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MANIFESTATIONS OF SOCIOPATHY **IN FEMALES: AGGRESSION, CRIMINALITY** **AND ERRATICISM**

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Abstract

Antisocial behaviour traits characterised by the patient's incapacity to acknowledge or respect the rights of others. The condition gradually manifests and can alone be diagnosed in individuals who are at least eighteen years old. The majority of the symptoms associated with this condition typically manifest around the age of 15. The prevalence of this illness in women poses a slightly greater challenge compared to that in men. Therefore, doctors may find it challenging to diagnose the condition unless they are familiar with the patient's lifestyle. In males, it is typically manifested through physical aggression, but in females, it tends to manifest as manipulative behaviour.

Keywords: Antisocial Personality Disorder, Female Criminality, Aggression, Psychopathy, Gender Roles, Manipulation

Introduction

When providing treatment to a patient, the majority of physicians will first employ the observation approach prior to doing more comprehensive diagnostic procedures. In the field of psychology, the type of therapy to be used is typically determined by the patient's background and upbringing. Despite being the most effective initial assessment method with proven outcomes, many psychiatrists have made erroneous judgements and performed inaccurate diagnoses. Most studies investigating the concept of psychopathy, based on Hare's criteria, have primarily concentrated on Caucasian males, resulting in limited applicability to other

populations.¹

Hare asserts that there is no justification to anticipate that the applicability of the Hare Psychopathy Checklist-Revised will not extend to females.² Cleckley's initial research had two female subjects who exhibited persistent tendencies of deceit, theft, skipping school, and engaging in numerous sexual encounters, displaying a notable lack of concern for ethical obligations or awareness of their problematic actions. Typically, it is believed that as females mature, they will demonstrate feminine qualities by assuming different duties. When individuals exhibit behaviours that deviate from the norm, it is necessary to investigate the underlying cause of their peculiar conduct. Nevertheless, Cleckley originally acknowledged gender disparities in the display of psychopathic traits.³ He noted that these ladies exhibited the normal absence of empathy noticed in the male patients, but without any indication of malevolent intentions or callousness. While it is recognised by certain researchers that psychopathy exists in both males as well as females, the study of psychopathy in females has received less attention and has produced few scientifically validated discoveries.

Traditionally, society does not anticipate women to exhibit traits linked to masculinity and aggression. Instead, they are supposed to demonstrate qualities such as nurturing, empathy, and a general inclination towards accountability. While it is possible that females below the age of 18 may lack maturity to exhibit some traits, society nevertheless expects them to conform to traditional feminine norms. Early diagnosis and treatment are necessary for young girls who exhibit atypical levels of aggression and violence, which may deviate from typical female behaviour, in order to address their antisocial tendencies. When addressing this behaviour, the psychiatrist will initially assess the patient's family history to ascertain if the issue is genetic in nature. The psychiatrist will determine the appropriate treatment based on this diagnosis.

The diagnosis is typically conducted in multiple stages, which might potentially lead to confusion. The aetiology of developmental disturbances in a maturing individual may not invariably be attributed to genetic factors, even in cases where a comparable ailment has been documented

¹ Hare, R. D. (1980): A research scale for the assessment of psychopathy in criminal populations: *Personality and Individual Differences*, 1, 111-119.

² Hare, R. D. (1998): The NATO Advanced Study Institute. In D. J. Cooke, A. E. Forth, & R. D. Hare (Eds.), *Psychopathy: Theory, research, and implications for society* (pp. 1-11). Dordrecht, the Netherlands: Kluwer.

³ Cleckley, H. (1982): *The Mask of Sanity*. Revised Edition: Mosby Medical Library

within the familial lineage. The favourable findings obtained during the initial phases of assessment will be utilised to provide therapy to the individual. The remaining stages that may include crucial patient information are disregarded. The psychiatrists' lack of knowledge may result in providing treatment that is not highly beneficial to the patient. This will only lead to a partial or complete failure in solving the problem.

A recent study has analysed psychopathy in females by analysing the framework of the PCL-R, determining pertinent cut-off ratings, and exploring associated features and behaviours. The initial investigation into gender in psychopathy was to determine whether there were any disparities in the occurrence rates of psychopathy across genders. Salekin et al. assessed a hundred and three incarcerated females using the PCL-R and determined that only fifteen percent had psychopathic traits, based on a threshold rating of 29 on the PCL-R.⁴ The percentage in this figure is comparatively lower than the percentages seen in male correctional samples, which ranged from fifteen percent to thirty percent with a cut-off rating of thirty. Forth et al. undertook an investigation comparing psychopathic features between genders using a cohort of undergrad university students. The results revealed that males achieved considerably higher scores than females on the total results when utilising the PCL-R: Screening Version.⁵ Zagon and Jackson obtained same findings when they delivered the Self Report Psychopathy Scale-II, a self-assessment tool designed based on the PCL-R, to undergraduate college students.⁶

A contemporary study conducted Brinkley, Newman, Smith & Vitale revealed that among a cohort of five hundred and twenty-eight non-psychotic female criminals, the base rate was found to be rather low, at nine percent.⁷ This result was attributed to either a lower prevalence of psychopathy amongst females or the addition of elements in the PCL-R that fail to appropriately measure this personality trait in women.

Although the aforementioned research indicates that girls tend to have lower scores on

⁴ Salekin, R., Rogers, R., & Sewell, K. (1997): Construct validity of psychopathy in a female offender sample: A multitrait-multimethod evaluation: *Journal of Abnormal Psychology*, 106, 576-585.

⁵ Forth, A. E., Kisslinger, T., Brown, S., & Harris, A. (1993): Precursors to psychopathic traits in a sample of male and female university students [Abstract]. *Canadian Psychology*, 34 (2a), 380

⁶ Zagon, I., & Jackson, H. (1994): Construct validity of a psychopathy measure: *Personality and Individual Differences*, 17, 125-135.

⁷ Vitale, J. E., Smith, S. S., Brinkley, C. A. & Newman, J. P. (2002): The reliability and validity of the Psychopathy Checklist Revised in a sample of female offenders: *Criminal Justice and Behavior*, 29, 202-231.

psychopathy assessments compared to males, this suggests that there may be either fewer females with psychopathy or insufficient diagnostic instruments. Subsequent research has confirmed the existence of female psychopathy and its significant societal repercussions, highlighting the necessity for further targeted investigations to elucidate the gender disparities.

Specifically, there has been evidence of an increase in the involvement of adolescent and adult females with the criminal judicial system. Moreover, women exhibiting psychopathic qualities had a significantly greater tendency to reoffend and commit rule violations within institutional settings compared to women lacking similar attributes. Dutton and Nicholls propose that females who have significant mental problems or intellectual disabilities may display levels of hostility that are comparable to, and occasionally exceed, the frequency and intensity of violence observed in males with similar conditions.⁸

These investigation results have been notably apparent in instances of intimate relationship and child maltreatment. Currently, the female population constitutes around forty percent and ten percent of the total demographics in municipal and forensic mental hospitals, correspondingly.

The Evolution of Psychopathy as a Concept: Historical Progression

In the eighteenth century, psychiatrists such as Pinel identified a specific pattern of human behaviours characterised by a complete absence of sorrow and self-control, which he classified as manie sans delire. Individuals displaying these behaviours seemed to possess average cognitive abilities but demonstrated abnormalities in what may be referred to as ethical conduct. Since then, there has been a significant amount of focus on comprehending the theoretical and empirical aspects of psychopathic personality traits and behaviours.⁹ The majority of modern conceptualizations are connected to Cleckley's influential piece, *The Mask of Sanity*. Cleckley identified sixteen fundamental personality qualities linked to psychopathy through his examination of fifteen case studies. These traits include a lack of shame, an inability to form deep emotional connections, impulsiveness, emotional superficiality, shallow appeal in social interactions, and a failure to learn from past experiences. These folks lack responsibility, truthfulness, and self-awareness. In addition, Cleckley proposed that these persons exhibit a

⁸ Dutton, D. & Nicholls, T. (2005): The gender paradigm in domestic violence research and theory: Part 1—the conflict of theory and data: *Aggression and Violent Behavior* 10, 680–714.

⁹ Hare, R.D. (1991): *The Hare Psychopathy Checklist-Revised*. Toronto: Multi-Health Systems.

progressive decline in moral values, social duties, and personal commitments, resulting in their inability to consistently pursue a meaningful life path.

Besides Cleckley's research, which laid the groundwork for understanding psychopathy as a notion based on interpersonal relationships, a behavior-focused strategy was successfully utilised. This indicates a move towards a more objective and less speculative understanding of psychopathy. The behavioural approach has played a role in establishing the parameters of antisocial personality disorder. According to the DSM-IV, a female diagnosed with ASPD exhibits a pattern of delinquent and reckless behaviours that persist into adulthood. The fundamental characteristic of these behaviours is the clear lack of consideration for, and infringement upon, the liberties of others. Women diagnosed with antisocial personality disorder have a consistent pattern of disregarding societal expectations on legal conduct. They persist in committing criminal acts that entail property destruction, which may result in harsh punishment. These individuals may lack the ability to uphold the rights of others. They often engage in deception and manipulation to achieve personal benefit or gratification. Individuals with Antisocial Personality Disorder exhibit distinct behavioural characteristics such as impatience and aggressiveness, which are demonstrated by recurrent engagement in physical altercations or acts of assault.¹⁰ The criteria for antisocial personality disorder and psychopathy share many similarities, such as a lack of concern for the rights of others, a tendency to deceive, and a propensity for manipulation. Nevertheless, an ASPD assessment is explicitly determined by a past record of disruptive, unlawful, or socially reckless actions, while the classification of psychopathy is mostly based on personality characteristics.¹¹

Genders, Norms & Psychopathy

While the literature indicates that males tend to achieve greater scores than females on psychopathy assessments, there is limited understanding on potential differences in the expression of psychopathic traits between males and females. Multiple studies have investigated disparities between genders in diverse psychopathological and behavioural factors associated with psychopathy. Hare suggested that the disparity in average scores between genders could be

¹⁰ Millon, T., Simonsen, E., Smith M. et al. (1998): *Psychopathy: Antisocial, Criminal and Violent Behavior*. Guilford Press

¹¹ Lilienfeld, S.O., & Hess, T. (2001): Psychopathic personality traits and somatization: Sex differences and the mediating role of negative emotionality. *Journal of Psychopathology and Behavioral Assessment*, 23, 11-24.

attributed to distinct manifestations of psychopathy in males and females. Consequently, certain items on the PCL-R could need to be adjusted. The PCL-R assessment of psychopathy is a reasonably accurate indicator of the likelihood of male criminals repeating criminal behaviour. Hare, Hart & Kropp, as well as Salekin et al., have verified this connection, although to a lesser extent, in their study including incarcerated women. However, previous research has found that only the qualities associated to Factor 1 were substantially associated with recurrence in females. In contrast, both Factor 1 & Factor 2 ratings were found to be prognostic of recurrence in males. Zagon & Jackson conducted a study that examined male & female college students. They observed a significant disparity in scores between genders in terms of both psychological characteristics and socially deviant behaviours. The study revealed that females had fewer psychopathic tendencies in both areas.

In a scientific investigation, researchers Hamburger, Lilienfeld, as well as Hogben aimed to examine gender biases in the diagnosis of psychopathy. They hypothesised that males with psychopathy would display signs of anti-social personality disorder, whereas females with psychopathy would be labelled as having traits of histrionic personality disorder.¹² Nevertheless, the tertiary hypothesis served as the basis for further comprehensive analysis regarding the underlying reasons for the gender disparities. The findings revealed a strong positive correlation between the results of the masculine elements of the gender role scale and the results on the psychopathy & ASPD assessments. The feminine elements from the gender role test exhibited a negative correlation with scores on the psychopathy & ASPD assessments. The second hypothesis was largely intended to provide extra support for the main prediction of the study. The findings suggest a link between psychopathic behaviours and the disparities in interpersonal and behavioural development between genders, which are influenced by gender role socialisation.

ASPD is characterised by an individual's failure to recognise and value the rights of others. An individual with such a disposition will encounter challenges in grasping the extent of the harm they might be inflicting upon others. Typically, women demonstrate empathy and care, and express specific emotions based on their environment. Nevertheless, individuals with antisocial personality disorder exhibit a lack of response. They remain devoid of any emotional response, regardless of the extent of devastation they inflict. This is the rationale behind their persistent

¹² Hamburger, M. E., Lilienfeld, S. O., & Hogben, M. (1996): Psychopathy, gender, and gender roles: Implications for antisocial and histrionic personality disorders: *Journal of Personality Disorders*, 10, 41-55.

engagement in violence and their seemingly blameless demeanour even after causing harm to others. The resemblance between the behavioural traits exhibited by individuals with antisocial personality disorder and psychopaths often poses challenges for psychiatrists when it comes to making accurate diagnoses. These illnesses typically arise from metabolic imbalances, as well as environmental and genetic factors. The management of such is administered based on the underlying reason. Failure to promptly diagnose and administer appropriate therapy might result in the individual developing persistent behavioural issues, including drug and substance dependence. These females also face the possibility of being prosecuted and subsequently facing lengthy sentences in prisons. The courts sometimes lack the capacity to recognise the presence of a psychological ailment in order to administer appropriate treatment. They must endure equivalent penalties in accordance with the law.

Gender role socialisation refers to the process through which individuals, including females and males, are indoctrinated to adopt thoughts, emotions, and behaviours that align with the established masculine and feminine standards within their society.¹³ Both women and men adopt gender-specific personality traits, behaviours, and beliefs about the rights and societal roles associated with each gender.¹⁴ For instance, individuals in western nations, regardless of gender, are conditioned to display emotions that align with the societal expectations linked to their respective traditional gender roles. Women seem specifically encouraged to exhibit emotions such as affection, care, and accountability, which are associated with their traditional role as the primary carer for children. These writers delve more into the topic of male psychologists transcending the female gender paradigm by addressing their own biases towards women. This insight can be a significant tool in therapy when working with anti-social female patients. This also serves as a prime illustration of how misdiagnosis can occur. There is a prevailing assumption that the female gender is inherently less prone to violence and hence can be more readily controlled.¹⁵ During the evaluation of ASPD, clinicians may overlook the potential devastation that a female can inflict. As this pattern persists, the women's aggressive behaviours worsen as they are able to conduct their actions without being detected.

¹³ Krause, E.D., DeRosa, R.R., & Roth, S. 2002: "Gender, trauma themes, and PTSD: Narratives of male and female survivors. *Gender and Post-Traumatic Stress Disorder*. Edited by Kimerling, R., Ouimette, P., & Wolfe, J

¹⁴ McCreary, D.R., & Rhodes, N.D. (2001): On the gender-typed nature of dominant and submissive acts. *Sex Roles*, 44, 339-350.

¹⁵ Wester, S. R., & Vogel, D. L. (2002): Working with the male mystique: Male gender role conflict, counseling self-efficacy, and the training of male psychologists. *Professional Psychology: Research and Practice*, 33, 370-376.

Socialisation of Psychopathic Characteristics Based on Gender

Multiple scholars have postulated that conforming to gender roles has an impact on the formation of both advantageous and disadvantageous personality traits. Consequently, researchers have investigated disparities between sexes in early outwardly-directed behaviours, which are linked to adult antisocial personality disorder. Crick & his associates have identified two distinct forms of aggressive behaviour, namely overt aggressiveness, and relational aggression, in groups of kids and adolescent people. It has been observed that males exhibit a higher prevalence of overt violence compared to females. Relational aggression encompasses behaviours in which a young person utilises relationships as a tool to engage in antisocial behaviour, such as threatening peers and spreading rumours, as opposed to more overt types of aggression like fighting and fire setting.¹⁶ Crick and Grotperter precisely delineated relational aggression as the deliberate influence on other individuals with the intention of inflicting harm upon both the connection as well as the victim.¹⁷ This is accomplished through various behaviours, including the exclusion of a female from a communal group of individuals, spreading slander about a particular female in order to provoke rejection from her peers, or employing threats of terminating a relationship as long as the female complies with the aggressor's demands.

Gender disparities in aggression have regularly been observed in study, primarily focusing on young individuals in school environments. The study of gender disparity in aggression among adults has primarily focused on samples from the workplace, therefore limiting its scope.¹⁸ Nevertheless, the results indicate that violent behaviours might undergo developmental modifications across an individual's lifespan while maintaining consistent underlying motivations. In the initial phases of childhood, linguistic abilities are restricted, hence physical aggressiveness becomes the prevailing form of expression. As an individual's linguistic talents develop, their inclination to use language for hostile goals also increases. During adulthood, as social abilities continue to develop, individuals may employ increasingly advanced methods of violence that allow them to injure a specific person without being easily identifiable.¹⁹ The

¹⁶ Crick, N. R. (1997): Engagement in gender normative versus gender non-normative forms of aggression: Links to socialpsychological adjustment. *Developmental Psychology*, 67, 2317-2327.

¹⁷ Grotperter, J. K., & Crick, N. R. (1996): Relational aggression, overt aggression, and friendship: *Child Development*, 67, 2328-2338.

¹⁸ Hazler, R., Powell, R., & Carney, J. V. (1995): Bullying: A school wide intervention. Presented at Kentucky Counselors Association, Louisville, Kentucky

¹⁹ Lescheid, A.W., Cummings, et al. (2001): Aggression in adolescent girls: Implications for policy, prevention and treatment. *Canadian Psychology*, 42, 200-215.

emergence of aggressive styles is indicative of the progression of interpersonal and cognitive growth. Additionally, these changes signify society's endorsement and retribution towards specific behaviours. Adults who engage in physical aggression face greater societal repercussions, including potential job loss or extended incarceration, compared to children. Consequently, people are more likely to manifest aggressive inclinations through imperceptible means.

Studies have demonstrated that both adult men and women express support for hidden or concealed hostility in the workplace. Gender differences are evident in the different types of indirect aggression displayed, with males demonstrating aggressiveness that appears rational and females employing methods of social manipulation.²⁰ The interpersonal deception closely mirrors the relational aggressiveness commonly observed among female adolescents.

One possible reason for the gender disparities in aggression can be attributed to the underlying motives driving the violent actions. Some studies have postulated that violence is targeted towards undermining the objectives that are deemed most significant within gender-specific peer networks.²¹ For instance, males consider social power and control over their peers to be significant. Consequently, they engage in aggressive behaviour to undermine someone else's level of superiority.²² This hypothesis aligns with the scientific findings that males exhibit essential, bodily, & verbal violence. Most ladies do not find these sorts of social group worries to be as prominent. Females, as opposed to males, tend to prioritise relational matters while engaging in social interactions. Consequently, girls who engage in harmful actions against others direct their attention towards interpersonal matters and employ aggressive behaviours with the purpose of inflicting substantial harm on another female's friendships or sense of belonging within the peer group.

²⁰ Moffitt, TE, Caspi, a, Rutter, M & Silva, PA (2001): Sex Differences in Antisocial

²¹ Bjorkqvist, K., Osterman, K., and Lagerspetz, K. (1994): Sex differences in covert aggression among adults: Aggressive Behavior, 20, 27-33.

²² Kaukiainen, A., Salmivalli, C., Bjorkqvist, K., Österman, K., Lahtinen, A., Kostamo, A., and Lagerspetz, K. (2001): Overt and covert aggression in work settings in relation to the subjective well-being of employees. Aggressive Behavior, 27, 360-371.

Concluding Remarks

This study examines the association between gender and psychopathic qualities, primarily focusing on the correlation between people's gender role orientation and their manifestation of psychopathic characteristics. Traditionally, it has been presumed that women who conform to traditional gender norms are less likely to exhibit psychopathic symptoms compared to those who do not conform to these roles. Contrary outcomes are suggested for the male demographic, as conventional males are expected to display a greater number of psychopathic characteristics compared to non-traditional males. This study aims to provide additional understanding of the concept of psychopathy, with potential consequences for clinical practise, correctional facilities, and future research.²³ Specifically, with regards to evaluation and practical methods, we would be more proficient in identifying distinct psychopathic characteristics displayed by girls and males.

On the whole, the research indicates a noteworthy occurrence of female psychopathy, but the frequency seems to be lower compared to males. Hence, it is as crucial and imperative to precisely evaluate the recidivism rates and propensity for violence among female offenders in a forensic investigation, medical, as well as social settings, just as it is done for male criminals.²⁴

Given the possible gender disparities, it is increasingly crucial to have a deeper understanding of the distinct elements of female psychopathy, instead of relying on generalisations derived from studies on male psychopathic tendencies.²⁵

²³ Block, J.H. (1983): Differential premises arising from differential socialization of the sexes: Some conjectures. *Child Development*, 54, 1335-1354.

²⁴ Hoffman, S., Cummings, A., & Leschied, A.W. (2004): Treating aggression in high risk adolescent girls: *Canadian Journal of Counseling*, 38, 59-74.

²⁵ American Psychiatric Association (2000): *Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition, Text Revision*. Washington, DC: APA