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The Dark Triad and compassion: Psychopathy and narcissism's unique connections to observed suffering



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ABSTRACT

Past studies have linked the Dark Triad (DT) traits to dispositional empathy, but not to compassionate feelings in response to observed suffering. To fill this void in the literature, we examined the influence of the DT traits on state compassion using validated film methodology. One hundred and fifty-six college students viewed a movie scene of a distraught child watching his father die. The results revealed that while psychopathy was a negative predictor of compassion for the child, narcissism was a positive predictor. These DT traits explained compassion beyond the contribution of demographics, grief symptoms, and trait compassion. Furthermore, empathic and emotion processes uniquely mediated each of the DT and compassion connections. We discuss our results in terms of the callousness theory of DT and narcissism's positive correlation with compassion and empathy.

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1. Introduction

Researchers have shown great interest in socially aversive personality traits in nonclinical samples over the last decade. Machiavellianism, psychopathy, and narcissism, collectively known as the Dark Triad (DT), have proven to be more than just cardinal descriptions of cartoon villains, famous criminals, and maniacal leaders (Paulhus & Williams, 2002). Rather, studies of this constellation of traits have deepened our understanding of the darker side of personality and how it is expressed in average people (Paulhus, 2014). For instance, DT traits have been shown to predict a wide range of meaningful outcomes from mating behavior and academic cheating to prejudice and aggressive tendencies (Furnham, Richards, & Paulhus, 2013). Within this growing literature, one line of inquiry that warrants exploration is the link between the DT and compassion. Although many investigations have examined the relations of the DT with trait empathy, research has not explicitly studied compassion, which is surprising given that callousness in response to other individuals' needs is believed to be a unifying feature of the DT (Paulhus, 2014). The goal of the current study was to fill the void in the literature by examining compassion as a reaction to observed suffering.

Compassion is a unique emotional response to someone's suffering that is characterized by both the feelings of sorrow and concern for the sufferer and a strong desire to alleviate their suffering (Goetz, Keltner, & Simon-Thomas, 2010). Although compassion is distinct from, but highly influenced by empathic processes, it has been shown

to be the primary emotional driver of altruistic action (Lim & DeSteno, 2016). As the key to prosocial behavior, compassion has been central to the teachings of major religious traditions and of keen interest to scientists investigating the origins of altruism and violence (Lama & Ekman, 2008). Common conclusions about this emotion are that people vary to the degree they experience compassion when they encounter suffering and these differences are attributed to a variety of personlevel factors. For instance, social class (Steller, Manzo, Kraus, & Keltner, 2012), dispositional empathy (Masten, Morelli, & Eisenberger, 2011), and trait compassion (Lim & DeSteno, 2016) have all been found to influence compassion. Although the DT traits have not been explicitly linked to compassion, the literature demonstrates that personality traits impact this prosocial emotion.

Despite the lack of empirical work relating the DT traits to compassion, researchers have shown a developing interest in the connections with trait empathy that provide insights into this proposed relationship. The literature has shown many examples where trait empathy is inversely associated with psychopathy (Giammarco & Vernon, 2014; Jonason & Krause, 2013; Jonason & Kroll, 2015), Machiavellianism (Giammarco & Vernon, 2014; Jonason & Krause, 2013; Jonason & Kroll, 2015; Wai & Tiliopoulos, 2012), and narcissism (Delič, Novak, Kovačič, & Avsec, 2011; Giammarco & Vernon, 2014). These findings reinforce the negative reputation of the DT, and they support a basic theoretical proposal that a lack of empathy is an underlying element that binds these traits together (Paulhus, 2014).

However, the link between the DT and empathy is not straightforward in the case of narcissism. Although narcissism has shown negative correlations with trait empathy, which is consistent with the other DT traits, many studies have reported positive correlations between these two constructs (Jonason & Krause, 2013; Jonason & Kroll, 2015; Vonk,

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Zeigler-Hill, Mayhew, & Mercer, 2013; Wai & Tiliopoulos, 2012). The reason for this inconsistency continues to be unknown, but some viable theories explaining the positive association between narcissism and empathy have been proposed. For instance, researchers have suggested that the high empathy exhibited by some narcissists actually reflects a bias in their reporting of emotions (Wai & Tiliopoulos, 2012). Despite the fact that many narcissists are no more gifted than others at reading others' emotions, narcissists still have a tendency to rate themselves higher in emotional competence than their counterparts (Ames & Kammrath, 2004; Petrides, Vernon, Schermer, & Veselka, 2011). This propensity to exaggerate empathic ability could reflect both the narcissists' unrealistic sense of superiority (Wai & Tiliopoulos, 2012) as well as their high emotional expressiveness (Lyons & Brockman, 2017). On the other hand, other researchers have suggested that some narcissists may actually possess empathic tendencies. Vonk et al. (2013), for example, argue that some narcissists may rely on empathy to maintain their social bonds and their fragile self-worth. Being empathic in this instrumental sense can help narcissists take advantage of others in order to fulfill their interpersonally based needs (Jonason & Kroll, 2015).

Taken together, the literature demonstrates that the DT traits are generally inversely associated with trait empathy, except in the case of narcissism where the findings are mixed. The DT literature has also focused on trait empathy and not on compassion as a feeling state. Therefore, the current study sought to address this gap in the literature by examining the predictive relation between the DT traits and state compassion using a sample of college students. We chose film methodology in the current study because it is a highly effective, reliable, and ecologically valid means for eliciting strong emotional responses in a laboratory setting (Rottenberg, Ray, & Gross, 2007).

Given the trends found in previous research, we made the following predictions. First, we expected Machiavellianism and psychopathy to be negative predictors of compassion because these traits tend to be associated with low levels of dispositional empathy. Because empathy and compassion are closely related emotions, we believe that this similarity will also extend to the results of this study. Second, we expected narcissism to be a positive predictor of compassion because narcissists tend to be biased in their reporting of emotions. Moreover, because compassion is a moral emotion that was measured using self-report ratings, we believed that the narcissists would use that opportunity to express their emotions and self-righteous superiority over others.

We statistically tested these predictions using a hierarchical multiple regression analysis. Because variables such as demographics, trait compassion, neuroticism, grief symptoms from an important loss, and cohort size may confound the results of the study, we used the variables that were correlated with state compassion as statistical controls. We also examined the mediating effects of emotion and empathic processes reported during the film study in order to provide explanatory accounts for the specific links found between the DT traits and state compassion. In particular, changes in sadness and anxiety states were evaluated because they reflect the basic emotions that are central to the subjective experience of compassion (Goetz et al., 2010). Emotional empathy (i.e., feeling others' emotions) and perspective taking (i.e., understanding how others' may feel) were also evaluated because they represent the two basic facets of the empathy construct that are often implicated in the initiation of compassion (Lama & Ekman, 2008). Finally, a series of psychometric analyses were also conducted to ensure that state compassion, as it is the central variable of the current study, was reliably and validly measured.

2. Method

2.1. Participants and procedure

Data from 156 college students ($M_{\rm age}=19.15$) were used for this study. Most of the participants were White (n = 120), women (n = 128), and of Christian faith (n = 115). Nine participants were excluded from the analyses for not following protocols. The study took place in an auditorium style classroom using a small group format ($M_{\text{group}} = 13.38$), consistent with previous film studies (Gross & Levenson, 1995). After obtaining consent, participants completed a series of pre-film measures. Next, participants watched three film clips, edited and validated for affective science research (Gross & Levenson, 1995; Rottenberg et al., 2007; Samson, Kreibig, Soderstrom, Wade, & Gross, 2016), which were each followed by post-film measures. Films #1 (neutral) and #3 (neutral) were uneventful scenes of people in public places that were used as baselines for calculating changes in sadness and anxiety states (Rottenberg et al., 2007). Film #2 (death) is a scene from a 1979 movie, The Champ, which shows an emotional young boy reacting to his father dying. This death scene has been shown to reliably elicit sad emotional responses in college students (Gross & Levenson, 1995).

2.2. Measures

2.2.1. Pre-film measures

The Dark Triad traits were assessed using Jonason and Webster's (2010) 12-item measure ($\alpha_{global} = 0.84$; $\alpha_{narcissism} = 0.84$;

Table 1Factor loadings and descriptive statistics of the state empathy and state compassion items.

#	Item	F1	F2	F3	М	SD
1.	I put myself in the young boy's place.	0.251	0.785	0.292	1.93	1.34
2.	I felt as if I was the young boy in the film clip.	0.194	0.874	0.110	1.26	1.34
3.	I imagined myself as the young boy.	0.254	0.827	0.172	1.54	1.42
4.	I experienced what the young boy was experiencing.	0.247	0.483	0.347	1.41	1.31
5.	I found it difficult to see the <i>young boy's</i> point of view. ^a	0.120	0.060	0.414	0.43	0.82
6.	It was easy for me to understand how the young boy was feeling.	0.069	0.145	0.877	2.68	1.21
7.	I was able to relate to how the <i>young boy</i> was feeling.	0.207	0.221	0.690	2.12	1.33
8.	It was easy to take on the <i>young boy's</i> perspective.	0.265	0.260	0.756	2.56	1.25
9.	I felt sorry for the <i>young boy</i> .	0.622	0.127	0.352	3.58	0.84
10.	I felt concerned for the <i>young boy</i> .	0.631	0.121	0.336	3.26	1.07
11.	It broke my heart to see the <i>young boy</i> in that condition.	0.680	0.216	0.276	3.18	1.18
12.	I did not feel very much sorrow or concern for the young boy. ^a	0.523	0.090	0.125	0.35	0.82
13.	I felt an overwhelming desire to comfort the young boy.	0.838	0.223	0.060	2.57	1.34
14.	I felt a strong desire to end the young boy's emotional pain.	0.814	0.213	0.131	2.47	1.27
15.	I wished that I could help the young boy feel better.	0.881	0.217	0.134	2.88	1.19
16.	I really wanted to soothe the young boy.	0.877	0.283	0.120	2.74	1.31

Note. Item number = #; factors for pattern/structure coefficient loadings (F1, F2, F3); State emotional empathy (items 1–4; F2); state perspective taking (items 5–8; F3); State compassion (items 9–16; F1); M = mean; SD = standard deviation. Italics indicates the target of the emotion.

^a Reverse score item.

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