ANTISOCIAL PERSONALITY, SOCIOPATHY, AND PSYCHOPATHY

"When I'm good, I'm very good. When I'm bad, I'm better." (Mae West)

People who cannot contain their urges to harm (or kill) people repeatedly for no apparent reason are assumed to suffer from some mental illness. However, they may be more cruel than crazy, they may be choosing not to control their urges, they know right from wrong, they know exactly what they're doing, and they are definitely NOT insane, at least according to the consensus of most scholars (Samenow 2004). In such cases, they usually fall into one of three types that are typically considered aggravating circumstances in addition to their legal guilt -- antisocial personality disorder (APD), sociopath, or psychopath -- none of which are the same as insanity or psychosis. APD is the most common type, afflicting about 4% of the general population. Sociopaths are the second most common type, with the American Psychiatric Association estimating that 3% of all males in our society are sociopaths and Stout (2005) estimating 4% of the population. Psychopaths are rare, found in perhaps 1% of the population.

Antisocial Personality Disorder

(APD) is practically synonymous with criminal behavior, but as with all distributions of a disease or whatever in a population, it is probable that the majority of people with this particular affliction are law-abiding. Aging, overinvolvements, and/or relationships might hold sway over the control (or lack of control) in these kind of people, and although approaching the study of offenders from a relationship & personality disorders point of view may or may not be productive, Dr. Drew is probably an adequate source of information on such matters. Dr. Drew's theory (and one with wide ramifications since he pretty much defines an antisocial tendency as thinking about one's self first) is that women with certain kinds of disorders, like borderline personality disorders, tend to be attracted to and hook up with men who manifest symptoms of psychopathic personality disorder (see Lecture on BPD & OCD) and that such match-ups may or may not be dysfunctional. On the other hand, the field of criminology tends to treat APD as so synonymous, in fact, with criminal behavior that practically all convicted criminals (65-75%) have it, with criminologists often referring to it as a "wastebasket" category. Antisocials come is all shapes and sizes, and psychologists consider the juvenile version of it to be a juvenile conduct disorder. The main characteristic of it is a complete and utter disregard for the rights of others and the rules of society. They seldom show anxiety and don't feel guilt. Although many people would hope that there's an effective treatment, there's really no effective treatment for them other than locking them up in a secure facility with such rigid rules that they cannot talk their way out. A full list of APD traits would include:

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<tr>
<th>List of Antisocial Personality Disorder Traits</th>
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<tr>
<td>Sense of entitlement; Unremorseful; Apathetic to others; Unconscionable behavior; Blameful of others; Manipulative and conning; Affectively cold; Disparate understanding; Socially irresponsible; Disregardful of obligations; Nonconforming to norms; Irresponsible</td>
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whereas the DSM-IV "clinical" features of Antisocial Personality Disorder (with a person having at least three of these characteristics) are:

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<th>Clinical Symptoms for an Antisocial Personality Disorder Diagnosis</th>
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<td>1. Failure to conform to social norms; 2. Deceitfulness, manipulativeness; 3. Impulsivity, failure to plan ahead; 4. Irritability, aggressiveness; 5. Reckless disregard for the safety of self or others; 6. Consistent irresponsibility; 7. Lack of remorse after having hurt, mistreated, or stolen from another person</td>
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Sociopathy

is chiefly characterized by something wrong with the person's conscience. They either don't have one, it's full of holes like Swiss cheese, or they are somehow able to completely neutralize or negate any sense of conscience or future time perspective. Sociopaths only care about fulfilling their own needs and desires - selfishness and egocentricity to the extreme. Everything and everybody else is mentally twisted around in their minds as objects
to be used in fulfilling their own needs and desires. They often believe they are doing something good for society, or at least nothing that bad. The term "sociopath" is frequently used by psychologists and sociologists alike in referring to persons whose unsociized character is due primarily to parental failures (usually fatherlessness) rather than an inherent feature of temperament. Lykken (1995), for example, clearly distinguishes between the sociopath (who is socialized into becoming a psychopath) and a "true" psychopath (who is born that way). However, this may only describe the "common sociopath", as there are at least four (4) different subtypes -- common, alienated, aggressive, and dyssocial. Commons are characterized mostly by their lack of conscience; the alienated by their inability to love or be loved; aggressives by a consistent sadistic streak; and dyssocials by an ability to abide by gang rules, as long as those rules are the wrong rules. As Stout (2005) indicates, it only takes three of the following to be defined as a sociopath, and some common sociopathic traits include:

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<td>Egocentricity; Callousness; Impulsivity; Conscience defect; Exaggerated sexuality; Excessive boasting; Risk taking; Inability to resist temptation; Antagonistic, deprecating attitude toward the opposite sex; Lack of interest in bonding with a mate</td>
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**Psychopathy**

is a concept subject to much debate, but is usually defined as a constellation of affective, interpersonal, and behavioral characteristics including egocentricity; impulsivity; irresponsibility; shallow emotions; lack of empathy, guilt, or remorse; pathological lying; manipulativeness; and the persistent violation of social norms and expectations (Cleckley 1976; Hare 1993). The crimes of psychopaths are usually stone-cold, remorseless killings for no apparent reason. They cold-bloodedly take what they want and do as they please without the slightest sense of guilt or regret. In many ways, they are natural-born interspecies predators who satisfy their lust for power and control by charm, manipulation, intimidation, and violence. While almost all societies would regard them as criminals (the exception being frontier or warlike societies where they might become heroes, patriots, or leaders), it's important to distinguish their behavior from criminal behavior. As a common axiom goes in psychology, **MOST PSYCHOPATHS ARE ANTISOCIAL PERSONALITIES BUT NOT ALL ANTISOCIAL PERSONALITIES ARE PSYCHOPATHS.** This is because APD is defined mainly by behaviors (Factor 2 antisocial behaviors) and doesn't tap the affective/interpersonal dimensions (Factor 1 core psychopathic features, narcissism) of psychopathy. Further, criminals and APDs tend to "age out" of crime; psychopaths do not, and are at high risk of recidivism. Psychopaths love to intellectualize in treatment with their half-baked understanding of rules. Like the Star Trek character, Spock, their reasoning cannot handle any mix of cognition and emotion. They are calculating predators who, when trapped, will attempt escape, create a nuisance and danger to staff, be a disruptive influence on other patients or inmates, and fake symptoms to get transferred, bouncing back and forth between institutions. The common features of psychopathic traits (the PCL-R items) are:

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<td>Glib and superficial charm; Grandiose sense of self-worth; Need for stimulation; Pathological lying; Conning and manipulativeness; Lack of remorse or guilt; Shallow affect; Callousness and lack of empathy; Parasitic lifestyle; Poor behavioral controls; Promiscuous sexual behavior; Early behavior problems; Lack of realistic, long-term goals; Impulsivity; Irresponsibility; Failure to accept responsibility for own actions; Many short-term marital relationships; Juvenile delinquency; Revocation of conditional release; Criminal versatility</td>
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In addition to these most well-known types, there have been criminologists who have put forward additional constructs. They are only mentioned here because of their relevance to serial criminals, and the interesting similarity in the way they compare to the FBI's "disorganized - organized" typology.
### Disorganized Episodic Aggression:  
<table>
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<th>Ritualistic behavior</th>
<th>Superficial charm and &quot;good&quot; intelligence</th>
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<tr>
<td>Attempts to conceal mental instability</td>
<td>Absence of delusions and other signs of irrational behavior</td>
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<td>Compulsivity</td>
<td>Absence of &quot;nervousness&quot; or psychoneurotic manifestations</td>
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<td>Periodic search for help</td>
<td>Unreliability</td>
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<td>Severe memory disorders and an inability to tell the truth</td>
<td>Untruthfulness and insincerity</td>
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<td>Suicidal tendencies</td>
<td>Lack of remorse or shame</td>
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<td>History of committing assault</td>
<td>Inadequately motivated antisocial behavior</td>
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<td>Hypersexuality and abnormal sexual behavior</td>
<td>Poor judgment and failure to learn by experience</td>
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<td>Head injuries; injuries suffered at birth</td>
<td>Pathological egocentricity and incapacity for love</td>
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<tr>
<td>History of chronic drug or alcohol abuse</td>
<td>General poverty in major affective reactions</td>
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<tr>
<td>Parents with history of chronic drug or alcohol abuse</td>
<td>Specific loss of insight</td>
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<tr>
<td>Victim of childhood physical or mental abuse</td>
<td>Unresponsiveness in general interpersonal relations</td>
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<tr>
<td>Result of an unwanted pregnancy</td>
<td>Fantastic and uninviting behavior with and sometimes without drink</td>
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<tr>
<td>Product of a difficult gestation for mother</td>
<td>Suicide rarely carried out</td>
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<tr>
<td>Unhappiness in childhood resulted in inability to find happiness</td>
<td>Sex life impersonal, trivial, and poorly integrated</td>
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<tr>
<td>Extraordinary cruelty to animals</td>
<td>Failure to follow any life plan</td>
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<td>Attraction to arson without homicidal interest</td>
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<td>Symptoms of neurological impairment</td>
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<td>Evidence of genetic disorder</td>
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<td>Biochemical symptoms</td>
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<td>Feelings of powerlessness and inadequacy</td>
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The patterns of episodic aggressive behavior scale is derived from Joel Norris (1990) *Serial Killers*, London: Arrow Books and also reproduced in Brian Lane & Wilfred Gregg (1992) *The Encyclopedia of Serial Killers*, NY: Berkeley Books. This particular sociopathic checklist is found in numerous places but extensively featured in both of Samenow's works in the 1970s on criminal personality (thinking errors).

### DETAILED ANALYSIS OF ANTISOCIAL PERSONALITY DISORDER

The diagnosis of APD has long been controversial. The criteria for it seem to change with each and every new edition of the *Diagnostic and Statistical Manual of Mental Disorders* (DSM-I 1968; DSM-II 1976; DSM-III 1980; DSM-III-R 1987; DSM-IV 1994). The diagnosis was substantially changed with DSM-III when the APA decided to distinguish between child and adult characteristics, and essentially substituted behavioral criteria (like truancy or law violations) for personality criteria (like callousness and selfishness). In the DSM-III-R (R for Revised), the focus was on violence and a list of violent acts (fighting, cruelty to others, cruelty to animals). The current DSM-IV approach essentially says that anything which is not sociopathy, psychopathy or dyssocial personality disorder is antisocial personality disorder, but there is considerable overlap. The diagnostic possibilities are endless; there are at least 3 million possible variations of symptoms on at least 62 different measurable items.

Ongoing research is quite prolific into the factor or principal components analysis of APD characteristics. Most forensic experts believe there are 3-4 factors (groupings of symptoms). One factor involves symptoms that
cluster around what might be called a Lack of Planning (promiscuous, irresponsible, impulsive traits and behavior). Another factor clusters around the notion of Disregard for Others. A third factor is clearly related to Adult Criminality. A fourth factor is clearly related to Juvenile Delinquency. **Impulsivity** appears to be a prototypical (core) feature, but it can take many forms. Definitions of impulsivity are numerous -- a tendency to act without reflection; dysfunctional information processing; a tendency for risk taking; sensation seeking; and an inability to sustain attention. Rating scales are easily available to measure these.

The incidence of APD is twice as high for inner-city residents than in small towns or rural areas, and five times higher in males than in females. It affects people in all social classes, but if someone with APD is born into a family of wealth and privilege, they will usually manage to eek out a successful business or political career. Poorer people with APD tend to wind up in state prison systems. Since African-Americans are seven times more likely to be represented in state prison systems, it's tempting to speculate the incidence of APD among African-Americans is high. However, there are most likely other causes of crime among African-Americans (like unemployment and racism). The fact is that most of the current prison population, white or black, shares the APD diagnosis. All it takes is a juvenile record, an adult offense career, aggressivity, impulsivity, a checkered work history, and/or lack of demonstrable repentance. These can be easily found in almost any prison inmate's dossier.

One of the things closely related to APD is the **comorbidity** of alcoholism and narcotic addiction. Some of the criteria for a substance abuse disorder are very similar: theft, hazardous behavior, failure to fulfill role functions in home, school, and work. A strong correlation exists between substance abuse and factor 2 (antisocial behaviors) of the psychopathy construct. APDs with a drug addiction have some serious substance abuse problems -- the kind that lead to death by overdose or accident within five years. Are APD and narcotic addiction part of the same disorder, does one lead to the other, or are they spuriously linked together? From what little research there is, it appears that most of the time, APD precedes narcotic addiction, although some of the time, addiction leads to APD behaviors. People with such comorbid characteristics also usually have undiagnosed other Axis I and Axis II disorders.

**DETAILED ANALYSIS OF THE SOCIOPATH**

From the wild Irish slums of the 19th Century Eastern seaboard to the riot-torn anomic neighborhoods of Los Angeles, our society has always produced sociopaths who are quite often the products of illegitimacy, broken homes, and a lack of any bonding with male or societal authority. Some 70% of sociopaths come from fatherless homes. Father absence produces many consequences similar to the symptoms of sociopathy -- early, precocious sexuality; antagonistic, deprecating attitude toward the opposite sex; lack of interest in bonding with a durable, stable mate; aggressive acting-out; excessive boasting; and risk-taking behavior. Some 30% of children today are born out-of-wedlock, and another 30% live in divorced homes. These conditions - a problem of unsocialization - produce sociopathy. Furthermore, sociopaths tend to reproduce themselves, that is, they produce more than own their share of illegitimate offspring themselves.

So what is a sociopath? You won't find criteria in the DSM IV or official psychiatric nomenclature, but the construct refers to the largest subgroup of APDs. Most are males, but an increasing number are female. They have otherwise normal temperaments (as opposed to psychopaths who have abnormal temperaments). Some are aggressive, fearless sensation seekers, and others are Machiavellian manipulators. A Machiavellian is a personality type who is a cross between an antisocial personality and a narcissist, and someone who also has an extremely high sense of entitlement. The one thing that all sociopaths have in common is that they are "too much" to handle for their parents or anyone else. It's common to refer to them as unsocialized, but the dyssocial sociopath does socialize to the mores and values of a dyssocial outgroup, like a gang. Let's explore the four (4) subtypes of sociopaths:

**COMMON SOCIOPATHS** are the largest subtype and have a weak or unelaborated conscience. They are not ashamed by the same things as you or I would be ashamed of. They are like feral children grown up, taking pleasures and gratifying impulses at every opportunity or temptation. They especially enjoy and take pride in bending or breaking the rules. As teenagers, they are often runaways. As adults, they are often geographically mobile, living in shelters, or taking advantage of welfare systems. They are experienced shoplifters. They have
quite active sex lives. They are usually of average intelligence, but don't do well in school and never seem to break out of low-paying dead-end jobs. Nevertheless, they seem genuinely happy with their lives, unburdened by any sense of negative self-worth or the fact that they have not been a functional, contributing member of society.

ALIENATED SOCIOPATHS have never developed the ability to love, empathize, or affiliate in real life with another person. They will show more emotion toward their pet or a personal artifact than toward a person. Or, they may hate animals and live out their emotional life by watching TV (identification with soap opera characters is a common pattern). Dating and marriage relationships will be very barren and empty. They won't get along with the neighbors. They live in a shell. They have a cold, callous attitude toward human suffering or any social problem in the society they live in. They just don't care because it's outside their range of empathy. Most will believe they are justified in this because they feel they were cheated in some way themselves by society, and a few will be more than happy to rant and rave about it to anyone who listens. They are chronic complainers, and underneath it all, they would like to see nothing better than all of society destroyed.

AGGRESSIVE SOCIOPATHS derive strong, yet nonperverse gratification from harming others. They like to hurt, frighten, tyrannize, bully, and manipulate. They do it for a sense of power and control, and will often only drop subtle hints about what they are up to. They polish their aggressive, domineering manner in such a way to disguise any intimidation others might feel. They seek out positions of power, such as parent, teacher, bureaucrat, supervisor, or police officer. Their style is one of passive aggression as they systematically go about sabotaging the ideas of others to get their ideas in place. In their spare time, they like to hunt or occasionally do sadistic things like find stray dogs and cut them up. They are usually effective at getting their way, and are especially vindictive if resisted or crossed. They don't follow the social norm of reciprocity like others do.

DYSSOCIAL SOCIOPATHS identify and hold an allegiance with a dyssocial, outcast, or predatory subculture. Any subculture will do, as long as it runs counter to established authority. They are capable of intense loyalty, and even a feeling of guilt and shame, within such limited circles. They seem to continually fall upon bad luck and bad companions, however. While they will constantly complain that none of this is their fault, behind it all is a kind of self-defeating mechanism in the poor choices they made themselves.

DETAILED ANALYSIS OF THE PSYCHOPATH

Psychopaths cannot be understood in terms of antisocial rearing or development. They are simply morally depraved individuals who represent the "monsters" in our society. They are unstoppable and untreatable predators whose violence is planned, purposeful and emotionless. The violence continues until it reaches a plateau at age 50 or so, then tapers off. Their emotionlessness reflects a detached, fearless, and possibly dissociated state, revealing a lower autonomic nervous system and lack of anxiety. It's difficult to say what motivates them - control and dominance possibly - since their life history will usually show no bonds with others nor much rhyme to their reason (other than the planning of violence). They tend to operate with a grandiose demeanor, an attitude of entitlement, an insatiable appetite, and a tendency toward sadism. Fearlessness is probably the prototypical (core) characteristic (the low-fear hypothesis). It's helpful to think of them as high-speed vehicles with ineffective brakes. Certain organic (brain) disorders and hormonal imbalances mimic the state of mind of a psychopath.

There are four (4) different subtypes of psychopaths. The oldest distinction was made by Cleckley back in 1941 between primary and secondary. However, we'll explore the other two subtypes first:

DISTEMPERED PSYCHOPATHS are the kind that seem to fly into a rage or frenzy more easily and more often than other subtypes. Their frenzy will resemble an epileptic fit. They are also usually men with incredibly strong sex drives, capable of astonishing feats of sexual energy, and seemingly obsessed by sexual urges during a large part of their waking lives. Powerful cravings also seem to characterize them, as in drug addiction, kleptomania, pedophilia, any illicit or illegal indulgence. They like the endorphin "high" or "rush" off of excitement and risk-taking. The serial-rapist-murderer known as the Boston Strangler was such a psychopath.

CHARISMATIC PSYCHOPATHS are charming, attractive liars. They are usually gifted at some talent or another, and they use it to their advantage in manipulating others. They are usually fast-talkers, and possess an almost demonic ability to persuade others out of everything they own, even their lives. Leaders of religious sects
or cults, for example, might be psychopaths if they lead their followers to their deaths. This subtype often comes to believe in their own fictions. They are irresistible.

PRIMARY PSYCHOPATHS do not respond to punishment, apprehension, stress, or disapproval. They seem to be able to inhibit their antisocial impulses most of the time, not because of conscience, but because it suits their purpose at the time. Words do not seem to have the same meaning for them as they do for us. In fact, it's unclear if they even grasp the meaning of their own words, a condition that Cleckley called "semantic aphasia." They don't follow any life plan, and it seems as if they are incapable of experiencing any genuine emotion.

SECONDARY PSYCHOPATHS are risk-takers, but are also more likely to be stress-reactive, worriers, and guilt-prone. They expose themselves to more stress than the average person, but they are as vulnerable to stress as the average person. They are daring, adventurous, unconventional people who began playing by their own rules early in life. They are strongly driven by a desire to escape or avoid pain, but are unable to resist temptation. As their anxiety increases toward some forbidden object, so does their attraction to it. They live their lives by the lure of temptation.

Hare's PCL-R 20-item checklist is based on Cleckley's 16-item checklist, and the following is a discussion of the concepts in the PCL-R:

1. GLIB and SUPERFICIAL CHARM -- the tendency to be smooth, engaging, charming, slick, and verbally facile. Psychopathic charm is not in the least shy, self-conscious, or afraid to say anything. A psychopath never gets tongue-tied. They have freed themselves from the social conventions about taking turns in talking, for example.

2. GRANDIOSE SELF-WORTH -- a grossly inflated view of one's abilities and self-worth, self-assured, opinionated, cocky, a braggart. Psychopaths are arrogant people who believe they are superior human beings.

3. NEED FOR STIMULATION or PRONENESS TO BOREDOM -- an excessive need for novel, thrilling, and exciting stimulation; taking chances and doing things that are risky. Psychopaths often have a low self-discipline in carrying tasks through to completion because they get bored easily. They fail to work at the same job for any length of time, for example, or to finish tasks that they consider dull or routine.

4. PATHOLOGICAL LYING -- can be moderate or high; in moderate form, they will be shrewd, crafty, cunning, sly, and clever; in extreme form, they will be deceptive, deceitful, underhanded, unscrupulous, manipulative, and dishonest.

5. CONNING AND MANIPULATIVENESS- the use of deceit and deception to cheat, con, or defraud others for personal gain; distinguished from Item #4 in the degree to which exploitation and callous ruthlessness is present, as reflected in a lack of concern for the feelings and suffering of one's victims.

6. LACK OF REMORSE OR GUILT -- a lack of feelings or concern for the losses, pain, and suffering of victims; a tendency to be unconcerned, dispassionate, coldhearted, and unempathic. This item is usually demonstrated by a disdain for one's victims.

7. SHALLOW AFFECT -- emotional poverty or a limited range or depth of feelings; interpersonal coldness in spite of signs of open gregariousness.

8. CALLOUSNESS and LACK OF EMPATHY -- a lack of feelings toward people in general; cold, contemptuous, inconsiderate, and tactless.

9. PARASITIC LIFESTYLE -- an intentional, manipulative, selfish, and exploitative financial dependence on others as reflected in a lack of motivation, low self-discipline, and inability to begin or complete responsibilities.

10. POOR BEHAVIORAL CONTROLS -- expressions of irritability, annoyance, impatience, threats, aggression, and verbal abuse; inadequate control of anger and temper; acting hastily.
11. PROMISCUOUS SEXUAL BEHAVIOR -- a variety of brief, superficial relations, numerous affairs, and an indiscriminate selection of sexual partners; the maintenance of several relationships at the same time; a history of attempts to sexually coerce others into sexual activity or taking great pride at discussing sexual exploits or conquests.

12. EARLY BEHAVIOR PROBLEMS -- a variety of behaviors prior to age 13, including lying, theft, cheating, vandalism, bullying, sexual activity, fire-setting, glue-sniffing, alcohol use, and running away from home.

13. LACK OF REALISTIC, LONG-TERM GOALS -- an inability or persistent failure to develop and execute long-term plans and goals; a nomadic existence, aimless, lacking direction in life.

14. IMPULSIVITY -- the occurrence of behaviors that are unpremeditated and lack reflection or planning; inability to resist temptation, frustrations, and urges; a lack of deliberation without considering the consequences; foolhardy, rash, unpredictable, erratic, and reckless.

15. IRRESPONSIBILITY -- repeated failure to fulfill or honor obligations and commitments; such as not paying bills, defaulting on loans, performing sloppy work, being absent or late to work, failing to honor contractual agreements.

16. FAILURE TO ACCEPT RESPONSIBILITY FOR OWN ACTIONS -- a failure to accept responsibility for one's actions reflected in low conscientiousness, an absence of dutifulness, antagonistic manipulation, denial of responsibility, and an effort to manipulate others through this denial.

17. MANY SHORT-TERM MARITAL RELATIONSHIPS -- a lack of commitment to a long-term relationship reflected in inconsistent, undependable, and unreliable commitments in life, including marital.

18. JUVENILE DELINQUENCY -- behavior problems between the ages of 13-18; mostly behaviors that are crimes or clearly involve aspects of antagonism, exploitation, aggression, manipulation, or a callous, ruthless tough-mindedness.

19. REVOCATION OF CONDITION RELEASE -- a revocation of probation or other conditional release due to technical violations, such as carelessness, low deliberation, or failing to appear.

20. CRIMINAL VERSATILITY -- a diversity of types of criminal offenses, regardless if the person has been arrested or convicted for them; taking great pride at getting away with crimes.

INTERNET RESOURCES
The Antisocial Personality Disorder Homepage
Can Criminal Psychopaths be Identified?
Dr. Hare's Psychopathy/Antisocial Personality Confusion article
Dr. Stanton Samenow's Home Page
The Internet Danger Zone: Psychopaths or Sociopaths

PRINTED RESOURCES


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**Syllabus for JUS 428**

**Syllabus for JUS 415 (Forensic Psychology)**

**MegaLinks in Criminal Justice**