

Behavioural and outcome differences in children with Callous-unemotional traits (CU) compared to children with non-CU traits

Professor Essi Viding

Developmental Risk and Resilience Unit,

Division of Psychology and Language Sciences,

University College London

e.viding@ucl.ac.uk



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Abbreviations

- CD = Conduct Disorder
 - Diagnosis
- CP = Conduct Problems
 - Dimensional measurement
- CU = Callous-Unemotional traits
 - Dimensional measurement
- AB = Antisocial Behaviour
 - Dimensional measurement

Individuals with psychopathy

- Typically the most violent and persistent offenders
- Account for more than their fair share of offences

The public perception of a psychopath is often that of cold-blooded serial killer....

Ted Bundy's description of himself:

"..the most cold-hearted son of a bitch you'll ever meet."

Ted Bundy's defense lawyer's decription of him:

"Ted, was the very definition of heartless evil."



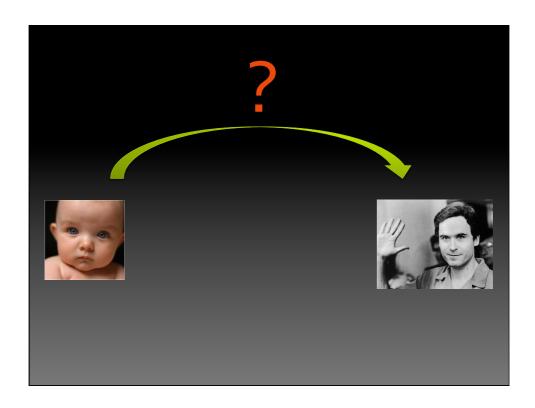
Ted Bundy

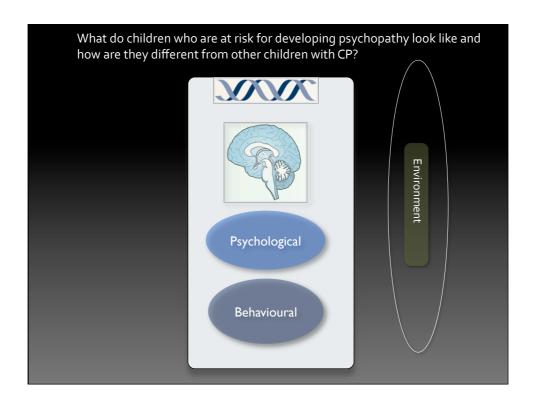
...but the vast majority of psychopaths are not serial killers.

However, all psychopaths are characterised by a number of defining, core features that set them apart from other individuals with antisocial behaviour:

- Lack of remorse or guilt
- Shallow affect (genuine emotion is shortlived and egocentric)
- Superficial charm
- · Grandiose sense of self-worth
- · Pathological lying
- Manipulation of others







Nine year old Jeffrey Bailey

- Pushed a toddler into the deep end of a motel swimming pool in Florida
- As the boy struggled and sank to the bottom, pulled up a chair to watch.
- No remorse, stated that he wanted to see someone drown
- Seemed to enjoy being the center of attention during the trial for the case

Of course, in most children the signs are subtler



Prof Paul Frick (quoted with permission):

"Most kids, if you catch them stealing a cookie from the jar before dinner, they'll look guilty - they want the cookie, but they also feel bad. Even kids with severe ADHD: they may have poor impulse control, but they still feel bad when they realize that their mom is mad at them."

"Callous-unemotional children are unrepentant. They don't care if someone is mad at them, they don't care if they hurt someone's feelings. Like adult psychopaths, they seem to lack basic concern for others. If they can get what they want without being cruel, that's often easier, but at the end of the day, they'll do whatever works best."

Early behavioural warning signs of children at risk for psychopathy: Lack of remorse and guilt Callous lack of empathy Shallow affect Manipulation of others for own gain Thinks is more important than others

Antisocial Process Screening Device Frick & Hare (2001) http://www.hare.org/scales/apsd.html • Based on the Hare Psychopathy Checklist-Revised • The child is rated on a dimensional scale that probes the characteristic psychopathic pattern of interpersonal, affective, and behavioral symptoms. — Callous-Unemotional Traits — Narcissism — Impulsivity • In addition to the parent (APSD-P), teacher (APSD-T), and combined forms (APSD-C).

• Research suggests that CU traits in particular characterise a DISTINCT subgroup of children with conduct problems (Frick & Viding, 2009, Frick et al., 2013)

Inventory of callous-unemotional traits

- http://www.psyc.uno.edu/Frick%2oLab/ICU.html
- The Inventory of Callous-Unemotional Traits (ICU) is a copyright protected 24-item questionnaire designed to provide a comprehensive assessment of callous and unemotional traits.
- There are five versions of the scale:
 Youth Self-Report, Parent Report, Teacher Report, Parent
 Report (Preschool Version), and Teacher Report (Preschool
 Version).

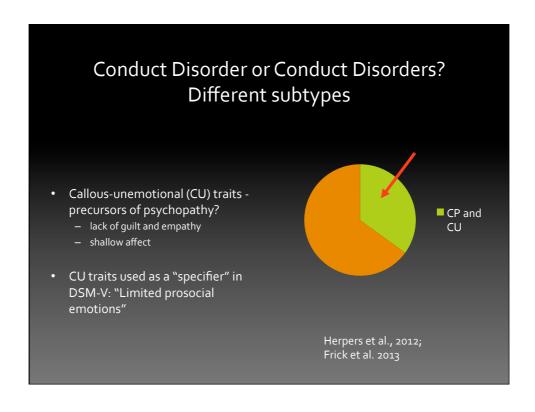
Inventory of callous-unemotional traits

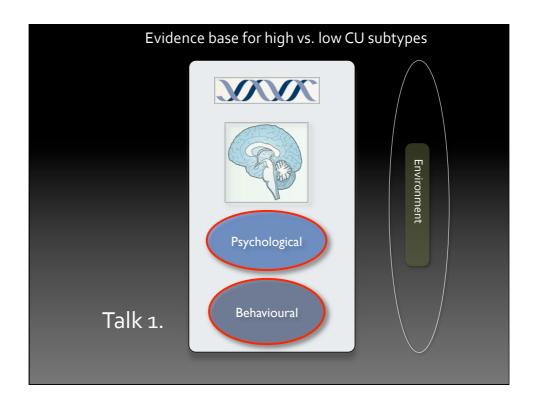
- Researchers can download and use the ICU free of charge in their work.
- Paul Frick requests that copies of any publications using the ICU are sent to him at pfrick@uno.edu.
- There is no manual for the ICU. Several studies which describe the development of the scale, its subscale structure, and initial tests of its validity can be downloaded from Paul Frick's webpage.

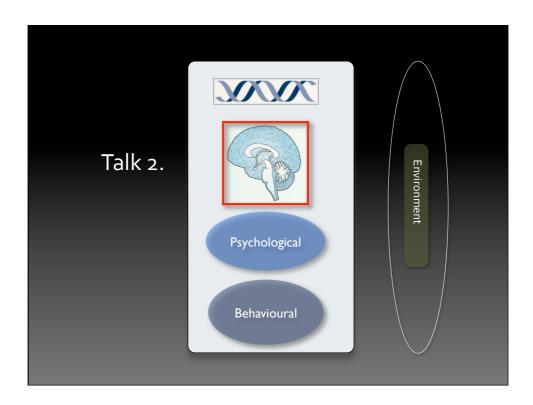
Example items from ICU

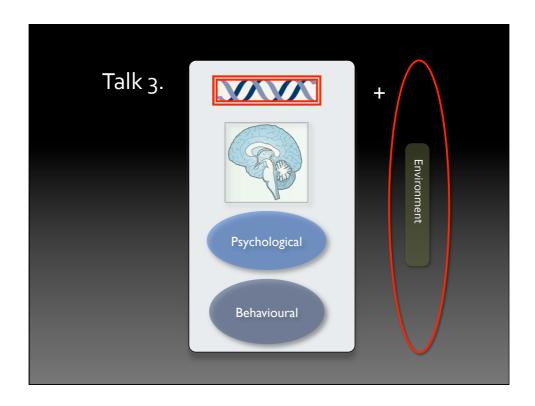
- 1. Expresses his/her feelings openly.
- 4. Does not care who he/she hurts to get what he/she wants.
- 5. Feels bad or guilty when he/she has done something wrong.
- 9. Does not care if he/she is in trouble.
- 12. Seems very cold and uncaring.
- 18. Shows no remorse when he/she has done something wrong.
- 21. The feelings of others are unimportant to him/her.
- 24. Does things to make others feel good.

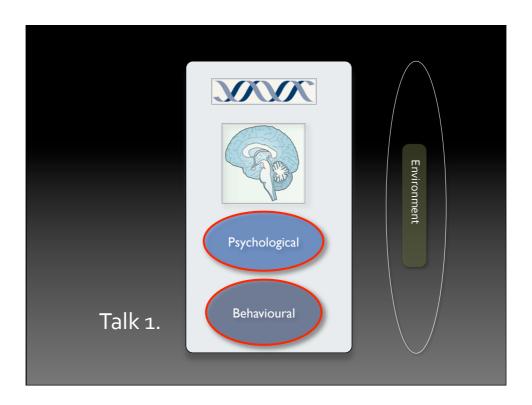
- Other instruments also in use, e.g.
 Psychopathy Checklist Youth Version in
 incarcerated juvenile samples; Youth
 Psychopathy Inventory (self and other ratings)
- My group has used CU scale from APSD or ICU in research; we use these scales dimensionally or for subtyping (we take the median split ICU score)











Christian et al. (1997)

- Within clinic-referred children ages 6-13, CU traits designated a more severely disturbed group of children with conduct disorder
 - Children with CU traits were less worried about the impact of their behaviour on others

Dadds et al. (2005)

- Within a community sample of young children (ages 4-9), all of whom would be childhood-onset, CU traits formed a separate factor from conduct problems
- CU traits also predicted more severe antisocial behavior one year later controlling for the initial level of conduct problems

Hawes & Dadds (2005)

 Children with CU traits did not respond to some standard behaviour management approaches (e.g. 'Time Out')

Loeber et al. (2005)

• In a sample of high risk boys followed into adulthood, CU traits predicted a higher likelihood of being a violent offender, even controlling for an onset of delinquency by age 10

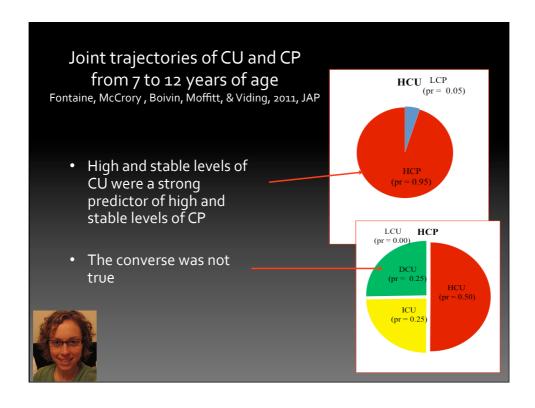
Viding et al. (2009)

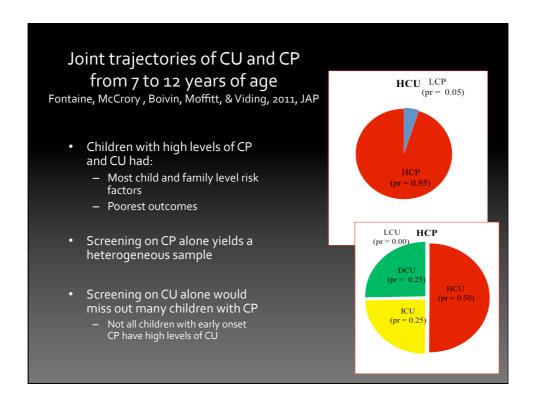
- In young adolescents, CU traits predicted bullying
 - Both independently and in combination with conduct problems

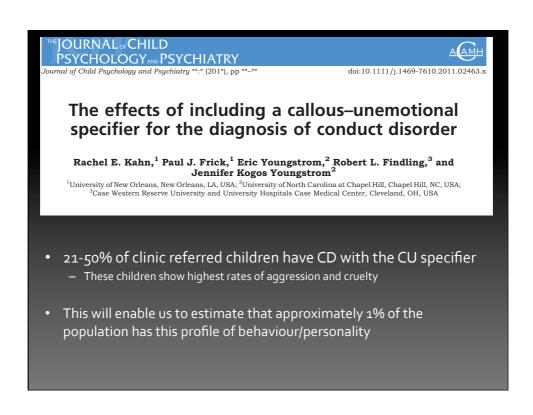
Pardini et al. (2003)

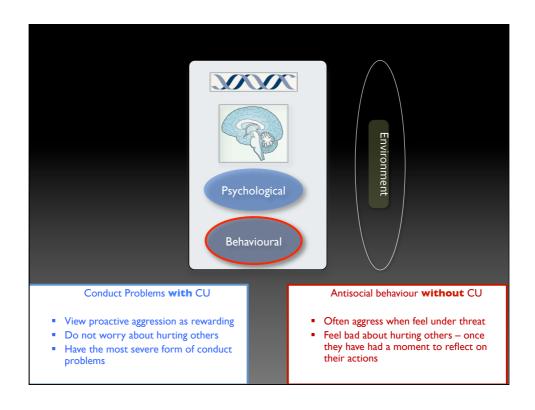
• Children with CU traits view proactive aggression as rewarding – means to an end

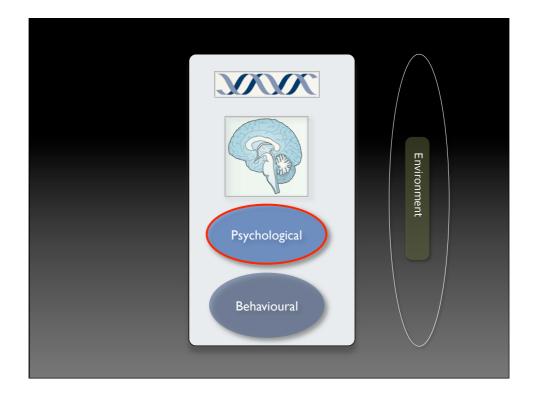












- Equifinality: The same behaviour can be driven by different vulnerabilities
- Charting the information processing profile of different subgroups of children with conduct problems may offer valuable insight regarding intervention strategies



Affective processing

- Children with CP and high CU traits:
 - Atypical processing of other people's distress (fear and sadness); possibly also happiness and disgust
 - Report feeling less fear themselves
 - Are less reactive to punishment in standard learning tasks and in intervention settings



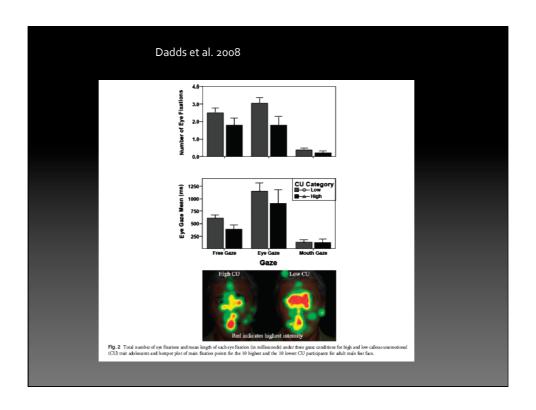
Herpers et al., 2013 Jones et al., 2010; Marsh et al., 2010; Hawes & Dadds, 2005

Affective processing Children with CP and low CU traits: Hostile Attribution Bias Oversensitive to perceived anger (sometimes even when stimuli are neutral) Frick & Viding, 2009; Dadds et al., 2006; Dadds et al., 2008; Penton-Voak et al., 2013



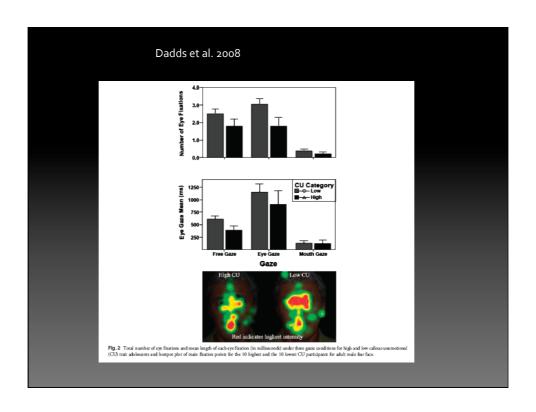






Eye contact with attachment figures

- Children with high levels of CU look less in attachment figures' eyes (Dadds et al., 2011; 2012; 2013)
 - Both under naturalistic and standardised conditions
- Mothers seek out eye contact (i.e. not different from mothers of low CU children), the effect driven by children
 - May miss out on critical developmental interactions that boost empathy development



Children with CP and high CU traits have normal theory of mind abilities.





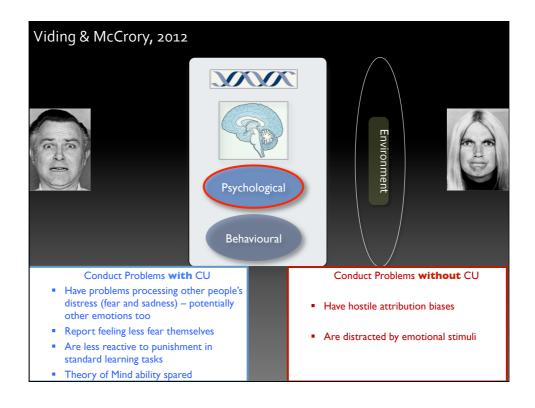
Journal of Child Psychology and Psychiatry 51:11 (2010), pp 1188–1197

doi:10.1111/j.1469-7610.2010.02280.x

Feeling, caring, knowing: different types of empathy deficit in boys with psychopathic tendencies and autism spectrum disorder

Alice P. Jones, 1,2 Francesca G.E. Happé, 3 Francesca Gilbert, 2 Stephanie Burnett, 4 and Essi Viding 2

Replicated and extended by Schwenck et al. (2011)



Should we subtype children with conduct problems based on callous-unemotional traits?

- Children with high CU can be reliably identified using current rating scale measures
- The DSM-V specifier also reliably identifies these children
- Nearly two decades of research (by different research groups, in different countries) indicates that children with high and low CU:
 - are behaviourally different; those with high CU have a poor prognosis
 - show differential response to some treatments
 - have different cognitive/affective profile