

CLARIFYING SADOMASOCHISM IN THE REALM OF SADISTIC NOMENCLATURE

by

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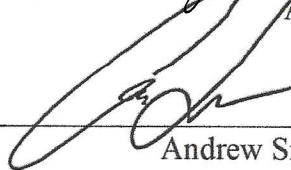
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Abstract

Although recent findings suggest sadism as a facet of antisocial personality associated with malevolent behaviors, sadism in the context of sadomasochism as a sexual practice proposes an ostensible discrepancy. Trait sadism is broadly defined as the tendency to experience pleasure through the infliction of suffering. However, the consensual nature of a sadomasochistic power exchange implies an element of enjoyment on behalf of the recipient, which suggests a critical distinction from the concept of cruelty that is traditionally associated with sadism. Considering that sadism is typically seen as an aversive trait, distinguishing sadomasochistic variants of sadism from trait sadism would establish a critical disintegration of the BDSM subculture from the stigma of sadistic connotations, as well as guide clinical practice in developing awareness with regard to counseling sadomasochistic practitioners. To explore this, we investigated whether BDSM sadism was significantly different from trait sadism or forensic sadism. We found that scores for each of the measures did not differ significantly between sadomasochistic sadists and non-sadomasochists, although there were significant but small differences between sadomasochistic sadists and non-sadomasochists on only vicarious forms of everyday sadism. Moreover, we found a moderately strong, significant correlation between forensic and everyday forms of sadism. These findings suggest sadistic sexual offense to be closely related to, although separate from, sadistic personality, with sadism in the context of BDSM appearing to be a construct distinct from either of these entities.

Keywords: (sadism, BDSM, dark tetrad, sexual sadism, sadomasochism, S&M, s/m)

Clarifying sadomasochism in the realm of sadistic nomenclature

While the seemingly obvious distinction between ‘sadism’ in the context of sexual assault as opposed to consensual kink would be *consent*, the term ‘sexual sadism’ is applied across consensual and nonconsensual contexts alike. Despite the relatively recent addition of Sexual Sadism Disorder to the DSM and proposed addition of trait sadism to the realm of dark personality (Furnham et al., 2013), little research has been done to evaluate the relationship among various sadism constructs (Foulkes, 2019).

The term ‘sexual sadism,’ for example, fails to discriminate between consensual and nonconsensual conditions, and there exists a need for standardized nomenclature and accordant framework precise to variants of sadism. A shared taxonomy is critical to the accuracy of clinical, epidemiological, empirical, and forensic assessments of sadism, among others. However, taxonomy is contingent upon understanding the relationship among sadism’s conceptual constructs. Accordingly, the purpose of this study is to qualify more precise nomenclature and limit the potentially inappropriate use of ‘sadism’ to reference its variants synonymously.

Domains of sadism. ‘Sadism’ encompasses a variety of constructs which are conceptually distinct but overlapping. ‘Everyday sadism’ refers to everyday manifestations of sadism as a broad antisocial personality trait, whereas ‘sexual sadism’ is used to refer to sexual gratification as a result of inflicting physical, psychological, and/or emotional pain on another individual and does not discriminate between consensual and nonconsensual conditions. For the purposes of this paper, sexual sadism in consensual contexts will be referred to as ‘sadomasochistic sadism’ (s/m), as opposed to nonconsensual contexts referred to as ‘forensic sadism.’

Etymology / Brief History. The history of ‘sadism’ as a construct for several domains including but not limited to sexual violations, clinical diagnosis, consensual sexual practice, and antisocial personality has convoluted the boundaries between its constituent variants, thereby riddling the concept of sadism with ambiguity and overgeneralization. Therefore, understanding the history of sadistic constructs is critical to clarifying the relationship among them.

In his seminal work *Psychopathia Sexualis* (1885), psychoanalyst Richard von Krafft-Ebbing coined ‘sadism’ after novelist Marquis de Sade’s (1785) erotic depictions of cruelty and torture. Krafft-Ebbing similarly termed the phenomenon portrayed through Leopold von Sacher-Masoch’s (1869) literature ‘masochism,’ which Sigmund Freud (1889) later proposed as a compliment to sadism through the term ‘sodomasochism.’ The original subtext of ‘sadism’ as a sexual perversion and, by extension, pathology, has persisted to modern psychiatry through the World Health Organization’s International Classification of Diseases (*ICD-10*, 2010) as well as throughout each edition of the Diagnostic and Statistical Manual of Mental Disorders (*DSM*) (American Psychiatric Association). Markedly, sexual sadism in the context of psychiatry has a long history of politicization with regard to the legal interpretations of sexual assault, abuse, and homicide cases, among others (Hickey, 2006). These clinical and forensic connotations have led many to extrapolate pathological assumptions to sadism as a component of BDSM (Bondage/Discipline, Dominance/ Submission, and Sadism/Masochism) (Lowrey, 2004), despite the absence of proper empirical support (Wismeijer & van Assen, 2013). Most recently, ‘sadism’ has taken on the connotation of an antisocial personality trait as the proposed fourth factor composing Dark personality (Buckels et al., 2013).

The Dark Triad. Dark Triad describes a constellation of antisocial personality traits, including narcissism, psychopathy, and Machiavellianism, theorized to underly abnormal

malevolent tendencies (Furnham et al., 2013). Distinguishing features of such traits include self-importance/grandiosity/egotism, impulsivity/selfishness, and manipulation/deceit, respectively, although these traits share considerable overlap (Plouffe et al., 2017). In addition to being correlated with one another between .20 and .60 (Jones & Paulhus, 2014), Dark Triad traits share negative correlates with empathy (Paulhus, 2014), as well as the personality traits of agreeableness, conscientiousness, and honesty-humility (Jakobwitz & Egan, 2006; Plouffe et al., 2017). Recently, several studies have proposed sadism as an additional dimension of antisocial personality to form the Dark Tetrad (Buckels et al., 2013; Buckels, 2018; Paulhus et al., 2020). Buckels et al. (2013) conducted an experiment wherein a bug killing paradigm distinguished individuals inclined toward harm, and a follow-up study suggested sadism as distinct from mere aggression by willingness to work for opportunities to perpetrate violence. In addition to proposing sadism as an entity distinct from the pre-existing Dark Triad traits of psychopathy, narcissism, and Machiavellianism, this study set a precedent for sadism as a concept with manifestations pervading everyday life and thus extending beyond traditional clinical contexts.

Clinical Sadism. Sexual sadism has appeared in every DSM since its inception in 1952, emerging as a sexual deviation in the first edition (DSM-I), developing into a paraphilia with diagnostic criteria in the third (DSM-III), and evolving into ‘Sexual Sadism Disorder’ in the fourth (DSM-IV). Since acquiring diagnostic criteria in the third edition (DSM-III), there has existed a potential for consensual, s/m practitioners to qualify for a Sexual Sadism Disorder diagnosis, framing s/m as analogous to sexual assault. The criteria for such a disorder according to the *DSM-V* (American Psychiatric Association, 2013) are as follows:

- A. *Over a period of at least 6 months, recurrent and intense sexual arousal from the physical or psychological suffering of another person, as manifested by fantasies, urges, or behaviors.*

B. The individual has acted on these sexual urges with a nonconsenting person, or the sexual urges or fantasies cause clinically significant distress or impairment in social, occupational, or other important areas of functioning.

Notably, individuals who experience either distress or impairment as a result of consensual sadistic tendencies share a diagnosis with individuals who sexually violate a nonconsenting individual, thereby placing kink on a continuum of cruelty. Ironically, the societal stigma of the diagnosis itself may serve as a considerable source of distress/impairment for s/m sadists, given that they share a prospective label with sexual sadists in forensic contexts.

Sadomasochistic vs forensic sadism. In contrast to sexual assault, the consensual nature of a sadomasochistic power exchange implies an element of enjoyment on behalf of the recipient, suggesting a critical ethical ~~moral~~ distinction. A study conducted by Breslow, Evans, and Langley (1985) found no significant association between sadomasochistic practices and non-sexual sadistic behaviors, thereby proposing BDSM sadists as morally distinct from sexual offenders (Berger et al., 1999; Spengler, 1977). Furthermore, Klement et al. (2016) evaluated attitudes about consent among the BDSM community through measures of sexism, rape myth acceptance, and victim blaming via Amazon's Mechanical Turk. Notably, the researchers found significantly lower levels of sexism, victim blaming, and rape myth acceptance among BDSM practitioners, thereby proposing consensual sexual sadists as *more* moral than not only nonconsensual sadists, but also the general population (Klement et al., 2016). These studies combine to illustrate that BDSM sadists neither engage in sadistic tendencies outside of consensual sexual contexts, nor do they possess attitudes that reflect a desire to do so.

Sadomasochistic vs everyday sadism. Sadomasochistic sadism is commonly viewed as a context-specific manifestation of sadistic personality, where BDSM practices are referred to as a more socially acceptable alternatives to malevolent sexual tendencies (Rivoli, 2015). This

synonymity would then imply BDSM as a pathological practice. However, Weismeijer and Assen (2013) conducted a study wherein BDSM practitioners and control participants completed questionnaires measuring Big Five personality dimensions, rejection sensitivity, and subjective well-being. Contrary to popular conception, the study concluded that BDSM practices are not pathological, considering that BDSM practitioners experienced greater subjective well-being and lower neuroticism than the control group. Furthermore, the BDSM attachment scores were not found to significantly differ from the control group, suggesting the popular notion of s/m as a manifestation of trauma to be inaccurate. In fact, Connolly (2006) found that BDSM practitioners actually possess psychological sadism to a lesser degree than not only sexual offenders, but the control group as well. These findings were supported by Hillier's (2016) findings that neither childhood trauma histories nor personality compositions were significant predictors for s/m in adulthood. Furthermore, Ashok (2017) found that engagement with BDSM was not significantly correlated with childhood sexual abuse and/or physical abuse/neglect. The suggestion that the typical BDSM practitioner is psychologically healthy serves as a critical distinction from the conventional sexual offender.

Current study. In her review of sadism, Foulkes (2019) claims that the relationship between sexual and nonsexual forms of sadism remains elusive, suggesting an evaluation of its variants as a worthwhile direction for future research. Erickson (2020) made a considerable contribution to this uncertainty through her study assessing BDSM and non-BDSM samples on everyday sadism, Dark Triad traits, empathy, and personality. She found that BDSM sadists and non-sadistic tops (dominant sexual role) did not differ on vicarious or verbal forms of sadism. Moreover, BDSM sadists only differed from non-sadistic tops on physical sadism where consent was explicitly specified. Accordingly, Erickson concluded that BDSM sadism and everyday

sadism appear to be distinct entities, suggesting sadism as a dimensional construct, encompassing *prosocial* forms as in the case of sadomasochistic practices. However, the relationship between everyday, forensic, and sadomasochistic forms of sadism remains uncertain. The present study seeks to clarify this relationship by assessing sadomasochistic sadists and non-sadomasochists on measures of everyday and forensic sadism.

Research Questions

RQ1: *Is sadomasochistic sadism distinct from everyday sadism?*

H₀1: Sadomasochistic sadists score significantly higher on everyday sadism than non-sadomasochists.

H_A1: Sadomasochistic sadists do not score significantly higher on everyday sadism than non-sadomasochists.

RQ2: *Is sadomasochistic sadism distinct from forensic sadism?*

H₀2: Sadomasochistic sadists score significantly higher on forensic sadism than non-sadomasochists.

H_A2: Sadomasochistic sadists do not score significantly higher on forensic sadism than non-sadomasochists.

RQ3: *Is forensic sadism related to everyday sadism?*

H₀3: Forensic sadism is not significantly associated with everyday sadism.

H_A3: Forensic sadism is significantly associated with everyday sadism.

Method

Participants

A total of 168 (53 males, 111 females, 3 nonbinary) respondents ages 18-48 fully completed the survey. Of the sample, 8.4% identified as sexually sadistic, 18.6% as masochistic, 13.8% as both, 26.9% as not at all sadomasochistic, and 32.3% as unsure. For the purposes of our study, participants who identified as either sadists or switches (both sadistic and masochistic) were categorized as sadomasochistic sadists in analyses. Participants who identified as not at all sadomasochistic or unsure were categorized as non-sadomasochists in analyses. This study was exempted from Institutional Review Board (IRB) review in accordance with Federal regulations. The project #20-0256 was approved by the Appalachian State IRB on October 9, 2020.

Materials

Comprehensive Assessment of Sadistic Tendencies (CAST). The CAST (Buckels & Paulhus, 2014) assessed everyday sadism through 18 items representing direct physical, direct verbal, and indirect vicarious sadism domains on a 5-point Likert-Type Scale (Strongly Disagree=1; Strongly Agree=5). Physical sadism refers to perpetrating aggression through bodily harm (e.g. *I enjoy physically hurting people*), as opposed to verbal sadism which refers to emotional aggression (e.g. *I enjoy making jokes at the expense of others*). Vicarious sadism is an indirect form of everyday sadism referring to the tendency to derive pleasure from observing/witnessing physical and/or emotional suffering (e.g. *In professional car racing, it's the accidents I enjoy most*). In this sample, an internal consistency of $\alpha = .89$ was achieved for the CAST scale and the subscales had similar internal consistencies of $\alpha = .76$ for physical, $\alpha = .86$ for verbal, and $\alpha = .81$ for vicarious.

Severe Sexual Sadism Scale (SSSS). A modified version of the SSSS (Nitschke et al., 2009) was created for the study to assess forensic sadism. The scale consisted of 6 items (e.g. *I would be sexually aroused by humiliating or degrading a nonconsenting individual*) on a 5-point Likert-Type scale. In this sample, an internal consistency of $\alpha = .91$ was achieved for the SSSS.

Procedure

Participants were recruited via the psychology participant pool (SONA) and through posting on various subreddits (e.g. r/SampleSize, r/sex, r/takemysurvey) on Reddit. The advertisement for the survey informed participants that there would be questions relating to sexual preferences and personality and warned participants that some items were severe in nature. Participants completed a demographic measure, including items about age, gender expression, sexual orientation, identification with the BDSM community, and sadomasochistic orientation. More specifically, participants were asked to indicate which of the following orientations best represented their sexual preferences:

Sadist (*I would experience sexual gratification through humiliating (e.g. giving commands, derogatory name-calling, etc.) and/or inflicting pain (e.g. spanking, choking, etc.) on my partner during sexual play.*)

Masochist (*I would experience sexual gratification through receiving humiliation (e.g. being controlled, called names, etc.) and/or pain (e.g. spanking, choking, etc.) from my partner during sexual play.*)

Switch (*I identify with both sadistic and masochistic roles.*)

Not at all sadomasochistic (*I would not experience sexual gratification from either giving or receiving pain.*)

I don't know (I don't feel that I have the experience necessary to either identify with or rule out any of the above options.)

In addition to the CAST and SSSS, the Short Dark Triad (Jones & Paulhus, 2014), HEXACO Personality Inventory (Ashton & Lee, 2011), Interpersonal Reactivity Index (Davis, 1983), Attachment Style Questionnaire– Short Form (Chui & Leung, 2016), Attitudes About Sadism Scale (Yost, 2019), and Illinois Rape Myth Acceptance Scale (Payne, Lonsway, & Fitzgerald, 1999; McMahon & Farmer, 2011) were also included in the survey but not represented in analyses. All measures were included in the program, which randomized the order of items within each block.

Results

Initial assessments indicated that assumptions of normality were violated for each of the three dependent variables (vicarious sadism, direct verbal sadism, and forensic sadism) *Shapiro-Wilk W* (0.50 – 0.95), $p < .001$ for each test. Therefore, three robust one-way ANOVAs (Field, 2017) were conducted to determine whether measures of forensic and everyday sadism differed based on sadomasochistic identification (*1=sadomasochistic sadist; 2=sadomasochistic masochist; 3=not sadomasochistic*). To adjust for familywise error rate, a Bonferroni correction was applied and $\alpha = 0.017$ was used. Finally, a bivariate correlation was also conducted to determine the relationship between everyday and forensic forms of sadism.

We did not conduct analyses for the physical subscale of the CAST in evaluating this hypothesis, as the absence of a consent qualifier proposed a strong potential for confounding, thus compromising internal validity. In other words, sadomasochistic sadism as a primarily physical form of sadism, although prosocial (Erickson, 2020) would likely have been confused

with the items in the physical subscale of the CAST which represent antisocial behavioral tendencies.

The first robust one-way ANOVA was calculated on participants' scores on the direct verbal subscale of the CAST (Table 1). This subscale's items relate to aggressive verbal confrontations. For this analysis, means were trimmed at the level of 0.2. The analysis was not significant, $F(2, 164) = 3.80, p = .032$.

A second robust one-way ANOVA was conducted to assess participants' vicarious subscale of the CAST (Table 1). For this analysis, means were trimmed at the level of 0.2, meaning that 2% of the scores on either side of the distribution were removed before calculating the grand mean. This subscale's items relate to the participant's pleasure in observing acts of sadism, such as through video game violence, for example. The analysis was significant, $F(2, 164) = 8.53, p < .001$. Table 1 indicates vicarious sadism scores as significantly higher among sadomasochistic sadists ($M = 2.59, SD = 0.806$) than sadomasochistic masochists ($M = 1.94, SD = 0.610, p < .001$) or non-sadomasochists ($M = 2.06, SD = 0.703, p = .003$). No differences emerged between sadomasochistic masochists and non-sadomasochists.

A third and final robust one-way ANOVA evaluated participants' scores on the SSSS (Table 1). For this analysis, the means were trimmed at the level of 0.1. The analysis was not significant, $F(2, 164) = 4.47, p = .018$. Means for SSSS are presented in Table 1.

Finally, the bivariate correlation revealed a significant, moderately strong, positive relationship between everyday and forensic forms of sadism ($r = .4, p < .001$). For this analysis, everyday sadism was represented by total scores on the CAST, including physical, direct verbal, and vicarious subscales. This suggests that there may be a relationship between sexually sadistic crimes and subtle manifestations of antisocial behavior patterns.

Discussion

Our first hypothesis (*sadomasochistic sadists do not score significantly higher on everyday sadism than non-sadomasochists*) was partially correct. Scores for vicarious sadism differed significantly between sadomasochistic sadists and non-sadomasochists, although scores for direct verbal sadism did not. Similarly, scores for forensic sadism did not differ significantly across groups, indicating support for our second hypothesis (*sadomasochistic sadists do not score significantly higher on forensic sadism than non-sadomasochists*). Finally, the finding that forensic sadism was found to be significantly, positively correlated with everyday sadism generated support for our third hypothesis that *forensic sadism is significantly associated with everyday sadism*. Altogether, the data appear to indicate sadomasochistic sadism as distinct from everyday and forensic forms. Moreover, everyday and forensic forms of sadism appear to be separate entities with considerable overlap.

Because our vicarious sadism finding appears to partially contradict Erickson's (2020) finding that sadistic tops differed significantly from non-sadistic tops only on physical sadism and only where consent was explicitly specified, it is important to acknowledge that ambiguous consent conditions may be responsible for our finding. In other words, our results might have similarly shown no differences in vicarious sadism across groups had we established the victims represented in the CAST items as nonconsenting. Our study did, however, parallel Erickson's with regard to her finding that sadistic tops did not differ from non-sadistic tops on direct verbal sadism, as well as extended this finding of s/m sadists as similar to not only non-sadistic topics but also non-sadomasochists as a broader comparison on direct verbal scores.

Our study also elaborated on Erickson's (2020) by including a measure of forensic sadism. Our finding that sadomasochistic sadists and non-sadomasochists did not differ on scores

of forensic sadism strengthens the argument that consensual, sadomasochistic sadism is distinct from antisocial forms of sadism, thereby suggesting the perception of sadomasochistic sadism a socially acceptable alternative resorted to as a repressed form of criminal sexual tendencies (Rivoli, 2015) to be unfounded and inappropriate. Moreover, although our adaptation of the SSSS described hypothetical situations of forensic sadism, it would be reasonable to consider that decreased ideation is representative of decreased action.

Although our data tentatively propose sadomasochistic sadism as distinct from forensic forms of sadism, our data suggest everyday sadism and forensic sadism could be related, but not entirely overlapping. More specifically, the .4 bivariate correlation between everyday and forensic constructs at a significance level $p < .001$ suggests a relationship between routine antisocial behavior patterns and more extreme sexually sadistic offenses. However, this does not suggest that all individuals who engage in everyday sadistic behaviors are sexual offenders, nor does it suggest that all sexual offenders possess sadistic behavior patterns in everyday contexts.

Limitations

As previously noted, the CAST subscales were subject to the bias of ambiguous consent. While we intentionally selected not to specify consent condition for the measure out of concern for offending participants, this ambiguity was particularly disadvantageous to the accuracy of the physical subscale, considering that sadomasochism is predominantly a physical practice. The generalizability of our forensic sadism construct was similarly compromised, as hypothetical contexts were necessary in order to assess non-offending individuals on sexual sadism in a nonconsensual capacity. The hypothetical framing was also favorable for ethical reasons, as well as validity concerns regarding honesty considering the severity of the questions. However, sexual

arousal at the prospect of performing the items does not necessarily denote the likelihood of acting on such desires.

Another limitation of the study was sample bias, as our participants were predominantly undergraduate college students. Accordingly, the data were affected by lack of sexual experience, relative to older cohorts, rendering the generalizability rather weak. Survey completion rates and sample size were also considerable limitations of the study. While the primary predictor variable (sodomasochistic identification) as categorical was advantageous for between-groups analyses, future research should consider dimensional assessments of sodomasochistic sadism to enable correlational analyses with forensic and everyday forms, among others. Another caveat to grouping participants was that the subdivision of the sample into sadistic, masochistic, and non-sodomasochistic categories compounded the effect of an already limited number of individuals. Furthermore, in the survey comments, many Reddit users expressed that they either quit the survey prematurely or avoided attempting it altogether due to the approximate thirty-minute duration. While this survey was not overly lengthy, the participants on Reddit were volunteering and may have been more sensitive to concerns about time. This is a limitation for this study, as the Reddit sample was intended to provide perspectives beyond that of the participant pool.

Implications

In application to sadistic nomenclature, this study highlights a need to use more precise terms to reference variants of sadism, rather than using 'sexual sadism' as a blanket term to reference sexual offenders and consensual sodomasochistic practitioners synonymously. Moreover, consensually ambiguous terms such as 'sexual sadism' should be avoided in professional, and ideally colloquial, dialogue. The inappropriate synonymity of consensual and

nonconsensual forms of sexual aggression not only unnecessarily stigmatizes s/m practitioners, but also obscures the trauma held by survivors of sexual abuse, assault, etc.

In line with verbal acuity, researchers generating sadism measures should be careful to qualify consent conditions. Considering that existing measures of sadism aim to quantify sadism in antisocial capacities, measures/items should be adapted to clearly denote the absence of consent. For example, the item *I enjoy hurting my partner during sex (or pretending to)* (Buckels, 2018) fails to discriminate between domestic rape as an antisocial form of sadism and consensual sadomasochistic practices as a prosocial form (Erickson, 2020). These items inadvertently quantify sexual offenders and s/m practitioners similarly, thereby empirically misrepresenting the relationships among everyday, forensic, and s/m sadism constructs.

Conclusion

With academic literature as well as popular culture references to ‘sadism’ rapidly burgeoning (Foulkes, 2019), the need to develop nomenclature precise to its variants is critical to establishing a common, standardized language and understanding around sadism. Accordingly, the purpose of this study was to assess variants of sadism, especially sadomasochistic sadism as related to forensic and everyday forms of sadism. Given that everyday and forensic forms of sadism were found to be significantly and directly correlated with moderate strength, it seems that everyday antisocial behavior patterns may be related to criminal sexual behaviors. Furthermore, the finding that sadomasochistic sadists and non-sadomasochists significantly differed on vicarious, but not direct verbal or forensic measures of sadism, proposes s/m sadism as distinct from forensic sadism, as well as sadomasochistic and everyday forms of sadism as distinct but overlapping. However, the magnitude of overlap as well as the precise structural framework relating these variants remains elusive. Future research should aim to further clarify

these relationships, while also maintaining appropriate terminology precise to sadistic concepts. Moreover, professionals should avoid consensually ambiguous terms such as “sexual sadism” in order to clarify as well as emphasize the importance of consent in sexual, and especially sexually sadistic, contexts. Because ‘sadism’ is broadly defined as deriving pleasure through aggression (Buckels et al., 2013), and aggression is, according to social psychologists, an intention to harm an individual who does not wish to be harmed (Baron & Richardson, 2004), the consensual structure of sadomasochistic sadism should be distinguished from nonconsensual sadistic contexts.

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Table 1

Means, Standard Deviations, and Robust One-Way Analysis of Variance of Everyday and Forensic Sadism

Measure	Sadist		Masochist		Non-sadomasochist		F(2, 164)
	N = 37		N = 31		N = 99		
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>	
CAST-DV	2.50	0.94	2.20	0.92	1.99	0.73	3.80
CAST-V	2.59	0.81	1.94	0.61	2.06	0.70	8.53***
SSSS	1.41	0.66	1.24	0.41	1.11	0.36	4.47

***p < .001

Table 2*Descriptive Statistics and Correlation between Everyday and Forensic Sadism*

	N	M	SD	1.	2.
1. CAST-TOT	167	2.04	0.63	-	
2. SSSS	167	1.29	0.46	0.40***	-

*** $p < .001$