



Conceptualizing the Dark Triad of personality: Links to Social Symptomatology

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ARTICLE INFO

Article history:

Received 29 May 2012

Received in revised form 12 July 2012

Accepted 13 July 2012

Available online 9 August 2012

Keywords:

Dark Triad

Social Symptomatology

Normal personality

Agreeableness

Psychopathology

Conceptualization

ABSTRACT

The current study examines the conceptualization of the sub-clinical Dark Triad personality traits (Psychopathy, Machiavellianism, and Narcissism; Paulhus & Williams, 2002) by relating them to normal and abnormal personality. Factor analyses using two samples ($N_1 = 232$, $N_2 = 198$) showed the Dark Triad traits clearly aggregated with each other, with Social Symptomatology, and with low agreeableness. More detailed analyses found that sub-clinical psychopathy is related to a core of socially malevolent traits and items that reflect self-reported deviant socialization in childhood, alienation from others, interpersonal problems, and impulsivity. For Machiavellianism, these relationships were apparent at the item level but not at the trait level. Narcissism, however, appears to be a more distinct construct that relates to aspects of psychopathology other than Social Symptomatology. Overall, results indicate that the Dark Triad is best conceptualized as a form of disordered personality, with links to low agreeableness.

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1. Introduction

With the upcoming release of DSM-5, the mental health community is focused on the conceptualization and clarification of psychopathology. Given the proposal to introduce a dimensional component to the classification of disordered personality in DSM-5 (American Psychiatric Association, 2012), clinicians and researchers are exploring whether pathological personality traits represent extremes on dimensions of normal personality or if they are better conceptualized as a discrete form of psychopathology. Furthermore, the research community is examining which components of normal personality and/or psychopathology are related to specific disordered personality traits in order to understand how to classify them in DSM-5 and beyond. This paper will contribute to this effort by building an empirical conceptualization of the Dark Triad personality traits.

The Dark Triad consists of three anti-social sub-clinical personality traits: Machiavellianism (manipulation of others), Narcissism (feelings of grandiosity, entitlement, dominance, and self-superiority), and Psychopathy (high impulsivity and thrill seeking, accompanied by low empathy and anxiety; Paulhus & Williams, 2002). The three personality traits are inter-correlated but not equivalent, suggesting that they are overlapping, but distinct constructs. These traits share a socially malevolent character with self-promoting behavioral tendencies, emotional coldness, duplicity, and aggressiveness (Paulhus & Williams, 2002). Individuals who possess this

dark personality style tend to carry out a disproportionately large amount of anti-social behavior on others. Therefore, identifying the correct way to conceptualize these traits, and to classify them within the broader context of psychopathology, will ultimately relate to diagnosing and treating individuals with the Dark Triad personality style.

Several empirical studies of the Dark Triad have focused on its links to normal personality. This literature predominately uses the Five Factor Model to represent dimensions of normal personality: namely, agreeableness, openness, conscientiousness, extraversion, and neuroticism (McCrae & Costa, 2004). The most robust finding is that the Dark Triad is associated with low agreeableness (e.g. Jakobwitz & Egan, 2006; Paulhus & Williams, 2002). Jonason, Li, and Teicher (2010) found that the Dark Triad, as a composite construct, is related to low agreeableness, extraversion, openness, and to low neuroticism and conscientiousness. However, when the Dark Triad traits were studied individually, the only common correlate was low agreeableness (Jonason et al., 2010). Likewise, a number of studies have shown relationships between individual Dark Triad traits and normal personality. For instance, Psychopathy and Machiavellianism are associated with a moderate level of neuroticism, and low levels of conscientiousness (Jakobwitz & Egan, 2006; Paulhus & Williams, 2002). Psychopathy has also been associated with moderately high levels of extraversion, and an average degree of openness (Knap, 1999). Finally, Narcissism is associated with extraversion (Lee & Ashton, 2005), and openness (Paulhus & Williams, 2002; Vernon, Villani, Vickers, & Harris, 2008). Thus, the correlations between the Dark Triad and the Big-5 normal personality dimensions are neither large nor consistent, indicating that the Dark Triad and normal personality likely represent overlapping but distinct clusters of

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personality. Perhaps the Dark Triad construct might be better understood as disordered personality. Specifically, are the Dark Triad traits more closely related to psychopathological traits than to the Big-5 normal personality dimensions? If so, this would indicate that the variance in the Dark Triad is better explained by variations in abnormal rather than normal personality dimensions.

Research indicates that the Dark Triad is likely best conceptualized as a particular form of psychopathology, namely, Social Symptomatology, which consists of deviant socialization (i.e. interpersonal problems, alienation from others), and impulse control problems (e.g. Holden, 1996). The defining features of the Social Symptomatology construct are an impulsive disposition and alienation from, or problematic relationships with, others during development. Research supports the suggested link between the Dark Triad and Social Symptomatology at a theoretical level. Impulsivity, a central aspect of Social Symptomatology, has been implicated in the development of narcissism (Thomaes, Bushman, De Castro, & Stegge, 2009). Additionally, Psychopathy and Machiavellianism are associated with low self-control, a tendency to discount future consequences, and attention deficit disorder (Jonason & Tost, 2010), which are characteristic of impulsivity. Deviant socialization and interpersonal problems form another central component of Social Symptomatology. Cold and Yang (2008) found that the prevalence of social and behavioral problems increased from a non-psychopathic group, to an intermediate group, and then to a probable psychopathy group. The social and behavioral problems characteristic of probable psychopaths were hazardous drinking, financial crisis, homelessness, drug dependence, alcohol dependence, violence and injury to a victim, and previous psychiatric admission. Similarly, Machiavellianism has been related to greater problems with intimacy, sociability, and being too controlling in interpersonal relationships (Gurtman, 1992). Finally, high levels of narcissism were found to correlate with interpersonal impairment, namely, domineering, vindictive, and intrusive behavior in interpersonal relationships (Ogrodniczuk, Piper, Joyce, Steinberg, & Duggal, 2009). Thus, the Dark Triad traits are associated with a number of characteristics of Social Symptomatology.

This study builds on previous literature by simultaneously relating the Dark Triad to normal personality dimensions and to psychopathology. We propose that the Dark Triad can be conceptualized as a form of Social Symptomatology. That is, the Dark Triad will be related to low agreeableness and it will be marked by impulsivity, interpersonal problems, and alienation.

1.1. Trait level analyses

The first set of analyses will use scale totals to assess the relationships between the Dark Triad, normal personality and psychopathology at the trait level. We predict that the Dark Triad construct will be best conceptualized as disordered personality, most strongly related to the domains of Social Symptomatology and low agreeableness.

1.2. Item and subscale level analyses

The second set of analyses will build a more nuanced understanding of the relationship between the Dark Triad and Social Symptomatology by examining the links between the Dark Triad items and the Social Symptomatology items and subscales.

2. Methods

2.1. Participants and procedure

Two student samples were recruited through an online participant pool at Queen's University. All participants reviewed an

electronic letter of information, provided informed consent, completed the questionnaires, and were debriefed in accordance with university ethical provisions. Participants in Sample 1 ($N = 198$; 151 females, 47 males; age 17–46, $M = 20.26$, $SD = 2.41$) completed the MACH-IV, Narcissistic Personality Inventory, Self-Report Psychopathy Scale-III-Revised, NEO Five Factor Inventory, and the Holden Psychological Screening Inventory. Participants in Sample 2 ($N = 232$; 200 females, 32 males; university year 1–3, $M = 1.11$, $SD = 0.37$) completed the MACH-IV, Narcissistic Personality Inventory, Self-Report Psychopathy Scale-III-Revised, NEO Five Factor Inventory, and the Basic Personality Inventory. Two independent samples were used to cross-replicate the results. Furthermore, two measures of psychopathology were used. The Basic Personality Inventory (Jackson, 1989) used factor analysis to derive and replicate three reliable and minimally correlated higher-order factors of psychopathology—Psychiatric Symptomatology, Social Symptomatology, and depression. The Holden Psychological Screening Inventory (Holden, 1996), refined the number and content of the BPI items to produce a more brief, up-to-date, and direct measure of the same three higher-order psychopathology factors. This study utilized both measures of Social Symptomatology because the measures are derived from the same theory, which allows for replication of the results across two samples. Yet the two measures also contain unique items, allowing interpretation and generalization of the results independent of the specific Social Symptomatology measure.

2.2. Materials

2.2.1. Dark Triad

MACH-IV (Christie & Geis, 1970). The MACH-IV is a 20-item measure of Machiavellianism. Participants rate items such as “The best way to handle people is to tell them what they want to hear” on a 7-point scale (1 = strongly disagree, 7 = strongly agree). Cronbach's alpha in Sample 1 was .75 and in Sample 2 was .74.

Narcissistic Personality Inventory (NPI; Raskin & Hall, 1979). The NPI has 40 items consisting of pairs of attitudes, such as “(A) When people compliment me I sometimes get embarrassed” and “(B) I know that I am good because everybody keeps telling me so”. Participants choose the attitude that best applies to them. The scale's reliability was .85 in Sample 1 and .84 in Sample 2.

Self-report Psychopathy Scale-III-R (SRP-III-R; Forth, Brown, Hart, & Hare, 1996). The SRP-III-R is a 31-item measure of psychopathy. Participants respond to items such as “I almost never feel guilty over something I've done” using a 5-point scale (1 = strongly disagree, 5 = strongly agree). Cronbach's alpha was .87 in both samples.

2.2.2. Normal personality

NEO Five Factor Inventory (NEO-FFI; McCrae & Costa, 2004). In accordance with past research, the Five Factor Model was used to measure normal personality in this study. The NEO-FFI is a 60-item measure of the Big-Five personality dimensions: agreeableness, openness, conscientiousness, extraversion, and neuroticism. Each personality trait is measured using 12 items, which are summed to create a scale total for each dimension.

2.2.3. Psychopathology

The Holden Psychological Screening Inventory (HPSI; Holden, 1996). Participants in Sample 1 completed this 36-item measure of psychopathology, which is divided into three 12-item scales (Social Symptomatology, Psychiatric Symptomatology, and Depression). Participants use a 5-point scale to indicate how frequently they engage in or experience events such as “I have trouble standing up”. In Sample 1, the Cronbach's alpha was .68 for Psychiatric

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