



The associations between callous-unemotional traits and emotional awareness in youth



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ABSTRACT

This study aimed to further explore emotional correlates to CU traits by considering for the first time a multidimensional measure of emotion awareness concerning self-perception about own emotional processes. 668 pre-adolescent students (338 girls; mean age = 12.89 years, SD = 0.92 years) took part to the study. Over and above levels of both internalizing and externalizing problems, a negative link between CU traits and emotion awareness emerged. Specifically, unemotional was the facet of CU traits to be uniquely associated to three out of five dimensions of emotion awareness that were specifically focused on emotional processes concerning own emotions (i.e., differentiating emotions, verbal sharing of emotions, not hiding emotions). As for the proneness to attend and analyze others' emotions, a negative association emerged with the callousness dimension of CU traits. These results further confirmed that youths high in CU traits present specific emotional processing; moreover these results further highlighted the importance to consider self-perception about own emotional functioning in youths high in CU traits.

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1. Introduction

1.1. CU traits and their emotional correlates

The present study investigated the association between callous-unemotional traits (i.e., CU traits) and emotion awareness in a sample of middle-school students. Specifically, it explored whether awareness of emotional processes was limited at high levels of CU traits. Previous research disproportionately focused on emotional functioning concerning others emotions, while this study extended the understanding of emotional functioning in individuals endorsing CU traits focusing on the Self. The timely construct of CU traits refers to emotion-related personality traits that a growing body of research has associated to childhood-onset antisocial behaviors; it represents the developmental affective features of adult psychopathy (Frick & Ray, 2014; Frick, Ray, Thornton, & Kahn, 2014). CU traits include facets concerning lack of empathy, guilt and remorse for misdeeds (i.e., the callousness dimension), lack of care about performance in tasks and lack of concern for the feelings of other people (i.e., the uncaring dimension) and shallow or deficient affect (i.e., the unemotional dimension) (Essau, Sasagawa, & Frick, 2006; Frick & Ray, 2014). Children and adolescents with high levels of CU traits are at high risk for developing severe conduct problems that are likely to be chronic and resistant to traditional treatments (Frick et

al., 2014). As a result, the 5th edition of the Diagnostic and Statistical Manual of Mental Disorders (i.e., DSM-5; American Psychiatric Association, 2013) has included a specifier for children and adolescents who meet the diagnostic criteria for Conduct Disorder (CD) and display significant levels of CU traits. These individuals show a number of unique neurological, emotional, cognitive, and social characteristics (Frick & Nigg, 2012; Frick & Ray, 2014). As for emotional characteristics, extant research highlighted that youths high in CU traits are more likely to show reduced responsiveness to various types of emotional stimuli (and especially to signs of fear and distress) in others; this evidence was obtained using self-reported measures (e.g., self-evaluated physiological arousal), psychophysiological measures (e.g., eye-blink startle reflex), brain imaging (e.g., amygdala activation), and attentional measures (e.g., attentional orienting) (Barker, Oliver, Viding, Salekin, & Maughan, 2011; Fanti, Panayiotou, Lazarou, Michael, & Georgiou, 2016; Kimonis, Frick, Cauffman, Goldweber, & Skeem, 2012; Viding, 2004; Viding et al., 2012). These characteristics seem to be highly divergent from those of children high in conduct problems without elevated CU traits, which showed an enhanced emotional response to fear and distress in others (e.g., Viding et al., 2012). This increasing amount of results can be consistently read in line with studies indicating that children high in CU traits are characterized by lower levels of affective empathy toward others (Ciucci, Baroncelli, Golmaryami, & Frick, 2015; Frick & Ray, 2014). Lower levels of affective empathy in these individuals can be explained by attenuated functioning of anterior insula and amygdala that is related to reduced responsiveness to others' distress (Seara Cardoso, Sebastian, Viding, & Roiser, 2015). This explanation

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falls in the theoretical framework proposed by Bird and Viding (2014) for understanding empathy impairments in several disorders, including psychopathic tendencies (i.e. the Self to Other Model of Empathy - SOME). According to the SOME, empathy occurs through the interplay between one's own ability in processing others' social and emotional cues (i.e., the Situation Understanding System and the Affective Cue Classification System), and the representational systems concerning mental and affective states in the Self and in others (the Theory of Mind System and the Affective Representation System). The SOME model defines psychopathic tendencies as a disorder primarily characterized by atypical affective experiences in the Self (i.e., less distress emotions in the Self) which restrict the experiential understanding of others' distressing states (i.e., an impoverished Affective Cue Classification System), leading to a lack of emotional contagion and empathy (Bird & Viding, 2014).

1.2. Emotion awareness

Emotion awareness is an interesting construct in order to investigate emotional functioning concerning own emotions and the Self. It was defined as the process that allows to reflect upon own emotions: monitoring own emotions, differentiating between different emotions, locating their antecedents, acknowledging the physiological correlates of the emotion experience, valuing emotions as a positive or negative part of yourself, and regarding emotion experiences as private or interpersonal processes (Rieffe, Oosterveld, Miers, Meerum Terwogt, & Ly, 2008). Low levels of emotion awareness are associated to internalizing symptoms in children (i.e., somatic complaints, depression, worry and rumination; Rieffe et al., 2008). Emotion awareness is also related to alexithymia, the deficit in the abilities to identify and describe own feelings on the basis of both physiological activation and introspection (Nemiah, Freyberger, & Sifneos, 1976). Even if these two constructs are partially overlapping, they measure different features of the sensitivity to internal emotional states (Lane, 2000). Specifically, alexithymia and emotion awareness share attention to the ability in differentiating and describing different emotions; nevertheless the latter construct includes attentional, interpretative and attitudinal processes (e.g., the ability in locating antecedents of emotions, the way emotion experiences are valued, how own emotions should be expressed and communicated to others) (Rieffe & De Rooij, 2012). The investigation of emotion awareness in the context of CU traits appears a key issue because it is a critical component required for motivation to change (Zimmerman, 2001), thus treatment strategies for youths with high levels of CU traits could be improved considering their awareness about own emotional functioning.

1.3. The present study

To fill a gap in extant research, the goal of the present study was to investigate the associations between CU traits and a multidimensional measure of emotion awareness (i.e., self-perceptions of own tendency to differentiating own emotions and to be aware of their bodily manifestations, to attend and analyze both own and others' emotions, and to openly express and tell others own emotions). As for CU traits, we considered both a general measure and three specific dimensions (i.e., callousness, uncaring, and unemotional); this was important for both theoretical and clinical reasons, considering that specific dimensions of CU traits present some unique correlates (Ciucci, Baroncelli, Franchi, Golmaryami, & Frick, 2014; Essau et al., 2006). Specifically, callousness and uncaring capture dimensions of behavior in which others' emotions and the consequences of own behavior on others' feelings and wellbeing are central, whereas unemotional captures a dimension of behavior focused on arousal and expression of own emotions (Ciucci et al., 2014; Essau et al., 2006).

We predicted that CU traits were negatively related to all dimensions of emotion awareness. Specifically, we predicted that callousness and uncaring showed the strongest negative association with dimensions of emotion awareness concerning other emotions, whereas

unemotional was more strongly and negatively associated to dimensions of emotion awareness concerning own emotions. In testing the predictions, we took into account the presence of both internalizing and externalizing problems. As stated before, emotion awareness in children was found to be associated with internalizing symptoms (Rieffe et al., 2008). Moreover, in studying CU traits it is important to control for the level of externalized behavior problems to determine the unique associations with emotional variables (Ciucci et al., 2015; Frick et al., 2014).

Lastly, we paid attention to the possible moderating role of both gender and age, considering that previous studies highlighted their role in emotional and behavioral correlates to CU traits in youth (e.g., Ciucci et al., 2014; Essau et al., 2006). As for gender, we predicted that the hypothesized associations were stronger in girls, considering that Essau et al. (2006) found a positive association between CU traits in girls and internalizing tendencies. Moreover, research suggests that CU traits decrease during development in some children, while in others they become more pronounced (Pardini, Stepp, Hipwell, Stouthamer-Loeber, & Loeber, 2012), thus we hypothesized that the above-predicted associations were stronger in older preadolescents for which these traits may be more stable and solidified within personality domain.

2. Materials and methods

2.1. Participants and procedure

The sample consisted of 668 middle school students (338 girls; mean age = 12.89 years, SD = 0.92 years) from 37 classes of three middle schools located in Central Italy. Participants attended grade 6th ($n = 172$), 7th ($n = 241$), and 8th ($n = 255$). Almost all of the sample was Italian ($n = 612$, 91.62%); independently from nationality, all participants had good understanding of Italian language as reported by teachers. As for parents' education level, more than half of both fathers ($n = 377$, 56.44%) and mothers ($n = 420$, 62.87%) had earned a high school or university degree. Institutional review boards of the three involved schools approved all procedures, then parental written consent was obtained for each participant. All students were asked to provide assent before participation, and no incentive were given. Trained assistants administrated the questionnaires individually within classrooms during school hours.

2.2. Measures

2.2.1. CU traits

CU traits were assessed using the *Inventory of Callous-Unemotional Traits (ICU; Essau et al., 2006)*, a 24-item self-report questionnaire; students indicated how much each statement described them best, using a 4-point Likert scale from 0 (not at all true) to 3 (absolutely true). Its construct validity and reliability was supported in samples of different nationalities, including Italy (Ciucci et al., 2014); the factor structure implies a general ICU total score and three distinct factors: callousness (e.g., "The feelings of others are unimportant to me"), uncaring (e.g., "I try not to hurt others' feelings", reversed score), and unemotional (e.g., "It is easy for others to tell how I am feeling", reversed score). In this study, the Cronbach's alphas were 0.80 for ICU total score, 0.72 for callousness, 0.71 for uncaring, and 0.69 for unemotional.

2.2.2. Emotion awareness

Emotion awareness was investigated using the *Emotion Awareness Questionnaire (EAQ; Rieffe et al., 2008)*, a 30-item self-report tool that participants were asked to rate according to the degree to which each item describe them, using a 3-point Likert scale from 1 (not true) to 3 (true). The Italian version for children and adolescents (Camodeca & Rieffe, 2013) showed good psychometric properties and acceptable concurrent validity, and confirmed the original six-factor structure: differentiating emotions (e.g., "I am often confused or puzzled about what I am feeling", reversed score), verbal sharing of emotions (e.g., "I can easily

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