

# WHO'S AFRAID OF COMPASSION? FEARS OF COMPASSION PARTIALLY MEDIATE THE RELATIONSHIPS OF INSECURE ATTACHMENT AND ENTITLEMENT WITH PROSOCIALITY AND AFFECTIVE EMPATHY

ALICE LUCARINI

GIULIA FUOCHI

ALBERTO VOCI

UNIVERSITY OF PADOVA, ITALY

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The aim of this study was to test the mediating role of three types of fear of compassion (FoC) — for others, from others, and for self — in the relationships that insecure attachment (anxious and avoidant) and psychological entitlement have with prosociality and two dimensions of affective empathy (i.e., empathic concern and personal distress). Structural equation modeling (SEM) was conducted on cross-sectional correlational data, employing a sample of Italian adults ( $N = 705$ ). Results showed that both types of insecure attachment are negatively related to empathic concern and prosociality via FoC-for others. Entitlement is negatively related to empathic concern and prosociality via FoC-for others. All predictors are positively related to personal distress via FoC-for self. Findings suggest that fears of compassion may act as a bridge between individual differences grounded in clinical psychology and social psychological variables. From a clinical perspective, dealing with fears of compassion could help break the link between intraindividual maladaptive dispositions and issues regarding interpersonal aspects of the self.

Keywords: Fears of compassion; Empathy; Prosociality; Attachment; Entitlement.

*Correspondence concerning this article should be addressed to Alberto Voci, Department FISPPA – Section of Applied Psychology, University of Padova, Via Venezia 14, 35131 Padova (PD), Italy. Email: alberto.voci@unipd.it*

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The detrimental implications that insecure attachment and entitlement have for empathy and prosociality are well-established (Campbell et al., 2004; Mikulincer et al., 2005). Attachment avoidance, characterized by discomfort with expressions of need and dependence, is negatively related to prosocial behaviors and other-oriented empathic responses and attitudes (e.g., Mikulincer et al., 2005). Attachment anxiety is positively related to high personal distress in the face of others' suffering (e.g., Jaireman et al., 2002), whereas its relationship with affective empathy is ambivalent: anxiously attached individuals could show either higher levels of empathic responses, possibly due to emotional reactivity triggered by people in distress, or lower levels of empathy and prosociality, due to self-focused worries interfering with the perception of others' needs (e.g., Mikulincer et al., 2005; Shaver & Mikulincer, 2002). Entitlement, a "stable and pervasive sense that one deserves more and is entitled to more than others" (Campbell et al., 2004, p. 31), is positively related to competitiveness and selfish behavior (Campbell et al., 2004), and negatively correlated with empathy toward an outgroup (Boin & Voci, 2019).

We propose that the relationships that insecure attachment and entitlement have with affective empathy and prosociality can be explained — at least partially — by fears of compassion (FoC). FoC are responses of fear or avoidance when facing the possibility to experience or evoke in other people compassionate feelings

(Gilbert et al., 2011). FoC-for others entails feelings of threat and avoidance in the face of suffering others, because compassionate feelings and actions may be costly, and people receiving compassion may take advantage of the situation. FoC-from others originates from suspicion concerning others' kindness, due to unaccepted personal weaknesses, fear of depending on others, or beliefs that others will need something back. FoC-for self represents a rejection of compassion toward the self, to avoid feeling weak or sad, or because self-compassionate feelings are unfamiliar or undeserved.

The association between insecure attachment and FoC is straightforward: capacities for compassion are rooted in a secure attachment system, and past research showed that FoC is positively associated with insecure attachment styles (e.g., Dentale et al., 2017; Gilbert et al., 2012). Avoidantly and anxiously attached individuals may show more FoC-for others and -from others because they tend to react negatively in the face of both others' and personal weaknesses and need for support (e.g., Wei et al., 2007). Insecurely attached individuals may also fear self-compassion because they are less likely to acknowledge the need for and the value of self-care (e.g., Joeng et al., 2017). The relationship between entitlement and FoC which, to our knowledge, has never been investigated, should be positive, considering that relevant features of entitlement — for example, self-interest and unforgiveness (Exline et al., 2004) — are at odds with the feelings of warmth and care that characterize compassion. Moreover, higher levels of entitlement are related to fewer compassionate goals, which entail supporting others and fostering their well-being without obtaining personal benefits (Crocker & Canevello, 2008).

Similarly, only a few studies have attempted to shed light on the relationships between FoC and interpersonal aspects of the self, related to empathy and prosociality. Gilbert et al. (2012) highlighted a negative association between empathic abilities and both FoC and fear of happiness (i.e., fear of processing positive emotions). Furthermore, the three FoC were negatively related to both self-report and behavioral measures of altruism (Dentale et al., 2017).

Based on previous research, we hypothesized and tested a path model in which FoC explained the negative relationships of insecure attachment and entitlement with affective empathy and prosociality. FoC could thus act as a bridge between internal models of the self and others and prosocial tendencies. From a practical perspective, this model could inform clinical practice: if FoC act as a bridge, dealing with them may allow individuals to break the link between intraindividual maladaptive dispositions and reduced openness toward others.

## METHOD

### Participants and Procedure

Five research collaborators recruited 705 Italian adults (434 women, 262 men, 9 no-answer; 34% students; age 18-75,  $M = 33.63$ ;  $SD = 13.56$ ) from the general population, who completed an online questionnaire voluntarily, without any compensation.<sup>1</sup> Concerning occupation, our sample was quite heterogeneous: 33.6% were students; 8.0% were manual workers; 5.6% were specialized workers; 27.4% were retailers, employees, or primary school teachers; 13.9% were professionals, high school teachers, or university professors; 7.3% were unemployed or retired. The rest of the sample did not report any occupation. Data from this study, codebook, and Supplementary Materials are openly available at [https://osf.io/a7wqc/?view\\_only=4584608706554a49a698b5b83ef78f3e](https://osf.io/a7wqc/?view_only=4584608706554a49a698b5b83ef78f3e).

## Measures

*Insecure attachment.* We measured anxious and avoidant attachment with the 12-item Experiences in Close Relationships Scale (Wei et al., 2007; Italian items: Picardi et al., 2000). Items were on a 7-point Likert-type scale, ranging from 1 = *disagree strongly* to 7 = *agree strongly*. Examples are: “I worry that romantic partners won’t care about me as much as I care about them” for the anxious dimension ( $\alpha = .72$ ) and “I try to avoid getting too close to my partner” for the avoidant dimension ( $\alpha = .81$ ).

*Entitlement.* The Psychological Entitlement Scale (Campbell et al., 2004; Italian version: Boin & Voci, 2019) measured entitlement. Respondents were asked to rate the nine items (e.g., “I demand the best because I’m worth it”) on a 7-point Likert-type scale, ranging from 1 = *strongly disagree* to 7 = *strongly agree*. The scale showed a good reliability ( $\alpha = .82$ ).

*Fears of compassion.* To measure the three FoC, we employed the Fears of Compassion Scale (Gilbert et al., 2011; Italian version: details in Supplementary Materials), which has three subscales respectively measuring fear of compassion felt toward others (10 items; e.g., “People will take advantage of me if they see me as too compassionate”), fear of compassion received from others (13 items; e.g., “I worry that people are only kind and compassionate if they want something from me”), and fear of compassion experienced toward oneself (15 items; e.g., “I fear that if I am more self-compassionate I will become a weak person”). Responses were rated on a 5-point Likert-type scale (0 = *don’t agree at all*, 4 = *completely agree*), with higher scores indicating higher levels of the three fears of compassion. All subscales were highly reliable (FoC-for others,  $\alpha = .83$ ; FoC-from others,  $\alpha = .88$ ; FoC-for self,  $\alpha = .92$ ).

*Prosociality.* As a measure of prosociality, we used the Prosocialness Scale for Adults (Caprara et al., 2005). The 16-item scale assesses the degree of engagement in actions aimed to share, help, take care of others’ needs, and empathize with their feelings (e.g., “I easily share with friends any good opportunity that comes to me”; response options from 1 = *never true* to 5 = *almost always/always true*). The scale showed a high reliability ( $\alpha = .90$ ).

*Affective empathy.* We measured empathic concern and personal distress with the respective subscales of the Interpersonal Reactivity Index (Davis, 1983; Italian version: Albiero et al., 2006). Empathic concern represents a prosocial, other-oriented facet of empathy; personal distress is self-oriented and represents the propensity to lose control and feel uncomfortable when others are suffering. Each statement was rated on a 5-point Likert-type scale, from 1 = *does not describe me well*, to 5 = *describes me very well*. Example items are: “I often have tender, concerned feelings for people less fortunate than me” and “Being in a tense emotional situation scares me,” for empathic concern ( $\alpha = .72$ ) and personal distress ( $\alpha = .77$ ), respectively.<sup>2</sup>

## RESULTS

We tested a structural equation model (three parcels for each latent construct) using a bias-corrected bootstrapping procedure with 10,000 resamples. In the model, insecure attachment styles and entitlement were related to empathy and prosociality via the three FoC. The model had a good fit to the data:  $\chi^2(288) = 608.67$ ,  $p \cong .00$ ,  $\chi^2/df = 2.11$ ; RMSEA = .04; SRMR = .03; CFI = .97 (details in Supplementary Materials). Statistically significant relations between latent variables (standardized paths) are reported in Figure 1; indirect effects that were statistically significant both in their unstandardized and standardized versions are reported in Table 1.

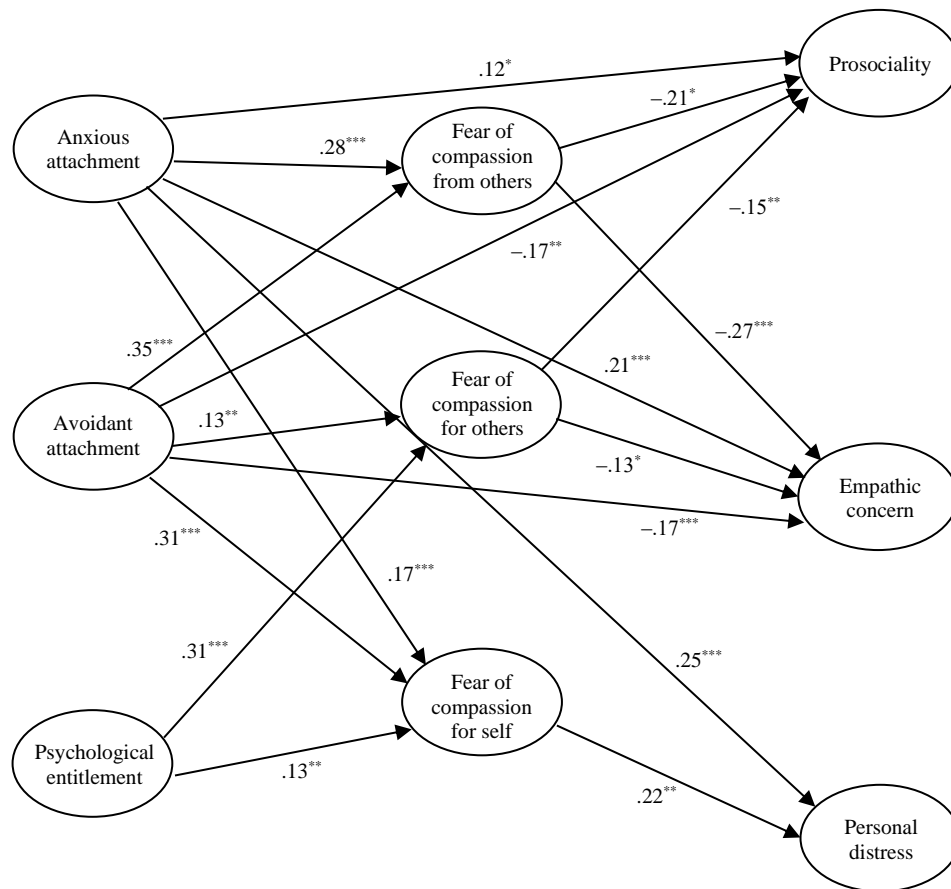


FIGURE 1

Structural equation model

Note. Only statistically significant paths are reported. Standardized parameters.

\*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$ .

TABLE 1

Indirect effects in the structural equation model

Predictors	Fear of compassion	Outcomes	Indirect effects	
			Unstandardized [95% CI]	Standardized
Anxious attachment	From others	Prosociality	-.04 [-.07, -.01]	-.06
	From others	Empathic concern	-.05 [-.11, -.02]	-.08
	For self	Personal distress	.04 [.01, .08]	.04
Avoidant attachment	From others	Prosociality	-.03 [-.06, -.01]	-.07
	From others	Empathic concern	-.04 [-.08, -.01]	-.09
	For self	Personal distress	.05 [.02, .09]	.07
Entitlement	For others	Prosociality	-.02 [-.04, -.01]	-.05
	For others	Empathic concern	-.02 [-.04, -.00]	-.04
	For self	Personal distress	.02 [.01, .05]	.03

Note. Only statistically significant indirect effects are reported. CI = confidence interval.

Results showed that avoidant attachment was positively associated with all three FoC, whereas anxious attachment only with FoC-from others and FoC-for self. Entitlement was positively related to FoC-for others and FoC-for self. Both FoC-from others and FoC-for others were negatively related to empathic concern and prosociality. FoC-for self was positively related only to personal distress.

Direct relationships between insecure attachment and outcome variables were also present: anxious attachment was positively related with personal distress, empathic concern, and prosociality. Avoidant attachment had negative relations with prosociality and empathic concern.

Indirect effects (Table 1) showed that anxious and avoidant attachment presented the same pattern of results: they both had negative indirect associations with prosociality and empathic concern through FoC-from others, and a positive indirect relation with personal distress via FoC-for self. Entitlement had negative indirect associations with prosociality and empathic concern through FoC-for others. Entitlement showed a positive indirect link with personal distress through FoC-for self.

## DISCUSSION

Why do people fear to experience or evoke compassionate feelings? And what are the implications of such fears for social psychological outcomes? The present work aimed to tackle these questions, drawing on both social and clinical psychology. We investigated the mediating role of the FoC (Gilbert, 2010) in the paths going from insecure attachment and entitlement to social psychological variables related to interpersonal aspects of the self, namely prosociality and two dimensions of affective empathy (i.e., empathic concern and personal distress). Relationships between these constructs were examined in a large sample, testing a structural equation model with latent variables.

In line with our expectations, results showed that FoC partially explain the relationships that insecure attachment and entitlement have with affective empathy and prosociality. First, avoidant and anxious attachment were associated with lower levels of prosociality and empathic concern via FoC-from others. Arguably, these associations are related to different psychological processes.

Avoidantly attached individuals tend to use a deactivation strategy, distancing themselves from others to avoid any interaction that might activate the attachment system (Mikulincer et al., 2005). Receiving compassion from others could activate the attachment system and be seen as a threat by avoidantly attached people, who tend not to trust others and withdraw from them. Trying to reject compassion and help from others, avoidantly attached individuals may avoid empathizing with others and taking care of their needs. It is worth noticing that avoidant attachment had also direct negative associations with empathic concern and prosociality, suggesting that FoC-from others only partially explains its relationships with these outcomes.

Anxiously attached individuals, instead, tend to use a hyperactivation strategy, desiring proximity to and attention from attachment figures, fearing the loss of significant others (Shaver & Mikulincer, 2002). This strategy could lead to two opposite outcomes, as shown by the opposite sign of the direct and indirect associations that anxious attachment had with other-oriented outcomes. The indirect link, involving FoC-from others, was negative: because of the hyperactivation strategy, anxiously attached individuals may believe that they do not deserve, and thus they fear, compassion from others. This process is likely to prevent feelings of concern and helping behavior in the face of other people's suffering. Moreover, the link between anxious attachment and FoC-from others may result in lower empathic concern and prosociality because anxiously attached people tend to build relationships upon dependency, rather than on trust and reciprocity; therefore, they might be so focused on their feelings of undeservingness that they do not manage to tune in to other people's feelings and needs, nor to engage in helping behavior in the face of other people's distress.

The direct links of anxious attachment with empathic concern and prosociality are, instead, positive: hyper-activation may also be related to a desire for positive relationships with others, and emotional reactivity when encountering suffering others (Shaver & Mikulincer, 2002).

Entitlement was associated with lower levels of empathic concern and prosociality only via FoC-for others. Entitled individuals tend to endorse self-centered and self-protective attitudes, and to view others as less worthy of attention and benefits, compared to themselves (Campbell et al., 2004). Therefore, people with high levels of entitlement might fear compassion for others because they believe that such compassionate feelings are costly, undeserved by other people, and potentially lead to being exploited. This self-centered fear of feeling compassion toward others could explain why people scoring high on entitlement have less empathic feelings and report lower levels of prosociality.

Finally, each predictor was associated with higher personal distress via FoC-for self. As previously argued, insecurely attached individuals may fear self-compassion because they are less likely to acknowledge the need for and the value of self-care (e.g., Joeng et al. 2017); this lack of familiarity with self-caring — expressed by high levels of FoC-for self — could be related to experiencing distress in the face of emergencies and suffering people. Specifically, anxiously attached individuals could believe that they are unable to manage others' pain, leading them to experience self-directed feelings of frustration and distress in the face of others' suffering. Conversely, avoidantly attached individuals may not accept to feel scared or weak and to potentially need the help of others (e.g., Shaver & Mikulincer, 2002), leading them to distress when faced with emergencies and suffering people. The same rationale could be applied to highly entitled individuals, who could fear self-compassion because they interpret it as a weakness, incompatible with their sense of pride and superiority (Exline et al., 2004).

This study has some limitations: because we relied on self-report measures and correlational analyses within a cross-sectional design, we acknowledge the lack of causality and the possibility of social desirability in our data. Additionally, the rationale behind the sequential path we tested — which considers entitlement and insecure attachment as predictors, fears of compassion as mediators, and social psychological variables as outcomes — is based on theoretical premises and previous empirical evidence concerning the relationships among the variables considered. We cannot exclude the possibility that other models portraying in a different way the relationships between these variables may be equally valid. Future studies, possibly adopting a longitudinal design, should be performed to disentangle the causal nature of the relationships assessed in our model. Moreover, further research could also test this model at the experimental level, at least for insecure attachment. For instance, past research has shown that people can be temporarily primed with secure attachment dispositions; this was found to be an effective method to foster compassion and altruism (Mikulincer et al., 2005). Thus, one could test whether security attachment priming leads to a lower endorsement of FoC and, consequently, to positive outcomes at the interpersonal level. Finally, although the size of our sample was adequate, we only relied on a convenience sample of Italian respondents, thus our findings may not be generalizable to the Italian population or other cultural contexts (Simons et al., 2017). On a similar note, our sample was not balanced in terms of gender, given that participants were mainly women. Future studies could employ more balanced and representative samples.

Despite these limitations, this paper has theoretical and practical implications. From a theoretical point of view, we showed — to our knowledge for the first time — the mediating role of the three fears of compassion in the relationship between individual differences related to the self-concept and positive social-psychological outcomes related to affective empathy and prosociality. This suggests that the potentially maladaptive effects of insecure attachment and entitlement on empathy and prosociality can be partly conveyed by resistance to caring and warm feelings in the face of personal and others' suffering. This may be



due to the nonacceptance of own weaknesses, need for help, and reliance on other people — features of insecure attachment and entitlement —, and may result in negative outcomes at the relational and interpersonal level. Moreover, this study fosters the discussion on the importance of considering individual differences in social psychological research, adopting a multidimensional perspective that considers traits, dispositions, and personality as useful tools to interpret social phenomena. Finally, this paper also highlights the importance of considering social psychological variables in the clinical domain, suggesting that both clinical and social psychology can benefit from a multidisciplinary approach.

From a practical point of view, our study has important implications for clinical practice, suggesting that social psychological variables are also to be considered in the clinical domain. On the one hand, working on a person's fears of compassion in the therapeutic context can improve that person's well-being, as largely demonstrated by current scientific literature (e.g., Fox et al., 2020). On the other hand, our results shed light on possible improvements in the interpersonal domain as well. Individuals may not be aware that they fear to evoke or experience compassion; avoiding compassionate feelings for the self, for others, and from others may have become an established, automatic mechanism for them. Clinicians could help patients discover and deal with their FoC to mitigate the social consequences of maladaptive individual dispositions, thereby fostering their tendency to feel and act prosocially.

#### NOTES

1. This data collection is part of a larger project including other constructs (e.g., positive relations with others) not considered here.
2. Additionally, we tested gender differences for the variables assessed: significant differences ( $p < .05$ ) emerged for avoidant attachment ( $M_{\text{males}} = 2.68$ ,  $M_{\text{females}} = 2.40$ ), FoC-from others ( $M_{\text{males}} = 2.12$ ,  $M_{\text{females}} = 1.98$ ), FoC-for self ( $M_{\text{males}} = 1.20$ ,  $M_{\text{females}} = 1.03$ ), prosociality ( $M_{\text{males}} = 3.00$ ,  $M_{\text{females}} = 3.21$ ), empathic concern ( $M_{\text{males}} = 3.47$ ,  $M_{\text{females}} = 3.83$ ), and personal distress ( $M_{\text{males}} = 2.48$ ,  $M_{\text{females}} = 2.74$ ). Full analyses are reported in the Supplementary Materials (Table S2).

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