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The Effect of Gender and Age on the Dark Triad in Helping Professions – the Comparison with the General Population



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ABSTRACT

Due to the factorial approach to personality traits, helping professionals, similarly to all humans, resp. other workers in any area, dispose whole range of personality traits – adaptive and maladaptive. Since helping professionals are supposed to help others, the aim of the present study was the exploration of three maladaptive personality traits - Machiavellianism, subclinical narcissism, and subclinical psychopathy on this specific sample considering gender differences comparing them to the general population. 312 participants from different sectors of the helping professions - pedagogical workers, healthcare workers, rescue workers, social workers, and the general population have participated. Short Dark Triad - SD3 has been administered (Jones & Paulhus 2014; Čopková & Šafár, 2021). The main result showed that helping professionals scored significantly higher than the general population in psychopathy. The testing of between-subject variability while controlling the effect of gender and age indicated that healthcare workers and rescue workers scored significantly higher than the general population in psychopathy. There were also gender differences detected, men in both samples (general and helping) scored higher in Dark Triad traits. The results support the assumption that even among helping professionals, who are usually expected to be selfless and prosocial, there are individuals who are attracted by the other side of pursuing this type of profession - the power they have over the person

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they provide help to. Based on several limitations the study is considered as a pilot one that might focus the attention on this understudied topic.

KEY WORDS: Dark Triad, Machiavellianism, subclinical narcissism, subclinical psychopathy, helping professions

Introduction

Helping professions are defined as the type of occupation where helping others is the core element. By helping others one could understand guidance, protection, heal, and health improvement of those who found themselves in unpleasant life situations (Chart et al., 2014; Kopřiva, 1997; Musil, 2004). On the other hand, it is not rare to experience unpleasant medical staff who seems to have no interest in people's well-being and tries to get rid of them as quick as possible (Weber, 2004). Or teachers who like to show off their great personality, but if someone tries to oppose them, uncontrollable anger comes from them (Bańka & Orłowski, 2012). Research on the personality of helping professionals is not new. However, a common tendency is to put more emphasis on adaptive personality traits - its "bright" side – represented by the Big Five or Light Triad (Kaufman et al., 2019). High scores in agreeableness and conscientiousness were positively associated with a desire to help, while high scores in neuroticism correlated with decisional uncertainty about choosing the helping profession (Upmane, et al., 2016). Other studies (BACP, 2018; Géringová, 2011; Heinonen et al., 2012; Kopřiva, 1997; Wampold & Carlson, 2011) found other significant predictors in the helping process - flexibility, empathy, willingness, patience, or kindness.

Above mentioned studies not only summarize the desirable qualities the helping workers typically exhibit, but also provide requirements of what qualities helping workers are supposed to have.

However, helping professionals, similarly to all humans, i.e. other workers in any area, have a whole range of personality traits – adaptive and maladaptive. As maladaptive personality traits, the so-called "dark side" referred by Jones and Williams (2002) as Dark Triad – Machiavellianism, subclinical narcissism, and subclinical psychopathy is understood. This assumption is based on trait theories claiming that personality traits are dimensions that all people rate on a spectrum. Another argument that supports the importance of exploring the dark sides of personality in helping

professionals is that the latter side of the motivation to pursue a helping profession and the trends behind it cannot be overlooked. Even people strongly interested in helping others may abuse the asymmetry of social roles in the helping process (Guggenbuhl-Craig, 2007). The dark motivation for the performance could be saturated by hidden selfish goals and an effort to show off one's own personality for the perpetual need for admiration or the desire for power, where there are egoistic goals disguised by the need to help (Bakir et al., 2003). There are other studies proving that Dark Triad traits play no negligible role in the performance of the helping profession (Babiak, 1995; Bakir et al., 2003; Bucknall et al., 2015; Pegrum & Pearce, 2015; Selingson, 1992). Based on the aforementioned studies on motivation to practice the helping profession (Upmane et al., 2016; Waterman, 2002) and other studies comparing helping professionals and the the general population in adaptive traits (Chibnall, et al., 2009; Meit, et al., 2009) we assume that a career in this area is chosen mainly by people who, compared to the general population, show a higher level of prosociality and personality traits associated with it. But we were also interested in the issue of differences in the personality traits of helping professionals and the general population from the other side. We aimed to find out if helping professionals differ from the general population in Dark Triad traits by considering the gender aspect, because there is evidence that occupational choice is still strongly associated with gender (Watt, 2010).

Dark Triad and Helping Professions

The helping process is an interaction between a professional and a client that is supposed to improve the client's conditions on the psychological and physical level (Chart et al., 2014). By some authors, the helping profession is seen as a by-product of the weakening role of the family or service provided by other classical social support systems. Helping professions thus replace their role in institutionalized form (Matoušek, 2003). Musil (2004) states that the common feature of helping professions is to offer the necessary help while overcoming difficult life situations and circumstances. During the helping professional and the client is the main working element and the helping is the main job description (Kopřiva, 1997).

Géringová (2011) includes doctors and other medical staff, psychologists, social workers, psychotherapists, teachers, speech therapists, and policemen, rescuers in helping professions.

A prerequisite for the performance of certain professions is talent, for others, particular practical skills are required and for others certain personal prerequisites. The worker's main tool is their personality. However, it is less clear that in professions requiring certain personality traits, those traits can predict the success or failure of professional performance (Kopřiva, 1997).

The person who comes to the helping professional tries to find help and support. Whether they approach doctors, social workers, psychologists, or others, seeking person experiences a problem. This problem automatically puts the person in a subordinate role compared to the helping professional. In this situation, two motivational forces may drive the approach of the helping professional – pure interest in the improvement of the client's condition (Kopřiva, 1997), or the desire to control, manipulate and be perceived as the one who helps and is admired for that (Guggenbuhl-Craig, 2007).

Research findings in this area have provided a full list of personality traits and features that the helping professional is supposed to possess. For teachers, these requirements are oriented towards self-knowledge, understanding, and sensitivity to pupils' needs, charm and organizational skills (Géringová, 2011; Kopřiva, 1997). For psychologists, counselors and psychotherapists, it is sincerity, decency, honesty, resilience, humility, wisdom, courage, acceptance, warmth, interpersonal perception, focus on others, affective modulation, expressivity, empathy, and receptivity (BACP, 2018; Heinonen et al., 2012; Wampold & Carlson, 2011). Among social workers, the most valued are moral integrity, humanity, personality maturity, prosociality, empathy, teamwork, initiative, dynamism, social feeling, sense of humor, and life optimism (Levická, 2007; Ružička, 2010; Schavel et al., 2008). As far as medical staff is concerned, communication and social skills are appreciated by doctors, while affection, patience, empathy and expertise by nurses. Carers should be patient, flexible, hardworking, responsible, honest, sociable, knowledgeable and have a good judgment (Géringová, 2011; Kopřiva, 1997).

On the other hand, the latter side of the motivation to pursue a helping profession and the tendencies behind it could not be overlooked. Even people strongly interested in helping others may abuse the asymmetry of social roles in the helping process (Guggenbuhl-Craig, 2007). The dark

motivation for the performance can be saturated by hidden selfish goals and an effort to show off one's own personality for the perpetual need for admiration or the desire for power, whereas there are egoistic goals disguised by the need to help.

Machiavellianism is typical of emotional separation, manipulative behavior, and achieving goals regardless of others (Al Aïn et al., 2013). Machiavellists see other people as very untrustworthy and negative. They share private and false information about their life in order to get closer to their victims. On the surface, they act like introverts who have a negative view of the world, and their priority is to care only for their own well-being. They are very good liars, but their manipulation is so clever that ultimately they cannot be regarded as totally evil, because they are really skillful in distortion of rules (Wilson et al., 1996).

Subclinical narcissists love themselves, but their self-confidence is very fragile. They see themselves as superior, perfect, important, and infallible. On the other hand, any negative feedback harms their self-image. The basic mechanism that drives them is their constantly lusting ego, whose basic motive for survival is the constant validation of their own value by their social environment. Thus, narcissistic individuals' lives are constantly revolving around their value, which is unstable and depends on the amount of positive responses from society. So, it is not surprising that life with narcissists is very exhausting, although in the short term they may seem charming or even pleasant (Spain et al., 2013), in the long term they have difficulty in maintaining long-term friendships, confidence or they lack concern for others (Morf & Rhodenwalt, 2001).

Subclinical psychopaths are impulsive, not empathetic, not caring, emotionally shallow, and dominant (Forsyth & O' Boyle, 2012; Paulhus & Williams, 2002; Rauthmann & Kolar, 2012).

However, there are still relatively few research findings on the dimensions of the Dark Triad in the sample of helping professions.

Due to Selingson (1992), psychologists often show their narcissistic personality structure. The dangers of narcissistic therapists are the presentation of their insight from the narcissistic world to the therapeutic process, in which they put their needs above those of the client (that should be the priority). Their underdeveloped ego can disrupt the view of the whole social situation, thus limiting a critical view of the client's problems.

The research of Bakir et al. (2003) was based on the assumption that doctors and other medical staff are naturally expected to be kind and helpful

toward the patients. However, at the same time, researchers were aware of the contrast between these expectations and reality. The physician should be able to put the patient's interests above their own, which is almost impossible in the case of a machiavellistic, psychopathic and narcissistic personality, and therefore the physician's behavior may be dangerous to the patient. Bucknall et al. (2015) attempted to survey these aversive traits in medical staff, but the results were not significantly different from the prevalence of these traits in the general population. More detailed analysis revealed that surgeons scored significantly higher in narcissism and nurses in psychopathy. In their research, Pegrum and Pearce (2015) focused only on the degree of subclinical psychopathy in physicians, significant results were reported again in surgeons' sample and, surprisingly, in pediatricians. In interpreting the results, the authors point out how much the physician's work is related to the central characteristics of subclinical psychopathy such as depersonalization, emotional coldness, or increased resistance to stress. Also, findings from comparing the incidence of Machiavellianism between medical students and practitioners themselves, i.e. doctors were interesting. The aspirants for the medical profession showed a higher level of Machiavellianism, which decreased with the length of practice (Bratek et al., 2015).

Adams and Maykut (2015) were interested in the potential dangers if nurses and other medical staff have dark traits. Patients' statements that nurses are careless and insensitive are not rare. Failure to respect the human side of the patient can lead to direct physical or indirect psychological consequences.

Research of the Dark Triad has not skipped pedagogues. Lenkov, Rubtsova and Nizamova (2018) examined Machiavellianism, subclinical narcissism, and psychopathy among teachers in kindergardens, elementary and secondary schools, and universities. University teachers have shown the highest levels of all dark personality traits. Compared to elementary and secondary school teachers, university teachers were significantly higher in Machiavellianism and narcissism. Psychopathy was significantly higher in elementary and secondary school teachers.

However, in some cases, the presence of personality traits typical of the Dark Triad features is desirable for the pursuit of the helping profession, especially when it comes to rescuing services. For example, in the policemen, characteristics of subclinical psychopathy such as high self-esteem, stress resistance, courage or low anxiety, are welcome features due

to the specific demands of the profession, while working as defensive mechanisms in facing the traumatic experiences (Babiak, 1995).

Another thing that comes into question is the gender aspect. Despite of the attempts to social progress, there is still occupational gender stereotyping present. Men are more likely to engage in STEM occupations (Science, Technology, Engineering, Mathematics) (Watt, 2010), while women usually choose socially-oriented occupations. For example, Farguhar (1998) claims the teaching profession is still considered one of the so-called gendered occupations (Kelleher et al., 2011). The same problem is in professions such as social work, nursing and psychology (Wilbourne, 2010), because females usually engage in such kinds of occupations as arts, humanities, education and helping professions (Richardson & Watt, 2006). On the other hand, rescue workers are usually men (Huffman et al., 2015; Miller et al., 2003; Sinden, 2013). Except for gender stereotypes, Watt (2010) lists several factors that may affect the occupational choice based on gender – social barriers and supports, parents, peers, teachers, media, ability, perceived abilities, and motivation. The family structure as the factor that influences how risky an occupation one will choose was discussed in the work of DeLeire and Levy (2004). In their research, Grazier and Sloane (2007) connected occupational choice with gender and risk aversion. The authors emphasize, that men are less risk aversive than women. It suggests that women usually choose safer jobs. These findings support the assumption that occupational choice is affected by personality traits too. In the context of gender and our research focus, we found Dark Triad traits necessary to discuss, because there was association between mentioned traits and risk behavior found (Crysel et al., 2013). As Jonason and Davis (2018) found, Machiavelliansim, subclinical narcissism, and subclinical psychopathy were associated more with masculinity than femininity.

Method

Sample

In the study, 312 Slovak respondents have participated. Their age ranged 18 - 65 years ($M_{age} = 36.23$; SD = 10.79). Females represented 70.2 % of all respondents (N = 219), aged 18 - 65 years ($M_{age} = 35.18$; SD = 11.77). Males 29.8% (N = 93), aged 20 - 62 ($M_{age} = 38$; SD = 7.74). The research sample was divided by the working area into the general population

sample (without job specification) and helping professionals population sample. The general population consisted of 161 participants (51.6 %) aged 18-54 years ($M_{age}=34.98$; SD = 9.63), 68.9 % females (N = 111, $M_{age}=34.42$; SD = 10.26) and 31.3 % males (N = 50, $M_{age}=40.64$; SD = 4.4). The helping professionals population sample consisted of 151 participants (48.4%) aged 19-65 years ($M_{age}=37.13$; SD = 11.83), 72.5 % females (N = 108, $M_{age}=38$; SD = 12.57) and 27.8 % males (N = 43, $M_{age}=34.93$; SD = 9.53). Four groups of helping professionals were identified: pedagogical workers (PG) - kindergarten teacher, elementary school teacher, secondary school teacher (47.7 %); healthcare workers (HC) - doctor, nurse, physiotherapist, nurse, sanitary, dental technician (21.9 %); rescue workers (RS) - policeman, fireman, rescuer, soldier (23.8 %); social workers (SW) - social worker, psychologist, special pedagogue (6.6 %).

Convenience and purposive sampling methods have been used.

Procedure and Tool

Short Dark Triad (Jones & Paulhus 2014; for Slovak adaptation see Čopková & Šafár, 2021). Machiavellianism ("Most people can be manipulated."), narcissism ("I insist on getting the respect I deserve.") and psychopathy ("I like to get revenge on authorities.") are all represented by 9 items (27 items in sum). 5-point Likert scale (1 = strongly disagree; 5 = strongly agree) is used. 5 reverse-coded items must be reversed. The internal consistency calculated by Cronbach alpha coefficient was as follows - $\alpha_m = 0.754$; $\alpha_n = 0.680$; $\alpha_p = 0.725$.

Data were electronically (Google Docs-Form) collected from March to April 2019. The heads of schools, kindergardens, counselling centres, healthcare centres, police and fire departments were asked to participate. After their acceptance, they were asked to disseminate the questionnaire to their employees. Respondents expressed their consent by completing the questionnaire. The participation was voluntary and anonymous. The data analysis was conducted in IBM SPSS Statistics 21 and JASP 0.14.1.

The exploratory research design has been used. No missing data were noticed in the dataset. Data were normally distributed (Kolmogorov-Smirnov test - p < 0.05; skewness and kurtosis < \pm 1). Cronbach's alpha (Cronbach α) was used as the indicator of internal consistency. We tested between-subject variability by ANCOVA that allowed the control of additional variables that might influence scores on the dependent variable. Cohen's d was used as an indicator of the effect size.

Results

At first, we compared the average scores participants in both groups – helping professionals and the general population - have reached on scales of the Short Dark Triad - Machiavellianism, subclinical narcissism, and subclinical psychopathy. Descriptive indicators (Table 1) showed that helping professionals scored higher in Machiavellianism than the general population. Opposite, descriptives suggested that the general population scored higher in narcissism compared to helping professionals. Surprisingly, in psychopathy, helping professionals scored higher than the general population. Thus, we aimed to test the significance of assumed differences. Whereas our research sample was unbalanced regarding gender and age, analysis of covariance was conducted to compare differences between groups in Dark Triad traits along with controlling the effect of gender and age on between-subject variability. The results have shown that helping professionals did not differ from the general population in Machiavellianism [F (1,308) = 0.948; p = 0,331, $\eta^2 = 0.003$]. There was a significant, but weak effect of gender on Machiavellianism (p < 0,001; $\eta^2 = 0,053$). Men scored significantly higher than women [F (1,308) = 7,114; p = 0,008, η^2 = 0,022]. Specifically, men in general sample scored higher than women in helping sample (t = -3,057; p = 0,002); men in general sample scored higher than women in general sample (t = -4,783; p < 0,001).

In narcissism, helping professionals did not differ from the general population as well [F (1,308) = 0,789; p = 0,376; η^2 = 0,003] and there was a significant, but weak effect of gender on narcissism (p = 0,001; η^2 = 0,035). In general, there were no gender differences [F (1,308) = 0,056; p = 0,813, η^2 = 0,00]. However, post hoc testing showed that men in general sample scored higher than women in helping sample (t = -3,067; p = 0,002); men in general sample scored higher than women in general sample (t = -2,544; p = 0,011); and men in helping sample scored higher than women in helping sample (t = -2,076; p = 0,039).

Opposite, according to our results helping professionals scored significantly higher than the general population in psychopathy [F (1,308) = 9,563; p = 0,002; η^2 = 0,030]. There was significant effect of gender (p < 0,001; η^2 = 0,090) and age (p = 0,006; η^2 = 0,024) on psychopathy. However, effect of gender and the kind of profession was not significant [F (1,308) = 0,358; p = 0,550, η^2 = 0,001]. Post hoc testing suggested that men in helping sample scored higher than women in general sample (t = -5,500; p < 0,001); men in general sample scored higher than women in general

sample (t = -3,330; p < 0,001); and men in helping sample scored higher than women in helping sample (t = -3,970; p < 0,001).

			M (SD)	F	р	η^2	Post hoc
MACH	G	161	2.84 (0.73)				IIC > DC
	PG	72	2.78 (0.64)				HC > PG
	HC	33	3.14 (0.93)	2,084	0,083	0,027	HC > RS HC > SW
	RS	36	3.05 (0.63)				HC > G
	SW	10	2.52 (0.44)				11C > 0
	Н	151	2.90 (0.71)				
	\mathbf{G}	161	2.61 (0.65)				
	PG	72	2.52 (0.55)				
	HC	33	2.39 (0.57)	0,695	0,596	0,009	
	RS	36	2.71 (0.51)				
	SW	10	2.27 (0.42)				
	H	151	2.54 (0.54)				
PSY	\mathbf{G}	161	1.85 (0.56)				
	PG	72	1.88 (0.64)				HC > G
	HC	33	2.03 (0.85)	2,722	$0,030^{*}$	0,034	RS > G
	RS	36	2.37 (0.74)				K3 > U
	SW	10	1.92 (0.52)				
	Н	151	2.03 (0.73)				

Table 1: ANCOVA – Dark Triad and profession

Note: MACH=Machiavellianism; NAR=narcissism; PSY=psychopathy; H=helping profissionals population; G=the general population; PG=pedagogy workers; HC=healthcare workers; RS=rescue workers; SW=social workers; N=number of participants; M=mean; SD=standard deviation; N=number of participants; *p<0.05

Source: Author based on research results

Due to the surprising result suggesting that in psychopathy helping professionals scored significantly higher than the general population, we decided to compare the average score of specific helping professions with the general population. Again, ANCOVA was conducted with gender and age as covariates. Descriptives (Table 1) showed that in Machiavellianism, healthcare workers and rescue workers scored higher than the general population. Results showed no significant differences, p value was above the criterion 0,05 even it was close. However, post hoc testing suggested that healthcare workers scored higher than rescue workers, the general population, pedagogical workers and social workers (presented in a row

according to means adjusted to covariate). Due to this result, it would be appropriate to conduct additional research. Also, there was significant effect of gender on Machiavellianism (p < 0,001; $\eta^2 = 0,046$). Similarly, in narcissism, rescue workers scored higher than the general population. Again, statistical analysis didn't show any significant differences. But there was significant effect of gender on narcissism (p = 0,009; η^2 = 0,022). In psychopathy, means suggested that pedagogical, healthcare, rescue and social workers scored higher than the general population. This is the main reason we were interested if there is a specific group of helping professionals that might determine significantly higher scores in the helping group compared to the general population and if specific groups of helping professionals differ in Dark Triad traits as well. As we assumed, ANCOVA showed that the general population and groups of helping professionals significantly differ in psychopathy. Results of post hoc testing indicate that rescue workers and healthcare workers scored significantly higher in psychopathy than the general population. Both, gender (p < 0,001; η^2 = (0.053) and age (p = 0.011; η^2 = 0.021) had significant effect on psychopathy. For easier orientation, the above-mentioned results are presented graphically in Figure 1.

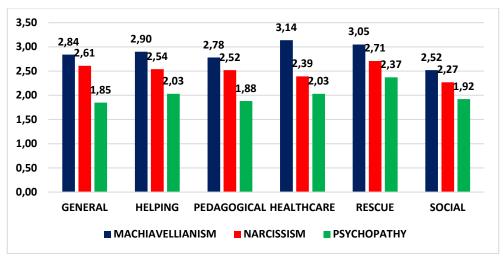


Figure 1: Dark Triad in the general population and helping professions

Source: Author based on research results

Conclusion

The goal of the present study was to explore three maladaptive personality traits - Machiavellianism, subclinical narcissism and subclinical psychopathy, on a sample of helping professionals and compare them with the general population with considering the gender aspect. What at first glance may seem paradoxical, or even absurd, ultimately has a rational explanation.

In relation to the incidence of aversive personality traits in helping professionals, the basic question that interested us was whether the helping professionals differ significantly from the general population. We assumed that helping professionals should have a lower degree of aversive traits than the general population, based on the demands placed on the prosocial side of their personality (BACP, 2018; Géringová, 2011; Heinonen et al., 2012; Kopřiva, 1997; Wampold & Carlson, 2011). Surprisingly, this assumption was not confirmed. Helping professionals scored higher in psychopathy than the general population. This result suggests that helping professionals may not have more adaptive personality traits than the rest of the population. It also supports the assumption that the power helping professional has over the client (Guggebnbuhl-Craig, 2007), the status that the performance of the helping profession brings or satisfaction the need for admiration (Morf & Rhodenwalt, 2001) can really attract even those helping individuals whose personality equipment does not reflect the expected standards. On the other hand, it is understandable that having aversive personality traits is important in the performance of the helping profession. Helping workers need to be stronger and tougher, as they face challenging situations on a daily basis on which people's lives depend on physical, mental and spiritual levels.

In our research, healthcare workers showed a significantly higher rate of psychopathic tendencies than the general population. This result is similar to the results of Pegrum and Pearce (2015), who identified a significant incidence of subclinical psychopathy in surgeons and pediatricians. In the case of surgeons, this is not so surprising if we consider that surgical operations are risky for the patient's life, as is the work of a surgeon, which clearly requires emotional distance. Similarly, it is not natural for any human to cut into another human being, not everyone is able to do so. Therefore, surgeons must have a lot of control over the emotions involved in the performance of their profession. Human life depends on them. In the devolved meaning, one could say that social workers, and especially

psychologists, are "soul surgeons" and it is also necessary for them to stay emotionally distant from clients. Not only for the well-being of the client but also for their own well-being. Perhaps that is the reason why they scored significantly higher in our research than teachers who, on the contrary, are expected to have a human and warm attitude towards pupils.

According to our findings, rescue workers showed significantly higher psychopathic tendencies than the general population. At the first glance, these results may be worrying, but if we look more closely at the work of police, firefighters, soldiers, and rescuers, it is obvious that in certain situations it is clearly desirable that they draw on the dark corners of their personalities (Babiak, 1995). As they experience tense situations involving death, injuries, tragedies, conflicts, threats to life and property in their work, it is in their interests and in the interest of society to be able to cut off emotionally, to deal with situations sometimes in an inhumanly cold manner, not to be involved too much in interpersonal relationships. They must exercise their power quickly and without emotion, when necessary, as they often make decisions about life and death. On the other hand, this profession guarantees them some social prestige, which is demonstrated by the wearing of uniforms, presentation in the media, thus ensuring a positive response from the others. By having human lives in their hands, they can acquire a sense of superiority. The search for excitement, action, and new experiences beyond the everyday experience can all meet the needs of individuals with machiavellistic, narcissistic and psychopathic features.

As expected, in our sample, males were underrepresented. It reflects the fact, that men are less likely to choose the helping profession (Watt, 2010). Additionally, gender was a significant covariate of all results which supports previous findings related to the role of gender in Dark Triad traits (Jonason & Davis, 2018; Jones & Paulhus, 2014). Despite the gender disproportion of general and helping samples, women scored lower in all Dark Triad traits. Together with gender, age was a significant covariate in psychopathy. Klimstra et al. (2020) found positive age trends of dark traits in adolescence and negative in adulthood which suggests that the level of dark traits decreases with age.

Obviously, there are some limitations present in this study. First of all, we did not control the occupation of the general population sample so there is a chance some helping professionals were included. Different approaches to the definition of helping profession caused the problems with the categorization. Also, our sample consisted of many different professionals

so there was a need to create broader groups of helping professionals with a similar focus. Also, gender proportion in our sample was not equal, but it is necessary to say, we were not interested in gender differences. Instead of this, we controlled the effect of gender on our dependent variables. Of course, we admit that testing a gender-balanced sample could bring different results. We see the reason for gender disproportion in our research sample in the feminisation of the teaching profession (Farquhar, 1998) because teaching is still considered one of the so-called gendered occupations (Kelleher et al., 2011). The same problem we perceive in professions such as social worker, nurse and psychologist (Wilbourne, 2010). Since rescue workers are usually men (Huffman et al., 2015; Miller et al., 2003; Sinden, 2013) and at the same time they were not strongly represented in our sample, the result is gender disproportion. Also, Cronbach's alpha value in the narcissism subscale was lower than recommended 0.7. As Pallant (2011) states, Cronbach's alpha is sensitive to the number of items on the scale. If there are less than 10 items, lower reliability coefficients are acceptable. The narcissism subscale in Short Dark Triad consists of 9 items. Based on several limitations we consider this study as a pilot one that might focus the attention on this understudied topic.

In spite of these limitations, the study pointed out that even among helpers, who are naturally expected to act prosocial, we can find individuals attracted by the other side of pursuing this type of profession - the power they have over the person they are helping and supporting. In the future, it is important, in the light of the Dark Triad, to address specific helping professions and to examine possible risks that individuals exhibiting maladaptive personality traits present to their clients.

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