frequency of expressed anger, regardless of the direction (20). AX/EX scores are found by adding AX/In, Ax/Out, and the constant 16, and then subtracting the AX/Con score. Spielberger (17) provides support for reliability and concurrent validity data for the STAXI.

TABLE 1—*DSM-III-R diagnostic criteria for sadistic personality disorder.*

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|---|---|
| A. A pervasive pattern of cruel, demeaning, and aggressive behavior, beginning by early adulthood, as indicated by the repeated occurrence of at least four of the following: | |
| (1) | has used physical cruelty or violence for the purpose of establishing dominance in a relationship (not merely to achieve some noninterpersonal goal, such as striking someone in order to rob him or her) |
| (2) | humiliates or demeans people in the presence of others |
| (3) | has treated or disciplined someone under his or her control unusually harshly, e.g., a child, student, prisoner, or patient |
| (4) | is amused by, or takes pleasure in, the psychological or physical suffering of others (including animals) |
| (5) | has lied for the purpose of harming or inflicting pain on others (not merely to achieve some other goal) |
| (6) | gets other people to do what he or she wants by frightening them (through intimidation or even terror) |
| (7) | restricts the autonomy of people with whom he or she has a close relationship, e.g., will not let spouse leave the house unaccompanied or permit teen-age daughter to attend social functions |
| (8) | is fascinated by violence, weapons, martial arts, injury, or torture |
| B. The behavior in A has not been directed toward only one person (e.g., spouse, one child) and has not been solely for the purpose of sexual arousal (as in Sexual Sadism). | |

Schedule for Nonadaptive and Adaptive Personality (SNAP)—The SNAP (21) is a factor analytically derived self-report instrument designed to assess psychopathology associated with personality. The inventory consists of 375 items organized into 5 validity scales, 13 diagnostic scales assessing the personality disorder criteria from the DSM-III-R, and 12 trait and 3 temperament scales measuring primary traits and general affective traits. Data support the internal consistency and concurrent validity of the SNAP (21). The normative sample of college students was used for the present analyses. SNAP questions are designed to assess sadistic and other DSM-III-R personality disorders as a multidimensional construct. Table 1 lists SAD diagnostic criteria.

Revised Psychopathy Checklist (PCL-R)—The PCL-R (8) is a 20-item scale scored from interview and file information. For example, scale items relate to superficial charm, grandiosity, lack of remorse, lying, shallow affect, and promiscuous sexual behavior. The modified scoring procedure applicable to minors was used in this investigation (22). The PCL-R yields a psychopathy score ranging from 0 to 40, with a score of 30 or above typically used to identify a psychopathic personality. Reliability and concurrent validity data are presented by Hare (23).

Results

Thirteen youngsters agreed to participate in all procedures. One of the 14 youth declined to participate in the clinical interview portion of the assessment, but completed the self report measures. Descriptive information for the STAXI scales and internal consistency data are presented in Table 2.

A dependent t-test on anger experience scales indicated that trait anger was significantly higher than state anger ($t_{(13)} = -4.48, p < 0.001$). Nevertheless, both the state and trait anger group means were comparable to the adolescent norms reported by Spielberger

TABLE 2—Descriptive statistics and internal consistency for the STAXI scales ($n = 14$).

Scale	M	SD	Median	Range	Alpha
Anger experience					
S-Anger	14.1	5.7	10.0	10–29	.76
T-Anger	20.6	8.0	17.0	11–35	.89
T-Anger/R	7.9	3.3	6.5	4–16	.81
T-Anger/T	8.0	4.1	6.0	4–16	.93
Anger expression					
AX/In	18.2	16.2	16.0	12–19	.88
AX/Out	16.4	4.5	15.5	9–17	.73
AX/Con	21.8	5.1	23.0	15–32	.75
AX/EX total score	28.9	12.4	27.5	11–54	

NOTE: STAXI = State-Trait Anger Expression Inventory; S-Anger = State Anger; T-Anger = Trait Anger; T-Anger/T = Angry Temperament; T-Anger/R = Angry Reaction; AX/In = Anger In; AX/Out = Anger Out; AX/Con = Anger Control; AX/EX = Anger Expression.

(17). The difference between AX/In and AX/Out scales in our sample was not significant, $t_{(13)} = 1.21, p = 0.248$. Furthermore, the means on the Ax/In and Ax/Out scales are comparable to the means from the adolescent norms comparison data referenced above. Counter to the expectation that AX/Out would be the prominent style of anger expression for this group, AX/Con was significantly higher than Ax/Out, $t_{(13)} = 2.56, p = 0.024$.

Independent t-tests were conducted to compare anger expression scales for participants who met criteria for sadistic personality on the SNAP ($n = 4$; 31%) to those who did not meet criteria ($n = 9$) (one SNAP profile was invalid, leaving 13 for analysis). There was a significant difference between groups on the AX/Out scale in the predicted direction ($t_{(11)} = 2.64, p = 0.023$), with the sadistic personality group mean being significantly higher than the group mean for those without the disorder ($M = 20.0$ and $M = 14.2$). The difference between these two groups on trait anger was also marginally significant in the expected direction ($M = 26.25, M = 17.22; t_{(11)} = 2.13, p = 0.056$).

The mean PCL-R score for the sample was 22.4 (range 7.1–30.6), indicating a moderate level of psychopathy (2,24). Pearson correlations were performed between scores on the PCL-R and anger expression scales. Consistent with Cleckley's theory on the psychopathic personality (7), psychopathy was significantly negatively associated with AX/Con, $r_{(13)} = -0.66, p = 0.010$.

Discussion

This study is believed to be the first to explore the associations between anger characteristics, sadistic personality disorder, and psychopathy in juvenile sexual homicide offenders. Counter to predictions, group means on both state and trait anger were comparable to normative data for adolescents. This finding does not support the contention that such violent acts are necessarily an outgrowth of excessive anger. But, roughly half of the crimes in this study were of the "organized" type (3), indicating actions of a more predatory than affective nature. Predatory crimes are hypothetically motivated to a lesser extent by overt anger. Another influence to consider is that the subjects may have underreported their anger experience and styles of expression in order to present themselves in a more positive light, a possibility among inmates hoping to accumulate gain time in order to minimize the length of their incarceration. The normal state anger mean for these youngsters as a whole

may be accounted for, at least in part, by the fact that they were tested in highly regimented institutional environments where anger control is both enforced and rewarded. Furthermore, as noted previously by Myers (3), these youngsters were separated from their highly chaotic families due to incarceration, and thus were living in more stable, controlled environments at the time of assessment.

The finding that AX/Con was a more prominent style of anger expression than AX/Out was unexpected. However, one tentative explanation for this result relates to the finding that over one-half of the participants in this sample had admitted to violent sexual fantasies (e.g., raping women at knifepoint, mutilating victims, and removing their organs). It is possible that some of these youngsters invested their energy in resisting these ongoing sadistic fantasies. Perhaps this anger control style served an adaptive function for these boys prior to their crimes. When they finally acted on their fantasies, the results were tragic.

Most of the boys met conduct disorder criteria at the time of their crimes, and two-thirds of them had personality disorder diagnoses at follow-up, on average three years later. This is consistent with the natural evolution of conduct disorder, as many youths with this disorder go on to develop a spectrum of personality disorder diagnoses in adulthood (25). Robins (26) has made the point that conduct disorder should be conceptualized as a personality disturbance rather than an Axis I disorder. Based on the adult sexual homicide literature, one would have predicted antisocial, narcissistic, and borderline personality disorders to have been a common finding in these youths (27). Nevertheless, that schizoid and schizotypal personality disorder were the most common personality disorder diagnoses in these youths (each present in 38% of the group) is not clinically inconsistent with their crimes. These diagnoses are in the odd, eccentric category of personality disturbance, and signal aloofness, disturbed interpersonal functioning, idiosyncratic thinking, and perhaps a greater reliance on fantasy for fulfillment due to impairment in their capacity for relationships with others. Their emotional detachment may well have been an important ingredient in the cascade of factors leading to their crimes (along with varying degrees of other factors, e.g., sadism, psychopathy, child abuse, feelings of rejection by peers and society).

The DSM-III-R diagnosis of SPD was short-lived, and allowed little time for the generation of research to assess its usefulness in clinical and treatment settings. As Spitzer, et al. (14) have pointed out, this resulted in little chance for those with the disorder to ever have a chance at treatment for a condition with a currently poor prognosis. Therefore, the future risk of others being victimized by individuals with SPD is increased. Correspondingly, future young offenders who commit sexually sadistic murders—many of whom will likely meet DSM-III-R criteria for SPD based on the 31% prevalence rate in this study—will be processed through the legal system without access to a more robust body of research that might have had important treatment, sentencing, and prognostic implications. Of note, the great majority of youth who commit sex murders will be released back into the community by middle age, and some of those adjudicated in juvenile court will be released while still in their teenage years—without having received treatment.

There are two main limitations of the present study that should be noted. First, the small sample size limits the generalizability of the findings and may have reduced the statistical power of the analyses. Second, comparison with a matched control group was not performed, and this would be recommended for future studies in this area. One challenge for research on juvenile sexual homicide offenders is in determining what type of control group to compare them with: youthful rapists, juvenile murderers, adult sexual homi-

cide offenders? Each of these control groups would offer both strengths and limitations to a study design. Another challenge is finding and gaining access to adequate numbers of youth who committed sex murders. The present sample of 14 was culled from roughly 1500 juvenile murderers arrested over a six-year period.

In summary, this study suggests that the STAXI is a reliable measure for this population. Moreover, the described findings provide additional validity data for the instrument. Specifically, correlational analysis supported the well-accepted notion that psychopathy is inversely correlated with attempts to control anger. In other words, youths with a higher degree of psychopathy invested less energy in controlling their expressions of anger. Findings also indicate that the STAXI may be able to help discriminate between individuals with and without sadistic personality disorder in younger forensic populations. Lastly, this research lends some support to the validity and utility of sadistic personality disorder as a diagnosis in juvenile forensic populations.

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