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Callous-unemotional traits and empathy in proactive and reactive relational aggression in young women



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ABSTRACT

Research on psychopathy and aggression in women is limited, especially relational aggression (RA). Studies on youth suggest unique associations between RA and callous–unemotional (C–U) traits (e.g., Frick & White, 2008). However, the role of C–U traits in adult RA remains unexamined, particularly functional subtypes of RA (reactive, proactive). Empathy deficits are associated with C–U traits and heightened RA. Based on prior work, we hypothesized that in young women, callous and uncaring tendencies would be related to proactive RA and to a lesser extent reactive RA, and that these relationships would be mediated by cognitive empathy deficits. Hypotheses were partially supported. Callous and uncaring traits were associated with proactive RA, and less so to reactive RA, and the latter association was mediated by cognitive empathy. Unemotional traits were not uniquely associated with RA. Study limitations and implications are considered.

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1. Introduction

Psychopathy, a constellation of personality traits characterized by affective (e.g., callousness), interpersonal (e.g., manipulativeness, dominance) and behavioral traits (e.g., impulsivity, antisociality, social deviance; Levenson, Kiehl, & Fitzpatrick, 1995), has been clearly identified as a risk factor for physical aggression (Porter & Woodworth, 2006). In contrast, far less is known about psychopathy in women (Verona & Vitale, 2006) or its role in more covert forms like relational aggression (RA), which involves intent to damage another person's relationships or social status by means such as ostracism or rumor-spreading (Werner & Crick, 1999). Emerging evidence suggests the construct of psychopathy generally holds for women, but that gender differences in biology, socialization, and evolutionary influences may contribute to differences in its psychological features and behavioral manifestations in women, including emotional instability and attempts to control others using relational (vs. physical) means (Kreis & Cooke, 2011). Studies of relationships between specific psychopathic traits and types of aggression in women are thus integral to improving our general understanding of psychopathy and antisocial behavior in women.

Whereas men report more physical aggression than women (Kerig & Stellwagen, 2010), women evidence similar levels of RA as men in community (Murray-Close, Ostrov, Nelson, Crick, &

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Coccaro, 2010) and college (e.g., Czar, Dahlen, Bullock, & Nicholson, 2011) samples. Others have suggested that psychopathy may be an important predictor of antisocial behavior in women, particularly RA (Miller & Lynam, 2003; Verona & Vitale, 2006).

Psychopathic traits vary on a continuum in community samples (Edens, Marcus, Lilienfeld, & Poythress, 2006). The relationship between psychopathy and more subtle forms of aggression like RA may be most evident among those who are high in psychopathy, yet successful enough to avoid contact with the criminal justice system (Czar et al., 2011; Schmeelk, Sylvers, & Lilienfeld, 2008). The current study builds on this limited body of literature, by investigating the role of callous–unemotional (C–U) traits, a core feature of psychopathy, in functional subtypes of RA in young women. We also consider two types of empathy (cognitive, affective) as potential mediators of associations between C–U traits and RA.

While there are few studies on functional subtypes of RA (e.g., Marsee et al., 2011), physical aggression is commonly differentiated into two subtypes; proactive (instrumental, "cold-blooded") and reactive (defensive, "hot blooded" response to perceived provocation; Dodge & Coie, 1987). Measures of these subtypes typically overlap, yet they are conceptually distinct, showing unique correlates (e.g., White, Jarrett, & Ollendick, 2013).

C-U traits have been investigated primarily in youth, recently using the Inventory of Callous Unemotional Traits (ICU; Frick, 2003). The ICU identifies three facets of C-U traits; *callousness* (i.e., lack of remorse, guilt, and empathy), *unemotional* (i.e., lack of

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emotional expression), and *uncaring* (i.e., lack of concern for others or personal performance; Essau, Sasagawa, & Frick, 2006). Whereas callous and uncaring facets predict aggression in youth (e.g., Essau et al., 2006; Fanti, Frick, & Georgiou, 2009), the unemotional facet does not, relating instead to sensation-seeking (Kimonis, Cross, Howard, & Donoghue, 2013). Adolescence research demonstrates particular associations between RA and C–U traits (Frick & White, 2008). Specifically, proactive RA is uniquely associated with C–U traits (Marsee & Frick, 2007), whereas reactive RA is unrelated to C–U traits after controlling proactive RA (Marsee et al., 2011).

In adults, the relationship between RA and psychopathy is somewhat unclear, as indicated in recent studies of undergraduate students. Schmeelk et al. (2008) found that impulsive antisociality features predict RA after controlling overt aggression, in contrast to C–U-type traits like coldheartedness. However, Coyne and Thomas (2008) found indirect aggression more strongly related to callous and manipulative traits, whereas overt aggression related to antisociality. Finally, (Czar et al. 2011) found that psychopathy was broadly associated with RA. These discrepancies may be influenced by the broad focus on complex psychopathy factors, versus particular features, such as C–U traits, as well as a lack of differentiation of subtypes of aggression (reactive/proactive), which tend to be uniquely associated with particular components of psychopathy (e.g., Reidy, Zeichner, Miller, & Martinez, 2007).

To our knowledge, no published research exists on specific relationships between C-U traits and RA in women. However, work on C-U traits has recently been extended upward through validation studies of the ICU in adults (Byrd, Kahn, & Pardini, 2013; Kimonis et al., 2013). (Byrd et al. 2013) found that callous and uncaring tendencies in men predict more interpersonal manipulation and nonviolent controlling acts against their partners, suggesting these particular C–U facets may predispose to RA. In male youths, these traits are associated not only with proactive aggression but also negative affect (Latzman, Lilienfeld, Latzman, & Clark, 2012), which in the form of anger or irritability could also exacerbate reactive aggression. Thus, our general goal was to further investigate the role of these specific C-U traits in RA in young women. We were particularly interested in the experience of proactive and reactive RA in relation to C–U traits in young women who were functioning successfully in a college setting, based on the suggested link between "successful" psychopathy and subtle forms of aggression like RA (Czar et al., 2011; Schmeelk et al., 2008). Consistent with the child literature, we hypothesized that callous and uncaring tendencies in young women would predict proactive RA, and to a lesser extent, reactive RA.

We also examined how empathy affects relationships between C–U traits and RA in women. Although C–U traits and lack of empathy are not synonymous, they are related (Muñoz, Qualtar, & Padgett, 2011; Pardini, Lochman, & Frick, 2003). Empathy is commonly divided into two components. Affective empathy refers to vicariously experiencing other's emotions, while cognitive empathy entails labeling and identifying emotional states in others (e.g., perspective-taking, theory of mind; Reniers, Corcoran, Drake, Shryane, & Völlm, 2011). C–U traits inversely relate to both components (Muñoz et al., 2011; Pardini et al., 2003).

Although evidence suggests high cognitive empathy may facilitate engagement in covert manipulation and harm like RA (e.g., Sutton, Smith, & Sweetham, 1999), others suggest an inverse relation between empathy and aggression (Loudin, Loukas, & Robinson, 2003; Yeo, Ang, Loh, Fu, & Karre, 2011). The social information-processing model (Crick & Dodge, 1994) proposes that hostile attribution biases promote aggression, including indirect forms like RA (Crick, 1995). Individuals who lack cognitive empathy, particularly perspective-taking abilities, may be more prone to hostile or incorrect attributions and thus aggression. This view is supported in two college samples (Loudin et al., 2003; Richardson,

Hammock, Smith, Gardner, & Signo, 1994). Similarly, Yeo and colleagues (2011) found low cognitive empathy associated with indirect aggression in young males. Interestingly, each study found weaker associations between affective empathy and RA than between cognitive empathy and RA. While these findings are illuminating, to our knowledge, no published studies have yet considered how empathy affects the association between C–U traits and RA in youth or adults.

Based on this body of prior work, we hypothesized that, in young women, C–U traits are positively related to proactive RA toward peers, but that this association holds to a lesser extent for reactive RA as well. Specifically, we expected these associations to exist for callous and uncaring facets but not the unemotional facet. We further hypothesized that the relationship between C–U traits and RA is mediated by low cognitive empathy, but we also considered affective empathy separately.

2. Methods

2.1. Participants

Participants consisted of all women on whom relevant data were available (N = 377) from a larger sample of male and female undergraduates at a public southeastern U.S. university who were offered extra credit in various psychology courses for participation. Ages ranged from 18 to 24 years (M = 19.37, SD = 1.30), and participants were 84.1% White, 8.2% Asian, and 7.7% multiracial or other.

2.2. Measures

Participants completed the measures below in the same order of administration (as listed below) as part of a larger, online survey.

2.2.1. Empathy

Interpersonal Reactivity Index (IRI; Davis, 1980). The 28-item IRI has been extensively validated in adolescent and adult samples (e.g., Konrath, O'Brein, & Hsing, 2011). Subscales for Empathic Concern (EC) and Perspective Taking (PT), were used as measures of affective and cognitive empathy, respectively, as in prior studies (e.g., Loudin et al., 2003; Mayberry & Espelage, 2007). In women, studies show a positive correlation between EC and PT ranging from r = .30-.38 (e.g., Davis, 1980). In our study, Cronbach's α were .74 (EC subscale) and .80 (PT subscale).

2.2.2. Callous-unemotional traits

Inventory of Callous–Unemotional Traits (ICU; Frick, 2003). The ICU is a 24-item self-report questionnaire assessing C–U traits. The ICU has been validated in adult samples (e.g., Byrd et al., 2013; Kimonis et al., 2013). In the present study, Cronbach's α were .74, .82, and .80 for Callousness, Unemotional, and Uncaring scales, respectively.

2.2.3. Relational aggression

Self-Report of Aggression and Social Behavior Measure (SRASBM; Morales & Crick, 1998). The SRASBM is a 56-item self-report questionnaire indexing proactive and reactive peer RA. It has been validated in adult samples including college students (e.g., Bailey & Ostrov, 2007; Murray-Close et al., 2010; Ostrov & Houston, 2008). In the present study, Cronbach's α were .81 (proactive RA) and .80 (reactive RA).

2.3. Procedure

The study was approved by a university institutional review board. Participants gave informed consent prior to completing all

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