Research Article

Effect of Narcissism on Psychological Distress: The Roles of Emotion Regulation Skills and Perceived Social Support

Gamze Sen-Pakyurek *a

[a] Department of Clinical Psychology, University Manisa Celal Bayar, Turkey.

Abstract

In recent years, studies on the two-dimensional structure of narcissism with its grandiose and vulnerable aspects have intensified. This study emphasizes that there is a significant mediation role of emotional regulation skills and perceived multidimensional social support between narcissism and psychological distress. A Total 442 participants (74% female) between aged 18 and 51 (M = 24.98, SD = 7.76) attained to the study. The research used scales assessing emotional regulation skills (ERS), narcissism (PNI), perceived social support (MSPSS), and psychological distress (DASS). Results indicated significant negative associations between ERS dimensions and vulnerable narcissism, and no associations with grandiose narcissism. There are significant positive associations between MSPSS dimensions and grandiose narcissism, but negative associations with vulnerable narcissism. The study suggest that different emotion regulation skills may stem from narcissistic vulnerability and affect the psychological distress variable through perceived social support. As a result of the current study, we found that emotional regulation skill is important for vulnerable narcissism to regulate emotion, and it can be regulated through perceived social support; however, it is understood that the perception of social support becomes more difficult due to narcissistic characteristics.

Keywords: vulnerable narcissisms; emotion regulation skills; social support; psychological distress.

Table of Contents

Emerging literature has examined whether narcissism is a one-dimensional construct, and many researchers have agreed that narcissism may have two dimensions, grandiose and vulnerable (Miller & Campbell, 2011a; Pincus & Roche, 2011; Ronningstam, 2012; South et al., 2012). Accordingly, in defining narcissism in terms of clinical observation, there are two different prevailing opinions that narcissistic vulnerability is reflected in the form of depression, lack of empathy, and resilience (Kohut, 1968), but narcissistic grandiosity is reflected in the form of lack of empathy (sympathy) and egocentrism (Kernberg, 1975). Behind all these studies and rich theoretical knowledge, as suggested in DSM 5, it is emphasized that examining the two dimensions of narcissism to understand narcissism with its multifaceted structure will be determinative in terms of diagnostic criteria and new models to be made in areas such as the self, close interpersonal relationships, and empathy skills (Skodol et al., 2014).

The most common measurement scale is the Pathological Narcissism, the Pathological Narcissism Inventory (PNI), narcissism with two upper factors (grandiose narcissism, vulnerable narcissism) and 7 sub-factors (Pincus et al., 2009). Psychometric studies on PNI translated into many languages showed that correlations of discriminant validity combined with similar measurement tools are high (Besser & Zeigler-Hill, 2011; Fossati et al., 2015; Morf et al., 2017; Şen & Barışkın, 2019; Thomas et al., 2012; You et al., 2013). It has been proposed that the PNI is suitable for assessing healthy narcissism and clinical cases and that an increase in the total score points vulnerable narcissism (Pincus, 2013; Thomas et al., 2012). Different narcissistic behaviors are associated differently with psychological distress (Clarke et al., 2015). According to Miller et al. (2011b), vulnerable narcissism is linked to anger, paranoia, depression, anxiety, and interpersonal sensitivity, whereas grandiose narcissism is unrelated to or has a negative correlation with distress symptoms and negative affect (Miller et al., 2011b; Sedikides et al., 2004). Researchers contend that compared to grandiose narcissism, vulnerable narcissism is

significantly more strongly related with acute depression and stable depressive features (Miller et al., 2011b; Thomas et al., 2012; Tritt et al., 2010).

The emotion regulation process includes the processes of following, reviewing, and modifying the person's emotional reactions to change them for their purpose (Lazarus, 1991; Thompson, 1994). Berking and Whitley (2014) tried to define basic emotion regulation skills in a more inclusive and integrative way within the framework of the Functional Emotional Coping Model (FECM), based on theoretical explanations, empirical research findings, and patient interview reports about emotion regulation difficulties. Emotion regulation skills are one of the most critical issues in narcissistic personality characteristics. In Kohut and Wolf's (1978) definition of narcissism, problems related to self-efficacy and emotion regulation stand out, and it is seen that these characteristics show parallelism with vulnerable narcissism. Pathological narcissism is included in the diagnostic criteria for narcissistic personality disorder in the DSM-5, as in previous editions of the DSM. However, one of the main criticisms regarding the fact that the diagnostic criteria of narcissistic personality disorder do not cover the vulnerable aspect of narcissism is that it does not include problems related to self and emotion regulation, which can be quite determinative for both grandiose and vulnerable dimensions in narcissism (Cain et al., 2008). Di Pierro et al. (2017) investigated at the relationship between narcissism and emotional dysregulation in a non-clinical sample. It has been discovered that vulnerable narcissism, rather than grandiose narcissism, is associated with narcissistic functioning, which only involves specific parts of emotional difficulties. The findings revealed that individuals with very vulnerable narcissistic characteristics had some difficulty regulating their emotions, whereas individuals with highly grandiose narcissism demonstrated more protective strategies against these problems.

There are many studies showings that social support has a positive relationship with mental and physical health. However, in social support studies conducted in the last three decades, the focus has shifted to one's own impressions of whether social relationships are sufficiently supportive, that is, to perceived support (Coyne & Downey, 1991; Hupcey, 1998). Despite its known importance in the literature, studies examining narcissism with its different dimensions and social support variable are very limited. The extent to which anxiety sensitivity, narcissistic personality tendency, perceived social support, and average academic point totals explained self-handicapping in university students was explored by Kalyon et al. (2016). The results show that desire for people to glorify their own worth will decline as their sense of self-respect increases due to the availability of social support networks. This may cause the individual to have a healthier

self-worth, to use better coping mechanisms and to increase their emotion regulation skills. Additionally, it is known that perceived social support has a direct negative effect on depression, anxiety, and stress symptoms (Abbas et al., 2019; Kugbey et al., 2015). As a result, perceived social support and emotion regulation skills can play a mediating role in the relationship between narcissism and psychological distress and change the nature of the relationship known in the literature.

Method

Participants

The study sample consisted of 442 participants (74% female) between aged18 and 51 ($M = 24.98$, $SD = 7.76$). Most of the participant were undergraduate students (79%), high school (13%) and the others (8%) high school. Most of the participants (89.1%) stated that they had no chronic illness (93%) and they were not using psychiatric drugs (93.6%).

Measurements

İnformed Consent and Demographic Information Form (DIF)

Informed consent was obtained for the study. DIF is a questionnaire that was constructed by the researcher, which included questions about drug use, psychological discomfort, and chronic illness, in addition to the questions asking demographic characteristics such as age, gender, education level.

Depression Anxiety Stress Scale (DASS)

Lovibond and Lovibond (1995) created the Depression, Anxiety Stress Scale, which has 42 items in total, each 14 being related to the depression, anxiety, and stress dimensions. The scale has a 4-point Likert-style rating system, with the options being 0 (not at all suitable), 1 (slightly appropriate), 2 (usually suitable), and 3 (totally suitable). According to Akın and Çetin's 2007 study of the Turkish DASS, all subscales had 21-day test-retest correlation coefficients of 0.98 and relatively good internal consistency coefficients (.90, .92, and .90, respectively).

Pathological Narcissism Inventory (PNI)

It was created by Pincus et al. (2009), and it was translated into Turkish by Şen and Barışkın (2019). There are 52 items on the 6-point Likert scale. *Grandiose and vulnerable* are the two primary characteristics used to quantify narcissism, along with seven other sub-factors. The

reliability coefficients of the subscales ranged from.78 to.93 in the original study, and the scale's Cronbach's Alpha value was determined to be .95. In the Turkish adaptation study, overall Cronbach Alpha internal consistency coefficient was.93, and the test-retest reliability coefficients were in the .92.

Multidimensional Scale of Perceived Social Support (MSPSS)

It is a measurement tool developed by Zimet et al., (1988), and the adaptation, validity and reliability studies in Turkey were conducted by Çakır and Palabıyık (1997), Eker et al. (2001). It is a 7-point Likert-type, 12-item scale that subjectively evaluates the adequacy of social support from three different sources (family, friends, and a special person). Internal consistency and test-retest correlations of the scale and subscales were sufficient (.89). A high score indicates high perceived social support.

Emotion Regulation Skills Questionnaire (ERSQ)

This scale was developed by Berking and Znoj (2008) to evaluate emotion regulation skills, and its Turkish adaptation was made by Vatan and Kahya (2018). Consisting of 27 items, this scale has nine sub-dimensions and a five-point Likert type. High scores on this scale, which can be assessed using the overall score average, show greater expertise in controlling one's emotions. In the reliability research, the Cronbach alpha internal consistency coefficient for the Turkish version of the scale was determined to be 0.89 for the entire test and .49–.75 for the sub-dimensions (Vatan & Kahya, 2018).

Procedure

Following the approval of the ethics committee, the data collection process started in two different provinces. Volunteering was the basis for participation in the study, and demographic information form and scales were applied after informed consent. The convenient sampling method was used in the study carried out via online survey form. To eliminate the ordering effect, the forms were presented in different order, and the study took about 20-25 minutes.

Data analysis

The missing value, normality, multiple linearity, and Univariate and multivariate normality assumptions were examined (Tabachnick & Fidell, 2013). IBM SPSS 25 and AMOS 22 were used for analyses. The Chi-Square (X^2) test is frequently used to evaluate data compliance in the Structural Equation Modeling, (Sümer, 2000).

Results

The correlation analysis indicated that narcissism total score and ERSQ were associated with each other ($r(440$ = -.28, p < .01). While vulnerable narcissism was negatively correlated with all ERSQ factors (from $r(440)$ = -.12 to $r(440)$ = .32, p < .01), grandiose narcissism was not significantly associated with them. Vulnerable narcissism was more strongly correlated with ERSQ factors while grandiose narcissism was not. The highest coefficient was between tolerance and vulnerable narcissism ($r(440)$ = -.32, p < .001). Additionally, the correlation analysis indicated that narcissism and MSPSS were not associated with each other, but GN was associated positively ($r(440)$ = .14, p < .01), and VN was associated negatively ($r(440)$ = -.15, p < .01) with MSPSS. The correlation analysis indicated that vulnerable narcissism and all ERSQ and MSPSS scores were associated with each other negatively, but GN was not significantly associated. All correlation coefficients between ERSQ factors and social supports were positive and statistically significant (from $r(440)$ = .11, p < .05 to $r(440)$ = .38, p < .001). On the other hand, a slightly negative correlation was between ERSQ factors and depression, anxiety, and stress symptoms (from $r(440)$ = .12, p < .05 to $r(440)$ = .22, p < .001) (see Table 1).

Table 1.

Descriptive statistics, Cronbach alphas, and Pearson correlations of the variables (*p < .05, **p < .01)

	M(SD)	α	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
PNI_Total	127.39(34.45)	.92	-																			
Grandiose	30.30(10.37)	.83	.41**	-																		
Vulnerable	88.41(30.04)	.93	.95**	.12*	-																	
DASS_ Total	53.13(27.05)	.96	.41**	.03	.44**	-																
Depression	14.82(10.59)	.93	.34**	-.01	.38**	.92**	-															
Anxiety	16.49(9.25)	.90	.38**	.04	.40**	.93**	.77**	-														
Stress	21.82(9.48)	.91	.41**	.05	.43**	.93**	.75**	-.81**	-													
MSPSS_total	64.37(15.60)	.90	-.09	.14**	-.15**	-.22**	-.28**	-.17**	-.14**	-												
Social support (family)	22.68(5.68)	.89	-.11*	.07	-.15**	-.22**	-.25**	-.17**	-.17**	.72**	-											
Social support (special one)	19.16(8.90)	.96	-.03	.16**	-.11*	-.17**	-.23**	-.13**	-.12**	.83**	.38**	-										
Social support (friend)	22.53(5.69)	.75	-.10*	.09	-.14**	-.11*	-.17**	-.08	-.05	.71**	.40**	.35**	-									
ERSQ_total	74.73(18.19)	.94	-.28**	-.02	-.30**	-.22**	-.21**	-.19**	-.18**	.34**	.35**	.21**	.24**	-								
ERSQ_ awarene	8.43(2.48)	.69	-.24**	-.03	-.25**	-.22**	-.23**	-.21**	-.18**	.31**	.29**	.22**	.20**	.84**	-							
ERSQ_ sensatio	8.36(2.45)	.69	-.10**	.04	-.12**	-.11*	-.13**	-.09	-.07	.26**	.24**	.18**	.18**	.74**	.67**	-						
ERSQ_ clarity	8.52(2.65)	.80	-.12**	.07	-.16**	-.21**	-.21**	-.19**	-.17**	.33**	.38**	.20**	.22**	.77**	.64**	.66**	-					
ERSQ_ understanding	9.01(2.32)	.70	-.19**	.01	-.21**	-.18**	-.17**	-.20**	-.13**	.28**	.28**	.17**	.21**	.80**	.74**	.68**	.76**	-				
ERSQ_ acceptin	7.71(2.58)	.66	-.25**	-.05	-.25**	-.09	-.08	-.06	-.11*	.18**	.31**	.11*	.11*	.80**	.63**	.48**	.50**	.52**	-			
ERSQ_ resilienc	7.68(2.87)	.79	-.31**	-07	-.32**	-.18**	-.14**	-.16**	-.20**	.21**	.28**	.11*	.14*	.83**	.64**	.48**	.54**	.54**	.75**	-		
ERSQ_ readines to confront	8.08(2.67)	.74	-.24**	-.02	-.26**	-.14*	-.14*	-.13**	-.12*	.26**	.26**	.15**	.22**	.74**	.54**	.44**	.42**	.45**	.56**	.57**	-	
ERSQ_ compassionate self-support	8.64(2.50)	.71	-.27**	-.04	-.28**	-.20**	-.21**	-.17**	-.17**	.24**	.24**	.13**	.20**	.77**	.53**	.44**	.46**	.47**	.59**	.67**	.66**	-
ERSQ_ modification	8.28(2.34)	.68	-.23**	-.01	-.25**	-.19**	-.23**	-.15**	-.15**	.38**	.38**	.26**	.26**	.84**	.66**	.54**	.58**	.62**	.63**	.71**	.59**	.71**

The mediator analysis was conducted to examine whether there was a significant model with vulnerable narcissism and DASS in the ERSQ with respect to perceived social support. A correlation matrix was applied to examine the relationship between the narcissism sub-dimensions, MSPSS, ERSQ, and DASS characteristics. According to the correlation table, the vulnerable dimension of the PNI was significant correlations with all scores, but GN was not related. Hence, only VN was included in the model in which the mediating role of MSPSS and ERSQ characteristics in narcissism and DASS was examined.

The path analysis was completed for the theoretical model that was developed for vulnerable narcissism since the assumptions necessary for the execution of the structural equation model were satisfied. The analysis revealed fit indices of $\chi2(3.37) = 38.00$, $p = .04$, CFI = 0.90, GFI = .90, RMSEA = .04 (90% CI = .007–.063), SRMR = .02. As a result, it was determined that the perceived supports from family, a significant other, and friends would constitute overall social support in the first place. Additionally, depression, anxiety, and stress scores serve as indicators of general psychological distress. Second, the proposed SEM with ERSQ and MPRS acting as mediator variables was put to the test. The model had a close to perfect fit to the data: $\chi2(8) = 47.00$, p = .05; $\chi2(2.19)$; CFI = .91; GFI = .92; RMSEA = .03 (90% CI = .0028–.094); SRMR = .03. The model alone was able to account for 22% of the variance in overall stress. The path coefficients in the model are shown in Figure 1. Psychological distress ($\beta = .44$, $p = .001$), social support ($\beta = -.17$, p .001), and emotional regulation skills $(\beta = -.32$, p = .001) were all linked to vulnerable narcissism. Social support was negatively correlated with distress ($\beta = -.27$, $p = .001$), emotional regulation skill was directly correlated with general psychological distress ($\beta = -.26$, $p = .001$), and emotional regulation skill was positively correlated with social support ($\beta = .36$, $p = .001$).
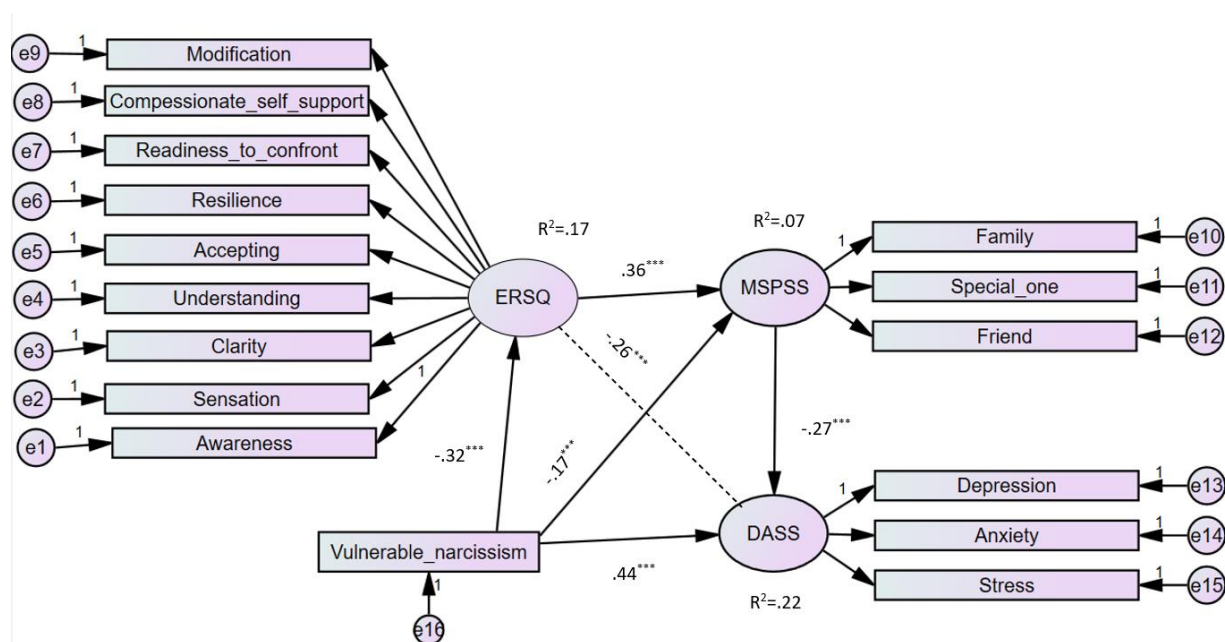
Figure 1. *Tested model. *p < .05 ***p < .001.*

The indirect effects results indicated that the total mediation effect was significant (β = .19, SE = .43, 95% CI [.12, .29], *p* < .01). Additionally, the serial mediation was significant (β = .25, SE = .48, 95% CI [.16, .35], *p* < .01), which indicates that when the pathway from emotional regulation skill to social support was included in the model, this indirect effect became significant. The model also included three indirect impacts. The relationship between psychological distress and vulnerable narcissism was only mediated by emotional regulation capacity (β = .23, SE = .34, 95% CI [.22, .51], *p* < .01), it explained the variance of general distress through social support (β = .22, SE = .14, 95% CI [.12, .21], *p* < .01).

Discussion

The current study focused on narcissism and psychological distress relations and the mediator of these relations such as social support and emotional regulation. It was examined with additional mediational analysis that was conducted for the mediating roles of emotional regulation skills and perceived social support in the relationship between narcissism on psychological distress. The structural equation model results showed that mediating role of emotional regulation skills, and

perceived social support is explained on these relations. Although, grandiose narcissism has not shown any significant relation and any role in the model. Perceived social support and emotional regulation skills predicted psychological distress through only vulnerable narcissism.

In this study, firstly, it was aimed to compare the grandiose and vulnerable dimensions with similar and different aspects in evaluating the relationship of narcissism with psychological symptoms. The vulnerable dimension shows a strong positive relationship with all sub-dimensions and the total score of the psychological distress' variable, while the grandiose dimension seems to be unrelated. The literature indicates that the high level of negative affect, psychological stress and dissatisfaction with life seen in vulnerable narcissism can be explained by the neuroticism personality pattern (Campbell & Miller, 2013; Miller & Maples, 2011). Considering that low life satisfaction, which can be seen because of neuroticism and perhaps this personality pattern, may be associated with psychopathologies, high depression and anxiety levels in vulnerable narcissism can be more easily interpreted (Rathvon & Holmstrom, 1996).

Secondly, emotion regulation skills were examined in the grandiose and vulnerable dimensions, and it was seen that the grandiose dimension did not show a significant relationship. However, there is a significant negative correlation between vulnerable narcissism and total and all sub-dimensions of emotion regulation skills. In this case, it is understood that as the vulnerable narcissism scores of the participants increase, their emotion regulation skills decrease. This finding is also consistent with studies in the literature. In a study conducted with a non-clinical population in which the relationship between emotion regulation and narcissism was evaluated, it was reported that there was a significant relationship between narcissistic vulnerability and difficulty in accessing emotion regulation strategies, difficulty in understanding emotional state, difficulty in accepting emotional state, and difficulty in being emotionally open (Di Pierro et al., 2017). In another study, it was found that there is a negative relationship between grandiose narcissism and emotion regulation, and a positive relationship between vulnerable narcissism and emotion regulation difficulty (Zhang et al., 2017). In this study, was determined that there was a negative significant relationship between vulnerable narcissism and emotion regulation skills, in line with the information in the literature. The results obtained are also compatible with international studies.

Thirdly, perceived social support were examined in the grandiose and vulnerable dimensions, and it was seen that the grandiose dimension has positive relations with special one, but vulnerable

narcissism has negative relations with family, special one and friends. It is known that individuals with narcissistic personality traits consider themselves superior to other individuals, have a high level of expectations, and need success satisfaction (Byrne & Worthy, 2013). The concept of narcissism, beyond pathological personality pathology, has a wide spectrum that deals with the loneliness and powerlessness of individuals in the social environment, where the effects of the family are intensely felt (Campbell & Foster, 2007). According to Mechanic and Barry (2015), who draws attention to this situation, maternal and paternal acceptance interest causes grandiose narcissism, excessive control and controlling attitude as well as lack of love, acceptance, and interest cause vulnerable narcissism. Perceived social support has been shown in earlier studies to be a protective mediator in the depression pathway (e.g., Kim & Suh, 2019). As a result, we hypothesized that the association between narcissism and depression may be significantly mediated by perceived social support. Fang et al. (2021) stated that perceived social support was a potential mediator in the relationship between narcissism and depression. The study's findings showed that enhanced perceptions of social support and life happiness were detrimentally associated to psychological suffering. The connection between perceived social support and vulnerable narcissism in the study also changed from being negative to positive in the model, demonstrating that perceived social support was a critical mediator variable.

In the last stage, after examining all the relationships, mediator variable analysis has conducted, and here, a model proposal was presented only on vulnerable narcissism, considering its significant effect. it has been shown by mediation analysis that vulnerable narcissism affects emotion regulation skills and perceived social support negatively, because of which it increases the risk factor for psychological distress. Vulnerable narcissism is defined by features such as extreme modesty, sensitivity to criticism, high level of anxiety, shyness, being under constant stress, suffering, and grandiose expectations about the self that can be noticed in close relationships with others (Akhtar & Thompson, 1982; Wink, 1991). Considering the vulnerable narcissism characteristics described here, it is common for these individuals to experience difficulties in emotion regulation and conflicts in their perceptions of social support. As a result, because of the mediation analysis, the effect of emotion regulation skills in determining the level of psychological distress in individuals with vulnerable narcissistic characteristics is clearly observed, and when it is based on the perceived social support variable, it is thought that the common effect arises from the mediator role.

Limitations and Future Research Suggestions

Despite its outstanding findings, of course, the study also has some limitations. The fact that the study consists of a sample of university students reduces its generalizability. However, studying perceived social support and emotion regulation skills with this sample has the potential to play a pioneering role in other models based on the concept of psychological distress. In the study, GN was not included in the model because it was unrelated, but PNI is a scale that has the potential to provide a rich source of information when a clinical sample is studied in future studies. The study shows us that these variables, which are related to each other as single variables, exist within a model with a strong fit index. In this respect, it is thought that the findings of the study can be a guide in the field of clinical and practice. In addition, these results, which include non-clinical sampling, can be examined with longitudinal studies, and supported with new variables.

Conclusion

In this study, following the procedure of Gökdağ's (2021) study, this time he examined the relationship between psychological distress and narcissism mediating role of emotion regulation and social support. The prominent finding of the study is that different emotion regulation skills may stem from narcissistic vulnerability and affect the psychological distress variable through perceived social support. As a result of the study was found that perceived social support is important for vulnerable narcissism to regulate emotion, and it can be regulated through perceived social support; however, it is understood that the perception of social support becomes more difficult due to narcissistic characteristics. The findings presented here psychotherapists in clinical practice. The role of perceived social support and emotion regulation skills while the psychotherapy process with clients, who have narcissistic characteristics, can be reconsidered in terms of their role in depression, anxiety, and stress.

Funding/Financial Support

Other Support/Acknowledgement

Competing Interests

References

Abbas, J., Aqeel, M., Abbas, J., Shaher, B., Jaffar, A., Sundas, J., & Zhang, W. (2019). The moderating role of social support for marital adjustment, depression, anxiety, and stress: Evidence from Pakistani working and nonworking women. *Journal of affective disorders*, *244*, 231-238. https://doi.org/10.1016/j.jad.2018.07.071

Akhtar, S., & Thompson, J. A. (1982). Overview: Narcissitic personality disorder. *American Journal of Psychiatry, 139*(1), 12–20

Akın, A., & Çetin, B. (2007). Depresyon anksiyete Turkish ölçeği (DASO): Geçerlik ve güvenirlik çalışması. [Depression anxiety Turkish scale (DASO): Validity and reliability study]. Kuram ve Uygulamada Eğitim Bilimleri, *7*(1), 241–261.

Berking, M., Whitley, B. (2014). *Emotion Regulation: Definition and Relevance for Mental Health. In: Affect Regulation Training.* Springer. https://doi.org/10.1007/978-1-4939-1022-9_2

Berking, M., & Znoj, H. (2008). Entwicklung und Validierung eines Fragebogens zur standardisierten Selbsteinschätzung emotionaler Kompetenzen (SEK-27). [Development and validation of a questionnaire for standardized self-assessment of emotional competencies (SEK-27)]. Zeitschrift für Psychiatrie, Psychologie und Psychotherapie, *56*(2), 141-153.

Besser, A., & Zeigler-Hill, V. (2011). Pathological forms of narcissism and perceived stress during the transition to the university: The mediating role of humor styles. *International Journal of Stress Management*, *18*(3), 197-221. https://doi.org/10.1037/a0024826

Byrne, K. A., & Worthy, D. A. (2013). Do narcissists make better decisions? An investigation of narcissism and dynamic decision-making performance. *Personality and Individual Differences, 55*(2), 112-117.

Cain, N. M., Pincus, A. L., & Ansell, E. B. (2008). Narcissism at the crossroads: Phenotypic description of pathological narcissism across clinical theory, social/personality psychology, and psychiatric diagnosis. *Clinical psychology review*, *28*(4), 638-656. https://doi.org/10.1016/j.cpr.2007.09.006

Çakır, Y., & Palabıyık, R. (1997). Genclerde Sosyal Destek, Cok Boyutlu Algilanan Sosyal Destek Olceginin Guvenilirlikve Gecerlilik Calismasi [Social support of youth, reliability and validity study of Multidimensional Scale of Perceived Social Support]. *Kriz Dergisi*, *5,* 15-24.

Campbell, K. W., & Foster, J. D. (2007). The narcissistic self: Background, an extended agency model, and ongoing controversies. In Sedikides, C., & Spencer, S. (Eds.). *The self* (pp. 115-138). Psychology Press.

Campbell, W. K., & Miller, J. D. (2013). Narcissistic personality disorder and the five-factor model: Delineating narcissistic personality disorder, grandiose narcissism, and vulnerable narcissism. In T. A. Widiger & P. T. Costa, Jr. (Eds.), *Personality disorders and the five-factor model of personality* (3rd ed., pp. 133–145). American Psychological Association. https://doi.org/10.1037/13939-009

Clarke, I. E., Karlov, L., & Neale, N. J. (2015). The many faces of narcissism: Narcissism factors and their predictive utility. *Personality and Individual Differences*, *81*, 90-95. https://doi.org/10.1016/j.paid.2014.11.021

Coyne, J. C., & Downey, G. (1991). Social factors and psychopathology: Stress, social support, and coping processes. *Annual review of psychology*, *42*(1), 401-425.

Di Pierro, R., Di Sarno, M., & Madeddu, F. (2017). Investigating the relationship between narcissism and emotion regulation difficulties: The role of grandiose and vulnerable traits. *Clinical Neuropsychiatry, 14(*3), 209-215

Eker, D., Arkar, H., & Yaldız, H. (2001). Factorial structure, validity, and reliability of revised form of the multidimensional scale of perceived social support. *Turkish Journal of Psychiatry, 12*(1), 17–25.

Fang, Y., Niu, Y., & Dong, Y. (2021). Exploring the relationship between narcissism and depression: The mediating roles of perceived social support and life satisfaction. *Personality and Individual Differences*, *173*, 110604.

Fossati, A., Feeney, J., Pincus, A., Borroni, S., & Maffei, C. (2015). The structure of pathological narcissism and its relationships with adult attachment styles: A study of Italian nonclinical and clinical adult participants. *Psychoanalytic Psychology, 32(*3), 403–431. https://doi.org/10.1037/a0037175

Gökdağ, C. (2021). How does interpersonal emotion regulation explain psychological distress? The roles of attachment style and social support. *Personality and Individual Differences*, *176*, 110763. https://doi.org/10.1016/j.paid.2021.110763

Hupcey, J. E. (1998). Social support: Assessing conceptual coherence. *Qualitative Health Research*, *8*(3), 304-318.

Kalyon, A., Dadandi, I., & Yazici, H. (2016). The relationships between self-handicapping tendency and narcissistic personality traits, anxiety sensitivity, social support, academic achievement. *Düşünen Adam: Journal of Psychiatry and Neurological Sciences, 29*(3), 237–246. https://doi.org/10.5350/DAJPN2016290305.

Kernberg, O. F. (1975). *Borderline conditions and pathological narcissism.* Jason Aronson.

Kim, S., & Suh, S. (2019). Social support as a mediator between insomnia and depression in female undergraduate students. *Behavioral Sleep Medicine, 17*(4), 379–387. https://doi.org/10.1080/15402002.2017.1363043

Kohut, H. (1968). The psychoanalytic treatment of narcissistic personality disorders: Outline of a systematic approach. *The Psychoanalytic Study of the Child, 23*(1), 86–113. https://doi.org/10.1080/00797308.1968.11822951

Kohut, H. & Wolf, E. S. (1978) The disorders of the self and their treatment: An outline. *International Journal of Psychoanalysis, 59*, pp. 413-425.

Kugbey, N., Osei-Boadi, S., & Atefoe, E. A. (2015). The influence of social support on the levels of depression, anxiety and stress among students in Ghana. *Journal of Education and Practice*, *6*(25), 135-140.

Lazarus, R. S. (1991). *Emotion and adaptation.* Oxford University Press.

Lovibond, P. F., & Lovibond, S. H. (1995). The structure of negative emotional states: Comparison of the depression anxiety stress scales (DASS) with the Beck depression and anxiety inventories. *Behaviour Research and Therapy, 33*(3), 335–343.

Mechanic, K. L., & Barry, C. T. (2015). Adolescent grandiose and vulnerable narcissism: Associations with perceived parenting practices. *Journal of Child and family Studies*, *24*(5), 1510-1518.

Miller, J. D., & Campbell, W. K. (2011a). *The Handbook of Narcissism and Narcissistic Personality Disorder: Theoretical Approaches, Empirical Findings, and Treatments*. John Wiley & Sons.

Miller, J. D., & Maples, J. (2011). Trait personality models of narcissistic personality disorder, grandiose narcissism, and vulnerable narcissism. In W. K. Campbell & J. D. Miller (Eds.), *The handbook of narcissism and narcissistic personality disorder: Theoretical approaches, empirical findings, and treatments* (pp. 71–88). John Wiley & Sons, Inc..

Miller, J. D., Hoffman, B. J., Gaughan, E. T., Gentile, B., Maples, J., & Keith Campbell, W. (2011b). Grandiose and vulnerable narcissism: A nomological network analysis. *Journal of Personality*, *79*(5), 1013–1042. http://dx.doi.org/10.1111/j.1467-6494.2010.00711.x

Morf, C. C., Schürch, E., Küfner, A., Siegrist, P., Vater, A., Back, M., Mestel, R., & Schröder-Abé, M. (2017). Expanding the nomological net of the pathological narcissism inventory: german validation and extension in a clinical inpatient sample. *Assessment, 24*(4), 419-443. https://doi.org/10.1177/1073191115627010

Pincus, A. L., & Lukowitsky, M. R. (2010). Pathological narcissism and narcissistic personality disorder. *Annual review of clinical psychology*, *6*(1), 421-446. https://doi.org/10.1146/annurev.clinpsy.121208.131215

Pincus, A. L., Ansell, E. B., Pimentel, C. A., Cain, N. M., Wright, A. G., & Levy, K. N. (2009). Initial construction and validation of the pathological narcissism inventory. *Psychological assessment, 21*(3), 365. https://doi.org/10.1037/a0016530

Pincus, A. L. (2013). The Pathological Narcissism Inventory. In J. S. Ogrodniczuk (Ed.), *Understanding and treating pathological narcissism* (pp. 93-110). American Psychological Association.

Pincus, A.L., & Roche, M.J. (2011). *Narcissistic Grandiosity and Narcissistic Vulnerability. The Handbook of Narcissism and Narcissistic Personality Disorder: Theoretical Approaches, Empirical Findings and Treatments*. John Wiley& Sons.

Rathvon, N., & Holmstrom, R. W. (1996). An MMPI-2 portrait of narcissism. *Journal of Personality Assessment*, *66*(1), 1-19.

Ronningstam, E. (2012). Alliance building and narcissistic personality disorder. *Journal of Clinical Psychology*, *68*(8), 943-953. https://doi.org/10.1002/jclp.21898

Sedikides, C., Rudich, E. A., Gregg, A. P., Kumashiro, M., & Rusbult, C. (2004). Are normal narcissists psychologically healthy? Self-esteem matters. *Journal of Personality and Social Psychology, 87*(3), 400–416. http://dx.doi.org/10.1037/0022-3514.87.3.400

Şen, G., & Barışkın, E. (2019). The Standardization of the pathological narcissism inventory in the Turkish language and testing its validity and reliability. *Turkish Journal of Psychiatry,* 30(2). 118–129. https://www.doi.org/10.5080/u23274

Skodol, A. E., Bender, D. S., & Morey, L. C. (2014). Narcissistic personality disorder in DSM-5. *Personality Disorders: Theory, Research, and Treatment, 5*(4), 422–427. https://doi.org/10.1037/per0000023

South, S. C., Eaton, N. R., & Krueger, R. F. (2011). Narcissism in Official Psychiatric Classification Systems: Toward DSM-5. *The handbook of narcissism and narcissistic personality disorder: Theoretical approaches, empirical findings, and treatments*, 22-30.

Sümer, N. (2000). Yapısal esitlik modelleri: Temel kavramlar ve ornek uygulamalar. [Structural equation models: Basic concepts and example applications]. *Türk Psikoloji Yazıları, 3*, 49–74. https://psycnet.apa.org/record/2006-04302-005

Sümer, N. (2000). Structural equation modeling: Basic concepts and applications. *Turkish Psychological Articles*, *3*(6), 49-74**.**

Tabachnick, B. G., & Fidell, L. S. (2013). *Using multivariate statistics.* Pearson Education.

Thomas, K. M., Wright, A. G. C., Lukowitsky, M. R., Donnellan, M. B., & Hopwood, C. J. (2012). Evidence for the criterion validity and clinical utility of the Pathological Narcissism Inventory. *Assessment, 19,* 135-145. https://doi.org/10.1177/1073191112436664

Thompson, R. A. (1994). Emotion regulation: A theme in search of definition. *Monographs of the society for research in child development*, *59 2(3),* 25-52. https://doi.org/10.2307/1166137

Tritt, S. M., Ryder, A. G., Ring, A. J., & Pincus, A. L. (2010). Pathological narcissism and the depressive temperament. *Journal of Affective Disorders*, *122*(3), 280-284. https://doi.org/10.1016/j.jad.2009.09.006

Vatan S., & Kahya Y. (2018). Duygu düzenleme becerileri ölçeğininin Türkçeye uyarlanması: Geçerlilik ve güvenirlik çalışması. [Adaptation of the emotion regulation skills scale into Turkish: Validity and reliability study] *Anadolu Psikiyatri Dergisi, 19*(2), 192-201. https://doi.org/10.5455/apd.260322

Wink, P. (1991). Two faces of narcissism. *Journal of Personality and Social Psychology, 6* (4), 590-597.

You, J., Leung, F., Lai, K. K. Y., & Fu, K. (2013). Factor structure and psychometric properties of the Pathological Narcissism Inventory among Chinese university students. *Journal of Personality Assessment*, *95*(3), 309-318. https://doi.org/10.1080/00223891.2012.718303

Zhang, H., Luo, Y., Zhao, Y., Zhang, R., & Wang, Z. (2017). Differential relations of grandiose narcissism and vulnerable narcissism to emotion dysregulation: Self-esteem matters. *Asian Journal of Psychology, 20*(3-4), 232-237.

Zimet, G. D., Dahlem, N. W., Zimet, S. G., & Farley, G. K. (1988). The multidimensional scale of perceived social support. *Journal of Personality Assessment, 52*(1), 30–41. https://doi.org/10.1207/s15327752jpa5201_2

About the Author

Gamze Sen Pakyürek is associate professor at Manisa Celal Bayar University, Department of Clinical Psychology. She received her undergraduate degree from Hacettepe University in 2011. She started Hacettepe University Clinical Psychology integrated PhD program in 2012, ended in 2019. Her doctoral thesis is about narcissistic patterns and responses to distressing interpersonal experiences: based on cognitive interpersonal theory. She is a member of Turkish Psychological Association. The areas of her interest are narcissistic personality, self-determination theory and psychotherapy processes.

Corresponding Author's Contact Address [TOP]

Department of Clinical Psychology, Manisa Celal Bayar University, Manisa, Turkey.

Email: senngamze@gmail.com