Cahier de publications 2024

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International Journal of Forensic Mental Health, 23(2), 142-155.

2. Benouamer, C., Libert, B., Janssens, M., & Pham, T.H.
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3. Benouamer, C., Telle, E., Tiberi, L.A., & Pham, T.H.
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4. Vinckier, A., Saloppé, X., Degouis, F., Delaunoit, B., & Pham, T.H.
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5. Tiberi, L. A., Gillespie, S. M., Saloppé, X., Vicenzutto, A., & Pham, T.H.
Recognition of dynamic facial expressions of emotions in forensic inpatients who have committed sexual offenses: a signal detection analysis.
Frontiers in Psychiatry, 15, 1384789.

6. Chabert, L., Saloppé, X., Delaunoit, B., Dupont, G., & Yengue, P.
How to better improve the treatment and outcomes of HCV in psychiatric patients: review of a Belgian monocentric psychiatric center.
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Prototypical Validity and Factor Structure of the French Version of the Comprehensive Assessment of Psychopathic Personality (CAPP) Model

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ABSTRACT

In a study undertaken to examine the content validity of the French-language version of the Comprehensive Assessment of Psychopathic Personality (CAPP), a lexically-based conceptual model and clinical assessment of psychopathy, 204 French-speaking mental health professionals rated the symptoms covered by the CAPP for prototypicality. The majority of the symptoms were deemed to be "moderately" to "highly" prototypical of psychopathy. Of the model's six domains, *Dominance*, *Attachment* and *Self* were considered more prototypical than *Emotional, Behavioral* and *Cognitive*. Results were consistent with those of other prototypicality studies. Descriptives analyses suggested that the ratings of English-speaking mental health professionals were higher than their French-speaking counterparts. However, the effect sizes were small according to the Cohen's *d* analyses. Confirmatory factor analysis revealed that *Attachment* was the only unidimensional domain. Finally, exploratory factor analysis yielded three factors—*Egotism*, *Interpersonal rigidity*, and *Lack of responsibility*. These factors were primarily underpinned by symptoms that entailed interpersonal and social cognitive traits.

KEYWORDS

Psychopathy; CAPP; prototypical analysis; conceptual model; interpersonal

Psychopathy is a complex clinical construct defined by a combination of interpersonal, affective, and behavioral characteristics, including egocentricity, manipulativeness, callousness, irresponsibility, relational instability, impulsiveness, lack of empathy, anxiety, remorse or guilt, and poor self-control (Hare, 2003). The most widespread measure of the concept of psychopathy is the Psychopathy Checklist–R (PCL-R). This measure is frequently described as being underpinned by two main factors and four facets (But see Cooke & Michie, 2001; Cooke et al., 2007). Factor 1 encapsulates affective, interpersonal, and narcissistic elements and breaks down into Facet 1, *Interpersonal*, and Facet 2, *Affective*. Factor 2 encapsulates the propensity for chronic antisocial behavior and breaks down into Facet 3, *Lifestyle*, and Facet 4, *Antisocial*. This measure represents a useful but imperfect approximation of the psychopathy construct (Cooke, 2018). In this regard, behind Hare's definition of psychopathy (Hare, 2003) lies many cognitive-emotional (Burley et al., 2019; Patrick, 2018) and behavioral specificities (Douglas et al., 2018). It is necessary to pay particular attention to "the constellations of psychopathic personality trait dimensions and richly describe individuals accordingly as opposed to discussing psychopathy in unitary terms" (Sellbom et al., 2022, p. 160).

Toward the inclusion of the specificities concerning the concept of psychopathy

Most of the research on the emotion recognition deficit associated with psychopathic traits evaluated with the PCL-R (Hare, 2003) and focused on facial expressions has yielded contradictory results that may potentially reflect these cognitive-emotional specificities. Some studies found impaired recognition of fear and/or sadness (Hastings et al., 2008; Marsh & Blair, 2008). Others found no impaired recognition of fear (Glass & Newman, 2006; Hansen et al., 2008) and/or sadness (Glass & Newman, 2006; Hansen et al., 2008). In addition, some studies found psychopathic traits to be associated with deficits in the recognition of other emotions, namely, disgust (Hansen et al., 2008;

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Communication

Effet du genre des victimes parmi les consommateurs de pédopornographie et les auteurs de viol : étude exploratoire et résultats préliminaires

Effect of victim gender among child pornography users and perpetrators of rape: Exploratory study and preliminary results

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INFO ARTICLE

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Mots clés :
Étude de genre
Orientation thérapeutique
Pédopornographie
Prévention
Viol

RÉSUMÉ

Cette étude exploratoire compare les caractéristiques distinctives des individus ayant consommé du matériel pédopornographique et ceux ayant commis un viol. L'échantillon se constitue de 212 hommes, majeurs et condamnés pour avoir commis une infraction à caractère sexuel. Tous ont été suivis en 2022 pour une orientation thérapeutique par le Centre d'Appui Bruxellois. Parmi ces 212 hommes, 48 ont été condamnés pour consommation de pédopornographie et 100 pour viol. La lecture des dossiers judiciaires a permis d'extraire les données sociodémographiques, criminologiques, victimologiques et psycho-diagnostiques pour tous les participants. Cette comparaison offre des perspectives cruciales pour le développement de stratégies de prévention et d'orientation thérapeutique spécifiques à ces sous-groupes d'auteurs de violence sexuelle.

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Keywords:
Gender study
Pedopornography
Prevention
Rape
Therapeutic orientation

ABSTRACT

This exploratory study compares the distinctive characteristics of individuals who have consumed child pornography and those who have committed rape. The study sample consists of 212 men of legal age and who have been convicted of a sexual offence. All were monitored in 2022 for therapeutic guidance by the Centre d'Appui Bruxellois. Of these 212 men, 48 were convicted of child pornography consumption and 100 of rape. Socio-demographic, criminological, victimological and psycho-diagnostic data for all the participants were extracted from the judicial court files. This comparison offers crucial perspectives for the development of prevention strategies and therapeutic guidance specific to these sub-groups of sexual offenders.

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1. Introduction

Le Centre d'Appui Bruxellois (CAB) est le centre d'expertise en matière de délinquance sexuelle. Le CAB remplit deux types de missions. Premièrement, il offre un appui en matière de consultance, de formation ou d'information aux professionnels de la Justice (magistrats, prisons, assistants de justice), aux professionnels de la Santé et du Social (coordination d'un réseau d'équipes thérapeutiques) ainsi qu'aux responsables politiques. Dans ce cadre, le CAB récolte des données sur les Auteurs d'Infractions à Caractère Sexuel (AICS). Celles-ci permettent de documenter la population AICS rencontrée par les professionnels de santé en région bruxelloise et d'alimenter le rapport annuel du

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Communication

Facteurs de protection et facteurs de désistance chez les auteurs d'infraction à caractère sexuel : articulation et clarification

Protective factors and desistance factors in sexual offenders: Articulation and clarification

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INFO ARTICLE

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Désistance
Facteurs protecteurs
Délinquance sexuelle
Risque de récidive
Psychologie positive

RÉSUMÉ

Cet article articule deux études sur les facteurs de protection et de désistance parmi les Auteurs d'Infraction à Caractère Sexuel (AICS). La première étude est une revue systématique de la littérature scientifique portant sur la validité prédictive de la *Structured Assessment of PROtective Factors* (SAPROF) pour cette population. Les résultats soutiennent une grande variabilité de la validité prédictive de la SAPROF. Ce constat fait écho aux limites inhérentes à l'état actuel des connaissances concernant les facteurs protecteurs. L'amélioration de la SAPROF ne peut alors être envisagée que conjointement à un éclaircissement concernant la nature, l'effet et la conceptualisation des facteurs protecteurs. La seconde étude examine les facteurs de désistance identifiés à travers les discours de six AICS libérés. Les principaux résultats indiquent une prédominance des facteurs positifs liés à la désistance, en particulier des relations interpersonnelles positives (externes) et les transformations cognitives, surtout les processus de réflexion liés aux infractions (internes). Les facteurs externes positifs sont marqués par un recouvrement conceptuel important avec les facteurs protecteurs, tandis que la majorité des facteurs négatifs correspondent à ce qui est communément reconnu comme des facteurs de risque. La complémentarité des résultats de ces études est discutée, jetant les bases de recherches futures nécessaires à la clarification conceptuelle et opérationnelle de ces facteurs.

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Keywords:
Desistance
Protective factors
Sexual offending
Recidivism risk
Positive psychology

SUMMARY

Forensic literature has revealed a plethora of risk assessment tools, emphasizing the factors that can lead to a greater risk of recidivism among sexual offenders. Thus, the assessment and treatment of individuals who have offended have gradually evolved to the point where professionals no longer ask what doesn't work (*Nothing works*) but what does work (*What works*) for them. From this perspective of positivist forensic psychology, the inclusion of so-called *positive* factors such as protective or desistance factors is an important issue. A strengths-based approach to risk assessment encourages a more balanced assessment by including factors that mediate, moderate, or even cancel out this risk, specifically protective factors. Despite a strong interest in them, there are many conceptual shortcomings that hinder their widespread use. The existence of these factors is still assumed. While the importance of their integration in assessment has been established, their lack of validity hinders it. Hence, the *Structured Assessment of PROtective Factors* (SAPROF) has been developed to measure exclusively protective factors. The SAPROF assesses internal factors (e.g., intelligence, secure attachment, etc.), motivational factors (e.g., work, leisure activities, etc.), and external factors (e.g., social network, positive interpersonal relationships, etc.). An additional version for Individuals who have Committed Sexual Offenses (ICSO)

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Communication

Suivi longitudinal des patients psychiatriques médico-légaux : *focus* sur les taux de récidive et les scores de risque

Longitudinal follow-up of forensic patients: Focus on recidivism rate and risk scores

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Libération à l'essai
Psychiatrie légale
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Révocation
Risque de récidive violente

RÉSUMÉ

Les recherches sur le suivi des personnes internées après leur sortie d'un établissement psychiatrique de haute sécurité sont rares. Cependant, les résultats signalent que les taux de révocation sont élevés. Notre recherche visait à répondre à trois questions principales sur base d'une analyse des dossiers judiciaires : (1) rapporter les résultats d'un suivi de plus de trois ans de 168 personnes sorties d'un hôpital psychiatrique sécurisé belge entre 2014 et 2018 ; (2) examiner la prévalence et les motifs de révocation de la libération à l'essai ; (3) évaluer le risque de récidive violente au moyen de la *Violence Risk Appraisal Guide-Revised* (VRAG-R) et croiser ces données avec les types de libération. À notre connaissance, notre étude est la première à croiser les scores de risque de récidive violente et les types de libérations. Nos résultats valident la bonne pratique du principe de risque. Elle soutient l'importance d'appuyer les décisions de libération sur des mesures telles que la VRAG-R dans une perspective longitudinale.
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Keywords:
Forensic psychiatry
Probationary release
Revocation
Recidivism
Risk of violent recidivism

ABSTRACT

Research concerning the follow-up of forensic patients after their release from a high-security facility into the community is scarce. However, results available indicate that revocation rates are rather high. Our research aimed to answer three aspects based on an analysis of court records of 168 patients discharged from a Belgian secure forensic psychiatric hospital between 2014 and 2018: (1) the revocation and recidivism rates during a 3-year follow-up period; (2) the prevalence and motives for revocations of probationary released; (3) the comparison of scores of the *Violence Risk Appraisal Guide-Revised* (VRAG-R) between three release measures. To our knowledge, our study is the first to compare violent recidivism risk scores between release types. The mean VRAG-R scores were higher among revoked than conditioned released patients. The latter presented higher mean score than definitively released patients. The overall results are congruent with the "good practice" of the risk principle, hence supporting the importance of basing release decisions on risk assessment principles such as the VRAG-R in a longitudinal perspective.
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1. Introduction

En Belgique, la mission principale de la psychiatrie légale est de soigner la personne présentant un trouble mental tout en protégeant la société [6,16,21]. Le risque de récidive est un

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Recognition of dynamic facial expressions of emotions in forensic inpatients who have committed sexual offenses: a signal detection analysis

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Emotion recognition is central in prosocial interaction, enabling the inference of mental and affective states. Individuals who have committed sexual offenses are known to exhibit socio-affective deficits, one of the four dynamic risk assessment dimensions found in the literature. Few research focused on emotion recognition. The available literature, exclusively on individuals in prison who have committed sexual offenses, showed contrasting results. Some found a global (across all emotions) or specific (e.g., anger, fear) deficit in emotion recognition. In contrast, others found no difference between individuals in prison who have committed sexual offenses and those who have committed non-sexual offenses. In addition, no such study has been undertaken among forensic inpatients who exhibit socio-affective deficits. This study aims to investigate the recognition of dynamic facial expressions of emotion in 112 male participants divided into three groups: forensic inpatients who have committed sexual offenses (n = 37), forensic inpatients who have committed non-sexual offenses (n = 25), and community members (n = 50), using the Signal Detection Theory indices: sensitivity (d') and response bias (c). In addition, measures related to reaction time, emotion labeling reflection time, task easiness, and easiness reflection time were also collected. Non-parametric analyses (Kruskall-Wallis' H, followed by Mann-Whitney's U with Dunn-Bonferroni correction) highlighted that the two forensic inpatient groups exhibited emotion recognition deficits when compared to community members. Forensic inpatients who have committed sexual offenses were more conservative in selecting the surprise label than community members. They also took significantly more time to react to stimuli and to select an emotional label. Despite emotion recognition deficits, the two forensic inpatient groups reported more stimuli easiness than community members.

KEYWORDS

Emotions, facial expressions of emotion, sexual offending, Forensic inpatient, Signal detection theory

How to better improve the treatment and outcomes of HCV in psychiatric patients: review of a Belgian monocentric psychiatric center

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Abstract

Introduction: **Hepatitis C (HCV) is one of the major worldwide infections with 58 million infected persons in the world. HCV can lead to chronic liver disease, cirrhosis, and cancer. These past few years, clinical progress allowed a curative rate of 95% of the patients. There are still populations in which, treating the disease is more difficult, especially psychiatric patients, when substance abuse, psychiatric disorders are important risks factors for getting HCV. With the WHO organization establishing goals for clinical management and treatment of HCV, it is important to target where the difficulties lie in getting a better treatment program for those populations.**

Aim: **Try to highlight the challenges of treating a certain group of patients compare to the general population.**

Method: **This is a cross sectional monocentric study. 79 patients from a mental facility were included between 2012 and 2022. Inclusion criteria were: >18 years old, an active viral HCV infection.**

Results: **34.7% of patients with a positive PCR were treated with a significant difference between the closed psychiatric unit and the open one (66.5 vs 22.6%, p<.05). There was an 82.4% eradication rate (Sustained Viral Response at 3 months). There were significantly more schizophrenic disorders in the closed unit and significantly more alcohol abuse in the open one.**

Conclusion: **Treatment of HCV in a psychiatric population is feasible with eradication rate equivalent at those in the general population. Patients with more severe mental illness are better treated in the configuration of a closed psychiatric unit.** (Acta gastroenterol. belg., **2024, 87, 223-228**).

Keywords: hepatitis C, Sustained Viral Response, psychiatric disease, psychiatric center.

Introduction

Hepatitis C (HCV) is one of the world's leading infectious diseases, with 58 million people infected worldwide and 1.5 million new infections per year. HCV can lead to chronic liver disease, cirrhosis and cancer. Thanks to the development of diagnostics and therapeutic management and following the appearance of new molecules with direct pangenotypic action, viral eradication is now possible in 95% of patients.

The World Health Organization (WHO) (1) has set a target of complete eradication of HCV worldwide, which if achieved would prevent the deaths of 1.5 million people. In view of this objective, it is important to ask whether there are certain populations in our medicalized society where achieving it would be a challenge. We know that in certain patient groups, overall medical care is more difficult, due to their social, medical and economic specificity.

In this group, we focused specifically on PWIDS (Patients Who Inject Drugs). These patients are at greater risk of infection with the hepatitis C virus, and their social and economic situation poses a challenge in terms of treatment. (5,6,8,11-13,15,16,19,20,22-25).

For this reason, the primary aim of our study is to evaluate HCV eradication in a specific population of drug-addicted institutionalized patients, and also to highlight the links between treatment difficulties and psychiatric illnesses, and to suggest ideas to the improve the management of these patients.

Methodology

Institution

The Centre Régional de soins psychiatriques Les Marronniers is a public psychiatric hospital.

It has 3 sectors: the Secure Psychiatric Hospital (HPS) with 389 beds, the specialized hospital center (CHS) with 256 beds, and the outpatient sector (ambulatory consultations, mobile teams and residential sector).

At the HPS, forensic patients have an average length of stay of 10 years, and are hospitalized in a secure medical environment.

At the CHS, patients have stays ranging from 14 days to 40 days, depending on the unit and the patient's therapeutic project, and are hospitalized in an open, unrestricted setting.

Within the CRP Les Marronniers, a somatic polyclinic is organized, bringing together all somatic specialities and basic medical-technical equipment (radiology, ultrasound, diagnostic digestive endoscopy, dentistry, respiratory function test, electroencephalogram).

At somatic level, patients are followed up by general practitioners who visit the units (prevention and continuity

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1. Ducro, C., & Pham, T.H.
Predictive Validity of Tools for Assessing Recidivism Risk in Men Convicted of Sex Offending : Static-99R, Static-2002R and BARR-2002R.
Sexual Abuse.

2. Tiberi, L.A., Delvaux, V., Saloppé, X., Vicenzutto, A., & Pham, T.H.
Signal detection analysis of affective prosody recognition in forensic inpatients who have committed sexual offenses.
The Journal of Forensic Psychiatry & Psychology.

3. Trottier, D., Vanderstukken, O., Pham, T.H., & Benbouriche, M.
Validating the french RAPE Scale in incarcerated sex offenders and men and women from the community.
Victims & Offenders

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Predictive Validity of Tools for Assessing Recidivism Risk in Men Convicted of Sex Offending: Static-99R, Static-2002R and BARR-2002R

Claire Ducro[1,2] and Thierry H. Pham[1,3]

Abstract

Recidivism risk assessment is crucial for effective case management of men convicted of sex offending. The use of empirical actuarial risk tools has become routine in the field. However, the development of actuarial risk scales for assessing general, violent and/or sexual recidivism in these men is ongoing: The Static-99 led to the Static-99R and the Static-2002R, and the BARR-2002R emerged to assess violent recidivism risk. A study was undertaken to evaluate and compare the inter-rater and predictive validity of the Static-99R, the Static-2002R, and the BARR-2002R in a sample of 328 men convicted of sex offending released from prison in French Belgium. When the instruments were considered integrally, the two versions of the Static—the Static-99R and the Static-2002R—proved better at predicting sexual recidivism and the BARR-2002R was better at predicting violent recidivism. And, the predictive and incremental predictive validity of the factor structure identified by Brouillette-Alarie et al. (2016) was examined. Results proved consistent in that the *Youthful stranger aggression* and *General criminality* factors were better at predicting general recidivism and violent non-sexual recidivism while the *Persistence/paraphilia* factor was better at predicting sexual recidivism.

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Signal detection analysis of affective prosody recognition in forensic inpatients who have committed sexual offenses

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ABSTRACT

Socio-affective functioning, or the way we interact and relate to others, is one of the four dynamic sexual recidivism risk domains. Accurately recognizing emotions enables the inference of mental and affective states supporting social adaptation. As little attention has been paid to affective prosody recognition in forensic inpatients who have committed sexual offenses (FICSOs), this study assessed the accuracy and sensitivity scores of 111 male participants assigned into three groups: FICSOs ($n = 35$), forensic inpatients who have committed non-sexual offenses (FICNSOs, $n = 26$) and community members (CoM, $n = 50$). Collected data also include response bias, emotion labeling reflection time, task easiness and task easiness reflection time. Using non-parametric group comparisons (Kruskal–Wallis H and Mann–Whitney U), results highlight, overall, a pervasive impairment of affective prosody recognition in FICSOs and FICNSOs compared to CoM. However, there was no difference in disgust sensitivity scores between FICSOs and CoM. FICSOs and FICNSOs took significantly longer than CoM to select an emotional label, especially for happiness. In addition, a metacognitive impairment was found in FICSOs and FICNSOs as they found the task significantly easier than CoM while being less sensitive.

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KEYWORDS Sexual offending; emotion recognition; affective prosody; forensic inpatients; signal detection theory

Introduction

Spoken communication is defined as the use of speech to exchange ideas and information, and to engage in social interactions based on the sharing of opinions, emotions and attitudes. Phonologically speaking, the speech signal can be analyzed as a sequence of segmental units, i.e. vowels and

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Validating the French RAPE Scale in Incarcerated Sex Offenders and Men and Women from the Community

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ABSTRACT

The RAPE Scale is a widely used self-report questionnaire for assessing cognitive distortions related to sexual violence against women. While the French-translated version is used in research and clinical settings, it has never undergone formal validation. This article aims to validate the French version of the RAPE Scale. **Study 1** focuses on 142 French-speaking incarcerated male offenders. **Study 2** includes 203 participants from a community sample. Results demonstrate good internal consistency and convergent, divergent, and discriminant validity, suggesting the French-translated RAPE Scale is a reliable and valid tool for assessing cognitive distortions among incarcerated offenders and individuals from the community.

KEYWORDS

Sexual violence; sexual coercion; RAPE; cognitive distortion; sex offenders; Assessment; validation

Sexual violence refers to "any sexual act, attempt to obtain a sexual act, unwanted sexual comments or advances [...] against a person's sexuality using coercion" (World Health Organization, 2012). A recent systematic review based on an aggregated sample of more than 25 500 college men concluded that approximately 1 in 3 men report engaging in behaviors defined as sexual violence (Anderson et al., 2021). Sexual violence is recognized as a public health issue (Center for disease control and prevention, 2022), and achieving a better understanding of the risk factors contributing to its perpetration is central to implementing relevant and effective prevention and management strategies (Ward et al., 2006).

Both clinically and criminologically, perpetrators of sexual violence constitute a heterogeneous group (Hanson & Morton-Bourgon, 2005). However, whether they have been convicted of sexual offending or never been reported to authorities, perpetrators share some commonalities concerning the thought processes surrounding their coercive behaviors, such as complete or partial denial of the coercive nature of their actions as well as erroneous beliefs regarding sexual violence (Trottier et al., 2019; Watson et al., 2016). Thus,

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