Semi-structured Interview of Moral cognitionS (SIMS)

"Les opinions ont plus causé de maux sur ce petit globe que la peste et les tremblements de terre" Voltaire (1795)

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Acknowledgments

This 'Semi-structured Interview of Moral cognitionS' (SIMS) is a synthesis of our experience and research in the fields of clinical/forensic psychology and forensic psychiatry. As an interview the SIMS aims to make the non-understandable understandable and to demystify serious acts of violence. We would like to take this opportunity to thank all of the patients who have generously given their time to participate in this and associated projects. We are grateful for what they have had to teach us about human nature and the psyche. It is our sincere hope that the SIMS will lead to improved outcomes for patients and their families. We believe our instrument will be of interest to others in the field of forensic psychology and psychiatry.

This project would not have been possible without the ongoing support of colleagues from a variety of disciplines. We are particularly grateful to Dr. Paul O'Connell, consultant forensic psychiatrist, for his constructive comments on narcissism and egoistic violence. From the discipline of clinical psychology we would like to thank Dr. Danny O'Sullivan, Dr. Ciaran Coyle, Dr. Muireann O'Donnell, and Dr. Aisling Ryan. We would also like to thank our consultant forensic psychiatric colleagues including Dr. Conor O'Neill, Dr. Tony Kearns, Dr. Stephen Monks, Dr. Damien Mohan, Dr. Sally Linehan, Dr. Ronan Mullaney, Dr. Frank Kelly, Dr. Lisa McLaughlin, and Dr. Brenda Wright. From the senior management team of our hospital, The Central Mental Hospital, Dundrum, Dublin, Ireland, we would like to thank Ms. Pauline Gill, Mr. Donal O'Malley, Mr. David Timmons, Mr. Padraic O'Flynn and Mr. Jim Ryan. From the administration department of our hospital we would like to thank Ms. Mary Kirk and Ms. Caroline Higgins for their help with the manuscript in addition to other administrative colleagues. Finally, we would also like to thank our academic colleagues at the Department of Psychiatry, Trinity College Dublin, especially Professor Aiden Corvin, and Professor Michael Gill, in addition to Professor Gary Donohoe for the School of Psychology, National University of Ireland Galway.

Introduction to the Semi-structured Interview of Moral cognitionS (SIMS)

The 'Semi-structured Interview of Moral cognitionS' assesses six broad domains which may be associated with violence (O'Reilly et al, 2017; Graham and Haidt, 2012). Five of the domains concern the moral themes of 'Care-Harm,' 'Fairness-Injustice', 'Loyalty-Betrayal', 'Authority', and 'Purity', which are drawn from moral foundations theory (Haidt, 2007), in contrast the sixth domain focuses on 'Egoism and Immorality'. The five moral domains are thought to be innate and universal appearing in all cultures (Haidt, 2007). But cultures and individuals may differ with regard to how specific acts are categorised allowing for considerable variation (Haidt, 2007). Moral foundations theory and moral psychology more generally provides a framework for understanding what individuals believe to be moral, however mistaken they may be, and therefore can be contrasted with moral philosophy where the task is often to define what is moral (Pinker, 2002). Because moral psychology concerns what individuals believe, moral attitudes can be erroneously used to justify violence (Fisk and Rai, 2014; Pinker, 2002; O'Reilly et al, 2018 in press). Mercy killings, feuds, crimes of passion, punishments, and honour killings can all be associated with specific moral domains (Fisk and Rai, 2014; Graham and Haidt, 2012)

The dichotomy between moralistic and egoistic violence is based on the premise that violence can be parsimoniously described as 'other orientated, moral, altruistic, justified', or 'self-orientated or egoistic'. This distinction not only echoes the work of the French philosopher and mathematician Auguste Comte (1798–1857) who first coined the term altruism, but also Charles Darwin who emphasized the necessary acquirement of each mental capacity by gradation, with egoism being a clear precursor to altruism (Darwin, 1859). From the evolutionary perspective moral cognition is the product of adaptive mechanisms for facilitating communal living, a proxy for survival and reproduction, whereas egoistic cognitions or violence are more directly connected with these Darwinian goals (Daly and Wilson, 1988). The distinction has also

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been supported by neuroscientific findings, with specific neural mechanisms like the orbitofrontal cortex being less active when violence is perceived as justified (Molenberghs et al 2015).

When combined with an instrumental-expressive dimension, also underpinned by a specific neurobiology (Panksepp, 1998; Adams, 2006), the distinction between moralistic and egoistic violence provides a useful classification or taxonomy for describing all violence (Figure 1). Consequently, violent acts can be classified into four quadrants morally motivated accompanied by goal setting and planning, morally motivated emotional or expressive/reactive violence in the absence of planned goals, immorally motivated emotional violence with minimal planning and goal setting, and immorally motivated violence which involves clear goals and planning.

This classification scheme has clear implications for violence risk assessment, the management of violence and treatment of violence. To illustrate, problem solving therapies may not be required for individuals with well developed goal setting and planning skills. Anger management or emotion regulation training may not be indicated for those who sincerely believe they are acting morally or doing the 'right thing'. Empathy training may not be helpful for those who are exploiting others for sadistic gains, but may be useful for those who are morally motivated. Morally motivated individuals may benefit from rational dissuasion, whereas egoistically motivated individuals may benefit from an appeal to their interests and so on. The risk factors and management for these different kinds of violence may also be dissimilar thus requiring a more nuanced approach. Those capable of planning will require different approaches to those who are not. Individuals who carry out egoistic forms of violence may be somewhat indiscriminate regarding their victim choice and only be constrained by pragmatic considerations. Individuals who carry out morally motivated expressive or reactive violence e.g. challenging behaviour may benefit from positive behaviour plans. The SIMS provides a structure for informing this approach to risk assessment and management.

Figure 1.



History of the SIMS

The SIMS was born out of an attempt to solve a practical problem at the Central Mental Hospital Ireland; namely to understand the increased incidence of serious violence for patients with psychotic disorders leading to their hospitalization (Fazel et al. 2009), and to use this knowledge to improve psychological therapies which could lead to a reduced length of stay in conjunction with a more nuanced risk management approach. In particular we were interested in developing a theoretically robust approach for informing risk assessment and treatment response and designed the interview to account for attitudinal change arising out of pharmacological or psychological interventions. The interview has also been designed to accommodate case control studies for comparing violent forensic patients to nonviolent community patients to facilitate empirical testing and the development of new knowledge.

In its current guise the SIMS is a research instrument, a radical new way of thinking about and conceptualising violence. The SIMS combines moral psychology (Haidt, 2007; Pinker, 2002; Pinker, 2008), with The Theory of Planned Behaviour (Ajzen, 2014). Where moral psychology is the study of what individuals believe to be moral and The Theory of Planned Behaviour is the dominant paradigm for explaining the relationship between attitudes and behaviour (Ajzen, 2014). Recently we have demonstrated that moral psychology is relevant to the study of violent behaviour carried out by forensic patients (O'Reilly et al. 2017; O'Reilly et al. 2018 under review). Within a population of forensic mental health patients with schizophrenia or schizoaffective disorder those that carried out a homicide scored higher on the 'Loyalty' domain of the moral foundations questionnaire (O'Reilly et al. 2017). In a separate study currently under peer review, moral cognitions involving 'Care-harm' (20% of patients) 'Fairness-injustice', (63%), 'Loyalty-betrayal' (54%), 'Authority' (40%), and 'Purity-disgust' (25%) were identified by expert witnesses as being present at the time of the patients' violent offence and mediated the relationship between psychosis and violence(O'Reilly et al. 2018 under review).

In contrast to moral psychology, the theory of planned behaviour is an explanation of the relationship between attitudes and behaviour. The Theory of Planned Behaviour purports that behaviour arises out of intention, which itself a product of attitudes towards the behaviour, control beliefs (actual or perceived), and normative believes within a group or culture i.e. the background attitudes held by particular groups (Ajzen, 2014). Although not without its critics, the Theory of Planned Behaviour has an impressive evidence base and can prospectively account for a considerable amount of the variance of health behaviour outcomes and alcohol consumption (McEachan et. al. 2011; Cooke et al. 2016). Taken together we believe that moral psychology and an adaptation of the Theory of Planned Behaviour will make a powerful combination for understanding, predicting and treating violence.

In addition to these theoretical underpinnings, the SIMS has also been influenced by other validated interviews and scales such as the Positive and Negative Syndrome Scale (PANSS), the International Personality Disorder Examination (IPDE), the Psychopathy Checklist Revised (PCL-R) and the Historical Clinical Risk Management-20 (HCR-20) (Kay et al. 1987; Loranger et al. 1997; Hare, 2003; Webster et al. 1997)

Forensic psychological and psychiatric investigations: known knowns, known unknowns, unknown unknowns and unknown knowns

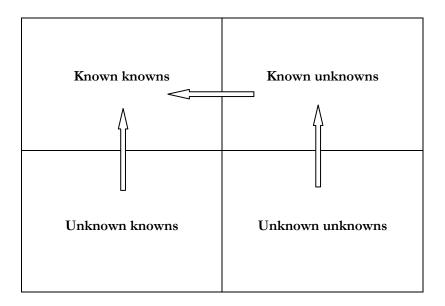
As the SIMS predictive ability is unknown it does not currently qualify as a risk assessment. We believe however that there is an intimate connection between understanding behaviour and predicting behaviour. Therefore one measure of the instrument's success will be its ability to predict violent behaviour at a level

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comparative to or better than today's violent risk assessment instruments, be they actuarial or structured professional judgment.

A separate measure of the instruments success will be its capacity to generate new information and questions during forensic investigations. When Donald Rumsefeld, the then US Secretary of Defence, stated that a Defence Department briefing in February 2002 'There are known knowns. There are things that we know that we know. There are unknown knowns. That is to say, there are things that we now know that we don't know. But there are also unknown unknowns. There are things we do not know we don't know' he was widely criticised and ridiculed. Thoughtful examination of Mr. Rumsefeld statement however indicates that it is rational. Following the administration of the SIMS forensic clinicians should 'know what they know, and know what they don't know' particularly with regard to discharge planning and violence risk assessment. Moreover it is possible for someone to know something or have access to information without realising it, a category which could be described as an 'unknown known'. Much forensic assessments focuses on the unknown and although we have well validated risk assessment instruments such as the HCR-20 they depend on the veracity of the information used to populate them. Forensic clinicians are therefore obligated to be explicit about what they 'know'. Quantifiable units of new knowledge or informational gaps generated by a SIMS assessment should therefore also be conceptualised as a measure of its success (Figure 2)

Figure 2. Known knowns, known unknowns, unknown unknowns and unknown knowns



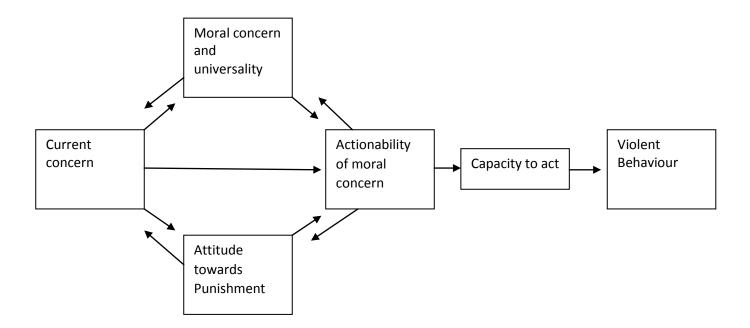
Structure of the interview

The SIMS can usefully be thought of as an interview of two halves the first involves a free-recall approach to a violent incident, or hospitalization if no violence occurred, or even non-violent psychotic action like acting on the basis of delusions or hallucinations, underpinned by the principles of cognitive interviewing (Fisher et al. 1992) and meticulous file review.

The second part involves a semi-structured inquiry into moral and egoistic domains. There are four superordinate items associated with each domain 'Presence', 'Moral concern and Universality', 'Actionability' and 'Punishability'. The structure of the interview follows the premise that moral cognitions are universal, actionable and punishable (Pinker, 2002). Moral beliefs are universal to the extent that they are independent of laws, local customs or rules, actionable to the extent that they demand action, and that moral transgressions are punishable to the extent that they involve sanctions which are sometimes violent (Pinker, 2002).

The items of the SIMS have some similarity with the constructs operationalised within the Theory of Planned Behaviour, with a) moral judgment and universality being somewhat analogous to a person's attitude towards behaviour, b) capacity to act, a facet of the actionability item being somewhat analogous to perceived self-control, and c) punishability being somewhat analogous to normative beliefs within a group or culture. In accordance with the Theory of Planned Behaviour these beliefs lead to the intention to act, which is represented within the SIMS primarily by the two remaining facets of the superordinate actionability item, actionability despite negative consequences for the self, and actionability for fear of negative consequences for the self. Our model of behaviour is outlined in Figure 3 below and takes account of the likely dynamic reciprocal determinism amongst these constructs, for example, a compulsion to act being reframed as a moral issue or leading to attitudes involving punishment. Each construct is a potential target for intervention.

Figure 3. Model of violent action outlined by the SIMS



The SIMS assesses each domain be it moral or egoistic using the same format. The interviewer begins each domain by enquiring about current and past concerns. Previous concerns may involve cognitions associated with a violent act, or cognitions at the time of hospitalisation due to psychosis or psychotic action. For previous concerns consistency should be maintained throughout the interview i.e. the scenario used for scoring previous concerns should be the same for all domains. The scenarios for the current concerns may change across domains. In every case the scoring requires judgment and the interviewer is required to provide a structured professional judgment using all available information rather than simply using responses made by

the interviewee. In this way the interview emulates its predecessors particularly the PCL-R, the HCR-20, and the IPDE (Hare, 2003; Webster et al. 1997; Loranger et al. 1997).

If a domain is **NEITHER** currently **NOR** previously present the interviewer has the option to proceed to the next domain. If a domain is not currently present **BUT** was previously present it still makes sense for the interviewer to ask questions relating to it for two reasons. First, to evaluate change in response to pharmacological or psychological treatment, and second, to evaluate the subordinate items which may inform action should the concern become active again and thus inform violence risk assessment, which is particularly important for patients with psychotic disorders who may have a remitting relapsing course. In other words, the interviewer is interested in whether the cognitions relating to the action associated with the previous concern have changed in any way with regard to 'Presence' 'Moral Concern and Universality', 'Actionability' and 'Punishability'.

Rating a patient's attitude towards a previous concern requires the interviewer to recreate the context in which the previous concern was manifest. Typically this will involve the patient assuming the same interpretation of reality or delusional state that was present at the time of the violent act or hospitalisation. In other words, hypothetically recreating the mental state which led to violence or hospitalisation. When rating a patient's current attitude towards a previous concern, it is best to work backward from the previous concern to the current attitude towards it. A change in attitude regarding previous circumstances may tentatively be regarded as progress, namely a reduction of violence risk.

Item 1 asks about specific concerns. Next the interviewer tries to determine the degree of preoccupation or to what extent the interviewee is consumed thinking about their concerns and whether these preoccupations are affecting functioning. Following this the interviewer inquires as to which affects or mental states like confusion were present (if any) and proximal to the violence (or admission) **AND** moral or egoistic domain. Affects may therefore differ across domains if more than one domain is active. The use of substances is also considered as a supplemental item.

Item 2 focuses on **A** Moral Concern and **B** Universality. Where Moral Concern refers to whether the interviewee considers the specific concern to be a moral issue. Regarding Universality moral beliefs are thought to have the property of being independent of laws, local customs, or traditions.

Item 3 focuses on 'Actionability' of current and previous concerns. Again the interviewer is interested in whether current attitudes towards previous events have changed. Actionability is broken into three subdomains. A: Compulsion to act even if there are negative consequences towards the self. The extent to which consequences are considered is also considered as a supplemental item. B: The belief that if one does not act negative consequences will ensue for the self (not others: concern for others suffering is subsumed under the 'Care-harm' domain). C: Capacity to act, which involves consideration of obstacles preventing one from acting based on their previous or current concern.

Item 4 focuses on attitudes concerning Punishability' for transgressions involving the five moral domains, currently and previously. Again the interviewer is interested in whether the interviewee's current attitude towards previous events have changed. A: Attitudes existing within the patient's wider social network are assessed regarding the Punishability' of current or previous transgressions involving the five moral domains. B: the interviewees own attitude towards punishment for the moral transgressions for current events are also assessed.

Table1. Indicating which items can change and corresponding change scores

Item 1 A: Current presence Item 1 B: Preoccupation Item 1 C: Affects or states	C	are-harm	now	.1
Item 1 B: Preoccupation				
Item 1 B: Preoccupation				
Item 1 C: Affects or states				
,				
Supplemental: Alcohol or drug use				
Item 2 A: Current moral judgment				
Item 2 B: Universality				
Item 3 A: Actionability despite negative				
consequences to self				
Supplemental: Consequences considered.				
Item 3 B: Actionability for fear of negative				
consequences to self				
Item 3 C: Capacity to act				
Item 4 A: Punishability-social support				
Item 4 B:Punishability-personal attitude				
Totals				
	Fairn	ess-injustice		
Item 1 A: Current presence				
Item 1 B: Preoccupation				
Item 1 C: Affects or states				
Supplemental: Alcohol or drug use				
Item 2 A: Current moral judgment				
Item 2 B: Universality				
Item 3 A: Actionability despite negative				
consequences to self				
Supplemental: Consequences considered				
Item 3B: Actionability for fear of negative				
consequences to self				
Item 3 C: Capacity to act				
Item 4 A: Punishability-social support				
Item 4 B: Punishability-personal attitude				
Totals				
	Loya	alty-betrayal		
Item 1 A: Current presence				
Item 1 B: Preoccupation				
Item 1 C: Affects or states				
Supplemental: Alcohol or drug use				
Item 2A: Current moral judgment				
Item 2 B: Universality				
Item 3 A: Actionability despite negative				
consequences to self				
Supplemental: Consequences considered				
Item 3 B: Actionability for fear of negative				
consequences to self				
Item 3C: Capacity to act				
Item 4 A: Punishability-social support				
Item 4 B:Punishability-personal attitude				
Totals				
	A	Authority		
		<u> </u>		
Item 1 A: Current presence				
Item 1 B: Preoccupation				
Item 1 C: Affects or states				
Supplemental: Alcohol or drug use				
Item 2A: Current moral judgment				
Item 2 B: Universality				
Item 3 A: Actionability despite negative				

·	1	1		,
consequences to self				
Supplemental: Consequences considered				
Item 3 B: Actionability for fear of negative				
consequences to self				
Item 3C: Capacity to act				
Item 4 A: Punishability-social support				
Item 4 B:Punishability-personal attitude				
Totals				
		Purity		
Item 1 A: Current presence				
Item 1 B: Preoccupation				
Item 1 C: Affects or states				
Supplemental: Alcohol or drug use				
Item 2A: Current moral judgment				
Item 2 B: Universality				
Item 3 A: Actionability despite negative				
consequences to self				
Supplemental: Consequences considered				
Item 3 B: Actionability for fear of negative				
consequences to self				
Item 3C: Capacity to act				
Item 4 A: Punishability-social support				
Item 4 B:Punishability-personal attitude				
Totals				
	Egoi	stic-violence		
Item 1 A: Current presence				
Item 1 B: Preoccupation				
Item 1 C: Affects or states				
Supplemental: Alcohol or drug use				
Item 2A: Current moral judgment				
Item 2 B: Universality				
Item 3 A: Actionability despite negative				
consequences to self				
Supplemental: Consequences considered				
Item 3 B: Actionability for fear of negative				
consequences to self -planning				
Item 3C: Capacity to act				
Item 4 A: Punishability-social support				
Item 4 B:Punishability-personal attitude				
Totals				
			•	

Typology of violence

After completing the interview the interviewer needs to make a structured professional judgment regarding the typology of violence and the dominant moral or egoistic domain (Table 2)

Table 2.

Violence typology				
	Currently	Previously		
Instrumental violence	Yes/No	Yes/No		
Reactive or expressive violence	Yes/ No	Yes/ No		
Morally motivated violence	Yes/No	Yes/No		
Dominant moral domain				
Egoistic violence	Yes/ No	Yes/ No		
Dominant egoistic domain				

Instructions

Prior to completing the SIMS it is important to review the book of evidence concerning a crime or an alleged crime and/ or to review the preadmission assessment if the patient has been admitted to hospital. The interviewer should then adopt a cognitive interviewing approach (Fisher et al. 1992) involving the following steps. a) The interviewee should be invited to recreate the context of that day for example, what the weather was like, what time they got up, what they were wearing etc b). After recreating the context the interviewer should ask the interviewee to thoroughly recollect the events leading up to, during, or after the violent act or when admitted to hospital if no violence occurred. c) The interviewer should refrain from interrupting the interviewee during this period of free recall d) Following recollection the interviewer may invite the interviewee to go through the details again so as to present new information- multiple retrieval. During this period of multiple retrieval, the interviewee may need to be reassured that even though the process may not reveal anything new to them it may lead to the interviewer discovering new information e) When the retrieval process has been exhausted the interviewer may ask the interviewee to clarify specific items before proceeding to inquiring about moral or egoistic motivations.

Recalling events associated with violent act or psychosis may be anxiety provoking and stressful. It may therefore be useful to screen for symptoms of post traumatic stress disorder prior to commencing the interview or referring for psychological or pharmacological interventions as required.

Following completing the cognitive interview state the following to the interviewee.

"I AM GOING TO ASK YOU SOME QUESTIONS ABOUT PROBLEMS YOU MAY BE CURRENTLY CONCERNED ABOUT AND WHAT YOU THINK IS 'RIGHT' AND 'WRONG', IN ADDITION TO WHAT YOU WERE CONCERNED ABOUT AT THE TIME OF YOUR VIOLENT ACT (or when admitted to hospital if no violence occured). THERE ARE NO CORRECT ANSWERS TO THESE QUESTIONS AND EACH RESPONSE MAY BE RIGHT IN ITS OWN WAY. THERE ARE SIX PARTS TO THE INTERVIEW, IF THE INTERVIEW SEEMS REPETITIVE ITS ONLY BEAUSE WE WANT TO MAKE SURE THE ASSESSMENT IS COMPLETE. DO YOU HAVE ANY QUESTIONS".

Care-harm.

Item 1

A: Presence currently.

Q: Are you currently concerned about others 'suffering or being harmed' (not-self)? Are you worried about someone experiencing emotional or physical pain?

PROMPT: IF YES to any question, tell me about this.

A: Previously concerned.

Q: At the time of your violent act (or when admitted to hospital if no violence occurred) were you concerned about others 'suffering or being harmed' (not-self)? Again, were you worried about someone experiencing emotional or physical pain? Are you still concerned about this now?

PROMPT: IF YES to any question, tell me about this.

Note: This item assesses presence **NOT** the degree of preoccupation. Thoughts concerning reducing 'suffering or harm' may occur spontaneously in response to an event without any previous preoccupation.

Note: Various psychotic phenomena may be related to the moral dimension of 'Care-harm'. For example, grandiose delusions, religious delusions, delusions of guilt, or nihilistic delusions.

- 0 Not concerned about other(s) 'suffering or being harmed' currently or previously.
- Possibly concerned about other(s) 'suffering or being harmed' currently or previously.
- 2 Definitely concerned about other(s) 'suffering or being harmed' currently or previously.

Note: If **NEITHER** current concern **OR** a previous concern is present move to the 'Fairness items'. If no current concern but there was a previous concern continue to administer all items as required. If no previous concern but there is a current concern administer the current items only for this domain.

Currently	0	1	2
Previously	0	1	2
Previous concern now	0	1	2

B: Preoccupation currently.

Q: How much are you thinking about others 'suffering or being harmed'. For example, are you thinking these thoughts for several hours a day? What does thinking like this do to you? How does it affect you?

PROMPT: If YES to any question, tell me about this.

B: Preoccupation previously.

Q: At the time of your violent act (or when admitted to hospital if no violence occurred) how much were you thinking about others 'suffering or being harmed'? Again, for example, where you thinking these thoughts for several hours a day? What did thinking like that do to you? How did it affect you? Are you still preoccupied by these thoughts today?

PROMPT: IF YES to any question, tell me about this.

- 0 Not currently or previously preoccupied with thoughts concerning other(s) 'suffering or being harmed'. The thoughts occur or occurred occasionally perhaps only once or twice a week, and they only last for brief periods.
- 1 Clearly currently or previously preoccupied. Thoughts concerning other(s) 'suffering or being harmed' occur or occurred almost every day and the person ruminates about these themes.
- 2 Clearly currently or previously preoccupied. Thoughts concerning other(s) 'suffering or being harmed' occur or occurred almost every day <u>AND</u> are accompanied by functional impairment e.g. concentration problems i.e. always at the back of mind, difficulty sleeping, or distress. Interpersonal relationships or work may also be affected.

Current concern	0	1	2
Previous concern	0	1	2
Previous concern now	0	1	2

C: Affects or states currently, proximal to specific moral domain.

Q: When you are thinking about others 'suffering or being harmed' how does it make you feel?

Does it make you feel?

- sad or depressed?
- happy or excited?
- angry or hostile?
- fearful or anxious?
- disgust with self-i.e. guilt or disgust towards others?
- surprised or confused, disoriented or perplexed state?

What was your main feeling? What did feeling like that do to you? How do substances like alcohol or drugs affect how you feel about others 'suffering or being harmed'?

PROMPT: If YES to any question, tell me about this.

Note: for current concerns use the persons appearance, collateral, in addition to their self-report to infer their affect or state associated with thoughts concerning others 'suffering or being harmed'.

C: Affects or states previously, proximal to violent act (or admission) and to specific moral domain.

Q: When you were thinking about others 'suffering or being harmed' at the time of your violent act or (when admitted to hospital if no violence occurred) how did it make you feel (See specific prompts above)? What was your main feeling? What did feeling like that do to you? Where you taking any alcohol or drugs at the time? Do you still feel like this now?

PROMPT: If YES to any question, tell me about this.

Note: for previous concerns use collateral information in addition to the persons self-report to infer their affect or state.

- 0 It is <u>NOT</u> possible to identify an affect or mental state associated with thoughts of other(s) 'suffering or being harmed', or no affect appears to be present <u>OR</u> 'suffering or harm' is not at current or pervious concern.
- 1 An affect or state is clearly present or evident regarding a current or previous concern involving other(s) 'suffering or being harmed'.
- An affect or state is clearly present regarding a current or previous concern involving other(s) 'suffering or being harmed' **AND** is accompanied with functional impairment e.g. concentration problems i.e. always at the back of mind, difficulty sleeping, or distress, interpersonal relationships or work may also be affected.

	Alcohol or drug use	Main affect-state			
Current concern	Substance problems Yes/No		0	1	2
Previous concern	Intoxicated Yes/No		0	1	2
Previous concern now			0	1	2

A: Current moral judgment for specific current concern.

Q: Do you think your current concerns involving others 'suffering or being harmed' are 'right' or moral? In other words, given your specific concerns did you think that moral people should 'care' for others?

PROMPT: IF YES or NO tell me why you believe that?

A: Previous moral judgment for specific previous concern.

Q: Do you think the thoughts you were having about others 'suffering or being harmed' at the time of your violent act (or when admitted to hospital if no violence occurred) were 'right' or moral? In other words, given your specific concerns, did you think moral people should 'care' for others? Do you still think this way now about the specific thoughts you were having? i.e. if back in that exact situation?

PROMPT: IF YES or NO tell me why you believe that?

- 0 Does not believe that **THEIR** concerns about other(s) 'suffering or being harmed' or 'caring for others' is a moral issue **OR** this is not a current or previous concern.
- Possibly or partially believes that <u>THEIR</u> concerns about other(s) 'suffering or being harmed' or 'caring for other' as applied to a current or previous concern is a moral issue, <u>BUT</u> relies on authority namely the law as a justification of this belief.
- 2 Recognises that **THEIR** concerns about other(s) 'suffering or being harmed' or 'caring for others' as applied to a current or previous concern is a moral issue **AND** can justify this belief with abstract reasoning.

Current concern	0	1	2
Previous concern	0	1	2
Previous concern now	0	1	2

B: Universality of current concern.

Q: Regarding your current thoughts involving others 'suffering or being harmed'; do you think that you that it is 'right' or moral to 'care' for others even if it's against the law, or local customs, or rules? (For example, the laws governing this country, or the rules or policies within this hospital).

PROMPT: IF YES to any question, tell me why you believe that.

Note: Universal means that the moral foundation applies regardless of other rules or values. Regarding the moral dimension of 'care-harm' philosophies such as anti-natalism argue that it is bad to create life because life involves suffering1. Other philosophies, for example promortalism, suggest that suicide is not only rational but moral because again life involves suffering. Separately baring orders, conditions associated with discharge etc. may forbid people from having contact with those they want to help.

B: Universality of previous concern.

Q: Regarding your previous thoughts involving 'suffering or harm' at the time of your violent act (or when admitted to hospital if no violence occurred) did you think that it was 'right' or moral to 'care' for others even if it was against, the law, or local customs, or rules? (For example, the laws governing this country, or the rules or policies within this hospital). Do you still think this way now about the specific thoughts you were having i.e. if back in that exact situation?

PROMPT: IF YES to any question, tell me why you believed that.

- Ones not believe that THEIR concerns about 'suffering or harm' or 'caring' for others is categorised under a universal moral rule independent of laws, local customs or rules OR the reduction of 'suffering or harm' is not a current or previous concern.
- Possibly or partially believes that <u>THEIR</u> concerns about the reduction of 'suffering or harm' or 'caring' for others is categorised as a universal moral rule irrespective of laws, local customs or rules. The interviewee may be undecided <u>OR</u> it is clear that they have not given the issue much thought.
- 2 Definitely believes that **THEIR** concerns about the reduction of 'suffering or harm' or 'caring' is categorised as a universal moral rule irrespective of laws, local customs or rules.

Current concern	0	1	2
Previous concern	0	1	2
Previous concern now	0	1	2

¹ Archard, David; Benatar, David (2016). Procreation and Parenthood: The Ethics of Bearing and Rearing Children. Oxford University Press. Oxford.

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A: Current concerns actionability despite negative consequences for the self.

Q: Do you feel compelled to act to reduce 'suffering or harm'? even if this may cause negative consequences for you(like getting into trouble with the law)? Is your need to act solely because you want to reduce 'suffering or harm'?

PROMPT: IF YES to any question, tell me why you believe this.

A: Previous actionability despite negative consequences for the self.

Q: At the time of the violent act or (when admitted to hospital if no violence occurred) did you feel compelled to 'act' to reduce 'suffering or harm' regarding what you were concerned about? Even knowing that it could cause negative consequences for you? Is your need to act solely because you want to reduce suffering or harm? Would you still be compelled to act to reduce 'suffering or harm' now despite negative consequences?

PROMPT: IF YES, tell me about this?

Please note if the person considers negative consequences for self and what they are?

Supplemental item not to be summated with the other items

- 0 = No consequences considered.
- 1 = Evidence of some consequences considered (bounded rationality) as inferred by planning or self-report. Planning by definition means they considered outcomes e.g. use of weapon.
- 2 = Evidence of consequences clearly considered.
 - Ones not believe that the reduction of 'suffering or harm' is actionable/ compelling regarding current or previous concern OR is not concerned about 'suffering or harm' currently or previously.
 - 1 Possibly believes they would be compelled (or were compelled) to act to reduce 'suffering or harm' **BUT** only if this did not cause negative consequence for the self-regarding current or previous concern.
 - 2 Definitely believes that they would be compelled (or were compelled) to act to reduce 'suffering or harm'; **EVEN** if this caused negative consequence for the self-regarding current or previous concern **OR** does not consider negative consequences for the self-regarding current or previous concern.

Current	0	1:	2
Previously	0	1	2
Previous concern now	0	1	2

B: Current concerns actionability due to negative consequences for the self.

Q: If you don't act due to your current about 'suffering or harm' will there be negative consequences for you (NB do not rate others)? Would something bad happen to you if you did not act? Do you see any alternative to acting?

PROMPT: IF YES, to any question tell me about this.

B: Previous actionability due to negative consequences for the self.

Q: Regarding your previous concern involving 'suffering or harm' at the time of your violent act or (when admitted to hospital if no violence occurred) were you concerned that there would be negative consequences for you if you didn't act? Did you see any alternatives to acting? Do you still feel compelled to act for fear of negative consequences?

PROMPT: IF YES to any question, tell me about this.

- Does not believe that there would be negative consequences for themselves for failing to act to reduces 'suffering or harm' regarding the current or previous concern. OR 'suffering or harm' is not a current or previous concern.
- Believes there would be negative consequences for themselves if they did not act to reduce 'suffering or harm' regarding current or previous concern <u>BUT</u> can see alternatives to acting to reduce or prevent these consequences.
- 2 Definitely believes that there would be negative consequences for themselves if they did not act to reduce 'suffering or harm' <u>AND</u> cannot see any alternatives to acting to reduce or prevent these consequences regarding the current or previous concern.

Currently	0	1	2
Previously	0	1	2
Previous concern now	0	1	2

C: Current concerns capacity to act. A person may want to act even if doing so incurs negative consequences <u>BUT</u> may not be capable of acting due to external circumstances or constraints. For example, they may be in seclusion, or under special observation, or in the case of psychosis the 'entity' causing suffering may not be personified. Internal impediments to acting may include a lack of certainly about whether it was the 'right thing' to do, or guilt, or shame. External impediments may involve having no opportunity to act or lack of a clear target. External impediments do not include a negative consequence which is covered elsewhere.

Q: Are you capable of acting on the basis of your current concern of reducing 'suffering or harm'? What's preventing you from acting? Will you be able to overcomes these obstacles? i.e. awareness of steps to avoid detection-evidence of forensic sophistication.

PROMPT: If YES to any question, tell me about this.

Previous capacity to act.

Q: At the time of your violent act (or when admitted to hospital if no violence occurred) did anything get in the way of you achieving what you wanted to achieve in reducing 'suffering or harm'. Would you have acted earlier? Were you trying to injure or kill? Are those restraints on your behaviour still in place now?

PROMPT: If YES to any question tell me about this.

- Ones not believe that the reduction of 'suffering or harm' is actionable/ compelling regarding current or previous concern **OR** there are clear external or internal impediments regarding current or previous concern which could **NOT** be surmounted **OR** the reduction of suffering or harm is not a current or previous concern.
- Possibly would have acted earlier or differently to reduce 'suffering or harm' or would like to act but in part is restrained or was restrained by internal **OR** some external impediments regarding their current or previous concern
- Definitely believes that they would be (or were) compelled to act to reduce 'suffering or harm' <u>AND</u> There are/were no external impediments <u>OR</u> there are/were external impediments which could be or were easily surmounted by the interviewee regarding their current or previous concern

Currently	0	1	2
Previously	0	1	2
Previous concern now	0	1	2

A: Punishability: social support regarding current concern. Attitude towards punishment for those who cause 'suffering or harm' within family, friends, neighbourhood or wider social network.

Q: What would your friends, family, or communities attitude be towards the 'suffering or harm' you are currently concerned about? Do you think they would hold the view that the person(s) causing it should be punished? Do you know people who think it would be appropriate to use physical force (violence) against those who cause suffering like you have been talking about?

PROMPT: If YES to any question, tell me about this.

A: Punishability: social support regarding previous concern.

Q: What would your friends, family, or communities attitude be towards the 'suffering or harm' you were previously concerned about associated with your violent act (or when admitted to hospital if no violence occurred)? Do you think they would hold the view that person (s) causing it should be punished? Do you know people who think it would be appropriate to use physical force (violence) against those who cause suffering like the kind you were concerned about? Are you still in contact with these people?

PROMPT: If YES to any question tell me about this.

- Individuals within the person's family, friends, neighbourhood or wider social network do not believe causing 'suffering or harm' is punishable regarding the current or previous concern. **OR** is not currently or previously concerned about 'suffering or harm'
- Individuals within the person's family, friends, neighbourhood or wider social network do believe causing 'suffering or harm' is punishable regarding the current or previous concern.
- 2 Individuals within the person's family, friends, neighbourhood definitely believe that it is appropriate to use violence as a punishment for causing 'suffering or harm' regarding the current or previous concern.

Currently	0	1	2
Previously	0	1	2
Previous concern now	0	1	2

B: Personal attitude towards punishment regarding current concern.

Q: Do you think that individuals who cause 'suffering or harm' to others like what you are concerned about (or previously concerned about) deserve to be punished? Do you think that sometimes it is appropriate to use physical force (violence) against those who cause suffering? Even as a last resort?

PROMPT: IF YES, to any question tell me about this?

B: Personal attitude towards punishment regarding previous concern.

Q: At the time of the violent act (or when admitted to hospital if no violence occurred) did you think that individuals who cause 'suffering or harm' to others deserve to be punished? Did you think that sometimes it is appropriate to use physical force (violence) against those who cause suffering? Even as a last resort? Do you still think this way now?

PROMPT: IF YES, to any question tell me about this?

- O Does not believe causing 'suffering or harm' is punishable regarding the current or previous concern **OR** is not currently or previously concerned about 'suffering or harm'
- 1 Believes (or believed) that causing 'suffering or harm' is punishable regarding the current or previous concern.
- 2 Believes (or believed) that it is appropriate to use violence as a punishment for causing 'suffering or harm' regarding the current or previous concern.

Currently	0	1	2
Previously	0	1	2
Previous concern now	0	1	2

Fairness-injustice.

Item 1

A: Presence currently. This item covers proportionate self-defence a form of justified violence. If being 'wronged or treated' unfairly involves a family member, loved one or friend, or another in their trust, this is usually scored in the loyalty-betrayal and not the fairness-injustice domain because close relationships are not primarily governed by reciprocity (Fiske and Rai, 2014).

Q: Are you currently concerned about being 'wronged or treated unfairly'? For example, do you have thoughts about standing up for yourself due to unjust treatment or persecution?

PROMPT: IF YES to any question, tell me about this.

A: Previously concerned.

Q: At the time of your violent act (or when admitted to hospital if no violence occurred) were you concerned about being 'wronged or treated unfairly'? Did you have thoughts about standing up for yourself due to unjust treatment or persecution? Are you still concerned about this now?

PROMPT: IF YES to any question, tell me about this.

Note: the fairness item includes reactive or proportional self-defence.

Note: This item assesses presence **NOT** the degree of preoccupation. Thoughts concerning reducing 'fairness-injustice' may occur spontaneously in response to an event without any previous preoccupation.

Note: Various psychotic phenomena may be related to the moral dimension of 'Fairness-injustice'. For example, persecutory delusions or delusions of reference.

- Not concerned about being 'wronged or treated unfairly' currently or previously.
- Possibly concerned about being 'wronged or treated unfairly' currently or previously.
- 2 Definitely concerned about being 'wronged, or treated unfairly' currently or previously.

Note: If **NEITHER** current concern **OR** a previous concern is present move to the 'Loyalty-Betrayal' domain. If no current concern but there was a previous concern continue to administer all items as required. If no previous concern but there is a current concern administer the current items only for this domain.

Currently	0	1	2
Previously	0	1	2
Previous concern now	0	1	2

B: Preoccupation currently.

Q: How much are you thinking about yourself being 'wronged or treated unfairly'? For example, are you thinking these thoughts for several hours a day? What does thinking like this do to you? How does it affect you?

PROMPT: IF YES to any question, tell me about this.

B: Preoccupation previously.

Q: At the time of your violent act (or when admitted to hospital if no violence occurred) how much were you thinking about being 'wronged or treated unfairly'? Again, for example, where you thinking these thoughts for several hours a day? What did thinking like that do to you? How did it affect you? Are you still preoccupied by these thoughts today?

- Not currently or previously preoccupied with thoughts concerning being 'wronged or treated unfairly'. The thoughts occur or occurred occasionally perhaps only once or twice a week, and they only last for brief periods.
- 1 Clearly currently or previously preoccupied. Thoughts concerning being 'wronged or treated unfairly' occur or occurred almost every day and the person ruminates about these themes.
- 2 Clearly currently or previously preoccupied. Thoughts concerning being 'wronged or treated unfairly' occur or occurred almost every day <u>AND</u> are accompanied by functional impairment e.g. concentration problems i.e. always at the back of mind, difficulty sleeping, or distress. Interpersonal relationships or work may also be affected.

Current concern	0	1	2
Previous concern	0	1	2
Previous concern now	0	1	2

C: Affects or states currently, proximal to specific moral domain.

Q: When you are thinking about being 'wronged or treated unfairly' how does it make you feel?

Does it make you feel?

- sad or depressed?
- happy or excited?
- angry or hostile?
- fearful or anxious?
- disgust with self-i.e. guilt or disgust towards others?
- surprised or confused, disoriented or perplexed state?

What was your main feeling? What did feeling like that do to you? How do substances like alcohol or drugs affect how you feel about being 'wronged or treated unfairly'?

PROMPT: If YES to any question, tell me about this.

Note: for current concerns use the persons appearance, collateral, in addition to their self-report to infer their affect or state associated with thoughts concerning being 'wronged or treated unfairly'.

C: Affects or states previously, proximal to violent act (or admission) and to specific moral domain and

Q: When you were thinking about being 'wronged or treated unfairly' at the time of your violent act or (when admitted to hospital if no violence occurred) how did it make you feel (See specific prompts above)? What was your main feeling? What did feeling like that do to you? Where you taking any alcohol or drugs at the time? Do you still feel like this now?

Do you still feel like this now?

Prompt: IF YES to any question, tell me about this.

Note: for previous concerns use collateral information in addition to the persons self-report to infer their affect or state.

- 1 It is <u>NOT</u> possible to identify an affect or mental state associated with thoughts of being 'wronged or treated unfairly' or no affect appears to be present <u>OR</u> being 'wronged or treated unfairly is not a current or previous concern'
- 1 An affect or state is clearly present or evident regarding a current or previous concern involving being 'wronged or treated unfairly'.
- An affect or state is clearly present regarding a current or previous concern involving being 'wronged or treated unfairly' **AND** is accompanied with functional impairment e.g. concentration problems i.e. always at the back of mind, difficulty sleeping, distress, interpersonal relationships or work may also be affected.

	Alcohol or drug use	Main affect- state			
Current concern	Substance problems Yes/No		0	1	2
Previous concern	Intoxicated Yes/No		0	1	2
Previous concern now			0	1	2

A: Current moral judgment for specific current concern.

Q: Do you think your current concerns involving being 'wronged or treated unfairly' are 'right' or moral? In other words, given your specific concerns do you think that moral people should be concerned about 'unjust or unfair treatment'?

PROMPT: IF YES or NO tell me why you believe that?

A: Previous moral judgment for specific current concern.

Q: At the time of your violent act (or when admitted to hospital if no violence occurred) did you think the thoughts you were having about being 'wronged, or treated unfairly', were right or moral? In other words, given your specific concerns, did you think that moral people should be concerned about 'unjust or unfair treatment'. Do you still think this way now about the specific thoughts you were having i.e. if back in that exact situation?

PROMPT: IF YES or NO tell me why you believe that?

- Does not believe that **THEIR** concerns about being 'wronged or treated unfairly' or 'justice-fairness' is a moral issue, **OR** this is not a current or previous concern.
- Possibly or partially believes that <u>THEIR</u> concerns about being 'wronged or treated unfairly' or 'justice-fairness' is a moral issue <u>BUT</u> relies on authority namely the law as a justification of this belief.
- 2 Recognises that <u>THEIR</u> concerns about being 'wronged or treated unfairly' or 'justice-fairness' is a moral issue <u>AND</u> can justify this belief with abstract reasoning.

Current concern	0	1	2
Previous concern	0	1	2
1 ievious concein	O .	1	2
D	0	1	2
Previous concern now	0	1	2

B: Universality of current concern.

Q:Regarding your current thoughts involving being 'wronged or treated unfairly'; do you think that you that it is 'right' or moral to be 'fair or just' even if it's against the law, or local customs or rules? (For example, the laws governing this country, or the rules or policies within this hospital).

PROMPT: IF YES to any question, tell me why you believe that.

Note: Universal means that the moral foundation applies regardless of other rules or values.

B: Universality of previous concern.

Q: Regarding your previous thoughts involving being 'wronged and treated unfairly' at the time of your violent act (or when admitted to hospital if no violence occurred) did you previously think that it was 'right' or moral to be 'fair or just' even if it was against, the law, or local customs, or rules? (For example, the laws governing this country, or the rules or policies within this hospital). Do you still think this way now about the specific thoughts you were having i.e. if back in that exact situation.

PROMPT: IF YES, to any question tell me why you believed that.

- Does not believe that <u>THEIR</u> concerns about being 'wronged or treated unfairly' or 'justice-fairness' is categorised under a universal moral rule independent of laws, local customs or rules <u>OR</u> 'justice fairness' is not a current or previous concern.
- Possibly or partially believes that **THEIR** concerns about being 'wronged or treated unfairly' or 'justice-fairness' is categorised under a universal moral rule independent of laws, local customs or rules, The interviewee may be undecided **OR** it is clear that they have not given the issue much thought.
- 2 Definitely believes that <u>THEIR</u> concerns about being 'wronged or treated unfairly' or 'justice-fairness' is categorised under a universal moral rule independent of laws, local customs or rules.

Current concern	0	1	2
Previous concern	0	1	2
Previous concern now	0	1	2

A: Current concerns actionability despite negative consequences for the self

Q: Do you feel compelled to act in response to being 'wronged or treated? even if this may cause negative consequences for you? Is your need to act solely because you want to reduce injustice or unfair treatment?

PROMPT: IF YES to any question, tell me why you believe this.

A: Previous actionability despite negative consequences for the self.

Q: At the time of the violent act or (when admitted to hospital if no violence occurred) did you feel compelled to act in response to being 'wronged or treated unfairly'? Even knowing that it could cause negative consequences for you? Is your need to act solely because you want to reduce injustice or unfair treatment? Would you still be compelled to respond to being 'wronged or treated unfairly' despite negative consequences?

PROMPT: IF YES to any question, tell me about this?

Please note if the person considers negative consequences for self and what they are?

Supplemental item not to be summated with the other items

- 0 =No consequences considered.
- 1 = Evidence of some consequences considered (bounded rationality) as inferred by planning or self report. Planning by definition means they considered outcomes e.g. use of weapon.
- 2 = Evidence of consequences clearly considered.
 - 0 Does not believe being 'wronged or treated unfairly' is actionable/compelling, regarding current or previous concern.
 - 1 Possibly believes they would be compelled to respond to being 'wronged or treated unfairly' <u>BUT</u> only if this did not cause negative consequence for the self-regarding current or previous concern.
 - Definitely believes that they would be compelled to being 'wronged or treated unfairly'; **EVEN** if this caused negative consequence for the self-regarding current or previous concern. **OR** does not consider negative consequences for the self regarding current or previous concern.

Currently	0	1	2
Previously	0	1	2
Previous concern now	0	1	2

B: Current concerns actionability due to negative consequences for the self.

Q: If you don't act due to your current about being 'wronged or treated unfairly' will there be negative consequences for you? Would something bad happen to you if you did not act? Did you see any alternatives to acting?

PROMPT: IF YES to any question, tell me about this.

B: Previous concern actionability due to negative consequences for the self.

Regarding your previous concern about being 'wronged or treated unfairly' were you concerned that there would be negative consequences for yourself if you don't act? Would something bad happen to you if you did not act? Did you see any alternatives to acting? Do you still feel compelled to act for fear of negative consequences?

PROMP: IF YES to any question, tell me about this.

- O Does not believe that there would be negative consequences for acting if 'wronged or treated unfairly' **OR** this is not a current or previous concern.
- Believes that there would be negative consequences for themselves if they did not act if 'wronged or treated unfairly' regarding their current or previous concern **BUT** can see an alternative to acting to reduce or prevent these consequences.
- Definitely believes that there would be negative consequences for themselves if they did not act if 'wronged or treated unfairly' **AND** cannot see any alternative to acting to reduce or prevent these consequences.

Currently	0	1	2
Previously	0	1	2
Previous concern now	0	1	2

C: Current concerns capacity to act. A person may want to act even if doing so incurs negative consequences <u>BUT</u> may not be capable of acting due to external circumstances or constraints. For example, they may be in seclusion, or under special observation, or in the case of psychosis the entity causing suffering may not be personified. Internal impediments to acting may include a lack of certainty about whether it was the 'right thing' to do, or guilt, or shame. External impediments may involve having no opportunity to act or lack of a clear target. External impediments do not include a negative consequence which is covered elsewhere.

Q: Are you capable of acting on the basis of your current concern being 'wronged or treated unfairly'? What's preventing you from acting? Will you be able to overcome these obstacles? i.e. awareness of steps to avoid detection-evidence of forensic sophistication.

PROMPT: If YES to any question, tell me about this.

C: Previous capacity to act.

Q: At the time of your violent act (or when admitted to hospital if no violence occurred) did anything get in the way of you achieving what you wanted to achieve when being 'wronged or treated unfairly'. Would you have acted earlier? Were you trying to injure or kill? Are those restraints on your behaviour still in place now?

PROMPT: If YES to any question tell me about this.

- O Does not believe that they would be compelling to act if 'wronged or treated unfairly' regarding their current or previous concern <u>OR</u> there are clear external or internal impediments regarding current or previous concern which could <u>NOT</u> be surmounted <u>OR</u> responding to being 'wronged or treated unfairly' is not a current or previous concern.
- 1 Possibly would have acted earlier or differently if 'wronged or treated unfairly' regarding their current or previous concern <u>OR</u> would like to act but in part is restrained or was restrained by internal <u>OR</u> some external impediments regarding their current or previous concern
- 2 Definitely believes that they would be compelled to act if 'wronged or treated unfairly' **AND** There are/were no external or internal impediments **OR** there are/were external impediments which could be or were easily surmounted by the interviewee regarding their current or previous concern.

Currently	0	1	2
Previously	0	1	2
Previous concern now	0	1	2

A: Punishability: social supports regarding current concern. Attitude towards punishment for those who 'disrespect, wrong or treat people unfairly' within family, friends, neighbourhood or wider social network.

Q: What would your friends, family, or communities attitude be towards 'being wronged or treated unfairly' like you are currently concerned about? Do you think they would hold the view that the person(s) causing it should be punished? Do you know people who think it would be appropriate to use physical force (violence) against those who cause 'unfair treatment or injustice' like you have been talking about?

PROMPT: If YES to any question tell me about this.

B: Punishability: social support regarding previous concern.

Q: What would your friends, family, or communities attitude be towards being 'wronged or treated unfairly' that you were previously concerned about associated with your violent act (or when admitted to hospital if no violence occurred)? Do you think they would hold the view that person(s) causing it should be punished? Do you know people who think it would be appropriate to use (physical force) violence against those who cause 'unfair treatment or injustice' like the kind you were concerned about? Are you still in contact with these people?

PROMPT: If YES, to any question tell me about this.

- Individuals within the person's family, friends, neighbourhood or wider social network do not believe being 'wronged or treated unfairly' is punishable regarding the current or previous concern. <u>OR</u> is not currently or previously concerned about being 'wronged or treated unfairly'.
- Individuals within the person's family, friends, neighbourhood or wider social network do believe 'being wronged or treated unfairly' is punishable regarding the current or previous concern.
- 2 Individuals within the person's family, friends, neighbourhood, definitely believe 'being wronged or treated unfairly' is punishable and that it is appropriate to use violence as a punishment regarding the current or previous concern.

Currently	0	1	2
Previously	0	1	2
Previous concern now	0	1	2

B: Personal attitude towards punishment regarding current concern.

Q: Do you think that individuals who 'wrong or treat others unfairly' like you have been concerned about deserve to be punished? Do you think that sometimes it is appropriate to use physical force (violence) against those who 'wrong or treat others unfairly'? Even as a last resort?

PROMPT: IF YES, to any question tell me about this?

B: Personal attitude towards punishment regarding previous concern.

Q: At the time of the violent act (or when admitted to hospital if no violence occurred) did you think that individuals who 'wrong or treat others unfairly' deserve to be punished? Do you think that sometimes it is appropriate to use physical force (violence) against those who 'wrong or treat others unfairly'? Even as a last resort? Do you still think like this now?

PROMPT: IF YES, to any question tell me about this?

PROMPT: Rate current attitude to the 'Punishability' of the previous concern and score under current concern.

- Ones not believe being 'wronged or treated unfairly' is punishable regarding the current or previous concern <u>OR</u> is not currently or previously concerned about being 'wronged or treated unfairly'.
- Believes that being 'wronged or treated unfairly' is punishable regarding the current or previous concern.
- 2 Believes that being 'wronged or treated unfairly' is punishable using violence regarding the current or previous concern.

Currently	0	1	2
Previously	0	1	2
Previous concern now	0	1	2

Loyalty-betrayal.

Item 1

A: Presence currently.

Q: Are you currently concerned about being 'betrayed or deceived by someone that you trust'? For example, are you concerned about being betrayed by a family member, loved one, friend or doctor, nurse etc?

PROMPT: IF YES to any question, tell me about this.

A: Previously concerned.

Q: At the time of your violent act (or when admitted to hospital if no violence occurred) were you concerned about being 'betrayed or deceived by someone that you trusted'? For example, were you concerned about being betrayed by a family member, loved one, friend or doctors, nurses etc? Are you still concerned about this now?

PROMPT: IF YES to any question, tell me about this.

Note: This item assesses presence **NOT** the degree of preoccupation. Thoughts concerning reducing 'loyalty-betrayal' may occur spontaneously in response to an event without any previous preoccupation.

Note: Various psychotic phenomena may be related to the moral dimension of 'loyalty-betrayal'. For example, persecutory delusions, delusions of jealousy and delusions of misidentification.

- 0 Not concerned about being 'betrayed or deceived by someone that they trust' currently or previously.
- 1 Concerned about being 'betrayed or deceived by someone that they trust' currently or previously.
- 2 Definitely concerned about being 'betrayed or deceived by someone that they trust' currently or previously.

Note: If **NEITHER** current concern **OR** a previous concern is present move to the 'Authority' domain. If no current concern but there was a previous concern continue to administer all items as required. If no previous concern but there is a current concern administer the current items only for this domain.

Currently	0	1	2
Previously	0	1	2
Previous concern now	0	1	2

B: Preoccupation currently.

Q: How much are you thinking about being 'betrayed or deceived by someone that you trust'? For example, are you thinking these thoughts for several hours a day? What does thinking like this do to you? How does it affect you?

PROMPT: If YES to any question, tell me about this.

B: Preoccupation previously.

Q: At the time of your violent act (or when admitted to hospital if no violence occurred) how much were you thinking about others being 'betrayed or deceived by someone that you trust'? Again, for example, where you thinking these thoughts for several hours a day? What did thinking like that do to you? How did it affect you? Are you still preoccupied by these thoughts today?

PROMPT: If YES to any question, tell me about this.

- Not currently or previously preoccupied with thoughts concerning being 'betrayed or deceived by someone that they trust'. The thoughts occur or occurred occasionally perhaps only once or twice a week, and they only last for brief periods.
- 1 Clearly currently or previously preoccupied. Thoughts concerning being 'betrayed or deceived by someone that they trust' occur or occurred almost every day and the person ruminates about these themes.
- 2 Clearly currently or previously preoccupied. Thoughts concerning being 'betrayed or deceived by someone that they trust' occur or occurred almost every day <u>AND</u> are accompanied by functional impairment e.g. concentration problems i.e. always at the back of mind, difficulty sleeping, or distress. Interpersonal relationships or work may also be affected.

Current concern	0	1	2
Previous concern	0	1	2
Previous concern now	0	1	2

C: Affects or states currently, proximal to specific moral domain.

Q: When you are thinking about yourself or others being 'betrayed or deceived by someone that you trust' how does it make you feel?

Does it make you feel?

- sad or depressed?
- happy or excited?
- angry or hostile?
- fearful or anxious?
- disgust with self-i.e. guilt or disgust towards others?
- surprised or confused, disoriented or perplexed state?

What was your main feeling? What did feeling like that do to you? How do substances like alcohol or drugs affect how you feel about being 'betrayed or deceived by someone that you trust'?

PROMPT: If YES to any question, tell me about this.

Note: for current concerns use the person's appearance, collateral, in addition to their self-report to infer their affect or state associated with being 'betrayed or deceived'.

C: Affects or states previously, proximal to violent act (or admission) and to specific moral domain.

Q: When you were thinking about being 'betrayed or deceived by someone that you trust' at the time of your violent act or (when admitted to hospital if no violence occurred) how did it make you feel (See specific prompts above)? What was your main feeling? What did feeling like that do to you? Where you taking any alcohol or drugs at the time? Do you still feel like this now?

PROMPT: If YES to any question, tell me about this.

Note: for previous concerns use collateral information in addition to the persons self-report to infer their affect or state.

- 1 It is <u>NOT</u> possible to identify an affect or mental state associated with thoughts of (s) being 'betrayed or deceived by someone that they trust' <u>OR</u> no affect appears to be present.
- 1 An affect or state is clearly present or evident regarding a current or previous concern involving being 'betrayed or deceived by someone that they trust'.
- An affect or state is clearly present regarding a current or previous concern involving being 'betrayed or deceived by someone that they trust' **AND** is accompanied with functional impairment e.g. concentration problems i.e. always at the back of mind, difficulty sleeping, distress, interpersonal relationships or work may also be affected.

	Alcohol or drug use	Main affect- state			
Current concern	Substance problems Yes/No		0	1	2
Previous concern	Intoxicated Yes/No		0	1	2
Previous concern now			0	1	2

A: Current moral judgment for specific current concern.

Q: Do you think your current concerns involving being 'betrayed or deceived by someone that you trust' (for example, a family member, friend, doctor, or nurse) are 'right' or 'moral'? In others words, given your specific concerns, do you think moral people should be 'loyal'?

PROMPT: IF YES or NO tell me why you believe that?

A: Previous moral judgment for specific previous concern.

Q: Do you think the thoughts you were having about being 'betrayed or deceived by someone that you trusted' (for example, a family member, friend, doctor, or nurse) were 'right' or 'moral'? In other words, given your specific concerns did you think that moral people should be 'loyal'? Do you still think that way now about the specific thoughts you were having i.e. if back in that exact situation.

PROMPT: IF YES or NO tell me why you believe that?

- O Does not believe that <u>THEIR</u> concerns about being 'betrayed or deceived by someone in their trust' or 'loyalty' is a moral issue, <u>OR</u> this is not a current or previous concern.
- Possibly or partially believes that **THEIR** concerns about being 'betrayed or deceived by someone in their trust' or 'loyalty' is a moral issue, **BUT** relies on authority namely the law as a justification of this belief.
- 2 Recognises that THEIR concerns about being 'betrayed or deceived by someone in their trust' or 'loyalty' is a moral issue AND can justify this belief with abstract reasoning.

Current concern	0	1	2
Previous concern	0	1	2
Previous concern now	0	1	2

B: Universality of current concern.

Q: Regarding your current thoughts involving being 'betrayed or deceived by someone that you trust' (for example, a family member, friend, doctor, or nurse); do you think that you that it is 'right' or moral to be 'loyal' even if it's against the law, or local, customs or rules, (For example, the laws governing this country, or the rules or policies within this hospital).

PROMPT: IF YES to any question, tell me why you believe that.

Note: Universal means that the moral foundation applies regardless of other rules or values.

B: Universality of previous concern.

Q: Regarding your previous thoughts involving being 'betrayed or deceived by someone that you trust' (for example, a family member, friend, doctor, or nurse) at the time of your violent act (or when admitted to hospital if no violence occurred). Previously, did you think that it was 'right' or moral to be 'loyal' even if it was against, the law, or local customs or rules? (For example, the laws governing this country, or the rules or policies within this hospital). Do you still think this way now about the specific thoughts you were having i.e. if back in that exact situation?

PROMPT: IF YES, to any question tell me why you believed that.

PROMPT: Rate current attitude to the 'Universality' of the previous concern and score under current concern.

- Ones not believe that THEIR concerns about being 'betrayed or deceived by someone that they trust' or 'loyalty' is categorised under a universal moral rule independent of laws, local customs or rules <u>OR</u> being 'betrayed or deceived' is not a current or previous concern.
- Possibly or partially believes that <u>THEIR</u> concerns about being 'betrayed or deceived by someone that they trust' or 'loyalty' is categorised under a universal moral rule independent of laws, local customs or rules. The interviewee may be undecided <u>OR</u> it is clear that they have not given the issue much thought.
- 2 Definitely believes that **THEIR** concerns about being 'betrayed or deceived by someone that they trust' or 'loyalty' is categorised under a universal moral rule independent of laws, local customs or rules.

Current concern	0	1	2
Previous concern	0	1	2
Previous concern now	0	1	2

A: Current concerns actionability despite negative consequences for the self.

Q: Do you feel compelled to 'act' to respond to being 'betrayed or deceived by someone that you trusted', even if this may cause negative consequences for you (like getting into trouble with the law)? Is your need to act solely because you want to respond to 'betrayal or deceit by someone that you trusted'?

PROMPT: IF YES to any question, tell me why you believe this.

A: Previous actionability despite negative consequences for the self.

Q: At the time of the violent act or (when admitted to hospital if no violence occurred) did you feel compelled to 'act' to respond to 'betrayal or deceit' by someone that you trusted, regarding what you were concerned about? Even knowing that it could cause negative consequences for you? Is your need to act solely because you wanted to respond to 'betrayal or deceit by someone that you trusted'? Would you still be compelled to respond to 'betrayal or deceit' now despite negative consequences?

PROMPT: IF YES, tell me about this?

Please note if the person considers negative consequences for self and what they are?

Supplemental item not to be summated with the other items

- 0 = No consequences considered.
- 1 = Evidence of some consequences considered (bounded rationality) as inferred by planning or self-report. Planning by definition means they considered outcomes e.g. use of weapon.
- 2 = Evidence of consequences clearly considered.
 - Ones not believe that being 'betrayed or deceived by someone that they trust' is actionable/ compelling regarding current or previous concern <u>OR</u> is not concerned about 'being betrayed or deceived by someone that they trust' currently or previously.
 - Possibly believes that being 'betrayed or deceived by someone that they trust' is actionable/ compelling **BUT** only if this did not cause important negative consequence for the self-regarding current or previous concern.
 - Definitely believes that being 'betrayed or deceived by someone that they trust' is actionable/ compelling; EVEN if this caused important negative consequence for the self-regarding current or previous concern. OR does not consider important negative consequences for the self.

Currently	0	1	2
Previously	0	1	2
Previous concern now	0	1	2

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B: Current concerns actionability due to negative consequences for the self.

Q: If you don't act due to your current concern about being 'betrayed or deceived by someone that you trust' will there be negative consequences for you (NB do not rate others)? Would something bad happen to you if you did not act? Do you see any alternatives to acting?

PROMPT: IF YES, to any question tell me about this.

B: Previous actionability dues to negative consequences for the self.

Q: Regarding your previous concern involving being 'betrayed or deceived by someone that you trusted', at the time of your violent act or (when admitted to hospital if no violence occurred) were you concerned that there would be negative consequences for your if you didn't act? Did you see any alternative to acting? Do you still feel compelled to act for fear of negative consequences?

PROMPT: IF YES to any question, tell me about this.

- 0. Does not believe that there would be negative consequences for themselves for failing to act in response to being 'betrayed or deceived by someone that they trust' regarding current or previous concern **OR** being betrayed or deceived by someone that they trust in not a current or previous concern.
- Believes there would be negative consequences for themselves if they did not respond to being 'betrayed or deceived by someone that they trusted' regarding current or previous concern <u>BUT</u> can see alternatives to acting to reduce or prevent these consequences.
- Definitely believes that there would be negative consequences for themselves if they did not respond to being
 'betrayed or deceived by someone that they trusted' <u>AND</u> cannot see any alternatives to acting to reduce or prevent
 these consequences regarding the current or previous concern.

Currently	0	1	2
Previously	0	1	2
Previous concern now	0	1	2

C: Current concerns capacity to act. A person may want to act even if doing so incurs negative consequences <u>BUT</u> may not be capable of acting due to external circumstances or constraints. For example, they may be in seclusion, or under special observation, or in the case of psychosis the entity causing suffering may not be personified. Internal impediments to acting may include a lack of certainly about whether it was the 'right thing' to do, or guilt, or shame. External impediments may involve having no opportunity to act or lack of a clear target. External impediments do not include a negative consequence which is covered elsewhere.

Q: Are you capable of acting on the basis of your current concern of being 'betrayed or deceived by someone that you trust'? What's preventing you from acting? Will you be able to overcomes these obstacles?

PROMPT: If YES to any question, tell me about this.

C: Previous capacity to act.

Q: At the time of your violent act (or when admitted to hospital if no violence occurred) did anything get in the way of you achieving what you wanted to achieve in responding to being 'betrayed or deceived by someone that you trusted'. Would you have acted earlier? Were you trying to injure or kill? Are those restraints on your behaviour still in place now?

PROMPT: If YES to any question, tell me about this.

- O Does not believe that being 'betrayed or deceived by someone that they trust' is actionable/ compelling regarding current or previous concern **OR** there are clear external impediments regarding current or previous concern which could **NOT** be surmounted **OR** being 'betrayed or deceived is not a current or previous concern.
- Possibly would have acted earlier or differently to respond to being 'betrayed or deceived by someone that they trusted', or would like to act but in part is restrained or was restrained by internal **OR** some external impediments regarding their current or previous concern
- 2 Definitely believes that they would be (or were) compelled to act to respond to being 'betrayed or deceived by someone that they trusted' **AND** There are/were no external impediments **OR** there are/were external impediments which could easily be surmounted by the interviewee regarding their current or previous concern.

Currently	0	1	2
Previously	0	1	2
Previous concern now	0	1	2

A: Punishability: social support regarding current concern. Attitude towards punishment for those who 'betray or deceive people within their trust' within family, friends, neighbourhood or wider social network.

Q: What would your friends, family, or communities attitude be towards being 'betrayed or deceived by someone in their trust' that you are currently concerned about? Do you think they would hold the view that the person(s) causing it should be punished? Do you know people who think it would be appropriate to use physical force (violence) against those who 'betray or deceive' others like you have been talking about?

PROMPT: If YES to any question tell me about this.

B: Punishability: social support regarding previous concern. What would your friends, family, or communities attitude be towards being 'betrayed or deceived by someone in their trust' that you were previously concerned about associated with your violent act (or when admitted to hospital if no violence occurred)? Do you think they would hold the view that person(s) causing it should be punished? Do you know people who think it would be appropriate to use physical force (violence) against those who 'betray or deceive' others like the kind you were concerned about? Are you still in contact with these people?

PROMPT: If YES, to any question tell me about this.

- Individuals within the person's family, friends, neighbourhood or wider social network do not believe being 'betrayed or deceived by someone in their trust' is punishable regarding the current or previous concern <u>OR</u> is not concerned about being 'betraying or deceived by someone in their trust'
- Individuals within the person's family, friends, neighbourhood or wider social network do believe being 'betrayed or 'deceived by someone in their trust' is punishable regarding the current or previous concern.
- Individuals within the person's family, friends, neighbourhood definitely believes that it is appropriate to use violence as a punishment for being 'betrayed or deceived by someone in their trust' regarding the current or previous concern.

Currently	0	1	2
Previously	0	1	2
Previous concern now	0	1	2

B: Personal attitude towards punishment regarding people who 'betray or deceive someone in their trust'.

Q: Do you think that individuals who 'betray or deceive someone in their trust' like what you are concerned about deserve to be punished? Do you think that sometimes it is appropriate to use physical force (violence) against those who 'betray or deceive others in their trust'? Even as a last resort?

PROMPT: IF YES, to any question tell me about this?

B: Personal attitude towards punishment regarding current concern.

Q: At the time of the violent act (or when admitted to hospital if no violence occurred) did you think that individuals who 'betray or deceive someone in their trust deserve to be punished'? Do you think that sometimes it is appropriate to use physical force (violence) against those who 'betray or deceive someone in their trust'? Even as a last resort? Do you still think this way now?

PROMPT: IF YES, to any question tell me about this?

- Does not believe being 'betraying or deceiving someone in your trust' is punishable regarding the current or previous concern **OR** is not currently or previously concerned about being 'betraying or deceived by someone in their trust'
- Believes that being 'betraying or deceiving someone in your trust' is punishable regarding the current or previous concern.
- 2 Believes that it is appropriate to use violence as a punishment for being 'betrayed or deceived by someone in your trust' regarding the current or previous concern.

Currently	0	1	2
Previously	0	1	2
Previous concern now	0	1	2

Authority

Item 1

A: Presence currently.

Q: Are you currently concerned about yourself or others following or not following what you consider to be an 'authority'? For example, is it important to yourself or others 'obey God, or another 'higher power' such as a supernatural being, or the police or special agency'?

PROMPT: IF YES to any question, tell me about this.

A: Previously concerned.

Q: At the time of your violent act (or when admitted to hospital if no violence occurred) were you concerned about yourself or others following or not following what you consider to be an 'authority'? Did you have thoughts about 'obeying God, or another 'higher power' such as a supernatural being, or the police or special agency'? Are you still concerned about this now?

PROMPT: IF YES to any question, tell me about this.

Note: This item assesses presence **NOT** the degree of preoccupation. Thoughts concerning following 'authority' may occur spontaneously in response to an event without any previous preoccupation.

Note: Various psychotic phenomena may be related to the moral dimension of 'Authority' such as religious delusions, passivity phenomena, grandiose delusions, mind reading, delusions of control, thought insertion, thought withdrawal, thought broadcasting or command hallucinations.

- Not concerned about self or other(s) following or not following an 'authority' such as 'God, or another 'higher power' or supernatural being, or the police or special agency'.
- Possibly concerned about self or other(s) following or not following an 'authority' such as 'God, or another 'higher power' or supernatural being, or the police or special agency'.
- Definitely concerned about self or other(s) following or not following an 'authority' such as 'God, or another 'higher power' or supernatural being, or the police or special agency'.

Note: If **NEITHER** current concern **OR** a previous concern is present move to the 'Purity-disgust' domain. If no current concern but there was a previous concern continue to administer all items as required. If no previous concern but there is a current concern administer the current items only for this domain.

Currently	0	1	2
Previously	0	1	2
Previous concern now	0	1	2

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B: Preoccupation currently.

Q: How much are you thinking about yourself or others following or not following what you consider to be 'authority' like 'God, or another 'higher power' or a supernatural being, or the police or special agency'? For example, are you thinking these thoughts for several hours a day? What does thinking like this do to you? How does it affect you?

PROMPT: If YES to any question, tell me about this.

B: Preoccupation previously.

Q: At the time of your violent act (or when admitted to hospital if no violence occurred) how much were you thinking about yourself or others following or not following what you consider to be an 'authority' like 'God, or another 'higher power' such as a supernatural being or the police or special agency'? Again, for example, where you thinking these thoughts for several hours a day? What did thinking like that do to you? How did it affect you? Are you still preoccupied by these thoughts today?

PROMPT: If YES to any question, tell me about this.

- Not currently or previously preoccupied with thoughts concerning self or other(s) following or not following an 'authority' such as 'God or another 'higher power' such as a supernatural being or the police or special agency'. The thoughts occur or occurred occasionally perhaps only once or twice a week, and they only last for brief periods.
- 1 Clearly currently or previously preoccupied. Thoughts concerning self or other(s) following or not following an 'authority' such as 'God or another 'higher power' such as a supernatural being or the police or special agency' occur almost every day and the person ruminates about these themes.
- 2 Clearly currently or previously preoccupied. Thoughts concerning self or other(s) following or not following an 'authority' such as 'God or another 'higher power' such as a supernatural being or the police or special agency' occur or occurred almost every day <u>AND</u> are accompanied by functional impairment e.g. concentration problems i.e. always at the back of mind, difficulty sleeping, or distress. Interpersonal relationships or work may also be affected.

Current concern	0	1	2
Previous concern	0	1	2
Previous concern now	0	1	2

C: Affects or states currently, proximal to specific moral domain.

Q: When you are thinking about yourself or others following or not following what you consider to be an 'authority' how does it make you feel?

Does it make you feel?

- sad or depressed?
- happy or excited?
- angry or hostile?
- fearful or anxious?
- disgust with self i.e. guilt or disgust towards others?
- surprised or confused, disoriented or perplexed state?

What was your main feeling? What did feeling like that do to you? How do substances like alcohol or drugs affect how you feel about yourself or others following or not following what you consider to be an 'authority'

PROMPT: If YES to any question, tell me about this.

Note: for current concerns use the person's appearance, collateral, in addition to their self-report.

C: Affects or states previously, proximal to violent act (or admission) and to specific moral domain.

Q: When you were thinking about yourself or others following or not following what you consider to be an 'authority' such as 'God or another 'higher power' such as a supernatural being or the police or special agency' at the time of your violent act or (when admitted to hospital if no violence occurred) how did it make you feel (See specific prompts above)? What was your main feeling? What did feeling like that do to you? Where you taking any alcohol or drugs at the time? Do you still feel like this now?

PROMPT: If YES to any question, tell me about this.

Note: for previous concerns use collateral information in addition to the persons self-report to infer their affect or state.

- It is <u>NOT</u> possible to identify an affect or mental state associated with thoughts of self or other(s) following or not following an 'authority' such as 'God or another 'higher power' such as a supernatural being or the police or special agency' or no affect appears to be present <u>OR</u> following 'authority' is not a current or previous concern.
- An affect or state is clearly present or evident regarding a current or previous concern involving self or other(s) following or not following an 'authority' such as 'God or another 'higher power' such as a supernatural being or the police or special agency'.
- 2 An affect or state is clearly present regarding a current or previous concern involving other(s) following or not following an 'authority' such as 'God or another 'higher power' such as a supernatural being or the police or special agency' AND is accompanied with functional impairment e.g. concentration problems i.e. always at the back of mind, difficulty sleeping, or distress, interpersonal relationships or work may also be affected.

	Alcohol or drug use	Main affect-state			
Current concern	Substance problems Yes/No		0	1	2
Previous concern	Intoxicated Yes/No		0	1	2
Previous concern now					

A: Current moral judgment for specific current concern.

Q: Do you think your current concerns involving obedience to what you consider to be an 'authority' (for example, 'God or another 'higher power' such as a supernatural being or the police or special agency') are 'right' or moral? In other words, given your specific concerns do you think that moral people should be 'obedient'?

PROMPT: IF YES or NO tell me why you believe that?

A: Previous moral judgment for specific previous concern.

Q: Do you think the thoughts you were having about obedience to what you consider to be an 'authority' (for example, 'God or another 'higher power' such as a supernatural being or the police or special agency') were 'right' or moral? In other words, given your specific concerns, do you think moral people should be 'obedient'? Do you still think that way now about the specific thoughts you were having i.e. if back in that exact situation.

PROMPT: IF YES or NO tell me why you believe that?

- Does not believe that **THEIR** concerns about following or not following an authority like 'God or another 'higher power' such as a supernatural being or the police or special agency' or 'obedience' is a moral issue **OR** this is not a current or previous concern.
- Possibly or partially believes that <u>THEIR</u> concerns about following or not following an authority like 'God or another 'higher power' such as a supernatural being or the police or special agency' or 'obedience' is a moral issue <u>BUT</u> relies on authority namely the law as a justification of this belief.
- 2 Recognises that <u>THEIR</u> concerns about following or not following an authority like 'God or another 'higher power' such as a supernatural being or the police or special agency' or 'obedience' is a moral <u>AND</u> can justify this belief with abstract reasoning.

Current concern	0	1	2
Previous concern	0	1	2
Previous concern now	0	1	2

B: Universality of current concern.

Q: Regarding your current thoughts involving following or not following what you consider to be an 'authority' such as 'God or another 'higher power' such as a supernatural being or the police or special agency'; do you think that you that it is 'right' or moral to 'obey' what you consider to be an 'authority' even if it's against the law, or local customs, or rules? (For example, the laws governing this country, or the rules or policies within this hospital).

PROMPT: IF YES to any question, tell me why you believe that.

Note: Universal means that the moral foundation applies regardless of other rules or values.

B: Universality of previous concern.

Q: Regarding your previous thoughts involving yourself or others involving following or not following what you consider to be an 'authority' such as 'God or another 'higher power' such as a supernatural being or the police or special agency' at the time of your violent act (or when admitted to hospital if no violence occurred); did you think that it was 'right' or moral to obey an 'authority' even though it was against the law, or local customs or rules? Do you still think this way now about the specific thoughts you were having i.e. if back in that exact situation.

PROMPT: IF YES, to any question tell me why you believed that.

PROMPT: Rate current attitude to the 'Universality' of the previous concern and score under current concern.

- Does not believe that <u>THEIR</u> concerns about following an 'authority' such as 'God or another 'higher power' such as a supernatural being or the police or special agency' is a universal moral rule independent of laws, local customs or rules <u>OR</u> 'obedience' is not a current or previous concern.
- 1 Possibly or partially believes that <u>THEIR</u> concerns about following an 'authority' such as 'God or another 'higher power' such as a supernatural being or the police or special agency' is a universal moral rule independent of laws, local customs or rules. The interviewee may be undecided <u>OR</u> it is clear that they have not given the issue much thought.
- 2 Definitely believes that THEIR concerns about following an 'authority' such as 'God or another 'higher power' such as a supernatural being or the police or special agency' is a universal moral rule independent of laws, local customs or rules.

Current concern	0	1	2
Previous concern	0	1	2
Previous concern now	0	1	2

A: Current concerns actionability despite negative consequences for the self.

Q: Do you feel compelled to act to follow or make others follow what you consider to be an 'authority' such as 'God or another 'higher power such as a supernatural being or the police or special agency' (or make others follow an 'authority')? Even if this may cause negative consequences for you? Is your need to act solely because you want to follow 'authority'?

PROMPT: IF YES to any question, tell me why you believe this.

A: Previous actionability despite negative consequences for the self.

Q: At the time of the violent act or (when admitted to hospital if no violence occurred) did you feel compelled to act to follow or make others follow what you consider to be an 'authority' such as 'God or another 'higher power' such as a supernatural being or the police or special agency' (or make others follow an 'authority')? Even knowing that it could cause negative consequences for you? Is your need to act solely because you want to follow 'authority'? Would you still be compelled to act to follow what you consider to be an authority' now despite negative consequences?

PROMPT: IF YES, tell me about this?

Please note if the person considers negative consequences for self and what they are?

Supplemental item not to be summated with the other items

0 = No consequences considered.

1 = Evidence of some consequences considered (bounded rationality) as inferred by planning or self-report. Planning by definition means they considered outcomes e.g. use of weapon.

2 = Evidence of consequences clearly considered.

- Ones not believe that following an 'authority' or making other(s) follow an authority such as 'God or another 'higher power' such as a supernatural being or the police or special agency' is actionable/ compelling regarding current or previous concern OR is not concerned about following authority currently or previously.
- Possibly believes they would be compelled (or were compelled) to follow an 'authority' or making other(s) follow an authority such as 'God or another 'higher power' such as a supernatural being or the police or special agency' BUT only if this did not cause important negative consequence for the self-regarding current or previous concern.
- 2 Definitely believes that they would be compelled (or were compelled) to follow an 'authority' or making other(s) follow an authority such as 'God or another 'higher power' such as a supernatural being or the police or special agency'; <u>EVEN</u> if this caused important negative consequence for the self-regarding current or previous concern <u>OR</u> does not consider important negative consequences for the self-regarding current or previous concern.

Currently	0	1	2
Previously	0	1	2
Previous concern now	0	1	2

B: Current concerns actionability due to negative consequences for the self.

Q: If you don't act to follow or make others follow what you consider to be an 'authority' such as 'God or another 'higher power' such as a supernatural being or the police or special agency'? will there be negative consequences for you (NB do not rate others)? Would something bad happen to you or others if you did not act? Did you see any alternatives to acting? Do you still feel compelled to act?

PROMPT: IF YES, tell me about this.

B: Previous actionability due to negative consequences for the self.

Q: Regarding your previous concern involving following or making others follow what you consider to be an 'authority' at the time of your violent act or (when admitted to hospital if no violence occurred) were you concerned that there would be negative consequences for you if you didn't act? Would something bad happen to you or if you did not act? Did you see any alternatives to acting? Do you still feel compelled to act for fear of negative consequences? Are those restraints on your behaviour still in place now?

PROMPT: IF YES to any question, tell me about this.

- O Does not believe that would be negative consequences for themselves for failing to act and follow or making other(s) follow an 'authority' such as 'God, or another 'higher power' such as a supernatural being or the police or special agency' regarding their current or previous concern **OR** following an 'authority' is not a current or previous concern.
- Believes there would be negative consequences for themselves if they did not act and follow or making other(s) follow an 'authority' such as 'God, or another 'higher power' such as a supernatural being or the police or special agency' **BUT** can see alternatives to acting to reduce or prevent these consequences.
- Definitely believes that there would be negative consequences for not following or making other(s) follow an 'authority' such as God, or another 'higher power' such as a supernatural being or the police or special agency' **AND** cannot see alternatives to acting to reduce or prevent these consequences regarding the current or previous concern.

Currently	0	1	2
Previously	0	1	2
Previous concern now	0	1	2

C: **Current concern capacity to act.** A person may want to act even if doing so incurs negative consequences **BUT** may not be capable of acting due to external circumstances or constraints. For example, they may be in seclusion, or under special observation, or in the case of psychosis the entity causing suffering may not be personified. Internal impediments to acting may include a lack of certainly about whether it was the 'right thing' to do, or guilt, or shame. External impediments may involve having no opportunity to act or lack of a clear target. External impediments do not include a negative consequence which is covered elsewhere.

Q: Are you capable of acting on the basis of your current concern regarding following or making others follow what you consider to be an 'authority' such as 'God, or another 'higher power' such as a supernatural being, or the police or special agency'? What's preventing you from acting? Are there circumstances, which are preventing you from acting? Will you be able to overcomes these obstacles? i.e. awareness of steps to avoid detection-evidence of forensic sophistication.

PROMPT: If YES to any question, tell me about this.

C: Previous capacity to act.

Q: At the time of your violent act (or when admitted to hospital if no violence occurred) did anything get in the way of you achieving what you wanted to achieve when following or making others follow what you consider to be an 'authority' like 'God, or another 'higher power' such as a supernatural being or the police or special agency'? Would you have acted earlier? Were you trying to injure or kill? Are those restraints on your behaviour still in place now?

PROMPT: If YES to any question tell me about this.

- O Does not believe that they would be compelled to follow or make other(s) follow an 'authority' such as 'God, or another 'higher power' such as a supernatural being or the police or special agency' regarding current or previous concern **OR** there are clear external or internal impediments regarding current or previous concern which could **NOT** be surmounted **OR** following 'authority' is not a current or previous concern.
- 1 Possibly would have acted earlier or differently to follow or make other(s) follow an 'authority' such as 'God, or another 'higher power' such as a supernatural being or the police or special agency', **OR** would like to act but in part is restrained or was restrained by internal **OR** some external impediments regarding their current or previous concern
- Definitely believes that they would be compelled to act to follow or make other(s) follow an 'authority' such as God, or another 'higher power' such as a supernatural being or the police or special agency <u>AND</u> There are/were no external or internal impediments <u>OR</u> there are/were external impediments which could easily be surmounted by the interviewee regarding their current or previous concern.

Currently	0	1	2
Previously	0	1	2
Previous concern now	0	1	2

A: Punishability: social support regarding current concern. Attitude towards punishment for those who don't follow what you consider to be an 'authority' within family, friends, neighbourhood or wider social network.

Q: What would your friends, family, or communities attitude be those who don't follow what you consider to be an 'authority' like 'God, or another 'higher power' such as a supernatural being or the police or special agency' you are currently concerned about? Do you think they would hold the view that the person(s) not following what you consider to be an 'authority' should be punished? Do you know people who think it would be appropriate to use physical force (violence) against those who don't follow 'authority' like you have been talking about?

PROMPT: If YES to any question tell me about this.

B: Punishability: social support regarding previous concern.

Q: What would your friends, family, or communities attitude be towards those that don't follow what you consider to be an 'authority' like 'God, or another 'higher power' such as a supernatural being or the police or special agency' you were previously concerned about associated with your violent act (or when admitted to hospital if no violence occurred)? Do you think they would hold the view that person(s) not following what you consider to be an 'authority' should be punished? Do you know people who think it would be appropriate to use physical force (violence) against those who don't follow 'authority' like the kind you were concerned about? Are you still in contact with these people?

PROMPT: If YES, tell me about this.

- Individuals within the person's family, friends, neighbourhood or wider social network do not believe failure to follow an 'authority' like 'God, or another 'higher power' such as a supernatural being or the police or special agency' is punishable regarding the current or previous concern **OR** is not currently or previously concerned about following or making other(s) follow authority currently or previously.
- Individuals within the person's family, friends, neighbourhood or wider social network believe failure to follow an 'authority' like 'God, or another 'higher power' such as a supernatural being or the police or special agency' is punishable regarding the current or previous concern.
- Individuals within the person's family, friends, neighbourhood definitely believes that failure to follow an 'authority' like 'God, or another 'higher power' such as a supernatural being or the police or special agency' is punishable and that it is it is appropriate to use violence as a punishment for the current or previous concern.

Currently	0	1	2
Previously	0	1	2
Previous concern now	0	1	2

B: Personal attitude towards punishment regarding current concern.

Q: Do you think that individuals who don't follow what you consider to be an 'authority' like 'God, or another 'higher power' such as a supernatural being or the police or special agency' who like what you are concerned about (or previously concerned about) deserve to be punished? Do you think that sometimes it is appropriate to use physical (violence) against those who don't follow what you consider to be an 'authority'? Even as a last resort?

B: Personal attitude towards punishment regarding previous concern.

Q: At the time of the violent act (or when admitted to hospital if no violence occurred) did you think that individuals who don't follow what you consider to be an 'authority' like 'God, or another 'higher power' such as a supernatural being or the police or special agency' deserve to be punished? Did you think that sometimes it is appropriate to use physical force (violence) against those who don't follow what you consider to be an 'authority'? Even as a last resort? Do you still think this way now?

PROMPT: IF YES, to any question tell me about this?

- O Does not believe do not believe failure to follow an 'authority' like 'God, or another 'higher power' such as a supernatural being or the police or special agency is punishable' regarding the current or previous concern. **OR** is not currently or previously concerned about following or making other(s) follow authority currently or previously.
- Believes that failure to follow an 'authority' like 'God, or another 'higher power' such as a supernatural being or the police or special agency' is punishable regarding the current or previous concern.
- 2 Believes that it is appropriate to use violence as a punishment for failure to follow an 'authority' like 'God, or another 'higher power' such as a supernatural being or the police or special agency' regarding the current or previous concern.

Currently	0	1	2
Previously	0	1	2
Previous concern now	0	1	2

Purity.

Item 1

A: Presence currently.

Q: Are you currently concerned about something or someone being 'impure or unclean' (including self). Are you worried about others engaging in 'disgusting' behaviour? or are you concerned about contamination?

PROMPT: IF YES to any question, tell me about this.

A: Previously concerned.

Q: At the time of your violent act (or when admitted to hospital if no violence occurred) were you concerned about something or someone being 'impure or unclean' (including self)? Again, were you worried about others who engaging in 'disgusting' behavior? or were you concerned about contamination? Are you still concerned about this now?

PROMPT: IF YES to any question, tell me about this.

Note: This item assesses presence **NOT** the degree of preoccupation. Thoughts concerning reducing 'impure, unclear or disgusting' behaviour may occur spontaneously in response to an event without any previous preoccupation.

Note: Various psychotic phenomena may be related to the moral dimension of Purity-sanctity'. For example, somatic delusions, nihilistic delusions, critical auditory hallucinations or olfactory hallucinations.

- 0 Not concerned about self or other(s) being 'impure, unclean or disgusting' currently or previously.
- 1 Possibly concerned about self or other(s) being 'impure, unclean or disgusting' currently or previously.
- 2 Definitely concerned about self or other(s) being 'impure, unclean or disgusting' currently or previously.

Note: If **NEITHER** current concern **OR** a previous concern is present move to the 'Egoistic-immoral' domain. If no current concern but there was a previous concern continue to administer all items as required. If no previous concern but there is a current concern administer the current items only for this domain.

Currently	0	1	2
Previously	0	1	2
Previous concern now	0	1	2

B: Preoccupation currently.

Q: How much are you thinking about yourself or other(s) being 'impure, unclean or disgusting'. For example, are you thinking these thoughts for several hours a day? What does thinking like this do to you? How does it affect you?

PROMPT: If YES to any question, tell me about this.

B: Preoccupation previously.

Q: At the time of your violent act (or when admitted to hospital if no violence occurred) how much were you thinking about yourself or other(s) being 'impure, unclean or disgusting'? Again, for example, where you thinking these thoughts for several hours a day? What did thinking like that do to you? How did it affect you? Are you still preoccupied by these thoughts today?

PROMPT: If YES to any question, tell me about this.

- Not currently or previously preoccupied with thoughts concerning self or other(s) being 'impure, unclean, or disgusting' The thoughts occur or occurred occasionally perhaps only once or twice a week, and they only last for brief periods.
- 1 Clearly currently or previously preoccupied. Thoughts concerning self or other(s) being 'impure, unclean, or disgusting' occur or occurred almost every day and the person ruminates about these themes.
- 2 Clearly currently or previously preoccupied. Thoughts concerning self or other(s) being 'impure, unclean, or disgusting' occur or occurred almost every day <u>AND</u> are accompanied by functional impairment e.g. concentration problems i.e. always at the back of mind, difficulty sleeping, or distress. Interpersonal relationships or work may also be affected.

Current concern	0	1	2
Previous concern	0	1	2
Previous concern now	0	1	2

C: Affects or states currently, proximal to specific moral domain.

Q: When you are thinking about yourself or other(s) being 'impure, unclean, or disgusting' how does it make you feel?

Does it make you feel?

- sad or depressed?
- happy or excited?
- angry or hostile?
- fearful or anxious?
- disgust with self-i.e. guilt or disgust towards others?
- surprised or confused, disoriented or perplexed state?

What was your main feeling? What did feeling like that do to you? How do substances like alcohol or drugs affect how you feel about others being 'impure, unclean or disgusting'?

PROMPT: If YES to any question, tell me about this.

Note: for current concerns use the person's appearance, collateral, in addition to their self-report to infer their affect or state associated with thoughts concerning self or other(s) being 'impure, unclean, or disgusting'.

C: Affects or states previously, proximal to violent act (or admission) and to specific moral domain.

Q: When you were thinking about yourself or others being 'impure, unclean, or disgusting' at the time of your violent act or (when admitted to hospital if no violence occurred) how did it make you feel <u>(See specific prompts above)</u>? What was your main feeling? What did feeling like that do to you? Where you taking any alcohol or drugs at the time? Do you still feel like this now?

PROMPT: If YES to any question, tell me about this.

Note: for previous concerns use collateral information in addition to the persons self-report to infer their affect or state.

- 1 It is <u>NOT</u> possible to identify an affect or mental state associated with thoughts of self or other(s) being 'impure, unclean, or disgusting' or no affect appears to be present <u>OR</u> 'impure, unclean, or disgusting' behaviour in not a current or previous concern.
- 1 An affect or state is clearly present or evident regarding a current or previous concern involving self or other(s) being 'impure, unclean, or disgusting'.
- An affect or state is clearly present regarding a current or previous concern involving other(s) being 'impure, unclean, or disgusting' **AND** is accompanied with functional impairment e.g. concentration problems i.e. always at the back of mind, difficulty sleeping, or distress, interpersonal relationships or work may also be affected.

	Alcohol or drug use	Main affect-state			
Current concern	Substance problems Yes/No		0	1	2
Previous concern	Intoxicated Yes/No		0	1	2
Previous concern now			0	1	2

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A:. Current moral judgment for specific current concern.

Q: Do you think your current concerns involving yourself or other(s) being 'impure, unclean, or disgusting' are 'right' or 'moral'? In other words, given your specific concerns do you think that moral people should be concerned about 'purity'?

PROMPT: IF YES or NO tell me why you believe that?

A: Previous moral judgment for specific previous concern.

Q: Do you think the thought you were having about yourself or other(s) being 'impure, unclean, or disgusting' at the time of your violent act (or when admitted to hospital if no violence occurred) were 'right' or moral? In other words, given your specific concerns did you think that moral people should be concerned about 'purity'? Do you still think this way about the specific thoughts you were having i.e. if back in that exact situation?

PROMPT: IF YES or NO tell me why you believe that?

- O Does not believe that **THEIR** concerns about themselves or other(s) being 'impure, unclean, or disgusting' or 'purity' is a moral issue **OR** this is not a current or previous concern.
- Possibly or partially believes that <u>THEIR</u> concerns about themselves or other(s) being 'impure, unclean, or disgusting' or 'purity' as applied to a current or previous concern is a moral issue <u>BUT</u> relies on authority namely the law as a justification of this belief.
- 2 Recognises that **THEIR** concerns about themselves or other(s) being 'impure, unclean, or disgusting' or 'purity' as applied to a current or previous concern is a moral issue **AND** can justify this belief with abstract reasoning.

Current concern	0	1	2
Previous concern	0	1	2
Previous concern now	0	1	2

B: Universality of current concern.

Q: Regarding your current thoughts involving self or other(s) being 'impure, unclean, or dusting' or 'purity'; do you think that some actions are so 'impure, unclean, or disgusting' that they are 'wrong' regardless of the law local customs or rules? (For example, the laws governing this country, or the rules or policies within this hospital)

PROMPT: IF YES to any question, tell me why you believe that.

Note: Universal means that the moral foundation applies regardless of other rules or values.

B: Universality of previous concern.

Q: Regarding your previous thoughts involving yourself or other(s) being 'impure, unclean, or disgusting' or 'purity' at the time of your violent act (or when admitted to hospital if no violence occurred); did you think that some actions which are 'impure or disgusting' are 'wrong' regardless of the law, or local customs or rules? (For example, the laws governing this country, or the rules or policies within this hospital). Do you still think this way now about the specific thoughts you were having i.e. if back in that exact situation?

PROMPT: IF YES, to any question tell me why you believed that.

- O Does not believe that **THEIR** concerns about themselves or others being 'impure, unclean, or disgusting' or 'purity' is categorised under a universal moral rule independent of laws, local customs or rules **OR** the self or other(s) being 'impure or disgusting' is not a current or previous concern.
- Possibly or partially believes that <u>THEIR</u> concerns about themselves or other(s) being 'impure, unclean, or disgusting' or 'purity' is categorised under a universal moral rule independent of laws, local customs or rules. The interviewee may be undecided <u>OR</u> it is clear that they have not given the issue much thought.
- Definitely believes that **THEIR** concerns about themselves or other(s) being 'impure, unclean, or disgusting' or 'purity' is categorised under a universal moral rule independent of laws, local customs or rules.

Current concern	0	1	2
Previous concern	0	1	2
Previous concern now	0	1	2

A: Current concerns actionability despite negative consequences for the self.

Q: Do you feel compelled to 'act' to reduce 'impure, unclean, or disgusting' behaviour? even if this may cause negative consequences for you (like getting into trouble with the law)? Is your need to act solely because you want to reduce 'impure or disgusting' behaviour?

PROMPT: IF YES to any question, tell me why you believe this.

A: Previous actionability despite negative consequences for the self.

Q: At the time of the violent act or (when admitted to hospital if no violence occurred) did you feel compelled to 'act' to reduce 'impure, unclean, or disgusting' behaviour? Even knowing that it could cause negative consequences for you? Is your need to act solely because you want to reduce 'impure, unclean, or disgusting' behaviour? Would you still be compelled to act to reduce 'impure, unclean, or disgusting' behaviour now despite negative consequences?

PROMPT: IF Yes, tell me about this?

Please note if the person considers negative consequences for self and what they are?

Supplemental item not to be summated with the other items

0 = No consequences considered.

1 = Evidence of some consequences considered (bounded rationality) as inferred by planning or self-report. Planning by definition means they considered outcomes e.g. use of weapon.

2 = Evidence of consequences clearly considered.

- O Does not believe that the reduction of 'impure, unclean, or disgusting' behaviour is actionable/ compelling regarding current or previous concern **OR** is not concerned about 'impure or disgusting' behaviour currently or previously.
- 1 Possibly believes they would be compelled (or were compelled) to act to reduce 'impure, unclean, or disgusting' behaviour <u>BUT</u> only if this did not cause negative consequence for the self-regarding current or previous concern.
- Definitely believes that they would be compelled (or were compelled) to act to reduce 'impure, unclean, or disgusting' behaviour; **EVEN** if this caused important negative consequence for the self-regarding current or previous concern **OR** does not consider important negative consequences for the self regarding current or previous concern.

Currently	0	1	2
Previously	0	1	2
Previous concern now	0	1	2

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B: Current concerns actionability due to negative consequences for the self.

Q: If you don't act due to your current about 'impure, unclean, or disgusting' behaviour will there be negative consequences for you (NB do not rate others)? Would something bad happen to you if you did not act? Do you see any alternative to acting?

PROMPT: IF YES, to any question tell me about this.

B: Previous actionability due to negative consequences for the self.

Q: Regarding your previous concern involving 'impure, unclean, or disgusting' behaviour at the time of your violent act or (when admitted to hospital if no violence occurred) were you concerned that there would be negative consequences for you if you didn't act (NB do not rate others)? Did you see any alternative to acting? Do you still feel compelled to act for fear of negative consequences?

PROMPT: IF YES to any question, tell me about this.

- Does not believe that there would be negative consequences for themselves for failing to act to reduce 'impure, unclean, or disgusting' behaviour regarding the current or previous concern **OR** 'impure, unclean, or disgusting' behaviour is not a current of previous concern.
- Believes there would be negative consequences for themselves if they did not act to reduce 'impure, unclean, or disgusting behaviour' regarding current or previous concern **BUT** can see alternative to acting to reduce of prevent these consequences.
- Definitely believes that there would be negative consequences for themselves if they did not act to reduce 'impure, unclean, or disgusting' behaviour <u>AND</u> cannot see any alternative to acting to reduce or prevent these consequences regarding the current or previous concern.

Currently	0	1	2
Previously	0	1	2
Previous concern now	0	1	2

C: Current concerns capacity to act. A person may want to act even if doing so incurs negative consequences <u>BUT</u> may not be capable of acting due to external circumstances or constraints. For example, they may be in seclusion, or under special observation, or in the case of psychosis the entity causing suffering may not be personified. Internal impediments to acting may include a lack of certainly about whether it was the 'right thing' to do, or guilt, or shame. External impediments may involve having no opportunity to act or lack of a clear target. External impediments do not include a negative consequence which is covered elsewhere.

Q: Are you capable of acting on the basis of your current concern of reducing 'impure of disgusting' behaviour? What's preventing you from acting? Will you be able to overcomes these obstacles? i.e. awareness of steps to avoid detection-evidence of forensic sophistication.

PROMPT: If YES to any question, tell me about this.

C: Previous capacity to act.

Q: At the time of your violent act (or when admitted to hospital if no violence occurred) did anything get in the way of you achieving what you wanted to achieve in reducing 'impure, unclean or disgusting' behaviour. Would you have acted earlier? Were you trying to injure or kill? Are those restraints on your behaviour still in place now?

PROMPT: If YES to any question tell me about this.

- Does not believe that the reduction of 'impure, unclean, or disgusting' behaviour is actionable/ compelling regarding current or previous concern **OR** there are clear external or internal impediments regarding current or previous concern which could **NOT** be surmounted **OR** the reduction of 'impure, unclean, or disgusting' behaviour is not a current or previous concern.
- Possibly would have acted earlier or differently to reduce 'impure, unclean, or disgusting' behaviour, or would like to act but in part is restrained or was restrained by internal **OR** some external impediments regarding their current or previous concern
- 2 Definitely believes that they would be (or were) compelled to act to reduce 'impure, unclean, or disgusting' behaviour AND There are/were no external impediments OR there are/were external impediments which could easily be surmounted by the interviewee regarding their current or previous concern.

Currently	0	1	2
Previously	0	1	2
Previous concern now	0	1	2

A: Punishability: social support regarding current concern. attitude towards punishment for those who are 'impure, unclean, or disgusting' within family, friends, neighbourhood or wider social network.

Q: What would your friends, family, or communities attitude be towards the 'impure, unclean, or disgusting' behaviour you are currently concerned about? Do you think they would hold the view that the person(s) causing it should be punished? Do you know people who think it would be appropriate to use physical force (violence) against those who carry out 'impure, unclean, or disgusting' behaviour like you have been talking about?

PROMPT: If YES to any question, tell me about this.

B: Punishability: social support regarding previous concern.

Q: What would your friends, family, or communities attitude be towards the 'impure, unclean, or disgusting behaviour' you were previously concerned about associated with your violent act (or when admitted to hospital if no violence occurred)? Do you think they would hold the view that person(s) causing it should be punished? Do you know people who think it would be appropriate to use physical force (violence) against those who carry out 'impure, unclean, or disgusting behaviour' like the kind you were concerned about? Are you still in contact with these people?

PROMPT: If YES, to any question tell me about this.

- Individuals within the person's family, friends, neighbourhood or wider social network do not believe 'impure, unclean, or disgusting behaviour' is punishable regarding the current or previous concern. **OR** the reduction of 'impure, unclean, or disgusting' behaviour is not a current or previous concern.
- Individuals within the person's family, friends, neighbourhood or wider social network do believe 'impure, unclean, or disgusting behaviour' is punishable regarding the current or previous concern.
- 2 Individuals within the person's family, friends, neighbourhood definitely believes that it is appropriate to use violence as a punishment for 'impure or disgusting' behaviour regarding the current or previous concern.

Currently	0	1	2
Previously	0	1	2
Previous concern now	0	1	2

B: Personal attitude towards punishment regarding current concern.

Q: Do you think that individuals who carry out 'impure, unclean, or disgusting' behaviour like what you are concerned about (or previously concerned about) deserve to be punished? Do you think that sometimes it is appropriate to use physical force (violence) against those who carry out 'impure, unclean, or disgusting' behaviour? Even as a last resort?

PROMPT: If YES to any question tell me about this.

B: Personal attitude towards punishment regarding previous concern.

Q: At the time of the violent act (or when admitted to hospital if no violence occurred) did you think that individuals who carry out 'impure, unclean, or disgusting behaviour' deserve to be punished? Did you think that sometimes it is appropriate to use physical force (violence) against those who cause 'impure, unclean, or disgusting behaviour'? Even as a last resort? Do you still think this way now?

PROMPT: IF YES, to any question tell me about this?

- Ones not believe 'impure, unclean, or disgusting' behaviour is punishable regarding the current or previous concern.
 OR the reduction of 'impure, unclean, or disgusting' behaviour is not a current or previous concern.
- Believes (or believed) that 'impure, unclean, or disgusting' behaviour is punishable regarding the current or previous concern.
- Believes (or believed) that it is appropriate to use violence as a punishment for 'impure, unclean, or disgusting' behaviour regarding the current or previous concern.

Currently	0	1	2
Previously	0	1	2
Previous concern now	0	1	2

Egoistic-immoral violence.

Item 1

A: Presence currently. Evidence that the violence was motivated to obtain either 'sex', 'money', 'power' (influence over a person), or 'dominance' or other 'self interested' exploitive goal for example 'fame'. Premediated opportunism for example actively engaging in fantasies concerning violence or sexual violence may be scored here.

Note: This item is designed to assess indifference to the welfare of others. It is important to note which forms of exploitation may be present. Item one may need to be rated primarily on the basis of collateral information. The item assesses presence **NOT** the degree of preoccupation. Violent thoughts may occur spontaneously in response to an event without any previous preoccupation. Within the MacArthur violence risk assessment study affirmative answers to the question "Do you sometimes think about hurting other people?" distinguished between delusional patients who were violent and those who were not violent at the first and second follow up evaluations (Applebaum et al. 2000). Imagined violence was also a predictor of violence within the non-delusional group during all five follow up evaluations (Applebaum et al. 2000).

Q: Many people experience violence thoughts or fantasies sometimes in relation to frustrations they are experiencing. Do you sometimes think about hurting other people? Even only for a second or two? Some people experience sexual fantasies which involve force or violence or which would be illegal to act on. Do you sometimes have sexual thoughts involving force or violence? Even only for a second or two?

PROMPT: IF YES to any question, tell me about this.

A: Previously concerned

Q: At the time of your violent act (or when admitted to hospital if no violence occurred) can you remember having thoughts about hurting people, perhaps to get what you wanted? Even only for a second or two? At the time of your violent act (or when admitted to hospital if no violence occurred) did you have any sexual thoughts involving force or violence? Or which would be illegal to act on? Even only for a second or two? Do you still have these thoughts now?

PROMPT: IF YES to any question, tell me about this.

- No experience of thoughts of hurting other(s) involving 'sex', 'money', 'power' or 'dominance' or other form of 'self-interested' violence currently or previously.
- Experiences circumscribed thoughts of hurting other(s) involving 'sex', 'money', 'power', 'dominance' or other form of 'self-interested' violence currently or previously concerning one particular victim **OR** one particular scenario. A moral (other interested) component may be present **BUT** it is a secondary consideration **OR** is likely to be a rationalisation.
- Experiences thoughts of hurting other(s) involving 'sex', 'money', 'power', or 'dominance' or other form of 'self-interested violence' currently or previously <u>BUT</u> concerning a range of victims or scenarios. A moral (other interested) component may be present <u>BUT</u> it is a secondary consideration <u>OR</u> is likely to be a rationalisation.

	Circle key themes			
Currently	Sex, Money, Dominance, Power, Other	0	1	2
Previously		0	1	2
Previous concern now		0	1	2

B: Preoccupation currently.

Q: How much are you thinking about hurting others physically or sexually? (involving violence to obtain either 'sex', 'money', 'power' (influence over a person), or 'dominance' or other 'self interested' exploitive goal) For example, are you thinking these thoughts for several hours a day? What does thinking like this do to you? How does it affect you?

PROMPT: If YES to any question, tell me about this.

B: Preoccupation previously.

Q: At the time of your violent act (or when admitted to hospital if no violence occurred) how much were you thinking about hurting others physically or sexually (involving violence to obtain either 'sex', 'money', 'power' (influence over a person), or 'dominance' or other 'self interested' exploitive goal). For example, were you thinking these thoughts for several hours a day? What did thinking like that do to you? How did it affect you? Are you still preoccupied by these thoughts today?

PROMPT: If YES to any question, tell me about this.

- Not currently or previously preoccupied with thoughts of hurting other(s) involving 'sex', 'money', 'power' or 'dominance' or other form of 'self-interested' violence.
- 1 Clearly currently or previously preoccupied with thoughts of hurting other(s) involving 'sex', 'money', 'power' or 'dominance' or other form of 'self-interested' violence, which occur almost every day and the person ruminates about these themes.
- 2 Clearly currently or previously preoccupied with thoughts of hurting other(s) involving 'sex', 'money', 'power' or 'dominance' or other form of 'self-interested' violence <u>AND</u> these thoughts are accompanied by functional impairment e.g. concentration problems i.e. always at the back of mind, difficulty sleeping, or distress. Interpersonal relationships or work may also be affected.

Current concern	0	1	2
Previous concern	0	1	2
Previous concern now	0	1	2

C: Affects or states currently, proximal to egoistic domain: For current concerns use the person's appearance, collateral, in addition to their self-report to infer their affect or state associated with thoughts concerning suffering or others being harmed. For previous concerns use collateral information in addition to the persons self-report to infer their affect or state.

Q: When you are thinking about hurting others (for sex, money, power, dominance or other form of self-interested violence) how does it make you feel? Would you feel good about the other person being upset or harmed by what happened, even if only for a second or two?

Does it make you feel?

- sad or depressed?
- happy or excited?
- angry or hostile?
- fearful or anxious?
- disgust with self-i.e. guilt or disgust towards others?
- surprised or confused, disoriented or perplexed state?

What was your main feeling? What did feeling like that do to you? How do substances like alcohol or drugs affect how you feel about hurting others?

PROMPT: IF YES to any question, tell me about this.

C: Affects or states previously, proximal to violent act (or admission) and to egoistic domain.

Q: When you were thinking about hurting people (for sex, money, power, dominance or other form of self interested violence) at the time of your violent act or (when admitted to hospital if no violence occurred) how did it make you feel (See specific prompts above)? What was your main feeling? What did feeling like that do to you? Where you taking any alcohol or drugs at the time? Would you feel good about the other person being upset or harmed by what happened, even if only for a second or two? Do you still feel like this now?

Prompt: IF YES to any question, tell me about this.

- It is <u>NOT</u> possible to identify an affect or mental state associated with hurting other(s), concerning 'sex', 'money', 'power', 'dominance' other form of 'self-interested' violence OR no affect appears to be present.
- An affect or state is clearly present or evident regarding current or previous thought(s) about hurting others, concerning 'sex', 'money', 'power', 'dominance' or other form of 'self interested' violence.
- An affect or state is clearly present regarding current or previous thoughts about hurting other(s), concerning 'sex', 'money', 'power', 'dominance' or other form of 'self interested' violence **AND** is accompanied with functional impairment e.g. concentration problems i.e. always at the back of mind, difficulty sleeping or distress, interpersonal relationships or work may also be affected.

	Alcohol or drug use	Main affect-			
		state			
Current concern	Substance problems Yes/No		0	1	2
Previous concern	Intoxicated Yes/No		0	1	2
Previous concern now			0	1	2

A: Current moral judgment for specific current concern

Q: Do you think your current thoughts about harming other(s) (for sex, money, power, dominance or other form of self-interested violence) are 'wrong' or immoral? In other words, given your specific concern do you think that moral people should exploit others for their own gain?

PROMPT: IF YES or NO tell me why you believe that?

A: Previous moral judgment for specific previous concern.

Q: Do you think the thoughts about harming other(s) at the time of your violent act (or when admitted to hospital if no violence occurred) were wrong or immoral? In other words, given your specific concerns, did you think moral people should exploit others? Do you still think this way not about the specific thoughts you were having? i.e. if back in that exact situation?

PROMPT: IF YES or NO give me some reasons why you believe that?

- Recognises that hurting others for 'sex', 'money', 'power', 'dominance' or other form of 'self-interested' violence regarding their current or previous concern is wrong or immoral <u>AND</u> can justify this belief with abstract reasoning, <u>OR</u> is not having thoughts of this kind currently or previously.
- 1 Recognises that hurting others for 'sex', 'money', 'power', 'dominance' or other form of self-interested violence is wrong or immoral regarding their current or previous concern **BUT** relies on authority namely the law as justification for this belief.
- 2 Does not recognises that hurting others for 'sex', 'money', 'power', 'dominance' or other form of 'self-interested' violence regarding their current or previous concern is wrong or immoral regarding their current or previous concern.

Current concern	0	1	2
Previous concern	0	1	2
Previous concern now	0	1	2

B: Universality: generalised justification or rationalisation of current concern.

Q: Regarding your current thoughts about harming other(s) (for sex, money, power, dominance or other form of self interested violence) what are your reasons for thinking this way? Do you think that morality is a fiction designed to control people? Do you feel justified or entitled to think this way? Do you think that a person can legitimately harm others (for sex, money, power, dominance or other form of self interested violence) regardless of laws, local customs, and rules?

PROMPT: IF YES to any question, tell me why you believe that.

B: Universality: generalised justification or rationalisation of previous concern.

Q: Regarding your previous thoughts about harming other(s) (for sex, money, power, dominance or other form of self interested violence) at the time of your violent act or (when admitted to hospital if no actual violence occurs) what were your reasons for thinking this way? Do you think that morality is a fiction designed to control people? Did you feel justified or entitled to think this way? Do you still think like this today about the specific thoughts you were having i.e. if back in that exact situation?

PROMPT: IF YES to any question, tell me why you believed that.

- Recognises <u>AND</u> holds the attitude that hurting other(s) for 'sex', 'money', 'power', 'dominance' or other form of 'self-interested' violence is immoral <u>AND</u> does not offer any justifications or rationalisations currently or previously <u>OR</u> this is not a current or previous concern.
- 1 Recognises that hurting other(s) for 'sex', 'money', 'power', 'dominance' or other form of 'self-interested' violence is immoral <u>BUT</u> offers justifications or rationalisations currently or previously, possibly for the benefit of themselves (to maintain a positive self-image) as well as the interviewer.
- Adopts a 'universal' amoral attitude independent of laws, local customs, or rules, to hurting other(s) for 'sex', 'money', 'power', 'dominance' or other form of 'self-interested' violence. The person appears to lack a moral sense concerning what is 'right' or 'wrong', currently or previously in the most generalisable sense i.e. beyond their previous or current concern **OR** the justifications or rationalisations that are present appear to be for the benefit of the interviewer.

Current concern	0	1	2
Previous concern	0	1	2
Previous concern now	0	1	2

A: Current concerns actionability despite negative consequences for the self.

Q: Do you feel compelled to 'act' to hurt other(s) (for sex, money, power, dominance or other form of self-interested violence)? Have you considered any potential negative consequences for yourself? Would you act even if this may cause negative consequences for you? Do you see any other alternative to acting? Is your need to act solely because you want to hurt others?

PROMPT: IF YES to any question, tell me why you believe this.

A: Previous actionability despite negative consequences for the self.

Q: At the time of the violent act or (when admitted to hospital if no violence occurred) did you feel compelled to 'act' to hurt other(s) (for sex, money, power, dominance or other form of self interested violence)? Did you consider negative consequences for yourself? Did you see any other alternative to acting? Would you still be compelled to act to hurt others despite negative consequences?

PROMPT: IF YES to any question, tell me about this?

Please note if the person considers negative consequences for self and what they are?

Supplemental item not to be summated with the other items

0 =No consequences considered.

1 = Evidence of some consequences considered (bounded rationality) as inferred by planning or self-report. Planning by definition means they considered outcomes e.g. use of weapon.

2 = Evidence of consequences clearly considered.

- O Does not believe that hurting others for 'sex', 'money', 'power', 'dominance' or other form of 'self-interested' violence is actionable/ compelling regarding current or previous concern **OR** this is not a current or previous concern.
- Possibly believes that hurting others for 'sex', 'money', 'power', 'dominance' or other form of 'self-interested' violence is actionable/ compelling <u>BUT</u> only if this did not cause negative consequence for the self, regarding current or previous concern.
- 2 Definitely believes that hurting others for 'sex', 'money', 'power', 'dominance' or other form of 'self-interested' violence is actionable/ compelling; <u>EVEN</u> if this caused negative consequence for the self-regarding current or previous concern <u>OR</u> does not consider important negative consequences for the self regarding current or previous concern.

Currently	0	1	2
Previously	0	1	2
Previous concern now	0	1	2

B: Current actionability due to negative consequences for the self.

Q: How are you currently thinking about harming other(s) (for sex, money, power, dominance or other form of self-interested violence)? How might you go about doing this? Do you have a detailed plan? Do you see any alternative to acting?

PROMPT: IF Yes to any question, tell me about this.

B: Previous actionability due to negative consequence to the self: clearly motivated to act violently.

Q: How did you previously think about harming other(s) (for sex, money, power, dominance or other form of self-interested violence) at the time of your violent act or (when admitted to hospital if no violence occurred)? How did you think about going about doing this? Did you have a detailed plan? Did you see any alternative to acting? Do you still have thoughts about this plan?

PROMPT: IF YES to any question, tell me about this.

- 0 No evidence of planning to hurt others 'sex', 'money', 'power', 'dominance' or other form of 'self-interested' violence currently or previously.
- Evidence of planning to hurt others for 'sex', 'money', 'power', 'dominance' or other form of 'self-interested' violence

 EXISTS in the form of pre-mediated opportunism referring to exploitation of opportunities after an initial degree of pre-mediation or planning e.g. violent or sexual fantasies, regarding current or previous concern. The interviewee possibly sees alternatives to acting.
- 2 There is evidence of structured premeditation <u>OR</u> behavioural try-outs to hurt others sex', 'money', 'power', 'dominance' or other form of 'self-interested' violence referring to the person knowing exactly who their victim is and how they need to proceed to successfully execute their plan regarding current or previous concern.

Currently	0	1	2
Previously	0	1	2
Previous concern now	0	1	2

C: Current concern capacity to act: A person may want to act even if doing so incurs negative consequences <u>BUT</u> may not be capable of acting due to external circumstances or constraints. For example, they may be in seclusion, or under special observation, or in the case of psychosis the entity causing suffering may not be personified. Internal impediments to acting may include a lack of certainly about whether it was the 'right thing' to do, or guilt, or shame. External impediments may involve having no opportunity to act or lack of a clear target. External impediments do not include a negative consequence which is covered elsewhere.

Q: Are you currently capable of causing harm (for sex, money, power, dominance or other form of self-interested violence)? What's preventing you from acting? Are there circumstances, which are preventing you from acting? Will you be able to overcome these obstacles? i.e. awareness of steps to avoid detection-evidence of forensic sophistication.

PROMPT: IF YES to any question, tell me about this.

C: Previous capacity to act.

Q: At the time of your violent act (or when admitted to hospital if no violence occurred) did anything get in the way of you achieving what you wanted to achieve regarding causing harm (physical or sexual)? Where there circumstances, which prevented you, form acting? Would you have acted earlier? Were you trying to injure or kill? Are those restraints on your behaviour still in place now?

PROMPT: If YES to any question tell me about this.

- Opes not want to hurt other(s) for 'sex', 'money', 'power', 'dominance' or other form of 'self-interested' violence currently or previously <u>OR</u> there are clear external impediments regarding the current or previous concern which could <u>NOT</u> be surmounted currently or previously.
- Possibly would have acted earlier or differently to hurt other(s) for 'sex', 'money', 'power', 'dominance' or other form of 'self-interested' violence but in part is restrained or was restrained by internal <u>OR</u> some external impediments regarding their current or previous concern.
- 2 Definitely would have earlier or differently so as to hurt other(s) for 'sex', 'money', 'power', 'dominance' or other form of 'self-interested' violence <u>BUT</u> was thwarted only by robust external impediments; <u>OR</u> there are/were external impediments which could or were surmounted regarding their current or previous concern i.e. the person demonstrates the capability to overcome obstacles in the pursuit of their goal.

Currently	0	1	2
Previously	0	1	2
Previous concern now	0	1	2

A: Punishability: social support for the use of violence within the context of the current concern. Adopt the person's rationalisation as required.

Q: What would your friends, family, or communities (other patients) attitude be towards those that avoided punishment, or harmed other(s) in the context of your current concern regarding 'sex', 'money', 'power' or 'dominance' or other 'self-interested' violence? Do you think they would approve? Do you think they would be more likely to 'respect' or 'fear' you? Would this be a good thing?

PROMPT: If YES to any question, tell me about this.

B: Punishability: social support for the use of violence within the context of the previous concern.

Q: What would your friends, family, or communities (other patients) attitude be towards those that avoided punishment, or harmed other(s) in the context of your previous concern regarding 'sex', 'money', 'power' or 'dominance' or other 'self-interested' violence? Did you think they would approve? Did you think they would be more likely to 'respect' or 'fear' you? Would this be a good thing? Do you still think this now?

PROMPT: If YES to any question, tell me about this.

- Individuals within the person's family, friends, neighbourhood or wider social network do not believe it is appropriate **OR** would not 'respect' those that hurt other(s) for 'sex', 'money', 'power' 'dominance' or other forms of 'self-interested' violence **OR** this is not a current or previous concern.
- Some individuals within the person's family, friends, neighbourhood possibly believe that it is appropriate <u>OR</u> would 'respect' those that hurt other(s) for 'sex', 'money', 'power' 'dominance' or other forms of 'self-interested' violence regarding the current or previous concern.
- 2 Influential individuals within the person's family, friends, neighbourhood definitely believe that it is appropriate to hurt others **OR** would 'respect' those that hurt other(s) for 'sex', 'money', 'power' 'dominance' or other forms of 'self-interested' violence as regarding the current or previous concern.

Currently	0	1	2
Previously	0	1	2
Previous concern now	0	1	2

B: Punishability: personal pride regarding current concern. Adopt the person's rationalisation as required.

Q: Would you admire others who successfully avoided punishment for hurting people for 'sex', 'money', 'power', 'dominance' or other form of 'self-interested' violence? Would you feel pleased with yourself for successfully avoiding punishment? Even for a second or two?

PROMPT: If YES to any question, tell me about this.

B: Punishability: personal pride regarding previous concern.

Q: At the time of your violent act (or when admitted to hospital if no violence occurred) did you admire others who successfully avoided punishment for hurting people for 'sex', 'money', 'power', 'dominance' or other form of 'self-interested' violence. Did you feel pleased with yourself for hurting people for 'sex', 'money', 'power', 'dominance' or other form of 'self-interested' violence. Even for a second or two? Do you still thing or feel this way?

PROMPT: IF YES to any question, tell me about this?

- Does not admire others <u>OR</u> feel proud of oneself for avoiding punishment <u>AND/OR</u> hurting others for 'sex', 'money', 'power' 'dominance' or other forms of 'self-interested' violence regarding their current or previous concern. <u>OR</u> this is not a current or previous concern.
- Possibly admires others **OR** feels proud of oneself for avoiding punishment **AND/OR** hurting others for 'sex', 'money', 'power' 'dominance' or other forms of 'self-interested' violence regarding their current or previous concern.
- Definitely admires others **OR** feels proud of oneself for avoiding punishment **AND/OR** hurting others for 'sex', 'money', 'power' 'dominance' or other forms of 'self-interested' violence regarding their current or previous concern.

Currently	0	1	2
Previously	0	1	2
Previous concern now	0	1	2

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