Early family experiences, narcissistic traits and adjustment in emerging adulthood

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Exposure to risky family environment during childhood affects diverse mental health outcomes in adulthood. Recent studies have found associations between narcissistic personality traits and retrospective accounts of early experiences. However, it is important to distinguish between two forms of narcissism: the grandiose (characterized by grandiosity, aggression, and dominance) and the vulnerable narcissism (characterized by a defensive and insecure grandiosity that obscures the feelings of inadequacy, incompetence and negative affect) because some aspects of narcissism are more strongly related to psychological wellbeing than others. Therefore, our goal was to examine the relationship between early risky family experiences, individual's narcissistic traits and adjustment in emerging adulthood. Moreover, we wanted to examine narcissistic vulnerability and grandiosity as possible mediators between early risky family experiences and current adjustment (wellbeing and distress). Data were collected on a total of 348 university students in Croatia (294 females, $M_{age} = 21.57$, $SD = 2.91$) in an online study. The hypothesized mediation model was tested using path analysis and showed good fit to the data. Early risky family experiences positively predicted both grandiose and vulnerable narcissism, and also directly negatively predicted one's personal wellbeing and positively one's distress. Furthermore, vulnerable narcissism positively predicted distress and negatively predicted one's wellbeing, while grandiose narcissism did not predict any indicator of adjustment. Therefore, the hypothesis regarding the mediating role of narcissistic traits was only partly confirmed. In sum, the results show theoretically meaningful connections between...
psychological adjustment, narcissistic traits and early experiences, reiterating the importance of distinguishing between two forms of narcissism.

**Keywords:** early risky family experiences, vulnerable narcissism, grandiose narcissism, wellbeing, distress

**Introduction**

There is a growing body of research which suggests that early caregiving and the characteristics of early family relationships can have an impact on mental health in adulthood. Exposure to risky family environment during childhood (e.g. harsh or chaotic parenting, neglect, family conflict or unaffectionate interaction style) affects an individual’s wellbeing and diverse mental and physical health outcomes later in life, such as increased somatic responses to adverse life situations (Luecken & Fabricius, 2003), disruptions in physiological response to stress (Lueckck & Lemery, 2004; Repetti, Taylor, & Seeman, 2002), increased psychopathology (Taylor, Lerner, Sage, Lehman, & Seeman, 2004), and occurrence of depressive episodes (Schilling, Aseltine, & Gore, 2007) or attempts at suicide (Felitti et al., 1998).

Narcissism is described as essentially a cognitive-affective preoccupation with the self (Kernberg, 1975; Morf & Rhodewalt, 2001) and associations between narcissism and early transactions of a child with his/her primary caregivers were already made by psychoanalysts and clinical theorists at the beginning of the 20th century (Freud, 1914). According to these theorists (Freud, 1914; Kernberg, 1975; Kohut, 1977), cold, unresponsive, rejecting or insufficiently emphatic parenting fails to provide the child with a stable core to build his/her self-image on and the child is forced to use narcissistic strategies as a defence response. Kernberg (1975, 1986) further suggests that coldness and strictness combined with intrusiveness, parental admiration and high expectations lead to the formation of a narcissistic individual, while Kohut (1977) points out unemphatic parenting and using the child for the parent’s own narcissistic gratification as playing the pivotal role in this process. To sum up their views, exposure to inadequate parenting which was unable to provide emphatic responses to the child’s feelings and satisfy his or her emotional needs motivates the child to continually seek intensive interpersonal validation well into his or her adulthood. The pervasive feelings of inferiority and low self-esteem are disguised with a grandiose mask but the narcissistic individual experiences daily difficulties in self-esteem regulation, affect regulation and in interpersonal relationships (Ronningstam, 2005).

These difficulties appear to manifest themselves differently in two phenotypic types of narcissistic dysfunction (Pincus et al., 2009; Pincus & Roche, 2011): the grandiose narcissism, which is also referred to as wilful (Wink, 1992) or arrogant narcissism (Ronningstam, 2005), and the
vulnerable narcissism, also referred to as hypersensitive (Wink, 1992) or shy narcissism (Ronningstam, 2005). Although both types of narcissists share common features of arrogance and self-absorption (Wink, 1991), feelings of entitlement and lack of empathy (Morf & Rhodewalt, 2001), grandiose narcissism appears to be a more adaptive type of narcissism. Indeed, grandiose narcissists exert exhibitionism, self-importance and preoccupation with receiving admiration and attention (Wink, 1991); however, they can be socially charming, have abundant energy and experience less negative affect than their vulnerable counterparts. On the other hand, vulnerable narcissism has been characterised as the more maladaptive form of narcissism. Vulnerable narcissists are often described as openly displaying shyness, lack of self-confidence and hypersensitivity to others’ criticism while at the same time experiencing unconscious feelings of grandeur and hiding grandiose fantasies beneath their insecure façade (Kernberg, 1986; Wink, 1991).

A number of recent empirical studies have found associations between narcissistic traits and early life experiences (e.g. Cater, Zeigler-Hill, & Vonk, 2011; Otway & Vignoles, 2006). They seem to support the early hypotheses made by psychoanalysts that adult narcissism is the product of parental coldness or/and excessive parental admiration during childhood. More specifically, Cater et al. (2011) found that the feature of entitlement/exploitativeness and overall features of grandiose narcissism were associated with negative experiences in early childhood, while narcissistic vulnerability and some more adaptive features of grandiose narcissism (leadership/authority and grandiose exhibitionism) were not. In the study conducted by Otway and Vignoles (2006), recollections of both parental coldness and overvaluation were found to contribute positively to predictions of narcissism, and, furthermore, this combination of early negative experiences was an important component in predicting both grandiose and vulnerable narcissism. However, there was a distinction in predicting these two types of narcissism. Parental overvaluation was a stronger predictor of grandiose than vulnerable narcissism, which suggests that parental admiration may be a factor that provides some benefits in adjustment and self-protection for grandiose narcissists. Other empirical findings have found associations between narcissism and parental psychological control (Horton, Bleau, & Drwecki, 2006; Horton & Tritch, 2014) and permissive and authoritarian parenting styles (Watson, Little, Sawrie, & Biderman, 1992; Ramsey, Watson, Biderman, & Reeves, 1996), which is also in line with the earlier predictions.

Research concerning narcissistic adjustment in adulthood has yielded ambiguous results. Numerous studies on narcissism have found differences in the adjustment of the two narcissistic types. Watson, Little, Sawrie and Biderman (1992) suggested that different narcissistic features are situated on different points of an adjustment continuum so that grandiose
narcissistic features lie more toward the well-adjusted end of the continuum and vulnerable toward the maladjusted end. Furthermore, Rose (2002) demonstrated that overt narcissism, which he associates with a grandiose sense of self, positively predicted happiness and covert narcissism, which he associates with hypersensitivity to others’ evaluations, predicted it negatively, while both relationships were mediated by self-esteem. Sedikides, Rudich, Gregg, Kumashiro and Rusbult (2004) also found that overt narcissism positively predicted self-esteem and wellbeing. Hill and Lapsley (2011) investigated narcissism in adolescents and used the Narcissistic Personality Inventory (NPI; Raskin & Terry, 1988) as a measure of overt narcissism, which they associated with omnipotence, and Hendin and Creek’s (1997) measure of hypersensitive narcissism, which they associated with personal uniqueness. Omnipotence was negatively related to self-esteem problems and depression and personal uniqueness was positively associated with interpersonal, family and self-esteem problems, anxiety and depression. Yet, in another study, Rhodewalt, Madrian and Cheney (1998) found that grandiose narcissists show greater daily variability of mood, mood intensity and self-esteem instability than the less narcissistic individuals. Further confusion concerning the adaptation of narcissists is added with the use of different measures of narcissism. While some authors recognize three types of narcissism (one well-adjusted and two maladjusted versions), namely, autonomous, which is defined as healthy or well-adjusted narcissism, wilful (grandiose) and hypersensitive (vulnerable) type (Wink, 1992), others point out that some measures of the grandiose type such as the NPI in fact measure the healthy type and thus provide the false perception of the well-adjusted grandiose narcissist (Pincus et al., 2009). Given the fact that some results which suggest the well-adjustment of the grandiose type might be due to the insufficient validity of the tests that measure grandiose narcissism, there are some other instruments constructed in order to provide a reliable and valid measure of the grandiose type narcissism, such as the Pathological Narcissism Inventory (PNI; Pincus et al., 2009).

Following the previous findings on the relations between exposure to risky family environment during early caregiving and later adjustment, as well as the role of early experiences in the development of specific narcissistic traits, the aim of this study was to examine the relationship between early risky family experiences, individual’s narcissistic traits and adjustment in emerging adulthood. Moreover, the aim was to explore the possible mediation role of narcissistic traits in the relationship between early experiences and current adjustment. In order to provide a thorough overview of the participants’ adjustment, we chose two different measures of adult adjustment: subjective wellbeing as a positive outcome variable and a measure of distress which takes into account symptoms of depression, anxiety and stress. Due to different manifestations of narcissism in its grandiose and fragile form,
we hypothesize different patterns of these associations for grandiose and vulnerable narcissism. Some studies show that vulnerable narcissism may function as a mediator of poor adjustment following childhood physical abuse (e.g. Keene & Epps, 2016). However, there is little research examining the role of grandiose narcissism and the possible mediating role of both types of narcissism in the association between early risky family experiences and wellbeing.

**Method**

*Participants and procedure*

Participants in this study were 348 students (294 females), with the mean age of 21.57 years (SD = 2.91). The invitation to participate in the larger on-line study together with the link to the questionnaire was distributed to students from various universities in Croatia using student mailing lists and social networks, but the respondents were mainly from the University of Zagreb (91.5%). The approval of the ethical review board was obtained for all aspects of the study.

*Instruments*

*The Depression, Anxiety and Stress Scales* (DASS-21; Lovibond & Lovibond, 1995) consist of 21 items measuring depression (7 items, e.g., “I couldn’t seem to experience any positive feeling at all.”), anxiety (7 items, e.g. “I was aware of dryness of my mouth.”), and stress (7 items, e.g. “I found it hard to wind down.”). On each item, the participant estimates negative emotional symptoms he or she has experienced over the previous week, on a 4-point Likert scale ranging from 0 = *did not apply to me at all* to 3 = *applied to me very much, or most of the time*. A total score can be calculated for each subscale or the total scale, as an average of all responses, indicating one’s psychological distress. In this study we used the total scale score (α = .93).

*Personal Wellbeing Index* (the subscale of the *International Wellbeing Index*; International Wellbeing Group, 2013), the Croatian version (Kaliterna-Lipovčan, Prizmić-Larsen, & Brkljačić, 2011), consists of seven items assessing participants’ satisfaction with seven life domains (standard of living, health, achievement in life, relationships, safety, community-connectedness, and future security). Participants rate their satisfaction in each domain on a scale from 0 = *no satisfaction at all* to 10 = *completely satisfied*. The total score representing the participant’s subjective wellbeing is calculated as the mean of all responses. The Cronbach’s alpha in this study was .92.
Pathological Narcissism Inventory (Pincus et al., 2009) consists of 52 items measuring two features of pathological narcissism – narcissistic grandiosity (18 items, e.g. “I can make anyone believe anything I want them to”; α = .82) and narcissistic vulnerability (34 items, e.g. “It’s hard for me to feel good about myself unless I know other people like me”; α = .93). Participants respond to each item on a 6-point Likert scale ranging from 0 = not at all like me to 5 = very much like me, and the total score for each subscale is calculated as the mean of the responses.

The Risky Families Questionnaire (RFQ; Taylor et al., 2004) consists of 11 items assessing childhood experiences in the household where the person was growing up (e.g. “How often did a parent or other adult in the household swear at you, insult you, put you down, or act in a way that made you feel threatened?”). Participants rate each item on a 5-point Likert scale ranging from 1 = not at all to 5 = very often/much. The total score is calculated as the mean of all responses after reversing 3 items, so the higher score indicates riskier family experiences. The Cronbach’s alpha in this study was .89.

Statistical analyses

The relationships between study variables were explored using path analysis, performed in Mplus 7 (Muthén & Muthén, 1998). The parameter estimates were obtained using the maximum likelihood method, and the model fit was evaluated using the recommended absolute, comparative and parsimonic fit indices: χ², RMSEA (Root Mean Square Error of Approximation), CFI (Comparative Fit Index), TLI (Tucker Lewis index) and SRMR (Standardized Root Mean Square Residual). Insignificant χ² values of RMSEA <.06, CFI & TLI > .95, and SRSM <.05 were used as indicators of good model fit (Hu & Bentler, 1999).

Results

Correlation matrix shows that distress is positively related to early risky family experiences, as well as to both narcissistic traits. On the other hand, wellbeing is negatively related to early risky family experiences and only to vulnerable narcissism. Moreover, both narcissistic traits are positively related to early risky family experiences, providing the basis for investigating the possible mediational role of narcissism in the relationship between early risky family experiences and current adjustment.
The hypothesized mediation model was tested using path analyses. First, the partial mediation model (i.e. with both direct and indirect effects (through narcissistic traits) of early risky family experiences on adult adjustment) was tested. After removing insignificant paths, this model showed good fit to the data ($\chi^2(2) = 2.07, p = .36$, RMSEA = .01, CFI = 1.00, TLI = 1.00, SRMR = .02). Next, the full mediation model (i.e. with direct paths from early risky family experiences to adult adjustment set to zero) was tested. This resulted in a significant drop in the model fitness ($\Delta \chi^2 (2) = 28.35, p<.001$), and therefore the partial mediation model was kept as final (Figure 1). The strength of indirect effects was determined according to Kenny’s (2017) recommendations.

Figure 1. Final model of the relationship between early risky family experiences, narcissistic traits and adult adjustment

Note: Standardized regression coefficients are shown; * $p<.05$, ** $p<.01$
Early risky family experiences positively predicted both grandiose and vulnerable narcissism, and also directly negatively predicted one's personal wellbeing and positively one's distress. Furthermore, vulnerable narcissism positively predicted distress and negatively predicted one's wellbeing, while grandiose narcissism did not predict any indicator of adjustment. Therefore, the hypothesis regarding the mediating role of narcissistic traits was only partly confirmed. The indirect effect of early family experiences on distress through vulnerable narcissism was medium in size ($IE = .13, p = .00$), while the indirect effect on wellbeing was small ($IE = -.04, p = .01$). Together, these predictors explained 12% of the wellbeing variance and 25% of the distress variance.

**Discussion**

The purpose of this study was to examine the relationship between early risky family experiences, individual's narcissistic traits and adjustment in emerging adulthood, and possible mediating role of narcissistic vulnerability and grandiosity in the association between early risky family experiences and adult adjustment (wellbeing and distress). In line with expectations and previous findings (e.g. Otway & Vignoles, 2006), the results showed that early risky family experiences positively predicted both grandiose and vulnerable narcissism, supporting the assumptions of psychoanalytic theorists (e.g. Kernberg, 1975; Kohut, 1977) and the relevance of childhood family experiences for the development of narcissistic traits. Moreover, early risky family experiences also directly negatively predicted one's personal wellbeing and positively one's distress, reiterating previous findings (e.g. Schilling et al., 2007; Taylor et al., 2004). There was also an indirect effect of early family experiences on adjustment in emerging adulthood through vulnerable narcissism, although not through grandiose narcissism, so the hypothesis regarding the mediating role of narcissistic traits was only partly confirmed. One of the possible explanations for this may be in the content of the early risky family experiences construct as defined in our study. Namely, it is focused mostly on negative experiences, parental coldness and neglect, which are more related to vulnerable than to grandiose narcissism (e.g. Otway & Vignoles, 2006), with some studies showing that such early negative experiences are unrelated to grandiose narcissism (e.g. Miller et al., 2010). More specifically, such early negative experiences contribute to the development of feelings of inadequacy, incompetence, hypersensitivity to criticism and negative affect, which are characteristic of vulnerable narcissism. In turn, individuals with such characteristics are more prone to poor adjustment and distress, so the mediational role of the vulnerable narcissism is not surprising, and is in line with previous findings (Keene & Epps, 2016).
Some of the previous researchers suggested that there is a positive link of grandiose narcissism and adjustment (e.g. Watson et al., 1992; Sedikides et al., 2004), while other studies indicated that, unlike vulnerable narcissism, grandiose narcissism has no significant relations with the indices of psychological distress (e.g. Miller et al., 2011). The results of our study showed that grandiose narcissism was not a significant predictor of any indicator of adjustment. While resilience to symptoms of distress of individuals high on grandiose narcissism is in line with previous findings (Miller et al., 2011), a positive link between grandiose narcissism and subjective wellbeing detected in some of the previous studies (e.g. Egan, Chan, & Shorter, 2014; Rose, 2002) was not replicated in the present study. However, there is evidence that the positive link between grandiose narcissism and wellbeing is fully mediated by self-esteem (e.g. Sedikides et al., 2004; Zuckerman & O’Loughlin, 2009), and it is speculated that the divergent relations between grandiose and vulnerable narcissism and self-esteem are indicative of fundamental differences in the nature of these constructs. Moreover, it is important to note that the mere lack of distress does not imply subjective wellbeing and well-adjusted personality, and our results corroborate this. Finally, it is possible that the used measure of pathological narcissism does not capture narcissistic aspects that are related to subjective wellbeing, as there is evidence that the PNI is a useful tool to assess the more pathological end of narcissism (Morf et al., 2018).

Although the results of this study provided some deeper insights into the relations between early risky family experiences, individual's narcissistic traits and adjustment in emerging adulthood, there are some limitations to be considered. For example, the participants in our study were mostly female, limiting the possibilities of generalizations only to female emerging adults. Moreover, the sample consisted of students, who are generally well adjusted (and our results show they score lower on distress, higher on wellbeing and lower on narcissism), so the relationships observed in this study might be different in clinical samples. Finally, early risky family experiences were evaluated retrospectively, while all the other measures were assessed in the present. Therefore, future studies would benefit from using a longitudinal design and a more heterogeneous sample in exploring the relations of the early experiences, narcissistic traits and adjustment in early adulthood.

Nevertheless, the findings of this study provide interesting insights which could be useful in clinical practice. More specifically, they highlight the importance of early risky family experiences in the development of both forms of narcissism, and the subsequent link between vulnerable narcissism and poor adult adjustment, which could be useful in screening processes. Moreover, the reiterated importance of distinguishing between two forms of narcissism in the scientific context is even more important in the clinical settings, since vulnerable narcissism is positively associated with psychiatric treatment utilization, while grandiose narcissism is not (Pincus et al., 2009). This is especially important in
the light of our results, which corroborate that individuals high on vulnerable narcissism are more prone to experiencing distress.

Conclusion

The results of this study showed that early risky family experiences predicted adult adjustment both directly and indirectly, through vulnerable narcissism. While early risky family experiences were linked to both forms of narcissism, only vulnerable narcissism was linked to poor adult adjustment. In sum, the results reiterate the importance of distinguishing between two forms of narcissism.

References


Rana porodična iskustva, narcisoidne crte i prilagodavanje na prelazu ka odraslim dobu

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Izloženost rizičnoj porodičnoj sredini tokom detinjstva ostavlja posljedice na razne ishode povezane s mentalnim zdravljem u odraslim dobu. Nedavna istraživanja našla su vezu između narcisoidnih crta ličnosti i sećanja na rana iskustva. Međutim, važno je razlikovati dve forme narcisoidnosti: grandioznu (koju karakterišu grandioznost, agresija i dominacija) i vulnuerabilnu (koju karakterišu odbrambena i nesigurna grandioznost koja prikriva osećaje neprikladnosti, nekompetencije i negativne osećaje), jer su neki aspekti narcisoidnosti snažnije povezani s psihološkom dobrobiti nego drugi. Stoga je cilj ovog rada bio ispitivanje odnosa između ranih rizičnih porodičnih iskustava, narcisoidnih crta ličnosti i prilagodavanja mladih na prelazu ka odraslim dobu. Takođe, cilj je bio ispitivanje narcisoidne vulnerabilnosti i grandioznosti kao mogućih medijatora u odnosu između ranih rizičnih porodičnih iskustava i trenutnog prilagodavanja (dobrobiti i distresa). Podaci su prikupljeni online na ukupno 348 studenata u Hrvatskoj (294 ženskog spola, $M_{dob} = 21.57, SD = 2.91$). Pretpostavljeni medijacijski model testiran je analizom traga, i pokazao je dobru usaglašenost s podacima. Rana rizična porodična iskustva pozitivno su predvidela i grandioznu i vulnerabilnu narcisoidnost, te su direktno negativno predvidela ličnu dobrobit, a pozitivno distres pojedinca. Nadalje, vulnerabilna narcisoidnost je pozitivno predvidela distres i negativno ličnu dobrobit, dok grandiozna narcisoidnost nije predvidala nijedan od indikatora prilagodavanja, čime je hipoteza o medijacijskoj ulozi narcisoidnih crta samo delimično potvrđena. Rezultati su, govoreći u opštem, ukazali na teorijski smislene veze između psihološkog prilagodavanja, narcisoidnih crta i ranih iskustava, naglašavajući važnost razlikovanja između dve forme narcisoidnosti.

**Ključne reči:** rana rizična porodična iskustva, vulnerabilna narcisoidnost, grandiozna narcisoidnost, dobrobit, distres