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Walden University

College of Social and Behavioral Sciences

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Kelly-Rose White

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Walden University
2019

Abstract

**Emotional Intelligence and Psychopathic Personality Traits: Examination of Adult Male
Sex Offenders in New Jersey**

by

Kelly-Rose White

MA, Argosy University, 2006

BA, Montclair State University, 2001

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

Psychology

Walden University

February 2020

Abstract

Sexual assault and abuse have a significant impact on victims and society. Although there has been a plethora of research studies examining the criminogenic aspects of sexual offending, sparse literature exists on the emotional aspects of sexual offending. Prior research established that sex offenders hold deficits in their emotional functioning that could be a result of psychopathic personality traits. This research study sought to expand the literature on sex offenders and investigate if adult male sex offenders in New Jersey differ in emotional intelligence and psychopathic personality traits depending on victim typology. This study was grounded in coercion and integrated theories to explore if there are differences between the emotional intelligence and psychopathic personality traits of adult male sex offenders in New Jersey who have adult victims and child victims. The research questions asked if adult male sex offenders in New Jersey with adult victims differ in emotional intelligence and psychopathic personality traits than adult male sex offenders with child victims. Data were collected from a sample of 80 adult sex offenders located in New Jersey who were administered the Bar-On EQ-I and PPI-R. Results were analyzed using a multivariate analysis of variance. The findings of the study showed that when compared to convicted sex offenders with adult victims, convicted sex offenders with child victims had higher total and subscale scores on the EQ-I and lower scores on the three dimensions of the PPI-R. The implications for positive social change include helping to tailor treatment programs to reduce the risk of recidivism based off the identified offender emotional intelligence and psychopathic personality differences.

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Dedication

It is with much love that I dedicate this dissertation to my family, who supported my educational endeavors. For my husband, who helped me fulfill my education goals and took over many times when I was unable to be there. I appreciate your help and support with our family. I love you! For my son, who lights up my life, I worked very hard to provide for you and for you to have a wonderful life. You have forever changed me and made me feel unconditional love. I am sorry that I have been working long hours and missed out on time with you. The time away from you was for me to better our lives in the future, and you were always the driving force that kept me going when I wanted to give up. You are my sunshine and I love you dearly!

For my daughter, I waited 10 years for you. I never thought I would be blessed with you. I defended my proposal two days before you were born. You were with me every step of this way. You and your brother make me a better person and have shown me so many wonderful things. Your smile lights up my soul, and I am forever grateful for you. You'll never know, how much Mommy loves you, please don't take my sunshine away. I love you dearly!

To Ed, how can I summarize 10 years of friendship? You were always there to listen and support me. For that I will be forever grateful. We used to do so much together, and the void without you is just too vast. I will never forget how much you used to make me laugh. I am devastated at losing you and for not being able to finish our plans that we had. Please rest easy and know how much you were loved and needed in my life. In memoriam of Edward G. Conklin (7/24/79-8/16/19).

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I would also like also recognize this research in memoriam of Dr. Brian Zamboni. I appreciate all the time and feedback you put into this project and for your support. Although you left us unexpectedly, you taught me a plethora of things that I can use in the future and for that I am forever grateful.

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Chapter 1: Introduction to the Study

In this quantitative study, I aimed to identify if emotional intelligence (EI) and psychopathic personality traits differ in adult male sex offenders with adult victims and child victims in New Jersey. EI may be an influential piece in determining if someone will be successful in their life (Goleman, 1995). EI has merit and practical utility in predicting outcomes in the quality of social relationships, prosocial behaviors, and delinquent behaviors (Zeidner, Roberts, & Matthews, 2008). If EI relates to dysfunctional and disordered affect (which is correlated with psychopathology), understanding EI and psychopathic personality traits may play an important role in clinical diagnosis and treatment (Parker, Saklofske, Wood, Eastabrook, & Taylor, 2005).

In this chapter, I discuss the statement of the problem, purpose of the study, research questions, the theoretical framework for this study, nature of the study, definition of terms, assumptions, limitations, and significance of the study.

Background of the Problem

Researchers at the U.S. Department of Health and Human Services (2010) reported 75,512,062 child abuse cases in the United States in 2010, and 63,527 were victims of sexual abuse (9.2%). Of the reported child sexual abuse cases in 2010, 23.4% of victims were 4 to 7 years old, and 18.7% of victims were 8 to 11 years old (U.S. Department of Health and Human Services, 2010). Men make up 86% of the perpetrators of child sexual abuse where women make up 14% of the perpetrators of child sexual abuse, but this number is only an estimate as many cases of sexual abuse go unreported, so an exact percentage cannot be derived (U.S. Department of Veteran Affairs, 2007).

There are approximately 90,000 sexual abuse cases in the United States each year (U.S. Department of Justice, 2009). Researchers have shown that 17% to 22% of women and 2% to 8% of men have been victims of sexual assault (Putnam, 2003; Satcher, 2001). Some sex offenders admit to committing more sexual assaults than they are apprehended for (English, Jones, Pasini-Hill, Patrick, & Cooley-Towell, 2000; Heil, Ahlmeyer, & Simons, 2003).

There is a significant deficit in research examining the emotional aspects of sexual offenders and if deficits in emotional functioning are linked with psychopathic personality (Kirsch & Becker, 2006; Negusanti, 2011). Welty (2010) examined the EI of perpetrators of intimate partner violence (IPV). IPV includes crimes of psychological, physical or sexual abuse of a spouse or intimate partner. Welty's research included administering the Bar-On EQ-i to 44 perpetrators of IPV and compared the results to a normative sample. Welty concluded that abusers had significantly lower EI than that of the normative sample. Given the findings of this research, there may be similar deficits of EI in other offender populations. Clinicians employed at such treatment programs may benefit from acknowledging sex offenders as a heterogeneous population who offend for a plethora of reasons (Robertiello & Terry, 2007). This study can help provide documentation that sex offenders are a heterogeneous population and should be treated accordingly. By examining EI and personality traits of sex offenders, treatment programs can be tailored to help sex offenders understand and process how the treatment is delivered and help develop an adequate relapse prevention plan to understand how behavior can affect others and themselves.

Examining the social, emotional, and interpersonal facets of sex offenders requires further investigation (Negusanti, 2011). If differences in EI and psychopathic personality traits exist, treatment programs can treat the identified differences with the goal to reduce recidivism. In this study, I expand on the dearth of literature about the EI and psychopathic personality traits of sex offenders in the hopes of identifying differences to help tailor treatment programs to prevent further recidivism.

Statement of the Problem

Sexual assault and abuse cause a significant impact on victims and society. There were 913 reported cases of sexual abuse in New Jersey (U.S. Department of Health and Human Services, 2011). EI defines one's ability to relate to the world around them (Bar-On, 1997). However, it is not clear how sex offenders relate emotionally, manage their stress, deal with relationships they have, and feel about themselves. It is also not clear if adult male sex offenders who reside in New Jersey in the community under parole supervision with adult victims (over age 18) have different EI and psychopathic personality traits than adult male sex offenders with child victims (under age 18) and if higher scores of psychopathic personality traits correlate with lower EI. Although these questions may be asked in treatment sessions, an offender may have a hard time providing answers. Helping a sex offender find these answers may help clinicians apply treatment modalities aiming at increasing the offender's EI.

There has been minimal research on understanding the EI of sex offenders, and researchers have wondered if deficits in EI are linked with psychopathic features (Kirsch & Becker, 2006; Negusanti, 2011). Trait differences have been identified between sexual

offenders, but little research exists on examining the EI differences in sexual offenders (Negusanti, 2011). In addition, minimal research has been completed to see if there is a connection between psychopathy and EI (Malterer, Glass, & Newman, 2007). This study found that an offender has a difficult time with regulating their emotions and managing stress (low EI), treatment may be able to help the offender monitor their emotions, thus aiding in reducing the risk of recidivism.

Another useful piece of information is if adult male sex offenders with adult victims residing in the community under parole supervision in New Jersey differ in their ability to regulate and manage their emotions than adult male sex offenders with adult child victims. Identifying these deficits could allow treatment providers who work with convicted sex offenders in outpatient settings help the offender identify emotional cues in others, which could also allow for reduction in recidivism. The study also aids in developing research and helps add to the literature gap on understanding the EI and psychopathy personality traits of convicted sex offenders.

Purpose of the Study

The purpose of this quantitative study was to measure EI and psychopathic personality traits of adult male sex offenders in NJ residing in the community under parole supervision while comparing victim typology (age of victim). Offender typology was the identified independent variable. The EQ-I and PPI-R scores were the identified dependent variables.

Research Questions and Hypotheses

Research Question 1: Do adult male sex offenders in New Jersey with adult victims have different overall EI and psychopathic personality traits than adult male sex offenders with child victims as measured by the Bar-On EQ-I and the PPI-R?

Null Hypothesis 1: There are no differences in EI and psychopathic personality traits of adult male sex offenders in New Jersey with adult victims than adult male sex offenders with child victims.

Alternate Hypothesis 1: There are differences in EI and psychopathic personality traits of adult male sex offenders in New Jersey with adult victims than adult male sex offenders with child victims.

Research Question 2: Do psychopathic personality trait scores correlate with EI scores?

Null Hypothesis 2: There is no correlation between EI scores and psychopathic personality trait scores in adult male sex offenders with adult and child victims in New Jersey.

Alternate Hypothesis 2: There are differences in between EI scores and overall psychopathic personality trait scores in adult male sex offenders with adult and child victims in New Jersey.

Included in Chapter 3 are the specific descriptions of the research design, setting, instrumentation, and procedure for analysis of the data.

Theoretical Framework

In examining the facets of EI and psychopathic personality traits, the coercion theory and integrated theory were the theoretical foundations for this research. The coercion theory examines external factors that contribute to the development of antisocial behavior (Colvin, Cullen, & Vander Ven, 2002). Coercive interactions are key behavioral mechanisms through which aggression develops and stabilizes (Granic & Patterson, 2003). The integrated theory focuses on how biological and social learning factors lead to sexual offending behavior (Ward & Beech, 2006). Motivation, emotional, and action control are key aspects of the integrated theory (Ward & Beech, 2006). Through coercion theory and integrated theory, emotional management, problem solving, self-control, and interpersonal relationships are key components in one's EI and also a key component of psychopathic personality.

Coercion theory is a social learning theory that can have an impact on interpersonal relationships and lead to negative behavior (Colvin et al., 2002). Interpersonal problems are common experiences of sex offenders (Fagan & Wexler, 1998) and are consistent with the concept of EI identified and risk levels and measured by the EQ-I (Bar-On, 2006). Maladaptive behavior (psychopathy) has been attributed to deficits in emotional processing (Malterer et al., 2007). McGloin, Pratt, and Maahs (2004) examined data collected from the National Longitudinal Survey of Youth with an $N = 1,725$. Their conclusion was that IQ along with deviant peer pressure is a predictor of delinquency ($\beta = -.072$; $p < .05$) $.12$ (McGloin et al., 2004). According to their findings,

support mechanism and peer relationships are important factors to the etiology of criminal behavior (McGloin et al., 2004). This is consistent with the coercion theory.

Integrated theory examines how biological factors and social learning functioning correlate with cognitive functions, which involve emotional, motivational, perception, memory, action selection, and control (Ward & Beech, 2006). Emotional, motivational, action selection, and control are also consistent with the concept of EI identified and measured by the EQ-i (Bar-On, 2006). Social influence, stress tolerance, impulsivity, and negative affect are consistent with the concept of psychopathy and measured by the PPI-R (Skeem, Polaschek, Patrick, & Lilienfeld, 2011).

Nature of the Study

Although there has been a plethora of research studies addressing the criminogenic aspects of sexual offending, sparse literature exists on the emotional aspects of sexual offending and if deficits in emotional functioning are linked with psychopathy. New research on emotional aspects of sexual offending can help treatment programs tailor the curriculum to help treat these deficits and help reduce the risk of re-offense.

There have been comparisons made between men convicted of crimes of rape and men convicted of crimes of child molestation (Negusanti, 2011). There are different characteristics associated with men who have sexually offended against adults and men who sexually offend against children. For the purpose of this study, men with crimes against victims over the age of 18 were one sample group, and men with crimes against victims under the age of 18 were a second sample group.

Participants of this study were comprised of convicted adult male sex offenders who are currently residing in the community supervised by the New Jersey State Parole Board Sex Offender Management Unit under community supervision for life (CSL) or parole supervision for life (PSL). I conducted a presentation in the offender's treatment groups. Individual participants were informed that there was a \$5.00 Dunkin Donut gift card incentive for study participation. Their participation was completely voluntary, and they could withdraw at any time. Individual participants were handed a flyer (Appendix A) with information about the study with my contact information if they were interested in participating in the study. There are approximately 60 therapy groups conducted in various parole offices through the State of New Jersey in 10 district parole offices. I do not provide therapy services in any of the parole offices. Participants who were former clients of mine were excluded from the study.

The participants were explained the purpose of the research. If agreeable a demographic form to fill out (Appendix B), and the EQ-I and PPI-R were self-administered via laptop computer. The demographic forms and consent forms were number coded to protect the confidentiality of the participants by group. All consent forms and testing materials and laptop computers were kept in a locked file cabinet.

Offender typology was the identified independent variable, and EI and PPI-R scores were the dependent variables. In this study, participants were separated into two groups (sex offenders with adult victims and sex offenders with child victims). All participants self-administered the psychological tools via laptop computer, and test scores were compared using an MANOVA.

Definition of Terms

The terms below are defined to provide clarification to this research:

Community supervision for life (CSL): A sentencing guideline for sex offenders in New Jersey. For sex offenses committed between October 31, 1994 and January 14, 2004, an offender was placed on lifetime supervision managed by the State Parole Board (State of New Jersey, 2007).

Emotional intelligence (EI): The ability to recognize and regulate emotions in one's self and the ability to recognize the emotions in others (Bradberry & Greaves, 2005; Malterer et al., 2008). EI was the identified dependent variable and was measured by the Bar-On EQ-i (Bar-On, 2004).

Paraphilia: Defined by DSM-IV-TR as a sexual disorder characterized by reoccurring, intense sexual arousal, including fantasies, sexual urges, or behavior lasting over a period of 6 months involving objects that are not human, humiliation, or suffering of one's partner or self, or nonconsenting persons or children, causing significant distress and impairment in social, occupational, or other areas of functioning (Malin & Saleh, 2007).

Parole supervision for life (PSL): A sentencing guideline for sex offenders in New Jersey. For sex offenses committed after January 14, 2004 to present day, an offender is placed on lifetime supervision managed by the State Parole Board (State of New Jersey, 2007).

Pedophilia: Defined by the DSM-IV-TR as a sexual disorder characterized by intense sexual arousal, fantasies, urges, or behaviors involving sexual activity with a

prepubescent child (age 13 or younger) for a period of at least 6 months (American Psychiatric Association, 2000).

Psychopathy: A personality disorder that is exhibited through antisocial behavior, lack of remorse, diminished ability to be empathetic, or disinhibited or reckless behavior (Skeem et al., 2011). Psychopathic personality traits was the identified dependent variable and measured by the PPI-R.

Rape, also known as *sexual assault*: Forced sexual intercourse on a person without their permission. The assault may involve the use of physical force and threats and may include vaginal, anal, or oral sexual intercourse by use of a body part of an object (Slaughter, 2009).

Sexual abuse: Any contact or interaction (visual, verbal, physical, or psychological) between a child/adolescent and adult where the adult will use the child/adolescent for sexual stimulation (National Center for Victims of Crime, 2008).

Sexual assault: Any unwanted sexual behavior that includes forced intercourse (rape), oral sex, sodomy (anal sex), unwanted fondling, being forced to watch someone expose themselves, or sexually stimulating someone or yourself that is unwanted (National Center for Victims of Crime, 2008).

Sexual sadism: A paraphilic disorder in which individuals describe reoccurring intense sexual arousal to fantasies, sexual urges or behaviors involving psychological or physical suffering of a victim that is exciting for the person over at least a 6-month period, which causes significant stress or impairment in social, occupational, or other areas of functioning (American Psychiatric Association, 2000).

Assumptions

One assumption of this research was the offender can follow the instructions properly and be able to self-administer the EQ-I and PPI-R tests on the laptop computers with my instruction. Another assumption was that the offender would be honest when filling out the demographic form. This assumption was important for this study because this information was used to differentiate between types of offenders by examining the participant's victim's age (under 18 and over 18), thus placing the participant in the correct sample group.

Scope and Delimitations

In this study, I examined if differences in EI and psychopathic personality traits exist between offenders with child victims (under the age of 18) and offenders with adult victims (ages 18 and older). There is a lack of research examining if such differences exist. Sex offender treatment is the same for offenders who have child victims and adult victims. If men convicted of crimes against adults differ in EI and psychopathic personality traits than men convicted of crimes against children, treatment may be tailored to treat these differences and help the offender to reduce their likelihood of reoffending sexually.

This study was limited to the adult male sex offenders who were residing in the community under parole supervision in New Jersey and does not represent sex offenders as a whole. The sample does not yield data on juvenile or female sex offenders.

The participants were examined as a heterogeneous population and broken into two groups: (a) men convicted of sex offenses against adults and (b) men convicted of sex

crimes against children between both groups. This was done to prevent the generalization of sex offenders as a homogenous population.

Limitations

There are several limitations to this study. The first limitation was that the answers to the Bar-On EQ-i and the PPI-R are self-reported information where the participants answered how they felt on the tests. This is a limitation because some participants may not have been truthful on how they answered questions, which could have impacted the validity of the test results. Another limitation was the time and space of the testing administration. Testing administration was limited to such times where there was no facility conflict, such as group therapy sessions and institutional procedures. This limitation was addressed by scheduling participants when they were not in group therapy, working, or meeting with their assigned parole officers. There was no foreseen bias in this study. Another limitation was some participants. Any former clients of mine were excluded from the study. This could have impacted the number of participants of the study. One final limitation was the types of crimes the participants committed. Types of crimes were not examined during this study. Only the victim's age was used as part of this study. All participants were asked to participate in the study and signed a form consenting to do such. All participants were ethically treated.

Significance of Social Change

The implication for positive social change includes a better understanding of an offender's EI and if deficits in EI are correlated with psychopathic personality traits to help identify differences between types of offenders. Differences existed therefore

tailored treatment programs can be developed specifically addressing emotional deficits and personality traits in an effort to educate the offender and to help prevent future victims. Social change is possible if treatment is individualized to the offender type as different types of sexual offenders have different offending dynamics. This study may help fill the research gap with new knowledge about the EI and psychopathic personality traits of adult male sex offenders in New Jersey living in the community under parole supervision. The study can also aid in producing new information about EI and psychopathy of sex offenders who have adult victims and who have child victims.

Summary

In Chapter 1, I introduced the problem as treatment programs do not identify the EI of these offenders but focus on the criminogenic aspects of offending (psychopathy). There is a lack of research on the understanding of the EI of sex offenders and if lower EI is correlated to psychopathic personality traits. In this chapter, I provided an explanation as to why this type of research was important to study. I also introduced this study, described the related background of the study, and posed the research questions of the study. Chapter 2 addresses the literature relevant to this study as well as the theoretical framework of the study and justifies the research approach.

Chapter 2: Literature Review

In Chapter 1, I discussed the problem, nature, significance, theoretical framework, assumptions, and limitations of the study. Understanding the EI and risk level of adult male sex offenders may yield important information, which could help tailor treatment programs to help reduce the risk of recidivism. Understanding EI is necessary in examining the quality of relationships and prosocial and delinquent behavior (Zeidner et al., 2008). If EI relates to delinquent behavior and psychopathology, understanding EI can aid in the clinical diagnosis and treatment of sexual offenders (Parker et al., 2005). If risk levels are tied to EI, treatment can be tailored to help reduce the risk of recidivism.

The purpose of this quantitative study was to measure EI and risk level of adult males sex offenders in New Jersey while comparing crimes against adults and crimes against children in an effort tailor treatment programs. In this chapter, I highlight the current literature that exists on EI, the absence of research on understanding the EI of sex offenders, and the importance of understanding the EI of adult male sex offenders convicted of crimes against adults and children.

I begin the literature review with an examination of the concepts of EI of sex offenders. Integrated and coercion theories were the theoretical framework for this study. A review of these theories and how they apply to the understanding of the differences in the EI of adult male sex offenders is discussed.

The literature review includes articles obtained through an online data search from the following EBSCO databases: PsychARTICLES, PsycBOOKS , PsychINFO, ProQuest, and SocINDEX. The key words that were used to search the mentioned

databases were *EI, sex offenders and intelligence, sex offenders and emotions and EI, pedophilia, rape, child molestation, Static-99, Static-99R, sexual sadism, child sexual abuse, behavior, crime, paraphilia, and sexual assault*. The literature was obtained, read, and selected to support the study and document the articles that would best contribute to this study.

Vast literature exists on the criminogenic factors of sex offenders, but research on the EI of sex offenders is narrow (Negusanti, 2011). Mann, Hanson, and Thorton (2010) identified a number of criminogenic factors related to sex offender recidivism. Of the risk factors identified, many seemed related to the concept of EI. The factors of impulsivity, deficits in interpersonal and intrapersonal relationships, problem solving deficits, and lack of empathetic responses coincide with many facets of EI as described by Bar-On (Bar-On, 2006). The vast literature on the criminogenic factors of offending seems to overlap with the concepts of EI. This has researchers questioning if sex offenders have deficits in their EI (Negusanti, 2011).

Bar-On (2006) developed a measure of EI, which was termed emotion quotient. The definition of EI can be surmised as the ability to be concerned with understanding one's self and others effectively and the ability to relate well to other people while adapting and coping with stress from within the environment around the individual to see how an individual will live and interact with the people around them. Bar-On stated that EI develops over time and can be impacted by training and even through the application of therapy.

Theoretical Framework

Coercion Theory

Antisocial behavior stems from family interactions (Voss, 1999). The coercion theory examines external factors that contribute to the development of antisocial behavior (Voss, 1999). Antisocial behaviors do not always develop through a cognitive process (Patterson, 1992). Coercion theory is a social learning theory that examines ineffective discipline (Patterson, 1982).

Coercion theory is seen through parent/child relationships in which the parents and their children both have a role in how the child behaves. If the child increases engaging in behavior that is aggressive and inappropriate, the parent loses control over the adverse behavior and gives up control of the child (Granic & Patterson, 2006). Coercive interactions are key behavioral mechanisms that directly contribute to the development of aggression and stabilize over time (Voss, 1999). Inconsistent parental discipline and lack of positive reinforcement leads to antisocial behavior (Patterson, 1982). Coercion causes crime and produces anger (Colvin et al., 2002). Coercion occurs when an individual is exposed to negative stimuli or interactions that cause strain and production of anger. Examples of coercive interactions are conflict, rejection by parental figures, unfair or inconsistent discipline, problems in school, and interpersonal relationships with peers. Interpersonal relationships could involve control, threats, use of force, or intimidation for the purpose of gaining compliance coupled. These relationships coupled with economic pressure, anger, anxiety, and depression can lead to maladaptive behavior (Colvin et al.,

2002). McGloin et al. (2004) reported that deviant peer interactions can be an important link to criminal behavior.

A common experience for sex offenders is to experience the feelings of loneliness due to failed attempts at attaining intimacy (Fagen & Wexler, 1988). In sex offending, offenders frequently disclose problems with interpersonal relationships causing stress, strain, and anger. Feelings of depression, worthlessness, fear, anger, and hurt are experienced but not expressed. An offender can displace their coercive experience on others, thus harming others to cover up their negative feelings. Intrapersonal and interpersonal deficits are consistent with the theories of EI and can be measured on the EQ-i (Bar-On, 2006). Interpersonal deficits can also be measured by Item 2 on the Static-99 or Static-99R. Item 2 on the Static-99R, ever lived with a significant other for over 2 years, shows the possibility to having relationship stability and can be linked to the second composite scale (Interpersonal) of the Bar-On EQi. The interpersonal relationship subscale is the ability to establish relationships that are satisfying to both parties and the ability to relate well to others one is involved with (Bar-On, 2006).

Some sex offenders have been abused or exposed to criminal behavior when younger. If there is social exposure to deviant or criminal behavior, this is a key facet of the coercion theory.

Integrated Theory of Sexual Offending

The integrated theory of sex offending unifies preexisting theories of sex offending (Ward & Beech, 2006). Integrated theory examines how biological factors coupled with social learning functioning (environmental and social) shape an individual

(Ward & Beech, 2006). The biological factors and social learning functioning are associated with cognitive functions, which involve emotional, motivational, perception, memory, action selection, and control (Ward & Beech, 2006). Pennington (2002) identified three neuropsychological mechanisms that can explain sex offending behavior. The motivational/emotional mechanism produces problems with intimate relationships. Action selection and control mechanisms produce problems in self-regulation. The perception and memory mechanism produces unrealistic beliefs and supports attitudes for offending behavior. Deviant sexual arousal is caused by a combination of the three neuropsychological mechanisms per the integrated theory (Ward & Beech, 2006). Motivational/emotional mechanisms, action selection, and control mechanism are consistent with the theories of EI and can be measured on the EQ-i (Bar-On, 2006).

If an individual is maltreated or witnesses violence within their environment, they may experience an inability to form close, meaningful relationships with other, difficulty in problem solving, difficulty with emotional management, low self-esteem, lack of self-control, and a lack of coping skills (Ward & Beech, 2006). All of the identified deficits are the key facets of EI (Bar-On, 2006). The inability to form close, meaningful relationships is measured on the Interpersonal scale and Interpersonal Relationship subscale of the EQ-I (Bar-On, 2006). Experiencing difficulty in problem solving is measured on the Adaptability scale and Problem Solving subscale of the EQ-I (Bar-On, 2006). Difficulty with emotional management is measured on the Intrapersonal scale and Emotional Self-Awareness subscale of the EQ-I (Bar-On, 2006). Low self-esteem is measured on the Intrapersonal scale and Self-Regard subscale of the EQ-I (Bar-On,

2006). Lack of self-control is measured on the Stress Management scale and the Stress Tolerance subscale of the EQ-I (Bar-On, 2006). The lack of coping skills is measured on the Stress Management scale and the Impulse Control subscale of the EQ-I (Bar-On, 2006).

If a person has been arrested for multiple sex offenses or arrested four or more times, they may have a hard time managing stress or a hard time problem solving, as seen on the third and fourth composite scales of the Bar-On EQ-i. The third composite scale, Stress Management (emotional management and regulation), is comprised of two subscales. The stress tolerance subscale shows one's ability to manage emotions effectively, and the impulse control subscale shows how one is able to control emotions effectively (Bar-On, 2006). The fourth composite scale, Adaptability (change management), is comprised of three subscales. The reality-testing subscale is the ability for an individual to validate their feelings and thoughts with their reality. The flexibility subscale shows one's ability to adapt and adjust thoughts and feelings to different and new situations.

Behavior, Emotions, and Crime

The term behavior is action, reaction, and psychological interaction responding to stimuli through observations, introspection, and unconscious process (Goldenson, 1984). Behavior achieves a specific goal and fulfills human need for sexual gratification for some (Zirkel, 2000).

Investigators frequently attribute maladaptive behavior to deficits in emotional processing (Malterer, Glass & Newman, 2008). Human evolution and natural selection

can be used to understand human behavior (McKibbin, Shackelford, Goetz & Starratt, 2008). McKibbin, et. al. (2008) stated that the brain consists of information-processing mechanisms that register and process information. Processing of information incorporates physiological activity needed to perform specific tasks and the ability to problem solve. The authors explained that the human brain also involves psychological mechanisms that produce behavior. Goal oriented behavior supports a link between emotions and behavior which is a driving force for human action (Bekendam, 1997).

Emotions are mental responses to an event which consists of physiological, experiential, and cognitive aspects (Mayer, Salovey & Caruso, 2001). Emotions contain information about an individual's environment. In social interactions, both verbal and nonverbal emotional expressions convey information about one's own thoughts, interactions and behaviors (Brackett, Rivers & Salovey, 2006). Emotions are responses at many levels including cognitive and physiological levels (Goleman, 1998). Emotional development correlates with early attachment relationships (Negusanti, 2011).

Problems with emotions, difficulty in social functioning, attitudes that support offending and sexual problems arise from the interaction of neuropsychological processing deficits which are triggered in the environment (Seto & Lalumière, 2010). Emotional problems due to deficits in motivation, emotional deregulation, and impulsivity are due to a lack of executive functioning (Seto & Lalumière, 2010). Executive functioning refers to cognitive processes, which include planning, attention, problem solving, and monitoring actions (Chan, Shum, Toulopoulou & Chen, 2008).

Individuals all differ in the ability to regulate their emotions and demonstrate different strategies to help with emotional regulation (Mayer and Salovey, 1997). Investigators often attribute maladaptive behavior to debilitated processing of emotions (Malterer, Glass & Newman, 2008). Maladaptive behavior and inability to process emotions are key facets for psychopathy (Malterer, Glass & Newman, 2007). Emotional responses to situations or stimuli in the environment form two different dimensions involving affective valence and arousal. Valence response processing by avoiding the situation or stimuli and arousal is an intense response to the situation or stimuli (Patrick, Bradley & Lang, 1993). Feeling the emotion of fear may consist of low valence demonstrated by withdrawing or avoiding and high arousal or action planning.

Empathy consists of components of cognitive and affective functioning which consists of four different parts, emotional recognition skills, taking perspective, demonstration of vicarious emotional responses, and responding with appropriate behavior (Goldenstein & Michaels, 1985). Bar-On (2002) stated if an individual can understand the relationship between behavior and emotion; he or she can learn how to develop their EI and reduce the likelihood of dysfunction.

Umberson, Anderson, Williams and Chen (2003) conducted a study examining 55 men with violent and non-violent behaviors. The mean difference between both groups was .168 for expression of positive emotions and a mean difference of -.257 for expression of negative emotions. The results were conducted via hierarchical linear modeling analysis. There may be limitations from this study due to a small sample size, self-reported information over a 14-day period through journaling and only one

independent variable. Given the small sample size, the study did show small significance in men with a history of violence were more likely to repress their emotions and had trouble appropriately expressing how they feel. The ability to monitor emotions, self-awareness, and EI allow individuals to examine their emotions and identify if the emotions are destructive (Goleman, 2004). Being aware of emotions, while the emotions are developing, aids an individual the optimal opportunity to handle their emotions adequately (Goleman, 2004).

A person who experiences feelings of anger, hurt, and sadness is not a problem, but it is how a person chooses to express their emotions can cause a problem (Alexio & Norris, 2000). Bar-On (1997) suggested that a person may also have trouble coping within their environment and this can be common in individuals who lack reality testing, tolerance to stress, trouble problem solving, and problems with impulse control. Finley (2008) reports that an individual is capable of developing their EI by having self-awareness, managing emotions, having the motivation to achieve goals despite any hardships encountered, being empathetic to others, and maintaining relationships with others. If an individual has a deficiency in their EI, he or she may not be as successful in meeting their environmental demands and may have problems experiencing emotions (Bar-On, 1997).

Understanding the concepts of EI can lead to a productive life and positive social experiences (Bar-On, 1997). Development of an offender's EI may help the offender reduce their risk of recidivism. Treatment programs can aid in the development of the offender's EI by teaching the offender through the ideas outlined by Finley (2008).

EI

EI (EI) is the ability to recognize and regulate emotions in one's self and the ability to recognize the emotions in others (Malterer, Glass & Newman, 2008; Bradberry & Greaves, 2005). Salovey and Mayer (1990) stated that EI refers to individual differences in one's ability to process and use emotional information to promote effective social functioning in everyday life. Higher EI predicts enhanced interpersonal factors (better social relationships) and better intrapersonal factors (greater optimism) (Salovey and Mayer, 1990). EI is an innate feature that one learns, enhances and develops over time (Boyatzis, Goleman & Rhee, 2000).

Salovey and Mayer (1990) reported that there are five forms of EI. The five forms are self-awareness, managing emotions, individual motivation, empathy, and relationship development. Their theory of EI is the ability-based model. Daniel Goleman came up with a mixed model of EI called the emotional competencies model (Goleman, 1998). Goleman's theory of emotional competencies breaks EI into four constructs. The first construct is self-awareness, which Goleman reports, is the ability to see how another individual is feeling and recognize the impact of another's feelings while using a gut feeling to make appropriate decisions. The second construct is self-management, which is the ability to control emotions and impulses by changing and adapting to the environment around the person. The third construct is social awareness, which is the ability to sense, process and understand, and have a reaction to how other's emotions are while understanding social network interactions. The final construct is relationship

management, which is the ability to leave an impression on a person and the ability to manage any conflicts that may arise.

Boyatzis, Goleman, and Rhee (2000) reported that Goleman, situated emotional competencies within the construct of EI but argued that a person may learn, work on through the years and develop emotional competencies. Goleman states in the emotional competencies theory that all people have a generic form of EI, which impacts their ability to learn emotional competencies (Boyatzis et al., 2000).

Mayer and Salovey (1997) reported that there are four branches of EI. The first branch, perception appraisal, and expression of emotion is the ability to identify the emotion in thoughts and feelings, through language, behavior, and appearance. It is also the ability to express needs that directly relate to those feelings and knowing how to examine what is an accurate or inaccurate (honest versus dishonest) way to express one's feelings. The second branch, emotional facilitation of thinking, describes how emotions place in priority order in one's mind with direct attention given to information that is important. Emotions are often vivid and are able to help with judgment and memory concerning feelings. Emotional mood swings tend to change a person's perspective from optimistic to pessimistic by looking at different viewpoints. When emotions facilitate reasoning and creativity, problems can be solved. The third branch, understanding and analyzing emotions, is the ability to label emotions, assign words to the emotions, ability to interpret the meaning of emotions, ability to label emotions and recognize relations among words and emotions themselves, such as relations between liking and loving, ability to interpret the meanings that emotions convey regarding relationship, such as that

sadness often accompanies a loss, ability to understand complex feelings, and the ability to recognize the transition among emotions such as anger to satisfaction or from anger to shame. The fourth branch, reflective emotion regulation to promote intellectual and emotional growth, is the ability to decipher between pleasant and unpleasant emotions, the ability to engage and detach from emotions, the ability to monitor one's emotions in oneself and towards others, and to be able to moderate negative feelings by changing negative emotions to pleasant ones.

Of the four branches, emotional regulation is the most important for social interaction due to the importance of emotional expression and direct behavior (Lopes, Salovey, Beers & Cote, 2005). Individuals differ in their ability to regulate their emotions and some choose more successful strategies than others (Mayer & Salovey, 1997). Emotion management creates an interface between the cognitive and general personality system (Mayer, Caruso, Salovey & Sitarenios, 2001). There are dangerous behavioral consequences when one is not aware of or ignore their feelings (Zukav, 1989). Goleman (1995) states when an individual stifles their emotions; he or she creates distance, becomes out of control and pathologically leads to symptoms of depression, anxiety, agitation, and rage.

Bar-On (2006) suggested that a person may have trouble coping within their environment, which is common in individuals who lack reality testing, tolerance to stress, trouble problem solving, and problems with impulse control. Individuals who are avoidant tend to engage in negative behavior are more aggressive and have greater

conflict with their mothers (Greenberg & Speltz, 1988). The lack of coping strategies contributes to difficulties in adjustment and antisocial behavior (Voss, 1999).

The theory of EI can be demonstrated through behavior in school settings, communities and the workplace (Emmerling, Shanwal & Mandal, 2008). Through observation of individuals, EI can be demonstrated in how a person performs academically, in the workplace through effective communication with others, ability to solve day to day problems, build thriving long lasting relationships with others and through moral decision making. EI can also increase an individual's understanding of social acceptability, and how to adapt effectively to the social environments he or she lives (Emmerling, et al., 2008).

Understanding EI can be beneficial to the workplace and is a valuable tool for employers showing how employees can help or inhibit work environments (Poskey, 2004). Understanding one's own emotions and identifying emotions of others can be beneficial in the customer service field. Customer service representatives can understand what the customer needs, see how they are able to help and bring growth to the company. Poskey (2004) indicated social skills are imperative skills needed in the workplace. Being able to communicate effectively, exhibiting good leadership, problem solving, conflict-resolution, teambuilding and supportive working relationships are key components of a well and thriving workplace (Poskey, 2004). Understanding EI in the workplace can help workers control emotions, build trust with colleagues, take responsibility in their work, identify and be aware of emotions, adapt to changes with the company, be innovative in collaborating with colleagues, and add to the longevity of the company (Poskey, 2004).

Understanding the importance of EI, may help researchers to link deficits in EI with criminal behavior (Negusanti, 2011).

Psychopathy

Psychopathy is a frequently studied personality disorder which embodies personality traits of impulsivity, callousness, manipulativeness, lack of remorse, lack of empathy and can lead to involvement in criminal behavior (Miller & Lynam, 2012; Cooke & Michie, 2001). Psychopathy is an important contributor to criminal behavior (Hare, 1996). Psychopathic traits can emanate early in the developmental stage of life and can stabilize over one's lifetime (Frick, Kimonis, Dandreaux & Farrell, 2000).

Individuals with psychopathic traits can exhibit low levels of trust, be deceptive, may exploit others, can display aggressiveness, be arrogant, have a hard time controlling their impulses and may have standards or values that are seen as non-traditional (Lynam & Derefinko, 2006).

Psychopathic individuals begin engaging in criminal behavior at earlier ages, have a wider range of criminal activity which also includes violent crimes, re-offend at a faster rate, violate parole sooner, show lower motivation to complete treatment and are prone to commit more violence while incarcerated (Forth, Hart & Hare, 1990; Cornell, Warren, Hawk, Stafford, Oram & Pine, 1996). Prison populations are estimated to be compromised of 20-30% of individuals who were deemed to be psychopathic (Harpur & Hare, 1994).

EI and Psychopathology

Individuals with psychopathic features can be characterized by a lack of empathy, inability to see emotional states in others, inability to feel guilt, shame or embarrassment (Blair, Leonard, Morton, Blair, 2006). They also tend to be impulsive and have trouble controlling behavior (Kiehl, 2006). Individuals with psychopathic traits can exhibit impulsive behavior, poor behavioral control which may suggest that they are unable to regulate their own emotional responses (Kiehl, 2006). Lack of emotional response and inability to understand the emotions of others is a hallmark trait of psychopathy (Visser, Bay, Gook & Myburgh, 2010).

Psychopathy has been linked with deficits in emotional processing such as recognizing facial expression such as fear (Blair, et. al, 2006; Glass & Newman, 2006). The ability to recognize how another person thinks and feels is a key facet of EI (Barlow, Qualter & Stylianou, 2010). Individuals with psychopathic traits present with emotional deficits that are possibly related to EI (Ermer, et. al, 2012). EI deficits can be linked to certain aspects of psychopathy (Malterer, Glass & Newman, 2007). Understanding such deficits has lead researchers to wonder if there is a relationship between psychopathy and EI (Ermer, et. al, 2012). Several studies have examined psychopathy and emotional deficits but the samples consisted of undergraduate students. Questions remain unanswered as to whether the deficits are also present in other samples (Ermer, et.al, 2012). This study hopes to expand on such literature and provide some answers with offenders who have been convicted of sex offenses in New Jersey.

EI, Psychopathy, and Crime

Lower EI may explain social deviance and correlates with poor behavioral control (Ermer, Kahn, Salovey & Keihl, 2012). Poor behavioral control is one of the hallmark traits of psychopathy (Hiatt & Newman, 2007). Low EI leads to criminal behavior, drug use, and physical altercations (Brackett & Mayer, 2003). Ermer, et. al, (2012) conducted a study of EI on 374 males incarcerated at medium/maximum security correctional facility. Their findings showed that incarcerated males have lower EI than that of the normative sample. Their finding showed the average EI of inmates were below the standard mean of 100 at 87.7.

Lower levels of EI link to deficits in both internal and external problems (Liau, et.al, 2003). Internal problems are lack of empathetic responses, ineffective management of moods, feeling depressed, increased stress, and neuroticism (Liau, 2003). Inability to manage moods and lack of empathetic responses are facets of psychopathy (Kiehl, 2006). External problems are poor academic performance, increased use of drugs and alcohol, higher level of sexual offending, aggression, and delinquency (Liau, et. al, 2003). Liau, et. al (2003) conducted their study with 203 students to determine if EI is a risk or protective factor. Through hierarchical multiple regression and post hoc testing, their findings indicated that EI was a significant moderator in parental monitoring, aggression [$t(199)=3.142, P<0.01$] and delinquency [$t(199)=4.44, P<0.01$]. One limitation to this study is the use of self-reported measures of parental monitoring. It cannot be determined if the students have an accurate depiction of how their parents monitor them which may or may not have influenced the findings.

Lopez and Emmer (2002) conducted a study where they interviewed 17 adolescent offenders and reviewed their crimes. There were three crime categories, belief-driven violent assault, emotion-driven violent assault and mixed-motive crime. The results of the research showed that offenders who committed emotion-driven violent assaults did so because they were unable to deal with their own emotions of helplessness, grief, anger and confusion (Lopez & Emmer, 2002). There were 41 crimes disclosed by the 17 participants. Emotion-driven violent crimes made up 16 of the 41 crimes disclosed. Inability to deal with emotional states is a facet of psychopathy (Kiehl, 2006).

Although limited research exists examining the impact of EI on crime, there is conflicting research on whether individuals convicted of crimes differ in EI than that of the general public. Knight (2005) measured the EI of violent vs. non-violent offenders and found no difference in EI. Hemmati, Mills and Kroner (2004) examined the EI of 119 inmates in a federal medium security prison and a sample from the general public. EI scores results showed the inmates scored higher in EI than that of the general public at $t=2.97$, $p<0.01$.

In contrast, Smith's (2001) study on 56 parolees showed the parolees in the study had lower EI than that of the normative sample $t(45)=-2.28$ ($p<.02$, one tailed). Sauvagnat (2010) conducted a study examining EI of 218 individuals on probation in Texas and found probationers with higher EI were more able to respond appropriately to stressful life events, had better ability to regulate emotions, were able to problem solve more efficiently and healthily ($r(215) = .34$, $p < .001$). Sauvagnat (2010) found that

probationers with lower EI were likely to exhibit more psychological distress than probationers with higher EI, ($r = .49, p < .001$). EI was linked to the probationer's current offense, age at first arrest ($r=.04$), length of probation time ($r=.16, p < .05$), number of arrests ($r=.15, p < .05$) and convictions ($r=.14, p < .05$) (Sauvagnat, 2010). Probationers with higher EI were less likely to receive long terms of probation, more likely to commit one offense and were older at the first arrest (Sauvagnat, 2010). These findings could insinuate higher EI leads to a better life control and appropriate ability to problem solve (Mayer & Salovey, 1997).

Prior research has shown that incarcerated adults with psychopathic traits exhibit a more violent and severe pattern of antisocial behavior while incarcerated and after they are released from prison (Gendreau, Goggin & Smith, 2002). These individuals with psychopathic traits tend to have a long standing history of antisocial behavior that can be traced to their childhood (Marshall & Cooke, 1992). This study helps to see if EI and psychopathy are linked in order to help sex offenders in New Jersey with their treatment to prevent further recidivism.

EI and Sex Offending

Sex crimes throughout history seem to elicit public concern across society. This leads researchers to try and obtain an understanding as to the why sexual abuse and assaults occur. Through research, a better understanding of the criminal, environmental, psychological, and social aspects of sex offenders emerges. Through such research, new

information can lead to the development of treatment programs and community management (Robertello & Terry, 2007).

Men have more problems dealing with sexual deviance than women (Mick & Hollander, 2006). Sexual deviance can cause symptoms of distress, cause impairment in daily functioning and social, occupational, and interpersonal relationships (Kafka, 1994a). Sexually deviant individuals are susceptible to problems with social functioning, moral or legal problems and show increases in emotional distress (Coleman, 1992).

Emotional problems correlate with paraphilic interests, heightened sex drive, and sexual preoccupation. This can lead to sex offending when individuals are unable to use any other coping measure but sex during a negative emotional state (Seto & Lalumière, 2010). Difficulties in social functions can be a direct result of a problem with mood regulation, and attitudes that support sex offending behavior.

Mann, Hanson, and Thorton (2010) conducted a quantitative study examining the plethora of dynamics associated with sex offense recidivism. Their findings suggest ineffective problem solving ($r=0.22$), intrapersonal relationship conflicts ($r=0.36$), impulsive behavior ($r=0.25$), deficits in emotionally intimate relationships (0.32), and lack of concern for others ($r=0.29$) as key reasons for recidivism. These specific key reasons also appear to be the facets of the theories of EI and psychopathy leading researchers to hypothesize that sex offenders have deficits in their EI (Malterer, Glass & Newman, 2008). Bar-On (1997) reports that the concepts of EI can be taught to individuals and help in treatment application with offenders.

The literature on the EI of sexual offenders has limits. Smith (2001) conducted a similar study with parolees and reported similar findings [$t(45)=-2.28$ ($p<.02$, one tailed)]. The individuals on parole scored significantly lower EI scores than non-offenders thus suggesting deficits in emotional functioning.

Moriarty, Stough, Tidmarsh, Eger and Dennison (2001) conducted research examining the EI of juvenile sex offenders compared to non-offending juveniles. Their findings show juvenile sex offenders score higher on aggression than the control group ($f(1,62)=4.57$, $p>0.05$). However, the researchers stated that the results were not highly reliable $\chi^2(21, N=64)=23.97$, $P>0.05$. If the researchers' testing was not highly reliable, it can be assumed that the testing was unable to measure adolescents who committed sex offenders. Moriarty, et. al (2001) report that sex offenders may have a higher inclination for impulsiveness ($r=0.41$), aggressive feelings ($r=0.35$) and inability to identify emotional states ($r=0.32$), which may be a contributing motivation for sexual offending.

Puglia, Stough, Carter and Joseph (2005) conducted a study comparing EI of sex offenders vs. non-offenders and found no deficits in EI scores ($p>0.05$). However, not all subtests of the EI tool were administered in this research. Thus, concluding that an accurate EI score could not be obtained which could have contributed to the lack of score difference. The findings did show that sex offenders had lower years of education than the control group ($t(36)=-2.27$, $p<0.05$). Negusanti (2011) examined the EI of sex offenders and found that the Stress Management Scale ($F(3,43)=3.09$, $p=.037$) and the Impulse Control Scale $F(3,43)=8.22$, $p<.001$, $R^2=36$ on the EQ-i were different in men convicted of crimes against adults and against children. This could suggest men with

crimes against adults may have difficulty managing or controlling their emotions in response to stressful or challenging situation (Negusanti, 2011).

Pedophiles did not demonstrate any difference in EI scores when compared to the normative sample. This could suggest pedophiles can relate to others, develop adequate coping skills in daily life, and are more able to maintain relationships with others (Bar-On, 2006; Puglia, et al., 2005). Puglia, et. al (2005) suggest child molesters are able to adapt to their environments, demonstrate the ability to relate to others, can understand, and manage their emotions sexually offend when they have maladaptive personality traits. The adaptability may serve as a function in offending by being able to obtain access to victims, gaining trust of the victims and their caregivers and, compliance with offending (Negusanti, 2011).

Smith (2001) found individuals with lower EI are less likely to change offending behavior and continue to commit crimes by blaming external forces for their life situations. The individual may feel out of control of their life which could lead to re-offending. EI training may help reduce the risk of recidivism (Smith, 2001). Given the concept that EI is a dynamic factor which can change over time, individuals who are taught to identify emotions and learn better problem solving techniques, may ensure a socially appropriate existence (Bar-On, 2006). Finley (2008) believes that individuals are capable to developing their EI. If treatment programs can focus on both the criminogenic and emotional facets of sex offending, perhaps sex offenders can be taught to build their own awareness and EI to prevent future re-offenses.

Psychopathy and Sexual Offending

Sex offenders are being recognized as heterogeneous in risk levels, criminal behavior, personality characteristics and treatment needs (Boer, Wilson, Gauthier & Hart, 1997; Porter, Fairweather, Herve, Burt & Boer, 2000). Hanson & Bussiere (1998) conducted a meta-analysis of 61 longitudinal studies of sex offenders. They found that an offender's criminal history, having a diagnosis of Antisocial Personality Disorder, high scores on a psychopathy measure were all related to rates of recidivism. Porter, et. al. (2000) report that men convicted of crimes of rape have higher levels of psychopathy than men convicted of other types of sexual offenses. Kirsch and Becker (2007) state men convicted of crimes against adults disclose experiencing negative emotionality prior to committed sexual offenses and tend to be more psychopathic suggesting an inability to effectively regulate their emotions. Barabee, Seto, Amos and Preston (1994) reported that men who commit crimes against adults show higher levels of sexual motive for committing crimes of rape versus committing the act of rape due emotional responses of anger and hostility.

One downfall of the current research is the research studies have looked at criminal behavior and how this can relate to psychopathy. However, the crime of rape is often categorized as a violent offense or crimes against a person versus examine the crime of rape on its own (Skeem & Mulvey, 2001). Serin, Mailloux and Malcolm (2001) state men who have been convicted of the crime of rape, 12.1-40% met the diagnostic criteria of psychopathy. They also stated that when comparing PCL-R scores, there was a noticeable difference in psychopathic traits and type of sexual offenses. High PCL-R

scores were noted more among men who were convicted of crimes against adults versus men who victimized children (Porter, Campbell, Woodwork & Brit, 2001). Men who were convicted of sexual offenses with both adult and child victims were shown to have the highest PCL-R scores.

Typology of Sexual Offenders

Researchers have hypothesized that there are differences between types of sex offenders. They hypothesized that there are differences between sex offenders who offend against adults ($M = 92.6$, $SD = 12.1$, $p < .05$) and sex offenders who offend against children ($m=94.8$, $sd=8.4$, $p<.05$) tested by using a MANOVA and comparing results. A discriminate analysis chi-square was conducted which showed significance (χ^2 of 65.26, $p<0.05$) indicating there was a difference between non-verbal intelligence of rapists (38.5%) and child molesters (11.1%) (Valliant, Gauthier, Pottier & Kosmyna, 2000). Shechory and Ben-David (2005) did research on 45 men convicted of crimes of child sexual abuse and 43 men convicted of crimes of rape. The participants were administered the Buss-Durkee hostility inventory. A MANOVA was performed and the results were compared. Their research findings suggest that men convicted of crimes of rape were more aggressive than the general population ($m=54.45$; $SD=18.74$; $p<.001$). They also found that men convicted of crimes of child sexual abuse were less aggressive than the general population ($m=40.87$; $SD=16.03$, $p<.001$). Their findings support the idea that sex offenders cannot be considered homogeneous but are heterogeneous and should be researched as such.

Sex Crimes Against Children

There is no clear way to estimate the prevalence of child sexual abuse in the world due to underreporting. A national reporting study done by the US Department of Health and Human Services (2010) reports 75,512,062 children in the United States were abused in 2010, and 63,527 were victims of sexual abuse (9.2%). Children ages four to seven years old made up 23.4%, and ages eight to 11 years old made up 18.7% of the reported sexual abuse victims in 2010. Men make up 86% of the perpetrators of child molesters where women make up 14% of the perpetrators of child molesters, but this number is only an estimate as many cases of sexual abuse go unreported so an exact percentage cannot be derived (US Department of Veteran Affairs, 2007).

Pedophilia is a disorder characterized by intense sexual arousal, intense sexual urges or fantasies involving sexual activity with a prepubescent child or children (American Psychiatric Association, 2000). The diagnosis of pedophilia can apply to individuals who have never committed a sexual offense due to the criteria for diagnosis does not include acting out on the fantasies or urges (Laws & O'Donohue, 1997). The criteria for a diagnosis of pedophilia can be made only if the fantasies, urges, or sexual behavior causes significant impairment in areas of occupational and social functioning (Laws & O'Donohue, 1997).

Groth (1979) identifies subtypes of pedophiles which he called fixated and regressed. Fixated pedophiles report sexual desires and preferences to be around children begins in adolescence where the individual is less likely to form healthy sexual contact with age appropriate peers appears more emotionally immature and becomes preoccupied

with children (Groth, 1979). These individuals go to great lengths to develop relationships with vulnerable children, go to extensive lengths to groom and premeditate the acts. These individuals are at higher risk for committing future sexual offenses because of deviant sexual arousal to children (Groth, 1979).

Regressed pedophiles have a sexual interest toward age appropriate peers but substitute sex with children as a means of coping during times of considerable stress (Groth, 1979). Regressed pedophiles are impulsive, opportunistic, have little to no grooming techniques in their offending. In comparison to the fixated pedophile, regressed pedophiles are more apt to have a victim who is a family member or a victim who is easily accessible (Groth, 1979).

Knight and Prentky (1990) expand on Groth's typology of pedophiles into four categories based on the degree of fixation and level of social competence. Individuals, who have a primary sexual interest in children, are high fixation where individuals, who have sexual interest in age appropriate partners, are low fixation (Knight & Prentky, 1990). Pedophiles can be classified as high fixation/high social competence, high fixation/low social competence, low fixation/high social competence and low fixation/low social competence. Level of contact with children is also examined when typing pedophiles. High degree of contact serves an interpersonal gain to meet social, emotional and sexual needs. Interpersonal needs and regulation are key scales measured on the EQ-I (Bar-on, 2006).

Finkelhor (1984) reports many pedophiles often lack empathy, but other research has shown that pedophiles will often show empathy towards victims of other offenders or

toward their own children (Marshall, Fernandez, Lightbody & O'Sullivan, 1994). Individuals who molest children have extremely low levels of self-esteem (Marshall & Mazzucco, 1995). They also lack intimacy and have increased loneliness due to the inability to form an attachment to others (Laws & O'Donohue, 1997). Pedophiles molest children because of deviant sexual arousal to a child age group (Salter, 2003).

Finkelhor (1984) describes four factors to explain why pedophiles feel sexually attracted to children. Emotional congruence, the first factor, describes the reason a molester is sexually satisfied from a child may be due to prior victimization or the offender views themselves childlike. Sexual Arousal, the second factor, examines the origin of the preference of sexual attraction to children. Blockages, the third factor, describe the reasons why an offender cannot have his/her needs met with other adults either due to poor social skills or fear. Disinhibitions, the fourth factor, describes the ways an offender will go about victimizing a child either through using alcohol to get drunk, distorting perceptions of the child, or using grooming to gain the child's compliance.

Sex Crimes Against Adults

Paraphilia is a sexual impulse disorder characterized by an intense deviant arousal, reoccurring deviant sexual urges, fantasies or behaviors causing significant impairment in occupational, social or other areas of functioning (American Psychiatric Association, 2000). The deviant reoccurring behaviors, thoughts, and feelings must be prevalent for at least six-month duration to meet criteria for the Axis I diagnosis of paraphilia. Paraphilic disorders are predominately occurring in men (Kafka, 1996).

From a legal perspective, rape is forcible carnal knowledge against an individual's will (Koss, 1992). The act of rape is an interpersonal crime where social competence is a crucial development in sexually deviant behavior. Individuals who commit crimes of rape are often not aware of the effects their crimes have had on their victims, are unable to fully acknowledge emotions found in others, and tend to lack empathy for their victims (Abel, Mittelman, and Becker, 1985).

The act of rape is a common occurrence but often goes unreported (McKibbin, Shackelford, Goetz & Starratt, 2008). Estimates of 67-84% of rapes go unreported to law enforcement (Greenfield, 1997). Groth (1979) did a study finding 75% of convicted adult rapists have arrests as juveniles for sex related offenses. Distressingly, a retrospective study has found, without treatment, the average adult offender has committed three hundred and eighty sex crimes in their lifetime.

Individuals, who commit convicted of crimes of rape, lack the ability to identify affective cues, demonstrate high levels of anxiety, have problems interacting with women, and lack the ability to be assertive in their relationships (Laws & O'Donohue, 1997). When some victims show a level of distress, some rapist's arousal increases (Laws & O'Donohue, 1997). Cognitive processes examining the victim's responses show that the rapist may distort the interaction with the victim and think the victim has a desire for sexual contact or experience enjoyment in the act (Laws & O'Donohue, 1997). Rapists generally have low socioeconomic status, drop out of high school, have erratic employment histories in unskilled jobs, and lack assertiveness (Sternmac & Quinsey, 1986).

Groth (1979) developed three typologies of rapists, anger rapist, power rapist, and sadistic rapist. Anger rapists commit crimes of rape as an outward expression of anger and hostility that has been suppressed and built up over time (Groth, 1979). Anger rapists have intimate relationships riddled with conflict, displaced hostility and resentment on the victim they choose. Anger rapists tend to use force, are physically and verbally aggressive, degrade or humiliate their victims, tend to be more spontaneous, more impulsive, and rape due to a preceding life stressor (Groth, 1979). Power rapists are motivated by power, tend to have more control over their victim, tend to cause physical harm, go to great lengths to plan the offense, and look for someone who appears vulnerable or as an easy target (Groth, 1979). Power rapists experience feelings of being inadequate, feel controlled by others, feel insecure about their masculinity, and rape as a means of feeling powerful, in control or strong (Groth, 1979). Sadistic rapists are the most dangerous rapists because these rapists get a great deal of pleasure and excitement from inflicting harm on their victims and enjoy watching the victim's fear or suffering (Groth, 1979). Sadistic rapists tend to be extremely abusive, may restrain or torture their victims in bizarre ways, may mutilate or kill their victims, go to considerable lengths to plan the crime and tend to target and stalk victims due to a specific physical trait or other attribute (Groth, 1979).

Knight and Prentky (1990) expanded Groth's typology of rapists and developed four motivating reasons for committing crimes of rape, opportunistic, pervasively angry, sexual gratification, and vindictive. Opportunistic rapists have crimes that are typically impulsive, unplanned, less violent, and driven by a need for immediate gratification

(Knight & Prentky, 1990). Opportunistic rapist can also take advantage of situations where another crime takes place and rapes during the commission of another crime (Salter, 2003). Pervasively angry rapists are impulsive, have lower social competence, experience problems with anger and hostility, have a significant history of antisocial or aggressive behaviors, and tend to use excessive force or violence during their crimes (Knight & Prentky, 1990). Sexual gratification rapists experience intense fantasies or preoccupations of acts of rape and can be either sadistic or non-sadistic (Knight & Prentky, 1990). Vindictive rapists, unlike pervasively angry rapists, do not generalize their anger to all people but direct all their anger toward woman where their offenses are humiliating, degrading and physically harmful (Knight & Prentky, 1990).

New Jersey State Parole Supervision of Sex Offenders

In the State of New Jersey, individuals with sexual offenses convictions dated between October 31, 1994 and January 14, 2004, are placed under Community Supervision for Life (CSL). CSL is a mandatory sentence for individuals convicted of aggravated criminal sexual contact, aggravated sexual assault, endangering the welfare of a child, kidnapping for sexual purposes, luring, enticing, and sexual assault (State of New Jersey, 2005). CSL is a special sentence in addition to any incarceration time. An offender is able to make a petition and the court shall grant an individual to be removed from CSL if the offender has remained offense free for a period of 15 years after their term of incarceration or date of last conviction (State of New Jersey, 2005). An individual may violate the terms of their CSL by failing to follow the guidelines set by parole

resulting in a 4th degree crime which could yield additional jail time (State of New Jersey, 2005).

Summary

Prior researchers have concluded that there are differences between sex offenders and how emotional states can lead to maladaptive behavior. It is the goal of this study to determine if differences in EI and psychopathic personality traits exist between men convicted of crimes of rape and child sexual abuse in the hope of tailoring treatment programs. The literature review demonstrates the lack of research of the EI and psychopathic traits of sex offenders. Emotional facets are part of maladaptive behavior (psychopathy) including sex offending.

This study could be valuable in examining the differences in EI and psychopathic personality traits of convicted sex offenders to help tailor treatment programs to treat the identified deficits. The following chapter will describe the methodological and procedural aspects to this study.

Chapter 3: Research Method

Introduction

The purpose of this study, grounded in coercion and integration theories, was to explore if there are differences between the EI and psychopathic personality traits of male sex offenders who are residing in the community under parole supervision with convictions of crimes of rape and child sexual abuse. In this chapter, I describe the research design, participants, instrumentation, methods for data collection, and data analysis. Measures for protecting the rights of participants and criteria for participant selection are also discussed.

Research Design and Rationale

In this quantitative study, I used a quasi-experimental design. A quasi-experimental design was best suited for this study due to the experimental design being unrealistic for settings involving the criminal justice system (see Andrews & Bonta, 2006). My intention of the study was to determine if differences in EI and psychopathic personality traits exist in adult male sex offenders who are residing in New Jersey under parole supervision. Offender typology was the identified independent variable, and EI and PPI-R scores were the dependent variables. As of 2012, there were approximately 14,765 registered sex offenders in the State of New Jersey (Special Analysis Unit, 2012).

Methodology

Population

The population sampled for this study was a group of adult male sex offenders who lived in the community and received outpatient sex offender treatment in New

Jersey. Participants were compared between groups. Offenders with child victims (under the age of 18) were placed into one group, and offenders with adult victims (ages 18 and older) were placed into a different group.

Sampling and Sampling Procedures

The adult male sex offender subjects for this study were adult males who had been convicted of a sex offense and who were residing in the State of New Jersey on supervision by the parole board and attending outpatient sex offender specific therapy.

A sample power analysis was conducted using an online calculator, <http://www.raosoft.com/samplesize.html> using software by Raosoft (2004). Given the psychological test administration, two sample groups, a MANOVA, an alpha level of .05; power level of .95, and a medium effect size, a sample of 80 total participants was considered adequate for this study.

Procedure for Recruitment, Participation, and Data Collection

I traveled to the 10 district parole offices within the State of New Jersey. Outpatient group therapy sessions are held within the district offices. There are approximately 60 outpatient therapy groups within the district parole offices. I am not a therapist in any of the groups that were visited. My former clients were excluded from participating in this study. Participants were asked to participate in this research study when a brief presentation was conducted in the participant's outpatient therapy group. The nature and purpose of the study was disclosed, and participants were asked to participate in this study. A flyer (Appendix A) was handed to group participants and

posted in the parole office for view by the parolees. Participants were encouraged to contact me if they chose to participate in this study.

When a participant contacted me, an appointment was set up for the participant to participate in the study. All participants were informed that their participation was completely voluntary, and they had the option to terminate the study at any point. Participants were advised that their participation would take one to one and one half hours with no foreseeable risks to them. They were also informed that their participation would have no effect on their legal or parole supervision status. Participants were afforded time to ask questions about the research study.

Names of the all participants were removed and replaced with a number in order to protect confidentiality and were entered into a computer database in SPSS. The participant's age, race, education, age at first offending, victim's age, victim's gender, and number of sex offense arrests and convictions were also entered into the SPSS database. After participants were placed into two groups (participants with sex offenses against children were placed into one group, and participants with sex offenses against adult men or women were placed into another group).

Each participant was assigned a number to ensure confidentiality of the test results. The testing protocols did not include identifying information other than participation number. The rights to confidentiality were and was top priority. Participants took the EQ-i and PPI-R tests via laptop computer in the parole office when scheduled for their testing appointment. The participants self-administered the tests via laptop computer and participants completed the demographic form (Appendix B) by themselves.

Upon testing completion, all participants were debriefed and explained the rational of the study, and each participant was given a \$5.00 gift card for Dunkin Donuts as compensation for their time. If any participant verbalized or exhibited signs of distress from partaking in this study, a referral to a local mental health agency was made at the time of debriefing. All participants were given a form with the names of three local mental health agencies to contact.

Instruments

EI Measure

Bar-On (2004) developed the EQ-i to help measure the theories of EI. The EQ-i is a measure that consists of 133 items used to obtain a total emotional quotient score. There are five composite scales and 15 subscales that also gather scores. The five scales are Intrapersonal (self-awareness and self-expression), Interpersonal (social awareness and interpersonal relationship), Stress Management (emotional management and regulation), Adaptability (change management), and General Mood (self-motivation).

The first composite scale, Intrapersonal scale (self-awareness and self-expression), has five subscales. These subscales consist of self-regard, how one perceives and accepts oneself; emotional self-awareness, knowledge and ability to understand one's emotions; assertiveness, the ability to express one's emotions and oneself; independence, to be able to rely on oneself and not needing emotional dependency of others; and self-actualization, the ability to achieve goals that one person sets for themselves and how one can see their own potential (Bar-On, 2006).

The second composite scale, Interpersonal (social awareness and interpersonal relationship), is comprised of three subscales. The empathy subscale is the ability to have an awareness and understanding of how others are feeling. The social responsibility subscale is the ability to find an identity in a social group and be cooperative with others. Lastly, the interpersonal relationship subscale is the ability to establish relationships that are satisfying to both parties and the ability to relate well to others one is involved with (Bar-On, 2006).

The third composite scale, Stress Management (emotional management and regulation), is comprised of two subscales. The stress tolerance subscale shows one's ability to manage emotions effectively, and the impulse control subscale shows how one is able to control emotions effectively (Bar-On, 2006).

The fourth composite scale, Adaptability (change management), is comprised of three subscales. The reality-testing subscale is the ability for an individual to validate their feelings and thoughts with their reality. The flexibility subscale shows one's ability to adapt and adjust thoughts and feelings to different and new situation. Finally, the problem-solving subscale refers to the individual's ability to solve personal and interpersonal problems effectively (Bar-On, 2006).

The fifth and last composite scale, General Mood (self-motivation), is comprised of two subscales. The optimism subscale is the ability an individual has to look at life in a positive way, and the happiness subscale is the ability for an individual to feel contentment within themselves, in others, and within their life (Bar-On, 2006).

Individuals who took the EQ-I, responded on a 5-point Likert Scale (1= *very seldom or not true of me* to 5= *very often true of me or true of me*; Bar-On, 1997). There was no specified time limit for completing the questionnaire; however, most complete the test in approximately 30 minutes (Dawda & Hart, 2000). A sixth grade reading level has been assessed for the test, and the test can be administered for individuals from the age of 16 and older. The EQ-i has been tested on over 100,000 people worldwide and has been translated in more than 30 languages (Dawda & Hart, 2000).

The reliability of the EQ-I has been examined over the last 20 years by multiple researchers where the findings of the research have revealed that the test is consistent, stable, and reliable (Bar-On, 2004). Average test-retest coefficients are .85 and .75. The internal consistency coefficient of the EQ-i is .97 based on the normative sample ($N = 3,831$) in North American (Bar-On, 1997b). The internal consistency was again examined on 51,623 adult participants in North America, producing almost identical results with a slight increase in the mean of .025 in coefficients (Bar-On, 2004).

The validity of the EQ-i was tested by comparing the test with other measures such as cognitive intelligence and personality tests in six different studies of 4,218 participants (Bar-On, 2004) with a validity coefficient of .76. The findings indicated that the EQ-i has good construct validity and measures what the test was intended to measure. For the purpose of this research study, the five composite scales scores of the EQ-i were compared between the two sample groups. The five composite scales scores were examined between groups to determine if EI is different among men with sex offenses against adult victims and child victims.

PPI-R

PPI-R is a self-reported measure comprised of 154 items that measures both global and component trait psychopathy (Lilienfeld & Widows, 2005). The tool has good construct validity, is time efficient, does not just focus on antisocial or criminal behavior, can be group or individually administered, can be administered in both forensic and community settings, and can detect careless responding to questions (Skeem, 2011). The PPI-R requires a 13-year-old reading level, examines both personality traits and behaviors of respondents, and takes less time to administer than other psychopathy measures (Skeem, 2011). The PPI-R has three validity scales and eight content scales to measure the two factors of psychopathy.

Factor 1 was measured on the Fearless Dominance validity scale which is broken into three subscales. The subscales are Social Influence, Fearlessness and Stress Immunity (Lilienfeld & Widows, 2005). The Fearless Dominance scale is associated with lower levels of depression, anxiety and depression, increased well-being, assertiveness, thrill seeking and narcissism (Skeem, 2011). Factor two is measured on the Impulsive Antisociality validity scale which is broken into four subscales. The subscales are Machiavellian Egocentricity, Rebellious Non-Conformity, Blame Externalization and Carefree Non-Planfulness (Lilienfeld & Widows, 2005). The Impulsive Antisociality scale is associated with aggressiveness, impulsivity, substance abuse, engaging in antisocial behavior, suicidal ideation and negative affect (Skeem, 2011). The third validity scale is Coldheartedness (Lilienfeld & Widows, 2005). The eighth subscale is Coldheartedness. Coldheartedness refers to a person's inability to experience either

positive or negative emotions, measures closed mindedness to fantasies and nontraditional value systems and predicts one's ability to act in a devious or sneaky manner (Lilienfeld & Widows, 2005). Coldheartedness seems to be an index factor of psychopathy (Lilienfeld & Widows, 2005).

Overall scores on the PPI-R represent a global view of psychopathy where higher scores on factor one are associated with emotional stability, efficacy in social situation, and diminished empathy (Skeem, 2011). Scores on factor two are associated with aggressive behavior, substance use, maladaptive coping skills, negative emotions and possible suicide (Skeem, 2011). The PPI-R can help represent the capacity to which an individual has the propensity to act in a self-centered manner and take advantage of another and act on impulsiveness whenever the individual deems appropriate (Lilienfeld & Widows, 2005). This is consistent with sexually offending behavior. Offenders have described taking advantage of their victims when the offender has a sexual urge.

According to Lilienfeld & Widows (2005), the PPI-R test-retest reliability with the general population was .93 with the content scales ranging from .82 to .95. The internal consistency using Cronbach's Alpha for the general population is .92 with the internal consistency ranging from .78 to .87. The internal consistency for offender samples is .84 with the internal consistency ranging from .71 to .83.

According to Lilienfeld and Widows (2005), the validity of the total scores of the PPI-R correlates moderately with personality disorders that are known to overlap with psychopathy, specifically histrionic, borderline and narcissistic personality disorders. Overall PPI-R scores correlate negatively with personality traits with agreeableness and

conscientiousness and positively with substance abuse, issues with impulse control, offender disciplinary, planning, and delinquent behavior.

Total PPI-R scores were examined in this study. Scores on the three validity scales will also be examined separately. Total scores and the three validity scale scores were examined separately due to each scale yielding different information on the participant's overall personality traits.

Data Analysis

The information for this study was gathered from test results of the EQ-i, and PPI-R scores and demographic information that the participant completes themselves.

The participants would be separated into two groups (participants with sex offenses against children would be placed into one group and participants with sex offenses against adult men or women would be placed into another group) from data obtained from the demographic form and data will then be entered into SPSS and compared using an MANOVA for two treatment groups.

If a participant's test results in an invalid PPI-R or EQ-I profile, the participant's test results were eliminated from this study. The analysis of the data collected would include the comparison of the two participant groups to determine rejections of the null hypothesis. There are two research questions for data analysis. The research questions are:

Research Question 1: Do adult male sex offenders in New Jersey with adult victims have different over all EI and psychopathic personality traits than adult male sex offenders with child victims as measured by the Bar-On EQ-I and the PPI-R?

Null Hypothesis 1: There are no differences in EI and psychopathic personality traits of adult male sex offenders in New Jersey with adult victims than adult male sex offenders with child victims.

Alternate Hypothesis 1: There are differences in EI and psychopathic personality traits of adult male sex offenders in New Jersey with adult victims than adult male sex offenders with child victims.

Research Question 2: Do psychopathic personality trait scores correlate with EI scores in adult male sex offenders with adult and child victims?

Null Hypothesis 2: There is no correlation between EI scores and overall psychopathic personality trait scores in adult male sex offenders with adult and child victims in New Jersey.

Alternate Hypothesis 2: There are differences in between EI scores and overall psychopathic personality trait scores in adult male sex offenders with adult and child victims in New Jersey.

Threats to Validity

Threats to External Validity

Participants would be asked to volunteer for this study. Participants would be adult male sex offenders residing in the State of New Jersey and do not represent a general population as a whole. There would be no pretesting in this study. The performance of the participants in this study may not reflect how the participants really think. The EQ-I and PPI-R asks participants to rate how they think and feel. Participants

may portray themselves in a more positive light than necessary and may not answer the questions honestly.

Threats to Internal Validity

History-While filling out the testing instruments, the participants may have to stop with the testing due to interruptions (i.e. bathroom break). When the participants return, they may have lost their focus and answer the questions on the EQ-i or PPI-R according to getting finished and not according to how they actually feel. The participants may not read the questions accurately and their answers may not be correct

Maturation-The participants were incarcerated over various periods of their lives. The answers on their EQ-i and PPI-R scores may impacted by educational level, therapy focused on victim empathy, social skills, relationship skills or group therapy where information is processed. There are two test being self-administered by the participants. The participants may lose interest in taking the tests, become bored or tired while taking the tests.

Testing-No pretesting or post testing that were administered to the participants.

Instrumentation-The instruments for this study has been validated.

Selection-The study participants were broken into two different groups offenders who have adult victims and offenders who have children victims. There may be observable differences between the two groups of participants.

Attrition-There is no foreseen bias in this study. Participants have the right to discontinue with the research study at their discretion and if participants do withdraw themselves from a sample, new participants were asked to participate so both groups are

equal. To further eliminate the potential for bias, any former client of this researcher were excluded from participating in this research study.

Threats to Construct Validity

Both psychological tools for this study have been measured and are valid. The EQ-I and PPI-R both have good construct validity and measures what the test was intended to measure (Bar-On, 2004).

Ethical Procedures

Participants were selected from the list compiled. All participants who participated were informed that their participation was completely voluntary and they had the option to terminate the study at any point. Participants were advised that their participation would take approximately an hour to one and one half hour with no foreseeable risks to them. They were informed that their participation would have no effect on their legal or parole supervision. Participants were afforded time to ask questions about the research study. Upon completion of the study, all participants were debriefed and explained the rational of the study and given a \$5.00 gift card to Dunkin Donuts as compensation for their participation in the study.

The scores of the EQ-I and PPI-R were collected from both groups of participants and entered into the SPSS database. Total EQ-i scores were compared between both groups as well as the five composite scales was compared between both groups. Total PPI-R scores and three validity scales were compared between both groups. This research was conducted under the direction of Dr. Matthew Geyer, Psychology Department, and

has been reviewed and approved by the Walden Institutional Review Board #11-20-15-005312.

Summary

This quantitative study will measure differences in EI and psychopathic personality traits of adult male sex offenders who have crimes against adult victims to adult male sex offenders in New Jersey who have crimes against children. Data was collected and held in strict confidence, coded to protect confidentiality and only be available to this researcher. Chapter four will provide a description of how the data was analyzed and the results were reviewed. Chapter five will discuss the interpretation of the findings, an overview of the implication for social change and recommendations for future research.

Chapter 4: Results

Introduction

The purpose of this quantitative study was to examine the EI and psychopathic traits of men convicted of sexual offenses who are supervised under parole supervision for life and residing in New Jersey. This research was driven by the following question: Do men with child victims have different EI and psychopathic traits than that of men with adult victims? The results of the two assessments administered showed how men with child victims and men with adult victims scored, and if there are differences noted between the two groups of offenders. In this chapter, I discuss the dissemination of findings as they relate to the research questions for this study. I discuss the two hypotheses and other pertinent information significant to the study.

The EQ-I and the PPI-R were administered to 80 participants electronically via laptop computers. Participants of this study received a \$5.00 gift card to Dunkin Donuts as compensation for their time. Participants were sought through a presentation at the parole office during their group therapy session and through posting of flyers at the 10 district parole offices located throughout the State of New Jersey. During the presentation conducted, participants were given a flyer (Appendix A) with information about the study and how to contact me. Participants were asked to contact me if they were interested in participating. When a participant contacted me, I set up an appointment for the participant to participate in the study. Once the participants completed the assessments, the scores and validity of each instrument was evaluated. If either of the instrument scores resulted in an invalid finding, they were eliminated from the sample. There was a

total of 95 participant administrations. Fifteen tests were omitted from the study due to invalid results. The remaining 80 administrated EQ-I and PPI-R tests were found to be valid with no omitted items or inconsistent responding noted.

Research Questions and Hypotheses

There were two research questions that guided this study:

Research Question 1: Do adult male sex offenders in New Jersey with adult victims have different over all EI and psychopathic personality traits than adult male sex offenders with child victims as measured by the Bar-On EQ-I and the PPI-R?

Null Hypothesis 1: There are no differences in EI and psychopathic personality traits of adult male sex offenders in New Jersey with adult victims than adult male sex offenders with child victims.

Alternate Hypothesis 1: There are differences in EI and psychopathic personality traits of adult male sex offenders in New Jersey with adult victims than adult male sex offenders with child victims.

Research Question 2: Do psychopathic personality trait scores correlate with EI scores in adult male sex offenders with adult and child victims?

Null Hypothesis 2: There is no correlation between EI scores and overall psychopathic personality trait scores in adult male sex offenders with adult and child victims in New Jersey.

Alternate Hypothesis 2: There are differences between EI scores and overall psychopathic personality trait scores in adult male sex offenders with adult and child victims in New Jersey.

Sample

A total of 80 participants were recruited to participate in this study. Each participant was given the EQ-I and the PPI-R electronically via laptop computers. The participants administered the test themselves. At the conclusion of the testing, each participant of this study received a \$5.00 gift card to Dunkin Donuts as compensation for their time.

Demographics

Demographic information such age, race, education, victim age, and number of sex offense convictions were examined (see Table 1). The ages of the 80 participants ranged from 22 to 68 years of age. The total participants ($N = 80$) averaged 41.43 years of age ($SD = 10.92$). The ethnicity of the participants comprised of 27.5% African American, 53.85% White, 16.3% Hispanic, and 2.5% Other identified ethnic group. The education levels of the participants showed that 17.5% of the sample attended only elementary school, 65% of the sample completed high school, 15% attended college, and 2.5% of the sample attended graduate school. Of the sample participants, 50% had victims aged 17 or younger, and 50% had victims aged 18 and older. The sample was comprised of 97.5% of first-time offenders (one conviction), and the remaining 2.5% of the sample had been convicted of two sex offenses.

Table 1

Participant Demographics

Demographics	Adult victim (<i>n</i> = 40)	Child victim (<i>n</i> = 40)
	N (%)	%
Ethnicity		
White	43 (53.8)	53.8
African American	22	27.5
Hispanic	13	16.2
Other	2	2.5
Education level		
Elementary	14	17.5
High school	52	65
College	12	15
Graduate school	2	2.5
Victim age		
17 & younger	40	50
18 & older	40	50
Number of offenses		
One	77	96.3
Two	3	3.7

Note. *N* = 80.

Statistical Results

EI EQ-I Results

A MANOVA test was conducted with offender typology (i.e., men with adult victims and men with child victims) as the independent variable and five dependent variables (EQ-I content scale scores). The overall MANOVA was statistically significant between offender typology on the EQ-I, Wilks' $\lambda = .943$, $F(1,78) = 2.01$; $p < .01$, $\eta^2 = .03$.

Power to detect the effect was .91. When compared to men with adult victims, men with child victims showed overall statistically significant differences in overall EI (see Table 2).

In examining the results of the MANOVA, the first research question asked if there were significant differences between offender type (men with adult victims and men with child victims) in EQ-I and PPI-R test scores. To answer the first research question, there were statistically significant differences in EQ-I scores noted on the five subscales and differences noted on the three validity scales of the PPI-R, thus supporting the alternate hypothesis and rejecting the null hypothesis (Table 2). In examining EQ-I subscales, the first composite scale, Self-Perception, men convicted of crimes against children scored differently than men convicted of crimes against adults, $F(1,78) = 3.71 p < .01, \eta^2 = .45$. The second composite scale, Interpersonal, men convicted of crimes against children scored differently than men convicted of crimes against adults, $F(1,78) = 1.73; p <.01, \eta^2 = .02$. The third composite scale, Stress Management, men convicted of crimes against children scored differently than men convicted of crimes against adults, $F(1,78); p <.01, \eta^2 = .02$. The fourth composite scale, Decision Making, men convicted of crimes against children scored differently than men convicted of crimes against adults, $F(1,78); p <.01, \eta^2 = .02$. The fifth and last composite scale, Self-Expression, men convicted of crimes against children scored differently than men convicted of crimes against adults, $F(1, 78) = .42; p <.01, \eta^2 = .01$.

PPI Results

A second MANOVA test was conducted with offender typology (i.e., men with adult victims and men with child victims) as the independent variable and three dependent variables (PPI scale scores). The overall MANOVA was statistically significant between offender typology and PPI scores, Wilks' $\lambda = .663$, $F(4,75) = p < .01$, $\eta^2 = .01$. Power to detect the effect was .91. When compared to men with adult victims, men with child victims show overall statistically significant differences in overall psychopathic personality traits. (Table 2). Higher scores on each measure reflect higher levels of the construct assessed.

In examining PPI-R scores, the three subscales were analyzed. On the fearless Dominance Validity scale, there were noted differences in the scores of men convicted of crimes against children than men convicted of crimes against adults, $F(1,78) = 8.73$; $p < .05$, $\eta^2 = .10$. On the Self-Centered Impulsivity Validity scale, there were noted differences in the scores of men convicted of crimes against children than men convicted of crimes against adults, $F(1,78)=34.91$; $p < .05$, $\eta^2 = .31$. On the Cold-Heartedness subscale, there were noted differences in the scores of men convicted of crimes against children than men convicted of crimes against adults, $F(1,78) = 25.13$; $p < .05$, $\eta^2 = .24$.

Table 2

Mean Comparison of Subscale Testing Scores

	Child victim		Adult victim	
	Mean	SD	Mean	SD
EI (Eq-I) Subscales				
Self Perception	101.2**	16.66	93.35	19.99
Self Expression	99.73**	16.60	97.65	11.61
Interpersonal	99.03**	17.50	93.78	18.23
Decision Making	99.78**	17.80	95.43	17.62
Stress Management	96.55**	16.60	91.13	20.70
Psychopathic Personality (PPI) Subscales				
Self Centered Impulsivity	45.13	9.05	61.58*	15.11
Fearless Dominance	45.13	11.07	54.08*	15.64
Coldheartednes	48.05	7.40	58.70*	11.22

Note. N = 80. * p < .05. **p < .01

Correlation

Pearson Correlational analysis was used to examine the relationship between EQ-I and PPI-R test scores. To answer the second research question, the scores of the psychometric testing resulted in none of the correlations rising to the level of statistical significance, thus accepting the null hypothesis. Although there were positive and negative correlations, the results are not significant. (Table 3).

Table 3

Emotional Intelligence and Psychopathic Personality: Correlation

Variables	1	2	3	4	5	6	7	8
1. Self-perception						-.08	-.20	-.07
2. Self-expression						-.00	-.09	-.07
3. Interpersonal						-.11	-.13	-.03
4. Decision making						-.00	-.07	-.06
5. Stress management						-.05	-.10	.01
6. Self-centered impulsivity	-.08	-.00	-.11	-.00	-.05			
7. Fearless dominance	-.20	-.09	-.13	-.07	-.10			
8. Coldheartedness	-.07	-.07	-.03	-.06	-.01			

Note. ** Correlation is significant at the 0.01 level (2-tailed).

Summary

The first hypothesis that formed this research was found to be supported. There was a difference in EI and psychopathic personality scores in convicted sex offenders with child victims and men with adult victims. Convicted sex offenders with child victims had higher total and subscale scores on the EQ-I and lower psychopathic personality traits. Convicted sex offenders with adult victims had lower scores on EQ-I and higher psychopathic personality traits. Higher psychopathic personality traits were not correlated with lower EI within this study, thus accepting the second null hypothesis.

In Chapter 5, I discuss the next course of interpretations and use of the findings presented in Chapter 4. Chapter 5 incorporates the theoretical framework outlined in Chapter 2 and how this relates to the research findings along with how the results may be used to create social change for the treatment of convicted sex offenders in New Jersey.

Chapter 5: Discussion, Conclusions, and Recommendations

Introduction

In this research study, I examined the EI and psychopathic personality traits of adult male sex offenders who are under parole supervision and living in New Jersey. There were supported differences in EI and psychopathic personality traits of sex offenders with child victims and sex offenders with adult victims. Exploring the differences in EI and psychopathic personality traits of sex offenders can better help treat the offender. Treatment programs can be tailored to target the EI scales. If an offender, for example, has low stress tolerance as measured on the scale, he may focus on stress management techniques in his therapy and develop better coping skills to handle stress. The goal would be to identify areas an offender should work on in therapy to help reduce the risk of reoffending. If an offender can learn better coping skills when trying to handle problematic areas of his life, he may be able to develop strong interventions to help reduce the risk of recidivism and be safe in the community.

Research Questions

There were two research questions used to guide this study. Research Question 1 asked if adult male sex offenders in New Jersey with adult victims have different overall EI and psychopathic personality traits than adult male sex offenders with child victims as measured by the Bar-On EQ-I and the PPI-R. Research Question 2 asked if higher scores of psychopathic personality traits correlate with lower EI scores in adult male sex offenders with adult and child victims.

Interpretation of the Findings

To answer Research Question 1, there was some support to illustrate a difference between offenders, and the differences were significant. To answer the second research question, the correlated findings were statistically significant.

Malterer et al. (2008) hypothesized that men with sex offense convictions have deficits in their EI. Their study showed that men convicted of crimes against children and crimes against adults have deficits in their EI (Malterer et al., 2008). Malterer et al. also compared to the study completed by Negusanti (2011), which showed that EI on the Stress Management Scale and Impulse Control Scale of the EQ-I were different in men convicted of sex crimes against adults and children. The findings suggest men with sex crimes against adults have a difficult time managing or identifying their emotions and responding to stressful situations.

In this study, men who committed sex offenses against adult victims showed lower mean EI. Bar-On (1997) opined that if a person has low stress tolerance and trouble problem solving and exhibits problems with impulse control, they may have a hard time coping with their environment. If a person has deficits in their EI, they may be apt to commit criminal behavior (Brackett & Mayer, 2003). This could suggest they have lower stress tolerance, trouble with decision making, and trouble with impulsivity. According to Bar-On, they may have a hard time dealing with their environment. External problems such as higher incidents of sex offending, higher aggression, and engagement in criminal behavior are associated with lower levels of EI (Luau, 2003).

The coercion and integrated theories were the focus of this research. The coercion theory examines the external contributors to the development of antisocial behavior, and the integrated theory examines how the biological and social learning lead to offending behaviors (Colvin et al., 2002; Ward & Beech 2006). In this study, I found that men who committed sex offenses against child victims had higher mean scores on EI and lower mean scores on psychopathy, thus suggesting that they are able to demonstrate more self-control, maintain some relationship stability, and able to problem solve differently than that of men who committed sex offenses against adult victims. This may be a reason why men who committed sex offenses against child victims blend into society and take longer to get caught for their sex offending.

Men who committed crimes against adult victims scored lower on EI and higher in psychopathic personality traits, suggesting that they have problem with problem solving, self-control, relationships with others, and emotional management. Fagen and Wexler (1988) found a commonality for sex offenders to have experienced feelings of loneliness and have multiple failed attempts at relationships. Failing to verbalize distress can lead to anger, strain, and feelings of worthlessness, causing the offender to displace their coercive feelings by sexually assaulting others to cover up their feelings.

Portner et al. (2000) reported that men convicted of crimes of rape had higher levels of psychopathy. This study also supported this finding. Kirsch and Becker (2007) reported that men convicted of sex crimes against adults disclosed experiencing negative emotions and tended to be more psychopathic, which suggests inability for emotional regulation. Seto and Barabee (1999) reported that men convicted of crimes of rape scored

higher in psychopathy than men convicted of crimes of child molestation ($M = 14.4$, $SD = 7.3$). They revealed that psychopathy scores were significantly correlated to age, education level, and lower socioeconomic status (Seto & Barabee, 1999). This study also supported this finding. In this study sample, men convicted of sex crimes against adults had higher psychopathic personality traits and lower EI, suggesting that they have a harder time identifying their emotions and regulating them.

When examining the coercion and integrated theories, Fagan and Wexler (1998) found that interpersonal problems are common among sex offenders and McGloin et al. (2004) found that social supports and peer relationships contribute to the development of criminal behavior. Men who committed sex offenses against child victims scored higher on the Interpersonal Scale, which may mean that men who committed sex offenses against child victims are invested in their relationship, are more sociable, and have a network of people around them. Men who committed crimes against adult victims scored lower on the Interpersonal Scale, which may mean they may be defensive or skeptical of other people, may not have deep bonds with others, may have limited resources to deal with demands of day to day life, and may be mistrustful of others.

The integrated theory can examine how a sex offender can mold themselves based on their social and environmental learning (Ward & Beech, 2006). Some offenders have disclosed feeling unwanted, lonely, angry, and mistreated by those close to them and use those feelings as a justification for their sex offending.

In examining impulsivity, men who committed sex offenses against child victims had lower mean scores on the PPI-R. This is an important piece that is examined in

treatment groups. Men who committed sex offenses against child victims groom their victims. They take time getting to know the victim and establishing trust. The results of the test scores demonstrate this. Men who committed sex offenses against child victims may survey situations before acting out and avoids making rash decisions.

Puglia et al. (2005) suggested that men convicted of crimes of child molestation are able to adapt to their environment and demonstrate an ability to relate to those around them, which could help in obtaining victims, gaining trust and aid in offending, Men who committed sex offenses against adult victims scored higher on impulsivity, which could mean that they are impulsive, impatient, use an act now and think later mentality, and can be unpredictable to understanding their own emotions (Negusanti, 2011).

Participant Demographics

Age

In this study, I examined the age of the offender. The mean age of the participants in this study was 41.43; the median age was 39.50. Smith (2001) stated that research conducted on the frontal lobes of one's brain aids in functions of self-control, judgement organization, thought, planning, and emotional regulation. These functions are the crux of EI and can change greatly between the onset of puberty and adulthood. Questions arose from this study as to if children are developing in an environment where parents have limited interpersonal/intrapersonal deficits, suffer from substance abuse or mental health issues, and are physically or sexually abusive, how could this impact the emotional development of one's brain? Could the deficits in EI or formation of psychopathic personality traits be a result of environmental factors?

Logan and Graham-Berman (1999) found that children who are exposed to violence within the family unit express emotions less than children who are not exposed to violence. They reported that these children avoid expressing emotions and have a difficult time processing how they truly feel (Logan & Graham-Berman, 1999). Their study results support the notion that age is significant to emotions and behavioral during development. Due to situations one can encounter, the social and emotional learning humans are exposed to as children can carry forward into adulthood. The learning experiences can be both positive and negative. Although age does not in itself contribute to EI or psychopathic personality traits, there could be an important association between the factors.

Ethnicity

In this study, I examined participant's ethnicity.. The sample for this study was composed of White (53.85%), African American (27.5%), Hispanic (16.3%), and Other (2.5%). Smith (2001) conducted a study and found that one's race was significantly correlated to behavior and emotional expression. Race and gender can be key components to personality and how one may identify themselves in the world around them. Smith) stated that ethnicity can drive behaviors because emotional expression may be expressed differently and is perceived as socially acceptable, which varies from different races, ethnic backgrounds, and cultures.

Piquero, Moffitt, and Lawton (2005b) reported that there is a difference between ethnic groups and antisocial behavior. They ascertained that there are differences between family structure, community involvement, and neighborhood integration. These

differences could account for reduced supervision and repressed socialization. Ferrante (2013) explained that disadvantages to ethnic minorities (limited access to prenatal care, toxic environmental conditions, absent parenting, lower SES, lower employment rates) make it easier for certain individuals to lead a life that is filled with persistent offending behavior.

Gender

Males may be taught to suppress emotional expression which manifests itself in the inability to express their feelings or recognize the emotions of others (Goleman, 1995). Smith (2001) suggests that males are socially conditioned to be strong, fearless, and hardworking and are often limited in how they are able to express both physical and emotional pain. Men are typically raised with a “boys don’t cry” attitude which may disconnect the emotionality of their experiences. It is easier for a man to put his hands up and fight versus telling the individual their feelings were hurt. Smith (2001) stated that when men are unable to develop the vocabulary to express their feelings, they are often inept to express their emotions. Males may have a hard time expressing disappointment, pain or grief. Constricting emotional expression could suggest a disconnect from emotion and desensitization from the emotions of others. Disconnecting from one’s emotions is a facet of psychopathy and a deficit in EI.

Smith (2001) found that men often deal with emotional pain through drugs, alcohol, violence, over working and sex. Males become conditioned to hide their emotions and learn different coping mechanisms such as placing blame on others, lashing out on other or take a defensive stance. Blaming others is a facet of EI and psychopathy.

If a man feels challenged or put down, he may lash out verbally or physically.

Developing an emotional sheath is an important piece of a man accepting himself and teaching himself how to express their emotions. More research is needed to help examine gender roles and how to facilitate emotional self-awareness and emotional self-expression.

Treatment

Seto and Barabee (1999) conducted a study with a sample of 438 individuals who committed sexual offenses. They found that those offenders who did not have psychopathic personality traits had lower rates of recidivism after treatment exposure than individuals with psychopathic personality traits. They found that psychopathic individuals have a higher rate of re-offending even after treatment exposure ($m=19.0$, $SD=7.3$). Smith (2001) stated that individuals with lower EI are less likely to change their behavior and continue to commit crimes.

Men who scored higher on psychopathy personality traits tend to have lower treatment outcomes (Seto & Barabee, 1999). These men are more likely to be non-compliant with supervision of parole, following rules and are more likely to reoffend with a more serious crime. Seto and Barabee (1999) explain that these offenders have good social skills and are able to articulate well within their therapy groups. They can contribute a lot to the therapy group they are in but outside of group, they can use the same manipulation to gain access to potential victims. Another explanation for lower treatment outcomes for psychopathic offenders is that treatment can actually make an individual manipulate better (Seto & Barabee, 1999).

Hart and Hare (1997) state group therapy programs can help psychopathic individuals learn better ways to manipulate and deceive others but does little to help the individual understand their own behavior. Rice and Harris (1997) suggest that when working with psychopathic individuals, the focus of treatment should be to examine the cost of their antisocial behavior and examine impulsivity. They report that individuals with higher psychopathy respond well to positive reinforcement and behavioral interventions could be constructed.

Bar-On (2006) states that EI is a dynamic factor that can change over time. If an individual is taught how to identify emotions and pair them with problem solving interventions, the individual may reduce the likelihood of future criminal behavior. Finley (2008) believes that individuals can develop EI over time. If this is the case, treatment programs can focus on developing and strengthening one's EI building up awareness and emotional expression to prevent recidivism.

Limitations

This study examined adult male sex offenders who are under parole supervision and living in the community in New Jersey. The sample size for this study was N=80. If the sample size was larger or a different criminal population was tested, the results could be different. Another limitation to this study is that all participants were male. There are female sex offenders in the State of New Jersey. The results may have been different if both male and female sex offenders were sampled.

The study sample were all convicted and served time in prison from their crimes. This factor separates them from the general male populations who have not been

incarcerated. Some men who are released from prison do not participate in anything that would not help reduce their parole supervision time. More participants may have volunteered if there was some other incentive that would help with their parole supervision status. The participants in this study were offered a five-dollar gift card to Dunkin Donuts as an incentive for their time and help with the study. If there were some other incentive, there may have been more participants.

The tests were administered via laptop computer. Some of the answers may have resulted to wrongfully clicking a button or if the participant clicked the answer button by mistake. This could have skewed the data. Another limitation was that both the EQ-I and PPI-R tests are self-reported. Offenders may have presented themselves in a more positive light thus altering the test results. Any profile that came back as invalid was eliminated from this research.

Another limitation to this study was the tests were taken while the offender is in therapy for their offense. The answers on both tests may be different if an offender did not have therapy prior to taking the test. The answers may have been different at sentencing of the offense and post therapy. Prior research has suggested that treatment with psychopathic individuals may make the individual more manipulative. In this study, it is possible that those individuals with higher psychopathic personality traits answered in a manner which would be beneficial for them in presenting themselves in a more positive light. Therefore, answers may not be accurate or truthful but more for impression management.

Another limitation of this study is the sample in this study was not compared to the normative sampled used for the psychometric tests. The sample for this study was not compared to non-offending males.

Recommendations for Future Research

There are several outcomes from this research study that can help with treatment programming for convicted sex offenders. Knowing an offender's EI and personality traits is an important area for the primary therapist. If the EQ-I and PPI-R tests are administered during an intake evaluation for treatment, scores can be examined and treatment can be tailored to help the offender.

If an offender scores low in an area demonstrating a deficit, he can be referred for a specific group to help aid in treating the deficit. For example, if an offender scores low on the Interpersonal scale, he can be referred to a therapeutic treatment group about relationship skills or a group on effective communication styles. If an offender scores high on impulsivity, he can be referred to a group on relapse prevention where he can learn interventions for high risk situation. If an offender scores low on stress management, he can be referred to a stress management, emotion regulation or anger management group to help learn coping skills for stress.

It would be helpful to administer the EQ-I and PPI-R during the initial evaluation for treatment and then again prior to completion of treatment. Reviewing both pre and post treatment scores can aid in seeing if the offender retained some treatment effect and could possibly have learned interventions to reduce his risk of committing and new sex

offense. Bar-On (1997) stated that the concepts of EI can be taught in treatment and could help apply treatment concepts with offender populations.

Bar-On (2006) stated that the EI is a dynamic factor which can fluctuate in ones' lifetime. If individuals are taught to identify their emotions and learn better problem solving techniques, they may be able to reduce recidivism and act more socially appropriate (Finley, 2008).

Knowing how an offender thinks and feels can be valuable in the treatment process and provide information to help tailor treatment programs to address the specific areas a sex offender has a struggle with. If an offender feels mistreated by those close to them, they may experience trouble verbalizing their emotions, feel low self-esteem and not know how to properly cope with their feelings (Ward & Beech, 2006). These identifiable deficits are key facet of EI. The Interpersonal, Intrapersonal, Adaptability and Emotional Management scales of the EQ-I would measure how an offender is currently experiencing their relationships and themselves within their current environmental situations. These identifiable deficits could become part of a treatment plan to help the individual develop coping skills to help with their feelings.

Opportunities for further research are available to examine different types of sex offenders in New Jersey. The sample can further be broken down to pre-pubescent and post-pubescent sex offenders, male versus female victims, male versus female sex offenders, sex offenders living in the community compared to sex offenders who are incarcerated, sex offenders living in the community compared to sex offenders confined in civil commitment. Further research can also compare sex offenders to the normative

sample for both psychometric tests to determine if there are differences between the general population and sex offenders.

The literature review linked emotional expression and sex offending behavior, further research can be conducted to explain this. In understanding one's emotions, this may help change the thought process and help develop coping skills to prevent sexually acting out behavior. This research coupled with future research can be used to develop therapeutic classes or programming that will enhance one's EI and help reduce recidivism. Research that examines emotions and behavior can break the stigma of gender roles on how males express their feelings and help develop ways to express emotions both positive and negative in a proactive way.

Implications for Social Change

Even though there were several limitations to this study, there was valuable information gathered on the EI and psychopathic traits of adult male sex offenders to expand on for future research. This is the first research study examining the EI and psychopathic personality traits of convicted adult male sex offenders in New Jersey. This research will give the treating therapists a focus to determine a solid treatment plan for the offenders during the course of their mandated sex offender specific therapy.

Social change can happen by the offender understanding what areas of their life and personality contributed to their offense while working to understand to cope with these situations and implement solid interventions to prevent creating new victims. This is important so the offender gets the help he needs and no one else would be harmed by their offending behavior. Defining and teaching an offender how to regulate their

emotions and reduce impulsivity will encourage growth in their self-esteem, ability to build meaningful relationships and be a safe member of the society they live in. This will reduce their risk to the community and help with lower the recidivism rates.

Further exploration of examining personality traits and EI can benefit society by treatment programs treating these areas of the individual who have been convicted of sexual offenses which may help to protect victims from being harmed. This study showed that there is a difference in EI and psychopathic personality traits of offenders with adult victims and offenders with child victims. This could show that the reason why an offender commits a sex offense is different and should have different treatment goals. Current sex offender specific treatment focus on relapse prevention and all offenders are taught the same material. Tailoring specific group topics or referral to specific treatment groups based of one's EI or personality traits could help aid in an individualized treatment approach and not the same cookie cutter form of treatment every offender gets.

If an offender has trouble with impulse control and relationships, treatment tailored to relapse prevention and relationship skills could be more beneficial than a group based off substance abuse. A referral to a psychiatrist could also be recommended to see if group therapy coupled with psychopharmacology could help the offender control their impulsivity. If another offender has anger and empathy deficits, groups can be tailored for anger management and victim empathy. This is not an inclusive solution or cure for sex offending. It is a suggestion to break down treatment goals based on the personality structure of the offender but a semi-individualized approach in the hopes of reducing recidivism and reintegrate into society. General sex offender specific treatment is also

recommended that can focus on distortion elimination, reframing, relapse prevention coupled with the individualized treatment goals could be successful for community safety and emotional growth of the offender.

Through tailoring treatment plans, this could make an offender learn positive boundaries, learn how to better communicate their thoughts and feelings and put interventions in place to help them if they feel like they may re-offend. It is possible that an offender may commit a new sex offense but if there is more specific objective and focus of treatment based off the offender's personality make up, the hope is the offender may learn more about themselves and be able to change the offending behavior to a more proactive compliance with societal norms. If a sex offender feels accepted, secure and part of the community, they may be able to be more productive in society and more apt to follow the rules and regulations set forth for them. This includes compliance with parole supervision, Megan's Law registration, treatment compliance and living an offense free life.

Treatment options have changed over the years due to research being conducted with this population. Continued research will also help offenders learn more about themselves and how to manage their emotions and impulses which is helpful in relapse prevention skills. More research is recommended to help examine gender roles and how to best facilitate emotional self-awareness and emotional self-expression. This would lead to higher EI and an ability to be successful in the community.

The stigma of being a sex offender can also be reduced if the community sees positive rehabilitation of the offender and notice a positive change in their behavior and

lifestyles. All of this could lead the offender to feel better about themselves, their environment and help in their decision making.

Conclusion

This research has brought to light an area that may help treatment providers, specialists in the field and offenders learn how to effectively manage, supervise and treat convicted sex offenders. This study presented information that convicted sex offenders have different EI and psychopathic personality traits. Men with sex crimes against children score different on both their EI and their psychopathic personality than men with sex crimes against adults. Comparison of scores showed that men who commit sex crimes against adults tend to be more psychopathic and have lower EI scores than men with sex crimes against children. This could explain the difference in victim preference, ability to handle stress, maintain relationships and compliance with treatment and supervision. The use of this area of research will help offenders develop better coping skills as well as to identify interventions to ensure a successful future and to reduce recidivism.

This study helped with psychological research on the EI and psychopathic personality trait difference of men convicted of sex crimes against adults and men convicted of sex crimes against children. The results of this study and psychological tools used, can be used in the community treatment programs as a means of tailoring treatment to help reduce recidivism. Having test scores available before treatment begins, can better aid the clinician on specific areas to zone in on in therapy sessions, address the key components specific to the offender prior to the start of sessions so the therapist is not treating all of the offenders, regardless of the details of the offense, the same way.

Reducing the likelihood of a sexual re-offense is an important piece to the safety of the community and keeping the community safe, elicits positive social change.

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Appendix A

Volunteers Needed for Research Study

“Emotional Intelligence Study”

- *Are you over the age of 18?*
- *Have you been convicted of a sex offense?*
- *Are you currently on CSL/PSL supervision by NJ State parole?*

If you answered YES to these questions, you may be eligible to participate in this research study

Description of the Study: I am researching adult males who have been charged with a sex offense and who are residing in the community under parole supervision for the purpose of tailoring treatment. Therapy groups teach the same kind of treatment for all offenders regardless of crime. The goal of this research is to help identify differences in the type of crimes and sex offenders to suggest changes on how you receive your treatment. Your participation is completely voluntary and will take approximately one hour and 30 minutes. You will be asked to fill out some forms and define some words. Your participation will not change your CSL/PSL status. You will be given a \$5.00 gift card to Dunkin Donuts as compensation for your time with this study.

To learn more about this study, contact the researcher, Kelly White

This research is conducted under the direction of Dr. Matthew Geyer, Psychology Department, and has been reviewed and approved by the Walden Institutional Review Board #11-20-15-005312.

Appendix B

Participant Number:					
Status:					
CSL _____	PSL _____				
Current Age: (As of today's date)					
Race:	White	African American	Hispanic	Pacific Islander	None of the Above
Education: (Last grade completed)					
Elementary School _____		High School _____	College _____	Graduate School _____	
Victim Age:					
12 & younger	13-17 years old	18 & older			
EQ-i Score:	PPI-R Score:				
Total Number of Sex Offense Convictions (Include Index Offense):					
1 2 3 4 5 6 7 8 9 10					
Total Number of Arrests for a Sex Offense in Lifetime:					
1 2 3 4 5 6 7 8 9 10					

Participant Code Form