

Working with Narcissism: Caring for our Clients and Ourselves

Robin Lange, Ph.D



Overview

- Orienting
- A brief history
- What is NPD?
- Assessment measures
- Treatment options and prognosis
- Caring for ourselves
- Q&A
- Citations and recommendations for further reading

Orienting

- · Me:
 - Washington, DC
 - Art: National Gallery Open Access https://www.nga.gov/open-access-images.html
 - Mid career Counseling Psychologist
 - Outpatient setting with adults
 - Third wave behavioral treatment orientation
- You: Audience poll
- Why Narcissism?



Text ROBINLANGE128 to 22333 once to join

What is your professional affiliation?

Medical Professional

Student

Social Worker

Certified Mental Health Counselor

Addictions Counselor

Peer Specialist

Psychologist

Interested community member

Other



"Personality is an internal, psychological construct that determines how an individual views and makes sense of events, interacts with others, and creates expectations as to how the world functions."

- Fox, 2021



Case vignette: <u>DivorceMag.com</u> 16 Signs You're Married to a Narcissist

Wallace Kelly People in Boxes
The Angry 1975 color screenprint on woven paper

What words come to mind after hearing these posts?

Mental Health Clinicians Attitudes Toward Narcissistic Personality Disorder

- Muir et al. 2021 highlight the gap in mental health practice
- 16 item survey to 173 participants recruited from online psychology forums in 2019.
- Patients are "difficult and challenging"
- Clinicians report minimal experience with treatment
- High treatment drop out rates
- Formal didactic training enhances patient outcomes

Compassion is not a relationship between the healer and the wounded. It's a relationship between equals. Only when we know our own darkness well can we be present with the darkness of others. Compassion becomes real when we recognize our shared humanity.

-Pema Chodron





Moral and religious perspectives: Pride





Early Psychoanalysts

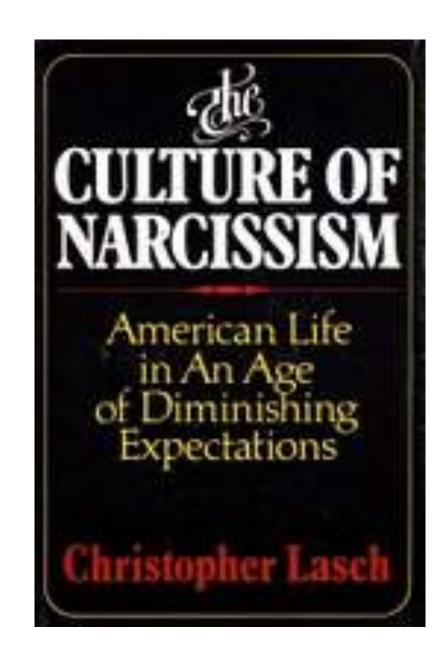
- Otto Rank: 1911 Published one of the earliest descriptions of narcissism connected to self-admiration and vanity.
- **Freud**: 1914, published On Narcissism: An Introduction. Survival instincts, or Libido can be directed inward or outward toward others. Infants direct the libido inward, a state he referred to as primary narcissism. Self love can be transferred to other people or objects, decreasing primary narcissism.

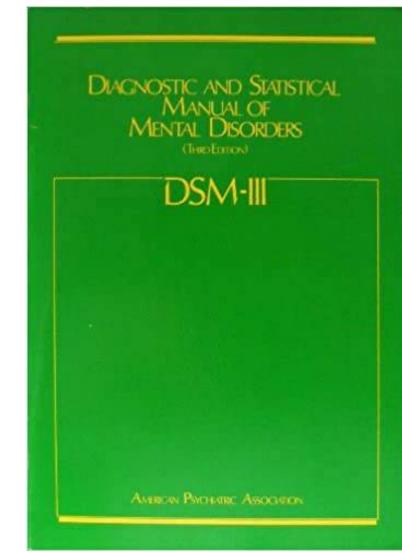
Object Relations Theorists

- Otto Kernberg: 1967 Narcissism is central theory of personality structure.
 Can be normal or pathological
- **Heinz Kohut**: 1968 Expanded on Freud. Narcissism is part of normative development, and challenges Self-object relationships lead to failure to progress beyond this stage. First mention on Narcissistic Personality Disorder.

1980s

- Christoper Lasch's Culture of Narcissism is won the National Book Award in 1980. Suggests cultural conditions in post WWII US lead to pathological narcissism and the decline of the family
- DSM III: 1980 includes diagnosis of Narcissistic Personality Disorder
 - "Only when personality traits become inflexible and maladaptive and cause either significant impairment in social or occupational functioning or subjective distress that they constitute *Personality Disorders* (p. 305, APA, 1980).
- DSM III R: Cluster B "dramatic, emotional, or erratic" includes antisocial, borderline, histrionic and narcissistic personality disorders (APA, 1987).





Millon's Social Learning Theory (1981)

- · Caused by dysfunctional socialization experiences in childhood
- Children internalize their parents way of viewing and treating the child
- Parents who socialize children to believe they are more special and entitled than other children are vulnerable to narcissism
- · Limited longitudinal research suggests overvaluing parent behaviors predict child narcissism, while parental warmth predicted self esteem (Brummelman et al., 2016).
 - Making child stand out
 - Overestimate child's IQ
 - Over claim child's knowledge
 - Overpraise child's performances



What is NPD?

Prevalence, diagnostic criteria, and differential diagnosis

Prevalence

- Estimated 1-6% of the population meets criteria for NPD (Norway .8, US 6.2).
- Results from Wave 2 National Epidemiologic Survey on Alcohol and Related Conditions (NESARC) (Pulay, Goldstein, Grant, 2011).
 - · Gender: Men 7.7%, Women 6.2%
 - Age: 20-34 8.9%, 35-49 6.5%, 50+ 4.4%
 - · Race-ethnicity: White 5%, Black 12.5%, Hispanic 7.5%
 - Family Income: 0-19,999 7.5%, 20-34,999 6.9%, 35-69,999 5.7, 70+ 5.4%
 - Region: Northeast 5.8%, Midwest 5.9%, South 6.2%, West 6.7%







Media portrayals of Narcissistic Personality Disorder

Case vignette (Caligor, Levy, & Yeomans, 2015)

"Mr. A" is a 42-year-old married man presenting to a private-practice psychotherapist complaining of problems with his wife. He is a successful entrepreneur, highly competitive, who describes enjoying social gatherings, where he tends to be the center of attention, as well as challenges at work, where he believes that he has a superior ability to solve problems. He comes to treatment because he is wondering whether or not to stay in his marriage. Mr. A described having lost all sexual interest in his wife during their early years together. Throughout the marriage, he has maintained a series of lovers whom he has housed, supported, and then cut off and replaced. He feels that this arrangement has had no impact on his relationship with his wife but wonders if he would do better with someone else.



Audience Poll

What is your diagnostic impression?

What is your diagnostic impression?

DSM 5 Diagnostic Criteria for Narcissistic Personality Disorder

- Traditional, trait focused model, requires 5/9 of the polythetic criteria set
 - Grandiose sense of self
 - Preoccupation with fantasies of unlimited success, power, brilliance, beauty, or ideal love
 - · A belief that they are special and unique, only being understood by high power people
 - A need for excessive admiration
 - A sense of entitlement
 - Interpersonally exploitative behavior
 - Lack of empathy
 - Envy of others and belief that others are envious of them
 - · A demonstration of arrogant or haughty attitudes or behaviors (APA, 2013)

DSM 5 Alternate Model (APA, 2013)

- Requires impairment in functioning and pathological personality traits
- · Criterion A: Clinical impairment in 2/4 characteristics
 - Identity: How you experience yourself as separate from others, accurate assessment of self value, and emotional control
 - Self direction: Ability to pursue clear and important goals, manage your behavior, and have insight into your own actions and motives
 - **Empathy:** Understanding and caring about another's experiences, tolerating alternate viewpoints, and recognizing the impact of your behavior on others
 - Intimacy: Being able to connect emotionally to others, desire and capacity for interpersonal closeness, conveying consideration of others sharing their feelings.

• <u>Criterion B</u>: 25 pathological personality traits organized into five dimensional trait domains derived from meta-analyses and empirical data.

Negative affectivity

Detachment

Antagonism

Disinhibition

Psychoticism

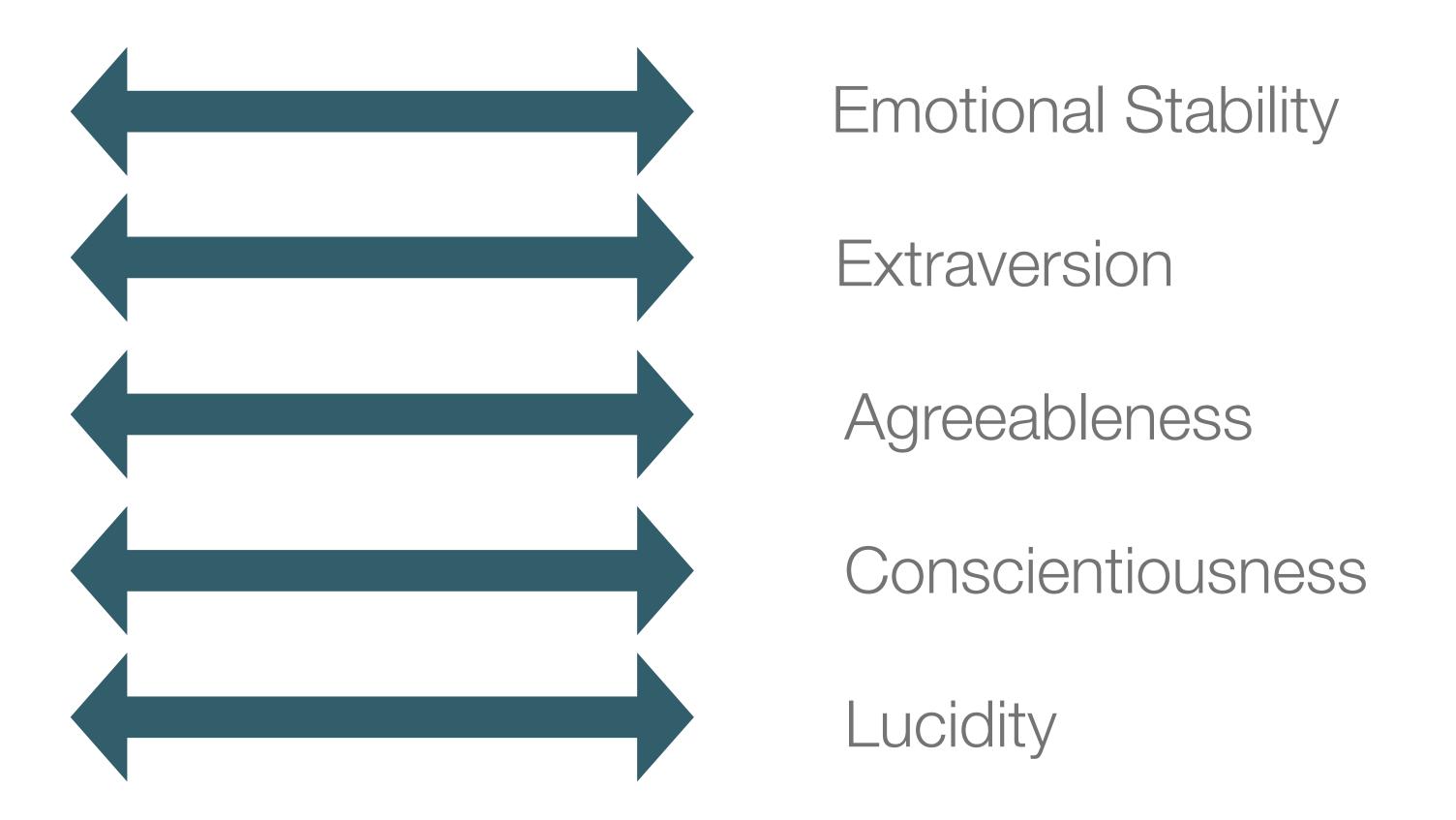


TABLE 2. Proposed Criteria for Narcissistic Personality Disorder in the Alternative DSM-5 Model for Personality Disorders^a

- A. Moderate or greater impairment in personality functioning, manifested by characteristic difficulties in two or more of the following four areas:
 - Identity: Excessive reference to others for self-definition and self-esteem regulation; exaggerated self-appraisal inflated or deflated, or vacillating between extremes; emotional regulation mirrors fluctuations in self-esteem.
 - 2. **Self-direction**: Goal setting based on gaining approval from others; personal standards unreasonably high in order to see oneself as exceptional, or too low based on a sense of entitlement; often unaware of own motivations.
 - 3. **Empathy**: Impaired ability to recognize or identify with the feelings and needs of others; excessively attuned to reactions of others, but only if perceived as relevant to self; over- or underestimate of own effect on others.
 - 4. Intimacy: Relationships largely superficial and exist to serve self-esteem regulation; mutuality constrained by little genuine interest in others' experiences and predominance of a need for personal gain.
- B. Both of the following pathological personality traits:
 - Grandiosity (an aspect of Antagonism): Feelings of entitlement, either overt or covert; self-centeredness; firmly holding to the belief that one is better than others; condescension toward others.
 - Attention seeking (an aspect of Antagonism): Excessive attempts to attract and be the focus of the attention of others; admiration seeking.

^a Reprinted from American Psychiatric Association: *Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition*. Arlington, Va., American Psychiatric Association, 2013, pp. 767–768. Copyright 2013, American Psychiatric Association. Used with permission.

Grandiose Narcissism

- Intensely felt needs for validation and admiration
- Urgent seeking of self enhancement experiences
- Increased vulnerability to emotional and behavioral dysregulation
- Copes with dysregulation by creating an exaggerated sense of superiority and uniqueness
- Behaviors associated with entitlement, exploitativeness, lack of empathy, and envy or aggression may occur when dysregulated
- Externalizing behaviors
- Low insight (Pincus & Roche, 2011)
- Report secure or dismissive attachment style (Fox, 2021)
- Extraverted



La Petite Danseuse de Quatorze Ans 1880 by Edgar Degas

Vulnerable Narcissism

- Copes with dysregulation by engaging in grandiose fantasy while feeling intense shame regarding needs and ambition
- Avoid interpersonal relationships because of sensitivity to self enhancement failures
- Introverted, defensive, anxious
- Internalizing behaviors are predominant (Pincus & Roche, 2011)
- Report fearful or preoccupied attachment styles (Fox, 2021)
- Nonsuicidal self-injury and suicide attempts (Caligor, Levy, & Yeomans, 2015)

Karl Schrag Lonely Heights 1955 etching and stencil



Overt vs. Covert

- Overt: expressed behaviors, attitudes, and emotions
- Covert: Cognitions, private feelings, motives, needs
- No empirical evidence for distinct subtypes as all forms of personality include mix of overt and covert elements (Pincus & Roche, 2011)

Hide and Seek 1877 James Jacque Joseph Tissot

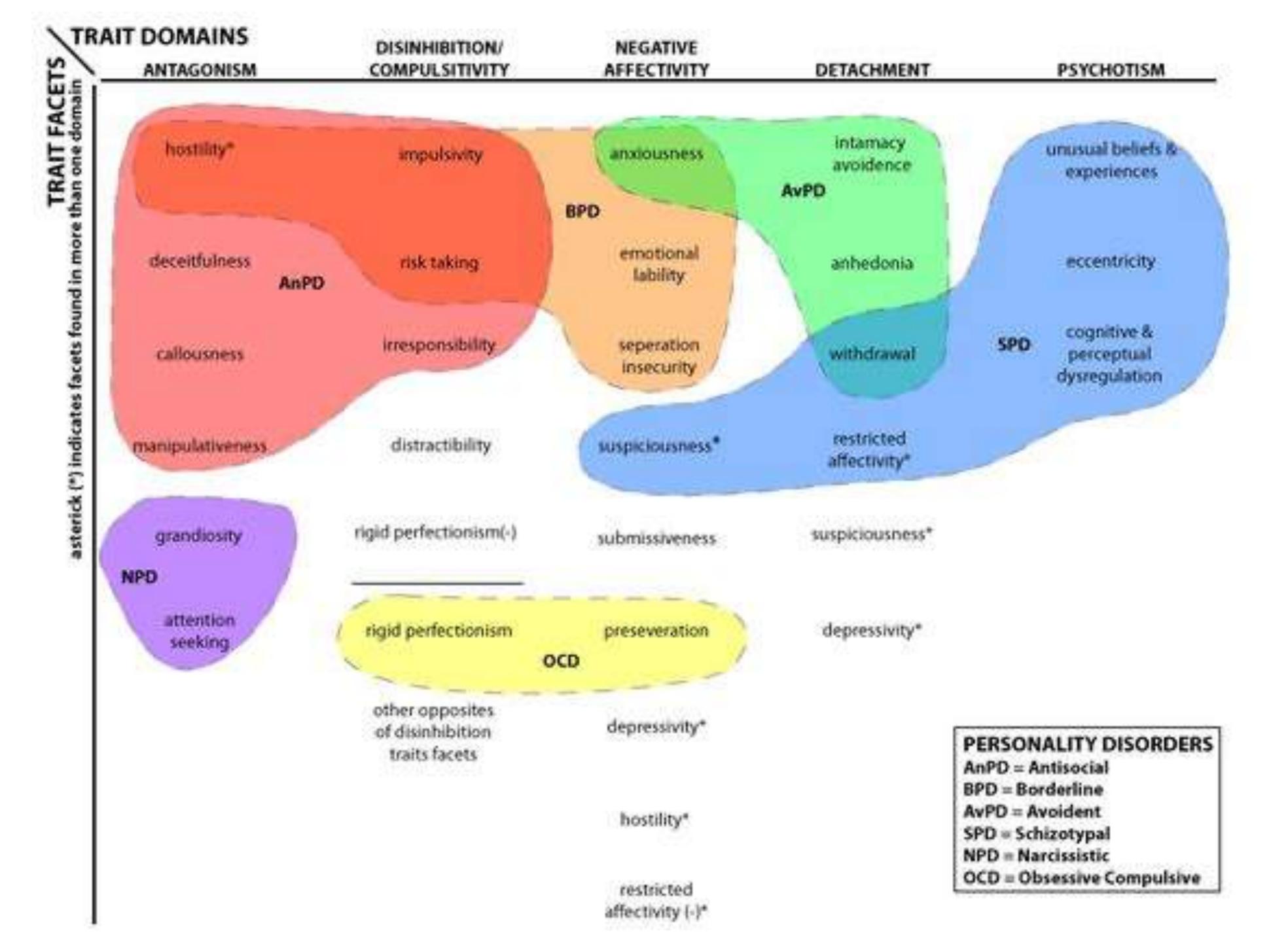


Successful versus Unsuccessful

- Subtype may be mediated by how effectively the person with NPD functions in the world.
 - Successful: Attainment of grandiose goals, effective interpersonal style allowing for exploitation of others
 - Unsuccessful: Non-attainment of grandiose goals, ineffective interpersonal interaction style leading to ignoring or criticism from significant others
- Chronic or acute failure to attain goals leads to symptoms of social withdrawal, burnout, complex grief, depression, alcoholism, and suicidality (Kramer et al, 2021.

Common Differentials and Comorbidities

- Anxiety Disorders: Anxiety is an excessive, recurring, and uncontrollable sense of fear that can manifest in many forms. May include reassurance seeking, social fears, self focus, impaired ability to identify or validate the emotions of others.
- PTSD: Social isolation or distancing, controlling behaviors of others in an attempt to reduce trauma cues, irritability and mistrust in interpersonal relationships
- · Narcissistic Traits: Entitlement and NPD are used interchangeably in some settings
 - Most individuals fall under "unspecified" or "other specified" categories due to increased thresholds that must be met for diagnosis in the alternate model (Fox, 2021).
 - · Personality Disorder-Trait Specified (PD-TS) may be used for sub threshold specificity.
- · Other personality disorders: Personality disorders overlap, are complex, and are best understood using dimensional models.
- Autism Spectrum Disorder: May include self-centeredness that is inappropriate to cultural expectations or the individual's age/ or developmental level. Treating people as objects or preferring objects to people. Poor empathy, expression of empathy, or theory of mind required to understand other people's inner worlds and sympathize with those differences. Trouble reciprocating others' emotions or expressing emotional caring.
- Substance use disorders
- Depression



Assessment of Narcissism

The Lonely Tower 1879 Samuel Palmer Alfred Herbert Palmer (printer)



ADDRESSING Model of assessment, (Hays, P. A., 2001)

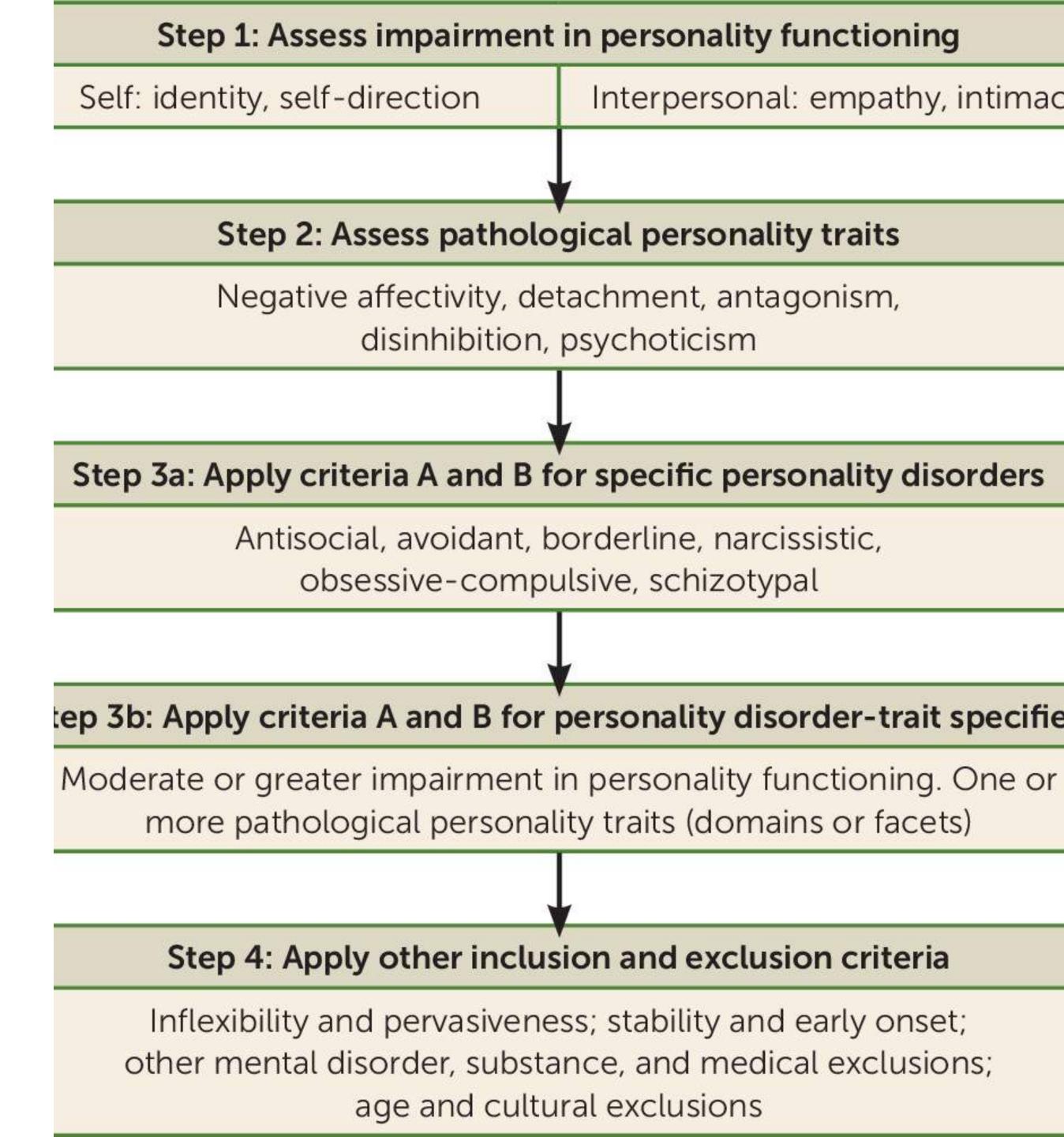
- Age
- Developmental and acquired Disabilities
- Religion
- Ethnicity
- Socioeconomic status
- Sexual orientation
- Indigenous Heritage
- National origin
- Gender

Narcissistic Personality Inventory (NPI) (Raskin, 1988)

- · 40 Paired statements, choose which most closely represents your feelings
- "I have a natural talent for influencing people" versus "I am not good at influencing people"
- What does the NPI really measure? Ackerman et al., 2011 propose a three factor structure including
 - Leadership/Authority: Positive outcomes
 - Entitlement/Exploitativeness: Maladaptive outcome
 - Grandiose Exhibitionism
- NPI-8 has been validated as a brief assessment measure with comparable factor structure to the NPI (Schmalbach et al., 2020)

Level of Personality Functioning Scale- Self Report

- Morey (2017) LPFS-SR
- Assessment of the interrelated personality components for criterion A of the Alternate model
- · 80 items
- Impairment ranges
 - 0 = Little or no impairment
 - 1 = Some impairment
 - 2 = Moderate impairment
 - 3 = Severe impairment
 - 4 = Extreme impairment



Narcissism Spectrum Scale

- **Echoism**, in which people never or rarely feel special, focus on others too much, at the expense of their own needs, and might even feel depressed or anxious.
- Healthy Narcissism, in which people are empathic, ambitious, confident, and capable of giving and receiving help.
- Extreme Narcissism, in which people are manipulative, argumentative, approval- seeking, and suffer from fluctuating self-esteem.
- https://www.drcraigmalkin.com/#narcissismtest
- The NSS was compared to the NPI and found to explain substantially more variance across domains of validation scales.



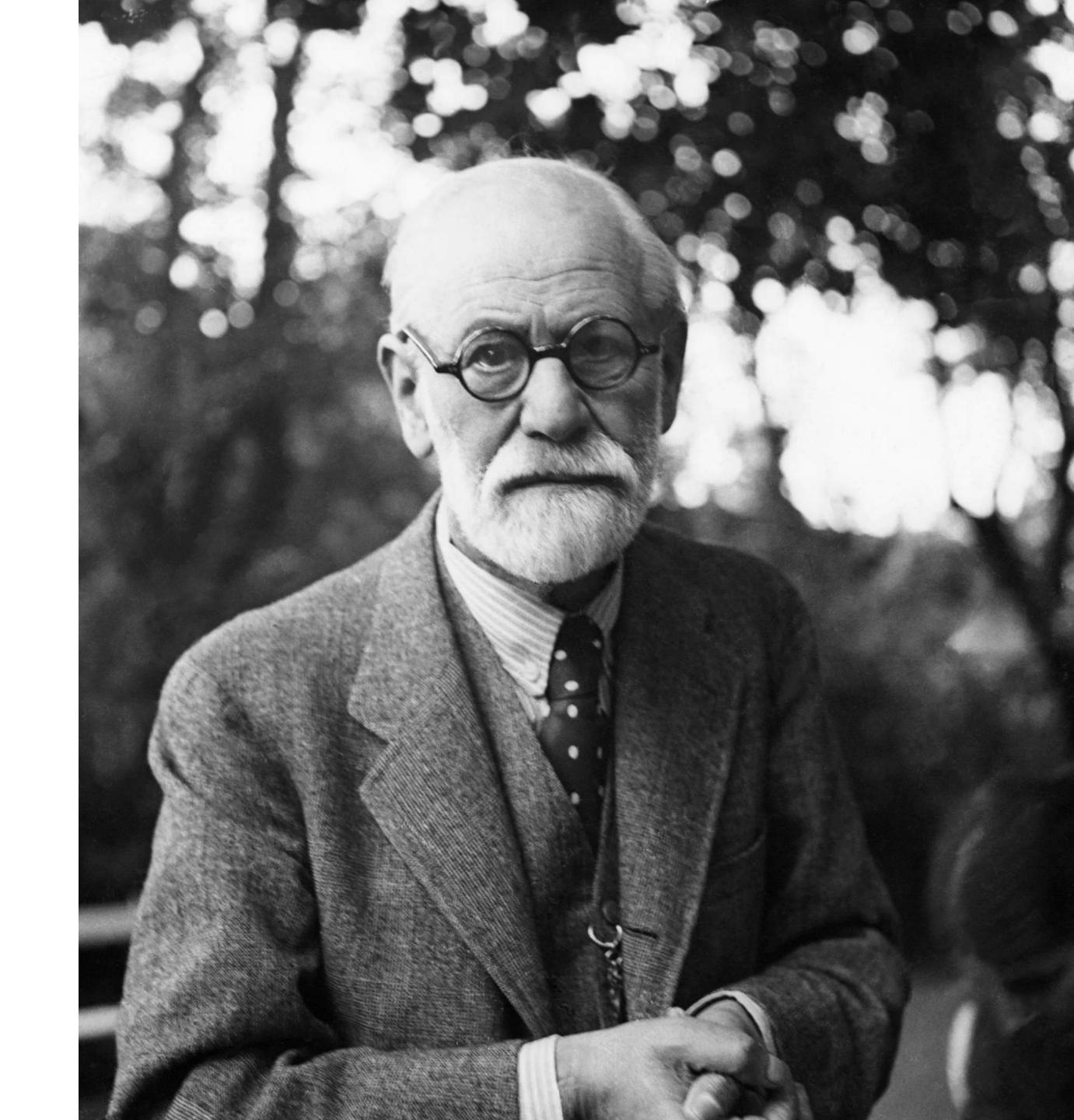
Treatment Options

The Hand as the Mirror of Salvation 1466 Netherlands



Psychodynamic approaches

- Transference and countertransference based approaches (Gabbard, 2009)
- Be aware of transference: Gently noticing themes of underlying insecurity
- Transference Focused
 Psychotherapy (Kernberg, 2004)



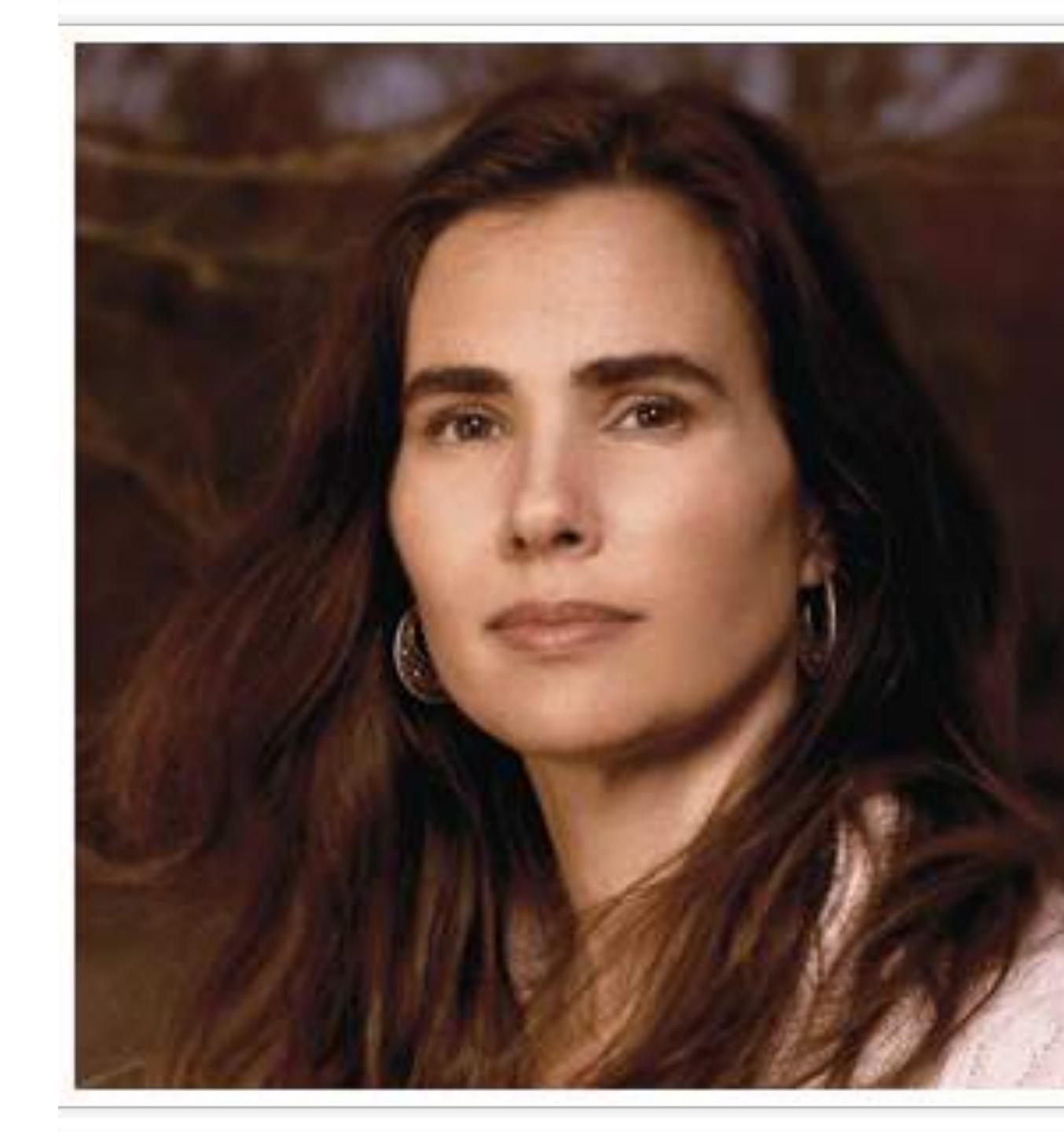
Dialectical Behavior Therapy

- Marcia Linnenan, PhD
- Suicidal and parasuicidal behaviors, BPD
- Augmented CBT with acceptance focused strategies
- Full program DBT includes weekly skills focused groups, individual therapy, therapist consultation team, and skills coaching contact to enhance skills generalization
- Therapy interfering behaviors: An inability to admit failings, difficulty incorporating feedback, and feelings of entitlement. (Reed-Knight & Fischer, 2011).



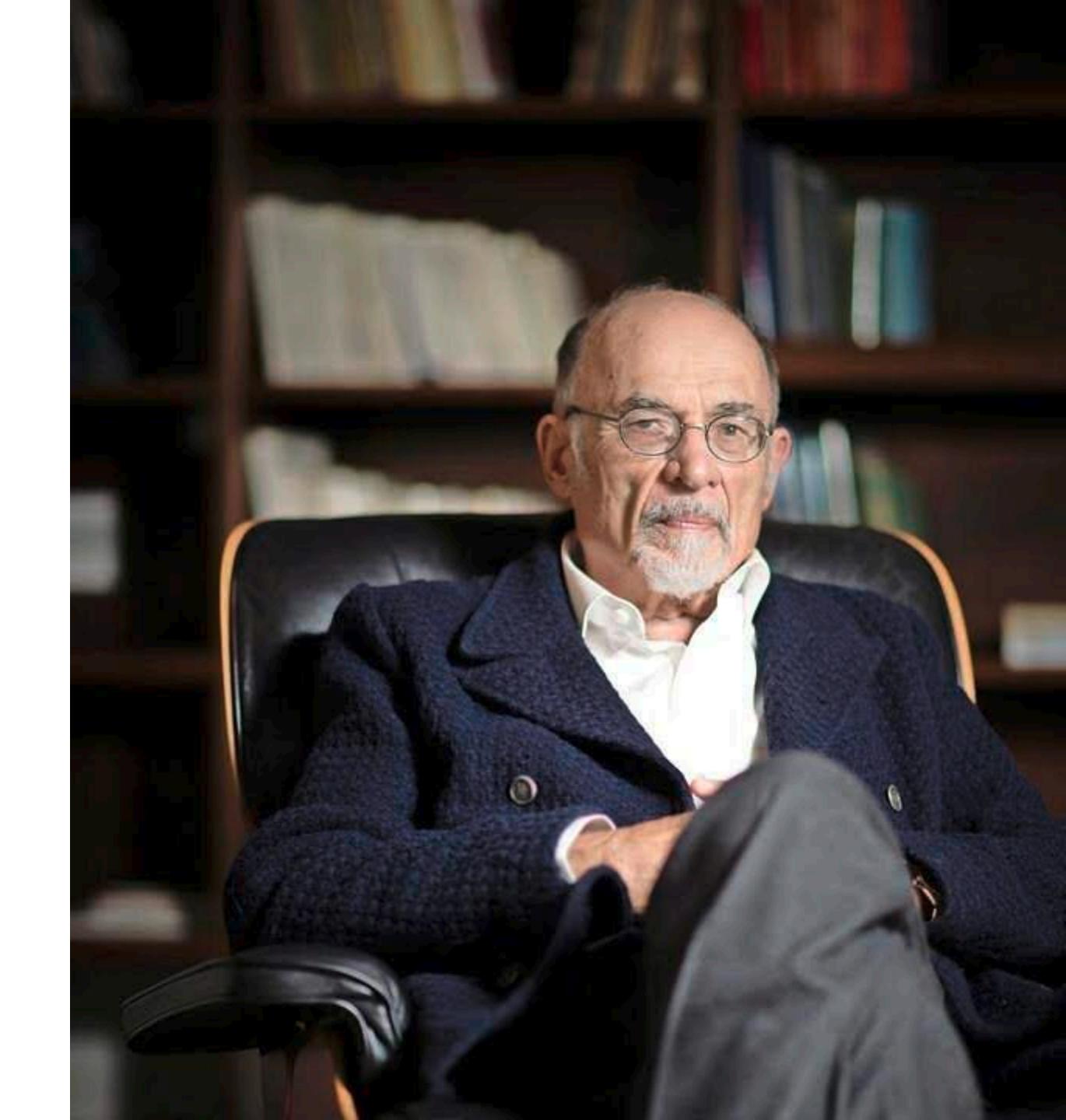
Mindful Self Compassion (MSC)

- Kristen Neff, PhD
- Self-esteem: Degree to which we evaluate ourselves positively, like or value ourselves, and is often based on comparisons with others, positive judgments, or evaluations.
- Self-compassion: A way of relating to ourselves as imperfect humans, not because we are special or above average.
 - Self kindness vs. Self judgment
 - Common humanity vs. Isolation
 - Mindfulness vs. Over identification
- Self Compassion Scale (SCS)



Group Therapy

- Clinicians find group interventions to be helpful, though rarely offered to these patients with NPD or traits.
- Evidence for efficacy of group therapy approaches for treatment of BPD (Muir et al., 2021).



Therapeutic stance and strategies

- Discuss diagnostic impressions
- Focus on the your shared goals and relationship. Therapeutic alliance building is essential to effective treatment (Ronningstam, 2017).
- Redirection with reminders of the task at hand
- Non judgmental stance: Calm, kind, and compassionate stance
- Validating emotions
- Reinforcing effective behavior
- Remember the shaping curve

Caring for ourselves

Highlights from

Ethics and self-care: Fostering joyful and sustainable professional practice in a pandemic

Erica H. Wise & David Shen-Miller APA CE WEBINAR AUG 12, 2021

Scene from the Steeplechase: The Fallen Jockey Edgar Degas 1866



Risks of working as a mental health provider

- In surveys conducted 30 years apart, psychologists commonly acknowledge "working when too distressed to be effective" despite the awareness that doing so is unethical. (Pope, Tabachnick & Keith-Spiegel, 1987 Schwartz-Mette & Shen-Miller, 2018)
- 40% report episodes of emotional exhaustion during the previous year (Mahoney, 1997).
- Psychosocial isolation and disrupted personal relationships are commonly reported (e.g., Shapiro, 2007)
- Compared to research psychologists, practicing psychologists report higher levels of distress...but also more positive influence from their work (Radeke & Mahoney, 2000).

APA 2021 Ethical Selfcare

- General Principle A: "... Psychologists strive to be aware of the possible effect of their own physical and mental health on their ability to help those with whom they work."
- 2.03 Maintaining Competence: Psychologists undertake ongoing efforts to develop and maintain their competence.
- 2.06 Personal Problems and Conflicts: Psychologists refrain from initiating activity when they know or should know that there is a substantial likelihood that their personal problems will prevent them from performing their work related activities in a competent manner
- 2.06 Personal Problems and Conflicts: When psychologists become aware of personal problems that may interfere with performing their work duties adequately, they take appropriated measures, such as obtaining professional consultation or assistance, and termite whether they should limit, suspend, or terminate their work related duties.

1. American Psychological Association, Ethical Principles of Psychologists and Code of Conduct (Washington, DC: American Psychological Association, 2017), https://www.apa.org/ethics/code/.

Self-care (Baker, 2003)

- · Self awareness of one's physical and psychological experiences.
- · Self regulation of one's personal and professional reactions.
- · Balancing the connections between self, others and larger community.

Self Care Strategies (Norcross & VandenBos, 2018)

- Value yourself
- Refocus on the rewards
- Recognize the hazards
- Minding the body
- Nurturing relationships
- Setting boundaries
- Sustaining healthy escapes
- Maintaining mindfulness
- Create a flourishing environment
- Profiting from personal therapy
- Cultivate spirituality and mission
- Foster creativity and growth (diversify)

Mindful self compassion activity

- · Giving and receiving compassion (Center for Mindful Self-Compassion)
 - Savoring the breath
 - Warming up awareness
 - · In for me, out for you
- centerformsc.org

UPCOMING EVENT

May 20

Calm and confident approaches for assessing self-harm and suicidality: Best practices for risk and liability management -- Sheila Crowell, Ph.D.

REGISTER: WWW.UCEBT.COM/EVENTS

NOW ON INSTAGRAM!



Follow us for events, resources, and news from our center.

@UCEBT



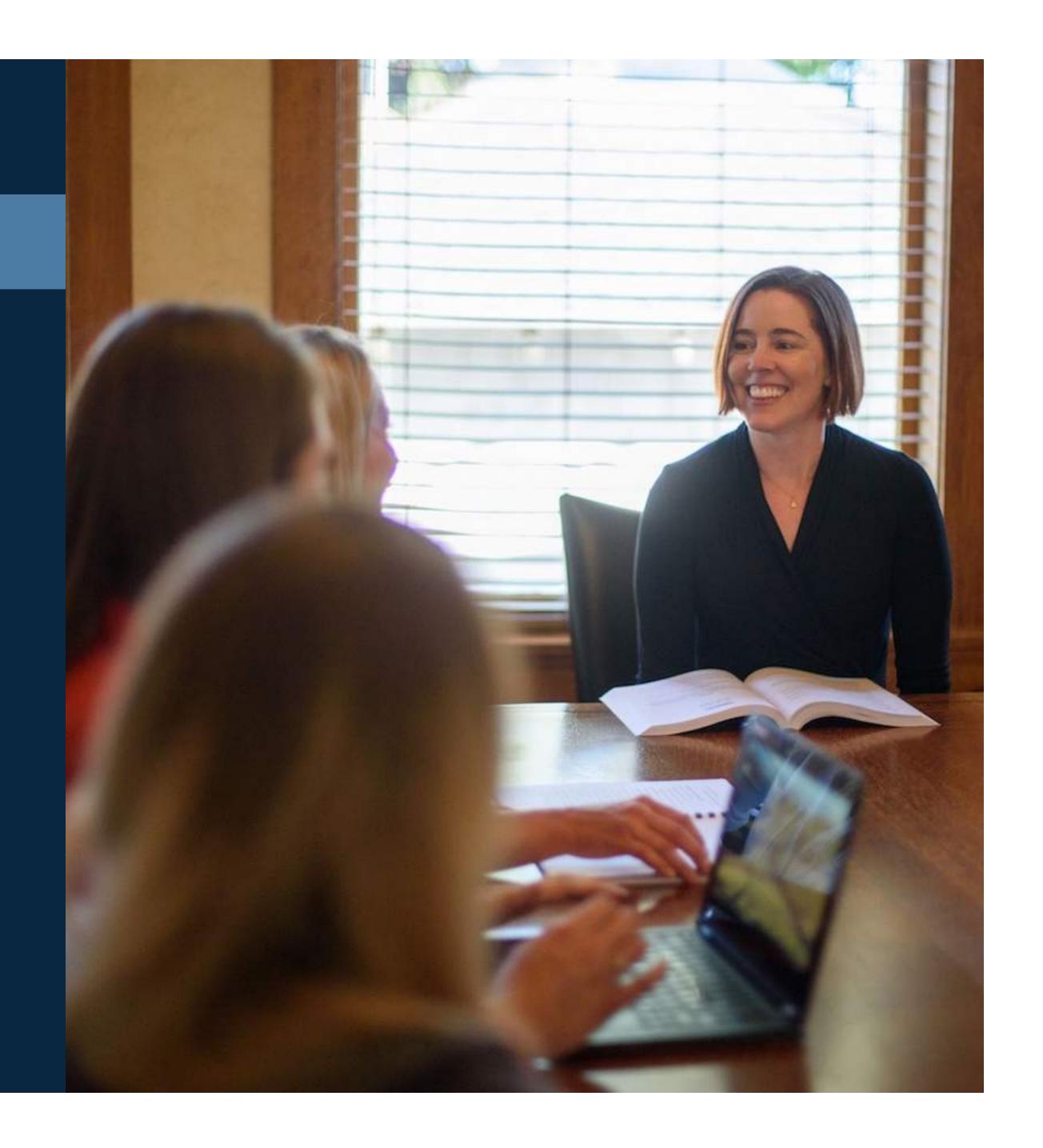
WE ARE HIRING

Licensed Psychologists:

- DBT Program
- Assessment & Testing Program

More information: www.ucebt.com/about-us/work-at-ucebt









Citations and recommendations for further reading

Ackerman, A., Witt, E. A., Donnellan, M. B., Trzesniewski, K. H., Robins, R. W., Kashy, D. A. What Does the Narcissistic Personality Inventory Really Measure? Assessment. 201118(1) 67–87.

Baker, E. K. (2003). Caring for ourselves: The therapist's guide to personal and professional well-being. Washington, DC: American Psychological Association.

Caligor, E., Levy, K. N., & Yeomans, F. E. Narcissistic Personality Disorder: Diagnostic and Clinical Challenges. Am J Psychiatry. 2015 172:5, 415-422.

Cratsley K. Revisiting Freud and Kohut on narcissism. Theory & Psychology. 2016;26(3):333-359. doi:10.1177/0959354316638181

Fox, D.J. (2021). Antisocial, Narcissistic, and Borderline Personality Disorders: A new conceptualization of development, reinforcement, expression, and treatment. New York: Routledge.

Hays, P. A. (2001). Addressing Cultural Complexities in Practice: A Framework for Clinicians and Counselors. Washington, D. C.: American Psychological Association.

Kacel, E. L., Ennis, N., & Pereira, D. B. Narcissistic Personality Disorder in Clinical Health Psychology Practice: Case Studies of Comorbid Psychological Distress and Life-Limiting Illness. Behavioral medicine. 2017; 43(3), 156–164. https://doi.org/10.1080/08964289.2017.1301875

Kramer U, Gholam M, Maillard P, Kolly S, Püschel O, Sachse R. Subtypes of narcissistic personality disorder based on psychotherapy process: A longitudinal nonparametric analysis. Personal Disord. 2021 Sep;12(5):400-410. doi: 10.1037/per0000438. Epub 2020 Nov 30. PMID: 33252965.

Malkin, C. (2015). Rethinking narcissism: The secret to recognizing and coping with narcissists. New York: Harper Perennial.

Muir O, Weinfeld JN, Ruiz D, Ostrovsky D, Fiolhais M, MacMillan C. Mental health clinicians' attitudes toward narcissistic personality disorder. Personal Disord. 2021 Sep;12(5):389-399. doi: 10.1037/per0000510. PMID: 34793187.

Norcross, J.C., & VandenBos, G. (2018) Leaving it at the office: A guide to psychotherapist self-care, 2nd edition. New York: Guilford.

Pincus, A. L., & Roche, M. J. (2011). Narcissistic grandiosity and narcissistic vulnerability. In W. K Campbell & J. D. Miller (Eds.), The handbook of narcissism and narcissistic

personality disorder: Theoretical approaches, empirical findings, and treatments (pp. 466-475). John Wiley & Sons, Inc.

Ronningstam E. An update on narcissistic personality disorder. Curr Opin Psychiatry. 2013 Jan; 26(1):102-6. doi: 10.1097/YCO.0b013e328359979c. PMID: 23187086.

Raskin, R.; Terry, H. (1988). "A principal-components analysis of the Narcissistic Personality Inventory and further evidence of its construct validity". Journal of Personality and Social Psychology, Vol 54(5), 890-902. https://openpsychometrics.org/tests/NPI/

Reed-Knight, B., & Fischer, S. (2011). Treatment of narcissistic personality disorder symptoms in a dialectical behavior therapy framework: A discussion and case example. In W. K. Campbell & J. D. Miller (Eds.), The handbook of narcissism and narcissistic personality disorder: Theoretical approaches, empirical findings, and treatments (pp.466–475). John Wiley & Sons, Inc..

Schmalbach, M., Zenger, M., Tibubos, A. N., Borkenhagen, A., Strauss, B., Brähler, E. The Narcissistic Personality Inventory 8: Validation of a Brief Measure of Narcissistic Personality. International Journal of Psychological Research. 2020; 13(2): 68-72. doi: 10.21500/20112084.4855