



False confessions and individual differences: The importance of victimization among youth

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ABSTRACT

The principal aim of the study was to investigate the relationship between false confession during custodial interrogation and history of victimization among young persons. The participants were 10,363 students in further education in Iceland (mean age 17.6-years, range 15–24). The participants completed questionnaires relating to mental health, self-esteem, victimization, delinquency, peer delinquency, drug use, attitudes towards school, and parental support. They also reported the extent of their police involvement and if they had ever falsely confessed to police. Almost one-fifth (19.8%) of the total sample stated that they had been interrogated by the police in relation to a suspected offence, of those interrogated 8.8% (1.7% of the total sample) claimed to have made false confessions to the police. Over one-third (37.1%) reported being wrongfully convicted for the false confession offence. The main motives were to protect a peer and avoid police pressure. A stepwise discriminant function analysis showed that three variables (bullying victimization, negative attitudes towards school, and delinquency) discriminated significantly between the two groups after taking into account the relationship between the psychological scales. The findings provide strong evidence of the relationship between being a victim of bullying and giving false confessions.

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1. Introduction

There is increased recognition that false confessions during custodial interrogation do sometimes occur and the consequences can be severe and include wrongful conviction (Drizin & Leo, 2004; Gudjonsson, 2003a, 2006; Kassin & Gudjonsson, 2004). According to Gudjonsson (2003b), custodial interrogation is a dynamic process and is comprised of the interaction between circumstances, custodial pressures (i.e., confinement and interrogation), physical (e.g., diabetes, heart problems) and mental health (e.g., disturbed mental state, psychosis, depression, history of trauma, substance abuse) factors, psychological vulnerabilities (e.g., suggestibility, compliance), and support factors (i.e., access to legal advice, and an independent person – ‘appropriate adult’ while in custody).

Consistent with Gudjonsson's (2003b) interactional model, Kassin and Gudjonsson (2004) suggest that the risk or vulnerability associated with false confessions can be separated into ‘personal’ and ‘situational’ factors. Personal risk factors are those associated with the individual characteristics of the suspect, whereas situational factors relate to the nature of the arrest, confinement and

custodial interrogation. The focus in this article is on personal risk factors using the epidemiological approach developed in our previous research among community samples (Gudjonsson, Sigurdsson, Asgeirsdottir, & Sigfusdottir, 2006, 2007; Gudjonsson, Sigurdsson, Bragason, Einarsson, & Valdimarsdottir, 2004; Gudjonsson, Sigurdsson, & Einarsson, 2004; Steingrimsdottir, Hreinsdottir, Gudjonsson, Sigurdsson, & Nielsen, 2007).

Gudjonsson et al. (2006) showed that false confessions were associated with delinquent life style, the delinquency of friends, poor self-esteem and depression. However, further analyses of the data also suggested that multiple exposures to unpleasant or traumatic life-events were associated with false confessions (Gudjonsson, Sigurdsson, Asgeirsdottir et al., 2007). These were largely associated with multiple victimization (e.g., bullying, death of a significant other, being a victim of violence) and substance abuse (i.e., having attended substance abuse treatment, use of LSD). Some of the limitations of this large national study were that no information was available on the nature of the crime the participants claimed they had confessed to falsely, the reasons for giving the false confessions, and the consequences of the false confessions. In addition, the questions relating to victimization were quite limited (e.g., bullying only referred to current bullying and there were very few questions that were directly relevant to victimization).

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The purpose of the present study is to address these limitations in another large national study among youth in Iceland. We employed a much more detailed measure of bullying victimization than in the previous study and hypothesised on the basis of our previous research (Gudjonsson, Sigurdsson, Asgeirsdottir et al., 2007) that the extent of victimization (i.e., the number of different kinds of victimization experiences during childhood) would be significantly associated with a history of false confession, after taking into account other important factors, such as disturbed mental state (anxiety, depression, anger), low self-esteem, poor parental support, negative attitudes towards school, rate of delinquency, delinquency of friends, and substance abuse.

The theoretical link between victimization and offending, which can be applied to false confessions, involves at least three distinct pathways (Fagan, Piper, & Cheng, 1987): (a) 'life-style exposure' model, where offenders are in frequent contact and share activities, including offending; (b) a 'subcultural theory' where peer loyalties and shared values (e.g., taking on a case for a peer) become important and may result in a strategic decision to take blame and make a false confession; and (c) individual vulnerabilities, such as not being able to handle peer or interrogative pressure (Gudjonsson & Sigurdsson, 2007), and proneness to uncritically accept blame (Gudjonsson, Sigurdsson, & Einarsson, 2007).

Evidence for the 'life-style exposure' model comes from the work of Gudjonsson et al. (2006) where it was found that involvement in delinquency and the involvement of peers in delinquency were both predictive of false confessions. Evidence for the role of a 'subcultural theory' comes from the work of Sigurdsson and Gudjonsson (1996), Gudjonsson, Sigurdsson, & Einarsson (2007) and Sigurdsson, Gudjonsson, Einarsson, and Gudjonsson (2006), where group solidarity and loyalty to peers encourages them to take blame for antisocial acts they had not committed. The strongest evidence for the role of personality and individual differences relates to suggestibility and compliance (Gudjonsson, 2003a; Sigurdsson & Gudjonsson, 1996) and more recent work linking false confessions to a history of bullying and victimization (Gudjonsson, Sigurdsson, Asgeirsdottir et al., 2007). Juvonen, Graham, and Schuster (2003) found that young adolescents who were victims of bullying had significantly more psychological (i.e., depression, social anxiety, feeling of loneliness), conduct, school, and peer adjustment problems than other young persons in their study. Drake, Bull, and Boon (2008) and Drake and Bull (in press) found a significant relationship between interrogative suggestibility and a history of negative life-events. These kind of psychological vulnerabilities are likely to make young people susceptible to making false confessions when subjected to interrogation by police or group pressure by delinquent peers.

2. Method

2.1. Participants

The participants were 10,363 students in further education in Iceland who completed the survey in class under supervision in October 2007. In Iceland compulsory education ends at the age of 15 and further education commences at age 16. The students were from all secondary education colleges in Iceland. There were 5023 (48%) males and 5300 (52%) females in the study (40 participants did not indicate their sex). The average age for the sample was 17.6-years (range 15–24, SD = 1.7). The students were from all 30 further education colleges in Iceland. The sample is highly representative of young persons in Iceland, because in 2005, 94% of all 16-year olds attended further education (Statistics Iceland, 2006). In Iceland criminal responsibility starts at the age of 15 and the age of majority (adulthood) is 18.

2.2. Instruments

The data used in the study is a population-based survey among high school students in Iceland. The survey was conducted by The Icelandic Center for Social Research and Analysis in cooperation with the Ministry of Education and the Public Health Institute of Iceland. The questionnaire consisted of 127-items relating to the students' educational, family, financial and social background, attitudes towards school and education, smoking, drinking and illicit drug taking, peer relationships, suicide ideation and attempt, anxiety, depression, anger problems, self-esteem, offending, and offending by friends.

Sections 94–102 specifically asked the participants about their experiences of police interrogation, confessions, denials, false confessions, wrongful convictions, the type of offence falsely confessed to, and the reasons for giving the false confession/s.

Five questions were pertinent to the present paper. These were as follows:

1. 'How often have you been interrogated by police at a police station about a suspected offence?', rated as 'never', 'once', 'twice', '3–5 times', '6 or more times'.
2. 'Have you ever confessed to a crime during police interrogation, which you did not commit? (i.e., you were not involved and completely innocent)', rated as 'never', 'once', 'twice', '3–5 times', '6 or more times'.
3. 'What type of offence did you falsely confess to? (Property crime, traffic violation, drug related offences, sexual offence, criminal damage, violent offence, other – if more than one false confession, choose the most serious offence you falsely confessed to). These were fixed categories in the study.
4. 'What was the reason you confessed to something you did not do? (Cover up for somebody else, was threatened, pressure from police, wanted to leave the police station, was experiencing withdrawal symptoms, taking revenge on the police, cannot recall the reason, other). These were fixed choice categories in the study.
5. 'Were you convicted of the offence you had falsely confessed to?', rated 'yes' or 'no'.

The participants completed the following measures, which were used as the predictors in the present study:

1. *Anxiety and depression* (Derogatis, Lipman, Covi, & Rickels, 1972): there were 12 anxiety and 10 depression items chosen from the original symptom distress checklist and these were rated on a four-point frequency scale ('never', 'seldom', 'sometimes' and 'often') to indicate severity of symptoms (Sigfusdottir, Farkas, & Silver, 2004).
2. *Anger* (Sigfusdottir et al., 2004): this is a five-item measure designed to assess the severity of anger problems. Each item was rated on a four-point frequency scale as for anxiety and depression.
3. *The Rosenberg self-esteem scale* (RSES; Rosenberg, 1965): this 10-item scale consists of positive and negative self-appraisal statements rated on a four-point scale ranging from 'strongly agree' to 'strongly disagree'. Scores range from 10 to 40 with higher scores reflecting low self-esteem.
4. *Parental support* (Sigfusdottir et al., 2004): this is a five-item measure designed to assess the extent of parental support about warmth and caring, discussions about personal affairs and providing advice. Each item is rated on a four-point scale ranging from 1 (very difficult) to 4 (very easy). The higher the score the greater the parental support.
5. *Attitudes towards school*: this is a 14-item measure designed to assess the participant's attitudes and feelings towards school

and school work, as well as reported bullying at school (Gudjonsson et al., 2006). Scores for each item range from 1 (applies almost always to me) to 5 (applies almost never to me). The higher the score, the more positive the attitudes towards school.

6. *Involvement in delinquency* (Sigfusdottir et al., 2004): this is a six-item measure designed to assess the extent of self-reported offending (e.g., theft, violence, vandalism, burglary, other) during the previous 12 months. Answers ranged from 1 (never) to 7 (18 times or more often).
7. *Involvement of friends in delinquency*: this is an 11-item measure designed to assess the extent of offending among the participant's friends. The question asked is: 'how many of your friends do you think are involved in the following?' A range of behaviours is rated, including the smoking of cigarettes, the consumption of alcoholic beverages, watching pornography, illicit drug taking, theft, burglary, vandalism, and acts of violence. Each offending behaviour is rated on a five-point frequency scale from 1 (none) to 5 (all).
8. *Drug use*: this is an 11-item scale measuring the extent of substance use. The participant is asked 'How often (if ever) in your life have you used', sedatives (including sleeping pills), cannabis, amphetamines, LSD, ecstasy, cocaine, mushrooms, solvents for sniffing, home brew, anabolic steroids, other illicit drugs. Each item is rated on a seven-point scale from 1 (never) to 7 (40 times or more often).
9. *Victimization Scale*¹: this 11-item scale was adapted from the juvenile victimization questionnaire (JVQ) (Finkelhor, Hamby, Ormrod, & Turner, 2005) to assess the extent of bullying and maltreatment experienced by the participant in childhood and adolescence (i.e., up to the age of 18) by parents/carers, siblings and peers. For the purpose of this study, only three items relating to child maltreatment and eight-items relating to peers and sibling victimization were used and adapted. Each item was rated on a five-point scale from 1 to 5: 1 (no, never), 2 (once), 3 (2–4 times), 4 (5–9 times), and 5 (10 more times). The higher the score the greater the extent of victimization.

2.3. Procedure

The students were approached by teachers in class and asked to participate in a survey that was concerned with young people. The participants were told that their answers were anonymous and confidential. They were tested in scheduled classes. The questionnaire took about one hour to complete and upon completion students sealed them in blank envelopes. All participants throughout Iceland completed the study on the same day.

3. Results

3.1. Interrogated by police

Out of the total sample of 10,092 participants who answered the question about custodial interrogation, 2001 (19.8%) reported that they had been questioned at a police station as suspects. There was a significant difference between males and females ($\chi^2 = 417.77$, $df = 1$, $p < .001$), with 1364 (28%) of the males and 624 (12%) of the females, respectively, stating that they had been interrogated one or more times (35 did not report their sex). The great majority of the total sample interrogated, or 1172 (58.6%),

had been interrogated only once, 438 (21.9%) twice, 251 (12.5%) three to five times, and 140 (7.0%) six or more times.

3.2. Rate of false confessions

Out of the 2001 participants who had been interrogated by the police, 174 (8.8%) claimed to have made a false confession during custodial interrogation, which represents 1.7% of the total sample. Of those, there were 126 (9.3%) males and 47 (7.6%) females, the differences not being significant (one participant did not report his or her sex).

The great majority ($n = 128$, 74.0%) claimed that they had given false confession only once and 45 (26.0%) said it had happened more than once. Males ($n = 38$, 30.2%) were significantly more likely than females ($n = 7$, 14.9%) to report more than one false confession ($\chi^2 = 4.15$, $df = 1$, $p < .05$).

3.3. Type of offence confessed to falsely

Out of the 174 participants who had made a false confession, 158 (91%) gave the type of offence they had falsely confessed to. These were: property offences ($n = 39$, 24.7%), traffic violations ($n = 30$, 19%), violent offences (26, 16.5%), drug related offence ($n = 23$, 14.6%), criminal damage ($n = 23$, 14.6%), sexual offences ($n = 4$, 2.5%), other ($n = 13$, 8.2%). Males were significantly more likely to report false confession to a violent offence and criminal damage, whereas females more commonly falsely confessed to a property offence ($\chi^2 = 18.04$, $df = 6$, $p < .01$).

3.4. Reason behind the false confession

Out of the 174 participants who had made a false confession, 149 (85.6%) reported the reason for the false confession. The main reasons given were: to protect someone else ($n = 54$, 36.2%), wanted to escape from police ($n = 26$, 17.4%), pressure from police ($n = 23$, 16.8%), threats ($n = 11$, 7.4%), take revenge on the police ($n = 3$, 2%), withdrawal symptoms ($n = 2$, 1.3%), can't recall (15, 10.1%), other ($n = 13$, 8.7%). No significant sex difference emerged with regard to the reason given for the false confession.

3.5. Wrongful convictions

Out of the 174 participants who claimed to have made a false confession, 65 (37.1%) said they had been wrongfully convicted for the offence they confessed to. There was no significant difference between males and females, with 42 (33.9%) of the males and 22 (44%) of the females claiming they had been convicted.

3.6. Psychological/criminological variables and false confessions

Multivariate analysis of variance (MANOVA) was performed on the 10 dependent variables to test for overall significant effects after taking into effect the relationship between the dependent measures. Having a history of a false confession was the fixed factor and the 10 psychological factors were the dependent variables. There was an overall significant group effect (Pillai's trace; $F = 4.75$, $p < .001$; partial eta squared = 0.04).

Table 1 gives the mean scores for the non-false confessors and false confessors on the 10 psychological measures, the t -value, and effect size as measured by Cohen's d (Cohen, 1988). There is a significant difference between the two groups on all 10 measures, the highest effect size being for the victimization scale (0.49) and the delinquency of friends (0.46). The effect sizes for these significant findings were small to medium (range = 0.17–0.49). All the scales had satisfactory internal consistency ($\alpha = 0.75$ –0.90).

¹ Detailed information about the scale and how it has been adapted is available from the authors upon request.

Table 1
Mean scores and standard deviations on the tests for non-false confessors and false confessors, *t*-values, effect sizes for group differences, and Alpha coefficient for each measure

Measure	Non-false confessors mean (sd) (n)	False confessors mean (sd) (n)	<i>t</i> -value	Effect size	Alpha coefficient
Anxiety	23.0 (7.5) (1745)	25.7 (9.3) (168)	4.29**	0.32	0.89
Depression	17.3 (6.6) (1761)	19.4 (7.9) (165)	3.90**	0.29	0.90
Anger	9.5 (3.8) (1785)	10.7 (4.4) (169)	3.80**	0.29	0.86
Self-Esteem	17.9 (5.9) (1736)	20.0 (6.0) (150)	4.28**	0.35	0.89
Parental support	17.1 (3.2) (1791)	16.4 (3.9) (168)	-2.89*	0.17	0.89
Positive attitudes toward school	54.7 (7.4) (1741)	51.6 (10.2) (155)	-4.93**	0.18	0.84
Delinquency of friends	24.3 (5.2) (1748)	27.1 (7.0) (163)	6.52**	0.46	0.76
Delinquency of self	8.1 (3.9) (1382)	10.3 (7.4) (120)	5.36**	0.39	0.79
Drug use	16.1 (8.3) (1750)	18.6 (10.9) (168)	3.63**	0.27	0.84
Victimization	5.3 (5.7) (1707)	8.0 (7.9) (156)	5.55**	0.49	0.75

All tests are two-tailed.

* $p < .01$.

** $p < .001$.

The MANOVA was also followed up using a stepwise discriminant function analysis. This helps to find the linear combinations of the dependent variables that best discriminate between the two groups. Out of the ten psychological measures, three discriminated significantly between the two groups (Wilks' Lambda = 0.968; $F[3, 1225] = 40.10$, $p < .001$). These were the victimization scale (Wilks' Lambda = 0.984; $F[1, 1226] = 20.39$, $p < .001$, structure coefficient = 0.71); positive attitudes toward school (Wilks' Lambda = 0.974; $F[1, 1226] = 16.62$, $p < .001$, structure coefficient = -0.64); delinquency (Wilks' Lambda = 0.968; $F[1, 1226] = 13.58$, $p < .001$, structure coefficient = 0.60).

A comparison was made on the 10 psychological measures between those who had confessed falsely only once and those who had confessed falsely more than once. Out of the 10 psychological measures only one, the delinquency scale (i.e., higher score among the repeat false confessors), reached significance after applying a Bonferroni correction to the *p*-value for conducting multiple comparisons ($t = 3.30$, $df = 118$, $p < .01$).

4. Discussion

The current sample of 10,363 participants is a similar number to the 10,472 in our previous national study (Gudjonsson et al., 2006). The studies were conducted three years apart. In the present study, 19.8% reported that they had been questioned at a police station as suspects (in our previous study the figure was 18.6%). Out of those interrogated, 8.8% claimed to have made a false confession to the police, which is slightly higher than the figure (7.6%) in our previous study. The main explanation for the difference is the higher figure of those interrogated in the current study; once this has been controlled for, the rate of false confessions for the total samples were 1.7% and 1.6%, respectively.

These findings suggest that false confessions sometimes occur among young persons when interrogated by police and the main motive is to take on the case for a peer. The main problem with this type of false confession is that they are rarely retracted and therefore do not come to the attention of the police and legal establishment (Gudjonsson, 2003a). However, the present findings show that the false confessions were made to potentially serious criminal offences. The significance of the false confession in the present study is illustrated by the fact that 33.9% of males and 44.0% of the females reported that they had been convicted of the offence to which they had falsely confessed.

MANOVA showed an overall significant group effect (false confession versus no false confession) with regard to the 10 predictor variables. This was followed up with a stepwise discriminant function analysis, which showed that three variables (victimization, negative attitude towards school, and delinquency) discriminated

best between the two groups after taking into account the relationship between the psychological measures.

What do these findings tell us? First, the findings corroborate those in the previous national study in terms of the importance of previous offending history in relation to false confessions (Gudjonsson et al., 2006). This finding fits in well with the 'life-style exposure' where delinquent young people and their peers share antisocial activities. The high rate with which the participants in the current study reported giving a false confession in order to protect a peer gives support for the 'subcultural' model (i.e., it is a form of peer group loyalty). However, the most important current finding is the history of bullying victimization as an individual vulnerability factor in relation to false confessions. Of course, the cross-sectional nature of the present study makes it insufficient to ascertain a causal link between bullying victimization and false confessions. This does not undermine the significance of the present findings. Indeed, Smith and Ecob (2007) suggested on the basis of their findings that there is a reciprocal causal relationship between victimization and offending among youth with the key factor between the two being peer influence.

Gudjonsson, Sigurdsson, and Einarsson (2007) found that there were three main motives for youth taking blame for antisocial acts. These were: to cover up for a guilty person, doing a guilty person a favor, and avoiding conflict and confrontation. It is likely that young persons who have a history of being bullied are particularly vulnerable to taking blame, including giving a false confession, because they are likely to have insecure attachment in relationships. Gudjonsson, Sigurdsson, Lydsdottir, and Olafsdottir (2008) found that high compliance was most strongly associated with an insecure attachment style. Heightened suggestibility has been shown to be significantly associated with the history of negative life-events (Drake & Bull, in press; Drake et al., 2008) and it may function as an important moderating or mediating variable, along with compliance, between negative life-events, including bullying victimization, and false confessions.

The present study has two main limitations. First, the data is entirely based on self-report and is not independently corroborated. Second, the sample, although very large, only included young people in further education; it was represented by those who proceeded to further education. This is not a serious limitation considering that over 94% of all 16-year olds in Iceland proceed to further education (Statistics Iceland, 2006).

Finally, this kind of epidemiological research, in spite of its limitations, is probably the best approach to identify the individual predictors of young people giving false confessions within criminal justice settings. Focusing exclusively on high profile criminal cases, which clearly only represents the tip of the iceberg, is likely to give a misleading picture of the phenomena of false confessions.

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