The Alternative Model for Personality Disorders and Violence Risk: Where are We Now?

Where are We Going?

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Abstract

Personality science has steadily developed the Alternative Model for Personality Disorders (AMPD) for more than 10 years. While there has been considerable headway validating important aspects of the AMPD, forensic practitioners assessing risk have limited empirical support for integrating the AMPD into their everyday practice. To begin addressing this dearth of research, we describe the current state of the AMPD and ways in which it applies to violence risk. We also contrast the body of AMPD literature to that of psychopathy and antisocial personality disorder, including discussing the strengths and limitations of including psychopathy in contemporary forensic practice. We go on to review the legal standards governing the admissibility of psychometric evidence in court, then examine ways the AMPD could be bolstered in legal settings by additional research. We end by offering suggestions for clinical scientists investigating personality disorders, including ways in which AMPD research efforts can support forensic practitioners in their applied work.

Keywords: Alternative Model for Personality Disorders (AMPD), risk assessment, risk management, psychopathy, forensic assessment

Public Significance Statement: This review describes the ways in which the Alternative Model for Personality Disorders (AMPD) applies to legal settings and violence risk assessment. It details the empirical evidence for the AMPD, psychopathy, and antisocial personality disorder. It also includes ways additional research can improve the AMPD so it can be used more often in legal settings and violence risk assessments.

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Where are We Going?

The field of personality disorders has spent over a decade investigating the Alternative

Model for Personality Disorders (AMPD). This hybrid dimensional-categorical

conceptualization of personality pathology first appeared in the experimental section III of the

DSM-5 in 2013 (American Psychiatric Association [APA], 2013). It remains in section III in

2022's *DSM-5-TR* (APA, 2022) as clinical scientists contemplate topics such as the

psychometric functioning of AMPD instruments and their ability to capture traditional

conceptualizations of categorical personality disorders (PDs). This work is crucial for

establishing the AMPD's empirical foundation, although more applied, clinically relevant

research remains sorely needed. Practitioners currently have the option of utilizing the AMPD,

yet few appear to do so. The AMPD's inability to gain popularity amongst providers may be due,

in part, to issues such as a lack of validated AMPD treatment protocols (e.g., Widiger & Hines,

2022) and limited guidance for cutoff scores on AMPD instruments (e.g., Rodriguez-Seijas et al.,

2019). Overall, the AMPD has failed to gain widespread traction in applied settings (Tackett et

al., 2022; Widiger & Hines, 2022), including within forensic contexts.

The lack of progress incorporating the AMPD into standard clinical work is unfortunate

considering the reasoning behind its development. The AMPD links clinical practice with

contemporary evidence that clearly demonstrates PDs are best conceptualized as dimensional

rather than categorical (Bach & Tracy, 2022; Hopwood et al., 2018). Categorical PD diagnoses

are notoriously problematic (Hopwood et al., 2018). They are commonly comorbid with other

PDs, the thresholds for making PD diagnoses are predominantly arbitrary and subjective, and

individuals diagnosed with the same disorder often present differently (i.e., diagnostic

heterogeneity; Hopwood & Sellbom, 2013; Hopwood et al., 2018). Moreover, patients who

seemingly qualify for categorical PD diagnoses are often diagnosed with multiple PDs, a "not

otherwise specified" (NOS) PD diagnosis, or no PD diagnosis at all (Krueger, 2013; Tyrer et al.,

2015; Zimmermann et al., 2019).

      The myriad issues with categorical PD diagnoses may be most consequential in the field

of forensic psychology. Policy decisions, legal precedent, and individual lives regularly hinge on

experts' translation of empirical findings, and these types of weighty consequences likely relate

to the American Psychiatric Association's assertion that the entirety of the *DSM* should not be

used in forensic settings (APA, 2022). To echo Hopwood and Sellbom (2013)'s warning, it is

only a matter of time before the legal system discovers the emperor wears no clothes. In other

words, it seems possible that forensic psychologists could be challenged in legal settings

regarding the validity of categorical PD diagnoses, and they will need to defend their use of

instruments measuring them. At the same time, the AMPD has limited applied research in many

forensic contexts, which could make it vulnerable to admissibility challenges. Our goal in this

review is to sound an alarm for the field of personality research. We are concerned these

disruptions leave forensic practitioners with limited support when they introduce personality

evidence in legal arenas, and we hope scientists consider moving forward in testing the AMPD in

applied forensic contexts.

      In this paper, we discuss the current state of the field regarding forensic personality

assessment and the AMPD. We begin with a brief review of the AMPD and the construct of

psychopathy, which is a common aspect of forensic assessment. We then move to legal

admissibility standards as they apply to expert testimony and clinical assessment data, followed

by a brief review of the AMPD literature related to violence and risk. We end with suggestions

for applied AMPD research in forensic contexts and recommendations for ways in which

personality science can move forward under the AMPD.

<div align="center">**Where Are We Now?**</div>

The Alternative Model for Personality Disorders

Within the AMPD, Criterions A and B are the most consequential and innovative (Waugh

et al., 2017). Criterion A dimensionally assesses impairment in self and/or interpersonal

functioning. Criterion B dimensionally assesses 25 pathological personality facets (e.g.,

callousness, manipulativeness), which are situated within five overarching domains (i.e.,

antagonism, negative affectivity, disinhibition, detachment, psychoticism). Six categorical PDs

(antisocial, avoidant, borderline, narcissistic, obsessive-compulsive, schizotypal) remain as

diagnostic options, and each includes pathological personality trait constellations necessary for

an AMPD-based diagnosis. There is also a personality disorder-trait specified (PD-TS) option.

Beyond the general PD diagnostic criteria, PD-TS requires a specifier for the pathological

Criterion B traits (APA 2013; 2022). Specifying more precise areas of maladjustment should aid

clinicians in case conceptualizations and treatment planning (Cain & Mulay, 2022; Krueger &

Hobbs, 2020).

The field has developed several expert-, informant-, and self-report assessments to

measure AMPD Criterions A and B. Zimmerman and colleagues (2019) recently reviewed these

instruments, and they found many AMPD instruments have mostly acceptable interrater

reliability, internal consistency, convergent validity, and (to a lesser degree) incremental validity.

They point out that most AMPD research utilizes self-report instruments, and expert and

informant scored measures are relatively understudied. AMPD research also tends to have an

over-abundance of cross-sectional studies, utilizes monomethod assessments instead of

multitrait-multimethod approaches, and lacks representative samples from the general population to establish normative values (Zimmerman et al., 2019).

In general and clinical populations, AMPD Criterion B domains and facets are studied most often (Zimmerman, 2019), and they are associated with numerous factors related to crime, violence, and contact with the justice system. For example, AMPD domains and facets predict alcohol and substance misuse (Creswell et al., 2016; Moraleda-Barreno et al., 2018; Seyed Hashemi et al., 2019), intimate partner violence (Dowgwillo et al., 2016), sexual aggression (Norton-Baker et al., 2018; Russell et al., 2017; Russell & King, 2016, 2017a), hostile femininity (Russell & King, 2017b), interpersonal problems (Williams & Simms, 2016; Wright et al., 2012), everyday sadism (Benemann et al., 2023; Russell & King, 2016), criminogenic thinking styles (Zeigler-Hill et al., 2017), deception detection (Wissing & Reinhard, 2017), poorer personality functioning (Ruchensky et al., 2022), history of physical violence and arrests (Ruchensky et al., 2023), and childhood maltreatment (Russell et al., 2015).

Although fewer studies have tested Criterion A, there is initial evidence Criterion A predicts some factors associated with legal consequences. For example, Criterion A measures are associated with poor self-esteem and aggression (Gamache et al., 2019), alcohol misuse and poor well-being (Bach & Hutsebaut, 2018; Nelson et al., 2018), interpersonal dependency (Nelson et al., 2018), and interpersonal sensitivity (Dowgwillo et al., 2018). The greater availability of Criterion B research may be at least partially due to the timing of instrument publication. Whereas a self-report measure of Criterion B was readily available approximately a decade ago (the Personality Inventory for *DSM-5*; PID-5; Krueger et al., 2012), formal self-report measures of Criterion A were not published until relatively recently (e.g., the Level of Personality

Functioning – Self Report scale; Morey, 2017 or the Level of Personality Functioning Scale –

Brief Form 2.0; Weekers et al., 2019).

Taken together, the body of initial AMPD research has been crucial in laying the

groundwork for using this model in applied contexts. These findings also suggest the AMPD

likely predicts important forensic issues such as violence risk. However, the AMPD's utility in

legal settings is limited by the shortage of studies in justice-involved populations, particularly

those that examine the contribution of personality functioning (Criterion A) to justice-related

outcomes. For the AMPD to become relevant to forensic practice, it must demonstrate it is a

better option than the current standard in forensic personality assessment—psychopathy.

Psychopathy

Psychopathic personality disorder (psychopathy) is one of the most relevant personality

constructs to forensic settings and, in particular, to violence risk evaluations (DeMatteo et al.,

2014; DeMatteo & Olver, 2022). The exact description and boundaries that characterize

psychopathy represent a well-researched and hotly debated area within personality science. In

the context of the *DSM-5-TR*, psychopathy does not exist as a formal diagnosis within Section II.

Even within Section III, it is used as a specifier for antisocial PD rather than a standalone

diagnosis (APA, 2022).

In terms of both research and applied work, the field of forensic assessment greatly

benefited from the development of the Psychopathy Checklist-Revised (PCL-R; Hare, 2003).

The PCL-R is a clinician-based measure of psychopathy that is scored with both a semi-

structured interview and a records review. This tool allows clinicians to categorize someone as a

'psychopath' if they meet the score cutoff of ≥ 30 out of 40 (Hare, 2003). Although there are

several self-report measures of psychopathy that are also well-studied (e.g., Psychopathic

Personality Inventory-Revised (PPI-R; Lilienfeld & Widows, 2005); Triarchic Psychopathy

Measure (TriPM; Patrick, 2010); Self-Report Psychopathy Scale (SRP; Paulhus et al., 2009)), the

PCL-R remains the dominant psychopathy measure within applied settings. For example, a

notable case law review found that the PCL-R is commonly introduced into legal cases,

particularly in evaluations for parole and civil commitment under sexually violent predator

statutes (DeMatteo et al., 2014). The Violence Risk Appraisal Guide-Revised (VRAG-R; Rice et

al., 2013) is a widely used instrument in forensic contexts (Cox et al., 2018), and it incorporates

the PCL-R into formal scoring procedures to determine an individual's risk for violence

recidivism. The inclusion of the PCL-R in the VRAG-R scoring procedures is consistent with the

broader use of the PCL-R as a violence risk assessment tool (DeMatteo & Olver, 2022). The

regular use of the PCL-R is due, in part, to well-documented associations with clinically and

legally consequential variables such as recidivism (DeMatteo & Olver, 2022; Hawes et al.,

2013), antisocial behavior (Leistico et al., 2008), and treatment outcomes (DeSorcy et al., 2020;

Sewall & Olver, 2019; Wong et al., 2012). The PCL-R also evidences high inter-rater reliability

in laboratory settings (e.g., in the PCL-R manual; Hare, 2003), within institutions (Ismail &

Looman, 2018), and after the completion of formal training programs (Blais et al., 2017).

As much as the PCL-R has played a pivotal role in furthering applied and empirical work

on psychopathy, it has generated substantial debate amongst scholars regarding both its

psychometric properties and its conceptualization of the psychopathy construct. The PCL-R

debate is part of a larger conversation about how to best conceptualize and measure psychopathy.

For example, some researchers contend certain psychopathy measures overrepresent behavioral

content within their item pools (Skeem et al., 2011), whereas others question the role of anxiety

and fearlessness within psychopathy's diagnostic bounds (Lilienfeld et al., 2012; Lynam &

Miller, 2012). Most recently, there have been concerns about whether psychopathy, particularly

as measured by the PCL-R, should be used at all in criminal-legal settings (DeMatteo et al.,

2020; Larsen et al., 2022). The controversy surrounding the PCL-R's use in forensic assessment

stems, in part, from evidence of questionable inter-rater reliability in real-world and adversarial

contexts (DeMatteo et al., 2014), with some concluding that the adversarial nature of the

criminal-legal system influences practitioner scoring (Murrie et al., 2009; Rufino et al., 2012).

There are particularly concerns regarding the inter-rater reliability of the interpersonal and

affective components (Factor 1) of the PCL-R (Edens et al., 2010), which poses problems given

that these are the symptoms most prejudicial in legal settings (Cox et al., 2013, 2016; Edens et

al., 2013). Moreover, Factor 1 components are less predictive of recidivism relative to the

lifestyle and antisocial features comprising Factor 2 (Olver & Wong, 2015; Yang et al., 2010).

The PCL-R also contributes to poorer inter-rater reliability of the VRAG-R (Edens et al., 2016).

Indeed, field research suggests approximately one third of the variance in PCL-R scores in

adversarial settings is due to factors other than the target (psychopathy) construct (DeMatteo &

Olver, 2022).

Recent assertions suggest clinicians should avoid psychopathy assessments in their

applied work, and they should refrain from using the PCL-R, specifically. Larsen and colleagues

(2022) argue that because of the PCL-R's psychometric issues, as well as adverse outcomes

associated with higher scores (e.g., harsher sentences), the use of psychopathy assessments in

legal proceedings is inconsistent with professional ethics codes. They outline ways in which

psychopathy assessments violate the principles of beneficence and maleficence, as psychopathy

data are commonly used to harm forensic patients rather than help them (Larsen et al., 2022).

This argument aligns with meta-analytic evidence demonstrating psychopathy is stigmatizing

within legal contexts (Kelley et al., 2019). For example, mock juror ratings of evilness and dangerousness increase with ratings of perceived psychopathy, and jurors support harsher sentences for those believed to be more psychopathic, including endorsing the use of the death penalty in capital cases (Kelley et al., 2019).

Within the AMPD, psychopathy is conceptualized in a way that is markedly discrepant with the PCL-R operationalization. As stated previously, psychopathy exists as a specifier of antisocial PD (APA, 2022). To receive a diagnosis of antisocial PD, an individual must display moderate impairment across two areas of personality functioning (Criterion A) and elevations on six out of seven AMPD facets (manipulativeness, callousness, deceitfulness, hostility, risk taking, impulsivity, irresponsibility). The psychopathy specifier is characterized by 'a lack of anxiety or fear and by a bold interpersonal style' (APA, 2022, *p*. 886) and is included within an antisocial PD diagnosis when an individual is low on anxiousness and withdrawal as well as high on attention seeking. Research has found that Section III antisocial PD scores are well-aligned with the PCL-R, especially in comparison with the categorical model of antisocial PD (Wygant et al., 2016). Additionally, the psychopathy specifier relates to self-report measures of psychopathy (e.g., the TriPM and PPI-R), as well as the PCL-R, although the pattern of associations was not consistent across psychopathy specifier facets (Wygant et al., 2016). Although formally included within the AMPD, researchers continue to explore whether other AMPD facets would better capture the low anxiety/fear and bold interpersonal style intended by the description, and they debate whether this specifier is needed at all (see Anderson & Kelley, 2022 for a review of this and related issues). This particular debate is part of broader conversations the field is having about the measurement, conceptualization, and clinical utility of the psychopathy construct.

The recent controversies around the PCL-R include concerns regarding its admissibility in some legal proceedings. However, the PCL-R is rarely challenged in court, and when it is challenged, the challenges usually fail (DeMatteo et al., 2014; DeMatteo & Olver, 2022; Edens & Cox, 2012). In a review of the PCL-R in legal settings, DeMatteo and Olver (2022) point out that the low base rate of admissibility challenges does not mean the PCL-R is always used appropriately. Some practitioners use it in non-empirically supported contexts that could be challenged (DeMatteo et al., 2014; DeMatteo & Edens, 2006). However, few attorneys and judges receive training in psychometry, which reduces their ability to effectively differentiate between appropriate and inappropriate uses of the PCL-R (DeMatteo & Olver, 2022). Nevertheless, considering the debate around the PCL-R and the emergence of the AMPD, practitioners should be aware of legal standards related to test admissibility so they stay within ethical boundaries and are able to defend against well-placed challenges in court.

Admissibility of Psychometric Data in Legal Settings

In *Daubert v. Merrell Dow Pharmaceuticals, Inc* (1993), the Supreme Court of the United States held that expert testimony must meet criteria outlined in the Federal Rules of Evidence (FRE) to be admissible in federal court proceedings. Most U.S. states adopted *Daubert* standards, or a close approximation of *Daubert* standards, for state-level legal proceedings (DeMatteo et al., 2019; Neal et al., 2019; Slobogin et al., 2014). Beyond establishing the FRE governs evidentiary admissibility, *Daubert* solidified the trial judge's role as the gatekeeper of expert testimony, and judges currently have the power to determine if expert testimony is dependable enough for juries to consider (*Daubert v. Merrell Dow Pharmaceuticals, Inc.*, 1993; Simard & Young, 1994).

Three FREs—401, 403, and 702—are most consequential for expert testimony related to psychological assessment. FRE 401 indicates evidence must be relevant, or have probative value, in the matter before the court (*Federal Rules of Evidence 401*, 2023). If evidence or testimony passes the 401 test of relevance, it may still be excluded under FRE 403 if its probative value is substantially outweighed by the likelihood of factors like unfair prejudice and confusion, or if the evidence could somehow mislead a jury or waste the court's time (*Federal Rules of Evidence 403*, 2023). FRE 702 requires expert witnesses to demonstrate (1) their testimony will help the trier of fact (i.e., the judge or jury) understand or determine an issue before the court, (2) the testimony is based on sufficient facts or data, (3) the testimony stems from reliable principles and methods, and (4) the witness has applied the principles and methods to the facts of the case in an appropriate, reliable manner (*Federal Rules of Evidence 702*, 2019).

Judges assess evidence reliability as a part of their gatekeeping role under *Daubert*. Importantly, the term "reliability" in law encompasses both validity and reliability from a scientific and/or psychometric perspective (Neal et al., 2019). To help judges determine evidence reliability, *Daubert* provides four factors to consider when deciding if evidence meets FRE 702 admissibility standards. These factors include if the proffered evidence (1) was derived from empirically sound methods, (2) has undergone peer review and is published in peer reviewed journals, (3) has a known potential error rate, and (4) has been generally accepted by the scientific community (*Daubert v. Merrell Dow Pharmaceuticals, Inc.*, 1993; DeMatteo et al., 2019; Neal et al., 2019).

Another case, *General Electric Co. v. Joiner* (1997), further articulated the *Daubert* standards for expert testimony. *Joiner* established that expert testimony should be excluded if the methods utilized are not specific to the population and circumstances under consideration. *Joiner*

also determined an expert's mere assertion of evidence applicability was insufficient, and experts should demonstrate the evidence fits the specific parameters of the case (*General Electric Co. v. Joiner*, 1997; Neal et al., 2019). In Neal et al.'s (2019) review of psychological assessment tools in legal contexts, they suggested *Joiner* asks courts to favor field data over laboratory data, consider psychometric qualities of testing instruments, and allow only instruments validated in the population in question (e.g., sex, age of defendant/litigant) and for the issue under consideration (e.g., parental capacity, sexual violence recidivism).

It is important to note that judges have considerable latitude in their gatekeeping role under *Daubert*. The factors outlined in *Daubert* are only guidance to aid judges in making admissibility determinations, and the Supreme Court clearly described these factors as "flexible" under FRE 702 (*Daubert v. Merrell Dow Pharmaceuticals, Inc.*, 1993, p. 594). The Supreme Court also contemplated the admissibility of new scientific evidence in *Daubert*. While they gave substantial leeway to introduce new and emerging scientific evidence, they also pointed out that "well-established propositions are less likely to be challenged than those that are novel, and they are more handily defended" (*Daubert v. Merrell Dow Pharmaceuticals, Inc.*, 1993, p. 592). Thus, it is certainly possible new and emerging models like the AMPD could withstand a *Daubert* challenge in many cases, but the paucity of applied evidence leaves the AMPD vulnerable to admissibility challenges.

Although admissibility will vary depending on individual case facts and judges' determinations, in DeMatteo and Olver (2022)'s review of the PCL-R, they suggested that if a judge rules the PCL-R meets FRE 401's relevance standard, and it is determined the information is not prejudicial (FRE 403), then the PCL-R will likely meet the four *Daubert* criteria and an expert's testimony could be admissible under FRE 702. In general, we concur. Though,

considering the previously described issues with the PCL-R's performance in field studies (e.g.,

Edens et al., 2014; Murrie et al., 2009; Rufino et al., 2012), the likely prejudicial nature of the

psychopathy label (e.g., Cox et al., 2013; 2016; Edens et al., 2013), and the use of the PCL-R in

some non-empirically supported contexts (e.g., DeMatteo & Edens, 2006; DeMatteo & Olver,

2022), practitioners should not presume admissibility under FREs 401 and 403, and astute

attorneys could also bring *Joiner* criteria into play in some circumstances.

Regarding the AMPD's admissibility, it appears to have a steeper hill to climb relative to

the PCL-R. While the PCL-R is likely to meet *Daubert* criteria if it passes muster under FREs

401 and 403, the AMPD instruments are more vulnerable to challenge under *Daubert*'s guidance

for FRE 702. For example, there are published findings related to the AMPD instruments'

reliability and validity in general populations (see Zimmerman et al., 2019), but these tests in

forensic populations are quite limited. The AMPD appears in numerous peer-reviewed

publications, but much of this work is cross-sectional and very few were conducted in justice-

involved samples. The American Psychiatric Association's decision to keep the AMPD in

Section III of the *DSM-5-TR* rather than Section II (APA, 2022), as well as the tensions

surrounding the AMPD's inclusion in the *DSM-5* amongst the practitioners in the Personality

and Personality Disorders Workgroup (e.g., Silk, 2016), demonstrate the AMPD lacks some

degree of consensus in the scientific community. Thus, while there is an argument to be made for

the AMPD's admissibility in legal settings, practitioners would likely feel more confident using

the AMPD if there was a stronger corpus of literature demonstrating it is valid and reliable in

forensic populations.

We move now to a discussion of the AMPD in the context of risk assessment. Our

overarching goal is to outline areas in need of empirical investigation so the field is better

situated for the changing tides in personality diagnosis. Addressing some of these issues will

bolster mental health professionals' case should they find themselves defending their use of the

AMPD in some future legal arena.

<div align="center">**Where Are We Going?**</div>

The AMPD and Risk Assessment

Few studies have examined the AMPD with empirically-supported risk assessments. As

of September 2023, there are no published investigations of the AMPD with commonly used

forensic instruments like the VRAG-R (Harris et al., 1993; Rice et al., 2013), the Sex Offender

Risk Appraisal Guide (SORAG; Quinsey et al., 2004; Rice et al., 2013), the Static-99R/Stable-

2007 (Hanson & Anderson, 2020), the Level of Service Inventory-Revised (LSI-R; Andrews &

Bonta, 1995), or the Sexual Violence Risk-20 (SVR-20; Boer et al., 1997). Although there has

been some study of the alignment of the AMPD with the PCL-R (e.g., Anderson & Kelley,

2022), and the PCL-R modestly predicts violence on its own (e.g., Douglas et al., 2015), current

risk assessment with the AMPD seems vulnerable to a *Daubert* challenge due to this paucity of

empirical data.

One of the rare exceptions in the AMPD risk assessment literature is Somma et al

(2021)'s investigation of the PCL-R, the PID-5 (Krueger et al., 2012), and the Historical,

Clinical, and Risk Management-20, Version 3 (HCR-20v3; Douglas et al., 2013). This study of

general violence risk assessment was conducted in a small ($N = 82$) sample of Italian male sexual

offenders. They found significant relationships between the HCR-20v3 and the PID-5 facets of

hostility, attention-seeking, impulsivity, risk-taking, manipulativeness, eccentricity, restricted

affectivity, intimacy avoidance, callousness, distractibility, and irresponsibility. However, when

controlling for the PCL-R total score, only restricted affectivity, intimacy avoidance, callousness,

distractibility, and irresponsibility remained significant. Somma and her colleagues suggested the facets that became non-significant when controlling for the total PCL-R score may represent psychopathy-related traits in this sample, but they also noted that only 11% of the sample had a total PCL-R score ≥ 25, and just 3.7% had a total PCL-R ≥ 30 (Somma et al., 2021). The apparent psychopathy-related facets in this study did not align with the *DSM-5-TR* version of the AMPD's antisocial PD or the psychopathy specifier (APA, 2022), nor did it perfectly align with the general consensus regarding psychopathy-related traits in the AMPD literature (Anderson & Kelley, 2022). Nevertheless, the Somma et al (2021) study provided a valuable starting point in risk assessment with the AMPD, as it demonstrated prediction of sexual offenders' general violence risk (as measured by the HCR-20v3) may be improved with a combined AMPD and the PCL-R assessment. Practitioners would be best served with additional research in this area, as well as investigations of the AMPD with commonly used risk assessment measures like the V-RAG and Static-99/Stable-2007.

There are also a few early studies testing the AMPD in justice-involved populations. For example, Dunne et al (2018) tested the PID-5 with a self-report aggression questionnaire in a sample of male Australian inmates. Although there were significant partial correlations between aggression and four of the PID-5 facets (callousness, hostility, impulsivity, and risk taking), only PID-5 hostility and risk taking remained significant in the regression model (Dunne et al., 2018). A larger study of male Australian inmates (Dunne et al., 2021) tested the 25-item PID-5-Brief Form (PID-5-BF; Krueger et al., 2013) with self-reported aggression. The PID-5-BF antagonism and disinhibition domains positively predicted aggression, and the negative affect domain weakly and negatively predicted aggression (Dunne et al., 2021). The Personality Inventory for DSM-5 Forensic Faceted Brief Form (PID-5-FFBF; Niemeyer et al., 2022) was developed for

use in forensic samples. The PID-5-FFBF's validation study was conducted in male German

detainees, and it predicted poor psychological adjustment, institutional misbehavior, and risk for

reoffending (Niemeyer et al., 2022). Mulay et al (2022) demonstrated the AMPD could be

utilized in an indirect, multimethod threat assessment of Theodore Kaczynski. They found Mr.

Kaczynski had impairments in detachment and psychoticism (AMPD Criterion B), as well as

deficits in interpersonal functioning (AMPD Criterion A). Though they may not be robust

enough to withstand *Daubert* challenges in some cases, these early investigations of the AMPD

in forensic applications demonstrate its potential utility in justice-involved populations and

provide a foundation for additional risk assessment research.

Finally, there is evidence that the Personality Psychopathology Five (PSY-5; Harnkess et

al., 1995) scales from the Minnesota Multiphasic Personality Inventory-2-RF (MMPI-2-RF; Ben-

Porath & Tellegen, 2008) and Minnesota Multiphasic Personality Inventory-3 (MMPI-3; Ben-

Porath & Tellegen, 2020a, 2020b) converge to a degree with AMPD measures (e.g., Anderson et

al., 2013; Brown & Sellbom, 2023) and are related to outcomes pertinent to forensic settings. For

example, PSY-5 scales predict recidivism of intimate partner violence and treatment dropout

(e.g., Whitman et al., 2020), violent offending and institutional violence (Gottfried et al., 2022),

and probation violations (Tarescavage et al., 2014). Moreover, there is research examining these

scales alongside forensic instruments, such as the HCR:20v3 (Douglas et al., 2013), Psychopathy

Checklist: Screening Version (PCL:SV; Hart et al., 1995), and Static-99 (Anderson & Hanson,

2010), in the context of violence risk assessment (Anderson et al., 2020; Tarescavage et al.,

2016). Although the PSY-5 scales were not designed to measure Criterion B of the AMPD, these

scales may serve as an additional tool to measure a trait model markedly similar to that of the

five AMPD domains. Moreover, clinicians can generate PSY-5 data without the need to

administer additional instruments, and there is clear research related to the use of the MMPI in

forensic settings (e.g., Ben-Porath et al., 2022). However, it is worth noting that the PSY-5 scales

only offer domain-level information and there is no MMPI-based measure of Criterion A that

currently exists. Nevertheless, the MMPI instruments hold promise as a practical solution to

measuring a trait model that is conceptually and empirically like AMPD Criterion B.

The Path Forward

Above, we outlined a few concerns with the ways forensic psychologists typically

incorporate PD evidence into legal contexts, particularly the use of psychopathy and the PCL-R.

The traditional approach for assessing psychopathy via the PCL-R has clear ethical, empirical,

and legal challenges that leaves forensic psychologists vulnerable in legal settings. At a broader

level, personality assessment in forensic contexts is in an odd position where the traditional,

categorical approach persists in the most recent edition of the *DSM*, while the academic field is

clearly shifting to dimensional conceptualizations of personality pathology (APA, 2022;

Hopwood et al., 2018). At the same time, there is insufficient evidence for the AMPD within

forensic settings to suggest that this model and its corresponding measures can reasonably step in

to replace personality assessment methods currently utilized in forensic settings. The guidance

on how one might incorporate the AMPD into violence risk assessment is, at this point, largely

theoretical.

The field stands at an interesting juncture where empirical evidence *against* traditional,

categorical assessment work (i.e., the PCL-R) is juxtaposed with *insufficient* evidence for

modern approaches to personality assessment (i.e., the AMPD). Although this article describes

the limited body of research supporting the clinical utility of the AMPD in forensic contexts, our

call mirrors other recent arguments within the field regarding the AMPD's readiness for applied

settings in general (e.g., Tackett et al., 2022; Widiger & Hines, 2022). To put it plainly, we are

concerned that personality assessment research is leaving forensic psychologists without

scientifically defensible psychopathy and personality tools to contribute to the legal system. This

concern echoes a paper by Storey and colleagues (2016), who observed that there is no notable

'competitor' to the PCL-R. There certainly is not an AMPD-based competitor that has made a

sufficiently compelling case for forensic psychologists to actively use, which means not much

has changed for forensic evaluators since the publication of the AMPD[1]. The PCL-R remains the

most empirically supported tool available to assess personality and behavioral features relevant

to forensic contexts (e.g., psychopathy). Below, we outline a number of areas that forensic

personality researchers must address to provide a firm basis for using the AMPD in applied

violence risk assessment work.

A Need for Psychometric Work within Criminal-Legal Populations

Although most AMPD research has focused on self-report measures (Zimmerman et al.,

2019), there are interview-based measures available for use, such as the Structured Clinical

Interview for DSM-5-AMPD (SCID-5-AMPD; First et al., 2018) or the Semistructured Interview

for Personality Functioning (STiP 5.1; Hutsebaut et al., 2017). Given the high-stakes nature of

forensic evaluation work, psychologists in applied settings need well-validated self-report and

interview-based measures of legally relevant psychological constructs. Although under-studied,

Niemeyer et al (2022) developed the PID-5-FFBF, which needs further validation. There are also

rescoring methods to generate AMPD scores with the Personality Assessment Inventory (PAI;

Morey, 1991, 2007). The rescored PAI includes a regression-based approach that generates a

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[1] We point readers' attention to the development of the Comprehensive Assessment of Psychopathic Personality (CAPP; Cooke et al., 2012). CAPP researchers have developed an interview, staff rating tool, and a self-report measure of the CAPP model with recent work integrating the CAPP into violence risk assessment (Gatner et al., 2022).

unidimensional score for Criterion A and scores for all 25 Criterion B facets (Busch et al., 2017).

There is also a PAI item-based approach that generates Criterion B domain scores (Ruiz et al.,

2018). The development paper for the PAI item-based procedure provided some initial evidence

of validity within a forensic treatment sample (Ruiz et al., 2018). There is also unpublished work

supporting the psychometric properties of the AMPD with PAI methods (Kelley, 2018; Tansey et

al., 2022). Notably, these methods are available for applied use via the PAI Software Portfolio

and online scoring via the PAR iConnect, which yields scores that reference the community and

clinical normative samples (Morey, 2020). Finally, researchers recently published item-based

scales that map onto the four elements of Criterion A and provides a score for overall functioning

using, in part, the PAI community adult and clinical patient normative samples (Kurtz et al.,

2023), although these scores are not available for applied use currently.

Although these developments are welcomed, there is substantial need for additional

psychometric data in criminal-legal settings. Notably, there is no normative forensic dataset for

any self-report or interview-based measure of the AMPD. There is also no evidence that

interview-based measures are resilient to bias or are consistent across evaluators. Evidence of

inter-rater reliability is essential to withstanding legal scrutiny and ensuring that instrument-

based conclusions are ethical and appropriate for a given case. Moreover, robust validity and

reliability evidence is needed in both research settings and real-world evaluations. There are

ongoing concerns about whether strong psychometric properties within research contexts persist

in the field (see a special issue on this topic by Edens & Boccaccini (2017)), and understanding

these issues is crucial for defending against *Daubert* challenges if they arise. For self-report

measures, scales assessing response distortion are also vital for interpretation. Although there are

PID-5 scales for consistency (Keeley et al., 2016) and overreporting (Sellbom et al., 2018), these

have not been thoroughly evaluated within forensic populations. There is also no known scale to

assess underreporting, which is highly applicable to violence risk assessments.

Predictive validity within forensic settings remains another largely unexplored area.

Research should investigate whether AMPD measures predict important forensic outcomes,

including institutional misconduct, violation of probation or parole, treatment success, treatment

dropout, suicide attempts while incarcerated, and recidivism. Research should, of course, also

investigate whether AMPD measures outperform traditional PD measures in both validity and

reliability. Along these lines, clear and empirically-supported cutoffs to inform decision-making

would aid the criminal-legal system in successfully identifying individuals at-risk of different

forms of violence and properly allocating resources. Finally, there is insufficient evidence

regarding the functioning of these measures in marginalized groups within forensic contexts,

which should be explored to be consistent with *Joiner* criteria.

Closing the Gap between Science and Practice

The AMPD research and implementation field must keep in mind the unique needs of

psychologists practicing within forensic settings. Forensic psychologists conduct evaluations

within an adversarial system where the client is often not the examinee and there is minimal (or

no) guarantee of confidentiality. Forensic psychologists then communicate their findings orally

(e.g., expert testimony) and in written formats (e.g., forensic reports) to legal decision-makers

(e.g., judges, juries) who rarely have specialized training in psychometrics and psychological

science. The legal system is inherently dichotomous (e.g., guilty or innocent), whereas the

AMPD is a conceptual and practical shift away from dichotomies and into dimensional territory.

In this way, the traditional categorical approach may be well-suited to the needs of psychologists

working within forensic settings. It remains unclear how forensic psychologists might perceive

the clinical utility of a purely dimensional, or hybrid dimensional-categorical, model of

personality pathology. The inclusion of diagnoses within the AMPD, such as antisocial and

borderline PDs, may prove a necessary tool for forensic psychologists who rely on diagnostic

categories to communicate information and make practical decisions.

If the AMPD proves both clinically useful and empirically sound in forensic settings,

then researchers will need to mobilize training resources that are accessible to practicing forensic

psychologists. The AMPD has remained a largely academic movement with less of a focus on

the improvement of practice, particularly in forensic settings. If personality science is truly

shifting away from categories, then forensic psychology will need to adjust the current

approaches to personality assessment. Training services will have to target practical skills,

including communication of AMPD case conceptualizations to legal audiences, as well as

contemplate formal procedures for incorporating the AMPD into risk assessment batteries. It is

unlikely that each component of the AMPD will sufficiently relate to violence risk. There is a

need for clear evidence that identifies which AMPD components are relevant to specific forms of

violence across time and in light of contextual factors. This literature should link up to broader

discussions within the field about static and dynamic risk factors for violence. We encourage

research that considers both risk prediction and risk management. Moreover, we encourage

researchers to investigate the AMPD alongside forensically related instruments (FRI) – that is,

instruments that are not designed for use in forensic settings but are commonly used in these

contexts. Although we discuss the utility of broadband personality instruments (PAI; MMPI-3)

in risk assessment, future work should examine how to integrate the AMPD alongside commonly

used measures of response distortion, such as the Structured Interview of Reported Symptoms-2

(Rogers et al., 2010) or the Miller Forensic Assessment of Symptoms Test (Miller, 2001), given the often high-stakes nature of risk assessment.

Resolving Internal Debates and Pushing Forward with the AMPD

Many of the above-mentioned advances are only possible if there is a certain level of agreement within the field regarding the proper way to model personality pathology. Psychopathy and antisocial PD – two of the most relevant PDs in the legal system – remain fiercely debated. The lack of consensus on the exact nature and manifestation of psychopathy, antisocial PD, and personality pathology more broadly makes it challenging to move forward in research and practice. Tackett and her colleagues (2022) described the progress of the AMPD as "analysis paralysis," and we agree with that characterization. We do believe the AMPD offers a unique opportunity for personality science to advance with a unified, comprehensive model of personality. It is almost certain that aspects of the AMPD and its corresponding instruments will need amendment as new evidence is uncovered and practical needs are revealed. Yet, the goal to shift from subjective categories to empirically-supported dimensions appears a worthwhile endeavor. We hope the field progresses beyond this current state of analysis paralysis and begins advancements that adequately support forensic practitioners in the field.

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