

Pathological Narcissism in Young Adults and Measuring their Levels of Adjustment and Psychological Well-Being

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ABSTRACT

The current study is a correlational design that screened male and female young adults for pathological narcissism and examined the relationship between pathological narcissism, adjustment and psychological well-being. The study analysed gender differences in Pathological narcissism, adjustment and psychological well-being. A convenience sample of 127 males and 173 female young adults (19-33 years) from India participated in the study. The snowball technique of non-probability sampling was used. Standardized measures were used to collect data. The independent sample t-test, correlational and regression analysis were considered as relevant statistical techniques. The results were analysed using the Statistical Package for Social Sciences (version 28). The study found no statistically significant difference between males and females in pathological narcissism and psychological well-being. However, adjustment showed a significant gender difference. Pathological narcissism demonstrated a significant positive relationship with adjustment and significant negative correlation with psychological well-being. Finally, pathological narcissism significantly predicts variations in both adjustment and well-being. Results highlight the effects exerted by pathological narcissism on the adjustment and well-being of individuals which can have implications in treatment of narcissistic personality disorder and individuals with adjustment difficulties or poor wellbeing.

Keywords: *Grandiose narcissism, vulnerable narcissism, pathological narcissism, Adjustment, Psychological well-being.*

Personality research has shed light on major forms of personality psychopathology and one such disorder- the narcissistic personality disorder has gained importance in the recent years due to increase in average levels of sub-clinical narcissistic traits especially among teens and young adults (Dingfelder, 2011). Narcissists are typified by a tendency to have a grandiose sense of self-importance; are preoccupied with fantasies of unlimited success, power, and brilliance; display an incessant need for attention and admiration from others; and are exploitive and selfish in their interpersonal relationships (American Psychiatric association).

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Average levels of narcissistic traits expressed in appropriate circumstances may confer some advantage to the individual in the context of job, mating opportunities, acquiring status and power etc. This type of narcissism is referred to as *adaptive narcissism*.

Pathological Narcissism

It is viewed that narcissism is not an all-encompassing term because it includes only grandiose aspects while largely neglecting vulnerable aspects thereby not being a true indicator of dysfunctional narcissism. Therefore, the term 'pathological narcissism' is used to better reflect an underlying personality dysfunction that is primarily narcissistic while also being more inclusive of both grandiose and vulnerable aspects of narcissism. Pathological narcissism is an inability to maintain self-esteem, self-efficacy and self-cohesion, resulting in maladaptive methods of gratification such as aggression and narcissistic defences, causing distress to the self and others (Kernberg, 2008).

Grandiose and Vulnerable Narcissism

Grandiose narcissism is characterized by arrogance, self-focused and self-aggrandizing behaviour, grandiose fantasy, dominance, vindictiveness, self-sacrificing self-enhancement, devaluation of others, an inability to be sensitive to the concerns and social constraints of others, as well as a willingness to exploit them for personal gain (Aaron Pincus et al, 2010).

On the other hand, vulnerable narcissism is characterized by a lack of self-confidence, contingent self-esteem, and reactivity to threats from others, entitlement rage, hiding self and a lack of dominance (Aaron Pincus et al, 2010). Vulnerable narcissism in contrast to grandiose narcissism includes instances of depressed mood, insecurity, hypersensitivity, shame and identification with victimhood (Nicholas J. S. Day, Michelle L. Townsend, and Brin F. S. Grenyer, 2020). Grandiose and vulnerable narcissism may have a distinct clinical outcome and treatment regime which makes it important to distinguish between the two among patients with NPD.

Narcissism and problem behaviours

Research has consistently linked pathological narcissism with various kinds of problem behaviours, adjustment problems, psychopathology, dysfunctions in well-being etc. Campbell and Miller, 2012 in their study have concluded that possessing pathological levels of narcissistic traits are significantly related to social impairment, elevated alcohol abuse, aggression, and antisocial behaviour.

Culture and narcissism

Narcissism is understudied in the Indian cultural context. Therefore, the study has as one of its needs to understand the dynamics of narcissism in India. It is important to understand that the perception of a person with narcissistic traits vary in individualistic and collectivistic culture. A common cultural hypothesis is that narcissism as a trait is more commonly seen in individuals from an individualistic culture than the collectivistic culture. However, there is lack of empirical evidence to affirm this notion. Many countries largely collectivistic are moving towards individual growth and development. The purpose of this study is to understand the presence of narcissistic traits in the Indian subcontinent. Additionally, gender related cultural beliefs about narcissism exist in India. As part of these gender schemas, narcissistic traits are more accepted if possessed by males than by females. The gender schemas that prevail in the culture propagates the idea that women are expected to be more selfless, others oriented than self-oriented, adjusting and prioritizing others needs more than

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their own. Opposite is true for men. Therefore, it is reasonable to expect higher narcissism in males than females due to the cultural expectations. However, there is very limited literature on narcissism in the Indian context to help make reliable conclusions.

Adjustment and Narcissism

Narcissistic traits present at subclinical levels do not pose challenges for adjustment. In fact, it has been hypothesized that possessing adaptive narcissism leads to workplace efficiency because their grossly inflated self-esteem, entitlement and tendency to seek appreciation can make them powerful and dominating leaders. However, Pathological narcissism has severely accounted for maladjustment in individuals. Research evidence indicates that some individuals with narcissism show depression, anxiety, interpersonal conflicts, adjustment disorders, stress disorders etc. (Washburn, McMahon, King, Reinecke, & Silver, 2004; Wink, 1991) However, it is unclear whether the traits lead to maladjustment because if the traits were the only forces at play, all individuals with pathological narcissism would display maladjustment which is clearly not the case, therefore, other factors interact together with the traits to produce maladjustment.

Narcissism and well-being

Well-being includes a positive mental state. The perceived well-being of an individual may be different from actual psychological well-being. Research on narcissism and well-being are limited and inconclusive. A defining difference between average narcissism and pathological narcissism in terms of well-being is that normal narcissists report greater psychological well-being than pathological narcissists. (Miranda Giacomini, Christian H. Jordan, 2016). Individuals with average narcissism have shown lower rates of depression, anxiety, loneliness and increased life satisfaction and affective state (Sedikides and colleagues, 2004). Others, particularly the coupling of interpersonal exploitation with interpersonal vulnerability, point in the opposite direction (Rhodewalt & Morf, 2005). In one study by Sedikides et al., 2004, results indicated that self-esteem played an important mediating role in the association between grandiose narcissism and well-being. However, in another study, it was identified that well-being is an essential factor for the development of self-esteem in narcissism. Results from several studies also propose that clinical levels of narcissism are negatively associated with psychological well-being.

Need for the study

Pathological narcissism is understudied especially in the Indian context and there is a rapid rise of this trait in the present scenario as suggested by literature from cross-cultural studies, thereby leading to lack of adjustment and other social consequences for both the person possessing it and people significantly associated with them. However, research is not clear about the adjustment issues and psychological well-being of persons with pathological narcissism. Psychological well-being of persons possessing pathological narcissism is moderately studied in other countries, but results are inconclusive, and it is under-studied in the Indian literature. Additionally, there is a need to study the adjustment patterns and wellbeing of persons with pathological narcissism and see if there is a difference between individuals with low and high pathological narcissism before exploring the same on family members of these individuals and including these factors as part of intervention if these individuals present with a psychological problem.

MATERIALS AND METHODS

The aim of the study is to screen for pathological narcissism in male and female young adults and measure their levels of psychological well-being and adjustment.

Hypotheses

H1: There will be no significant difference between males and females in the levels of Pathological Narcissism

H2: There will be no significant difference between male and female young adults screened for pathological Narcissism with respect to adjustment.

H3: There will be no significant difference between male and female young adults screened for Pathological Narcissism with respect to psychological well-being.

H4: There will be no significant relationship between pathological Narcissism traits and adjustment in young adults.

H5: There will be no significant relationship between Pathological Narcissism traits and psychological wellbeing in young adults.

H6: High and low pathological narcissism among young adults will not significantly predict their adjustment.

H7: High and low pathological narcissism among young adults will not significantly predict their psychological well-being.

Research design

The study is an ex-post facto, non-experimental, co-relational hypothesis testing research design that seeks to check the association between the independent variable and dependent variable and the difference between the independent variables with respect to the DVs.

Sampling procedure

The study included 300 Indian young adults out of which 127 are Males and 173 are Females. Participants' age ranged from 19-33 years. Majority of the participants belong to middle and upper socio-economic strata. All the participants of the study drawn are Indian residents with basic education or career, belonging to different religions and from diverse ethnic backgrounds. Outliers were excluded in this study to moderate the data. To eliminate the effects of control variables, participants who have severe psychiatric or neurological or physical conditions were excluded from the study. A conservative screening was done to ensure that only eligible participants were chosen for the study. Certain participants had a diagnosis of anxiety, depression and ADHD from a clinical psychologist and certain others with physical conditions like PCOS and thyroid were seen to affect the dependent variables and hence were not included in the data. The snowball technique of non-probability sampling was used to recruit participants for the study.

Instruments

Four measures were used in this study:

- **Socio-demographic data sheet:** It is a semi-structured socio demographic data sheet developed by the Principal Investigator which includes information regarding name, age, gender, education, occupation, socio-economic status, marital status, duration of marriage, offspring, family type, family size, religion, mother tongue, along with details regarding mental and medical illness if present.
- **Brief pathological narcissism scale (B-PNI) (2015):** This tool was developed by Aaron Pincus et al, 2015 to measure pathological narcissism. The tool consists of 28 questions in a six-point likert type response scale and is a measure of both grandiose

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(Exploitativeness, Self-Sacrificing Self-Enhancement, grandiose fantasy) and vulnerable narcissism (contingent Self-Esteem, Hiding the Self, devaluing and entitlement rage). The final scores are indicative of high or low levels of pathological narcissistic traits. It is a standard tool with reliability, validity and norms established.

- **The Psychological well-being scale (1995):** The tool was developed by Carol Ryff (1995) to measure psychological well-being. The brief version of this scale consists of 18 items in a seven-point likert type response, measuring five distinct domains of psychological well-being including Autonomy, Environmental mastery, Personal growth, positive relations with others, self-acceptance and purpose in life. The tool is a standardised tool has a sufficient degree of reliability and validity measures. Higher scores mean higher levels of psychological well-being.
- **Global Adjustment Scale- Form A (1994):** The Global adjustment scale- Adult form was developed by Psy.com services in India. The Indian-English adaptation of the tool was developed by Sanjay Vohra. The scale consists of 120 items. There are three alternative choices for the clients to choose from – Yes, No and Sometimes. It measures adjustment in six areas: Family, Health, Social, Emotional, and Occupational and Sexual adjustment. It has valid psychometric properties.

Data collection

The data was collected through primary sources and the data is quantitative in nature. The study is a descriptive design and data was collected through administration of questionnaires to the sample group. Strict sorting of data was performed, and incomplete data was excluded from the study. Three questionnaires along with a socio-demographic sheet were deployed in the study, all of which were filled by the participants to complete the study.

Statistical analysis

All statistical analyses were conducted using SPSS (version 28.0). Descriptive statistics was computed for the demographic details of the sample. For inferential analysis, the independent sample t-test was conducted to understand the gender differences among the variables. However, a full-scale dimension analysis was computed for the adjustment and psychological well-being variables. Associations between PNI scores and other psychometric variables were analysed using the pearson correlation coefficient and prediction analysis was understood using regression studies.

Preliminary analyses

Skewness and Kurtosis limits along with Q-Q plots were inspected to assure that assumptions of normality were respected.

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RESULTS

Table 1 Demographics of the participants. (N= 300)

Variables	Frequency	Percent	V%	C%
Gender				
Male	173	57.7	57.7	57.7
Female	127	42.3	42.3	100.0
Age				
19-23	122	40.7	40.7	40.7
24-28	121	40.3	40.3	81.0
29-33	57	19.0	19.0	100.0
Educational qualification				
Higher Secondary	4	1.3	1.3	1.3
UG	168	56.0	56.0	57.3
PG	126	42.0	42.0	99.3
PhD/professional	2	0.7	0.7	100.0
Marital status				
Single	184	61.3	61.3	61.3
In a relationship	57	19.0	19.0	80.3
Live in relationship	4	1.3	1.3	81.7
Unmarried	4	1.3	1.3	83.0
Married	47	15.7	15.7	98.7
Separated	2	0.7	0.7	99.3
Divorced	2	0.7	0.7	100.0
No of Children				
0	272	90.7	90.7	90.7
1	20	6.7	6.7	97.3
2	8	2.7	2.7	100.0
Socio-economic status				
Upper	4	1.3	1.3	1.3
Middle	250	83.3	83.3	84.7
Lower	46	15.3	15.3	100.0
Family Type				
Living alone	17	5.7	5.7	5.7
Nuclear	212	70.7	70.7	76.3
Extended	24	8.0	8.0	84.3
Living together	7	2.3	2.3	86.7
Joint	40	13.3	13.3	100.0
Place of residing				
Tamil Nadu	214	71.3	71.3	71.3
Karnataka	23	7.7	7.7	79.0
Kerala	11	3.7	3.7	82.7
Andhra Pradesh	14	4.7	4.7	87.3
Maharashtra	12	4.0	4.0	91.3
Delhi	11	3.7	3.7	95.0
Others	15	5.0	5.0	100.0

Note. N= 300. V% = Valid percentage. C% = Cumulative percentage. UG =Under-graduate. PG = post-graduate.

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Table 1 presents the frequency, percentage, valid percent and cumulative percentage of demographic data of young adults. A total of 312 participants consented to participate in the study and 12 participants who fell in the exclusion criteria were removed. The remaining 300 (173 female and 127 male) participants formed the sample whose demographics are reported in the table above.

Among them 57.7% are males and 42.3% are females. The mean age of the participants is 25.22 years with a range of 19-33 years. The sample mainly consisted of undergraduates and individuals pursuing a post-graduation degree. It was seen that around 61.3% of the participants are single and most others were either in a relationship or married. A noticeable 83.3% of the participants came from a middle socio-economic status. It was observed that 70.7% of the samples are from nuclear families with major others from joint and extended families. All the participants chosen for the study were Indian nationals but 71.3% were from Tamil Nadu, Chennai and major others spread out in different metropolitans of the country.

Table 2 Gender differences in Grandiose narcissism, vulnerable narcissism and pathological narcissism.

Variables	Male (n=127)		Female (n=173)		df	t-value	p-value
	M	SD	M	SD			
Grandiose narcissism	3.11	.79	3.07	.68	298	.46	.66
Vulnerable narcissism	2.57	.86	2.80	.83	298	2.33	.21
Pathological narcissism	2.84	.74	2.93	.68	298	1.15	.25

Note: *= $p < 0.05$.

Gender differences

Independent sample t-test was performed to compare mean differences for pathological narcissism, adjustment and psychological well-being by gender. Table 2 indicates that there is no significant difference between male and female young adults in the Grandiose narcissism dimension ($t(300) = .46, p > 0.05$), vulnerable narcissism dimension ($t(300) = 2.33, p > 0.05$) and overall pathological narcissism score ($t(300) = 1.15, p > 0.05$). Mean scores indicate that males are slightly higher than females in the grandiose narcissism dimension. However, females have a slightly higher mean score than males in the vulnerable narcissism dimension.

Table 3 Gender differences in emotional adjustment, family adjustment, health adjustment, occupational adjustment, sexual adjustment, social adjustment and total adjustment

Variables	Male (n=127)		Female (n=173)		df	t-value	p-value
	M	SD	M	SD			
Emotional adjustment	16.39	6.24	20.14	6.77	298	4.89*	.00
Family adjustment	14.52	8.65	15.83	8.84	298	1.26	.16
Health adjustment	10.16	5.17	13.09	6.65	298	4.13*	.00
Occupational adjustment	13.41	7.5	11.9	7.69	259	1.59	.12
Sexual adjustment	10.28	4.77	10.92	5.4	298	1.06	.27
Social adjustment	18.24	7.5	19.97	7.76	298	1.94*	.04
Adjustment	81.83	27.57	89.86	29.59	298	2.39*	.03

Note. *= $p < 0.05$

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It was analyzed from table 3 that female adults have significantly higher scores on adjustment compared to male adults ($t(300) = 2.39, p < 0.05$) indicating that there is a significant difference between males and females in adjustment. It was also noted that gender differences were significant among emotional adjustment ($t(300) = 4.89, p < 0.05$), health adjustment ($t(300) = 4.13, p < 0.05$) and social adjustment ($t(300) = 1.94, p < 0.05$) with females possessing high scores across these dimensions than male participants. Additionally, there were no significant gender differences in family adjustment ($t(300) = 1.28, p > 0.05$), occupational adjustment ($t(300) = 1.59, p > 0.05$) and sexual adjustment ($t(300) = 1.06, p > 0.05$).

Table 4 Gender differences in autonomy, environmental mastery, personal growth, positive relations with others, purpose in life, self-acceptance and psychological well-being

Variables	Male (n=127)		Female (n=173)		t-value	p-value
	M	SD	M	SD		
Autonomy	15.76	3.09	15.01	3.17	298	2.03*
Environmental mastery	15.43	3.5	15.16	3.59	298	.65
Personal growth	17.16	3.41	17.64	2.88	298	1.33
Positive relation with others	14.13	4.17	14.6	4.03	298	.98
Purpose in life	14.06	3.55	14.65	3.31	298	1.49
Self-acceptance	16.02	3.61	16.16	3.73	298	.34
Psychological well-being	92.54	13.5	93.22	13.31	298	.43

Note: * = $p < 0.05$.

Male adults and female adults did not indicate a significant difference in psychological well-being and its dimensions except the autonomy dimension ($t(300) = 2.03, p < 0.05$). Males scored significantly higher in the autonomy dimension than females. Additionally, from the mean scores it was understood that females had slightly higher mean scores than males in the personal growth, positive relations with others, purpose in life and self-acceptance dimension. In contrast, males showed slightly higher mean scores though not significant than females in environmental mastery and the psychological well-being dimension.

Correlation analysis

Table 5 demonstrates that some dimensions of adjustment show a significant relationship with dimensions of pathological narcissism. The exploitativeness dimension of narcissism exhibited a significant negative correlation with only the emotional adjustment dimension ($r = -.13, p < 0.05$). Emotional adjustment also showed a significant positive correlation with all the dimensions of narcissism. Emotional adjustment shared a moderate high correlation with vulnerable narcissism ($r = .51, p < 0.01$). Family adjustment was seen to be correlated with all the dimensions of pathological narcissism except exploitativeness and Self-sacrificing self enhancement. There was a moderate positive correlation, substantial but small relationship between family adjustment and pathological narcissism ($r = .45, p < 0.01$). It has also been understood that health adjustment has a moderate positive correlation, substantial

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Table 5 Correlation matrix between dimensions of pathological narcissism and Adjustment.

Measures	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	
1 Exploitative Ness	—																	
2 Self-sacrificing self enhancement	.25**	—																
3 Grandiose fantasy	.28**	.53**	—															
4 Contingent self esteem	.05	.58**	.48**	—														
5 Hiding self	.09	.41**	.40**	.49**	—													
6 Devaluing others	.12*	.56**	.41**	.64**	.57**	—												
7 Entitlement rage	.18**	.60**	.47**	.70**	.42**	.63**	—											
8 Grandiose narcissism	.62**	.79**	.84**	.51**	.41**	.49**	.57**	—										
9 Vulnerable narcissism	.14*	.65**	.53**	.86**	.75**	.86**	.83**	.60**	—									
10 Pathological narcissism	.41**	.80**	.75**	.78**	.66**	.77**	.79**	.88**	.91**	—								
11 Emotional adjustment	-.13*	.31**	.37**	.48**	.36**	.47**	.36**	.28**	.51**	.45**	—							
12 Family adjustment	.07	.1	.23**	.32**	.33**	.30**	.24**	.18**	.36**	.31**	.45**	—						
13 Health adjustment	-.05	.18**	.18**	.32**	.27**	.34**	.25**	.15*	.36**	.29**	.59**	.43**	—					
14 Occupational adjustment	-.03	.17**	.1	.27**	.19**	.26**	.26**	.11	.29**	.23**	.33**	.34**	.34**	—				
15 Sexual adjustment	.00	.22**	.22**	.28**	.29**	.34**	.19**	.21**	.33**	.31**	.37**	.33**	.33**	.31**	—			
16 Social adjustment	-.24**	.15*	.07	.23**	.30**	.33**	.12*	.01	.30**	.18**	.41**	.31**	.26**	.29**	.37**	—		
17 Adjustment	-.09	.27**	.29**	.47**	.43**	.50**	.36**	.23**	.53**	.44**	.76**	.72**	.70**	.66**	.62**	.64**	—	
18 Mean	2.93	3.10	3.24	2.55	3.01	2.55	2.68	3.09	2.70	2.89	18.55	15.27	11.85	12.57	10.65	19.24	86.46	
19 Standard deviation	0.82	0.95	1.11	1.02	0.99	1.06	1.03	0.73	0.85	0.71	6.80	8.77	6.23	7.63	5.14	7.69	28.98	

Note. N= 300 **= $p < 0.01$, * = $p < 0.05$, two tailed.

but small relationship with vulnerable narcissism ($r = .59, p < 0.01$) and significant relationship with pathological narcissism and all other dimensions except the exploitativeness dimension. Occupational adjustment displayed a mild positive correlation with all sub-dimensions including vulnerable narcissism and pathological narcissism except the grandiose fantasy sub-dimension and grandiose narcissism dimension. Likewise, sexual adjustment also depicted a mild or moderate correlation with all the sub-dimensions of pathological narcissism including grandiose, vulnerable and pathological narcissism. Social adjustment shows a mild positive correlation with Self-sacrificing self enhancement sub-dimension and entitlement rage sub-dimension at the .05 level of significance and with all other sub-dimensions at the 0.01 level of significance. Social adjustment failed to show a significant correlation with grandiose fantasy and grandiose narcissism. ($r = .07, p > 0.01$ & $r = .01, p > 0.01$). Total adjustment did not have a correlation with the exploitativeness sub-dimension. Additionally, adjustment displays a moderate positive correlation, substantial but small relationship with devaluing others ($r = .50, p < 0.01$) and vulnerable narcissism ($r = .53, p < 0.01$). Adjustment has a mild positive relationship with all other dimensions of pathological narcissism.

Correlations between dimensions of pathological narcissism and dimensions of psychological well-being along with their Mean and standard deviations are represented in **table 6**. Autonomy has mild significant negative correlation with the sub-dimensions of narcissism except exploitativeness ($r = .19, p > 0.01$) as well as vulnerable and pathological

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narcissism. There was no significant correlation with grandiose narcissism ($r = -.08, p < 0.01$).

Table 6 Correlation matrix between dimensions of pathological narcissism and dimensions of psychological well-being.

Variables	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1 Exploitativeness	—																
2 Self-sacrificing self enhancement	.25**	—															
3 Grandiose fantasy	.29**	.53**	—														
4 Contingent self esteem	.05	.58**	.48**	—													
5 Hiding self	.09	.41**	.40**	.49**	—												
6 Devaluing others	.12*	.55**	.41**	.64**	.58**	—											
7 Entitlement rage	.19**	.60**	.48**	.70**	.42**	.63**	—										
8 Grandiose narcissism	.62**	.80**	.54**	.51**	.41**	.50**	.57**	—									
9 Vulnerable narcissism	.14*	.65**	.53**	.86**	.75**	.86**	.83**	.60**	—								
10 Pathological narcissism	.40**	.80**	.75**	.78**	.66**	.77**	.80**	.88**	.91**	—							
11 Autonomy	.19**	-.22**	-.11*	-.34**	-.18**	-.23**	-.21**	-.08	-.29**	-.22**	—						
12 Environmental mastery	.17**	-.13*	-.24**	-.44**	-.33**	-.33**	-.26**	-.12*	-.41**	-.31**	.35**	—					
13 Personal growth	.12*	-.24**	-.01	-.31**	-.19**	-.27**	-.27**	-.06	-.31**	-.22**	.17**	.35**	—				
14 Positive relations	-.02	-.13*	-.16**	-.33**	-.38**	-.34**	-.30**	-.15*	-.40**	-.32**	.14*	.43**	.37**	—			
15 Purpose in life	-.09	-.20**	.05	-.12*	-.01	-.19**	-.11	-.1	-.14*	-.13*	.14*	.04	.27**	.17**	—		
16 Self-acceptance	.13*	-.15*	-.14*	-.32**	-.28**	-.30**	-.23**	-.08	-.34**	-.25**	.29**	.61**	.38**	.39**	.11	—	
17 Psychological well-being	.12*	-.28**	-.17**	-.49**	-.37**	-.44**	-.36**	-.16**	-.50**	-.38**	.53**	.74**	.66**	.69**	.44**	.74**	—
18 Mean	2.93	3.10	3.24	2.55	3.01	2.55	2.68	3.09	2.70	2.89	3.15	3.55	3.12	4.09	3.42	3.68	13.37
19 SD	0.82	0.95	1.11	1.02	0.99	1.06	1.03	0.73	0.85	0.71	3.15	3.55	3.12	4.09	3.42	3.68	13.37

Note. N=300 **= $p < 0.01$, * = $p < 0.05$, two tailed.

The environmental mastery dimension showed a significant negative relationship with all the sub-dimensions of narcissism excluding exploitativeness which shows a positive correlation with environmental mastery ($r = .17, p < 0.01$) including grandiose, vulnerable and pathological narcissism. There was a moderate negative correlation with contingent self-esteem ($r = -.44, p < 0.01$) and vulnerable narcissism ($r = -.41, p < 0.01$). Personal growth illustrates no significant association between grandiose fantasy ($r = -.01, p > 0.01$) and grandiose narcissism ($r = -.06, p > 0.01$). Additionally, there is a mild negative association with all the other sub-dimensions of pathological narcissism including vulnerable and pathological narcissism. Positive relations dimension of well-being has only a mild yet significant relationship with all the sub-dimensions of narcissism except the exploitativeness dimension ($r = -.02, p > 0.01$). Purpose in life has no significant association with exploitativeness ($r = -.09, p > 0.01$), grandiose fantasy ($r = -.05, p > 0.01$), hiding self ($r = -.01, p > 0.01$), entitlement rage ($r = -.11, p > 0.01$) and grandiose narcissism ($r = -.11, p < 0.01$). However, the other sub-dimensions of pathological narcissism are mildly yet significantly correlated with purpose in life. Grandiose narcissism does not have a significant

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association with self-acceptance and shows a mild correlation at the 0.05 level of significance with the sub-dimensions of grandiose narcissism namely exploitativeness, self-sacrificing self-enhancement and grandiose fantasy ($r = .13, p < 0.05, r = -.15, p < 0.05, r = -.14, p < 0.05$, respectively). Finally, psychological well-being has a moderate negative association with contingent self-esteem ($r = -.49, p < 0.01$), devaluing others ($r = -.44, p < 0.01$) and vulnerable narcissism ($r = -.50, p < 0.01$). Other dimensions have a mild yet significant negative relationship with the psychological well-being.

Table 7 Linear regression analysis for Pathological narcissism predicting Adjustment

Variable	B	95 % CI	β	t	p	R ²	F
(Constant)	34.42	[21.87, 46.97]	.44	5.080	.01	.18	70.53
Pathological Narcissism	17.98	[13.77, 22.19]		8.138	.01		

Note. Dependent Variable: Adjustment. CI= Confidence interval for B

Table 7 shows the extent to which pathological narcissism predicts adjustment using linear regression analysis. It can be understood from the analysis that the R² value indicates that 18% of points are exactly on the regression line. Therefore, it can be said that pathological narcissism predicts 18% of the variations in adjustment. However, 82% of the variation remains unexplained or explained by other factors. The observed F-statistic (F=70.53) at a 95% confidence level ($\alpha=0.05$) is significant for pathological narcissism ($p < 0.05$). The significant regression equation was found (F (1,298) = 70.53, $p < .001$). The coefficient value provides necessary information to predict adjustment from pathological narcissism as well as determine whether pathological narcissism contributes statistically significantly to the model. The standardized β value of .44 shows the correlation between pathological narcissism and adjustment which is a moderate significant correlation. The unstandardized B value predicts that with every 1% increase in pathological narcissism, adjustment will increase by 17.98%. The confidence interval for B indicates that the B value will fall between 13.77 and 22.19 with a 95% confidence. However, theoretically it can be said that when the value of pathological narcissism is 0, the adjustment of individuals is 34.42% (unstandardized constant). Similarly, the confidence interval for the unstandardized constant indicates that the constant value will fall between 21.87 and 46.97 with 95% confidence. It can also be concluded that narcissism has a significant change in adjustment because the p value is significant at the .05 level of significance ($p < 0.05$).

Table 8 Regression analysis for Pathological narcissism predicting psychological well-being

Variable	B	95 % CI	β	t	p	R ²	F
(Constant)	113.97	[108.03, 119.92]	-.383	37.708	.01	0.14	51.33*
Pathological Narcissism	-7.27	[-9.27 -5.27]		-7.165	.01		

Note. * = $p < 0.05$. Dependent Variable: Psychological well-being. CI= Confidence interval for B

The results for linear regression analysis of pathological narcissism and psychological well-being are presented in table 8. It is evident from the results that pathological narcissism and psychological well-being have an inverse relationship, therefore, the predictions so made exhibit an inverse relationship. The correlation between pathological narcissism and psychological well-being is a mild significant negative correlation ($\beta = -.383$). Therefore, if

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there is an increase in one, the other decreases. Additionally, it is inferred from the table that Pathological narcissism predicts 14% variations in psychological well-being which indicates a medium effect size according to Cohen (1992) r-squared value. In other words, .14% of changes in criterion variable (psychological well-being) are related to pathological narcissism. According to table 8, the F value ($F = 51.33$) at the 0.05 level of significance ($\alpha=0.05$) is significant for pathological narcissism. It indicates a moderate strength of prediction of the R^2 . Additionally, the unstandardized B value (-7.27) suggests that for every 1% increase in pathological narcissism, there is 7.27% decrease in psychological well-being. The confidence interval for B indicates that the unstandardized B value will fall between -9.27 and -5.27 with a 95% confidence. It can be observed from the unstandardized constant value or the y-intercept (113.97) that when the value for pathological narcissism is 0, psychological well-being is 113.97%. Similarly, the confidence interval for the unstandardized constant indicates that the constant value will fall between 108.03 and 119.92 with a 95% confidence. It can also be concluded that pathological narcissism has a significant change in psychological well-being because the p value is significant at the .05 level of significance ($p<0.05$)

DISCUSSION

The findings from the analyses indicate that there is no significant gender difference for grandiose, vulnerable and pathological narcissism. Therefore, in support of the findings, *we fail to reject the null hypothesis 1*. This contrasts with previous literature which saw males to possess higher narcissistic traits than females (Bushman & Baumeister, 1998) although the difference has gradually declined (Twenge, Konrath, Foster, Campbell, & Bushman, 2008). However, one study by Pauletti, Rachel & Menon, Madhavi & Menon, Meenakshi & Tobin, Desiree & Perry, David, 2012 viewed girls as having more narcissistic traits than boys. One key understanding from the results is that both males and females on an average show higher narcissistic mean score. The mean scores are higher than the normative scores prescribed for pathological narcissism. This may suggest that the challenges and major life events of emerging adulthood, like leaving home and engaging with new work and/or academic responsibilities and social demands may contribute to a sense of self doubt that is defensively responded to with either inflated grandiose narcissism or increasing self-doubt and vulnerable narcissism (Karin Ensink, Simon Chrétien, Lina Normandin, Michaël Bégin, Deanne Daigle & Peter Fonagy, 2017)

Hypothesis 2 was rejected because there was a significant difference between males and females for adjustment. Females showed higher levels of overall adjustment compared to males and especially in the social, health and emotional dimensions of adjustment. Females are substantially better adjusted than males in family, health, emotional and social adjustment (Lalima and Sheetal Prasad, 2019). These adjustment issues are different for both males and females as social/gender norms, social stereotypes and social roles and expectations are different for both the genders and similarly the ways of solving adjustment problems are also different for both the boys and girls (Lalima and Sheetal Prasad, 2019)

The effects of gender differences for psychological well-being were analyzed and results showed that males and females did not significantly differ in terms of well-being scores. Therefore, *we fail to reject the null hypothesis 3*. One key finding however is that males showed a significant mean difference in the autonomy dimension of well-being than females did. Men generally show higher scores on self-acceptance and autonomy as indicated by previous studies (M. Pilar Matud, Marisela López-Curbelo, and Demelza Fortes, 2019). It

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can be inferred from this that those females display lesser autonomy than males possibly due to adherence to traditional gender roles and societal norms of a collectivistic culture. It can also be deduced from the mean scores that women enjoy a good sense of well-being overall. Grandiose narcissism, vulnerable narcissism and pathological narcissism were significantly positively correlated with adjustment. Therefore, the ***null hypothesis 4 is rejected***. Some characteristics of narcissism, including high agency and self-enhancement, are often viewed as indicators of better adjustment (Taylor & Brown, 1988; Saragovi, Aube, Koestner, & Zuroff, 2002). One key finding is that adjustment shows a moderate high positive correlation with contingent self-esteem, devaluing others and vulnerable narcissism. This may be because devaluing others necessarily reduces well-being and adjustment of those on who the devaluation is targeted at and not the individual who possesses the narcissistic trait. Additionally, emotional adjustment showed a moderate positive relationship with vulnerable narcissism. Even though the results contrast with previous literature which explains that vulnerable narcissism includes instances of depressed mood, insecurity, hypersensitivity, shame and identification with victimhood (Nicholas J. S. Day, Michelle L. Townsend, and Brin F. S. Grenyer, 2020). Vulnerable narcissism shows good relationship with emotional adjustment which could be due to presence of emotional coping strategies which compensate for the emotional vulnerabilities experienced.

Additionally, results indicate that grandiose, vulnerable and pathological narcissism are significantly negatively correlated with psychological well-being. Therefore, ***we reject the null hypothesis 5*** which states that there is no significant relationship between pathological narcissism and psychological well-being. Psychological well-being shares a moderate high negative correlation with vulnerable narcissism which indicates that as vulnerable narcissism increases, psychological well-being decreases. It has been shown that vulnerable narcissism includes instances of depressed mood, insecurity, hypersensitivity, shame and identification with victimhood (Nicholas J. S. Day, Michelle L. Townsend, and Brin F. S. Grenyer, 2020) which affirms the idea that vulnerable narcissism results in reduced well-being.

Another key finding is that environmental mastery has a substantial negative relationship with contingent self-esteem and vulnerable narcissism. Interestingly, exploitativeness sub-dimension of grandiose narcissism showed a significant positive correlation with autonomy, environmental mastery, personal growth and self-acceptance. This could be because exploitativeness involves an element of manipulation of others which makes the perpetrator feel more powerful, autonomous, boost their sense of self and control over their environment.

Finally, regression analysis helps understand the extent to which pathological narcissism predicts adjustment and psychological well-being. Although the null hypothesis was rejected, they should be considered tentative until replicated. Findings indicate that pathological narcissism significantly predicts the variation and changes in adjustment. The obtained *p* value is significant and therefore, ***the null hypothesis which states that pathological narcissism will not significantly predict changes in adjustment is rejected***. The *t* value which is significantly high provides greater evidence against the null hypothesis. Even though pathological narcissism predicts 18% of the variations in adjustment, the other 82 % of the variations go unaccounted. The strength of regression predicted from the coefficient of regression indicates that pathological narcissism shows a moderate strength. Therefore, it can be said that narcissism is a significant predictor of adjustment.

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Additionally, research shows that pathological narcissism significantly negatively predicts the variations in psychological well-being. Therefore, it can be said that as pathological narcissism increases, psychological well-being decreases. 14% of the variations in psychological well-being are accounted by narcissism and the rest 86% are unaccounted by narcissism. The strength of prediction observed from the coefficient of regression is modest but not strong. However, the p value is significant at the 0.05 level of confidence providing evidence against the null hypothesis. *Therefore, the null hypothesis stating that pathological narcissism will not significantly predict changes in psychological well-being is rejected.*

Implications and recommendations for future research

The study is an important contribution to the field of personality studies. Contrary to previous research in which males were seen to have more grandiose narcissism and females showed higher vulnerable narcissism, the current study shows no gender differences in grandiose, vulnerable and pathological narcissism. This may be indicative of the fact that the chosen sample of young adults may not fit themselves well into the conventional gender norms. An intriguing finding is an elevated score of pathological narcissism in the sample of young adults in the Indian context. Narcissism scores are significantly higher than normative scores prescribed for pathological narcissism. Since India is a collectivistic culture and narcissism is seen more among individuals from individualistic cultures, it is unexpected that narcissism is high in a sample from India. Similarly, in contrast to previous findings which showed an inverse relationship between pathological narcissism and adjustment, this study implied a significant direct relationship between the two variables. This could imply that narcissists are showing better adjustment to their environment using coping strategies and defense mechanisms. Studying adjustment of families and friends of these narcissists may confer some important findings because if narcissists perceive themselves to be well-adjusted, then it is reasonable to hypothesize that significant members living or associated with them could show maladjustment due to demands posed by the so-called well-adjusted narcissist. Psychological well-being showed an inverse relationship with narcissism as expected but it is intriguing for well-being scores to be inversely related while adjustment is directly related. The predictions made by pathological narcissism on adjustment and well-being in the present study are valuable but further replication of these findings are encouraged in future research to affirm any conclusions. One of the major implications of the present study is to understand how adjustment and well-being which important indicators of mental health are influenced by pathological narcissism that can have implications in treatment of narcissistic personality disorder and individuals with adjustment difficulties or poor well-being.

CONCLUSION

The study addresses the gap in empirical research by focusing on pathological narcissism among Indian young adults and measuring their levels of adjustment and psychological well-being to understand the relationship of these variables with narcissism. Considering the study's tentativeness, it is plausible to conclude that pathological narcissistic traits show an increase among young adults with no significant gender differences. The study also showed significant gender differences in adjustment which has been empirically accounted for in the past too. However, psychological well-being failed to demonstrate any significant gender difference. The present study also found significant positive correlations between both dimensions of pathological narcissism with adjustment and significant negative correlations between both dimensions of pathological narcissism with psychological wellbeing.

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Pathological narcissism was overall significantly correlated with both the variables. It was found that vulnerable traits were more dysfunctional than grandiose traits deduced from significantly reduced well-being in vulnerable narcissists. Finally, pathological narcissism significantly positively predicted the variations in adjustment. Pathological narcissism also significantly negatively predicted variations in psychological well-being. However, more replication is required to confirm the strength of these predictions made. The study is valuable for realizing the integration of both grandiose and vulnerable narcissism into treatment due to its varied manifestations and implications in well-being and adjustment. As such, a more sophisticated integration in its diagnostic concept would be required. Further replications may throw light on the trends unaccounted in the present study.

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Conflict of Interest

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