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The role of psychopathic traits among intimate partner-violent men: A systematic review

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ABSTRACT: Preventing intimate partner violence (IPV) requires effective batterer intervention programs. Although psychopathy seems to be a key variable for successful treatment, little is known about the role of psychopathic traits among male IPV perpetrators. Therefore, a systematic review of all empirical quantitative studies ($N = 41$) on the relationship between psychopathic traits and male-to-female IPV perpetration was carried out. Overall, the findings from these studies supported the role of psychopathy as a robust predictor of male-to-female IPV perpetration among both convicted and non-convicted partner-violent men. Male batterers do not seem to be a homogeneous group in terms of their psychopathic traits. The existence of a batterer subtype consistent with successful psychopathy and its implications for treatment outcomes should be further examined. Although psychopathy seems to be a useful variable to predict frequency of IPV (and then, IPV recidivism), this construct seems to fail to predict IPV severity. Further research is necessary to clarify the role of psychopathic traits on IPV risk assessment. Methodological deficiencies, mainly related to psychopathy measurement, have been evidenced. Alternative psychopathy assessment tools that exclude criminality/antisociality as diagnostic criteria are recommended.

KEYWORDS: Intimate partner violence, Batterer, Psychopathy, Psychopathic traits, Systematic review.

El rol de los rasgos psicopáticos entre agresores de pareja: Una revisión sistemática

RESUMEN: La prevención de la violencia en la pareja (IPV) exige un tratamiento efectivo de los agresores. Aunque la psicopatía parece ser una variable clave para el éxito del tratamiento, poco se sabe sobre el rol de la psicopatía entre agresores de pareja. Se ha realizado una revisión sistemática de artículos empíricos cuantitativos ($N = 41$) sobre la relación entre psicopatía y la comisión de IPV. En general, los resultados apoyaron el rol de la psicopatía como un fuerte predictor de IPV, tanto entre agresores de pareja condenados como no condenados. Los agresores de pareja no parecen ser un grupo homogéneo en términos de psicopatía. La existencia de un subtipo de agresor consistente con el psicópata de éxito y sus implicaciones para el tratamiento deberían ser estudiadas en profundidad. Aunque la psicopatía parece ser una variable útil para predecir la frecuencia de IPV, este constructo parece fallar a la hora de predecir la gravedad de IPV. Se necesita más investigación para clarificar el rol de la psicopatía en la evaluación del riesgo de IPV. Se han detectado deficiencias metodológicas, principalmente relacionadas con la medición de la psicopatía. Se recomiendan instrumentos de evaluación alternativos, los cuales excluyan la criminalidad/antisocialidad como criterio diagnóstico.

PALABRAS CLAVE: Violencia en la pareja, Agresor de pareja, Psicopatía, Rasgos psicopáticos, Revisión sistemática.

Preventing intimate partner violence (IPV) requires coordinated actions in the criminal justice and social service response systems, such as services and advocacy programs for victims and effective batterer intervention programs

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(BIPs; Aaron & Beaulaurier, 2016). Previous meta-analysis about the efficacy of BIPs suggest a minimal impact of BIP on reducing recidivism (Arias, Arce, & Vilariño, 2013; Babcock, Green, & Robie, 2004; Feder & Wilson, 2005). BIPs' effectiveness depends not only on the context of the intervention but also on both the therapist and offenders' characteristics (Carbajosa, Boira, & Tomás-Aragónés, 2013; Carbajosa, Catalá-Miñana, Lila, & Gracia, 2017; Sjödin, Wallinius, Billstedt, Hofvander, & Nilsson,

2017). The literature suggests that the offenders' characteristics as psychopathic traits are a key variable for successful treatment (Richards et al., 2016). Psychopathic individuals show less motivation to change and are likely to deceive and manipulate the therapist, to have problems during treatment and to drop out of treatment (Richards et al., 2016; Salekin, Worley, & Grimes, 2010). These negative treatment outcomes lead to therapeutic pessimism; however, the belief that the psychopath is untreatable seems to have little scientific support (Salekin, 2002). It is likely that conventional intervention strategies are ineffective to treat psychopaths because they learn better techniques to manipulate others (Moreira, Almeida, Pinto, & Fávero, 2014). Instead, some authors suspect that specific interventions that take psychopathic traits into consideration might have a positive impact on treatment outcomes (Felthous, 2015; Reidy, Kearns, & DeGue, 2013); recent studies implementing alternative and specific intervention programs targeted at psychopathic individuals have obtained encouraging results (Burt, Olver, & Wong, 2016; Dargis, Mattern, & Newman, 2017). Thus, research targeted at the identification of psychopathic batterers is imperative to design effective, specific BIPs for psychopathic batterers.

Psychopathy remains a controversial construct (Scott, 2014): there is still disagreement today over the essential or "core" psychopathic traits (Miller, Lamkin, Maples-Keller, & Lynam, 2016). This construct has been commonly defined as a personality disorder characterized by a cluster of interpersonal, affective, and lifestyle traits. However, while some authors consider that antisociality/criminality is a fundamental component of the psychopathy construct (Hare, 2016), other contemporary researchers (Skeem & Cooke, 2010) note that antisocial traits are a mere correlate or consequence of psychopathy and thus should not be included as diagnostic criteria to assess psychopathy.

The conceptual confusion surrounding psychopathy has raised a debate about whether antisocial traits are necessary diagnostic criteria in psychopathy assessment. The Psychopathy Checklist—Revised (PCL-R; Hare, 2003), the international psychopathy assessment tool most commonly used in both adult forensic and clinical samples (Hare, 2016), includes the measurement of antisocial features. Based on

PCL-R, other scales such as the Psychopathy Checklist: Screening Version (PCL-SV; Hart, Cox, & Hare, 1995) or the Self-Report of Psychopathy (SRP; Paulhus, Neumann, & Hare, 2016) have been developed. PCL-R and PCL-SV application requires the combination of information from semi-structured interviews and file records (Hare, 2003; Hart et al., 1995). Unlike Hare's model of psychopathy, alternative psychopathy measurements have been proposed that exclude criminal/antisocial behavior as diagnostic criteria and are thus able to differentiate psychopathic from antisocial traits (Evans & Tully, 2016). The Psychopathy Personality Inventory-Revised (PPI-R; Lilienfeld & Widows, 2005) or the alternative 13-item PCL-R based on the 3-factor hierarchical model (Cooke, Michie, & Skeem, 2007; Pérez, Herrero, Velasco, & Rodríguez-Díaz, 2015) are two of these instruments. Hare's PCL-R and alternative psychopathy measures seem to assess the same underlying construct regardless of they include antisocial or criminal behavior as diagnostic criteria (Salvador, Arce, Rodríguez-Díaz, & Seijo, 2017). Regardless of the model employed to assess psychopathic traits, this construct can be measured from both a categorical and dimensional approach.

Although there have been theoretical studies examining the role of psychopathic traits in partner-violent men (Huss, Covell, & Langhinrichsen-Rohling, 2006; Huss & Langhinrichsen-Rohling, 2000; Juodis, Starzomski, Porter, & Woodworth, 2014b), to date, there has been no systematic review that uses explicit methods to identify, select, and critically appraise relevant research and to collect and analyze data from this research (Moher, Liberati, Tetzlaff, Altman, & The PRISMA Group, 2009). Despite a large body of literature suggesting the strong predictive power of psychopathy on dangerousness—violent and aggressive behavior (Hecht, Berg, Lilienfeld, & Latzman, 2016; Reidy et al., 2015), violent criminal behavior (Dil & Kazmi, 2016; Wiklund, Ruchkin, Kuposov, & Af Klinteberg, 2014), recidivism (Richards et al., 2016; Sturup, Karlberg, Fredriksson, Lihoff, & Kristiansson, 2016), and even violent recidivism (Richards et al., 2016; Sitney, Caldwell, & Caldwell, 2016)—little is known about the role of psychopathic traits in IPV perpetration. Although traditional batterer typologies have suggested that psychopaths could belong to a specific batterer subtype—type

1 batterers, proposed by Gottman et al. (1995), and Jacobson and Gottman (1998), or generally violent/antisocial (GVA) batterers, proposed by Holtzworth-Munroe and Stuart (1994)—further empirical studies testing these hypotheses are necessary.

A systematic review of the role of psychopathic traits in male-to-female IPV perpetration would help to (a) highlight future directions for research about batterer typologies, (b) underscore the need to take into account psychopathy traits for risk management, and (c) provide recommendations for designing specific BIPs for psychopathic batterers. The aim of this systematic review is to examine the role of psychopathic traits to predict male-to-female IPV perpetration and to differentiate among male batterer subtypes, paying special attention to the type of samples analyzed and the assessment tools used to measure psychopathy.

METHOD

A systematic review was carried out in accordance with PRISMA guidelines (Moher et al., 2009) in order to identify peer-reviewed papers that empirically examined the role of psychopathic traits in male-to-female IPV perpetration. For inclusion in this review, no constraints were placed on the publication date (the only limiting factor was the starting points of the databases themselves) or language. However, restrictions were put in place as to document type, limiting the search to empirical quantitative articles. For a full list of inclusion and exclusion criteria for identification of relevant literature in this review, see Table 1.

•SEARCH STRATEGY AND ARTICLE SELECTION

Literature searches were performed in three different bibliographic databases (PsycINFO, Scopus, and Web of Science [WoS: All databases, specifically WoS Core Collection, Current Contents Connect, Derwent Innovations Index, KCI Korean Journal Database, MEDLINE, Russian Science Citation Index, and SciELO Citation Index]). The following combination of keywords (always in quotation marks) was entered into the different databases: (“Psychopathy” OR “Psychopathic”) AND (“Intimate Partner Violence” OR “IPV” OR “Partner abuse” OR “Male

Table 1
Inclusion and exclusion criteria

| Studies included (were) | Studies excluded (were) |
|--|---|
| Empirical quantitative studies | •Book chapters |
| | •Phd Theses/dissertations |
| | •Editorials |
| | •Congress abstracts |
| | •Theoretical and meta-analytic studies |
| | •Empirical qualitative studies |
| Conducted with adult men violent against their female partners or studies which assessed male-to-female IPV in adulthood | •Conducted with experienced clinicians in IPV field |
| | •Conducted with adolescents (adolescent dating violence was excluded) |
| | •Conducted with women (studies which assessed gender differences, exclusively based on self-report of battered women or conducted with female IPV perpetrators were excluded) |
| | •Conducted with children exposed to IPV or paternal antisocial personality |
| Published (in any language) before September 2017 | |
| Conducted in any setting (e.g., inmates, intervention programs participants or community sample) | |
| Studies which assessed psychopathy in adulthood | |
| Note: IPV = intimate partner violence | |

batterers” OR “Male perpetrator” OR “Spouse abuse” OR “Family Violence” OR “Domestic Violence”). Search strategies were adapted to the different databases (see Figure 1 for the search outputs used in each database). An additional nine relevant articles were selected through a manual search of authors’ personal collections. These were not previously identified because neither their author nor the databases had provided keywords related to psychopathy. Researches support hand-searching efforts as supplemental approach to increase the quality of systematic reviews (Richards, 2008; Vassar, Atakpo, & Kash, 2016). The literature search in this review comprised 41 articles from 1988 to 2017. The last update was performed in December 2017. For an overview of the study selection process, see Figure 1.

• CLASSIFICATION OF OUTCOMES

The role of psychopathic traits in male-to-female IPV perpetration was analyzed according to three criteria: (a) the aim of the studies, depending on whether the role of psychopathy to predict IPV perpetration or to establish batterer

typologies was analyzed, (b) the type of samples used —non-convicted partner-violent men from community/clinical samples or convicted male batterers from forensic/prison samples—, and (c) the approach used to measure psychopathy —according to Hare’s model of psychopathy or alternative psychopathy assessment tools—.

RESULTS

• DESCRIPTION OF THE INCLUDED STUDIES

AIM OF STUDIES. Twenty-six studies examined the role of psychopathy in predicting IPV perpetration, namely, either the differences between IPV and non-IPV men on psychopathic traits were investigated or the predictive power of psychopathy on IPV perpetration was analyzed. Additionally, nineteen studies analyzed the role of psychopathic traits to establish or differentiate among batterer typologies, namely, batterer subtypes were compared on psychopathic traits (see Table 2).

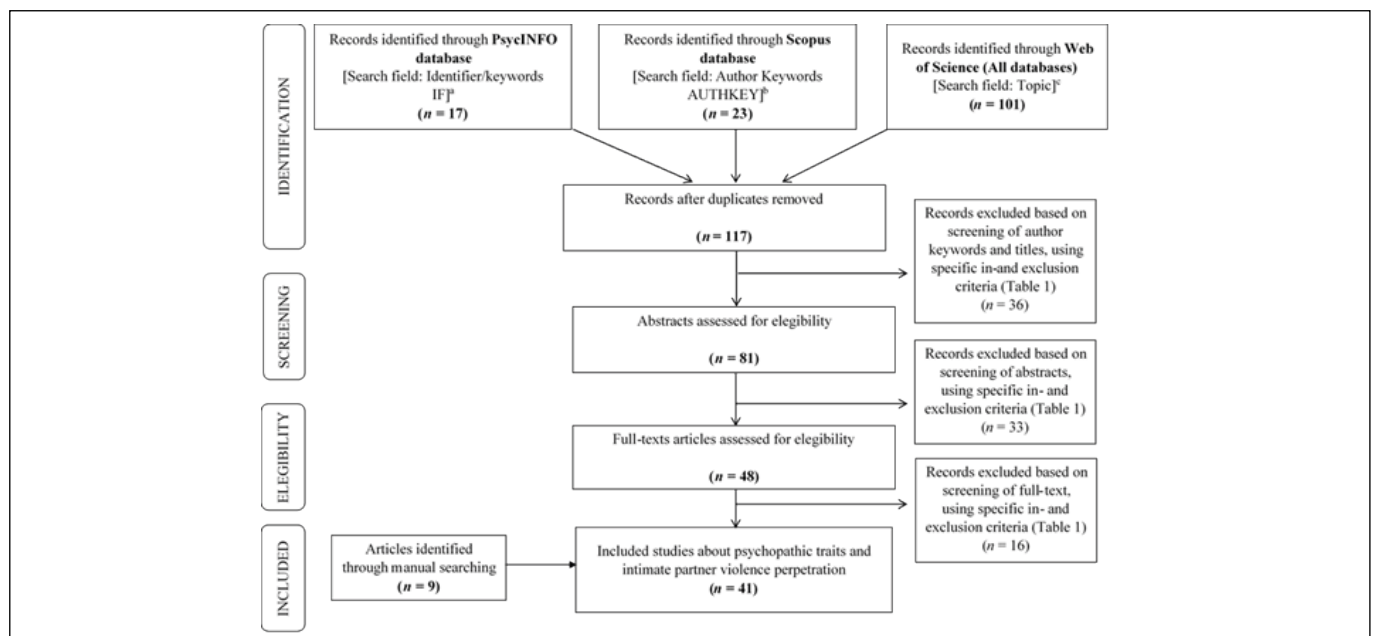


Figure 1: Summary of study selection process. ^aThe search output used in PsycINFO: (if (“Psychopathy” OR “Psychopathic”) AND (if (“Intimate Partner Violence” OR “Partner abuse” OR “Male batterers” OR “Male perpetrators” OR “Spouse abuse” OR “Family violence” OR “Domestic violence” OR “IPV”)) AND rtype.exact (“Journal Article”). ^bThe search output used in Scopus: AUTHKEY (“Psychopathy” OR “Psychopathic”) AND AUTHKEY (“Intimate Partner Violence” OR “Partner abuse” OR “Male batterers” OR “Male perpetrators” OR “Spouse abuse” OR “Family violence” OR “Domestic violence” OR “IPV”) AND (LIMIT-TO (DOCTYPE, “ar”)). ^cThe search output used in WoS (All databases): Topic: (“Psychopathy” OR “Psychopathic”) AND Topic: (“Intimate Partner Violence” OR “Partner abuse” OR “Male batterers” OR “Male perpetrators” OR “Spouse abuse” OR “Family violence” OR “Domestic violence” OR “IPV”), Refined by: Type of document: (ARTICLE)

Table 2
Description of included studies (N=41)

| | <i>n</i> | % |
|---|----------|-------|
| Aim of studies^a | | |
| To examine the role of psychopathy in predicting IPV perpetration | 26 | 63.41 |
| To examine the role of psychopathy in establishing batterer typologies | 19 | 46.34 |
| Sample of studies | | |
| Non-convicted partner-violent men from community or clinical samples | 20 | 48.78 |
| Convicted male batterers on probation or sentenced for IPV to prison or BIPs from forensic or prison samples | 21 | 51.22 |
| Approach of psychopathy measurement | | |
| Psychopathy assessment tools according Hare's model (including antisocial traits as diagnostic criteria) | 34 | 82.93 |
| Alternative psychopathy assessment tools (excluding antisocial traits as diagnostic criteria) | 7 | 17.07 |
| Language of studies | | |
| English | 40 | 97.56 |
| Spanish | 1 | 2.44 |
| Note: a The total amount resulting from the addition of two aims is more than 100% because an article can set both aims | | |

SAMPLES OF STUDIES. Twenty studies were conducted with non-convicted partner-violent men from community or clinical samples. In this case, the veracity of IPV depended on self- or partner-report measures. Another twenty-one studies were conducted with convicted male batterers on probation or sentenced for IPV to prison or BIPs from forensic or prison samples. Unlike in the previous group, in this case, IPV had been proven through judicial procedure (see Table 2).

Language of studies. Most studies ($n = 40$) was written in English (see Table 2). The remaining study was written in Spanish (Fernández-Montalvo & Echeburúa, 2008).

Approach of psychopathy measurement. Due to the observed variability with respect to the measurement of this construct, psychopathy assessment tools were analyzed more exhaustively (see Table 2). Most studies measured psychopathy using assessment tools that included antisocial traits as diagnostic criteria. Specifically, scales derived from the PCL-R were the most common psychopathy measurement. The PCL-R (Hare, 2003) was used by 10 (24%) of the included studies. Nevertheless, only Swogger et al. (2007, 2012) scored PCL-R items from semi-structured interviews and file review, as recommended by the PCL-R manual (Hare,

2003). Old and different versions of SRP (Neal & Sellbom, 2012) were used in 9 studies (22%), and the PCL-SV (Hart et al., 1995) was used by 5 (12%) of the included studies. Again, only Huss and Langhinrichsen-Rohling (2006) and Mager et al. (2014) followed the PCL-SV manual's recommendations (Hart et al., 1995). Apart from PCL-R and its derivatives, other self-report assessment tools and traditional personality inventories were also used to assess psychopathy, including antisocial traits as diagnostic criteria.

In contrast, only seven studies measured psychopathy excluding antisocial traits as diagnostic criteria. The Psychopathic Personality Inventory (PPI; Lilienfeld & Hess, 2001) and the Youth Psychopathic trait Inventory (YPI; Andershed, Kerr, Stattin, & Levander, 2002) were used in three of the included studies. Other researchers decided to exclude items related to criminality/antisociality from conventional psychopathy assessment tools (Babcock et al., 2008; Marshall and Holtzworth-Munroe, 2010; Walsh et al., 2010; Wymbs et al., 2017). It is remarkable that only one study conducted with a convicted sample (Stanford et al., 2008) excluded antisocial traits as diagnostic criteria. Studies that measured psychopathy excluding antisocial features also reported a positive significant association between

psychopathy and IPV perpetration, which supported the role of core psychopathic traits (regardless of antisocial traits) on IPV perpetration.

Additionally, the majority of studies conceptualized the psychopathy in dimensional terms. Only ten studies (Belfrage & Rying, 2004; Chase et al., 2001; Echeburúa & Fernández-Montalvo, 2007; Fernández-Montalvo & Echeburúa, 2008; Fournoy & Wilson, 1991; Gondolf & White, 2001; Hale et al., 1988; Huss & Langhinrichsen-Rohling, 2006; Juodis et al., 2014a; Kalichman, 1988) used a categorical approach and provided data on the prevalence of psychopathic traits. Great variability was found regarding the prevalence rates of psychopathy, which ranged from 4 to 56%, due to methodological differences between the studies, such as the variety of psychopathy assessment tools, the different cut-off scores assumed, and the unequal severity level of the samples (IPV homicide perpetrators vs. batterers in BIPs).

•THE ROLE OF PSYCHOPATHY TO PREDICT MALE-TO-FEMALE IPV PERPETRATION

Twenty-six studies examined the role of psychopathy to predict IPV perpetration among non-convicted partner-violent men (see Table 3; Babcock, Green, & Webb, 2008; Babcock, Green, Webb, & Yerington, 2005; Bates, Archer, & Graham-Kevan, 2017; Coyne, Nelson, Graham-Kevan, Keister, & Grant, 2010; Holtzworth-Munroe, Meehan, Herron, Rehman, & Stuart, 2000; Iyican, Sommer, Kini, & Babcock, 2015; Kiire, 2017; Mager, Bresin, & Verona, 2014; Marshall & Holtzworth-Munroe, 2010; Okano, Langille, & Walsh, 2016; Panuzio et al., 2006; Theobald, Farrington, Coid, & Piquero, 2015; Thornton, Graham-Kevan, & Archer, 2016; Walsh et al., 2010; Wymbs, Dawson, Suhr, Bunford, & Gidycz, 2017) and convicted male batterers (see Table 4; Cunha & Gonçalves, 2013; Harris, Hilton, & Rice, 2011; Hilton, Harris, & Rice, 2001; Hilton, Harris, Rice, Houghton, & Eke, 2008; Hornsveld, Bezuijen, Leenaars, & Kraaimaat, 2008; Juodis, Starzomski, Porter, & Woodworth, 2014a; Kalichman, 1988; Rock, Sellbom, Ben-Porath, & Salekin, 2013; Swogger, Walsh, & Kosson, 2007; Swogger,

Walsh, Kosson, Cashman-Brown, & Caine 2012; Taft, Murphy, Musser, & Remington, 2004).

•EVIDENCE FROM STUDIES CONDUCTED WITH NON-CONVICTED PARTNER-VIOLENT MEN

Overall, studies underscored a significant positive small-to-moderate correlation ($.19 \leq r \leq .39$) between psychopathy and IPV perpetration (Babcock et al., 2005; Bates et al., 2017; Coyne et al., 2010; Iyican et al., 2015; Kiire, 2017; Marshall & Holtzworth-Munroe, 2010; Thornton et al., 2016).

When more complex analyses were carried out, similar findings were found regarding the role of global psychopathy as a predictor of IPV perpetration (Kiire, 2017; Okano et al., 2016). Fast life history strategies (Kiire, 2017) mediated the relationship between psychopathy and IPV perpetration: psychopaths tend to establish short-term relationships, which in turn were associated with involvement in IPV (Kiire, 2017). However, psychopathy did not impact the level of inter-partner agreement for physical and psychological IPV (Panuzio et al., 2006).

Regarding the so-called core personality psychopathic traits, interpersonal and affective psychopathic traits seemed to predict IPV perpetration (Marshall & Holtzworth-Munroe, 2010). Diminished sensitivity to their female partners' expressions of happiness mediated the relationship between core psychopathic traits and IPV perpetration (Marshall & Holtzworth-Munroe, 2010): Psychopaths labelled neutral and positive emotions as provocative, which were associated with IPV perpetration. Contradictory findings were found about the predictive capability of core psychopathic traits on specific physical IPV perpetration. Some studies suggested that high levels of interpersonal/affective psychopathic traits were associated with physical IPV perpetration (Bates et al., 2017; Mager et al., 2014). However, when men's anger and self-control (Thornton et al., 2016) and exposure to media aggression (Coyne et al., 2010) were controlled, Factor 1 did not show an effect on physical IPV perpetration. Coyne et al. (2010) revealed an association between primary psychopathy and psychological but not physical IPV perpetration. In contrast, Wymbs et al. (2017) found the opposite result: primary

psychopathy was associated with physical but not psychological IPV perpetration.

Regarding the behavioral psychopathic traits, all studies reported a relationship between these lifestyle/antisocial psychopathic traits and physical IPV perpetration (Bates et al., 2017; Coyne et al., 2010; Mager et al., 2014). Additionally, a strong association between high levels of Factor 2 of psychopathy and mutually physical IPV was underscored (Mager et al., 2014). Conflicting findings were found when specific lifestyle traits were analyzed separately (Theobald et al., 2015; Thornton et al., 2016).

Finally, when the levels of psychopathic traits were compared between partner-violent men and non-violent men, conflicting results were achieved: while Babcock et al. (2005, 2008), Holtzworth-Munroe et al. (2000), and Walsh et al. (2010) failed to demonstrate the utility of psychopathy to identify partner-violent men among community samples (non-violent men were as psychopathic as some subtype of partner-violent men), Theobald et al. (2015) reported higher levels of psychopathic traits among partner-violent than non-violent men.

• EVIDENCE FROM STUDIES CONDUCTED WITH CONVICTED MALE BATTERERS

Again, among convicted male batterers, most studies evidenced a significant positive small-to-moderate correlation ($.22 \leq r \leq .39$) between psychopathy and male-to-female IPV perpetration (Harris et al., 2011; Hilton et al., 2008; Rock et al., 2013; Taft et al., 2004).

The majority of these studies aimed to compare male batterers with other offenders who had never committed offenses against their partners. Apparently contradictory results were identified (Hilton et al., 2001; Kalichman, 1988), probably due to methodological differences between the reviewed studies related to the variety of psychopathy assessment tools or the lack of prior equality between groups in terms of their level of generalized violence. When batterers were matched to other violent offenders, research suggested that IPV perpetrators displayed lower levels of psychopathy than the other offenders (Hilton et al., 2001; Juodis et al., 2014a). However, these differences could actually be due to differences in Factor 2 but not Factor 1 of psychopathy

(Hornsveld et al., 2008); that is, batterers could have exhibited the same core psychopathic traits but fewer behavioral psychopathic features than other violent offenders. This hypothesis would be consistent with Swogger et al. (2007), who, after controlling violent charges and matching the sample in terms of antisocial traits, found that high levels of affective traits and low levels of lifestyle psychopathic traits predicted IPV perpetration, namely, batterers displayed a more adaptive lifestyle than non-batterers. Later, Swogger et al. (2012) evidenced a significant relationship between childhood physical abuse victimization and adulthood IPV perpetration at moderate-high levels of lifestyle psychopathic traits.

• THE ROLE OF PSYCHOPATHY IN BATTERER TYPOLOGIES

Nineteen studies examined the role of psychopathy to establish batterer typologies or differentiate among batterer subtypes using samples composed of non-convicted partner-violent men (see Table 3; Babcock, Green, Webb, & Graham, 2004; Babcock et al., 2005, 2008; Chase, O'Leary, & Heyman, 2001; Hale, Zimostad, Duckworth, & Nicholas, 1988; Holtzworth-Munroe, Meehan, Herron, Rehman, & Stuart, 2003; Holtzworth-Munroe et al., 2000; Meehan, Holtzworth-Munroe, & Herron, 2001; Theobald et al., 2015; Walsh et al., 2010) and convicted male batterers (see Table 4; Cunha & Gonçalves, 2013; Echeburúa & Fernández-Montalvo, 2007; Eckhardt, Samper, & Murphy, 2008; Fernández-Montalvo & Echeburúa, 2008; Gondolf & White, 2001; Huss & Langhinrichsen-Rohling, 2006; Lawson, Brossart, & Shefferman, 2010; Murphy, Taft, & Eckhardt, 2007; Stanford, Houston, & Baldrige, 2008).

• EVIDENCE FROM STUDIES CONDUCTED WITH NON-CONVICTED PARTNER-VIOLENT MEN.

Psychopathy was commonly used to examine the differences among batterer subtypes. Psychopathy failed to differentiate among batterer subtypes according the traditional batterer typologies. First, both Babcock et al. (2004) and Meehan et al. (2001) reported that psychopathy was not a useful variable to differentiate between the type 1 and type 2 batterers proposed by

Table 3

Empirical quantitative studies about the role of psychopathic traits on intimate partner violence (IPV) perpetration among non-convicted partner-violent men ($n = 20$; 49% of the included studies)

| Paper | Sample | Assessment | Relevant findings |
|-----------------------|---|---|---|
| Babcock et al. (2004) | <p>Couples ($N = 102$) from community sample^a</p> <ul style="list-style-type: none"> • Target groups: clinical ($n = 50$) and low ($n = 22$) level violent men • Control group: non intimate partner-violent men ($n = 30$) <p>Target and control groups were created based on both self- and female partner-reports on male-to-female IPV (CTS2): clinical level (at least six minor, two moderate or one severe male-to-female IPV act in the past year), low level (at least one minor or moderate male-to-female IPV act in the past year), and control group (no male-to-female IPV in the past 5 years and no serious violence ever)</p> <p>100% male (couples) Mean men's age (SD): 32 (9.6)</p> | <p>P: SRP-II IPV: CTS2 (self- and female partner-reports)</p> | <p>Clinical level violent men were classified as heart rate decelerators (type 1 batterers; $n = 9$) and heart rate accelerators (type 2 batterers; $n = 41$) based on heart rate reactivity during marital interaction.</p> <p>Role of psychopathic traits to differentiate among batterer subtypes: Not significant differences between type 1 and type 2 batterers on psychopathy. MANOVA</p> |
| Babcock et al. (2005) | <p>Couples ($N = 102$) from community sample^a</p> <ul style="list-style-type: none"> • Target group: severely ($n = 35$) and low-level ($n = 37$) violent men • Control group: non intimate partner-violent men ($n = 30$) <p>Target and control groups were created based on both self- and female partner-reports on male-to-female IPV (CTS2): severely violent (at least one severe male-to-female IPV act in the past year), low level (at least one no severe male-to-female IPV act in the past year), and control group (no male-to-female IPV in the past 5 years and no serious violence ever)</p> <p>100% male (couples) Mean men's age (SD): 32 (9.6)</p> | <p>P: SRP-II IPV: CTS2 (self- and female partner-reports)</p> | <p>Predictive power of psychopathic traits on IPV perpetration: Significant correlation between psychopathy and physical IPV partner-reported ($r = .23$; $p < .05$), physical IPV self-reported ($r = .33$; $p < .01$), and psychological IPV self-reported ($r = .39$; $p < .001$), but not psychological IPV partner-reported ($r = .19$; $p = n.s.$).</p> <p>Bivariate correlations Not significant differences between non-IPV men and the two IPV men subgroups and on psychopathy, $F(2,97) = 1.25$, $p = n.s.$</p> <p>MANOVA, controlled for age and marital satisfaction Role of psychopathic traits to differentiate among batterer subtypes: Not significant differences between severely violent and low-level violent batterers on psychopathy, $F(2,97) = 1.25$, $p = n.s.$</p> <p>MANOVA, controlled for age and marital satisfaction</p> |
| Babcock et al. (2008) | <p>Couples ($N = 101$) from community sample^a</p> <ul style="list-style-type: none"> • Target group: domestically violent men ($n = 69$) • Control group: non intimate partner-violent men ($n = 32$) <p>Target and control groups were created based on both self- and female partner-reports on male-to-female IPV (CTS2): target group (one male-to-female IPV act in the past year) and control group (no male-to-female IPV in the past 5 years and no serious violence ever)</p> <p>100% male (couples) Mean men's age (SD): 32 (9.6)</p> | <p>P: SRP-II IPV: CTS2 (self- and female partner-reports)</p> | <p>Predictive power of psychopathic traits on IPV perpetration: Not significant differences between non-IPV men and the all IPV men subgroups on psychopathy Factor 1. MANOVA</p> <p>Role of psychopathic traits to establish batterer typologies: Target group were classified based on CTS2 partner-report, borderline personality, psychopathy Factor 1, and general violence: FO ($n = 43$), BD ($n = 14$) and GVP ($n = 12$) batterers.</p> <p>Cluster analytic techniques Significant differences between BD and GVP batterers on psychopathy Factor 1, $F(3,97) = 6.17$, $p < .01$ (GVP > BD). MANOVA</p> |

Table 3 (Continuation)

Empirical quantitative studies about the role of psychopathic traits on intimate partner violence (IPV) perpetration among non-convicted partner-violent men ($n = 20$; 49% of the included studies)

| Paper | Sample | Assessment | Relevant findings |
|---------------------|--|--|---|
| Bates et al. (2017) | STUDY 3: University sample ($N = 364$) Non control group composed by non IPV perpetrators 44% male Mean men's age (SD): 25.78 (nr) | P: LSRP IPV: CTS physical aggression scale | RESULTS FOR MEN: Predictive power of psychopathic traits on IPV perpetration: Significant correlation between physical IPV perpetration and primary psychopathy ($r = .27$; $p < .001$), and secondary psychopathy ($r = .26$; $p < .001$). Zero-Order correlations Significant main effect of primary (only for men), and secondary (for both men and women, $\beta = .14$, $SE = .04$, $\chi^2 = 10.97$, $p < .05$ —not significant interaction between sex and secondary psychopathy—) psychopathy on physical IPV perpetration. Negative binomial regression analysis |
| Chase et al. (2001) | Clinical sample composed by men who were self-referred to BIP ($N = 60$) Not control group composed by non IPV perpetrators 100% male Mean age (SD): nr | P: dichotomous score from MCMI-II (narcissistic and antisocial subscales) IPV: CTS (all participants had reported 2 male-to-female IPV acts in the past year) | Prevalence of psychopathy among male batterers in BIP: 17% (based on MCMI-II Narcissistic and Antisocial base rate scores > 85). Partner-violent men were classified as reactive ($n = 37$) and proactive ($n = 23$) based on impulsivity-intentionality of IPV and affectivity/physiological arousal prior to and during IPV. Role of psychopathic traits to differentiate among batterer subtypes: Significant differences between reactive and proactive batterers on psychopathy, $\chi^2(1,60) = 6.89$, $p < .01$: 0% of reactive, and 17% of proactive IPV men were classified as psychopaths. Group comparison (χ^2 test) |
| Coyne et al. (2010) | University sample ($N = 337$) Non control group composed by non IPV perpetrators 45% male Mean men's age (SD): nr | P: LSRP IPV: CTS physical aggression scale, RRA | RESULTS FOR MEN: Predictive power of psychopathic traits on IPV perpetration: Significant correlation between primary psychopathy and physical ($r = .14$, $p < .10$), and psychological ($r = .26$, $p < .01$) IPV. Significant correlation between secondary psychopathy and physical ($r = .25$, $p < .01$), and psychological ($r = .30$, $p < .001$) IPV. Bivariate correlations Significant relationship between primary psychopathy and psychological ($r = .14$, $p < .10$) but not physical ($r = .00$, $p = n.s.$) IPV. Significant relationship between secondary psychopathy and physical ($r = .21$; $p < .01$), and psychological ($r = .20$; $p < .05$) IPV. Multivariate multiple regressions analysis, controlled for exposure to media (physical and psychological) aggression Exposure to media (physical and psychological) aggression did not mediated the relationship between psychopathy and IPV. Mediation analysis |

Table 3 (Continuation)

Empirical quantitative studies about the role of psychopathic traits on intimate partner violence (IPV) perpetration among non-convicted partner-violent men ($n = 20$; 49% of the included studies)

| Paper | Sample | Assessment | Relevant findings |
|---------------------------------|---|--|---|
| Hale et al. (1988) | Clinical sample composed by men who were self-referred to BIP ($N = 67$) Not control group composed by non IPV perpetrators 100% male Mean age (SD): 31 (nr) | P: MMPI Psychopathic deviate scale IPV: all participants had reported at least one male-to-female physically IPV act | Prevalence of psychopathic deviate among male batterers in BIP: 56% (based on T score > 70 on MMPI psychopathic deviate scale). The mos common MMPI profiles were the combination of psychopathic deviate with depression (19%), schizophrenia (12%), hypomania (9%), and hysteria (7%). Role of psychopathic traits to establish batterer typologies: Batterers were classified based on MMPI validity and clinical (Hypochondriasis, Depression, Hysteria, Psychopathic Deviant, Paranoia, Psychoasthenia, Schizophrenia, and Hypomania) scales: cluster 1 ($n = 7$), cluster 2 ($n = 10$), and cluster 3 ($n = 50$). Cluster analytic techniques Cluster 3 batterers displayed a MMPI profile based on combination of psychopathic deviate and depression. |
| Holtzworth-Munroe et al. (2000) | Couples ($N = 164$) from community sample • Target group: violent husbands ($n = 102$) • Control group: nonviolent husbands ($n = 62$) Target and control groups were created based on both self- and female partner-reports on male-to-female physical IPV (CTS2 item 12): target group (one male-to-female physical IPV act in the past year) and control group (no male-to-female physical IPV act in the past 5 years and no severe violence ever) 100% male (couples) Mean men's age (SD): 35.62 (9.26) | P: SRP IPV: CTS-2, SES, PMWI (self- and female partner-reports) | Target group were classified based on CTS-2 self- and partner-report, general violence, antisociality and fear of abandonment: FO ($n = 37$), LLA ($n = 34$), BD ($n = 15$), and GVA batterers ($n = 16$). Cluster analytic techniques Predictive power of psychopathic traits on IPV perpetration: Significant differences between non-IPV men and GVA and BD batterers but not FO batterers on psychopathy, $F(5,151) = 7.42, p < .001$; (GVA = BD = LLA) > (FO = nonviolent-distressed = nonviolent-nondistresses). ANOVA Role of psychopathic traits to differentiate among batterer subtypes: Significant differences between FO and LLA, BD, GVA batterers on psychopathy, $F(5,151) = 7.42, p < .001$; (GVA = BD = LLA) > FO: GVA batterers displayed the highest score on psychopathy. ANOVA |
| Holtzworth-Munroe et al. (2003) | Violent couples ($N = 102$ at T1) from Holtzworth-Munroe et al. (2000) - community sample Not control group composed by non IPV perpetrators 100% male (couples) Mean men's age (SD): 36.02 (9.52) at T1; T2 and T3 were approximately 1.5 and 3 years after T1, respectively. | P (at T1 and T2): SRP IPV (at T1, T2, and T3): CTS-2, SES, PMWI (self- and female partner-reports) | Four batterer subgroups were obtained at T1 as Holtzworth-Munroe et al. (2000): FO ($n = 37$), LLA ($n = 34$), BD ($n = 15$), and GVA batterers ($n = 16$). Cluster analytic techniques Role of psychopathic traits to differentiate among batterer subtypes: Significant main effect of time on psychopathy, $F(1, 88) = 5.00, p < .03$; across batterer clusters, psychopathy decreased from T1 to T2. Not significant interaction effect of Batterer clusters x Time on psychopathy, $F(3, 88) = 0.42, p = n.s.$; across T1 and T2, (GVA = BD = LLA) > FO, GVA batterers displayed the highest score on psychopathy. ANOVA |

Table 3 (Continuation)

Empirical quantitative studies about the role of psychopathic traits on intimate partner violence (IPV) perpetration among non-convicted partner-violent men ($n = 20$; 49% of the included studies)

| Paper | Sample | Assessment | Relevant findings |
|----------------------|--|--|---|
| Iyican et al. (2015) | <p>Couples ($N = 114$) from community sample</p> <ul style="list-style-type: none"> • Target group: violent couples ($n = 95$) • Control group: non-violent couples ($n = 19$) <p>Target and control groups were created based on female partner's reports on male-to-female IPV (CTS-2): target group (at least two male-to-female IPV act in the past year) and control group (distressed but non-violent) 100% male (couples) Mean men's age (SD): nr</p> | <p>P: PPI-SF IPV: CTS-2 negotiation, physical, and psychological, aggression scales (self- and female partner-reports)</p> | <p>Predictive power of psychopathic traits on IPV perpetration: Significant correlation between self-report of PPI Factor 1 and self-report of physical ($r = .40$; $p < .01$) and psychological IPV ($r = .22$; $p < .05$), but not partner-report of physical ($r = .16$; $p = n. s.$) and psychological IPV ($r = .10$; $p = n. s.$). Significant positive correlation between partner-report of PPI Factor 1 and partner-report of physical ($r = .19$; $p < .05$) and psychological IPV ($r = .30$; $p < .01$), but not self-report of physical ($r = .12$; $p = n. s.$) and psychological IPV ($r = .16$; $p = n. s.$). Not significant correlation between self-report of PPI Factor 2 and self-report of physical ($r = .04$; $p = n. s.$) and psychological IPV ($r = .05$; $p = n. s.$) and partner-report of physical ($r = -.08$; $p = n. s.$) and psychological IPV ($r = -.04$; $p = n. s.$). Significant negative correlation between partner-report of PPI Factor 2 and partner-report of physical ($r = -.21$; $p < .05$) and psychological IPV ($r = -.23$; $p < .05$), but not self-report of physical ($r = .01$; $p = n. s.$) and psychological IPV ($r = .10$; $p = n. s.$). Bivariate correlations Adding female partner's collateral report to self-report of psychopathy does not add incremental validity in predicting IPV (n.s.). Multiple regression analysis</p> |
| Kiire (2017) | <p>University sample ($N = 344$) Not control group composed by non IPV perpetrators 47.09% male Mean men's age (SD): nr</p> | <p>P: SD3J psychopathy subscale IPV: IPV scale perpetration subscale</p> | <p>RESULTS FOR MEN: Predictive power of psychopathic traits on IPV perpetration: Significant correlation between psychopathy and direct IPV ($r = .19$, $p < .05$), indirect IPV ($r = .33$, $p < .01$), control IPV ($r = .14$, $p < .10$), verbal IPV ($r = .29$, $p < .01$), sexual IPV ($r = .37$, $p < .01$), economic IPV ($r = .20$, $p < .05$), stalking IPV ($r = .26$, $p < .01$), and general IPV ($r = .36$, $p < .01$). Bivariate correlations, controlled for men's age Significant main effect of psychopathy on direct IPV ($B = 0.12$, $\beta = 0.25$, $p < .01$, $\Delta R^2 = .05$), indirect IPV ($B = 0.22$, $\beta = 0.37$, $p < .001$, $\Delta R^2 = .13$), verbal IPV ($B = 0.21$, $\beta = 0.27$, $p < .01$, $\Delta R^2 = .09$), sexual IPV ($B = 0.29$, $\beta = 0.35$, $p < .001$, $\Delta R^2 = .16$), economic IPV ($B = 0.10$, $\beta = 0.18$, $p < .05$, $\Delta R^2 = .06$), and stalking IPV ($B = 0.18$, $\beta = 0.28$, $p < .01$, $\Delta R^2 = .09$), but not on control IPV ($B = 0.12$, $\beta = 0.13$, $p = n.s.$, $\Delta R^2 = .02$). Multivariate multiple regression analysis, controlled for men's age, machiavellian and narcissist traits, $R^2 = .30$, $F(28,616) = 1.95$, $p < .01$ Significant main effect of psychopathy on general IPV ($B = 0.18$, $\beta = 0.36$, $p < .001$, $R^2 = .14$). Univariate multiple regression analysis, controlled for men's age, machiavellian and narcissist traits Significant interaction effect of Psychopathy X Life history traits on general IPV —indirect effect— [$\beta = 0.04$, $p < .05$, 95% IC (0.002, 0.09)]. Partial mediation was present. Mediation analysis</p> |

Table 3 (Continuation)

Empirical quantitative studies about the role of psychopathic traits on intimate partner violence (IPV) perpetration among non-convicted partner-violent men ($n = 20$; 49% of the included studies)

| Paper | Sample | Assessment | Relevant findings |
|---------------------------------------|---|---|--|
| Mager et al. (2014) | Clinical and community sample recruited from substance use treatment or community advertisement ($N = 250$) Not control group composed by non IPV perpetrators 57% male Mean men's age (SD): nr | P: PCL-SV (from interview + file records) IPV: CTS2 physical aggression scale (perpetration and victimization) | RESULTS FOR MEN: Predictive power of psychopathic traits on IPV perpetration: Significant interaction effect of Gender X PCL-SV Factor 1 on physical IPV, $b = .13$, $IRR = 1.14$; $\chi^2 = 31.93$, $p < .001$ → Significant main effect of Factor 1 of psychopathy on physical IPV for men, $b = .11$, $IRR = 1.15$; $\chi^2 = 26.56$, $p < .001$. Non-significant interaction effect of Gender X PCL-SV Factor 2 on physical IPV, $b = -.01$, $IRR = 0.99$; $\chi^2 = 0.08$, $p = .776$ → Significant main effect of Factor 2 of psychopathy on physical IPV for overall sample, $b = .03$, $IRR = 1.03$; $\chi^2 = 8.70$, $p = .003$. Poisson regression analysis, controlled for borderline personality and substance use disorder symptoms Significant interaction effect of Gender X PCL-SV Factor 1 X Physical IPV victimization on physical IPV perpetration, $b = .003$, $IRR = 1.00$; $\chi^2 = 8.62$, $p = .003$ → Significant interaction effect of PCL-SV Factor 1 X Physical IPV victimization for men, $b = -.002$, $OR = .998$; $\chi^2 = 3.83$, $p = .050$ → Significant relationship between physical IPV perpetration and victimization at both high ($b = .021$, $\chi^2 = 94.40$, $p < .001$, $IRR = 1.02$) and low ($b = .029$, $\chi^2 = 78.31$, $p < .001$, $IRR = 1.03$) levels of Factor 1 of psychopathy. Significant interaction effect of Gender X PCL-SV Factor 2 X Physical IPV victimization on physical IPV perpetration, $b = .002$, $IRR = 1.00$; $\chi^2 = 10.23$, $p = .001$ → Significant interaction effect of Factor 2 X Physical IPV victimization for men, $b = .002$, $IRR = 1.00$; $\chi^2 = 6.60$, $p < .01$ → the relationship between physical IPV perpetration and victimization was significantly stronger at high ($b = .030$, $\chi^2 = 166.43$, $p < .001$, $IRR = 1.03$) than low ($b = .022$, $\chi^2 = 68.32$, $p < .001$, $IRR = 1.02$) levels of Factor 2 of psychopathy. Poisson regression analysis, controlled for physical IPV victimization, borderline personality and substance use disorder symptoms |
| Marshall and Holtzworth-Munroe (2010) | Couples ($N = 88$) from community sample ^b Not control group composed by non IPV perpetrators 100% male (couples) Mean men's age (SD): 37.1 (9.4) | P: SRP, excluding items related to criminal tendencies IPV: CTS2 (self- and female partner-reports) | Predictive power of psychopathic traits on IPV perpetration: Significant correlation between psychopathy and IPV ($r = .28$, $p = .01$). Bivariate correlations Significant main effect of psychopathy on IPV perpetration, $\beta = .28$, $p < .01$ —direct effect—. Significant main effect of psychopathy on IPV perpetration through sensitivity to wife's expression of fear —indirect effect—, $\beta = .24$, $p < .05$; partial mediation was not present. Significant main effect of psychopathy on IPV perpetration through sensitivity to unfamiliar women's expression of fear —indirect effect—, $\beta = .24$, $p < .05$; partial mediation was not present. Not significant main effect of psychopathy on IPV perpetration through sensitivity to wife's expression of happiness —indirect effect—, $\beta = .19$, $p = n.s.$; partial mediation was present. Mediational analysis |
| Meehan et al. (2001) | Violent couples ($N = 58$) from Holtzworth-Munroe et al. (2000) who had experienced moderate-to-severe levels of IPV based on CTS-2 (at least six minor, two moderate or one severe male-to-female IPV act in the past year) - community sample ^a Non control group composed by non IPV perpetrators 100% male (couples) Mean men's age: nr | P: SRP IPV: CTS-2 (self- and female partner-reports) | Violent men were classified as heart rate decelerators (type 1) and heart rate accelerators (type 2) based on heart rate reactivity during the first 2.5 min [type 1 ($n = 19$); type 2 ($n = 39$)] and 5 [type 1 ($n = 20$); type 2 ($n = 38$)] min of marital interaction. Role of psychopathic traits to differentiate among batterer subtypes: Not significant differences between type 1 and type 2 batterers on psychopathy for 2.5 min reactivity ($p = n. s.$) and for 5 min reactivity ($p = n. s.$). Group comparisons (t test) |

Table 3 (Continuation)

Empirical quantitative studies about the role of psychopathic traits on intimate partner violence (IPV) perpetration among non-convicted partner-violent men ($n = 20$; 49% of the included studies)

| Paper | Sample | Assessment | Relevant findings |
|------------------------|--|--|--|
| Okano et al. (2016) | STUDY 1: Clinical sample ($N = 703$) composed by civil psychiatric patients Non control group composed by non IPV perpetrators 58.75% male Mean men's age (SD): nr | P: PCL-SV IPV: combination of self-report, reports of collateral informants and review of official police and hospital records | RESULTS WERE EQUIVALENT FOR MALES AND FEMALES: Predictive power of psychopathic traits on IPV perpetration: Significant main effect of psychopathy on physical IPV perpetration, $\text{Exp}(B) = 1.08$, $\text{Wald} = 22.14$, $p < .05$, $\Delta R^2 = .04 \rightarrow 20.83\%$ of the lower psychopathy group, and 33.53% of the higher psychopathy group perpetrated IPV. Not significant interaction effect of Psychopathy X Gender on IPV perpetration, $\text{Exp}(B) = 0.98$, $\text{Wald} = 0.47$, $p = \text{n.s.}$, $\Delta R^2 < .01$. Multivariate Logistic Regression Analysis, controlled for gender and alcohol use |
| | STUDY 2: University sample ($N = 870$) Non control group composed by non IPV perpetrators 17.24% male Mean men's age (SD): nr | P: SRP-4 IPV: CTS2 physical aggression scale | RESULTS WERE EQUIVALENT FOR MALES AND FEMALES: Predictive power of psychopathic traits on IPV perpetration: Significant main effect of psychopathy on physical IPV perpetration, $\text{Exp}(B) = 3.14$, $\text{Wald} = 39.41$, $p < .05$, $\Delta R^2 = .06 \rightarrow 29\%$ of the lower psychopathy group, and 42.60% of the higher psychopathy group perpetrated physical IPV. Not significant interaction effect of Psychopathy X Gender on physical IPV perpetration, $\text{Exp}(B) = 0.47$, $\text{Wald} = 1.80$, $p = \text{n.s.}$, $\Delta R^2 < .01$. Multivariate Logistic Regression Analyses, controlled for gender and alcohol use Alcohol use scores did not mediate the association between physical IPV perpetration and psychopathy ($z' = 1.91$, $p = .06$). Mediational analysis |
| Panuzio et al. (2006) | Clinical sample ($N = 303$) composed by men recruited from alcoholism treatment, and their female partners Non control group composed by non IPV perpetrators 100% male (couples) Mean men's age (SD): 43.3 (10.0) | P: CPI socialization scale (higher score, fewer psychopathic traits) IPV: CTS physical and psychological aggression scales (self- and female partner-reports) | RESULTS FOR MEN: Predictive power of psychopathic traits on IPV perpetration: Significant negative correlation between CPI socialization and inter-partner agreement for physical ($r = -.17$; $p < .05$) and psychological IPV ($r = -.18$; $p < .01$). Zero-order correlations Not significant partial association between psychopathy and inter-partner agreement for physical ($r = -.01$; $p = \text{n. s.}$) and psychological IPV ($r = .01$; $p = \text{n. s.}$). Partial correlations, controlled for alcohol problems, relationship adjustment, and antisocial personality disorder Not significant main effect of psychopathy on inter-partner agreement for physical ($\beta = -.02$) and psychological IPV ($\beta = .01$). Multiple regression analyses, controlled for alcohol problems, relationship adjustment, and antisocial personality disorder |
| Theobald et al. (2015) | Couples ($N = 319$) from community sample • Target group: IPV men ($n = 72$): \rightarrow generally violent (both inside and outside the home; $n = 21$) and FO men ($n = 46$) • Control group: non IPV men ($n = 247$) \rightarrow violent convicted only ($n = 23$) and nonviolence ($n = 172$) group Target and control group were created based on combination of self- (at 32 years) and partner- (at 48 years) reports of physical IPV and information on violent convictions 100% male (couples) Mean age (SD): longitudinal study (from 8 to 48 years). IPV was assessed at 32/48 years. | P: PCL-SV (from file records alone) IPV: self-report of physical IPV, and CTS physical aggression scale (female partner's reports) | Predictive power of psychopathic traits on IPV perpetration: Significant differences between IPV and non IPV men on PCL-SV Interpersonal, $t = 2.96$, $p < .01$, $OR = 2.43$, Affective, $t = 2.95$, $p < .01$, $OR = 2.13$, Lifestyle, $t = 4.55$, $p < .001$, $OR = 4.62$, and Antisocial facets, $t = 4.79$, $p < .001$, $OR = 5.53$, Factor 1, $t = 3.60$, $p < .01$, $OR = 3.72$, Factor 2, $t = 5.16$, $p < .01$, $OR = 4.81$, and Total score, $t = 4.87$, $p < .01$, $OR = 4.79$: in all cases, IPV > non IPV men. Group comparisons (t test) Significant relationship between physical IPV and PLC-SV Lifestyle facet ($B = 1.33$, $SE = 0.561$, $p = .018$, $OR = 4.62$). Not significant relationship between physical IPV and PCL-SV Interpersonal ($B = 0.610$, $SE = 0.726$, $p = .401$, $OR = 1.84$), and Affective ($B = 0.241$, $SE = 0.422$, $p = .568$, $OR = 1.27$) facets. Logistic regression analyses, excluding Antisocial facet |

Table 3 (Continuation)

Empirical quantitative studies about the role of psychopathic traits on intimate partner violence (IPV) perpetration among non-convicted partner-violent men ($n = 20$; 49% of the included studies)

| Paper | Sample | Assessment | Relevant findings |
|--|--|--|---|
| Theobald et al. (2015) (Continuación) | Couples ($N = 319$) from community sample • Target group: IPV men ($n = 72$): → generally violent (both inside and outside the home; $n = 21$) and FO men ($n = 46$) • Control group: non IPV men ($n = 247$) → violent convicted only ($n = 23$) and nonviolence ($n = 172$) group Target and control group were created based on combination of self- (at 32 years) and partner- (at 48 years) reports of physical IPV and information on violent convictions 100% male (couples) Mean age (SD): longitudinal study (from 8 to 48 years). IPV was assessed at 32/48 years. | P: PCL-SV (from file records alone) IPV: self-report of physical IPV, and CTS physical aggression scale (female partner's reports) | Role of psychopathic traits to differentiate among batterer subtypes: Significant differences between FO and the other two violent groups (generally violent and violent convicted only) on PCL-SV Interpersonal [$F(2,89) = 5.08, p = .008$], Affective [$F(2,89) = 13.58, p < .001$], Lifestyle [$F(2,89) = 16.00, p < .001$], and Antisocial facets [$F(2,89) = 32.52, p < .001$], Factor 1 [$F(2,89) = 14.21, p < .001$], Factor 2 [$F(2,89) = 35.38, p < .001$], and Total score [$F(2,89) = 13.41, p < .001$]; in all cases, (generally violent = violent convicted only) > FO. ANOVA For generally violent batterer, significant relationship between physical IPV and PCL-SV Affective facet ($B = 1.69, SE = 0.75, p = .024, OR = 5.45$), but not Interpersonal ($B = 1.43, SE = 1.34, p = .288, OR = 4.17$) and Lifestyle ($B = 1.69, SE = 0.97, p = .083, OR = 5.38$) facets. For FO batterer, significant relationship between physical IPV and PLC-SV Affective facet ($B = -1.69, SE = 0.75, p = .024, OR = 5.45$), but not Interpersonal ($B = -1.43, SE = 1.34, p = .288, OR = 4.17$) and Lifestyle ($B = -1.69, SE = 0.97, p = .083, OR = 5.38$) facets. Logistic regression analyses, excluding Antisocial facet |
| Thornton et al. (2016) | University sample ($N = 355$) Not control group composed by non IPV perpetrators 51.83% male Mean men's age (SD): 21.68 (nr) | P: YPI IPV: NVOBS (physical IPV) | RESULTS FOR MEN: Predictive power of psychopathic traits on IPV perpetration: Significant correlation between physical IPV and Factor 1 ($r = .35, p < .001$), and Factor 2 ($r = .26, p < .001$) of psychopathy. Bivariate correlations Not significant main effect of Factor 1 ($B = .01, SE = .01, Wald \chi^2 = 0.65, p = n.s.$) and Factor 2 ($B = .04, SE = .03, Wald \chi^2 = 2.17, p = n.s.$) of psychopathy on physical IPV. Not significant interaction effect of Factor 1 of Psychopathy X Gender ($B = .03, SE = .01, Wald \chi^2 = 3.54, p = n.s.$) and Factor 2 of Psychopathy X Gender ($B = -.04, SE = .04, Wald \chi^2 = 0.92, p = n.s.$) on physical IPV. Binomial Regression Analysis, controlled for gender, anger and self-control |
| Walsh et al. (2010) | Clinical sample ($N = 567$) composed by civil psychiatric patients • Target group: patients with history of IPV perpetration ($n = 231$) • Control group: patients without history of IPV perpetration ($n = 336$) 56.1% male Mean men's age (SD): nr | P: PCL-SV (from interview + file records) IPV: combination of self-report, reports of collateral informants, and review of official police and hospital records | RESULTS FOR MEN: Predictive power of psychopathic traits on IPV perpetration: Not significant differences between non-IPV men and all batterers subgroups on PCL-SV Total [Antisocial > (LP = BD = control group)], Interpersonal [Antisocial > LP > (BD = control group)], Affective facets [Antisocial > (LP = BD = control group)], and Lifestyle facet scores [Antisocial > BD > (LP = control group)]. MANOVA Role of psychopathic traits to establish batterer typologies: Target group were classified based on PCL-SV Interpersonal, Affective, and Lifestyle facets, traits of neuroticism, extraversion, openness to experience, agreeableness and conscientiousness: LP ($n = 51$), BD ($n = 25$), and antisocials ($n = 17$). Cluster analytic techniques among target group Significant differences between antisocial and the other subgroups (LP, BD and control group) on PCL-SV Total [$F(3,314) = 22.02, p = .01$], Interpersonal [$F(3,314) = 23.95, p = .01$], Affective facets [$F(3,314) = 20.48, p = .01$], and Lifestyle facet scores [$F(3,314) = 6.63, p = .01$]: Antisocial batterers displayed significantly higher scores on PCL-SV Total and all facets than other batterers subgroups. MANOVA |

Table 3 (Continuation)

Empirical quantitative studies about the role of psychopathic traits on intimate partner violence (IPV) perpetration among non-convicted partner-violent men ($n = 20$; 49% of the included studies)

| Paper | Sample | Assessment | Relevant findings |
|---------------------|--|--|---|
| Wymbs et al. (2017) | University sample ($N = 433$) 37.2% male Mean men's age (SD): nr | P: LSRP IPV: CTS-2 physical and psychological aggression scales | RESULTS FOR MEN: Predictive power of psychopathic traits on IPV perpetration: Significant main effect of primary psychopathy on physical ($\beta = .12$, $SE = 0.4$, $p < .01$), but not psychological IPV ($\beta = .08$, $SE = 0.5$, $p = n. s.$). Regression analyses, controlled for gender, childhood maltreatment, alcohol and drug abuse, and ADHD |

Note: ADHD = attention-deficit hyperactivity disorder; ANOVA = analysis of variance; BD = borderline or dysphoric; CPI = California Personality Inventory; CTS= Conflict Tactics Scale; FO = family-only; GV/GVA = generally violent/antisocial; GVP = generally violent or psychopathic; IPV= intimate partner violence; IRR = incidence rate ratio; LLA = low-level antisocial; LP = low psychopathology; LSRP = Levenson Self-Report Psychopathy; MANOVA = multivariate analysis of variance; nr = variable not measured/reported; n. s. = non-significant; NVOBS = Nonviolent and Violent Offending Behavior Scale; OR = Odds Ratio; P = psychopathic traits; PCL-SV = Psychopathy Checklist: Screening Version; PMWI = Psychological Maltreatment of Women Inventory; PPI-SF = Psychopathic Personality Inventory – Short Form; RRA = Romantic Relational Aggression; SD3J = Short Dark Triad, Japanese version; SES = Sexual Experience Survey; SRP= Self Report of Psychopathy; T = time; YPI = Youth Psychopathic trait Inventory

^aWomen were interviewed to screen for IPV. ^bWomen were trained to display facial expressions of emotions, and recognition of emotional expressions were assessed in men.

Table 4

Empirical quantitative studies about the role of psychopathic traits on intimate partner violence perpetration among convicted male batterers ($n = 21$; 51% of the included studies)

| Paper | Sample | Assessment | Relevant findings |
|----------------------------|--|---|--|
| Belfrage and Rying (2004) | Forensic sample • Target group: spousal homicide perpetrators ($n = 164$) • Control group: homicide perpetrators committed outside the context of intimate partner relationship ($n = 690$) Target and control groups were created based on material in police investigations 100% male Mean age (SD): nr | P: PCL-SV (from file records alone) IPV: self-report of physical IPV, and CTS physical aggression scale (female partner's reports) | Prevalence of psychopathy among intimate partner homicides: 4% (based on a cut-off of 18 on PCL-SV for diagnostic of psychopathy). |
| Cunha and Gonçalves (2013) | Prison sample composed by men sentenced for IPV ($n = 111$) and forensic sample composed by convicted male batterers in community ($n = 76$) Not control group composed by non IPV perpetrators 100% male Mean age (SD): 43.81 (11.23) | P: PCL-R (from semi-structured interview alone) IPV: IVC | Role of psychopathic traits to establish batterer typologies: Batterers were classified based on psychopathology (depression, paranoid ideation, and PCL-R Affective and Antisocial facets), physical and psychological IPV, hostility and generalized physical violence: antisocial/violent ($n = 51$), non pathological ($n = 74$) and disturbed ($n = 62$) batterers. Hierarchical cluster analytic techniques MANOVA among cluster batterers, $F(16,356) = 34.93$, $p < .001$, $\eta^2 = .61$ Significant differences between batterer subgroups on PCL-R Affective, $F(2,184) = 16.97$, $p < .001$; $\eta^2 = 0.16$: antisocial > (non pathological = disturbed batterers), Lifestyle, $F(2,184) = 11.49$, $p < .001$; $\eta^2 = 0.11$: (antisocial = disturbed) > non pathological batterers, and Antisocial facet, $F(2,184) = 26.65$, $p < .001$; $\eta^2 = 0.22$: (antisocial = disturbed) > non pathological batterers. Not significant differences between batterer subgroups on PCL-R Interpersonal facet, $F(2,184) = 2.48$, $p = n.s.$; $\eta^2 = 0.03$. ANOVA |

Table 4 (Continuation)

Empirical quantitative studies about the role of psychopathic traits on intimate partner violence perpetration among convicted male batterers ($n = 21$; 51% of the included studies)

| Paper | Sample | Assessment | Relevant findings |
|---|--|--|---|
| Echeburúa and Fernández-Montalvo (2007) | Prison sample ($N = 162$) composed by men sentenced for a serious IPV act Non control group composed by non IPV perpetrators 100% male Range age: 18 – 65 years | P: PCL-R IPV: not assessed. Convicted men | Prevalence of psychopathy among male batterers in prison: 12.34% Role of psychopathic traits to establish batterer typologies: Batterers were classified as psychopaths ($n = 20$) and non psychopaths ($n = 142$) based on a cut-off of 20 on PCL-R for diagnostic of psychopathy. Not significant differences between psychopaths and non psychopaths batterers on IPV homicide ($\chi^2 = .08$, $p = .97$). Group comparisons (t and χ^2 test) |
| Eckhardt et al. (2008) | Forensic sample ($N = 190$) composed by men who were court-referred to BIP Non control group composed by non IPV perpetrators 100% male Mean age (SD): 33.0 (8.8) | P: SRP-II IPV: CTS-2 physical, sexual and psychological aggression and injuries subscales, MMEA | Batterers were classified as high anger-expressive ($n = 56$), moderate anger-inexpressive ($n = 13$), and low anger ($n = 118$) groups, based on STAXI subscales. Cluster analytic techniques Role of psychopathic traits to differentiate among batterer subtypes: Significant differences between high anger-expressive and low anger batterers on SRP-II Total, $F(3, 187) = 13.45$, $p < .01$, and Factor 2, $F(3,187) = 13.13$, $p < .01$: high anger > low anger. Significant differences between batterer clusters on SRP-II Factor 1, $F(3,187) = 2.78$, $p < .05$: expressive batterers displayed the highest score on Factor 1 psychopathy. ANOVA |
| Fernández-Montalvo and Echeburúa (2008) | Prison sample ($N = 76$) composed by men sentenced for a serious IPV incident Non control group composed by non IPV perpetrators 100% male Mean age (SD): 39.6 (9.2) | P: PCL-R IPV: not assessed. Convicted men | Prevalence of psychopathy among male batterers in prison: 14.47% Role of psychopathic traits to establish batterer typologies: Batterers were classified as psychopaths ($n = 11$) and non psychopaths ($n = 65$) based on a cut-off of 20 on PCL-R for diagnostic of psychopathy. Not significant differences between psychopathic and non psychopathic batterers on domestic homicide, $\chi^2 = .02$, $p = n. s.$ Group comparisons (χ^2 test) |
| Flournoy and Wilson (1991) | Forensic sample ($N = 56$) composed by men who were court-referred (99%) and self-referred (1%) to BIP Non control group composed by non IPV perpetrators 100% male Mean age (SD): 32.9 (9.8) | P: MMPI psychopathic deviate scales IPV: not assessed. Convicted men | Prevalence of psychopathic deviate-depression high-point pair profile: 7% Prevalence of psychopathic deviate-masculinity/femininity high point pair profile: 7% Batterers were classified based on MMPI scales: elevated profile depicting a psychopathic deviate-depression high-point par ($n = 25$), and normal range profile ($n = 31$). Cluster analytic techniques |

Table 4 (Continuation)

Empirical quantitative studies about the role of psychopathic traits on intimate partner violence perpetration among convicted male batterers ($n = 21$; 51% of the included studies)

| Paper | Sample | Assessment | Relevant findings |
|--------------------------|--|--|--|
| Gondolf and White (2001) | Forensic sample ($N = 840$) composed by men who were court-referred (82%) and self-referred (12%) to BIP, and their female partner (59%) Non control group composed by non IPV perpetrators 100% male Range age: 18 – 65 years | P: MCMI-III (combination of scales) IPV: CTS (female partner's reports) Convicted men | Prevalence of primary psychopathy disorder among male batterers in BIP ($N = 580$): 9% (based on combination of MCMI-III levels of personality disfunction and scores on anxiety, antisocial, sadistic, and narcissistic scales). and Prevalence of secondary psychopathy disorder among male batterers in BIP ($N = 580$): 11% (based on combination of MCMI-III levels of personality disfunction and scores on anxiety, negativistic, antisocial, and sadistic scales). Batterers were classified as repeat ($n = 122$), once ($n = 68$), and none reassaulters ($n = 394$), based on 15-month follow-up (from partner-report CTS). Role of psychopathic traits to differentiate among batterer subtypes: Not significant differences between reassault types on primary ($p = n. s.$) nor secondary ($p = n. s.$) psychopathy. Significant differences between reassault types on psychopathic tendencies, $\chi^2(2) = 9.523$, $p < .01$: repeated > none > once reassaulter batterers. Group comparisons (χ^2 test) |
| Harris et al. (2011) | Forensic sample ($N = 547$) composed by men with a police record for IPV Non control group composed by non IPV perpetrators 100% male Mean age (SD): nr | P: PCL-R (from file records alone) IPV: not assessed. Convicted men | Predictive power of psychopathic traits on IPV perpetration: Significant positive correlation between total number of IPV and psychopathy ($r = .39$, $p < .05$). Bivariate correlations Significant main effect of psychopathy on IPV perpetration ($\beta = .33$, $p < .05$). Multiple linear regression, controlled for antisocial personality disorder, and total injury caused in nondomestic assault |
| Hilton et al. (2001) | Forensic psychiatric sample ($N = 508$) from maximum-security psychiatric facility • Target group: wife assaulters ($n = 88$) • Control group: other offenders ($n = 420$) 100% male Mean IPV perpetrators' age (SD): 37.23 (11.75) | P: PCL-R (from file records alone) IPV: not assessed. Convicted men | Predictive power of psychopathic traits on IPV perpetration: Significant differences between IPV perpetrators and other offenders on PCL-R Total score, $t = 5.80$, $p < .001$: other offenders > IPV perpetrators Group comparisons (t test) |
| Hilton et al. (2008) | Forensic sample composed by men with a police record for IPV: Sample 1 ($n = 303$) + sample 2 ($n = 346$) Not control group composed by non IPV perpetrators 100% male Mean sample 1's age (SD): 35.5 (10.1) Mean sample 2's age (SD): 35.3 (10.0) | P: PCL-R (from file records alone) IPV: police reports, CTS2 severe IPV subscale, SARA, DA, DVSI. | Predictive power of psychopathic traits on IPV perpetration: Significant correlation between psychopathy and dichotomous IPV recidivism (rsample 1 = .22; $p < .001$; rtotal sample = .29; $p < .01$), number of recidivistic IPV acts (rsample 1 = .28; $p < .001$; rtotal sample = .36; $p < .01$), total victim injury in recidivism (rsample 1 = .31; $p < .001$; rtotal sample = .37; $p < .01$), and number of CTS severe acts (rsample 1 = .26; $p < .001$; rtotal sample = .29; $p < .01$). Bivariate correlations |

Table 4 (Continuation)

Empirical quantitative studies about the role of psychopathic traits on intimate partner violence perpetration among convicted male batterers ($n = 21$; 51% of the included studies)

| Paper | Sample | Assessment | Relevant findings |
|--|---|--|--|
| Hornsveld et al. (2008) | Forensic psychiatric sample <ul style="list-style-type: none"> • Target group: domestically violent outpatients ($n = 63$) • Control group: generally violent outpatients ($n = 103$) 100% Male Mean domestically violent men's age (SD): 37.32 (11.55) | P: PCL-R (37.95% from file records alone) IPV: not assessed. Convicted men | Predictive power of psychopathic traits on IPV perpetration: Not significant differences between domestically and generally violent outpatients on PCL-R Total, $F(2,163) = 2.75$, $p = n. s.$, and Factor 1, $F(2,163) = 0.48$, $p = n. s.$ Significant differences between domestically and generally violent on PCL-R Factor 2, $F(2,163) = 6.16$, $p < .004$: generally violent > domestically violent outpatients ANCOVA controlled for age |
| Huss and Langhinrichsen-Rohling (2006) | Forensic sample ($N = 131$) composed by men who were court-referred (59%) and self-referred (41%) to BIP Non control group composed by non IPV perpetrators 100% male Mean age (SD): 35.53 (9.76) | P: PCL-SV (from interview + file records) IPV: CTS-2 | Prevalence of psychopathy among male batterers in BIP: 25.95% (based on a cut-off of 7 on PCL-SV for diagnostic of psychopathy). Batterer were classified based on physical IPV, generalized physical violence, and MCMI-III antisocial, dependent, and depressive subscales: GVA ($n = 43$), LLA ($n = 26$), BD ($n = 21$), and FO ($n = 41$) batterers. Cluster analytic techniques Role of psychopathic traits to differentiate among batterer subtypes: Significant differences between batterer subgroups on PCL-SV Total, $F = 5.06$, $p = .001$, $\eta^2 = .105$: FO < (LLA = GVA = BD), and Factor 2, $F = 9.46$, $p = .001$, $\eta^2 = .182$: (LLA = GVA) > (BD = FO). Not significant differences between batterer subgroups on PCL-SV Factor 1, $F = 0.253$, $p = .859$, $\eta^2 = .006$. MANOVA, $F(3,131) = 3.53$, $p = .001$, $\eta^2 = .08$. Significant differences between psychopathic and non-psychopathic batterers on batterer clusters, $\eta^2(131) = 10.67$, $p = .014$, $\eta^2 = .29$; GVA > LLA > FO > BD Group comparisons (χ^2 test) |
| Juodis et al. (2014a) | Prison sample <ul style="list-style-type: none"> • Target group: domestic homicide perpetrators ($n = 37$): 75.67% of them were IPV homicide perpetrators • Control group: non-domestic homicide perpetrators ($n = 78$) 100% male Mean IPV homicide perpetrators' age (SD): nr | P: PCL-R (20.87% from file records alone) IPV: DA | Prevalence of psychopathy among domestic homicide perpetrators in prison: 18.9% (based on a cut-off of 30 on PCL-R for diagnostic of psychopathy). Predictive power of psychopathic traits on IPV perpetration: Significant differences between domestic and non-domestic homicide perpetrators on PCL Total, $t(113) = 3.32$, $p \leq .01$, $d = 0.64$, Factor 1, $t(113) = 2.12$, $p \leq .05$; $d = 0.42$, and Factor 2, $t(113) = 4.04$, $p \leq .001$; $d = 0.76$: in all cases, non-domestic > domestic homicide perpetrators. Group comparison (t test) |

Table 4 (Continuation)

Empirical quantitative studies about the role of psychopathic traits on intimate partner violence perpetration among convicted male batterers ($n = 21$; 51% of the included studies)

| Paper | Sample | Assessment | Relevant findings |
|----------------------|--|--|--|
| Kalichman (1988) | Forensic sample ($N = 55$) <ul style="list-style-type: none"> • Target group: intimate partner homicide perpetrators ($n = 36$; 55.55% male) • Control group: non-intimate partner homicide men ($n = 78$) 71% male Mean IPV homicide men's age (SD): 37 (nr) | P: MMPI psychopathic deviate scale IPV: not assessed. Convicted men | RESULTS FOR MEN: Prevalence of psychopathic deviate among IPV homicide perpetrators: 35% (based on T score > 70 on MMPI psychopathic deviate scale). Predictive power of psychopathic traits on IPV perpetration: Not significant differences between IPV and non-IPV homicide perpetrators on psychopathy ($p = n. s.$). Group comparison (f test) |
| Lawson et al. (2010) | Forensic sample <ul style="list-style-type: none"> • Target group: men on probation for IPV ($n = 95$) • Control group: men on probation for non IPV ($n = 26$) 100% male Mean IPV men's age (SD): 31.0 (8.5) | P: MMPI-2 psychopathic deviant scale IPV: CTS physical aggressionsscale | Role of psychopathic traits to establish batterer typologies: Batterers were classified based on MMPI-2 Hypochondriasis, Depression, Hysteria, Psychopathic Deviant, Paranoia, Psychoasthenia, Schizophrenia, and Hypomania scales: borderline ($n = 19$), antisocial ($n = 24$), psychotic ($n = 26$) and nonpathological ($n = 26$) batterers. Cluster analytic techniques All antisocial batterers were characterized by MMPI-2 profiles based on any combination of psychopathic deviant and other clinical scales: psychopathic deviant ($n = 9$), the combination between psychopathic deviant and hypomania ($n = 6$), paranoia ($n = 3$), hypochondriasis ($n = 2$), depression ($n = 1$), hysteria ($n = 1$), psychoasthenia ($n = 1$), and schizophrenia ($n = 1$). Borderline batterers were characterized by MMPI-2 profiles based on combination of schizophrenia, depression and other clinical scales: 84% of borderline batterers displayed any psychopathic deviant symptoms. Psychotic batterers were characterized by MMPI-2 profiles based on combination of hypomania, schizophrenia, paranoia and other clinical scales: None of psychotic batterers displayed psychopathic deviant symptoms. |
| Murphy et al. (2007) | Forensic sample ($N = 139$) composed by men who were court- (85%) and self-referred (15%) to BIP, and their female partner ($n = 104$)a Non control group composed by non IPV perpetrators 100% male Mean age (SD): 35.65 (8.99) | P: SRP-II IPV: CTS physical and psychological aggression scales, CTS2 injury scale, and MMEA (self- and female partner-reports) | Batterer were classifies based on STAXI subscales: pathological anger ($n = 26$), low anger control ($n = 43$), and normal anger ($n = 70$) batterers. Cluster analytic techniques Role of psychopathic traits to differentiate among batterer subtypes: Significant differences between batterer subgroups on psychopathy, $F(2,119) = 4.48, p < .01$; $\eta^2 = .07$: pathological > low > normal anger batterers. ANOVA |

Table 4 (Continuation)

Empirical quantitative studies about the role of psychopathic traits on intimate partner violence perpetration among convicted male batterers ($n = 21$; 51% of the included studies)

| Paper | Sample | Assessment | Relevant findings |
|------------------------|--|--|--|
| Rock et al. (2013) | Forensic sample ($N = 483$) composed by men who were court-referred to BIP Non control group composed by non IPV perpetrators 100% male Mean age (SD): 35.14 (10.16) | P: MMPI-2 combination of scales based on Sellbom et al. (2012) IPV: not assessed. Convicted men | Predictive power of psychopathic traits on IPV perpetration: Significant correlation between IPV versatility and global psychopathy ($r = .19$; $p < .006$), and impulsive/antisociality traits ($r = .21$; $p < .006$), but not fearless dominance traits ($r = .00$; $p = n.s.$). Zero-Order correlations |
| Stanford et al. (2008) | Forensic sample ($N = 113$) composed by men who were court-referred to BIP Non control group composed by non IPV perpetrators 100% male Mean age (SD): nr | P: PPI IPV: not assessed. Convicted men | Batterers were classified as impulsive ($n = 76$) and premeditated ($n = 37$) based on IPAS scores. Role of psychopathic traits to differentiate among batterer subtypes: Significant differences between impulsive and premeditated batterers on PPI, $F(8,104) = 4.99$, $p < .001$; Wilk's $\Lambda = 0.72$, partial $\eta^2 = .28$. MANOVA Significant differences between impulsive and premeditated batterers on PPI Total score, $F(1,111) = 11.19$, $p = .001$, partial $\eta^2 = .09$, Fearless dominance factor, $F(1,111) = 6.01$, $p = .02$, partial $\eta^2 = .05$, and Impulsive/antisocial factor, $F(1,111) = 4.60$, $p = .03$, partial $\eta^2 = .04$, Impulsive nonconformity scale, $F(1,111) = 17.90$, $p < .001$, partial $\eta^2 = .14$, Stress immunity scale, $F(1,111) = 6.90$, $p = .01$, partial $\eta^2 = .06$, and Fearlessness, $F(1,111) = 6.14$, $p = .02$, partial $\eta^2 = .05$: in all cases, premeditated > impulsive batterers. Not significant differences between impulsive and premeditated batterers on PPI Blame externalization, Machiavellian egocentricity, Carefree nonplanfulness, Social potency, and Coldheartedness scales ($p = n.s.$). ANOVA |
| Swogger et al. (2007) | Prison sample ($N = 172$) • Target group: antisocial batterers ($n = 85$) • Control group: antisocial non-batterers ($n = 87$) All inmates exhibited antisocial personality features, based on DSM-IV-TR criteria for APD. Target and control group were created based on review of criminal charges. 100% male Mean target group's age (SD): 28.42 (6.80) | P: PCL-R (from interview + file records) IPV: review of criminal charges and self-reported IPV | Predictive power of psychopathic traits on IPV perpetration: Significant relationship between batterer vs. non-batterer group membership and PCL-R Affective ($B = 0.29$, $SE = 0.11$, $p < .05$, $OR = 1.34$, $R^2 = 0.06$) and Lifestyle facets ($B = -0.24$, $SE = 0.11$, $p < .05$, $OR = 0.79$, $R^2 = 0.04$). Not significant relationship between batterer vs. non-batterer group membership and PCL-R Total ($B = 0.03$, $SE = 0.03$, $p > .05$), Interpersonal ($B = -0.04$, $SE = 0.10$, $p > .05$), and Antisocial facets ($B = 0.13$, $SE = 0.10$, $p > .05$). Results of the analyses including self-reports of IPV indicated a pattern of results equivalent to those presented previously. Logistic regression analyses, controlled for other violent charges |

Table 4 (Continuation)

Empirical quantitative studies about the role of psychopathic traits on intimate partner violence perpetration among convicted male batterers ($n = 21$; 51% of the included studies)

| Paper | Sample | Assessment | Relevant findings |
|-----------------------|---|---|--|
| Swogger et al. (2012) | Forensic sample ($N = 75$) composed by men on probation Not control group composed by non IPV perpetrators 100% male Mean age (SD): 34 (11.4) | P: PCL-R (from interview + file records) IPV: "ad hoc" assessment tool | Predictive power of psychopathic traits on IPV perpetration: Not significant correlation between IPV perpetration and PCL-R Total ($r = .10$; $p = n.s.$), Interpersonal ($r = .06$; $p = n.s.$), Affective ($r = -.04$; $p = n.s.$), Lifestyle ($r = .17$; $p = n.s.$), and Antisocial facets score ($r = -.01$; $p = n.s.$). Intercorrelations Significant interaction effect of Childhood physical abuse X PCL-R Lifestyle facet on IPV perpetration, $\beta = .27$; $p < .05$, $\Delta R^2 = .08$ → childhood physical abuse was associated with IPV at medium ($\beta = .30$; $p < .01$, $\Delta R^2 = .11$) and high ($\beta = .46$; $p < .01$, $\Delta R^2 = .18$) but not at low ($\beta = .19$; $p = .14$) level of Lifestyle psychopathic facet. Not significant interaction effect of Childhood physical abuse X PCL-R Interpersonal, Affective, and Antisocial facets ($ps \geq .79$) on IPV perpetration. Multiple regression analysis Significant interaction effect of Childhood physical abuse X PCL-R Lifestyle facet on IPV perpetration ($\beta = .98$; $p < .05$, $\Delta R^2 = .06$). Multiple regression analysis, controlled for violent charges |
| Taft et al. (2004) | Forensic sample ($N = 107$) composed by men who were court- (88%) or self-referred (12%) to BIP Non control group composed by non IPV perpetrators 100% male Mean age (SD): nr | P: SRP-II IPV: all participants had a documented problem with IPV | Predictive power of psychopathic traits on IPV perpetration: Significant correlation between psychopathy and number of arrests for IPV ($r = .25$; $p < .05$). Intercorrelations |

Note: ANCOVA = analysis of covariance; ANOVA = analysis of variance; APD = antisocial personality disorder; BD = borderline or dysphoric; BIP = batterer intervention program; CTS = Conflict Tactics Scale; DA = Danger Assessment; DSM-IV-TR = Diagnostic and Statistical Manual of Mental Disorders-4th edition- text revision; DVSI = Domestic Violence Screening Instrument; FO = family-only; GVA = generally violent antisocial; IPAS = Impulsive/Premeditated Aggression Scale; IPV = intimate partner violence; IVC = Marital Violence Inventory; LLA = low-level antisocial; MANOVA = multivariate analysis of variance; MCMI = Millon Clinical Multiaxial Inventory; MMEA = Multidimensional Measure of Emotional Abuse; MMPI = Minnesota Multiphasic Personality Inventory; nr = variable not measured/reported; n. s. = non-significant; P = psychopathic traits; PCL-R = Psychopathy Checklist—Revised; PCL-SV = Psychopathy Checklist: Screening Version; PPI = Psychopathic Personality Inventory; SARA = Spousal Assault Risk Assessment; SRP = Self-Report of Psychopathy; STAXI = Strait-Trait Anger Expression Inventory
^aWomen were interviewed to acquire collateral reports for IPV

Gottman et al. (1995). Second, psychopathy was not a useful variable to uniquely differentiate GVA batterers, as Holtzworth-Munroe and Stuart (1994) had hypothesized: significant differences between GVA, borderline, and low-level antisocial batterers on psychopathy were not found, and GVA batterers were only more psychopathic than family-only (FO) batterers (Holtzworth-Munroe et al., 2000, 2003). Alternative batterer typologies established dependent upon the severity of IPV

perpetration evidenced that psychopathy was not associated with a greater severity of IPV perpetration, because significant differences in psychopathy between severely and low-level violent batterers were not found (Babcock et al., 2005). Instead, when the batterer typology was established dependent on the generalization of violent behavior outside partner relationships-FO (only IPV perpetrators) vs. generally violent (both inside and outside the home) batterers-

psychopathy was useful to differentiate FO from generally violent: the latter displayed the highest levels of psychopathy (Theobald et al., 2015). Finally, when the batterer typology was established dependent on the type of IPV perpetrated (proactive or reactive), findings evidenced that proactive partner-violent men were more psychopathic than reactive partner-violent men (Chase et al., 2001).

Unlike the studies presented above, three studies in which the core psychopathic traits were entered into cluster analyses to establish batterer typologies were identified. First, Babcock et al. (2008) tested the batterer typology proposed by Holtzworth-Munroe and Stuart (1994), including the SRP Factor 1 instead of antisocial traits into the cluster analysis to avoid the empirical and conceptual overlap between borderline and antisocial personality disorders. However, Babcock et al. (2008) also failed to identify uniquely GVA batterers, who displayed significantly higher levels of core psychopathic traits than borderline but not than FO batterers. Second, Walsh et al. (2010) established a batterer typology based on personality features, including the PCL-SV Facets 1 to 3 into the cluster construction (the Antisocial facet was excluded because it reflects behavioral rather than personality traits). In this way, psychopathy was successful in detecting a specific batterer subgroup, labeled antisocial batterers. Finally, Hale et al. (1988), based on psychopathology batterer typology, detected a specific batterer subtype characterized by a combination of psychopathic deviate and depression.

• EVIDENCE FROM STUDIES CONDUCTED WITH CONVICTED MALE BATTERERS

Again, psychopathy was commonly used to examine the differences among batterer subtypes. Unlike studies testing the Holtzworth-Munroe and Stuart (1994) batterer typology among non-convicted samples, Huss and Langhinrichsen-Rohling (2006) evidenced that psychopathy seems to be a useful variable to identify uniquely GVA batterers among a forensic sample. However, more exhaustive analysis of these results revealed that batterer subtypes did not differ in the core psychopathic traits (PCL-SV Factor 1), but GVA and low-level antisocial batterers displayed higher scores on behavioral

psychopathic traits than other batterer subtypes. When other alternative batterer typologies were established, psychopathy proved to be useful to identify a specific batterer subtype. Psychopathic batterers belonged to batterer subtypes characterized by pathologically high anger levels (Eckhardt et al., 2008; Murphy et al., 2007), premeditated IPV perpetration (Stanford et al., 2008), and persistent IPV recidivism (Gondolf & White, 2001).

Unlike the studies presented above, four studies in which psychopathy was entered into cluster analyses to establish batterer typologies were identified. First, based on three dimensions suggested by Holtzworth-Munroe and Stuart (1994), Cunha and Gonçalves (2013) carried out cluster analyses including both affective and antisocial psychopathic traits and established three batterer subtypes. The Affective but not Antisocial facet was useful in detecting a specific batterer subtype: the so-called antisocial batterers displayed higher affective psychopathic traits than the other batterer subtypes. Second, other batterer typologies based on psychopathology (the MMPI-2 psychopathic deviate scale was entered into the cluster analysis) were proposed by Lawson et al. (2010), who distinguished between antisocial, borderline, psychotic and non-pathological batterers. Psychopathy failed to detect a specific batterer subtype: profiles characterized by psychopathic deviate were found among antisocial and borderline batterers. Finally, when batterers were classified based on a categorical approach to psychopathy, psychopathic batterers were not more likely to perpetrate intimate partner homicide than were non-psychopathic batterers (Echeburúa & Fernández-Montalvo, 2007; Fernández-Montalvo & Echeburúa, 2008).

DISCUSSION

The purpose of this systematic review was to examine the role of psychopathic traits in male-to-female IPV perpetration. To this end, forty-one studies from PsycINFO, Scopus and WoS databases were analyzed and classified according the aim of the research (the analysis of the predictive power of psychopathy on IPV perpetration vs. of the usefulness of psychopathy to differentiate among batterer subtypes), the type of sample used (non-convicted partner-

violent men vs. convicted male batterers) and the psychopathy measurement approach (including vs. excluding antisocial traits as diagnostic criteria).

Regarding the predictive power of psychopathy on IPV perpetration, the majority of studies supported the role of psychopathy as a robust predictor of male-to-female IPV perpetration. Studies underscoring the predictive power of both global psychopathy (including antisocial traits; Kiire, 2017; Okano et al., 2016) and the core psychopathic features (Bates et al., 2017; Coyne et al., 2010; Mager et al., 2014; Marshall & Holtzworth-Munroe, 2010; Wymbs et al., 2017) on IPV perpetration were identified. However, further research separately analyzing the core personality and the behavioral psychopathic traits is necessary to clarify the potential differential relationship of interpersonal/affective traits with physical and psychological IPV perpetration, suggested in opposite directions by Coyne et al. (2010) and Wymbs et al. (2017). The predictive power of psychopathy was also examined comparing partner-violent men with non-IPV men. Among non-convicted samples, psychopathy did not predict IPV perpetration (partner-violent men displayed as many psychopathic traits as non-IPV men; Babcock et al., 2005, 2008; Holtzworth-Munroe et al., 2000; Walsh et al., 2010). However, IPV men were initially more generally violent than non-IPV men, so these results could be biased by the strong association between psychopathy and violence historically documented in the literature (Hecht et al., 2016; Reidy et al., 2015) and not reflect the specific relationship between psychopathy and violent behavior against a partner. Instead, among convicted samples matched in their violence level (namely, batterers compared with other violent offenders), the results suggested that batterers displayed as many core psychopathic features as the other violent offenders (Hornsveld et al., 2008) but fewer behavioral psychopathic traits than the other violent offenders (Hornsveld et al., 2008; Swogger et al., 2007). These results suggested an image of batterers consistent with the subclinical manifestation of psychopathy already proposed by Cleckley (1941). The adaptive lifestyle that characterizes the successful psychopath (Hall & Benning, 2006) would allow the psychopath batterer to mask his emotional

coldness and lack of empathy and blame, to limit his violent behavior inside the home (Pérez, Rodríguez-Díaz, Herrero, & Fernández-Suárez, 2016), and to be involved in subtle forms of IPV characterized by manipulation and control of their partners (Coyne et al., 2010). Further research matching batterers and non-batterers in their generalized violence level and separately examining each psychopathic trait will be necessary to confirm the hypothesis of batterer as successful psychopathy. If this hypothesis were correct, BIPs aimed at reducing impulsivity and irresponsible behavior might be not effective, and interventions designed to increase empathy would be necessary (Swogger et al., 2007). However, to date, effective treatments aimed at developing empathic responses among psychopaths have not been identified (Roche, Shoss, Pincus, & Ménard, 2011; Swogger et al., 2007). Moreover, further studies measuring psychopathy correctly and statistically controlling antisocial and generalized violence, as Swogger et al. (2007), which would be necessary to confirm the specific predictive power of affective psychopathic traits on IPV perpetration suggested by Cunha and Gonçalves (2013), and Swogger et al. (2007).

Regarding the utility of psychopathic traits in batterer typologies, some researchers used psychopathy to establish batterer typologies, and others used it to differentiate among previously established batterer subtypes. When psychopathy was used to examine the differentiate among batterer subtypes, psychopathic traits failed to differentiate among traditional batterer subtypes proposed by Gottman et al. (1995) and Holtzworth-Munroe and Stuart (1994), among both non-convicted (Babcock et al., 2004; Holtzworth-Munroe et al., 2000, 2003; Meehan et al., 2001) and convicted (Huss & Langhinrichsen-Rohling, 2006) samples. However, when other alternative batterer typologies were established, psychopathy proved to be useful to identify a specific batterer subtype characterized by displaying pathologically high anger levels (Eckhardt et al., 2008; Murphy et al., 2007), perpetrating premeditated (Stanford et al., 2008) and proactive IPV (Chase et al., 2001) and repeatedly reassaulting their partners (Gondolf & White, 2001). The relationship between the core psychopathic traits and difficulty controlling anger, as well as the tendency toward

premeditated and proactive violence, was consistent with previous literature (Bo, Abu-Akel, Kongerslev, Haahr, & Bateman, 2014; Hecht et al., 2016; Myers & Monaco, 2000). Precisely, these batterer subtypes that displayed higher levels of psychopathy were responsible for the highest levels of psychological and physical IPV (Eckhardt et al., 2008), even across time (Murphy et al., 2007), and were more likely to reject treatment (Stanford et al., 2008) and persistently recidivate to IPV (Eckhardt et al., 2008). So, psychopathy was able, indirectly, to detect the most frequent batterer subtype. Therefore, psychopathy should be especially considered among batterers who display high levels of anger, premeditated and proactive IPV and persistent IPV recidivism. Generalized violence seems to be a key variable to differentiate among batterers in terms of psychopathic traits. As evidenced by Theobald et al. (2015), who revealed that specialist batterers—men who are violent only inside intimate partner relationships—achieved significantly lower scores on psychopathy than generalist batterers—men who are also violent outside intimate partner relationships. The image of the batterer as successful psychopath suggested above could be more coherent with specialist batterers than with generalist batterers (similar to other violent offenders, as seen in Theobald et al., 2015). Although Theobald et al. (2015) did not confirm the hypothesis about the specialist batterer with higher affective traits than the generalist batterer, it is possible that the erroneous psychopathy measurement by Theobald et al. (2015), conducted without the face-to-face interview, has underestimated affective psychopathic traits. Thus, further batterer typology studies based on generalization of violence, as in Herrero, Torres, Fernández-Suárez, and Rodríguez-Díaz (2016) or Theobald et al. (2015), are recommended.

Finally, although psychopathy was able to detect the most frequent batterer subtype, psychopathy did not differ between batterer typologies based on severity of IPV perpetration among both non-convicted (Babcock et al., 2005) and convicted samples (Echeburúa & Fernández-Montalvo, 2007; Fernández-Montalvo & Echeburúa, 2008). Studies comparing non-lethal with lethal IPV perpetrators would help to examine the predictive power of psychopathy on severity IPV.

•LIMITATIONS

Contradictory findings detected across this paper could be due to methodological differences between reviewed studies. First, the conceptual confusion around the psychopathy construct was also reflected in IPV field research: 85% of reviewed studies included antisocial traits as diagnostic criteria to assess psychopathy; however, recent researchers have begun to exclude items related to antisociality/criminality from psychopathy assessment tools or to statistically control the influence of antisocial features in their analyses. The inclusion of diagnostic criteria related to prior violence, like in PCL-R and its derivative scales, could contaminate the relationship between psychopathy and violence (Salvador, Pérez, Fernández, Bringas, & Rodríguez-Díaz, 2015; Skeem, Poythress, Edens, Lilienfeld, & Cale, 2003). As recommended by contemporary authors (Evans & Tully, 2016; Skeem et al., 2003), future research should use psychopathy assessment tools that have excluded criminal/antisocial behavior as diagnostic criteria or should statistically control antisocial traits. Moreover, although PCL-R and PCL-SV application requires the combination of information from interviews and file records, only 26% of reviewed studies (Huss and Langhinrichsen-Rohling, 2006; Mager et al., 2014; Swogger et al., 2007, 2012) followed these recommendations. Research in which PCL-R and PCL-SV are scored without both sources of information runs the risk of losing information about the individual's interpersonal style (Hare, 2016) or being rated based on manipulated information from perpetrators' self-reports. Thus, the review of collateral information in conjunction with the semi-structured interview is recommended for future studies measuring psychopathy through the PCL-R and the PCL-SV. Additionally, few studies used a categorical approach of psychopathy, probably due to the low prevalence of psychopathy among community sample (Hare, 2003). It has prevented a comparative analyses between findings from the categorical and dimensional approaches. Future research should be addressed the differences between such approaches of psychopathy assessment and their implications.

Second, different criteria to categorize men as IPV perpetrators among community samples were used. IPV researchers should agree on how

many IPV acts are necessary to consider men as partner-violent. "Zero tolerance" ideology (Sawyer, Coles, Williams, & Williams, 2015), according to which no IPV act is acceptable (regardless of its frequency and severity), is recommended to identify partner-violent men among non-convicted samples.

Third, batterers and non-batterers were not equivalent regarding their generalized violence levels, so the results could actually reflect the association between psychopathy and general violence but not specific IPV. The inclusion of a control group that exhibits the same levels of generalized violence as batterers or the statistical control of generalized violence is recommended among both convicted and non-convicted samples.

Finally, the risk of bias of studies included in this review has not been evaluated. Future research should be assess the quality and risk of bias of studies included, as recommended by Moher et al. (2009) and Perestelo-Pérez (2013). However, bibliographical records included in databases used in this systematic review are reviewed by experts who ensure its high level of quality. Also, hand-searching was practiced in order to minimize bias (Vassar et al., 2016).

•IMPLICATIONS

This systematic review suggests several implications for future research and clinical practice. First, male batterers are not a homogeneous group in terms of their psychopathic traits. Generalized violence seems to be a key variable to differentiate among batterers in terms of psychopathic traits: unlike the historically documented GVA/generalist batterer (with high levels of both personality and behavioral psychopathic traits), another batterer subtype who display high score on personality but not on behavioral psychopathic traits was suggested (specialist/FO batterer). While generalist batterers could be consistent with traditional psychopaths (psychopathic group proposed by Hare, 2016), specialist batterers could be consistent with successful psychopaths (callous-conning group proposed by Hare, 2016). In turn, while generalist batterers could benefit from conventional BIPs, specialist batterers might require specific BIPs targeted to the personality but not to behavioral psychopathic traits. An

accurate differential diagnostic among batterers (non-psychopath, successful psychopath, and traditional psychopath) would help when designing effective, specific BIPs according their psychopathic traits. Second, psychopathy seems to be a useful variable to predict the frequency of IPV (and persistent recidivism) but not to predict IPV severity. Further research is necessary to highlight the role of psychopathic traits in IPV risk assessment.

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• Conflict of interest

The authors declare no conflict of interest.

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