



Relations between self-serving cognitive distortions, psychopathic traits, and antisocial behavior in a non-clinical sample of adolescents

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ABSTRACT

The aim of the present study was to assess the relative contributions self-serving cognitive distortions and psychopathic traits to adolescent antisocial behavior. Participants were 972 high-school students who completed self-report questionnaires. Hierarchical multiple regression analyses showed that self-serving cognitive distortions, psychopathic traits, as well as their interaction term were significant predictors of antisocial behavior in both genders after adjustment for the main other cognitive, psychopathological and sociofamilial variables. High levels of self-serving cognitive distortions were associated with more extensive antisocial behavior among participants with higher scores on psychopathic traits. This result may have implications for prevention and treatment.

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1. Introduction

Antisocial behaviors among adolescents are associated with a multitude of risk factors, including impulsiveness and sensation seeking, borderline and sadistic personality traits, depression, substance use, social disadvantage, family problems such as poor attachment and parent–child discord, exposure to stressful life events, and academic failure (e.g., Bailey & Scott, 2008). Among the psychological variables, the role of social cognitive factors has been recently emphasized. These factors include moral judgment immaturity (Stams et al., 1996; Leenders & Brugman, 2005); self-serving cognitive distortions and or deviant models of social information processing (e.g., Gibbs, 2010; Weiss, Dodge, Bates, & Pettit, 1992); lower levels of cognitive empathy (e.g., Jolliffe & Farrington, 2006); and attitudes conducive to delinquent behavior (Pardini, Lochman, & Frick, 2003). Self-serving cognitive distortions have been characterized as primary and secondary (Gibbs, 2010; Gibbs, Potter, & Goldstein, 1995). Primary distortions form a consolidated egocentric bias stemming from self-centered attitudes, thoughts, and beliefs. Secondary cognitive distortions are pre or post-transgression rationalizations that serve to neutralize conscience, empathy, and guilt, and thereby protect the self-image when engaging in antisocial behavior. The second-

ary distortions consist of blaming others, minimizing/mislabeling, and assuming the worst. Blaming others means misattributing blame to outside sources, especially another person or group, or to circumstances (e.g., responsibility for an aggressive act is blamed on a perceived provocation). Minimizing/mislabeling is considering antisocial behavior as being harmless, acceptable, or even admirable and using depreciating or dehumanizing labels in speaking of others. Assuming the worst is unwarrantedly attributing hostile intentions to others, seeing worst-case scenarios as inevitable in a range of social situations, or assuming that improvement is impossible in one's own or others' behavior (Barriga, Gibbs, Potter, & Liau, 2001).

Self-serving cognitive distortions are elevated in offender populations such as adolescent sex offenders (McCrary et al., 2008) and seem to be closely linked to psychopathic traits; indeed, the distortions may be the cognitive expression of those traits. Over the two past decades, the constructs of psychopathy and psychopathic traits have been extended to children and adolescents in forensic, referred or community samples (e.g., Salekin & Frick, 2005). The importance of psychopathic traits as a marker of persistent and severe antisocial behavior has been highlighted: psychopathic traits in antisocial youths have been shown to be linked to a greater number, variety and severity of conduct problems in forensic, mental health and community samples (e.g., Frick, Cornell, Barry, Bodin, & Dane, 2003) and predictive of the severity and stability of conduct problems in adolescents (Moran, Ford, Butler, & Goodman, 2008). Factor analytic studies have generally supported three primary dimensions of psychopathic traits in youth:

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callous-unemotional traits, egocentricity, and impulsivity (Salekin & Frick, 2005). Pronounced egocentric bias bears a straightforward relation to the primary self-centered cognitive distortions. The lower empathy, guilt, or remorse of callous-unemotional traits—considered the key feature of juvenile psychopathy—may reflect the neutralization processes of secondary cognitive distortions.

To date, no study has explored the relationships among self-serving cognitive cognitions, psychopathic traits and antisocial behavior in community samples of adolescents. In this study, we investigated the relative contributions of self-serving cognitive distortions and psychopathic traits to antisocial behavior in a non-clinical sample of high-school students after controlling for the main cognitive, psychopathological, and sociofamilial factors.

2. Methods

2.1. Participants and procedure

The study data were obtained from students attending eight randomly selected high schools in Toulouse, France. The sample consisted of 972 students (594 boys (61%); 378 girls (39%); mean age of boys = 17.1 ± 1.2 ; mean age of girls = 16.7 ± 1 , $p < .001$; age range = 14–21). The socio-economic situation was equal for both gender (5.97 ± 1.47 vs. 5.92 ± 1.48 , $t = 0.60$, $p = 0.55$). Being free of charge, these public high schools were not discriminatory on the basis of income and admitted adolescents with diverse SES levels. The anonymous questionnaires were administered in the classroom by a Master's level psychology student who presented the study and collected the questionnaires. Students were informed that participation was voluntary and signed a consent form. None of the students declined to participate in the study.

2.2. Measures

2.2.1. Antisocial behavior

Antisocial behavior was measured using the aggregated items of different scales: the French version of the Antisocial Behavior Scale (ABS; Schwab-Stone, Chen, Greenberger, Silver, & Voyce, 1999), the Self-Reported Delinquency Behavior (SRDB; Elliott & Menard, 1996) and the Self-Reported Delinquency Questionnaire (SRDQ; Le Blanc & Frechette, 1989). Three items of the Sexual Experiences Survey (SES; Koss et al., 2007) were added to the questionnaire to assess sexual aggression (e.g., “Used force to obtain sex?”). The final questionnaire reported 41 items referring to criminal acts such as physical violence (e.g., “Been involved in gang fights?”), verbal violence (e.g., “Insulted someone?”), theft (e.g., “Stolen something at school?”), vandalism (e.g., “Damaged public or private property?”), failure to follow rules (e.g., “Skipped school without permission?”), substance abuse (e.g., “Been high at school from smoking marijuana?”). Respondents were asked to report on a 5-point scale how many times (0 = zero times, 1 = once, 2 = twice, 3 = three or four times, 4 = five or more times) they had been involved in these 41 antisocial behaviors during the past year. Total scores of the antisocial behavior scale range from 0 to 164. In this sample, the Cronbach's α was .92.

2.2.2. Social cognitive variables

Although we focused on self-serving cognitive distortions, other social-cognitive variables (moral judgment, and cognitive empathy) were assessed in the present study, as these have previously been found to distinguish between adolescents with and without antisocial behavior (Nas, Brugman, & Koops, 2008).

Self-serving cognitive distortions were assessed using the How I Think Questionnaire (HIT, adapted from Barriga et al., 2001). The HIT is a 40-item self-report measure. Items are scored on a 6-point

scale varying from totally disagree to totally agree (range 40–240). The HIT is composed of four scales exploring the four types of cognitive distortions: nine items assess Self-centered cognitions (e.g., “If I really want something, it doesn't matter how I get it”); nine items assess minimizing/mislabeling cognitions (e.g., “Everybody breaks the law, it's no big deal”); 10 items assess cognitions linked to Blaming others (e.g., “If someone leaves a car unlocked, they are asking to have it stolen”); and 11 items assess cognitions related to Assuming the worst (e.g., “You might as well steal. People would steal from you if they had the chance”). Higher scores indicate greater levels of self-serving cognitive distortions. Validation studies have found higher cognitive distortions among delinquent relative to nondelinquent adolescents (e.g., Barriga et al., 2001; Nas et al., 2008). Internal consistency, factor structure, convergent and discriminant validity were satisfactory. In this sample, α for the total scale and the subscales were .90, .74, .71, .72, and .73, respectively.

Moral judgment was assessed through use of the Sociomoral Reflection Measure-Short Form (SMR-SF; Gibbs, Basinger, & Fuller, 1992; Gibbs, Basinger, Grime, & Snarey, 2007). The SRM-SF is composed of 11 items eliciting evaluations and justifications of sociomoral values. Individuals taking the SRM-SF must first rate the moral value within each question (e.g., for contract and truth, “How important is it to keep a promise?”) on a 3-point scale (“Very Important” = 1, “Important” = 2, “Not Important” = 3) and then provide their reasons for that evaluation. The reasons is scored for maturity of moral judgment (specifically, moral justification) according to a manual (Gibbs, 2010; Gibbs et al., 1992). In this study, we only used the primary composite score representing the mean of item rating, with higher scores indicating lower maturity of moral reasoning. In this sample, α was .69.

Cognitive empathy was measured with the Interpersonal Reactivity Index (IRI; Davis, 1983). The IRI is a 28-item, 5-point Likert-type (0 = does not describe me well to 4 = describes me very well) scale that assesses four dimensions of empathy. In this study we only used the Perspective-Taking subscale, comprised of six items. Perspective-taking pertains to the cognitive component of empathy in the form of individuals' ability to understand the situation of another and to spontaneously adopt others' view point. A subscale score was calculated by summing the scores on the six items, with higher scores indicating higher cognitive empathy. In this sample, α for this subscale was .61.

2.2.3. Psychopathological variables

Psychopathic, sadistic, and borderline personality traits, as well as depressive symptoms, were also assessed.

Psychopathic traits were assessed using the Youth Psychopathic traits Inventory which was developed for youths aged 12 and older (YPI; Andershed, Kerr, Stattin, & Levander, 2002). The YPI is composed of three subscales corresponding to the behavioral/impulsive (i.e., sensation seeking, impulsivity and irresponsibility), interpersonal/narcissistic (i.e., dishonest charm, grandiosity, lying and manipulation) and affective/callous-unemotional (i.e., callousness, unemotionality and remorselessness) dimensions. Items are scored on a 4-point scale. Validation studies of the YPI have been conducted with both community and delinquent samples of adolescents (Andershed, Hodgins, & Tengström, 2007). The YPI showed good internal consistency, test-retest reliability, and convergent and predictive validity. In this sample, total scale α was .81.

Borderline personality disorder (BPD) traits were assessed using the borderline personality disorder scale of the Personality Diagnostic Questionnaire, Fourth Edition (PDQ-4, Hyler, 1994). The PDQ-4 is a self-report questionnaire assessing the 10 personality disorders of the DSM-IV (American Psychiatric Association, 1994). The BPD scale is composed of 10 items corresponding to

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