Assessing Dangerousness in Criminals

By P. D. SCOTT

This article formulates a definition of the term dangerousness, indicates why the commission of dangerous offences cannot be reliably predicted, and then reviews the several factors which have been or might be used by those who have to make decisions about dangerousness in criminals. It suggests that these factors are useful insofar as they help to illuminate the individual’s capacity to feel sympathy and to learn by experience. Since the accuracy of prediction varies inversely with time, the maintenance of personal relationships and good communication seems the inescapable requirement in the management of potentially dangerous criminals.

Introduction

Dangerousness is a dangerous concept (Shaw, 1973). It is difficult to define, yet very important decisions are based upon it; there is as yet little reliable research in relation to it; it is a term which raises anxiety and which is therefore peculiarly open to abuse, especially to over-response of a punitive, restrictive or dissociative nature. Because we have all experienced dangerous emotions there is the risk of projection and scapegoating. The label, which is easy to attach but difficult to remove, may contribute to its own continuance, or may become a convention for evading responsibility or for jumping treatment queues. To legislate for treatment (which, in the absence of transportation and judicial elimination, usually implies incarceration) before the nature and effect of that treatment is known, is very expensive in terms of liberty as well as services and often falls into disuse; there is a risk that the response will repeat the causes and thus lead to a vicious circle.

Definition of Dangerousness in Criminals

It is easier to say what dangerousness is not than what it is. It is not simply that which is noxious or evil, and it is not necessarily a violent, explosive trait of an individual; the man who smokes on a tanker is dangerous by reason of the explosive potential outside him. Similarly, in social animals, much dangerousness depends upon disturbing the often precarious adjustment of other individuals, especially within a group; hence the importance of behavioural conventions or what are now called good manners, which in effect announce the individual’s self-control and his concern for the feelings of others. The media of mass communication besides modifying attitudes to, and expectations of, violence, also change the boundaries of groups. In this sense the dangerous individual is simply one who engenders too much anxiety. Dangerous degrees of anxiety are raised not so much by a single breach of convention as by the failure of the offender to respond to the counter-measures of society, and this is likely to indicate, or to be interpreted as, defiance. If our smoker on the tanker immediately responds to the angry order to ‘douse that glim’ dangerousness will not be implied, but if he does it again it is likely to be assumed that he is motivated, not by the gentle faults of fecklessness, foolishness or forgetfulness, but by dangerous intentions. Thus perception of a lack of response, or adaptiveness resulting in a tendency to repetition and incorrigibility, are likely to lead to a label of dangerousness in any person who has once demonstrated or threatened destructiveness. The context, nature and degree of this aggression or destructiveness will be important.
As to context, aggression will be most alarming in two situations, when society is totally unprepared for it, i.e. the appearance of a new form of attack; and when, having been pain-fully bitten, or nearly defeated, in this way on previous occasions, it is over-prepared, and likely to respond with a volley instead of a gesture. The nature of the behaviour which society is likely to label dangerous is that which is violent. Violence is aggression concentrated into brief time, and is not necessarily more destructive than continued aggression of lesser intensity. Possibly among many other reasons for the relative tolerance of this extensive aggression is the feeling that there is time to organize resistance, to call for help, or to take evasive action. The distance of the aggression from the body image is an important criterion of perceived dangerousness. In this sense attacks range between assault on the person on the one hand and destruction of public or unowned objects on the other. Offences in certain areas: burglary of the home, especially invasion of the bedroom, and damage to clothing and motor cars, are inclined to cause very marked distress or anger in the owners. Offences such as these, together with blackmail, are on the borderline of dangerousness and likely to raise impassioned debate when attempts to define the concept are made. Other factors, notably permanence of damage, may be helpful in reaching a conclusion. The question is often posed 'should psychological damage be included as well as personal or material damage and destruction'? Clearly psychological damage is very real and is frequently noted as a result of aggression. The Butler Committee's report (1975) includes 'lasting psychological harm' as well as serious physical injury. Psychological harm, especially that which is lasting, is so very difficult to distinguish from pre-existing idiotycratic vulnerability, so intangible and so easy to claim or simulate, that it will offer, at present, insuperable difficulties.

A still more difficult problem is the point at which individually non-dangerous offences, if repeated sufficiently often, achieve dangerousness by their threat to the rule of law.

The criteria of degree and permanence of damage are obvious, but nonetheless difficult to quantify unless there is actual loss of function or of life. Walker (1969), in considering sentencing, asks 'How difficult would it be to undo the harm if it happened?' More difficult still is that factor which in a medical analogy would be called infectiousness, and which indicates the belief that others will be inclined to follow suit, to use this loophole in the law, to join the insurrection, to practise this clever form of deceit, or to gain ascendancy or preference in this new way.

The medical analogy is also inescapable in relation to the further criteria of treatability and predictability. If an 'attack' of dangerous violence can be anticipated and aborted, or treated, then it ceases to be dangerous. This emphasizes the further complex inter-relationship of the threatening organism with the responses or defences of the body of society. Society may deal with dangerousness by eradicating its causes, isolating its carriers, or acquiring immunity to its effects.

Dangerousness, then, is an unpredictable and untreatable tendency to inflict or risk serious, irreversible injury or destruction, or to induce others to do so. Dangerousness can, of course, be directed against the self.

This definition may be thought to be so unsatisfactory that it would be better for most purposes to substitute a probability figure of this or that sort of damaging behaviour occurring in this or that expected environment.

Prediction

Prediction of dangerousness is particularly difficult because: dangerousness is the resultant of a number of processes which occasionally may be synergistic amounting to more than the sum of their parts, some within the individual and some in society; it is not static; key factors are the individual's adaptiveness, resistance to change, and his intention (which Emile Durkheim said in 1897 is 'too intimate a thing to be interpreted by another person'); a common mistake is to confuse recidivism with dangerousness, they are not necessarily the same and may be combined in various patterns. Dangerous behaviour lies at the extreme of the aggression parameter, and most standardized tests tend to become unreliable at
both their extremities, yet it is in just these areas that the most important decisions lie. Existing predictive scales tend to be over-inclusive; their results may be very useful for administrative purposes but are clinically unreliable; they are an encouragement to attempt treatment and a negation of nihilism, but give little help in the commonly posed distinction, not so much between nuisance and danger as between danger and extreme danger. The prognosis for dangerousness may be independent of the prognosis of coexisting conditions, for example the presence of a florid mental illness; such prognoses may even be reciprocal.

Steadman and Cocozza (1974), from their follow-up of nearly 1,000 supposedly dangerous Baxstrom patients, who had perforce been transferred to civil mental hospitals, wrote: 'If we attempt to distinguish the potentially dangerous patient, we double our error by identifying as dangerous all of a group of patients when only one third of them will live up to their expectations.' This was neatly capped by the medical superintendent of one of our own Special Hospitals who said he was sure half of his patients were not dangerous and could be safely released, but he wasn't sure which half.

Prediction studies should aim not to replace but to complement the clinical approach, and vice versa. This is well seen in our parole system, where the prediction score, made for every male candidate, is useful but not central in decision making.

We cannot at present hope, by taking infinitely careful aim, to direct our dangerous patient to safety like an arrow to its target; rather, through effective supervision, we must accompany him, being prepared to adapt to his varying needs, whether encouraging independence, moderating activity or recalling him to start again from the beginning.

Practical Issues

We have to rely on a combination of acumen, prediction and after-care. While this cannot be said to be reliable, it is pragmatic and certainly avoids or abbreviates many long terms of segregation, even though there may be occasional mistakes. If it is done it can be done better. What are the factors that can be looked for and fed to the diagnostic procedure, and from what different aspects should the problem be viewed? The following is an elementary practical guide to the more rational use of intuition.

The plan is to consider a series of factors, but realizing with Kozol (1972) that there are no direct indicators of dangerousness and that each factor may become important in the presence of other factors or may be neutralized by yet others. For some factors, especially personality traits, their correlation with dangerousness will only be of a high order if their definitions are nearly tautological. A good deal of confusion will be avoided if it is acknowledged that some factors may have positive (or negative) correlations with dangerousness at both ends of their scale (too much or too little). The extremes of some factors which in lesser degree predispose to dangerousness may in fact prevent it, e.g. a mild tendency to incest may permit restoration of the offender to his family and consequent repetition, whereas the children of an offender who showed a grosser tendency are likely to be removed permanently; similarly the severely subnormal person is likely to be under permanent supervision, while the subnormal is free to re-offend.

Before factors can be considered they must be gathered. It is patience, thoroughness and persistence in this process, rather than any diagnostic or interviewing brilliance, that produces results. In this sense the telephone, the written request for past records, and the checking of information against other informants, are the important diagnostic devices.

Having collected the facts under the headings: (1) the offence; (2) past behaviour; (3) personal data; (4) social circumstances it is useful then to scan them from a number of different directions with a view to answering certain key questions relating to dangerousness. The most important of these are concerned with the subject's capacity to feel sympathy with others, and his capacity to learn by experience.

(1) The offence

The legal category, even murder, arson and rape, is not very useful in determining dangerousness. It is axiomatic that all behaviour
can be reached by different paths, each of which has different implications for the future. To put it another way, offences entities all tend to comprise a majority of benign cases which have made a single and temporary crossing of the threshold, and a malignant minority which are firmly entrenched across that threshold. Just as some of the major offences do not qualify for dangerousness, some of the lesser offences (theft, drunkenness) may.

The detail of the behaviour, on the other hand, is so valuable that opinions should not be stated until the fullest possible information, including at least the witnesses' statements and the depositions, has been obtained. Such detail helps very much in the essential reconstruction of the equation: offender + victim + circumstance = the offence; each element of the equation is equally important.

It is very difficult to generalize about the significance of offences committed in a group or alone. It will depend on whether the group is a loosely structured one (as occurs in youthful affrays and pack rapes) or a highly organized group of professional criminals. Members of organized groups using fire arms, sometimes re-offend in this way even after a long prison sentence and therefore have to be regarded as dangerous, whereas the youthful group members will very probably mature satisfactorily. Members of a structured gang are very much less likely to have any form of mental illness or any personality disorder, sufficient to prevent them relating to the other members, or sufficient to make their behaviour unreliable or unpredictable, for such qualities would be an embar- rassment and danger to the other members.

Much behaviour which at first sight seems insane, unadaptive, or inexplicable is seen to be rational when the longitudinal development of the incident is studied—the small steps by which it was reached, encouragement by a partner, the basic anxiety which the behaviour sought to allay (often very much greater than the fear of detection and punishment), the resonance of the provocation with previous, perhaps infantile experience. The impact of a breaking marriage may be very different in a man whose mother deserted when he was five.

It is sometimes difficult to accept that the provision of a rational understanding of behaviour may indicate greater, not less, dangerousness; rational behaviour may be exceedingly difficult to treat and very likely to recur. Explanation of behaviour does not eliminate its dangerousness, nor ensure treatability; it only poses further questions which must be answered before a conclusion can be reached.

Offence detail is informative in relation to the 'impulsive or prepared', 'provoked or spontaneous' questions. These two scales are identical, for a person is not impelled without provocation; provocation is no more than strong or persistent stimulation. The legal concept of provocation is a concession to human frailty and therefore must be strictly limited in its application (English, 1970; White, 1970; Brett, 1970), whereas, psychologically, provocation is a common or even usual element in violent behaviour. The principal differences between legal and lay concepts of provocation depend upon the failure of the law to recognize two sorts of provocation: displacement of aggression from a highly provoking source to an area which may be scarcely provoking at all; e.g. the situation in which the rejected wife kills her baby, saying to her husband (as Medea did) 'that will stab thy heart', and also the extremely common and potent provocation offered by a state of continued uncertainty, e.g. when a reluctant or frightened wife rejects but as it were leaves the door open and permits occasional contact; it is the vacillating rather than the abusing or aggressive wife who is most at risk.

To the psychologist a degree of contemplation or even preparation and planning, or the use of apparently disproportionate force does not invalidate provocation as an operative factor in the assessment of dangerousness. But once again, such provocation only raises the further questions: will this situation arise again, are the offender, the victim (if still alive), and the environment open to significant modification?

Where the victim is no longer alive, the reasoning is sometimes heard: 'he has killed his mother and will never have another', or 'she has no further babies'; but, as Dr McGrath of Broadmoor has remarked 'Mothers have surrogates'; and battering mothers are fertile and seem to need babies. It is even more essential
to recognize that most killings are domestic and therefore much involved with the quality of the marital relationship; there is much to suggest that assertive mating can lead to the repeated selection of an unsatisfactory or provoking spouse; some individuals may be regarded as life-long injustice or provocation collectors.

'Compulsive' has misleading implications in describing offenders. Unless the offender really feels that the behaviour is foreign to him, unless he resists it, and at no stage gives himself up to enjoying it (however much he regrets it afterwards), then it should be called impulsive, not compulsive. Compulsive offending is a myth.

Many dangerous offenders, believing that they cannot control their impulses, seek help from the police or from doctors. They must be taken seriously, for rejection of their angry dependency seems to facilitate the threatened crime. Some offenders, notably paedophiles, have a tendency to use psychiatric clinics as a sort of insurance policy against the next offence; their responsibility, if they wish to be at large, has to be made clear to them.

The degree of violence used in the current offence is often cited as a factor in predicting dangerousness and is thus used in sentencing. Multiplicity of stabs, blows or shots, as well as combinations of methods of killing have been variously attributed to:

(1) the degree of emotional involvement (Berg and Fox, 1947);
(2) the presence of mental illness (Reichard and Tillman, 1950);
(3) victim resistance (Wolfgang, 1958);
(4) youthfulness of the offender (Wertham, 1941, suggests 15-25 years);
(5) lack of motivation (Satten et al., 1960);
(6) intoxication (Wolfgang, 1958).

The present author studied 218 cases of male murderers and amongst them found 38 minimum-violence cases who had killed with a single blow, shot or stab (coup), and 52 who had killed with excessive violence (8 or more coups, range 8-124). Each group was further divided into wife killing and non-wife killing, wife being defined as the woman with whom the subject lived. The excessive violence group contained 19 wife killings, the minimum violence only 2. It was concluded that wife-killers favour use of excessive violence. Since the average ages of the two groups of men were 39.8 years (excessive group) and 27.8 (minimum group) age is not the significant factor. The excessive violence men were more likely to involve multiple killings (15.3 per cent as against 2.6 per cent of the minimum group).

There was no significant difference on an impulsive-deliberate scale; more than half of both groups were deliberate. Within the excessive violence group the average number of coups in the wife-killers and non-wife killers was the same (15.7 and 15.6 respectively), which suggests that emotional involvement is not the important factor. All the murdered women (whether wives, prostitutes, or old ladies interrupting robberies) were killed with excessive violence. Low intelligence was rare in both groups but twice as common (5.7 per cent) in the excessive group as in the minimum group (2.6 per cent). Twenty-one per cent of the excessive group and 5.2 per cent of the minimum group were mentally ill or had a history of mental illness, and this was nearly all schizophrenia. Strong men capable of resistance, if they get murdered do not often receive multiple coups, and where the motive for the murder contains an element of fear, then excessive violence becomes rare (1.9 per cent in the excessive group, 18.4 per cent in the minimum violence group). Alcohol intoxication seems important (39.7 per cent excessive and 13.1 per cent minimum). There is a strong indication that defenceliness is an invitation to violence, and that once violence is unleashed it tends to continue to the point of satiation or exhaustion, unless controlled by fear of retaliation.

Excessive violence very doubtfully warrants the importance assigned to it by judges and others who assess dangerousness as a guide to sentencing. We forget that most murderers are amateurs and most victims healthy people with a firm hold on life, so that the killer is often horrified at the difficulty of killing and the awful sight and sounds involved, so that he strives in desperation or panic, to end the process quickly.
Separate from the quantity of violence is the quality of violence. Some murders, nearly all by excessive violence, involve bizarre desecration of the body, pushing things into body orifices or slitting them open; cutting off or biting nose, ears, breasts; urinating or masturbating upon the body. Such behaviour indicates either mental illness (Satten et al., 1960) or more commonly severe degrees of personality disorder associated with high degrees of deprivation of care or companionship in infancy. Quality of violence is a better indicator of dangerousness than quantity.

*Disinhibiting factors*, if likely to continue or recur, will contribute to dangerousness. The three major varieties are the depressive drugs (i.e. alcohol and the barbiturates rather than lysergic acid or amphetamine), the presence of companions, and fatigue. Groups of immature offenders, once embarked upon aggressive activity can stimulate one another in circular fashion so that very great and quite unexpected and inappropriate degrees of destruction can be achieved within seconds. Common examples are the activities of 10- or 12-year-olds who have broken into a factory, or adolescents who indulge in the so-called pack-rapes. Fatigue, sleeplessness, low blood sugar, can all lead to irritability and a reduced tolerance to long continued stresses which are so commonly the background of violence.

The detail of the offence should also include information as to the offender’s *behaviour after the offence*. There are two areas to be considered. The presence of humane feelings—whether or not he tried to repair the damage, seek help, relieve suffering, or whether ego-centric needs for escape or concealment were dominant, but this aspect will be considered later. The subsequent behaviour also sheds light on the state of mind at the time of the offence. Stress is sufficiently great or continued, causes an often quite sudden and dramatic ‘breakdown’ or change in behaviour, this is loosely called regression. It implies emotion and behaviour which is unrestrained, excessive, out of character and senseless, in that, though directed towards immediate relief (running away, self-injury, total denial in the presence of incontrovertible evidence), it is not realistically adaptive. Such behaviour inevitably invites the comparison with infantile behaviour, and this has been used in some ingenious classifications (Sullivan, Grant and Grant, 1957). Individuals vary greatly in the ease and depth of such regression. At one end of the scale, a few primitive personalities may be said to be more often regressed than not, whereas some resilient and resourceful persons retain their adaptiveness under high degrees of stress, and, when they break down, quickly recover (Lifton, 1957).

Study of murderers shows that go per cent of those who use excessive violence and 68 per cent of those who use minimum violence are regressed at the time of the killing. It is very useful to study the susceptibility, circumstances, specificity of stress, depth and duration of this regression. It is often possible to trace the stages, of induction and recovery, much as one does in administering an anaesthetic. The study of regression is one of the most useful modes of approaching the assessment of dangerousness. As ever rules of thumb are not possible; some denials in the face of incontrovertible evidence are adaptive, e.g. the paedophile who fears, not the judicial process, but hostility from other prisoners; or behaviour which is dictated by subcultural loyalties.

(a) Criminal record and past behaviour
All agree that the best indication of future behaviour is past behaviour, and it has long been known that it is the offender against property rather than against the person who has the highest tendency to repeat his offence. Neithercutt (1972) reviews the evidence for this paradox: that the most serious crimes, if you lump them together, have the best statistical predictions. Once a person has broken through the barrier between wish and action in a violent manner (even against himself) he could do so again. If to this is added the factor of age, the prediction becomes even more successful. Steadman and Cocozza (1974) constructed a scale for predicting repetition of dangerous offences, using juvenile record, number of previous arrests, convictions for violence, and severity of the last offence, all these factors being in effect refinements of past criminal behaviour.
If aggression appears early and is widely distributed—at home, at school and in the neighbourhood, and if it is present also in siblings and father, then it is likely to persist (Robins, 1966).

The exceptions to these general conclusions are unfortunately common. Some of the most devastating violence is produced by quiet, inoffensive persons with no previous criminal record, who have been under great stress for a long time and finally explode into a single brief but perhaps very dangerous act. Megargee (1966), Blackburn (1970) and Neustatter (1965) have described this phenomenon. A man of 47 asked the female stores keeper at his place of alcohol abuse long time and record, who have been under

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He asked the female stores keeper at his place of work for an item; she failed to produce it and treated him with scant respect. He picked up a spanner and beat her about the head in a manner which very nearly killed her. When examined he was not mentally ill, not depressed, not paranoid, and was distressed and perplexed by his behaviour. There was no previous crime of any sort. He was an excellent worker, employed beneath his capacity but had never pressed for advancement. He was married to a dominant lady who nagged him and frequently expressed her dissatisfaction with his wages. He had not had a holiday away from home for 20 years. In the last few weeks he had had bronchitis, which kept him awake. He was tired and not feeling well, and he was taking a prescribed medication containing codeine. The storeskeeper, he had hoped, would treat him with respect; she was an attractive and popular middle-aged women whom he liked but had never tried to make a relationship with. When she behaved like his wife he reacted in a way which could be interpreted as venting all his suppressed resentment of his wife upon her.

Another exception to the general rule is the so-called aggressive psychopath who on follow-up (Gibbens, 1970), is shown to have been much less aggressive than expected. Aggressive psychopaths are of many different varieties; one of the commoner types is the man of tender self-regard who relieves his fears of being deflated, by actual or threatened aggression; such men do not enjoy being violent, they do not attack non-threatening persons (children, hospital staff) and they improve with ageing.

This type probably contributes largely to the observed fact that many psychopathic states resolve at about 35-40 years. It is equally striking that aggressive psychopaths with a strong paranoid component, and those showing recurrent bouts of tension, agitation, often with hypochondriacal features together with violent and destructive behaviour, do not resolve; the latter group often commit suicide in their 50s.

A previous record of non-violent crime is less predictive of dangerousness. Stereotyped non-violent crime is unlikely to switch or evolve into violence, but there are plenty of exceptions, as when the career takes a new turn into drug or alcohol abuse, exploitation by others, or some new frustration or alienation arises. If, however, non-violent crimes are interspersed with violent ones the outlook is very poor, particularly if penal or other treatments have been tried and failed.

(3) Personal data

Sex

Women are less likely to seek violent solutions to their difficulties, and this is probably because they are, or have been conditioned to believe that they are physically weaker. Support for this argument lies in the fact that mothers are as likely to batter their babies as are men, and when they kill them post mortem examination shows just the same excessive violence (Scott, 1973). The general clinical experience is that women more rarely cross the threshold into dangerousness, but when they do, perhaps by substituting stealth for strength, they offer the same difficulties of prediction and treatment as do men. The battering of babies has been regarded as a syndrome, or a specific variety of violence, but in fact it is more a microcosm of violent crime, demonstrating the same broad factors as crime and delinquency in general. There is the same difficulty in determining causative factors, the same constellation with other inadequacies or insufficiencies, the same wide variety of types with a small intractable hard core, and a large penumbra of cases which are easily helped and unlikely to repeat. Important differences depend upon the family setting, the captive victim, the impact of the spouse, and the domestic secrecy which is
possible and which adds to the difficulties of supervision.

Age
This has already been touched upon. It is a difficult area for those who sentence or who serve on parole boards; youth is intolerant of incarceration which, on its own, appears to have little or no reformative function (Cornish and Clarke, 1975), yet it is precisely this age group which is most likely to recidivate. In this respect it is very important not to fall into the common error of failing to differentiate between violent and non-violent offenders in respect of recidivism. Heilbrun and his colleagues (1970), using a new and reliable method of assessing the degree of self-control in crimes, found that paroled convicts who committed violent crimes had a better chance of remaining free from further convictions (as judged by a six-month follow-up) than non-violent convicts. They emphasized that the crimes of violent criminals were less controlled than those of non-violent criminals, and that this was true of young criminals as well. They therefore arrived at the conclusion that ‘offenders demonstrated less self-control in crimes of violence than in non-violent crimes’; and that ‘offenders committing less self-controlled crimes of violence were more successful on parole than offenders committing more self-controlled crimes of violence’. This they found to be true with young offenders also.

Once again we are prevented from making any simple rules such as ‘youthfulness is always equated with a tendency to repeat’, or ‘display of uncontrolled violence is of bad prognosis’. Still less can we put these two predictions together and say ‘young, violent offenders must be a very poor risk’. Perhaps what Heilbrun is saying is that violent crimes, even though poorly self-controlled, are mostly once and for all. That is an important message but does not obscure the danger of the repeated, poorly self-controlled individual.

Some of the most difficult problems for the forensic psychiatrist occur in the late adolescent range, when a youth of previously ‘good character’ (as the lawyers, but perhaps not the psychiatrists, would say) has committed an entirely unprovoked violent assault upon a girl; these attacks have no manifest sexual features but seem to be an expression of the following sequence: strong sexual attraction, total inability to effect control, consequent frustration and anger, which is then expressed on the object which disturbs him. The usual finding in the youth is a combination of weak control, high sexual inhibition with normal sexual drive. The sexual inhibition (usually shared with the family) prevents any frank discussion either with the youth himself (who is by now thoroughly scared of his own impulses) or with his parents, whose only object is to maintain the myth of family ‘normality’. Is this a single incident of adolescence or is the blocking of sexual expression more permanent? Will he be able to share his problems when the storm has died down, and thus alleviate his situation, or will the denial persist? And always there is the awareness that if a pessimistic or cautious view is expressed, this will probably result in a lengthy incarceration in a closed institution which, whatever else it does, will effectively prevent the natural solution of finding a suitable girl friend. Provided there is no gross family history of psychiatric disorder, and provided the youth’s personality is not too seriously damaged, experience shows that calculated risks are justified, particularly if initial impressions can be checked through a short period of close observation in a hospital, hostel or Borstal institution.

Do sexual offences cease at the male climacteric? The nearest approximation to an answer in the present state of knowledge is that if the offence is directed towards orgasm it will cease, but if it can continue with little or no abatement far into the senium. Examples of some sexual offences which are not directed towards orgasm are some indecent exhibitionism (sometimes to children, and sometimes of quite a frightening character), some pederophilic offences, including those with a sadistic element, some retaliations against women, especially prostitutes. The resort to violence does in general diminish with age even though offences continue, and of course the violence becomes increasingly easy to resist, and access to children and other potential victims may become a little less easy. But many sexual
perverts are incredibly persuasive and successful in getting their unsuspecting victims to cooperate at least in the initial stages.

Marital status

An offender’s marital status gives a valuable insight into whether a close relationship can be or was ever achieved and maintained, and if there are children as well then their adjustment too offers a very useful barometer of parental competence. Once adolescence is passed, persistent failure to achieve a sexual partnership, despite attempts, with a history of at least one violent assault upon a female, is usually ominous.

It has to be accepted that if a sexually active man has never managed a mutually acceptable sexual relationship and has tried to force one violently, he may do so again, despite good intelligence, absence of any psychiatric abnormality (including any other evidence of personality disorder); despite a previously clear record and excellent behaviour during a perhaps long prison sentence; despite the opinion of a psychotherapist that he has cooperated well, gained good insight into his psychopathology and is ready for release; and despite the offender’s own expressed confidence that he is cured. This is not to say that recidivism is inevitable, but experience shows that it is frequent.

Personality traits

There is no characteristic profile, either of dangerous violence or of specific patterns of violence so that psychological test results from personality inventories and other sources take their place amongst all the other factors which must be scanned. It may be useful to note a high score on the lie scale or the hostility scale, but such findings must be checked against all the other information. Owing to secondary learning effects and changes in motivation, test results are particularly unreliable (as are all other modes of assessment) in trying to decide on fitness to end indeterminate detention. There is no magic about a standardized test. Bartholomew (1975) reaches similar conclusions: ‘Even testing by the psychologist is likely to produce misleading results, as it is not so very difficult for the intellectually able person to recognize the type of answer that should not be given if an early release is hoped for.’

No doubt the contribution of new forms of standardized test is potentially great, but to date they are not clinically very helpful in this field. One of the possible reasons for this may be that the clinicians are not yet able to tell the psychometrists what it is that they wish to be measured. Another barrier is that the objective of a test must be clear and simple, and if this is so the purpose of the test will quickly be apparent to the subject who has good reason to defeat it.

Space permits only a few considerations of special features.

Deceptiveness and transparency. Deceptiveness may be the response of an intelligent individual bent upon release from a situation, but as a personality trait it often stems from a parent-child learning situation in which there was mutual lack of trust. Perhaps mother and child conspired together in keeping a powerful father-figure ‘sweet’ (the ‘as-if’ character of Greenacre, 1945); more commonly untrusting and inquisitorial, punitive parents almost compel their children to lie. If together with this the child emerges into adult life with antagonistic and aggressive impulses, then, when he offends it will be difficult to gain his confidence and difficult for the after-care officer to help him. This antagonism and antisociability will hinder attempts to alleviate the offender’s situation. Such individuals tend to have poor relationships with prison staff, so that distrust can progressively develop and bind the offender to the least helpful prison subculture. Slightly different is the factor of transparency. Some individuals, either because they need support and reassurance or because of a sort of verbal incontinence, readily reveal their thoughts and feelings, so that their actions are easily anticipated. This is particularly important in those who suffer periodic psychosis, perhaps of a depressive-suicidal or paranoid-homicidal nature. Some are very skilled at concealing such states, but others readily reveal them. Such factors are, of course, of great importance to the after-care agent. Much greater risks in liberating dangerous subjects are justified if they are transparent and not deceptive.
Jealousy, as Shepherd (1961) has said, 'is a notoriously dangerous passion and constitutes a well recognized motive for crimes of violence ...'. A mild degree of jealousy is useful in preserving family life and is often a matter of pride to the wife. Higher degrees of jealousy are associated with less and less justification and are ultimately destructive. Jealousy is difficult to differentiate from, and may be longitudinal of pride to the wife. Higher degrees of jealousy be and not been acted out. In such cases it are associated With less and less just preserving family life and is often a matter sadistic or mas...n...

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drawer. The occupational preference will sometimes give a hint (butchering and work in 

abattoirs). Sadistic children often want to be 

veterinary surgeons, and show a morbid interest in sick and damaged animals which quickly 

die in their care, as do their pets. A combination of sadistic phantasy with actual violence is an 

ominous finding, especially if the violence is 

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and if there is no manipulative endeavour to impress the examiner. Part of the differential 

diagnosis of active sadism concerns the per 

sonality and lead to over-pessimistic predic 
tion. This is particularly to be observed in 
children and adolescents who possibly try to dispel depression by giving themselves up to 
sadistic or masochistic phantasy which will not be and has not been acted out. In such cases it 
is unwise to attach the rather emotive label of 

paranoid or sadistic without taking a very close longitudinal view, if possible with a period of 
hospital observation.

The sadistic tendency is often revealed through the subject's fascination with dictators, 

Nazi insignia, horror films (especially if the same film is seen repeatedly). Some sadistic 

individuals collect, or have collected, weapons and cannot pass a gunsmith’s shop. Children's 

drawings and prisoners' choice and use of 

pornographic magazines are worth inquiry.. 

The prisoner's 'pin-ups' are often informative, 

but his fetish drawings and pictures may be carefully hidden at the back of the lowest 

drawer. The occupational preference will sometimes give a hint (butchering and work in 

abattoirs). Sadistic children often want to be 

veterinary surgeons, and show a morbid interest in sick and damaged animals which quickly 

die in their care, as do their pets. A combination of sadistic phantasy with actual violence is an 

ominous finding, especially if the violence is 

discussed in a dispassionate, guilt-free manner, 

and if there is no manipulative endeavour to impress the examiner. Part of the differential 
diagnosis of active sadism concerns the person 

who, knowing that he is going to be incar 
cerated for a long time, manipulates his way 

into psychiatric care by claiming abnormal impulses, or perhaps by untruthfully inflating 

phantasy into reality. Some children find relief 

from their own anxieties by making others 

anxious and discover that relating horrific, 

violent or cruel stories will effect this; these 

children do not have the same prognosis as 

those who actually seek relief through such 

actions.

(4) Historical data 

Childhood, 'deprivation', very unsatisfactory 

parent-child relationships, beatings in child 

hood, alcoholic fathers, dominant mothers 

are all features which have often been found to
correlate with later violence. Duncan and Duncan (1971) find that 'a history of parental violence remains a significant consideration in evaluating homicidal risk'. Palmer (1960) found that the incidence of childhood frustration was significantly higher among murderers than in their next older brothers. The so-called neurotic traits of childhood are not indicators of violence (nor apparently of anything else), though several authors find that a combination of enuresis, firesetting and cruelty to animals may predict later violence (Hellman, 1966). Battering parents are held, particularly in the American literature, to have experienced physical violence in their own childhoods, but there are many exceptions; clinical and ethological data suggest that other deprivations (of access to mother or to play-fellows) may be equally important.

Jessen and Roosenburg (1971), in assessing recidivism (not necessarily through dangerous violence), found only one factor which effectively distinguished between recidivists and non-recidivists, and that was running away from home after the age of 17 years.

Severe head injuries before the age of 10 are not usually associated with adult violence (Climent and Ervin, 1972), though psychopaths with a history of head injury have worse criminal records than those without head injury (Gibbens, 1955).

A host of genetic and biological factors have been supposed to indicate dangerousness: minimal brain damage, temporal lobe disorder, anomalies of the Y chromosome, testosterone over-production; but as Rubin (1972) says '...the presence of these defects in known criminals has no predictive value in their possible future violence...'.

**Relationship with mental illness**

Some studies, for instance that of Giovannoni and Gurel (1967) find that released psychiatric patients are much more likely to commit homicide, and rather more likely to commit aggravated assault than members of the general public. But most studies make it quite clear that the link between both crime and violent crime on the one hand and mental illness on the other is very slender indeed.

A recent study by Guze (1976) of 223 men and 65 women convicted of serious crimes, mainly of violence and theft, finds very high rates of sociopathy and alcoholism but very low rates of psychiatric illness. Sociopathy, alcoholism, and drug dependence are associated with serious crime; 'Schizophrenia, primary affective disorders, anxiety neurosis, obsessive neurosis, phobic neurosis and brain syndromes, are not.' Schizophrenia was diagnosed in only two of the males and one of the females.

Hafner and Boker (1973), in a very large-scale German study find that mental patients and defectives together show no higher an incidence of violence than do mentally sound persons. Schizophrenics, they say, are by far the most likely among psychiatric patients to commit acts of violence, but even so the rate is extremely low (5 in 10,000). The corresponding rate for affective psychoses and subnormals together is 6 in 100,000. The age and sex distribution in mentally disturbed violent offenders is similar to that of mentally sound violent offenders. A stay in hospital is followed by a high risk of violence over a period of six months, and marital partners, lovers and children are most at risk particularly from patients with affective psychoses and delusions.

The incidence of violence amongst hospital patients or prisoners must not be too readily attributed to any psychiatric condition rather than to those grave frustrations which are common to closed institutions (Folkard, 1957).

Of all illnesses, epilepsy, in view of its traditional links with explosive aggression, might be expected to correlate with violence. But in general no such correlation exists either with quantity or quality of violence. It seems that, despite the early textbooks, epilepsy is not especially linked with arson, rape or murder. This field has been well reviewed by Gunn (1969 and 1971). Although the crimes of epileptics can only be directly attributed to the epileptic process extremely rarely, yet when an epileptic acts violently in, or immediately after his fit, then he may do the same in subsequent fits. Two second murders, in my experience, have certainly been of this nature. The degree of violence sometimes shown in these 'ictal' crimes is sometimes extremely great.
(5) Progress in custody
This can be prognostically useful, but also misleading.

The outlook for youthful rebellion which has perhaps involved some violence as part of a well directed and understandable retaliation is nearly always excellent, even if within the institution the subject has had many conflicts with authority and has made a great nuisance of himself or herself. In general, aggressive behaviour which stems from strength and determination resolves itself, especially in the young.

Also hopeful (and of course gratifying) are inmates or patients who are at first rebellious and difficult but later conform; the task then will be to determine whether they have made genuine progress towards self-control, have learnt how to manipulate the system (not necessarily an unflavourable feature), or have deteriorated into institutional dependence.

Less hopeful are those whose violence seems to be based on a weakness. These will be particularly difficult to assess if the expression of their violence involved alcohol, drugs, women, children, possession of money, or access to gambling, because these are not openly available in most secure hospitals and prison establishments.

Consideration also has to be given to the things which are present in institutions but not outside: the presence of authority to supplement conscience, to protect, control and make decisions.

A single interview near the time of release by a stranger is not a good basis, on its own, for assessing dangerousness. As already stated most help is to be got from plodding through records, nurses' notes and trial transcripts, and talking to the staff who are in daily contact with the patient. It also helps to know the idiosyncrasies of staff. It is sometimes worrying if a certain staff member does not produce his usual unfavourable report. Dr Stirrup (1968) of Herestadvaster indicates the usefulness of staff of both sexes: 'If several of the women have the same (intuitive) feeling I am inclined to take it very seriously.' The reactions of other patients or inmates can be very useful, as are those of the victim or the victim's family. In serious cases the English parole board habitually makes inquiry about the probable local response before conditionally releasing the offender. The institution cat or dog, particularly in assessing young people, can prove a useful staff member, revealing either carefully hidden capacities for affection or cruelty; animals are not so easily deceived as humans.

(6) After-care
The subject's plans for his life outside (or lack of them) are of course important and may reflect his realism and aspirations. Brown and his colleagues (1972) have shown that schizophrenics are more likely to relapse after discharge from hospital if they are returned to the bosom of their families. Very many dangerous offences are based upon the individual's inability to solve ordinary problems of human relationship, which are, of course, most intense within the family. Thus it is often unwise to return offenders to the very setting in which their problem arose.

After-care, and intermediate placements between secure hospital or prison, together with indeterminacy of detention, or partial indeterminacy offered by borstal sentences and various forms of parole and conditional discharge provide our only means of compensating for our inability to make accurate predictions of dangerousness. The after-care officer's onerous task is relieved if he is introduced to the offender at an early stage, if he is well briefed on his charge's characteristics, if his supervision is supplemented by periodic reassessments of the offender and discussion with the responsible medical officer, and if recall is undertaken quickly when the danger signals appear.

Favourable response to after-care is seen when there is movement towards improvement rather than achievement; and, conversely, complete stasis, with consequent frustration, in any important area of life (especially the ability to love or relate to people) is ominous, the more so if there is a well tried perverse solution at hand.

Consideration of the Data
Every single factor, however promising, fails as an indicator of dangerousness, so that the factors can only be used in answering a number
of further questions which may be hoped to approach an answer.

For a start, it is healthy for the investigator to review his own role: has he been strictly neutral in his approach? Has every reasonable attempt been made to collect the necessary information? To what extent did the subject suppress or actively distort the facts? Particularly, if the offender emerges as a thoroughly attractive person who ought to be summarily released, or if a complex and fully explanatory psychopathology is instantly apparent, then the chances of some form of deception are high, for those who have committed a violent crime (even with provocation) usually have very marked weaknesses of one sort or another.

Consider the subject's life longitudinally, his existential manner of being in the world, what roles he sought or was pushed into, and by whom. Is the sum of the information consistent? High degrees of consistency or of inconsistency should lead to reappraisal, for most individuals' life stories are in the mid-position.

Consider the behaviour from the point of view of as many theoretical standpoints as possible. Learning theory can be particularly helpful where the behaviour has been stereotyped: was it well learnt, but to antisocial standards; was it reparative behaviour to circumvent some basic prohibition; was it a conditioned avoidance response to a specific anxiety, or a non-adaptive response to an insoluble and inescapable problem of discrimination? Each of these quite different responses can lead, if the lesson was implanted sufficiently early, repeatedly and in the requisite emotional turmoil, to the most obstinate repetitiveness, and each should be treated in a different manner.

If the dangerous behaviour was not stereotyped but varied and perhaps mixed with non-violent offences, then we are dealing with incorrigibility of a different nature, probably not mainly due to faulty social learning. Very early, constitutional, perhaps organic or psychotic factors may have prevented or destroyed lessons; and there is a variety of indiscriminate offending seen in children who, coming from chaotic homes, have had no consistent social lessons and are without discernible conscience. Many such cases improve when a stable environment has been experienced, but this disorganized group of people, if dangerous violence has appeared more than once, are likely to continue to be dangerous.

It is useful also to consider whether the repeated dangerous behaviour is directed towards satisfying some (perhaps perverse) appetite, which, like any appetite, will certainly recur, or if it is an attempt to evade or cope with a specific problem, which may not recur.

Motive

This leads to the vexed consideration of motive; a difficult area because it is usually overdetermined, is vulnerable to unconscious or deliberate falsification, and especially because, on its own, it gives no indication of choice of behaviour. All our motivations have components at all the levels of our being. In well-adjusted persons only the socially approved part of the motivation will appear, and the selected solution will be correspondingly polite. In someone who has been 'driven to distraction' by long exposure to a strong motive and an equally strong set of prohibitions, or in someone whose social adjustment has been destroyed by some process or intoxication, the primitive response to the same motivation may appear. Sending a bunch of red roses, and committing a savage rape, may have the same motive operating at different levels of the personality. The single motive is likely to be labelled differently according to the level at which the personality is operating; at a fairly high level a robbery will be called an urgent need for money; at a lower level it will be admitted that the act relieves intolerable tension; at a lower level it may be ritual retaliation against a parsimonious mother; and at a still lower level there may be no words to express it because at that age the offender could not talk. Motive, therefore, always has to be considered alongside other factors, especially the current level of personality integration and the ease with which regression under stress occurs.

Sarbin (1967) says that there are three ways of meeting a crisis: the autistic, the social and explosive violence. Either one withdraws and
does without, suffering the consequent symptoms, or one copes on a realistic basis of new adjustment, or one goes like a bull in a china shop for the simple solution. It is useful to study the way in which the offender made his selection. Did he cast about for practical solutions, and with what degree of resourcefulness; did he try to absorb the problem autistically and how much could he stand; or did he go straight for, or almost straight for the violent solution, in which case he is quite likely to do the same next time? A non-commissioned officer had suffered long conflict with his wife; he went through a period of alcoholism (autistic), tried to get a divorce (social), got himself posted to Ireland and volunteered for dangerous duty (the beginnings of the violent solution, but against himself), he then deserted his post, hoping to be dismissed the service (a variety of suicide), and finally shot his wife with a high velocity rifle in the kitchen (the final violent solution). As Menninger (1938) has observed, every murder includes a wish to kill, a wish to die and a wish to survive. It is perhaps the inability to make a choice between these simultaneous motives which compels a violent solution.

Linking concepts

Are there any key areas in which these protean factors have a common bearing? Again a simple answer eludes us, but most of the factors are best utilized in trying to answer two very basic questions, both concerned more with the future than with the current offence. First, is this person capable of compassionate feelings; is he able to feel sympathy with the sort of persons who may become his victims, or is he so egocentric or so indoctrinated or influenced or damaged that such feelings are absent or lastingly obscured? Unless there is some recognizable sympathy for others, and revulsion at causing suffering, there is always a vulnerability to situational aggressive impulses which are bound to recur. This must be assessed by looking deeply into the subject's life pattern and relationships. The common practice of looking for 'signs of remorse' in relation to the current offence is not a good criterion, for after a horrifying deed there are so many protective mechanisms which may be mistaken for callous indifference.

Second, is this person's capacity to learn by experience still intact? Perhaps this comes close to begging the main question, 'is he going to do it again?'. But the question forms a central peg on which many other considerations hang, especially the manner in which the antisocial tendency was acquired, the resources which oppose it, the maturity of the personality, and the ease with which regression occurs under stress of various sorts, or on the other hand the obstinacy or lack of adaptiveness which some people show when passions are aroused.

Conclusion

We strive after accurate prediction of dangerousness because this would quell our anxieties, enable us to draw clear lines between the dangerous and non-dangerous, and avoid the necessity of continuing contact with and concern for them. But no such magical process will be possible.

Our disappointment may be alleviated if we accept that short-term assessment (which permits the scanning of the subject's present environment and associates, and his reactions to these) is likely to be much more reliable than long-term assessment, which, especially in the present setting of a mobile and changeable society, is likely to be totally beyond our reach. The point is illustrated by the introduction into an institution, many years ago, of a pencil and paper test to indicate propensity to abscond (I believe it was called the Chernukin test). At first we were very pleased with it, but we soon realized that it only indicated how the individual was feeling at that moment; tomorrow after a letter from home or an altercation with the staff he might feel and act quite differently; the test, to be useful, would have to be given every day, and anyway could achieve no more than would a friendly conversation. Further, the knowledge that absconding may be imminent is useless unless there is a means of dealing with the problem; to lock the subject up (which only delays, whilst amplifying, his need to abscond), or to reduce the tension through personal contact. It was realized that it is an economy to aim straight for the personal contact, which has
the advantage of serving a host of other useful functions simultaneously; it has the further advantage that it can be achieved by non-medical personnel provided they are well supported by a good system of communications. Involvement on a long-term basis and good communications are therefore the inescapable bases for assessment of dangerousness.

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