

What are the Expert Opinions on the Relationship Between  
Narcissistic Personality Disorder (NPD) and Mental Illness  
Classification?

By

Ryan McConnell

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Master of Science

Psychology

University of Liverpool

16.03.2019

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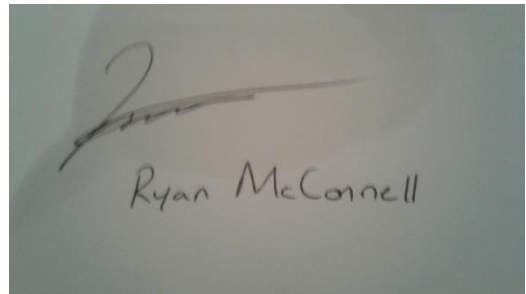
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## Declaration

No portion of this work has been submitted in support of an application for degree or qualification of this or any other University or institute of learning.

Signature:

A photograph of a handwritten signature in black ink on a light-colored surface. The signature is stylized and appears to be 'Ryan McConnell'. Below the signature, the name 'Ryan McConnell' is written in a clear, legible cursive script.

## **Abstract**

**Background:** Within the psychological community there is a great deal of debate over the nature of narcissism. In particular what causes the symptoms and is it correctly diagnosed, categorised and measured. Given that several psychologists argue for a different approach to its diagnosis and its labelling as a personality disorder/ mental illness, there was an apparent need to explore the views of the psychological community.

**Aim of study:** The aim of this research was to explore the opinions of ten established NPD experts with regards to NPD and its relationship with mental illness.

**Methods:** The study was a qualitative in nature and ten participants (experts on the subject of NPD) took part in semi-structured interviews lasting approximately one hour using Skype. These experts were given the same list of twenty-one questions which were adapted from the surrounding literature.

**Results:** A total of nine themes, twenty sub themes and forty-seven categories were extracted. The discussions were centred around: causes of narcissistic tendencies; the placement of diagnostic boundaries, debate over whether a discreet diagnosis or a trait-based approach was superior; validity of multiple forms of NPD; validity of NPD as a concept; validity of mental illness as a concept and the impact of environmental factors on narcissistic tendencies.

**Conclusions:** There has been a significant shift from the discreet diagnosis of NPD to a trait-based approach, with researchers arguing for the removal of discreet terminology in favour of position on a spectrum. There has been a shift in the NPD research community

to focus on a more developed measurement instrument, with many experts agreeing that a trait-based inclusion is necessary for diagnostic progression. There was some division on the nature of narcissism, the cause of narcissism and whether it should be split into sub-categories and whether it should classify as a mental illness.

Keywords: Narcissism, Narcissistic, Personality, Disorder & Interviews.

Abstract Word Count: 300

Dissertation Word Count: 10,987



## **Acknowledgments**

A brief thank you to all of the people who made this research possible. I hold all the experts that took part in these interviews in very high regard and thoroughly enjoyed the interview process. Thank you to my dissertation advisor for guiding me through the entire procedure and to the University for giving me the opportunity to undertake this research. Finally big thank you to my parents and girlfriend Anastasia for the endless support and love.

## List of Abbreviations

**DSM-5:** Diagnostic and Statistical Manual of Mental Disorders (5<sup>th</sup> revision)

**EMA:** Ecological Momentary Assessment

**EX (1-10):** Reference to expert 1 to 10 referring to the order of interviewing.

**FFM:** Five Factor Model

**ICD-10:** International Statistical Classification of Diseases and Related Health Problems (10th revision)

**IOREC:** International Online Research Ethics Committee

**IPA:** Interpretive Phenological Analysis

**NPD** - Narcissistic personality disorder

**NPI:** Narcissistic Personality Inventory

**PD:** Personality Disorder

**PNI:** Pathological Narcissism Inventory

## **Chapter 1: Introduction**

Over the last few decades there has been a radical shift in perceptions of mental illness and the number of individuals impaired by mental illness. Since the introduction of the DSM-3 in 1987, there has been a significant increase to the diagnosis rates of mental illnesses (Angell, 2011). According to Lelliott, et al., (2008) 83% of people will suffer from a mental disorder at some point in their life. Currently, there is a global estimate suggesting that 20% of the adult population suffer from some type of mental disorder (such as anxiety disorders, eating disorders and chronic depression), a marked increase from 18% in the last five years (Salleh, 2018).

One extreme form of mental disorder is personality disorder (PD). Indeed a PD is considered by both medical and academic bodies to be a form of mental illness (Kendell, 2002; Tyrer & Simmonds, 2003). Leising, Rogers & Ostner, (2009) defined personality disorder as a way of thinking, feeling and behaving that deviates from the expectations of the culture. In addition, PD's cause distress or problems functioning that has a lengthy perhaps even lifetime duration. Linehan (2018) described PD's as being an ingrained part of the person's personality and as such affects all decisions they make and the way they analyse stimulus within the environment. According to Tyrer, Reed and Crawford (2015)

research, approximately 47% of people will suffer from a personality disorder at some point in their lives.

Depending on the source PDs affects somewhere between 3 to 10% of the population (Tyrer, et al., 2010). In order to be diagnosed with a PD an individual must demonstrate some significant and enduring difficulties with at least two out of four of the following points: Distorted thinking patterns, problematic emotional responses, over-or under regulated impulse control, and interpersonal difficulties (Eren & Şahin, 2016). In addition, for a person to be diagnosed with a specific personality disorder, the individual must meet the minimum number of criteria established for that particular disorder (American Psychiatric Association [APA], 2013; Beck, Davis & Freeman, 2015).

DSM-5 (APA, 2013) which is the current diagnosing manual used by clinicians to determine PDs suggests that there are ten different types of personality disorders which can be separated into three separate clusters:

- (1) Cluster A involves PDs which are deemed ‘odd and eccentric’, these conditions being Paranoid, Schizoid and Schizotypal PD.
- (2) Cluster B involves PDs which are considered ‘dramatic, emotional and erratic’, these being Anti-social, Borderline, Histrionic, and Narcissistic PD.

- (3) Cluster C looks to incorporate conditions that are considered as being ‘anxious and fearful’, these conditions being Avoidant, Dependent, and Obsessive-Compulsive PD.

Whilst there is some area of overlap in these conditions (Beck, Davis & Freeman, 2015; Chabrol, et al., 2009; Miller, et al., 2015) this research will only be focusing on Narcissistic PD and its relationship with mental illness.

Narcissistic Personality Disorder (NPD) according to the DSM-5 is characterised by a long-term display of certain abnormal behaviours manifesting as at least five of these nine traits (APA, 2013):

- (1) Grandiosity with expectations of superior treatment from other people;
- (2) Fixated on fantasies of power, success, intelligence and attractiveness;
- (3) Self-perception of being unique and superior;
- (4) Needing continual admiration from others;
- (5) A sense of entitlement to special treatment and obedience from others;
- (6) Exploitative of others to achieve personal gain;
- (7) Unwilling to empathize with the needs of other people;
- (8) Intensely envious of others, and the belief that others are equally envious of them;
- (9) Pompous and arrogant demeanour.

According to Stinson et al., (2008) Narcissistic personality disorder is believed to affect approximately 6.2% of people at some point in their lifetime, with rates being greater for men (7.7%) than women (4.8%). These rates have been steadily increasing over the last 24 years since the conception of NPD in the DSM-4 (Foster, Shenese, & Goff, 2009; Ronningstam, 2016)

However, in recent years the DSM has attracted a great deal of controversy within the community regarding its approach to diagnosing in relation to NPD. Firstly, NPD is considered by some as being too broad a terminology (Beck, Davis & Freeman, 2015; Russ et al., 2008; Skodol, 2012) with a variety of symptoms being displayed and even radically different types of individuals falling under the same category (Blais, Hilsenroth, & Castlebury, 1997; Shedler & Westen, 2007; Skodol, 2012).

Other controversies such as: the contribution of social media; the relevance of genetics as a contributor and severity of traits required for NPD to be diagnosed are points that need investigating (Blasco-Fontecilla et al., 2009; Hunt, Bornovalova & Patrick, 2015; Zachar, Krueger & Kendler, 2016). Pincus & Lukowitsky (2010) proposed that the reason for so many of these controversies can be related to the prevalence of narcissism as a co-occurrence in other disorders. One of the most commonly raised controversies surrounding NPD is the perceived lack of research conducted on just specifically NPD as a separate entity, rather than as a regarded co-occurrence of other PDs (Brummelman et al., 2015; Marissen et al., 2016). Indeed, papers such as Stinson et al., (2008) and Zachar, Krueger &

Kendler (2016) go as far as to suggest that NPD is the least empirically researched of all personality disorders. Other researchers like Anninos (2018) and Higgs (2009), argued that narcissism is not a mental illness at all, simply a personality quirk as it can be a neutral or even useful trait in the working world, questioning the need to NPD listed as a personality disorder.

As a result of all this controversy it seemed necessary to explore the nature of NPD and how professional clinicians should go about diagnosing it. Without such research, professionals may continue to over or under diagnose the condition, resulting in potential negative ramifications occurring upon their clients and individuals who interact with the client (Curtis & Susman, 1994; Fossati, et al., 2009). This current research was designed with the intent of summarising these controversies and evaluating the current zeitgeist surrounding NPD, by way of experts' perspectives. For the purpose of this current study, the term 'expert' is defined in this paper as being an individual who has published at least one peer reviewed paper/literature on NPD.

The research question posed was 'What are the expert opinions on the relationship between Narcissistic Personality Disorder (NPD) and mental illness classification?'

The aim of this study was:

(1) To explore the opinions of the established NPD related experts with regards NPD, its understanding and its classification in relation to mental illnesses.

The objectives of the research were:

- (1) To explore the expert perception of what constitutes NPD by way of qualitative approach.
- (2) To explore the expert opinions regarding the classification and identification of NPD as a form of mental illness.



## **Chapter 2: Literature Review**

### **Background of Narcissism**

The word narcissism is taken from the Greek myth of Narcissus, the story of a young man who rejects the advances of the nymph Echo in favour of staring at his own reflection (Vinge, 1967). The story highlights the themes of excessive self-worship, self-aggrandising and societal ignorance (Paris, 2003). Although narcissism is a common trait of humanity, scientific study has only been undertaken within the last one hundred years or so (Graves, 2017).

### **Analysis of NPD**

The terminology Narcissistic Personality Disorder was originally coined by Kohut (1968), being used to describe the kind of narcissism that causes a state of denial in the patient, to the point where the patient behaviour has become a measurable problem both to themselves and to others. The chief method of diagnosing NPD and indeed most mental disorders, is through application of the DSM (Hyman, 2011; Kilpatrick et al., 2013; Mayou et al., 2005). Kim et al., (2008) and Dhawan et al., (2010) suggesting that approximately one percent in general populace have been or should be diagnosed with NPD. The newest version, the DSM-5 (APA, 2013) presents a series of nine symptoms for identifying NPD, these are listed in the introduction

Patients presenting five out of nine of these symptoms can be diagnosed by clinicians as having NPD. There seems to be disagreement in the community over the presentation and diagnosis of NPD via this method. Russ et al., (2008) argued that this kind of discrete polarisation of the disease (either a person has NPD or does not) leads to limited diagnosis methods. Other researchers such as Cain, Pincus and Ansell (2008) highlighted a key issue with this five out of nine approach, mainly which two different people can display two almost completely different sets of symptoms and yet can be diagnosed with the same disorder (Miller, Lynam & Campbell, 2016; Pincus, Lukowitsky, 2010). In addition, these diagnostic points can be interpreted very differently depending on the clinician.

In Ronningstam's (2011A) work the researcher compares a trait-based approach versus the DSM's discreet diagnosis in an attempt to bring some resolution to this diagnostical issue. Similar works can be found that tangentially compare the two different approaches to diagnosing narcissism (Hopwood et al., 2012; Livesley, Jackson & Schroeder, 1992; Skodol et al., 2011). Hopwood argued strongly for the increased implementation of trait and scale-based approach, creating a DSM-5 hybrid model. This model focuses on the diagnosing NPD by way of personality pathology severity as well as identifying specific pathological traits, with each individual having a personal summary of their condition. Whilst the findings support the integrating of trait and symptomatic elements, presents a more accurate method of diagnosis, the model still lacks large sample testing and arguably requires more combined instruments (only a single questionnaire is

used). In general the results from the community would suggest that moving to a trait-based approach would improve diagnostic accuracy and thus significantly improving treatment (Esbec & Echeburúa 2015; Schmeck, et al., 2013; Shedler et al., 2010; Tyrer et al., 2011; Widiger, 2011).

The main counter argument to this transition is that without the ability to make a diagnosis over the severity of a patient's condition, there is some difficulty in treating them (Golberstein et al., 2015; Schmeck, et al., 2013). The key reason being without an established diagnostic manual, it is much harder to implement homogeneous medical treatment (Golberstein et al., 2015; Ronningstam, 2011B; Saloner et al., 2017; Saulsman & Page 2004) as well as insurance coverage issues (Cooper, 2004; Frueh et al., 2003). As Cooper, (2004) pointed out in his work, there is definitive need to keep discreet disorders, especially within America for this reason. Indeed, many argue that removing NPD from the DSM would make it very difficult for sufferers to be compensated for all narcissism related conditions (Cooper, 2004; Peele, Xu & Kupfer, 2003). However, one could argue that this is a health care system issue rather than an issue with descriptive disorders (Walker et al., 2015; Zimmerman, Rothschild & Chelminski, 2005).

In terms of research that specifically focuses on NPD and narcissism as a single trait, there appears to be very little (Eaton, et al., 2017; Stinson et al., 2008) with a multitude of psychologists suggesting that a great deal of further analysis is required to fully understand NPD and narcissism in general (Eaton, et al., 2017; Manning, 2006; Stinson et

al., 2008). Indeed, Stinson et al., (2008) claimed that NPD is the least empirically researched of all personality disorders. As a result, the majority of modern-day research falls into either the measurement or the treatment of narcissism, with very little attention being paid to the aggregation of opinions regarding NPD (Amernic & Craig, 2010; Eaton, et al., 2017).

### **Relationship with Mental Illness**

The terminology mental illness was chosen due to its relationship with the concept of discreet diagnosis (Link et al., 2004) as it is thought that a person is either mentally ill, or they are not. It is also argued that mental illness is approximately equated to a personality disorder (Kendell, 2002; Vigo, Thornicroft & Atun, 2016). To quote Kendell who conducted analysis specifically relating to the differences between PD and mental illness, *'It seems clear from this analysis that it is impossible at present to decide whether personality disorders are mental disorders or not, and that this will remain so until there is an agreed definition of mental disorder'* (Kendell, 2002 p. 112).

When specifically focusing on whether or not NPD is a mental disorder, it seems there is little to no literature that addresses this theme. The reason for this could be due to the comorbidity of narcissism in comparison with other more prevalent and pressing mental disorders (Eaton, et al., 2017; Stinson et al., 2008; Zanarini et al., 1998). A reason highlighted by Stinson et al., for this apparent comorbidity is based upon the nature of narcissism. NPD seems to present itself in patients who are also displaying other mental

disorders which are arguably more serious in severity especially borderline, histrionic, sadistic and general psychopathy, and is therefore often overlooked (Eaton, et al., 2017; Stinson et al., 2008; Zanarini et al., 1998).

Vaknin (2006) argued that given the high comorbidity between NPD and other personality disorders, there can be some consideration to removing NPD entirely and merging the symptoms with other disorders. There is some critique to this idea, for example Vaknin fails to analyse any large medical studies of NPD diagnosed patients, instead referring to just individual cases, reducing the consistency and validity of the argument. In addition, it could be argued that Vaknin does not factor the need to keep NPD as a disorder for the sake of insurance purposes (Twenge & Foster, 2010). Finally, there seems to be some support within the community that NPD should remain its own solitary disorder as narcissistic patients are a danger to themselves and to society in different ways to those suffering from borderline or anti-social behaviour disorder (Skeem et al., 2003; Kim, et al., 2008; Vossen, et al., 2017; Wright, 2016).

There is a secondary factor to consider. As mentioned in recent years there has been a significant move away from a discreet diagnosis to a trait model approach to diagnosis (Hopwood et al., 2012; Krueger & Markon, 2014; Tyrer, Reed & Crawford, 2015; Miller & Campbell, 2008). Models such as those proposed by Miller & Campbell (2008) and Hopwood et al., (2012) propose an effective hybrid model that looks to measure both personality pathology symptoms and maladaptive traits. In doing this, the model removes

the need to have discreet personality disorders and thus removes the concept of NPD completely. However, these models do not necessarily tackle the issue of simplifying diagnosis for the sake of insurance issues, with many arguing that the adaption of a trait-based model would require a huge overhaul of insurance methods (Krueger & Markon, 2014; Wright, et al., 2013).

Other issues surrounding the diagnosing of NPD is based upon splitting NPD as a disorder into smaller more defined types of narcissism. According to Cain, Pincus and Ansell's (2008) in recent years there has been a trend towards the splitting of the narcissism disorder, with the majority of researchers suggesting that two separate categories of narcissism be created: Vulnerable Sensitivity-Depletion and Grandiosity-Exhibitionism (Cain, Pincus & Ansell, 2008; Russ et al., 2008; Wink, 1991). Indeed, Wink suggested that grandiose and vulnerable narcissism are two different disorders entirely. Miller, Widiger and Campbell (2014) suggested that NPD tends to emphasise the grandiose aspects of narcissism, suggesting that NPD is similar to the grandiose narcissism separation, whereas vulnerable narcissism may have its roots more in an anxiety-based cluster C disorder. Cain, Pincus and Ansell's (2008) suggested that by placing the majority of the diagnostic emphasis on grandiosity, NPD is subject to poor discrimination validity causing the lowest prevalence of any disorder on the axis II spectrum, despite narcissistic tendencies being present in just about all people (supported by Cramer, Torgersen & Kringlen, 2006; Miller et al., 2011)

There is however, some critique of Cain, Pincus and Ansell's (2008) work. Firstly, only a small amount of research has been carried out on the manner of distinction between grandiose and vulnerable narcissism (Rohmann et al., 2012; Vater et al., 2013A). Whilst Cain, Pincus and Ansell addressed this issue in their paper and utilised as much of the surrounding literature as possible, it still does not detract from the general use of small scaled samples and an apparent lack of supporting evidence. This is of course, going to be the case in every pioneering work but given the gravitas of implementing a completely different mental health framework, it becomes of paramount importance that the new model is well researched.

Given that the understanding of narcissism is in its infancy and theoretical in nature, discussion over a new model implementation and validity has become a complex issue. (Lyneham, Abbott & Rapee, 2007; Regier et al., 2013). For these reasons, some of the interview questions used in the interview for current study were directed towards the understanding of the division within NPD.

### **Validity of NPD Psychometrics**

The most widely used method of measuring narcissistic tendencies is the Narcissistic Personality Inventory (NPI) (Miller, et al., 2014). Proposed by Raskin and Hall (1979), this fifty-four-itemed index represents a psychometric approach to measuring narcissistic tendencies, by way of Likert scales. Based upon the criteria outlined in the DSM-3 the index has proved useful in determining normal and subclinical levels of the

narcissism and well as identifying individuals who can be categorised as having NPD (Rosenthal et al., 2011; Miller & Campbell, 2011).

The effectiveness of the NPI however, has often been repudiated, with the categories listed by Raskin and Hall (1979) often being critiqued for varying the criteria and the number of criteria categories too readily undermining its validity (Rosenthal et al., 2011; Van der Linden & Rosenthal, 2016). Even Raskin himself suggested that the inventory is unrefined and would be difficult to perfect (Raskin & Terry, 1988). Other issues include the scales within the NPI having a low correlation with one another, resulting in some skewed results (Maxwell et al., 2011; Miller, et al., 2014). In particular attention has been drawn to the relationship empathy has with narcissism within the NPI. In the NPI there is an expectation that a high level of empathy most likely results in low levels of narcissism (Miller, et al., 2014). Foster & Campbell's (2007) however, suggested that the two are not necessarily correlated at all as narcissists do not necessarily have low levels of empathy. An often-cited reason for this lack of definition is once again due to the comorbidity narcissism shares with other disorders (Diamond et al., 2014; Pincus & Lukowitsky, 2010).



## **Chapter 3: Research Method**

### **Research Design**

To effectively address the research question, a qualitative approach was undertaken, based on the assumption that detailed explanations and evaluations on the topic of NPD would be required to provide rich meaningful data. Richards (2014) argues that a qualitative approach is more appropriate for topical review studies given that such explanations and evaluations require an in-depth exploration followed by further probing follow up questions. For this reason, a detailed interview approach was selected, with each expert being interviewed from a range of forty-five minutes to seventy minutes. This duration was based on other studies that were conducted with a similar design (qualitative conversations) in a similar method (semi-structured interview) (Harvey, 2010; Hoffman, 1987; Rubin & Rubin, 2011; McGrew & Bond, 1995)<sup>1</sup>.

### **Appropriateness of Research Approach**

There are both benefits and pitfalls in conducting research that utilises a qualitative interview approach. Braun and Clarke (2006) argued the merits of thematic research based upon interviews. Firstly, that the flexibility of an interview-based approach especially when talking to experts in a subject matter is vital in order to obtain high levels of detail. Indeed,

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<sup>1</sup> A quantitative design was rejected as it would not have been appropriate for such a study. A quantitative design seeks to test hypotheses and the study design is inflexible by nature. In addition, results from a qualitative study cannot be generalised.

Flinders (1997) highlighted the effectiveness of the interview-based approach, describing it as perhaps the most valid form of qualitative study'. Flinders goes on to argue that the use of pre-determined questions with real time follow-up questions, form a highly effective approach to data gathering in interviewing. This flexibility is demonstrated in this research, as some of the questions asked in the interviews were constructed in real-time during the interview, with the goal of providing more in-depth responses. Without this flexibility it would be virtually impossible to achieve the same level of subject detail in any other methodology (Chenail. 2011; Larkin, Watts, & Clifton, 2006).

Qualitative interview-based research does however come with its significant share of pitfalls. Patton (1990) highlighted some concerns for this type of research. Firstly, the information gathered in the study is based in its entirety on the context of the situation and only focused on each subject matter for a short period of time. Secondly, the time of the interview, quality of the interview and depth of response from each question can vary wildly (Larkin, Watts, & Clifton, 2006). Patton also suggested that the researcher beware of drawing conclusions with a small sample size.

### **Participants and Sampling**

Given the in-depth nature of the study and the need to highlight scientific knowledge, it was deemed vital that all participants were 'experts' in the understanding of NPD or narcissism as a subject matter. Therefore, an inclusion criterion was that only individuals who have published a peer-reviewed academic paper/literature on NPD within

the last ten years would be recruited for the study. Only people who fulfilled these criteria were designated ‘experts’ and were contacted<sup>2</sup>. The experts were purposely chosen, with every expert having parts of their produced literature being read prior to contact, thus confirming that they met the criteria.

A total of ten experts were interviewed, providing a total of approximately 9 hours 14 minutes of interview time. The first ten respondents to the initial email from the student researcher who met the inclusion criteria were invited to take part in the study. Although the criteria listed requires that the participants had published at least one paper, each expert had at least three papers credited to them, with the highest participating in approximately forty-three papers on the subject matter.

### **Tools and Materials**

Each expert was asked the same list of twenty-one questions, which acted as the skeleton of the interview (Appendix A). These questions were divided into three separate sections. The first fifteen act as introductory questions, which were designed to get a background for the perspective of the expert and their understanding of narcissism. This provided an added opportunity to delve into some of the aspects of NPD which have tangential significance to the research question, as well as the researchers’ background.

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<sup>2</sup> No further criteria were placed for two reasons: firstly, to simplify the research and the acquiring of participants for the study and secondly to encourage a broad discussion on the nature of NPD and narcissism in general by interviewing experts from multiple different backgrounds and occupations.

The questions were constructed based upon reoccurring questions posed in various works relating to narcissism (See table 1).

The next three questions were listed as the core questions, which explore the concept of mental illness and its relationship with NPD. Their purpose being to provide a brief overview on a large variety of topics and sensitive issues surrounding narcissism and its relationship with mental illness. Finally, the last three questions were classified as the erroneous questions, these covered topics that were relevant to the study but not necessarily relevant to the research question in order to get an expansive look at the researcher's beliefs on NPD.

The study firstly was approved by the University (Appendix D), then all questions were reviewed and approved by the University ethics committee provided by the University of Liverpool and the Dissertation Adviser.

**Table 1: List of questions presented to participants**

<b>Question</b>	<b>Rationale</b>	<b>References</b>
<b>Q1:</b> What do you consider to be the key traits and characteristics of a person displaying narcissistic personality disorder?	This question was designed to get a basic understanding of how the expert believes NPD to manifest.	Lambe, et al., 2016; Pincus & Lukowitsky, 2010.
<b>Q2:</b> What would you consider the difference to be between a person displaying narcissistic tendencies and a person with NPD?	This question was designed to get an understanding of what the expert believes is the difference between narcissistic tendencies and NPD.	Lambe, et al., 2016; Pincus & Lukowitsky, 2010.
<b>Q3:</b> To what extent would you consider NPD to be prevalent in the general populace?	This question focuses on how prevalent the expert believes NPD to be as a rough estimate.	Eaton, et al., 2017; Torgersen et al., 2012
<b>Q4:</b> In your opinion what is the role of genetics as a contributor to NPD?	This question looks to understand what the expert perceives the degree to which genetics contributes towards NPD.	Lambe, et al., 2016 Torgersen et al., 2012
<b>Q5:</b> How influential would you consider society and the environment to be as contributors to NPD?	This question looks to understand what the expert perceives the environmental factors are to contribute towards NPD.	Eaton, et al., 2017; Pincus & Lukowitsky, 2010.

Question	Rationale	References
<p><b>Q6:</b> What aspects of NPD could be considered as providing positive personal characteristics?</p>	<p>This question looks to evaluate whether there is anything positive about an individual having NPD.</p>	<p>Lambe, et al., 2016; Pincus &amp; Lukowitsky, 2010.</p>
<p><b>Q7:</b> To what extent would you consider the DSM-5 interpretation of NPD to accurate?</p>	<p>This question looks to evaluate the DSM interpretation of NPD, specifically looking at how the DSM diagnoses NPD.</p>	<p>Miller, Widiger &amp; Campbell, 2010; Pincus &amp; Roche, 2011</p>
<p><b>Q8:</b> How accurately do you believe the scientific community understands NPD?</p>	<p>This question looks to get the expert's opinion as to what extent they believe the scientific community currently understands narcissism.</p>	<p>Eaton, et al., 2017; Lambe, et al., 2016; Stinson et al., 2008</p>
<p><b>Q9:</b> Which methodology of measuring narcissistic attributes do you consider to be the most valid and why?</p>	<p>This question looks to get the expert to present and evaluate the methodologies used to measures NPD.</p>	<p>Miller, Widiger &amp; Campbell, 2010; Pincus &amp; Roche, 2011.</p>
<p><b>Q10:</b> Symptoms of NPD have been described as varying in appearance and recognition. Do you agree with this sentiment and why?</p>	<p>This question looks to get the expert to discuss whether they consider NPD to be split into multiple demographic and evaluate the notion of splitting NPD into multiple subtypes.</p>	<p>Eaton, et al., 2017; Pincus &amp; Lukowitsky, 2010.</p>
<p><b>Q11:</b> Which gender would you say is more likely to suffer from NPD and why?</p>	<p>This question simply looks to ask the expert whether they consider gender</p>	<p>Lambe, et al., 2016; Torgersen et al., 2012.</p>

Question	Rationale	References
	to factor into the likelihood of an individual developing NPD.	
<b>Q12:</b> To what extent do you believe age affects the severity of the NPD condition?	This question asks the expert whether they consider age to factor into the severity of the NPD condition and why.	Lambe, et al., 2016; Torgersen et al., 2012.
<b>Q13:</b> In what aspects does substance abuse affect the severity of the NPD condition?	This question asks the expert to what degree they consider substance abuse to affect the NPD condition and evaluate why this is the case.	Pincus & Lukowitsky, 2010; Torgersen et al., 2012.
<b>Q14:</b> What are some of the key issues facing the full understanding of NPD?	This question looks to follow on from question 8 and ask the expert what specifically they feel is an under-researched area of NPD and how the scientific community should proceed.	Eaton, et al., 2017; Miller, Widiger & Campbell, 2010.
<b>Q15:</b> In Stinson et al., 2008. The researchers argue that NPD is the least empirically researched of all personality disorders, to what extent do you agree with this sentiment and is there areas that require further research in your opinion?	This question asks the expert whether they considered NPD to be the least researched of all PDs. Reference is made to Stinson et al. work as the controversial comment of NPD being the least researched which was stated in their research.	Stinson et al., 2008.

Question	Rationale	References
<b>QC1:</b> What criteria would you use to classify someone as having a mental illness?	This question focuses on what criteria is necessary for an individual to meet, for them to be considered as having a mental illness.	Pargament & Lomax, 2013; Tyrer, Reed, & Crawford, 2015.
<b>QC2:</b> To what extent would you consider a personality disorder to be a mental illness?	This question focuses on the relationship between mental illness and NPD, and asks the expert to discuss their response.	Pargament & Lomax, 2013; Tyrer, Reed, & Crawford, 2015.
<b>QC3:</b> To what extent do you consider NPD to be a mental illness?	Building on the previous QC2, this question specially asks the experts what they consider the relationship between NPD and mental illness to look like. This question is considered the core of the research as it is the question that most directly links with the research question.	Pargament & Lomax, 2013; Tyrer, Reed, & Crawford, 2015.
<b>QE1:</b> What aspects of NPD could be viewed as dangerous to society?	This question focuses on the degree to which an individual with NPD can affect society and asks the expert to evaluate the potential dangers that an individual suffering with NPD could have on society.	Lambe, et al., 2016; Mirak-Weissbach, 2012.



Question	Rationale	References
<b>QE2:</b> In your opinion, in what ways can those with both NPD and a position of power impact society?	Building on question QE1, this question asks the expert to evaluate how impactful power is at having an individual with NPD affect the society and environment around them.	Lambe, et al., 2016; Mirak-Weissbach, 2012.
<b>QE3:</b> What are your opinions on NPD being classified as a Personality Disorder in the DSM-5 but not in the ICD-10?	The final question asks the expert why they believe that NPD features as a disorder in the DSM-5 but not in the ICD-10 (another medical diagnostic manual).	Miller & Widiger, 2010; Pincus & Roche, 2011; Stinson et al., 2008.

### **Procedure & Ethical Considerations**

A database was compiled, including the names, email addresses, titles and professions of each potential participants. In addition, the details of at least one of the papers published by the expert (name, brief synopsis, URL link) was included in the database. Each expert was emailed by the researcher once and once only. A total of 130 potential participants were emailed. Approximately 16% responded with roughly half choosing to decline for various reasons. Emails were sent out until a total of ten experts had been confirmed. Attached to the original email were two other documents, these being: the informed consent document (Appendix F), and the participant information sheet (Appendix G).

The participant information sheet included information for the participants about the purpose of the research, why they had been selected and what they would be asked to do, as well as other important information about their participation. The participants were informed about the voluntary nature of the study and had the right to withdraw at any time for any reason. All interviews were conducted using Skype. The interviews were audio recorded with the participants' permission.

After the interviews were completed, they were transcribed with each question receiving its relevant time code (see Appendix B). The data was stored on a single laptop and a single hard-drive that is password protected and accessible only by the researcher. The data at no time had been shared with any other organisation outside of the research adviser provided by the university. Each expert was debriefed at the end of the interview regarding how the research would proceed and when they could expect to see the completed research. Every expert was informed that at any time they could contact the researcher and request that their interview be removed from the data or undertaken. No expert has yet actioned this request.

### **Data Analysis**

The decision was made to analyse the data predominately in the method described in Braun and Clark (2006), outline for thematic analysis. The overall benefit of this process is: flexibility, speed and ease of method. The researchers outline a six-stage process:

1. Phase One: Familiarisation with data.
2. Phase Two: Generating of initial codes.
3. Phase Three: Thematic searching.
4. Phase Four: Review of themes.
5. Phase Five: Defining and naming of themes.
6. Phase Six: Production of report.

Phase one involved all interviews being transcribed personally by the researcher. Any major themes within the interviews that initially presented themselves were highlighted and given a colour coded beside the transcript. Phase two involved coding large amounts of data into rough categories that bear relevance to some of the themes presented in the literature review. As suggested by Boyatzis (1998) the coding was done by colour highlighting the data, with reference being made in the notes for any sections that overlap.

In Phase three, these categorises were linked to the categories extracted in the literature review section. This re-focusing of data allows for the construction and discussion of themes with supporting data, tightening up the categories (Bryman, 2001). Given that the data produced both results that focused specifically on answering the research question as well as significant data on tangential topics, the creation of main themes and sub-themes was necessary. After all themes were collected, phase four involved the merging of themes where possible and the discarding of lesser irrelevant themes.

Phase five involves a dissection of the theme to identify its essence and identify any sub themes that run through the data. At this point all the themes were titled appropriately, with knowledge of what they should and should not include for refinement sake. Finally phase six involves the reporting of the data, in a manner that is analytical, precise and relevant to the research at hand.

### **Ethics**

Before any data collection occurred, ethical approval was first obtained from the University (Appendix E). Participants were informed of their right to refuse participation and right to withdraw at any time. Data was collected confidentially and not shared with any other organisation. All participants provided consent prior to taking part in the study. Data was accessed only by the researcher and the DA. Data would be kept on a password protected computer for a maximum of three years on completion of the study.

## Chapter 4: Results

The demographic data of the chosen participants is shown below in table 2.

**Table 2: Demographic data of participants.**

<b>Participant</b>	<b>Gender</b>	<b>Age in years</b>	<b>Location</b>	<b>Current Profession</b>	<b>Years Practicing profession</b>	<b>Papers published on NPD</b>
<b>No. 1</b>	<b>M</b>	<b>72</b>	<b>Canada</b>	<b>Psychologist/ Theologist</b>	<b>42 years at retirement</b>	<b>3</b>
<b>No. 2</b>	<b>M</b>	<b>56</b>	<b>America</b>	<b>Psychiatrist</b>	<b>28</b>	<b>43</b>
<b>No. 3</b>	<b>M</b>	<b>42</b>	<b>America</b>	<b>Psychologist</b>	<b>18</b>	<b>12</b>
<b>No. 4</b>	<b>M</b>	<b>60</b>	<b>America</b>	<b>Psychology/ Philosopher</b>	<b>32</b>	<b>4</b>
<b>No. 5</b>	<b>M</b>	<b>61</b>	<b>England</b>	<b>Psychologist</b>	<b>26</b>	<b>8</b>
<b>No. 6</b>	<b>M</b>	<b>59</b>	<b>America</b>	<b>Psychologist</b>	<b>30</b>	<b>21</b>
<b>No. 7</b>	<b>M</b>	<b>55</b>	<b>Canada</b>	<b>Psychologist/ Philosopher</b>	<b>11</b>	<b>5</b>
<b>No. 8</b>	<b>M</b>	<b>39</b>	<b>America</b>	<b>Psychiatrist</b>	<b>13</b>	<b>8</b>
<b>No. 9</b>	<b>M</b>	<b>64</b>	<b>America</b>	<b>Psychologist/ Philosopher</b>	<b>36 years at retirement</b>	<b>17</b>
<b>No. 10</b>	<b>M</b>	<b>51</b>	<b>America</b>	<b>Psychologist</b>	<b>27</b>	<b>6</b>

From the analysis forty-seven categories were extracted. These categories were then grouped into twenty sub-themes which were then further grouped in nine themes (see table 2).

**Table 3: Categories, sub-themes and themes**

Categories extracted from the interviews	Sub-Themes	Themes
Grandiosity	1.1 Descriptions of Narcissistic behaviour	<b>(1) Symptoms of NPD:</b>
Self-obsession		
Lack of empathy and sympathy		
Erratic self-esteem and self-confidence		
Lack of control over behaviour	1.2 Descriptions of symptoms of NPD	
Narcissistic tendencies no longer having any benefit		
Violence	2.1 Reference to severity of NPD	<b>(2) Severity of NPD condition:</b>
Overbearing or controlling		
Unquestioningly authoritarian and abusive tendencies		
Cunning and compulsive lying	2.2 Severity in relation to other disorders	
Denial of personality disorder		
Denial of mental illness/ mental issues.		
Issues Self control	3.1 Description of mental illness.	<b>(3) NPD relationship with mental illness:</b>
Lack of control over one's thoughts		
Issues with behaviour management		
Is mental illness a dated terminology?	3.2 Reference to the validity of mental illness as a concept.	
Similar or the same concept		
Mental illness no longer relevant concept	3.3 Reference to whether it can be considered the same as a PD.	
References to NPD as a mental illness		
Reference to NPD as not a mental illness		
	3.4 Reference to whether NPD can be considered a form of mental illness.	

Issue with five of nine diagnostical criteria	4.1 References to differences in behaviour within the NPD condition.	<b>(4) Differences in NPD behaviour:</b>
Grandiose Narcissism	4.2 References to different types of NPD (grandiose and vulnerable divide)	
Vulnerable Narcissism		
Thick-skinned, thin skinned narcissists		
Parents or grandparents with NPD	5.1 Relevance of genetic factors to NPD	<b>(5) Relevance of genetics as NPD contributor:</b>
Siblings with NPD.		
Other family members with narcissistic characteristics		
Reference to impact of genetics to NPD.	5.2 Level of impact of genetics on NPD	
Facebook	6.1 Impact of social media	<b>(6) Relevance of environment as NPD contributor:</b>
Other social media		
Childhood lessons	6.2 Impact of parenting styles	
Poor reward structure by parents		
Abusive behaviour	6.3 Impact of childhood abuse	
Use of shame and guilt as motivators		
Validity of DSM-5	7.1 Reference to discreet diagnosis	<b>(7) Decline of discreet diagnosis:</b>
Validity of Personality Disorders		
Trait-based approach	7.2 Description in move away from current diagnostical structures	
Alternative diagnostical approaches		
Figures of apparent mental illness.	7.3 Reference to prevalence rates in society.	
Reference to increase or decrease mental disorders.		
NPI	8.1 Reference to any NPD measuring instrument	<b>(8) NPD measuring instruments:</b>
FFM		
Other measuring instruments		
Additional large-scale studies	9.1 Description of future research involving NPD	<b>(9) Future direction of NPD research:</b>

Increased cross cultural studies		
Increase niche organizational studies		
Construction of additional testing methods	9.2 Reference and description of narcissistic trait research.	
Refinement of current testing methods		
Increased studies on diagnostical aids.		

### **Methodology of Categorisation and Selection of Themes & Sub-Themes**

In order to accurately tackle the research question ‘What are the expert opinions on the relationship between Narcissistic Personality Disorder (NPD) and mental illness classification?’ It was of great importance that the core themes directly tie to the question. The themes were identified based upon their representation as the most prevalent and relevant topics within the interviews. Taylor & Ussher (2001) advises that the themes are selected based upon patterns, and the relevance to the research question. The decision to address the themes presented in this analysis over other themes is based upon the perceived intensity and relevance of importance to the interviewee (based upon Braun and Clarke (2008); Rubin & Rubin, 2011). A choice selection of quotes are used in the below results with the full list of supporting quotes for each theme found in Appendix C.



## **Theme 1: Symptoms of NPD**

This theme refers to the symptoms of narcissism and NPD. This includes specifically what experts refer to when considering narcissism and considering the difference between acceptable levels of narcissistic behaviour and NPD levels of behaviour.

### **1.1 Description of Narcissistic Behaviour**

Firstly, it was deemed crucial that the experts define what they perceive as narcissistic tendencies. There was unanimous agreement on what the experts considered to be narcissistic tendencies and the type of symptoms we would expect to see in a narcissistic individual. EX9 opinion largely encapsulates all the expert's opinions with this quote *'Highly sensitive to criticism... Grandiosity, lack of empathy, just having little understanding of the emotions of others. Traits like self-entitlement, perceived feeling of uniqueness to an extreme extent, self-disregard for others'*.

### **1.2 Description of symptoms of NPD**

This is similar to the previous sub-theme except the experts discussed what is different between narcissistic tendencies and NPD. The general census seems to be a lack of control over the narcissistic tendencies, resulting in the individual losing control of their life and their relationships. As EX3 states *'A person who has the disorder will have impairment in their social function, will frequently cycle through jobs, loses and changes friends frequently, just has an uncontrollable difficulty in the world'*.

## **Theme 2: Severity of NPD condition**

The second core theme relates the severity of NPD on the individual with NPD and those they affect.

### **2.1 Severity of NPD**

This subtheme identified what elements of NPD they consider to be the most egregious and detrimental. The most reoccurring ideas being: a lack of control over one's behaviours (EX: 1, 3, 5, 9), a personal fracturing into delusion of grandeur (EX: 1, 2, 3, 4, 5, 6, 8, 9) and a grossly unethical lack of compassion (EX:1, 3, 9).

All the experts agreed NPD should be classified as a personality disorder. The key take-away between narcissistic tendencies and NPD is in relation to the debilitation of the condition and inability to control one's actions as summarised by EX5: *'I think traits such as confidence, social dominance and arrogance are not necessarily bad things... I think to the point where they become extreme then it becomes debilitating to the person... I think not having the flexibility in how intensely they display those traits'*.

EX6, however, did not feel that narcissistic tendencies are not entirely bad in nature with even some positive elements. EX6: *'I think the confidence and self-promotion that comes with those characteristics I think are really helpful in the right context; for example, short-term interactions. I think narcissistic individuals do quite well in those because they are interesting to other people, draw a lot of attention to themselves they are charming they are funny they are interesting'*. This notion is supported by several experts, but the

consensus was only to a certain extent where the narcissistic tendencies is not dominating the individual's life, and therefore should not be considered as NPD.

## **2.2 Severity in relation to other disorders**

This theme seems to vary depending on the expert. EX9 for example suggested that NPD is one of the most environmentally impacting personality, since individuals with NPD are often obsessed with achieving power and authority over others. EX9: *'For a narcissist there is joy in exploitation, in the utilisation of this power'*. This is supported by EX10: *'Grandiosity in leaders, military, political, business, can lead one to lead others down the wrong path. If one of these leaders is just trying to instil a sense of grandiosity by misleading their followers, very little good can come from that. I'm talking dictatorial behaviour with little regard for the citizens'*. Since individuals with NPD are more likely to hold positions of power, they would appear to affect more individuals than any other PD averagely would.

## **Theme 3: NPD relationship with mental illness**

This theme directly focuses on the definition, description and validity of mental illness as a construct. In particular the experts were asked to compare the term mental illness with personality disorder. This exploration was necessary in order to analyse the relationship between NPD and mental illness.

### **3.1 Description of mental illness.**

In describing mental illness, all experts were relatively unanimous in their description of the phenomenon. EX2: *'It has to be harmful and unmanageable and stop the function of family and intimate relationships and friends. Also, its self-control, you lose the ability to modulate your own thoughts and emotions'*. EX5 describes mental illness as *'Psychological characteristics that lead to distress impairments and harm to themselves or others'*. A key reoccurring description was a lack of control over ones actions and apparent emotional distress.

### **3.2 Validity of mental illness as a concept.**

This was one of the most debated sub-themes with many experts claiming against the idea of mental illness as a construct (EX:1, 4, 7 & 9). EX:1 *'I don't believe in mental illness, there is no such thing, when something has been called a mental illness, if they discover a biochemical or some neurological deficit, once that's discover, that doesn't prove that's a mental illness, it proves that it's a physical illness'*. EX4 states *'Well you know back in the old days when getting a diagnosis and working with patients was common and they needed a terminology, this term 'mental illness' was fine. I now don't think we need these terms, it isn't reflective of the times'*.

### **3.3 Reference to whether it can be considered the same as a PD.**

Since the experts are divided on the validity of mental illness as a concept, this theme is also polarly split between supporting the link between mental illness and

personality disorder and complete disregard for the concept of mental illness. EX2 for example argued *'I consider a personality disorder to be a mental illness in the same way anxiety and depression is*. This notion is supported by several of the other experts (EX: 2, 3, 6, 7, 8 &10) suggesting mental illness and personality disorders are largely the same concept. Indeed, EX6 defined them as exactly the same phenomenon. *'I regard them as really the same thing'*.

### **3.4 Reference to whether NPD can be considered a form of mental illness.**

When considering if NPD should be a personality disorder, all of the experts agreed unanimously that NPD produce symptoms severe enough to warrant being considered a personality disorder. Some experts seemed satisfied in classifying NPD a mental illness (EX: 3, 5, 6, 8 & 10). EX:10 *'I have no doubt it's a mental illness when its present to fulfil the requirement for NPD, not just general narcissism found in the populace. If you have full blown NPD, you suffer from a mental disorder'*). Other participants argued that since mental illness is not a valid construct, and NPD cannot be considered to be a mental illness (EX: 1, 2, 4, 7, 9). for example, EX9: *'To the extent that I would consider any other mental illness to be a disorder. I think that NPD when correctly diagnosed is for sure a mental illness. However, I wouldn't say someone with narcissistic tendencies is mentally ill'*.

## **Theme 4: Differences in NPD behaviour**

### **4.1 References to differences in behaviour within the NPD condition.**

This sub-theme relates to the difference between individual displaying vulnerable narcissism and an individual with grandiose narcissism. On the differences between the two EX1 states *'So the grandiose narcissism it's all about how great he is. The depressed narcissist is equally obnoxious because it is all about how terrible everything is'*. All experts agree that the current diagnostic criteria for NPD is imperfect with its five out of nine-symptom structure, with the majority of experts (1, 2, 3, 4, 6, 8 & 10) agreeing that a division vulnerable/ grandiose divide exists.

### **4.2 Validity and use of different types of NPD**

Whilst the experts seem unanimous in the belief that the current diagnostic structure of NPD is flawed, there is some controversy on whether NPD should be divided into further diagnostic categories, especially grandiose and vulnerable. For example, EX5: *'I have a tough time understanding vulnerable narcissism as narcissism in most cases. It doesn't look like narcissism to me, particularly it seems more like borderline personality disorder. It's almost entirely comprised of high levels of neuroticism. I think that grandiosity fits better with classic descriptions of narcissism'*. On the other hand, EX2 stated *'Oh, they are super different, grandiose being the proto-typical one, with vulnerable less so. In terms of vulnerable narcissism many of those people aren't even grandiose. I think they are ego central and self-absorbed, but it often comes from a place of victimisation, a defence mechanism and are quite different in my mind'*. There appears to

be a majority support (EX: 1, 2, 3, 4, 8 & 10) for the notion of dividing NPD into more relevant sub-types or at the very least redesigning the diagnostic criteria.

## **Theme 5: Relevance of genetics as NPD contributor**

### **5.1 Relevance of genetic factors to NPD**

All experts agree that genetics play a large role in the manifestation of NPD factors. Indeed, parents who display narcissistic attributes are more likely to raise narcissistic children. On the matter EX9 stated there was a *‘High likelihood of children becoming narcissistic if their parents were, even if the children had been separated from the parents at birth’*. The main methodology used to test the relevance of genetics as a cause of PD’s is the involvement of twin studies. As EX8 discuss *‘Even when you conduct twin studies and separate them, they tend to grow up with some innate traits from their parents, including narcissistic attributes’*.

### **5.2 Level of impact of genetics on NPD**

All the experts agreed that there are not nearly enough conclusive studies to determine the exact balance between narcissistic traits being caused by biological origins or by environmental origins. Most experts agreed (EX: 2, 6, 9 & 10) that it is approximately 50/50 split between genetic factors and environmental factors as the cause of NPD. On the matter EX5 stated *‘I think they reflect the same genetic influence as the traits that contributed to them 45 to 60% from genetic variance’*.

## **Theme 6: Relevance of environment**

This theme focuses on the relevance of environmental factors as a contributor to NPD highlighting the three most apparent environmental contributors to NPD.

### **6.1 Impact of Social media**

Social media is perhaps the most impactful change in recent years to individualism and by extension narcissism. In terms of its relationship with NPD EX4 states *'There has been quite a few studies that look for narcissism in Facebook and it seems that these kinds of social media, is encouraging this individualism, and reduce tendencies toward optimal frustration which may promote narcissism'*. The experts are in unanimous agreement that social media has been a contributor to recent heightened narcissistic tendencies.

### **6.2 Reference to parenting styles**

Perhaps the most common cause of narcissistic tendencies is the influence of parents or parental figures. This is heavily supported by several experts (EX:1, 2, 3, 8, 9 &10) who claim that overly abuse parenting and narcissistic parents are one of the strongest determinates of abusive and narcissistic tendencies in their offspring. EX1 argues the mother-infant relationship may be more impactful than the father-infant relationship *'I'm far more likely to think in the case of a severe narcissist, something seriously went wrong in the mother infant relationship. I'm more likely to think that than I am biological'*.



However, there is an issue on to what degree parenting factors into NPD as EX2 explains *'even showing a correlation between narcissistic parenting style and a child's narcissistic personality does not say that a nurture issue or a genetic issue, because the two still have not been separated'*.

### **6.3 Childhood Abuse**

All experts support the notion that both sexual abuse and verbal abuse can cause narcissistic tendencies to develop with the more severe the abuse the more likely the individual is to pick up narcissistic tendencies. EX9: *'The degree to which that child experienced abuse from bullies, or abuse from adults, whether sexual, physical or verbal, can all be effective at unleashing narcissistic tendencies later in life'*.

### **Theme 7: Decline of discreet diagnosis**

This theme refers to the decline of current diagnostic structures and the move to new options available for NPD diagnosis.

#### **7.1 Reference to discreet diagnosis**

As previously mentioned, most experts disagree (EX1, 2, 3, 4, 5, 7 & 9) with the current diagnostic methodology within the DSM-5 of individuals needing any five of nine symptoms to be diagnosed with NPD. EX2 points out the notion of the five of nine symptoms seems arbitrary in nature. EX2: *'If you made the cut off instead of five symptoms,*

*three or four then absolutely the rate would be higher... I quibble over that if you have five of nine you have it and four of nine you don't*. As a result, most of the experts (EX:1, 2, 3, 4, 5, 6, 7, 8 & 9) agree that there is a need to change the current diagnostic model of the DSM .

## **7.2 Alternative diagnostic structures**

The option presented by most experts (EX:1, 2, 3, 4, 5, 6, 7, 8 & 9) involved changing the discrete diagnostic methodology of the DSM to one of a sliding scale. EX2 suggested the following *‘Moving away from strict, yes or no categorisation of conditions and onto a more trait and percentage-based model’*. The most commonly supported trait based diagnostic structure is the Miller FFM model, with EX5 stating *‘I prefer the FFM model. It gives you grandiose and vulnerable score based out of three factors neuroticism interpersonal antagonism, Extraversion’*. The FFM model seems to have a lot of support with EX: 2, 3, 5, 7 & 9 showing support for its implementation over the current DSM-5 diagnostic model.

However, there is a counter argument presented by experts 3 and 8 on why the FFM model should not be implemented, at least immediately, due to insurance categorisations. EX3 stated *‘When you are doing a clinical diagnosis you are looking for symptoms. Then for insurance purposes we would match them up with the DSM when needed, other models do not take this into consideration’*.

## **Theme 8: NPD measuring instruments**

This theme discusses the use of NPD instruments by the participants and their perceived validity.

### **8.1 Reference to any NPD measuring instrument**

Most participants had used either the Narcissistic Personality Inventory (NPI) (EX 2, 3, 5, 6, 7 & 10) or the Five Factor Model (FFM) (EX: 2, 3, 5, 7 & 9) or both. It is relatively supported (EX: 3, 6 & 10), however experts like EX 5 and 7 claim it is at least somewhat invalid and even '*a huge distraction*'. The FFM model looks to analyse narcissistic attributes by way of five factor analysis. On the matter of utilising the two scales EX5 states '*We've used the NPI and bunch of others, I prefer the FFM model. It gives you grandiose and vulnerable score based out of three factors neuroticism, interpersonal antagonism and extraversion*'. There was mention of other models, but they were only briefly discussed by a few experts so no valid data could be drawn.

## **Theme 9: Future direction of NPD research**

### **9.1 Reference and description to future research involving NPD**

Most experts agreed that the main direction for research should be more studies, based in multiple backgrounds and multiple cultures since the psychological community was still in the discovery and definition phase of mental disorders (EX:2, 3, 5, 6, 7, 9 & 10). EX7 argued for '*further research into the theoretical complexity of the narcissistic condition, how it interacts with other moods, other emotions. I think when you look at these*

*kinds of ideas from such a clinical perspective you are failing to take into consideration just life in general. Trying to categorise what, it doesn't even make sense to think of people as a series of traits. People aren't two-dimensional movie characters'.*

All experts argued for an increase in sample sizes studies, claiming that most studies are small in size and focused more on university students than general populace. In addition, developing research that focuses on more cross-cultural studies and looks to analyse people from all backgrounds in comparison. EX2 suggested the following *'to see more large-scale research undertaken in societies, especially in corporate and prison environments, where narcissistic people can be found. Clinical studies are just one person and you are capturing them in one instance and may not be accurately reflective of general populace'.*

## **Chapter 5: Findings and Discussion**

To reiterate, the aim of this research was to explore the opinions of NPD experts with regard to NPD and its relationship with mental illness, with the following nine main themes being extracted:

- (1) Symptoms of NPD;
- (2) Severity of NPD condition;
- (3) NPD relationship with mental illness;
- (4) Differences in NPD behaviour;
- (5) Relevance of genetics as NPD contributor;
- (6) Relevance of Environment as NPD Contributor;
- (7) Decline of discreet diagnosis;
- (8) NPD measuring instruments.
- (9) Future Direction of NPD research;

There was little controversy with regards to how NPD manifests, with nearly all experts agreeing with the symptom outline listed in the DSM-5 (APA, 2013). However, there are some clear discrepancies between the experts on certain issues. For example, the general participant consensus is that narcissists struggle to emphasise with others showing little understanding of the emotions of others. This notion is supported by the DSM-5

criteria, which suggests that narcissists are unable to empathise with others. By contrast EX1 suggests that narcissists are able to empathise with others, using this understanding of others to manipulate them. There is support for this notion of empathetic tendencies in narcissistic individual's interpretation of empathy where the researchers describe the empathy of narcissists as maligned but present (Baskin-Sommers, Kruse mark & Ronningstam, 2014; Hepper, Hart & Sedikides, 2014) and in some cases even developed for personal gain (Munro, Bore & Powis, 2005; Watson, et al., 1992A).

### **Severity of NPD condition**

The most reoccurring statements on the most severe elements of NPD were: a lack of control over ones behaviours (EX: 1, 3, 5 & 9), a personal fracturing into delusion of grandeur (EX: 1, 2, 3, 4, 5, 6, 8 & 9) and a grossly unethical lack of compassion (EX:1, 3 & 9). There is some discrepancy on the severity of narcissism and NPD. Firstly, the literature suggests that a few elements of narcissistic behaviour can be considered positive in nature, in particular arrogance (Hartman, 1998; Johnson, et al., 2010) confidence (DeAngelo, DeAngelo & Zimmerman, 2005) and ruthlessness (Boddy, 2017; Ma Rhea, 2009).

As several of the experts discussed, individuals with narcissistic tendencies tend to be more likely to reach higher management positions (Aktas, et al., 2016; Boddy, 2017; Cragun, 2018). Interestingly an example that all ten experts pointed to is President Donald Trump, suggesting that his narcissistic tendencies are one of the reasons that he is so

popular with the general public. There is support for this notion in the surrounding literature (Ahmadian, Azarshahi & Paulhus, 2017; Hall, Goldstein & Ingram, 2016). Indeed Ahmadian, Azarshahi and Paulhus (2017) suggested that Trump's narcissism was one of the defining abilities that helped him win the election. As a result, individuals displaying narcissistic tendencies often tend to believe that they have no personality disorder (Dimaggio & Attinà, 2012; Pinsky, Young & Stern, 2009). Individuals with NPD seldom come to psychologists for therapy, instead believing that they are progressing through life with the correct approach (Germain, 2018; Ronningstam, 2012).

However, all ten experts pointed out that NPD is characterised by having narcissistic tendencies so severe that they impact the individual's ability to progress through life. This notion is supported by several researchers arguing that individuals with NPD become so narcissistic that they eventually isolate themselves from all those around them (Diamond, Yeomans & Levy, 2011; Maccoby, 2012) and ultimately ruin their career (Cavaiola & Lavender, 2011; Fahy, 2017) and relationships (Cavaiola & Lavender, 2011; Määttä, Uusiautti & Määttä, 2012).

### **NPD relationship with mental illness**

The analysis suggests there is a multitude of ideologies on what constitutes a mental illness and even whether the terminology should even be used by the scientific community. The main issue seemed to be with the terminology of mental illness with some experts suggesting that either it does not exist or it is an out of date construct that is no longer

relevant. We can see support for this notion in Tyrer, Reed and Crawford, (2015) work where the researchers argued that there is no such thing as mental illness only levels of undesirable traits and discreet personality disorder.

Other experts (EX: 3, 9 & 10) suggest that nothing is wrong with the terminology and that it maintain relevance. Indeed, EX6 argues that mental illness and personality disorders are an interchangeable term and still perfectly viable (a notion supported by Galderisi, et al., 2015; Kendell, 2002; Vigo, Thornicroft & Atun, 2016. When considering if NPD should be a personality disorder, all of the experts agreed unanimously that NPD produces symptoms severe enough to warrant being considered a personality disorder.

Furthermore, some participants (EX: 3 & 8) suggested that terminology such as NPD and mental illness are necessary for insurance purposes. The reason being that when conducting a clinical diagnosis, you are looking for symptoms that are then matched up against the DSM-5 providing a discreet diagnosis. Being able to describe an individual as either mentally ill or not mentally ill makes diagnosing patients much simpler and thus makes insurance claims much easier (Ben-Zeev, Young & Corrigan, 2010; Rose & Thornicroft, 2010). However, as Chambers & Stanley (2017) points out, the insurance criteria could still be accurately reworked and addressed without the need for strict discreet terminologies. Removing such rigidity would allow for further categorisation resulting in a more accurate diagnosis and thus better allocation of the insurance companies resources.



Overall while all experts agree that NPD should be considered a personality disorder there is a general dislike of the terminology by both the experts and literature due to datedness (Schomerus, et al., 2012) and misinformation (Henderson & Thornicroft, 2009).

### **Differences in Displayed NPD Behaviour**

The most controversial topic discussed was the potential distinction between a grandiose and a vulnerable narcissism. The experts can be divided into three groups. The first group (EX:5, 8 &9) suggested that the DSM accurately captures narcissistic disorder and there is no need to split NPD into further subcategories, Many researchers support the DSM-5 suggesting a high accuracy rate of diagnosis (Fossati, et al., 2013; Regier, Kuhl & Kupfer, 2013; Stinchfield, et al., 2016 and little improvement is necessary (Coccaro, Nayyer, & McCloskey, 2012). Indeed, Paris and Phillips (2013) argued that by changing the tool to a more complex diagnostical structure, you risk difficulty in future diagnosis by including excessive and unnecessary subjectivity.

The second group (EX: 1, 2, 3, 4 & 10) argued that there is a very apparent division between grandiose and vulnerable narcissism, to the extent that a separation should occur in the diagnosis. EX: 2, 5 and 6 argued that whilst the DSM criteria traits align with mainly that of a grandiose narcissist, a couple of the traits are more positioned towards the diagnosis of a vulnerable narcissist. Support for this idea can be seen in Miller, et al., (2010) and Pincus and Lukowitsky (2010) where the researchers suggest that vulnerable

symptoms display a closer connection to borderline than they do to narcissism, especially if elements of grandiosity are missing.

The third group (EX 5, 6 & 7) suggested there should be neither a division in the diagnosis of NPD nor is the current DSM-5 model interpretation correct. These participants argued for the removal of discreet diagnoses and labels in favour of a presentation of present traits and the degree to which these traits manifest in comparison to others, thus removing the need to have personality disorders. However, there are some issues with this approach, for example, by just presenting someone with a series of trait ratings is likely to somewhat confuse the patient and potentially exclude them from associating with other sufferers of the same or similar condition (Hopwood et al., 2012; Sareen et al., 2015). It may also be the case, especially with NPD sufferers that they do not take their diagnosis as seriously because there is no obvious disorder being diagnosed only a series of presented traits (Krueger & Markon, 2014; Sareen et al., 2015).

### **Relevance of genetics as NPD contributor**

The experts are in unanimous agreement that genetics play a significant factor in the developing of narcissistic characteristics. This aligns with the literature suggesting that certain individuals are more likely to be impulsive (Feilhauer & Cima, 2013; Luo, et al., 2014) aggressive (Feilhauer & Cima, 2013; Kernberg, 2008; Vernon, et al., 2008) arrogant (Cai, et al., 2015; Luo, et al., 2014) and stunted sympathy and empathetic tendencies (Campbell, et al., 2009; Thomaes, et al., 2013) As a result of having parents or grandparents

with similar traits, even if they are raised separated from the narcissistic individuals (Dahl, 1993; Feilhauer & Cima, 2013; Kieling, et al., 2011).

The suggested degree often by the participants in which genetics influences personality ranges from the 50% to 60% mark. This notion is supported by the literature where Cairncross, et al., (2013) and Holtzman & Donnellan (2015) argued that genetics make up a 50% role and Luo, et al., (2014) argues that genetics present a greater than 50% personality contributor. No participant suggested that genetics was less than 50% impactful on a personality. Thomaes, et al., (2009) argued that environmental factors are more contributory than genetics, but this viewpoint would appear to be in the minority within the literature.

### **Relevance of Environment as NPD Contributor**

All experts were in uniramous agreement that environmental factors are significantly impactful on narcissistic characteristics. The three most presented environmental factors suggested by the participants were: parenting styles; physical or sexual abuse and social media. Some researchers argue that parenting styles are the most likely cause of narcissistic tendencies (Cramer, 2011; Horton, Bleau & Drwecki, 2006; Watson, Little & Biderman, 1992). with some of the given reasons being that children develop much of their character and traits from mimicry (Cramer, 2011; Horton, Bleau & Drwecki, 2006) and are likely to spend the most amount of contact, especially in early childhood with their parents (Cramer, 2011; Horton, Bleau & Drwecki, 2006). Narcissistic

parents are therefore more likely to impart narcissistic tendencies thus increasing the probability of raising narcissistic individuals (Ehrenberg, Hunter & Elterman, 1996; Horton, Bleau & Drwecki, 2006).

Sexual and physical abuse was also a significant factor highlighted by the experts (EX: 3 & 9). This is supported by the literature (Gerzi, 2005; Miller, et al., 2011; Pincus & Lukowitsky, 2010; Ronningstam, 2011B). In addition, such children are likely to be shamed frequently and develop shame related traits such as low self-esteem (Keene, & Epps, 2016; Ritter, et al., 2014), violent tendencies (Ritter, et al., 2014; Thomaes, et al., 2008) abusive behaviour (Ritter, et al., 2014; Thomaes, et al., 2008) and an inability to heed the advice or orders of other individuals (Nevicka, et al., 2011; Thomaes, et al., 2008).

Finally, several experts suggest (EX: 3, 4, 6, 8 & 10) that social media has caused a rise in narcissistic tendencies. This is also supported by the literature, linking excessive social media usage to poor self-esteem (Floros & Siomos, 2014; Mehdizadeh, 2010; Vogel, et al., 2014), feelings of inadequacy (Floros & Siomos, 2014; Mehdizadeh, 2010; Vogel, et al., 2014), self-absorption (Andreassen, Pallesen & Griffiths, 2017; Reed, et al., 2018) and grandiosity (Andreassen, Pallesen & Griffiths, 2017; Reed, et al., 2018). Indeed, a study by Reed, et al., (2018) demonstrated that participants who were requested to spend more time on social media over a 4-month period scored higher on the NPI after a four-month period in a manner suggesting a 25% increase in narcissistic characteristics.

### **Decline of discreet diagnosis**

The DSM-5 (APA, 2013) currently proposes that a patient presenting five of nine listed symptoms should be classified as having NPD. Some of the participants suggested that the criteria of five of nine is arbitrary and that there is a need for a change in the classification procedure. Support for the removal of the DSM five of nine rules can be seen throughout the literature as individuals can falsely misdiagnosed (Cooper, Balsis & Oltmanns, 2012; Glover, et al., 2012). or treated with an inappropriate therapeutic approach (Fossati, et al., 2005; Glover, et al., 2012). The main argument being that that individual symptoms are both subjective in diagnosis by the clinician (Fossati, et al., 2005; Miller & Campbell, 2008). and subjective in the sufferer's interpretation (Fossati, et al., 2005; Miller & Campbell, 2008).

A resolution proposed by EX 2, 6 & 10 suggests that an introduction of rigid taxonym of traits and a percentage based diagnostical interpretation for clinicians with easy to interpret criteria. The experts suggest that combining discreet diagnosis alongside a trait-based system, utilising a rigid taxonomy would improve diagnostic rates around the world. This concept of a trait based rigid taxonomy has been picking up substantial traction in recent years (Esbec & Echeburúa 2015; Schmeck, et al., 2013; Tyrer, 2012) as introducing a trait system stands to reduce misdiagnoses (Esbec & Echeburúa, 2015; Tyrer, 2012) by removing human subjectivity and error from the diagnostical process (Esbec & Echeburúa, 2015; Tyrer, 2012).

Experts like EX:1, 4 and 7 on the other hand argues that the clinicians should be wise enough to make interpretations of the patient's condition and allocate therapy as needed, with therapists utilising the DSM-5 as a vague guideline that does not necessarily need to be followed exactly. This is supported in Groth-Marnat (2009) book where the author argues that it is the responsibility of the clinician to accurately diagnose their patient. The idea of needing a strict taxonomy means that the onus is taken off the therapist to accurately provide the client with completely relevant treatment (Groth-Marnat, 2009; Morrison, 2017). The key argument put forward is that categories are arbitrary and can be altered at any time. Some Researchers suggest that placement of a new taxonomy without further validity is equally as likely to compile an inaccurate diagnosis as the current methodology displayed in the DSM-5 (Esbec & Echeburúa, 2015; Gore & Widiger, 2016; Skodol, Bender & Morey, 2014). Indeed, Esbec and Echeburúa, (2015) argue that there is no reason why this new criterion would not be equally as arbitrary as the DSM-5.

Overall most of the experts (EX: 2, 3, 5, 7, 9,10) suggested that further research is needed before implementing a completely new system of diagnosis. In the event of a change, most of the experts were in agreement (EX: 2, 3, 7, 8, 9) that the change should be the implementation of a trait-based system.

### **Validity of NPD measuring instruments**

The most commonly used instrument by the participants to measure narcissistic tendencies was the NPI (EX: 2, 3, 5, 6, 7, 10). The NPI being the most commonly used tool

supported by the psychological community (Corry, et al., 2008; Maxwell, et al., 2011; Vater, et al., 2013). The key reasons being that the NPI has huge amounts of data now supporting its validity given that it is one of the oldest inventories available related to narcissism (Corry, et al., 2008; Vater, et al., 2013B) as well as being a well-tested inventory for researchers to choose from (Corry, et al., 2008; Vater, et al., 2013B).

However several of the experts suggest that there is room for improvement with the NPI, with some of the key highlighted issues being: not taking into account multiple types of narcissism (EX:3, 6 & 7); not taking into account the individuals personality in relations to their narcissistic attributes (EX:3, 6 & 7), and poor correlation between the three measuring factors presented in the NPI (EX:6 & 7). As a result, the inventory gives skewed responses that do not accurately align fully with the measured personality. We can see support for this in the literature with other researchers suggesting that the three measuring factors within the NPI do collaborate effectively to one functioning measurement of narcissism (Ackerman, et al., 2011; Maxwell, et al., 2011; Miller & Campbell, 2008). Indeed, the NPI gives a total score that is simply an aggregate response to all items (Maxwell, et al., 2011; Miller & Campbell, 2008) and as a result can biasedly conflated dimensions of the individuals personality (Maxwell, et al., 2011; Miller & Campbell, 2008). The other model that was frequently mentioned by the experts (EX: 2.3.6), was the FFM model proposed by Miller & Campbell (2008).

It should be noted, many of the experts had not used any inventories for measuring NPD, as it was never relevant for their field of work (EX: 1, 4, 8, 9). In this manner there is potential for further research that delves into the validity of narcissism measuring models and the validity of said models, using only participants who had utilised several models in a research setting.

### **Future Direction of NPD research and expanded research**

As mentioned most experts agreed that more studies, based in multiple backgrounds would be useful for NPD research. EX7 for example argues that a definitive definition of narcissism is required to make further progress (a notion supported by Ogrodniczuk, 2013). All experts argued for an increase in sample sizes. In addition, there was support for developing research that focuses on more cross-cultural studies and looks to analyse people from all backgrounds in comparison. EX2 suggests more studies that focus on prison environments and corporate environments (supported by Hepper, et al., 2014; Petrenko, et al., 2016; Zhu & Chen, 2015). This would be a meta-analysis of traits within a tribal context.

### **Limitations of Study**

One key limitation in this research is with some of the terminology used in the interview questions. This is especially apparent with the key phrase ‘mental illness’. The problem appears to lie with the finality and discreteness of the term, suggesting that one



either is or is not mentally ill, as opposed to the trait-based spectrum. It does not seem necessary to further explore this terminology in any further research.

Another limitation of the study was that the focus of the discussion varied significantly between experts and as a result some participants spent a great deal of time on a single question that others may have only briefly touched upon. This led to a bias within the data with regards the content of certain questions and thus created a bias within certain themes.

Finally, utilising only mono coding each theme removed the ability to cross categories thoroughly. Something to consider in a further study, would be for more emphasis to be placed on cross-referencing the categories and analysing the relationship between the categories. However, for this to be completed thoroughly there would be a need for significantly more data, analysis and more in-depth interviews.

### **Suggestions for Future Research**

- Focus more specifically on models of NPD by only interviewing experts who have dealings with multiple models, tools and methodologies.
- Use NPD experts as interviewers. Having two experts discussing the subject matter would have almost certainly provided more in-depth content.

- Repeat the study with more participants, thus increasing the validity of the results.
- Alter the questions so they focus on specific niche aspects of NPD, with the aim of really drawing out the expert's knowledge and opinions on smaller, overlooked elements of NPD. This could also mean the addition of more niche questions.

## Chapter 6: Conclusion

In summary there are several points that can be taken from the data:

- There has been a significant shift from the discreet diagnosis of NPD to a trait-based approach, with researchers arguing for the removal of discreet terminology in favour of position on a spectrum. This means a general move away from the discreet disorders listed in the DSM-5 and ICD-10 in favour of a spectrum and percentage approach focusing on the degree of severity.
- There has been a shift in the NPD research community to focus on a more developed measurement instrument. Whilst there is some support for the current version of the NPI, many of the experts agree that a trait-based inclusion is necessary for diagnostical progression.
- Even though there is some consensus between the experts, there is still a great deal of division on the nature of narcissism, the cause of narcissism and whether it should be split into sub-categories.
- An apparent need to move away from the terminology 'mental illness' in favour of a more unique descriptive diagnoses for individuals under the provision of a move from the current insurance structure.

In terms of the usefulness of this study, the study provides information about the need for a change in diagnosis of NPD which includes the methods used in diagnosis and the labels given the patient. In particular a focus on a trait-based approach. In this manner,

we could see an individual once being diagnosed with just NPD, instead for example being diagnosed as displaying acute vulnerable narcissistic tendencies alongside a breakdown of their respective scores within the FFM model. This research has made it apparent however, there is still a great deal of debate within the community over diagnostical categorisation and diagnostical methods that will continue to be present for the foreseeable future.

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# Appendix A: Interview Questions

## Overview

The research question is ‘What are the experts views on NPD (Narcissistic Personality Disorder) as a form of mental illness?’

This means that primarily the questions are focused on NPD and how it interacts with the concept of a mental illness. According to (Stinson et al., 2008) there is no real difference between a personality disorder and a mental illness, however for the purposes of this study it is important that the experts discuss their standings on mental illness and personality disorder. The questions have been split into three categories (initial, core and summary) to accurately address the research question.

## Interview Questions

**Initial and opening questions:** The purpose of these opening questions is to gauge the general views of the expert regarding NPD to see how they align with others.

1. What do you consider to be the key traits and characteristics of a person displaying narcissistic personality disorder?
2. What would you consider the difference to be between a person displaying narcissistic tendencies and a person with NPD?
3. To what extent would you consider NPD to be prevalent in the general populace?
4. In your opinion what is the role of genetics as a contributor to NPD?

5. How influential would you consider society and the environment to be as contributors to NPD?
6. What aspects of NPD could be considered as providing positive personal characteristics?
7. To what extent would you consider the DSM-5 interpretation of NPD to accurate?
8. How accurately do you believe the scientific community understands NPD?
9. Which methodology of measuring narcissistic attributes do you consider to be the most valid and why?
10. Symptoms of NPD have been described as varying in appearance and recognition. Do you agree with this sentiment and why?
11. Which gender would you say is more like to suffer from NPD and why?
12. To what extent do you believe age affects the severity of the NPD condition?
13. In what aspects does substance abuse affect the severity of the NPD condition?
14. What are some of the key issues facing the full understanding of NPD?
15. In Stinson et al., 2008. The researchers argue that NPD is the least empirically researched of all personality disorders, to what extent do you agree with this sentiment and is there areas that require further research in your opinion?

**Core questions:** The purpose of these questions is to discuss the core focus of the research question.

1. What criteria would you use to classify someone as having a mental illness?
2. To what extent would you consider a personality disorder to be a mental illness?
3. To what extent do you consider NPD to be a mental illness?

**Evaluation questions:** The purpose of these questions is to discuss outlier arguments in the discussion before finally summarising the interview and content.

1. What aspects of NPD could be viewed as dangerous to society?
2. In your opinion, in what ways can those with both NPD and a position of power impact society?
3. What are your opinions on NPD being classified as a Personality Disorder in the DSM-5 but not in the ICD-10?

In order to keep the conversation relevant and flowing I will be asking some filler questioning in-between the listed question. The interview will be conducted online via Skype or some other online medium of the experts choosing and will last roughly 45 minutes to an hour.

Please contact me if you have any questions and thank you for taking the time to read this.



## Appendix B: Transcriptions and Thematic Notes

### Identified Themes

This table represent the themes which were identified and analysed:

CORE	<b>Symptoms of NPD:</b> Descriptions of NPD and of narcissistic tendencies. Any reference to behaviour.
	<b>Severity of NPD conditions:</b> Reference to high-level narcissistic behaviour, consideration on whether it should be considered a mental illness
	<b>NPD relationship with mental illness:</b> Any reference to criteria, severity, validity and whether it should count as a Personality Disorder
TANGENTIAL	<b>Differences in NPD behaviour:</b> Division in the behaviour displayed in NPD sufferers. Predominate focus on the grandiose and vulnerable divide.
	<b>The relevance of genetics as NPD contributor:</b> Reference to discussion between nature versus nurture and influence of genetic contributors.
	<b>Relevance of environment as NPD contributor:</b> Example are impact of Social Media, cultural trends, parenting styles
	<b>Decline of discreet diagnosis:</b> Reference to movement away from past diagnostic structures. Reference to current prevalence rates in society.
	<b>NPD measuring instruments:</b> Any reference made to utilisation and validity of NPD instruments.
	<b>Future direction of NPD research:</b> Reference to potential future directions of NPD and narcissistic trait research.

**Interview with Expert 1**

INTERVIEW 1	THEMATIC NOTES
<p>Q1: What do you consider to be the key traits and characteristics of a person displaying narcissistic personality disorder?</p> <p><b>RM – Asks Q1</b>  <b>EX1</b> - Self-involvement, egocentricity, a difficulty getting beyond encapsulation in the self, getting across the divide in the other, so as seeing them as fully real as they are. All narcissists have issues with empathy, although they can emphasise, using it as a tool to extract useful information from others. What they really have trouble with sympathy and compassion. I think of empathy as cognizant and sympathy as caring. Psychopaths are often cognizant of the feelings of others, but they don't give a damn. So, I think of psychopathy and severe narcissism, especially malignant narcissism at the severe end of the spectrum really embodies this. But all narcissists have issues with empathy and have trouble with sympathy. I think of empathy as cognizant and sympathy as caring.  <b>RM – The difference being compassion.</b>  <b>EX1</b> – I think so, narcissists have real difficulty feeling sympathy and caring for the views of other people, especially the feelings of other people.  <b>RM – Okay good.</b></p>	<p>The expert describes some displayed symptoms but does not highlight a great deal of difference in the symptoms of narcissism and NPD</p>
<p>Q2: What would you consider the difference to be between a person displaying narcissistic tendencies and a person with NPD?            2:05 – 4:54</p> <p><b>RM: – Asks Q2.</b>  <b>EX1:</b> I don't really think of it as a line, I think of it as a continuum. I think of it as a continuum of narcissistic traits. I think of it like, I mean Judaeo-Christian religion sees the fundamental sin of pride, which is narcissism. So, we are all narcissists  <b>RM: – On a scale I suppose?</b>  <b>EX1-</b> Yes, On a scale from mild to moderate, to severe.</p>	<p>There is some overlap between narcissism as a continuum and narcissistic tendencies appearing in all the general populace.</p> <p>Expert marks a difference between grandiose and vulnerable narcissists.</p>

<p><b>RM:</b> – <i>So there point, or there is no straw you consider to be the one that breaks the back. A point that we say, no no this is too much.</i></p> <p><b>EX1:</b> – Ahhh I don't really think that we can. I don't really think we can ethically perspective. I mean it's almost based upon different ethically judgements. I mean what you are really asking is how much selfishness is too much selfishness.</p> <p><b>RM:</b> – <i>Errr yeah, I mean maybe, it depends if you define narcissism and selfishness as the same thing. Perhaps more like asking, as what point is loving yourself too much, too much?</i></p> <p><b>EX1:</b> – well thing I don't believe narcissists do love themselves.</p> <p><b>RM:</b> – <i>Yeah of course, my mistake.</i></p> <p><b>EX1:</b> – I don't believe narcissism is about loving yourself too much, it's also about hating yourself too much. There are two kinds of narcissists: neurotic grandiose narcissists and depressed narcissists. The reason we can't stand depressed people, is because they are so self-involved. It's all about how bad things are. It's all about how great, how terrible, how ugly, how useless they are and blah blah blah. It's all about them, they can't get their minds off themselves.</p> <p><b>RM:</b> – <i>Hmm yeah.</i></p> <p><b>EM1:</b> – <i>So the grandiose narcissism it's all about how great he is. The depressed narcissist is equally obnoxious because it is all about how terrible everything is.</i></p>	
<p><b>Q3:</b> To what extent would you consider NPD to be prevalent in the general populace? 4.54 – 9:03</p>	
<p><b>RM:</b> – <i>Asks Q3</i></p> <p><b>EX1:</b> – I think it's errr again, Judaeo-Christian religion sees the sin of pride which as narcissism, so to be human is to be narcissistic. I mean this is the fundamental moral problem that humans face, of course this is also Lacan's theory, the first self is the encounter in the mirror and we become obsessed with ourselves in it and the worship of the self-image is a form of ideology. To be human is to be ideologist in this way, and some people are more obsessed with themselves than others. <i>But to be</i></p>	<p>There is some crossover between the occurrence of narcissism in the general populace and the severity required for narcissism to be outstanding as NPD. The expert argues for a sliding continuum with even NPD sufferers showing moments of clarity. As the expert suggests a Kleinian cycling between the</p>

human is to struggle for your whole life with selfishness versus concern for the other. I mean this also pure Freud. In 1914 Freud is talking about the attempt to switch from narcissism to object love, which no one makes perfectly but our capacity to love others is hampered by our narcissism. Some people are so hampered they just can't love at all.

**RM:** *So, in this respect every person is a narcissist they just are better at reigning it in and don't need people to err give them validation.*

**EX1:** As much. I mean everyone needs narcissistic gratification, everyone needs mirroring, validating, applause appreciation. But some people are desperate for it. So as a relatively more mature person would be sad, and he comes home and he wants narcissistic gratification from his partner and he tells her about his bad day, and basically he wants soothing and bucking up. But after 15 minutes of this attention he realises she is a human too and gets up. He will ask 'oh how was your day'.

**RM:** *Yeah.*

**EX1:** Now some people never get up, they spend their whole lives as using other people as mirrors.

**RM:** *I suppose that is the difference then, whether or not you are available divorce yourself from that mindset. Would you say someone with NPD spends 90% of their time blinkered and the rest being self-reflective, or is it never.*

**EX1:** Hmm I'm having some trouble with your language of 'never'. See in Kleinian theory no one occupies the depressive position all the time, we are always cycling all the time. See in PS (Pysco-schizoid position) we are narcissistic, in D (depressive) we have compassion for others, but we are never are fully in one position. Now some people spend 90% of their lives in the schizoid position and another 90% spend their lives in the depressive position, but we are cycle.

**RM:** *Even people who are very much deluded.*

**EX1:** I think so, most psychologists will tell you, even in deep psychosis there are moments of clarity.

two-different positions (PS – D).

**Q4:** In your opinion what is the role of genetics as a contributor to NPD?

& Q5: How influential would you consider society and the environment to be as contributors to NPD?

9:04 – 17:29

**RM:** *Asks Q4*

**EX1:** \*pauses, I can't claim any knowledge in this, what I will say, I remain agnostic. I remain sceptical in determination. I recognise that babies come into the world, from day one with different temperaments, so I would never deny that. Clearly, we have brains as well as minds so clearly there is something there to begin with not just the environment. To me it's in a black cloth, I don't know how to estimate it. I don't think about it very much because the whole of the psychotic approach is based around environmental factors, the quality of the maternal holding. I'm far more likely to think in the case of a severe narcissist, sometime seriously went wrong in the mother infant relationship. I'm more likely to think that than I am biological.

**RM:** *hmmm*

**EX1:** But on the other hand, I won't deny that may be involved I just have no way of estimating them.

**RM:** *The probable is you can't just say that It all comes out in a wash. From my understanding it's like you are trying to put together a puzzle that you only have half the pieces for.*

**EX1:** Hmm

**RM:** *If you were going to estimate on the sliding scale of nature versus nurture, hat percentages roughly would you attribute to each.*

**EX1:** My thinking is it is more towards nurture than it is nature, err yeah, we are very much shaped by experience and shaped by others. A baby come into the world with a temperament for sure, but boy the reaction on the people in that in environment to that infant I feel is a heavy, heavy influence.

**RM:** *Would you say that a child can be taken from any background and become a narcissist under the right circumstances,*

**EX1:** Yeah, I think so, all that needs to happen is the for the child to be wounded substantially enough, binging on it or by depriving it of some fundamental nurturing. Say a mother who is herself never narcissistic and she can't really see the infant as

With regards to genetics, the expert's response suggests that it is difficult to accurately predict how influential genetics are as a contributor to NPD. In the expert's mind, it does seem to be a solvable question, so the focus has instead been shifted towards environmental factors, especially the role other people have as a contributor towards high narcissistic attributes in people.

The expert goes on to suggest that narcissistic parental behaviour is a significant contributor towards the increased likelihood of narcissistic tendencies. In addition, factors like childhood bullying and sexual abuse are suggested to be significant contributors.

The expert highlights that a good prevention to narcissistic tendencies, is the presence of the love of the parents.

nothing but an extension of herself. Parents who are incapable of love and self-sacrifice. I mean that's what is required for good parenting, sacrifice your self-interest and putting the child first. In my opinion narcissists are people who have been really hurt.

**RM:** *Is narcissism a parentally influenced phenomenon or could say the abuse of peers and other influences like teacher abuse or from family members.*

**EX1:** Yeah, I think it can be from other kids and bullying the meanest, the cruelty of other kids, especially if they identify something odd or unusual about the person they tease him or her, the ostracize that person. Even with really good parenting that can be very damaging. Although my bias to kids who have a really loving mother and father and a really great environment, even if that kid encounters severe bullying later in childhood or adolescence, although the child will be hurt, if the kid has really good loving, he is going to have a core, that's going to be pretty strong and endure the later cruelty better than someone who has been deprived.

**RM:** *So they have more of a backbone or self because of this loving nurture, they have this foundation of love to be supported by.*

**EX:** Yeah exactly a person who has been raised with love knows what it is and they have received it, he knows that it exists in the world and if he is not getting it he will not be ingeniously be able to find it. He will find the one teacher or coach or friend who can prove them a semblance of this love. They will find it in god or in their imagination, some semblance of this love.

**RM:** *So that allows them to build up some form of mental refuge?*

**EX1:** Yeah one of my student in my seminar was talking about this errr Castaway and Wilson.

**RM:** *How the character of Wilson was a method of Tom Hanks character mirroring in order to get that necessary affection.*

**EX1:** Not just that but also by transferring his love and character onto Wilson, it shows he has a background of love. As he has this loving presence

<p>in his mind he is able to externalise this love on Wilson.</p>	
<p><b>Q6: What aspects of NPD could be considered as providing positive personal characteristics?</b> 17:08 – 24:10</p>	
<p><b>RM:</b> <i>Asks Q6</i></p> <p><b>EX1:</b> Well okay sure, ruthlessness is useful, especially under capitalism.</p> <p><b>RM:</b> <i>Yes, it would seem that a lot of CEO's seem to be narcissistic, it seems kind of necessary to get to the top</i></p> <p><b>EX1:</b> Exactly, you need to be willing and able to step on other people</p> <p><b>RM:</b> <i>I would go as far as saying being too modest comes across as weakness. Instead saying 'I can do it I'm the best I can do it'. Like if that person embraces their narcissism and rides it other people are going to say, 'hey that guy seems confident, I bet he can do it'</i></p> <p><b>EX1:</b> Hmm I was watching an ad play during the Canadian Football League for GMC. The ad goes 'what kind of a person do you want to be, a good person a good friend, a good parent, is that it? (it belittles this notion) 'No you want to be the best! Well you see that's narcissism talking right there.</p> <p><b>RM:</b> <i>But I mean if that resonances within everyone, then that's genius. They have brought along this product and said look how niche and this is and how unique you will be if you have this, but deep down it is relevant to everyone.</i></p> <p><b>EX1:</b> Right, it's very easy to tempt people's narcissism.</p> <p><b>RM:</b> <i>I would say that it seems to be more prevalent in CEO or in managers, who are big, but not at the top of their field. Like they are people who are very focused on getting to the top. The leaders who do seem to sit at the top change their mentality to a more humanistic approach perhaps, but not those who are still trying to reach the top. That's really just speculation though</i></p> <p><b>EX1:</b> Right, I think so, although there are people in this world who don't crave to be number one who are still narcissists. So I have this one client who</p>	<p>This response suggests that narcissism and our society are somewhat integrated with one another. As the expert outlines in the commercial story, this marketing was addressed directly towards narcissistic tendencies, which some people can relate to. As the expert outlines, society and capitalistic structures encourage the promotion of asset acquisition and the power that comes with it. Such power structures are known to bring forth narcissistic tendencies in people through a multitude of methods.</p> <p>There is also some reference to the treatment of a narcissistic patient. The expert suggests that much of the treatment revolves around the inducement of modesty, through introspection. The expert suggests these narcissistic tendencies are rooted within childhood.</p>

<p>I've been treating who has a family and a wife he loves, but he has been coming to me because he quite rest with this. He got this epic from his parents that he has internalised into his super ego, that he is not number one, that he needs to be the best and always do better, to have the best things. He knows it's wrong and ridiculous and he should be grateful for the life that he has. But there is a part of him eats at him. He wants to have the peace that he knows he should be experiencing but he can't experience it because he has this demon.</p> <p><b>RM:</b> <i>So if he understands this dissonance why can he not resolve it in himself.</i></p> <p><b>EX1:</b> Well he had not been to see someone like me before (therapist). I mean he just has that one problem, hopefully within a year he will be done. He isn't afraid of declining though, he just wants inner peace. He knows that achieving more will not help with this issue.</p> <p><b>RM:</b> <i>That's the problem right, every time you have a personal high you are setting the bar a little higher.</i></p> <p><b>EX1:</b> That's exactly why it's a treadmill.</p>	
<p><b>Q7:</b> To what extent would you consider the DSM-5 interpretation of NPD to accurate? 24:10 – 25:13</p>	
<p><b>RM:</b> <i>Ask Q7</i></p> <p><b>EX1:</b> You know I generally avoid reading the DSM, I don't find that pigeon hole kind of thinking to be helpful, so if you want to summarise what's new in the DSM-5 on narcissism.</p> <p><b>RM:</b> <i>Well I would personally say it's pretty short, it is like two pages worth, basically everything you talk about in the key traits and characteristic section. My take away of it was that it was rather brief and only focused on the grandiose aspect of narcissism. I've also seen in other sources that a similar view is considered but I don't know exactly.</i></p> <p><b>EX1:</b> I think probably that they have too much grandiose narcissism and left out the oppressed narcissist. I can't really comment too much on this.</p>	<p>The expert describes themselves as having limited knowledge of the DSM-5.</p>
<p><b>Q8:</b> How accurately do you believe the scientific community understands NPD? 25:14 – 34:10</p>	



**RM:** Ask Q8

**EX1:** I think there is room for improvement, we have been working on narcissism for half a century, well i've been working on different tools and whatnot, but there is not a consensus. In psychoanalysis there is a real difference in the understanding of narcissism between Freudians, Kleinians and Lacanians on one hand and self-relational based upon attributes. I think the Freudians, Kleinians and Lacanians are very much aware of narcissism as a defence, they see narcissism as a compensation for feelings of inadequacy, also as a compensation for guilt. The invasion of guilt, the super ego and depression. Otto Kernburg, who has had a huge impact in narcissism and psych-analysis, he is mainly talking about the grandiose narcissism, basically, he says, in treating a narcissistic person, you are helping that person become depressed. There grandiosity is a defence against aggression. Its only when this grandiosity fails apart and gives way to this depression, only then are you making headway in the treatment. Obviously not that you want to leave them in a puddle of depression.

**RM:** *So how would you make them depressed, by focusing on their actions in the past.*

**EX1:** Well you aren't exactly making them depressed. They were depressed before that's why they came to psychanalyses. They come to us because their grandiosity is starting to crack. Maybe it worked for them back when they were younger but now they are old, maybe have potency problem. Maybe they have hit a wall in their career, maybe their wife leaves them, says she has had enough of their narcissistic crap.

**RM:** *I mean if they had no problem they wouldn't come to you, its just a matter of time before you have alienated everyone you love.*

**EX1:** Exactly, Kernberug rasies a point, saying age is the ultimate nightmare for the narcissist is aging. because what is ageing. My old mentor Eli Sagan once told me secret of aging is loss, loss, loss. Narcissists do not want to be lovers, the aging means you are becoming a loser. At the end you are going to lose your live and everything.

The expert highlights here the history of understanding narcissism. The expert refers to Kernberg's concept of depression, something similar to introspection. As the experts' states by helping the patient become depressed you are making them confront their guilt and their personal failures. The expert suggests that this is a difficult and gradual process requiring a year or more of therapy.

There is also some reference to ageing and NPD. The expert specifically referencing it as the mortal enemy of the narcissist. He also talks about the relationship between narcissism, losing and ageing.

<p><b>RM:</b> <i>No way to beat it and it beats you down slowly,</i></p> <p><b>EX1:</b> Haha yes just like me. I don't have a narcissistic personality disorder anymore, but I did and after years of analysis, I evolved beyond that and now I am able to push away from the table, let go and say goodbye, okay but the narcissistic personality disorder is greedy.</p> <p><b>RM:</b> <i>So the narcissist feels that they haven't peaked.</i></p> <p><b>EX1:</b> Well im despite losing my vision, I am still happy and grateful, that's a key point gratitude. Melanie Klein is really goof on this, she says 'there is only one cure for envy and that's gratitude. I mean you can't discuss narcissism without discussing envy. If you can feel grateful that your cup is half full you won't be envious out about not having a full cup.</p>	
<p><b>Q9:</b> Which methodology of measuring narcissistic attributes do you consider to be the most valid and why? 34:11 – 37:16</p>	
<p><b>RM:</b> <i>Ask Q9</i></p> <p><b>EX1:</b> What measure?</p> <p><b>RM:</b> <i>Perhaps an inventory like NPI, all question based, or like 2pq?</i></p> <p><b>EX1:</b> I'm sorry I can't comment I haven't used any of these inventories.</p> <p><b>RM:</b> <i>okay well how about when you are talking to somebody, how would you work out how narcissistic a person was.</i></p> <p><b>EX1:</b> Hmm well I'm never trying to measure how narcissistic a person is. I mean I am listening to a client talking and paying attention to the death of the description of the other people in his life. Say I want to talk about his wife or children, but he may go through the whole session without talking about others in their lives, then that is a pretty strong indication. Other people to mention their wives and children but at the end of the hour you are left with a feeling, that they are kind of carboard figures, he hasn't spoken about them in that in any way brings them to life. He is not communicating any depth to these people, because he is not interested in their depth, just as them as object affecting them.</p>	<p>Here the expert states they do not have the relevant knowledge in this area to comment.</p>

<p><b>RM:</b> <i>So is that how they just are or can they be changed.</i></p> <p><b>EX1:</b> Well yeah of course, these narcissistic individuals are functionally primarily in the schizoid position and have little time in the depressive position, so they have very little capacity of concern for the people, but it is there for sure.</p>	
<p><b>Q10:</b> Symptoms of NPD have been described as varying in appearance and recognition. Do you agree with this sentiment and why? 37:17 – 40:43</p>	
<p><b>RM:</b> <i>Asks Q10</i></p> <p><b>EX1:</b> That they vary, yes, the big variation being between grandiose and depressed.</p> <p><b>RM:</b> <i>I read a work that split narcissism into 5 separate types of disorder, something like two poles, grandiose and vulnerable with some other variants in-between.</i></p> <p><b>EX1:</b> Yeah that could be true, thinking of different types of narcissism remind some of Kohut psychology and he distinguishes the difference between the type of narcissist who is constantly looking for mirroring, who is constantly looking for mirroring, as opposed to the idealising narcissist who are narcissists who are engaged in hero worship they are worshipping gurus and they are just projecting their ideal self in a character, like Doyle Brunson or Donald Trump or even God, or the Pope or whatever. It's a variation of narcissism to idealise people. That's certainly different from the mirroring narcissist who wants to be God. The worshipping of God is a more indirect version of this.</p> <p><b>RM:</b> <i>I wonder if there should be at least two different names and disorders on narcissism.</i></p> <p><b>EX1:</b> Yes there probably should be.</p>	<p>The expert argues that there is indeed a distinction between forms of narcissism in NPD, arguing for a distinction between grandiose and depressed. When asked if depression was related to vulnerable narcissism, he did not necessarily confirm.</p>
<p><b>Q11:</b> Which gender would you say is more like to suffer from NPD and why? 40:44 – 42:06</p>	
<p><b>RM:</b> <i>Asks Q11</i></p> <p><b>EX1:</b> I don't think it is particularly leaning towards one gender, although it certainly takes on different manifestations. So you have the sadistic narcissistic domineering male, but you have the seductive female, who is out to get you addicted to her, her</p>	<p>The expert implies that there is no difference between narcissistic availability between genders. I believe he suggests that males are more likely to be blatant with their</p>

<p>narcissism takes the form of a trying to make her the centre of your desire and attention. She goes about it in a different way.</p> <p><b>RM:</b> <i>Is that because men and women want fundamentally different things from life.</i></p> <p><b>EX1:</b> Err I think actually they kind of want the same thing, they just have two different ways of thinking, two different applied strategies. They just want to be the centre.</p>	<p>narcissism, with women being a little more introverted and secretive.</p>
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**Q12: To what extent do you believe age affects the severity of the NPD condition?**  
42:06 – 47:21

<p><b>RM:</b> <i>Asks Q12</i></p> <p><b>EX1:</b> Oh, it think aging threatens the narcissist, because he beings to lose his power.</p> <p><b>RM:</b> <i>If they have no therapy they go into denial then right, because their world is slowly being taken away and there is nothing that can really do to stop it.</i></p> <p><b>EX1:</b> Yes exactly, but the power to deny becomes overwhelming, the facts speak for themselves, the narcissistic women who has sort to be the centre by being a beauty, but now crow feets are showing on around her eyes, her boobs are sagging, she can't deny it even if she avoids all mirrors.</p> <p><b>RM:</b> <i>Hmm are you more likely to have a breakthrough with a young person, or an older person?</i></p> <p><b>EX1:</b> I think the key factor is if their narcissism is breaking apart, whether it is due to aging or something else. A young narcissists world might be breaking apart because he not that successful, unable to market himself. If he is young and talented and able to market himself maybe this narcissism won't break apart until later.</p> <p><b>RM:</b> <i>So, in a way this person has yet the reap the rewards of being a narcissist, because they are unsuccessful. There has been no plateauing</i></p> <p><b>EX1:</b> Right I see this in student whole aced high school, getting A's but moving on to university they become C or D students, and this leads to breaks in twenty-year olds, they define themselves in a particular way and now they are not getting that feedback.</p>	
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<p><b>RM:</b> <i>Do you think it has something to do with the scholastic system, internalising in children how they need to do well in exams, promoting that fear of failure?</i></p> <p><b>EX1:</b> Well now we go back to the environmental question, I personally think this whole culture including our educational system, this structure we live in breed narcissism, a culture of achieving and doing and doesn't pay any attention to being, always about doing and achieving, not about being</p> <p><b>RM:</b> <i>I suppose it comes down to easy management of people, trying to get them focused to be productive and keep the country running.</i></p> <p><b>EX1:</b> Right but it's a mistaken theory,</p> <p><b>RM:</b> <i>Well it implies not creative ambitions and that people can be shoehorned happily into jobs they don't want</i></p> <p><b>EX1:</b> Right you don't have any confidence that a child who was well loved and cherished, allowed to be and play, I mean a lot of great creativity come from play.</p> <p><b>RM:</b> <i>Gives the child the opportunity to explore their imagination.</i></p>	
<p><b>Q13:</b> In what aspects does substance abuse affect the severity of the NPD condition? 47:22 – 48:44</p>	
<p><b>RM:</b> Asks Q13</p> <p><b>EX1:</b> I think can a number of ways, you could have a person who is a narcissist. A person who turns to drugs to numb, terrible feelings of not being good enough, using the drugs to numb low self-esteem, but the drugs make him more narcissistic. Take alcohol, it certainly makes people more introspective and self-focused, and in the case of a narcissistic individual it heightens these effects. A grandiose narcissist may abuse drugs because they like this heighten self-aggrandising and revel in the feeling.</p> <p><b>RM:</b> <i>Makes sense</i></p>	<p>Expert suggests that utilisation of substances heighten narcissistic tendencies.</p>
<p><b>Q14:</b> What are some of the key issues facing the full understanding of NPD? 48:45 - 55:08</p>	
<p><b>RM:</b> Asks Q14</p> <p><b>EX1:</b> Errm hmmm, I think the understanding of narcissism is there, its just scattered and needs to be</p>	<p>The expert suggests that much of the research has already been done, now it is about</p>

brought together even in psychoanalyse let alone other areas of psychology. There have been a variety of different contributions from all fields and different perspectives. What we need is an integration of these put together what is true in Kernburg and what is true in Kohut and so one. I think we have all the pieces we just need to put them together.

**RM:** *How could you go about doing that?*

**EX1** I think a classically composed peer reviewed full comprehensive study is a good start, I would review Kernburg in one chapter, and each contributor. In fact we just did something similar to that in my institute, instead of teaching a series of different psychologists and their works, this year which just did a module called narcissism, which took the key findings and understandings from all, it was quite successful. Actually, while I'm thinking about it, the psychologist Robert Britton writes about a difference between thin skinned and thick skinned narcissists, its brilliant and accurate. To trat them follows a completely different approach

**RM:** *So they don't fall in the grandiose, depressed category?*

**EX1:** The thin skinned are boarderline, the thin skinned ae not necessarily boarderline, mor obsessive, more intellectual,, obsevisc compulsive. The thin skinned are people who are overwhelmed by their feelings, overwhelmed by their feelings, this sensitivity makes them very hard to work with. The thick skinned are insensitive and would rather not have them, they want to have distant from their emotions and understand themselves on a intellectual basis, they just don't feel much

**RM:** *Is that just a problem for them of the people around them as well?*

**EX1:** Oh its going to be a problem for the people around them because they do not feel much, makes them insensitive and cold.

**RM:** *They are still a narcissist though?*

**EX1:** Yeah by their inability to care and love other people

**RM:** *But they understand this failing in themselves can they not overcome it on their own?*

consolidation of ideas into further peer-reviewed aggregations.

They also discuss a difference in narcissistic behaviour between those deemed 'thin and thick' skinned. These two distinctions appear somewhat different than the idea of grandiose and vulnerability.

<p><b>EX1:</b> Not exactly, understanding it intellectually and then producing feelings of compassions and love for others don't realise together. They only understand they have a deficit, not a cure for it</p> <p><b>RM:</b> <i>So, would that be on the spectrum of autism, or is it about object relations?</i></p> <p><b>EX1:</b> Well people now talk about the spectrum and I think thick skinned narcissists are probably on the spectrum and they are probably too adapted to society to be called autistic.</p>	
<p><b>Q15:</b> In Stinson et al., 2008. The researchers argue that NPD is the least empirically researched of all personality disorders, to what extent do you agree with this sentiment and is there areas that require further research in your opinion? 55:09 – 56:58</p>	
<p><b>RM:</b> <i>Asks Q15</i></p> <p><b>EX1:</b> Erm I am not familiar enough with the literature to make that kind of qualitative comparison,</p> <p><b>RM:</b> <i>Sure, just for reference do you believe it's been fairly well researched</i></p> <p><b>EX1:</b> There has been an awful lot of concern over narcissism in psychoanalysis regarding narcissism in the last fifty years, one of the major topic.</p> <p><b>RM:</b> <i>Well I mean Kernburg dedicated his life works to it, as so have many others. I mean there is a huge load of literature on narcissism. One of the reason I really wanted to do it was to create an aggregate of the knowledge of narcissism.</i></p> <p><b>EX1:</b> Well that's kind of a book was thinking of writing, that covers all the major point of views.</p>	<p>The expert states that they do not have enough information to make an informed decision.</p>
<p><b>QC1:</b> What criteria would you use to classify someone as having a mental illness? &amp; <b>QC2:</b> To what extent would you consider a personality disorder to be a mental illness? &amp; <b>QC3:</b> To what extent do you consider NPD to be a mental illness? 56:59 – 67: 35</p>	
<p><b>RM:</b> <i>Asks QC1</i></p> <p><b>EX1:</b> well you see here we get into core problem. I don't believe in mental illness, there is no such thing , when something has been called a mental illness, if they discover a biochemical or some neurological deficit, once that's discover, that doesn't prove that's a mental illness, it proves that it's a physical illness,</p>	<p>There was an issue here with the wording 'mental illness'. This was the first time I encountered this issue, but it frequently came up in other discussions. Because the expert deems the core</p>

Mental illness is a category of those behaviours that we want to think of as sick but that we can't think of as sick. As soon as we can prove that they are sick it becomes a physical illness. Mental illness applies to behaviour that we know is sick but we can't prove is sick. There sickness is biological, you cannot apply the language of sick to mental behaviour it is simply a metaphor, a person is sick in the way an economy is sick, that is its merely a metaphor.

**RM:** *Okay that's a fine answer but the next two questions use the terminology mental illness, so I am not sure how relevant these questions will now be. To skip to the last part how to what extent do you consider narcissistic personality disorder to be a mental illness*

**EX1:** Okay well my answer has to be that I do not consider narcissistic personality disorder to be a mental illness because I do not consider hysteria or grandiosity or any of these things to be a mental illness, because mental illness doesn't exist.

**RM:** *Is it just a terminology, if I was to change the terminology from mental illness to a physical illness would that change anything.*

**EX1:** Well certainly NPD is not a physical illness, I mean to do that you would have to prove with microscopic data that empirically prove that there is a biological malfunction, defect or disease. You can't do that for these behaviours that are called mental illness. I mean what am I doing then when I'm so called treating these traits. I'll tell you what it is, narcissism is not sick its bad, the whole of psychology has devoted itself to avoiding the law and that's its fundamental error. These forms of behaviours that we consider to be mental illness, if we were to be honest we would call them wrong and bad, we don't like these behaviours. Even down to weird behaviours like someone standing too close to you when they talk, so we think there is something mental wrong with them. The key point being that the concept of illness should be confined to the physical domain.

**RM:** *Is that you personally or a great deal of the community at this point.*

questions to be somewhat unanswerable, the three questions were grouped together into a discussion regarding mental illness as a terminology. Whilst I believe it was an interesting discussion, it is arguable that the questions were distorted so much that they cannot be used with validity.

However, given that the discussion of whether or not mental illness is an actual phenomenon, is very relevant to the research question in hand. It was deemed necessary that this section should be included in the data.

The experts view on the subject matter was that mental illness is not a real phenomenon, but rather there is a degree of mental trauma. The expert does not distinguish a discreet cut off point, but rather a continuum.

Interestingly, he also does not fully agree with trait theory but instead suggests that it's far more transcendent and metaphysical.

Although he does suggest he is treating 'traits' I do not believe he uses this terminology in the exact same way as other experts. He is instead trying to treat what he identifies are apparent traits, with direction



<p><b>EX1:</b> No I am very unusual, Peter Zaz and I have a different perspective. In the Judaeo-Christian realm sin is something that is treated by the priest, but I mean how do you treat sin, I mean you help them give it up and convert to the god light. That's what's going on in psychotherapy, but we don't want to see it as that, performing shamanic or priestly function. We want to see ourselves as scientists, and we draw on the medical model to cloak what is really a shamanic kind of enterprise.</p> <p><b>RM:</b> <i>Well it is very subjective and difficult to measure, there is it is metaphysical process and cannot be boiled down to just stats-based work</i></p> <p><b>EX1:</b> I my opinion most people who suffer psychological and in the field of psychosomatic and there they have an illness, one that has strong emotional contributors. A they are bringing that suffering on themselves, why are they punishing themselves, well they don't know but on some level there is usually a good reason.</p>	<p>towards reducing these traits via psychotherapy.</p>
<p><b>E1: What aspects of NPD could be viewed as dangerous to society?</b> 67:35 – 69:56</p>	
<p><b>RM:</b> <i>Asks E1</i></p> <p><b>EX1:</b> The most extreme form of NPD is a psychopaths and they are extremely dangerous to society, conscienceless people, everyone has a degree of psychopathy but people who have a lot of psychopathy are aware of it and having studied psychopaths who are criminals and also highly narcissistic successful business individuals you can definitely see the similarities and reoccurring themes. Individuals who display these kinds of tendencies are extremely dangerous to the people around them, seeing them as tools or pawns, especially to their partners and children, they do immense damage to these children and the narcissistic parents is incapable of loving and sacrificing so in this way it damages the child.</p>	
<p><b>E2: In your opinion, in what ways can those with both NPD and a position of power impact society?</b> 69:57 – 70:55</p>	

<p><b>RM:</b> <i>Asks E2</i></p> <p><b>EX1:</b> Oh my god well, I mean you are seeing it right now, this situation with Trump and threatening to nuke Korea and all the ridiculous tweets, it's a real real concern.</p> <p><b>RM:</b> <i>Right well im just happy I don't live in America or Korea for that reason.</i></p>	<p>This use of Trump as an idea of a person who displays NPD and is in a huge position of power is commonly used by the experts. In this case, the expert suggests that President Trump displays symptoms of NPD.</p>
<p><b>E3:</b> What are your opinions on NPD being classified as a Personality Disorder in the DSM-5 but not in the ICD-10? 70:56 – 71:57</p>	
<p><b>RM:</b> <i>Asks E3</i></p> <p><b>EX1:</b> Honestly, I do not use the ICD-10, I'm only vaguely familiar with it. Well I believe narcissistic personality disorder should be considered a disorder and any compendium that doesn't list it as a disorder should seriously considering why. It's certainly a real condition and disorder and I still see it as being very problematic, in the way that the other mental disorders are problematic.</p> <p><b>RM:</b> <i>Okay great that concludes our interview, thank you very much.</i></p>	<p>The expert suggests that they are not familiar with the ICD-10 and offer only a general comment regarding the state of NPD as a disorder.</p>

## Interview with Expert 2

INTERVIEW 2	THEMATIC NOTES
<p><b>Q1:</b> What do you consider to be the key traits and characteristics of a person displaying narcissistic personality disorder? 0:00 – 3:20</p> <p><b>RM:</b> <i>Ask Q1</i></p> <p><b>EX2:</b> Err for me the grandiosity is sort of the lynchpin, idea that you are better than others, entitlement, idea that you are unique, rules don't apply to you, be willing to exploit others in part because of those traits. Also showing off exhibitionism, being a domineering people and domination approach, perhaps in some sort of hierarchical model.</p> <p><b>RM:</b> <i>Do you discern a difference between grandiose and vulnerable narcissism?</i></p> <p><b>EX2:</b> Oh, they are super different, grandiose being the proto-typical one, with vulnerable less so. In terms of vulnerable narcissism many of those people aren't even grandiose. I think they are ego centric and self-absorbed, but it often comes from a place of victimisation, a defence mechanism and are quite different in my mind.</p>	<p>The expert clearly discerns a difference in symptoms within the NPD condition, considering a radical difference.</p>
<p><b>Q2:</b> What would you consider the difference to be between a person displaying narcissistic tendencies and a person with NPD? 3:20 – 4:39</p> <p><b>RM:</b> <i>Asks Q2</i></p> <p><b>EX2:</b> Flexibility, I mean if you are a little cocky you are going to keep it to yourself a bit and still fit in, I shouldn't brag about how much money I make, the quality of my life such as that. Also, people with the disorder have a great deal of failure, maybe in the workplace or in relationship between of the condition, it's a flexible and fine line. Also, less control over the manifestation over the traits.</p>	<p>The expert considers NPD to be a more radical version of narcissistic characteristics. These characteristics are not necessarily bad, and can be considered even good traits.</p> <p>Personally, I believe the expert suggests this because narcissism walks a fine line between acceptable and unacceptable.</p>
<p><b>Q3:</b> To what extent would you consider NPD to be prevalent in the general populace?</p>	

4:40 – 7.24

**RM:** Asks Q3

**EX2:** I mean using the DSM cut off point, the data would suggest extraordinarily rare, the Stinson paper you put forth is really an outlier but most epidemiological studies the modal percent is zero to 0.1 % but I think that's there an artificial cut off, so if you made the cut off instead of four symptoms, three or two them absolutely the rate would be higher.

You know when you have a dimensional construct that you pretend is categorical, resulting a yes/ no I don't even know how useful knowing prevalence rates are as it's an arbitrary cut-off

**RM:** *Hmmm that's interesting that you say its so low yet it seems so many people display such open narcissistic tendencies to the point you would expect the rate to be much higher?*

**EX2:** Well the previous data shows it to be zero to one percent given on the paper, this Stinson once you showed me seems to be an outlier in that regard. It depends how you access it. If you use semi-structured or fully structured interviews like the paper they are not going to necessarily be that accurate as people tend to over think the scale and magnitude of these disorders. You are going to find high rates when you ask people but then speaking with clinicians it's a lot rarer because of the severity of the symptoms required to meet this criteria. There are plenty of very narcissistic people, that its rather rare for people to meet that five of nine criteria

Between 0 to 1 percent is lower than the average expert gives, however this expert in question had conducted a study which directly looked at this issue. Once again though, the prevalence rates are very dependant on the criteria presented in the DSM.

Q4: In your opinion what is the role of genetics as a contributor to NPD?  
7.25 - 9:57

**RM:** Asks Q4

**EX2:** I mean genes play a huge role in all psychology and in all psychopathy, so probably about 50%.

**RM:** *That's roughly what I've heard although perhaps learning more on the nurture side.*

**EX2:** Yeah actually I think I go to the opposite I don't think that psychoanalytic theory really goes that far, like it all being about parenting. I don't think you can address that unless you have designs

The expert suggests the ratio is 50/50 although there is little success in trying to determine genetic factors so far.

that let you parce genetics from environmental feature, that's all speculation really, even showing a correlation between narcissistic parenting style and a child's narcissistic personality does not say that a nurture issue or a genetic issue, because the two still have not been separated. I think it's a very poorly understood issue as to how any of the personality disorder divide into nature versus nurture?

**RM:** *Do you think there is any research that could be done to understand this better, or is it really just a variable the scientific community has to live with?*

**EX2:** I think from a behavioural genetic perspective there can be further research done but the papers so far keep it within roughly the 50% bracket, and with inheritability they have correlation of 0.5 so certainly more conclusive results are needed. You need twins adoption approaches, they aren't easy to do and I don't know if we have any understanding of molecular cause, and especially for NPD that's going to be low on the list for conditions that receive the necessary attention to understand the condition, on a molecular level.

**Q5:** How influential would you consider society and the environment to be as contributors to NPD?

9:58 – 11:49

**RM:** *Asks Q5*

**EX2:** I'm more pessimistic about it to be honest, I don't think parenting and selfies and the self-esteem movement plays a huge role frankly in the contributor of narcissism. I mean there was a study to look at narcissistic traits in pre-schoolers and studied to see if they continued and the correlation suggest that by preschool they were able to pick out these traits, you know they think they are better than others and behave more antagonistically towards each other. That experiment was relatively successful. I think you bring some of those traits straight out of the womb with them. I think some cultures can inhibit this, like some Asian cultures, where being self-absorbed can bring shame on your family in a way that isn't fully comprehended in the west, and this pushes down some of these traits, where as a western culture may encourage

The expert suggests that childhood indicators are prevalent in predicting NPD, although perhaps not to a conclusive state.

<p>individualism on a level that encourages narcissistic attributes but you know I don't think nurture is as impactful as people give it credit for.</p>	
<p><b>Q6: What aspects of NPD could be considered as providing positive personal characteristics?</b> 12:20 – 15:57</p>	
<p><b>RM:</b> <i>Asks Q3</i> <b>EX2:</b> I don't know I mean when you get to a disorder its going to be bad, but if you have say some narcissistic tendencies then sure, I mean we know confidence is attractive and so it finds dates and helps people rise in jobs to positions of leadership so yeah there are some positives to having high narcissism, extroversion assertive, can be positive at least at first, I mean over time people will catch on to the negative aspects the manipulation and lying, but yeah there are some positive qualities. <u>Mainly through extroversion.</u> <b>RM:</b> <i>it could be something of a self-fulfilling prophecy, where if you get validation and regrading from narcissistic behaviour this in turn promotes you to act in a further narcissistic way.</i> <b>EX2:</b> I mean some studies have shown that some people who display grandiose narcissism are less likely to internalise the criticisms of others and this has allowed them to push through and achieve in a manner that others cannot, you know just incredible confidence in yourself and when bad events occur you just shift the blame onto someone else. You know it's not my fault I got a bad grade my teacher is dumb. It can protect you in form some of that self-doubt and give you some psychological resilience.</p>	
<p><b>Q7: To what extent would you consider the DSM-5 interpretation of NPD to accurate?</b> 15:21 – 21:23</p>	
<p><b>RM:</b> <i>Asks Q7</i> <b>EX2:</b> For me this is a question of what part of the DSM you mean, there are two different way of thinking about PDs within the DSM. Do you mean the traditional way or using the newer model? <b>RM:</b> <i>I believe I am referring to the DSM-5 the newer part</i></p>	<p>The expert argues that there are differences in symptoms displayed by patients with NPD, with grandiose and vulnerability again being apparent. The expert demonstrates the interlinking themes in this answer.</p>

**EX2:** hmm okay well the traditional model goes over the classic symptoms, grandiosity, entitlement, bravado, exhibitionism etc, and then there is the newer model you diagnose based on impairment and on traits, are you talking about the traditional five of nine symptom?

**RM:** *Perhaps we should talk about both?*

**EX2:** I don't have a terrible problem with the five of nine seems pretty relevant to narcissism as term of construction validity if you meet this criteria you are narcissistic. But I quibble over that if you have five of nine you have it and four of nine you don't. We have argued that the DSM should favour vulnerable. mean either though it only focuses on the grandiose and not the vulnerable I think that okay because NPD should be considered to be an impairment in society and the listed traits should reflect that as opposed to a weaker, vulnerable condition which impairs society. If we can capture both that would be a benefit, but that would broaden the symptoms of NPD but the things is if you include the traits to say include shyness, sensitive to criticism and other vulnerable qualities that you are just going to increase the likelihood of co-occurrence, with borderline dependence and so. This is why we see so much cooccurrence due to the general overlap of traits within disorders.

**RM:** *Do you think the DSM-5 is that relevant to a psychologist's interpretation of NPD?*

**EX2:** I think the DSM is super important, it's the go to diagnostic tool for clinical. In America most of the clinical physicians use it, both in papers and in practice. I think this extends outside of America. That being said many people researching narcissism are not clinical psychologists and might just study it as a construct largely separated from the DSM. It does seem to be a background thing, but I would like to see the DSM incorporate something that is going to be basic trait model like ICD-11 and have a section like antagonism or anti-social dissocial that will capture a lot of the traits of narcissism grandiosity untrustworthy malevolence. So people will be interested in in traits and narcissism with very little knowledge of the DSM captures it and we

<p>know people who are narcissists in our lives and we would like have knowledge on why these people are as they are on a basic level.</p>	
<p><b>Q8: How accurately do you believe the scientific community understands NPD?</b> 21:24 – 25:35</p>	
<p><b>RM:</b> <i>Asks Q8</i>  <b>EX2:</b> Probably not that well, I don't even know if people with expertise included myself know that well compare to other disciplines where there have been thousands of papers. I mean its been researched less, much of the work about narcissism was coming from a theoretical nature. Mostly psychodynamic purist base on their own experiences, previous works and case studies, but really not until the last 10 – 20 years have we seen this outburst of empirical work on it. Frankly there is too much speculation and not enough data and what it means for functions.  <b>RM:</b> <i>That's the issue with clinical cases they are one off and, in a way are hyped up. So is it more necessary that we conduct large scale aggregation on narcissism?</i>  <b>EX2:</b> Oh yeah we have a paper coming out controversy in narcissism and in clinical psychology where we call into questions whether narcissism is best studied in case studies, I mean even if you have a hundred people, the people that you see in clinical settings are a specific type of narcissist and they are in therapy usual because someone forced them to get therapy or they feel horrible and depressed the thing is they blame others for their problem. For this reason I would like to see more large scale research undertaken in societies, especially in corporate and prison environments, where narcissistic people can be found. Clinical studies are just one person and you are capturing them in one instances and may not be accurately reflective of general populace  <b>RM:</b> <i>Something I feel like should be looked is further aggregation of current narcissism research</i>  <b>EX2:</b> Well I think we have seen a push dividing narcissism into grandiose and vulnerable, I mean there has been a lot of speculation and ideas were heterogenous in nature, so you couldn't even correlate the experiments together in any meaningful</p>	<p>Expert suggests that current clinical studies do not capture enough of the populace to be considered truly valid.</p>



<p>way. Now we are getting closer to having a better idea of the contrast since we have become more homogenous in result production.</p>	
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<p><b>Q9: Which methodology of measuring narcissistic attributes do you consider to be the most valid and why?</b> 25:36 – 28:50</p>	
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<p><b>RM:</b> <i>Asks Q9</i>  <b>EX2:</b> I would go on a self-report basis, I mean narcissistic people are pretty willing to discuss themselves and their views, you could even ask ‘are you a narcissist’ but things like ‘would the world be a better place if I ran it’. I trust self-report more than I think most people do, I mean more than normal people, Also you could ask family member, partners and friends and see what they agree on trait wise and where they differ. Most provide relatively valid information especially if you collect the data from enough sources.  <b>RM:</b> <i>Is there an inventory that you personal prefer?</i>  <b>EX2:</b> I think the NPD is heavily criticised, but very commonly used though and the data suggest it works just fine. I’m a co-author on a FFM relationship to NPI, so it relates to something that resonances with all people, FFM works for all. I think we just need to know what kind of narcissism we are measuring and making sure the data makes sense together and is valid, so multiple inventories and multiple testing with the same experiment design help with this. We have a paper showing though that some scales are more than relevant and can skew the results, so it’s worth bearing in mind when selecting from the available instruments.</p>	<p>Expert favours self-report methodologies, in addition to asking family and close acquaintances. This can yield fairly valid results.</p>
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<p><b>Q10: Symptoms of NPD have been described as varying in appearance and recognition. Do you agree with this sentiment and why?</b> 28:51 – 34:58</p>	
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<p><b>RM:</b> <i>Asks Q10</i>  <b>EX2:</b> I think if you think about grandiose and vulnerable, at the core and traits from agreeableness with the five factor model, so you are going to display some of the obvious traits of narcissism present in both, the self-entitlement, the constant self-involvement but then a grandiose narcissist</p>	<p>Expert suggests there is an overlap between the grandiose and vulnerable insignificant way. Despite this, the expert believes they should still be identified and diagnosed differently.</p>
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displays some other traits like desire to rule the hierarchy, to be outgoing and always after the newest object with can be praised, like a car or watch. All about attention. Vulnerable are shy, sensitive to criticism, anxiety and so are every different. Some people are very obvious in their narcissism, like Donald Trump it's hard for people not to agree on this. But then there is hidden or covert narcissism, who don't reveal this narcissism until you get to know them intimately.

**RM:** *If Trump was narcissistic would he still be popular? It seems like people would be against him, his own supporters, if he began apologising for things.*

**EX2:** Yeah, I think that's true, I suspect if he could control his disorder and say you know I get a little dense or sometimes I'm wrong, I think some of supporters wouldn't like that but it would make him seem more psychological healthy. But yeah there are people who have that bullheadedness that others find appealing.

**RM:** *Yes it would interesting to do further research to see why that is the case why people like narcissists as leader.*

**EX2:** Well people who are open like to think of the world as complex and nuances with an unlimited amount of perspectives and ideas to explore. That is complex and time consuming however, even for the voters. Others would rather have a black and white dichotomy to make things simpler, immoral and moral and don't like that things are complicated. Trumps black and white approach appeals to people who don't want to make so many challenges, rather want a simplified version that aligns perfectly with them. Its not deep, but then it doesn't have to be, because its about simplifying things.

**RM:** *I mean we have to make a whole lot more decisions now than we used to, so any categorisation makes your life a lot easier*

**EX2:** oh yeah for sure, we are expanding our ideas about gender and sexuality and female equality. I mean having these answered in black and one makes things seem easier.

Reference is made to Trump again as an example of a person with NPD. Special mention is made of the qualities identified in both NPD and Trump's success: bullheadedness, impervious to criticism, One could even argue that people identify with his splitting persona, things being either good or bad in their nature.

<p><b>RM:</b> <i>It could also be a case of the glory days and rose-tinted glasses not seeing all the choices made back in the day.</i></p> <p><b>EX2:</b> yeah also that conservative views, with closed views and the uneducated.</p>	
<p><b>Q11:</b> Which gender would you say is more like to suffer from NPD and why? 34:59 – 38:46</p>	
<p><b>RM:</b> <i>Asks Q11</i></p> <p><b>EX2:</b> I think both show it, I come from a trait-based background, that all personality disorders can be linked to normal personality. So, we know across the world men are less agreeable to women, less tender minded, more self-focused. This doesn't mean that women don't do some disagreeable that others, just men tend to be more disagreeable, so looking at the curve at the high end you are going to see mainly men at the part of the spectrum where this is going to be represent as NPD or some other disorder.</p> <p><b>RM:</b> <i>Do you think that is a societal thing or more a physical one.</i></p> <p><b>EX2:</b> I don't know it may well be that there are hormonal factors, like testosterone, but also culturally men have been praised and encouraged for narcissistic traits to an extent whereas these qualities have often been oppressed or even attempt to breed out of woman. There is an interesting study done by Judge who showed that being disagreeable predicts higher salaries for men but not for women. So if you are some asshole dude, who says I should get a raise I kick ass, isn't going to go so well for a women.</p> <p><b>RM:</b> <i>Office environments seem to be unique in the ways in which they highlight gender difference, I mean more bosses are men rather women.</i></p> <p><b>EX2:</b> For sure many male CEO are driven towards a hierarchy. An all or nothing, get to the top kind of approach. With more women CEO we would likely see an increase in communal structure in companies, that could very much change performances and organisational structures.</p> <p><b>RM:</b> <i>In what ways?</i></p> <p><b>EX2:</b> On a macro scale, who could say. Most likely make organisational structures a lot flatter, but I</p>	<p>The expert suggests that the reason for the higher prevalence on men being narcissistic over women is due partially to hormones, partially due to the slow change of the current hierarchical model.</p>

<p>mean I haven't done the legwork to really discuss this.</p>	
<p><b>Q12: To what extent do you believe age affects the severity of the NPD condition? 38:47 – 42:09</b></p>	
<p><b>RM:</b> <i>Asks Q12</i>  <b>EX2:</b> I don't know for accurately the degree to which it is correlated shows younger people specifically little children are more likely to be narcissistic, peaks in early adulthood and we see a decline in the twenties. I mean if you are narcissistic you may get away with it a little when you are a teen, but in the working world no one wants to hire someone who doesn't know anything, and that thinks they are amazing, no one is going to want to work with them. So it gets slowly diminished, same with narcissistic tendencies in relationship, so as you take an more adult role, it seems to go down.  <b>RM:</b> <i>Is it a conscience decision?</i>  <b>EX2:</b> I don't know about that, I mean you have a better theory of mind and understanding of the world. You get a better sense of what people are thinking and feeling depending what you are saying.  <b>RM:</b> <i>I was wondering if older age, people just stop caring and become more narcissistic, kind of back to the trump example, who still appears to have NPD</i>  <b>EX2:</b> Well Bret Rogers who has probably done the best diagnostic personality over time, his data shows that by the time you are in your fifties no substantial changes to happen in personalities, I mean in trumps case at seventy, there is really no chance you are going to change. I mean at that point you have built a like and surrounded yourself with people who can at least tolerate your flaws, so the incentive to change probably isn't going to be there.</p>	<p>The expert suggests that NPD is most prevalent in early adulthood and tapers off in the twenties. The expert also suggests that the reason someone might be old and have NPD is due to trait rigidity past the fifty point. Given the extravagant and powerful lifestyle Donald trump has lived, it seems logical that the factors required to reduce his ego were never apparent. This would suggest that changing Trumps traits at this point given his age would be extremely difficult.</p>
<p><b>Q13: In what aspects does substance abuse affect the severity of the NPD condition? 42:10 – 43:33</b></p>	
<p><b>RM:</b> <i>Asks Q3</i>  <b>EX2:</b> I have a good sense of that to be honest, narcissism like most other disorders seem to have comorbidity with substance disorder and anti-social behaviour, but it's not a robust correlate like anti-social and psychopathy disorders. I mean it makes</p>	<p>Expert suggest substance abuse worsens symptoms, this occurs in a self-fulfilling prophecy, as the substance abuse makes the symptoms worse and reinforces negative behaviour.</p>

<p>things worse because substance disorders tend to make all disorders worse and reinforce negative behaviours or at the least numb the individual from dealing with said negative behaviour. Does it dramatically change it though, I don't really know</p> <p><b>RM:</b> <i>Any difference between the type of substances</i></p> <p><b>EX2:</b> Hmm I'm not sure, one would expect stimulates to increase some symptoms, but I'm not sure the research isn't there I believe.</p>	
<p><b>Q14:</b> What are some of the key issues facing the full understanding of NPD? 43:44 – 45:14</p>	
<p><b>RM:</b> <i>Asks Q14</i></p> <p><b>EX2:</b> I mean some of the stuff, in our controversies paper, do narcissistic people not like themselves, is it a mask model where you put on a facade of confidence that's important, do people who are narcissistic fluctuate between vulnerable and grandiose, there is an interesting paper by Pincus who thinks grandiose and vulnerable are different states of the same person. Is pathological narcissism the same as narcissism, is it a continuous stream like I believe or is there a distinctive difference between the two, like something like should be consider a separate entity. How would you help someone with NPD, If someone wants to get better how do you help them get better? The answers to these questions are still pretty simplistic compared to what a full review could show with some time and planning.</p>	
<p><b>Q15:</b> In Stinson et al., 2008. The researchers argue that NPD is the least empirically researched of all personality disorders, to what extent do you agree with this sentiment and is there areas that require further research in your opinion? 45:15 – 47:19</p>	
<p><b>RM:</b> <i>Asks Q15</i></p> <p><b>EX2:</b> That's definitely not true, that it's the most under research, disorders like paranoid and histrionic, we know nothing able really. I mean if you focus has always been in psychology, so you haven't seen the condition too frequently you might think it was under researched, but no its somewhere more in the middle of the pack. It's not as well researched as borderline or psychopathy as those, but it's certainly nowhere near the lowest. Those</p>	

<p>people as far as I know are not narcissism researchers.</p>	
<p><b>QC1: What criteria would you use to classify someone as having a mental illness? 47:20 – 48:38</b></p>	
<p><b>RM:</b> <i>Asks QC1</i>  <b>EX2:</b> I mean its super hard when dealing with a multi-dimensional disfunction. Tom Whitaker and Jerome Wakefield argue that it has to be harmful and unmanageable and stop the function of family and intimate relationships and friends. Also, its self-control, you lose the ability to modulate your own thoughts and emotions. Like just cocky there is some control over, you would turn it down for say an interview. NPD has to be debilitating in a way, it should cause you to fail, cause you to make poor choices. Its very different though in a way from other disorders, given the relationship narcissism has with good and poor behaviour.</p>	
<p><b>QC2: To what extent would you consider a personality disorder to be a mental illness? 48:39 - 50:22</b></p>	
<p><b>RM:</b> <i>Asks QC2</i>  <b>EX2:</b> I consider a personality disorder to be a mental illness in the same way anxiety and depression is. I suppose you would consider them as mental illness if you want a precise answer, but I would rather not look at personality disorders in such a way. They tend to be hard to treat given the genetic underpinning. Also, It's hard because the lines are arbitrary on whether or not you have the condition, the cut offs could really be changed at any time, altering the meaning. Like are you really talk or not, yes no, like who knows. So, you can make cut-offs but it's worth bearing this in mind. So, with disorders we should be really consolidating a model which address trait theory in the best possible way. It would help remove some of these tough issues.  <b>RM:</b> <i>Can telling people they have a disorder going to make the case worse?</i>  <b>EX2:</b> It can be, but it's more likely in my experience that it acts as a wakeup call makes them feel like they have a diagnosis and some perspective on themselves, they know they aren't alone or crazy.</p>	

<p>Sometimes this really resonates in people. Although with highly narcissistic individuals they may deny this and try and turn the issue around.</p>	
<p><b>QC3: To what extent do you consider NPD to be a mental illness? 50:23 – 51:42</b></p>	
<p><b>RM:</b> <i>Asks QC3</i>  <b>EX2:</b> Yeah, I mean it's really the same answer as the last question. Given all the time I spent looking at NPD and the narcissistic condition, I have of course seen it in people, and its very real. It should absolutely be taken seriously, especially given how our society currently views narcissistic tendencies. Yeah, it's a personality disorder, it absolutely should be, so that makes it a mental illness I guess.  <b>RM:</b> <i>The terminology is a problem?</i>  <b>EX2:</b> Yes, kind of, it feels a little archaic, a little bit of setback to still think it such black and white term.</p>	<p>The expert displays an issue with the terminology 'mental illness'</p>
<p><b>QE1: What aspects of NPD could be viewed as dangerous to society? 51:43 -52:50</b></p>	
<p><b>RM:</b> <i>Asks QE1</i>  <b>EX2:</b> The grandiosity the entitlement, it's not necessarily dangerous, but when it leads to entitled and exploitive behaviour, it stops them from caring about others, showing the kind of compassion that is vital. Especially if it leads to success, these abusive behaviours, so they think they don't need to care about others, its not their responsibility. So they might not feel bad about bankrupting a million people, its all about me and my stakeholder. This is both dangerous and sadly common in business practices, and in desperate times it only gets worse.</p>	<p>The expert draws ties between narcissism and capitalism, with business practices sheltering narcissistic behaviour, even fostering it.</p>
<p><b>QE2: In your opinion, in what ways can those with both NPD and a position of power impact society? 52:50 – 54:19</b></p>	
<p><b>RM:</b> <i>Asks E3</i>  <b>EX2:</b> Hugely right, you see it with Trump, you can look at this paper we did on narcissism and previous presidents. This was interesting because they often won by popular vote and had popularity with the people but were also more likely to commit ethical violations and be impeached, less likely to win re-</p>	

<p>election. Narcissistic leaders are going to make high risk executive decisions, so not just on the country but on the world. Even where they are making high stakes decisions based on ego not on taking the long view of what's best for world peace. My preference is to have a leader who isn't at all narcissistic, you don't want ego involved in political decisions. But then you won't find a president who doesn't have some confidence, in themselves, but when they are so narcissistic it becomes a concern that decisions can be so easily influenced and based upon short term ideals. Very tricky balance that the president needs to be aware of in themselves.</p>	
<p><b>QE3:</b> What are your opinions on NPD being classified as a Personality Disorder in the DSM-5 but not in the ICD-10? 54:20 – 56:46</p>	
<p><b>RM:</b> <i>Asks E3</i>  <b>EX2:</b> I mean I'm an American, my clinical work and my psychology is largely based around the DSM and not at all around the ICD-10 really at all.  <b>RM:</b> <i>That's interesting is the ICD more of a European system</i>  <b>EX2:</b> It's more around the world, the DSM follows the ICD codes, but the DSM is more developed in terms of mental health. The ICD is all about health problems for all parts of the anatomy. The DSM is more mental illness. If narcissism was taken out of the DSM it would not stop research from occurring, the actually tried to take it out and I wrote a paper concerning this, but yeah people still would study narcissism even if it was no longer listed. Just because its so fascinating and relevant and complex in nature. The ICD-11 is going to get rid of all personality disorders and just describe personality disorders based on traits, to narcissism will still be there maybe not by title but will still be possible to determine based on trait allocation.  <b>RM:</b> <i>Great thank you very much</i></p>	



**Interview with Expert 3**

INTERVIEW 3	THEMATIC NOTES
<p>Q1 What do you consider to be the key traits and characteristics of a person displaying narcissistic personality disorder? 0:00 – 3.20</p> <p><b>RM:</b> <i>Asks Q1</i></p> <p><b>EX3:</b> My understanding is that some argue there is a difference between social psychology narcissism and clinical psychology NPD, based on my experience, there tends to be a high degree of sense of superiority to others and a sense or a need to be associated with indicators of status. One patient I had told me he was diagnosed with bi-polar, even though he turn out to have NPD, this guy was so narcissistic in his belief of his own bipolar disorder that he claimed that the scientific world had produced an additional four disorders based on his case. So, there is this association with a sense of uniqueness and entitlement, I think an ironic failed status as well, you know boasting or a serious of excuses.</p>	
<p>Q2: What would you consider the difference to be between a person displaying narcissistic tendencies and a person with NPD? 3:21 – 4.53</p> <p><b>RM:</b> <i>Asks Q2</i></p> <p><b>EX3:</b> A person who has the disorder will have impairment in their social function, will frequently cycle through jobs, loses and changes friends frequently, just has a uncontrollable difficulty in the world. A narcissistic individual with just more apparent tendencies could have the same problem but would be able to manage their life and their societal relationships, at least to the degree of some control.</p> <p><b>RM:</b> <i>So when they are dysfunctional is essentially the key phrasing.</i></p> <p><b>EX3:</b> yeah something like that, although that is just one part of many dimensions one could use. Dysfunction refer not only to the individuals</p>	<p>The experts answer ties in somewhat with the discreet trait argument. Suggesting that being dsyfunctional could be one of the key structures used in determining whether a person has NPD. However, as the expert suggests, it is a complex manner, suggesting the effectiveness of a move away from discreet clinical diagnosis to a more discreet diagnosis based upon a judgement of presented trait scores.</p>

<p>behaviour but also how they manage their role in society. A person with NPD is also dysfunctional in society and in person.</p>	
<p><b>Q3: To what extent would you consider NPD to be prevalent in the general populace?</b> 4.54 – 5.56</p>	
<p><b>RM:</b> Asks Q3  <b>EX3:</b> I'm not sure but on a truly clinical diagnosed level, extremely small like less than one percent, perhaps higher.  <b>RM:</b> I have heard similar or as low as 0.01 percent, although this could be somewhat controversial.  <b>EX3:</b> I imagine he would know but it still need more research  <b>RM:</b> For sure.</p>	<p>Expert is not confident of his answer.</p>
<p><b>Q4: In your opinion what is the role of genetics as a contributor to NPD?</b> 5:57 – 7.08</p>	
<p><b>RM:</b> Asks Q4  <b>EX3:</b> Genetics play a role in everything, although to some extent, I guess I'm not really sure. Erm *pauses. The research that links narcissism to biological substrates, there isn't anything too conclusive, it can't be, the science is not there yet to make some conclusive decision. At least I believe so. There is some genetic component to it obviously, I think this one of the personality disorder, which is more influenced by the environment, more so than other sides might be by genetics.</p>	<p>Expert is not confident of his answer.</p>
<p><b>Q5: How influential would you consider society and the environment to be as contributors to NPD?</b> 7.09 – 8.06</p>	
<p><b>RM:</b> Asks Q5  <b>EX3:</b> There is a clear learning process than the environment has effect. On the diagnostic level for narcissism there is going to be a higher genetic component to that, than say in social psychology, who are measuring the general population. So, it is very difficult to say, one imagine it is around the 50/50 ratio. Society is more measurable of course, there are lots of studies which show the influence of narcissistic parents on children, and narcissistic</p>	

<p>bullies or the involvement of verbal or sexual abuse. NPD really has its roots in childhood where the environment can impact you in a huge way, in a way you can't deal with or understand. We can see this in the research, but I'm really not sure how to evaluate and answer this question.</p>	
<p><b>Q6: What aspects of NPD could be considered as providing positive personal characteristics?</b> 8.07 – 11:47</p>	
<p><b>RM: Asks Q6</b> <b>EX3:</b> So, I would say on a level where there is a disorder, there is like nothing that is positive about the disorder, its causing them major life problems. I mean if a person is narcissistic, but ont have NPD, they might have that grandiosity, and swagger and confidence which helps them climb the ladder and become successful ironic. There is an optimal level of anxiety to narcissism. Think about if you go to a Dr. you want the narcissistic DR. who says they are the best, to trust you. People are more likely to gravitate and trust those who seem to know what they are doing. Narcissists give off a good first impression, it's a double-edged sword with their inability to see their own flaws. Donald Trump has the ability to shrug off these criticizes and keep going forward. <i>RM: it's almost like it is not a problem if you do not acknowledge it. I mean we have recently had all those sexual allegation scandals, but I imagine if such a thing would happen to Trump, he simply would not acknowledge it and thus the people could not hold him accountable.</i> <b>EX3:</b> That behaviour is a very indicative of narcissists, thinking the boundaries no not apply to you and a prevalence to commit exhibitionary or exploitive sexual acts, another classic marker, Trump is most likely a sexual predator and he believes he has the right to be one.</p>	<p>Expert suggests that the severity of NPD on the individual and the environment around them means that there are no benefits to NPD.</p> <p>The expert references Donald Trump as an example of a narcissistic individual.</p>
<p><b>Q7: To what extent would you consider the DSM-5 interpretation of NPD to be accurate?</b> 11:48 – 12:19</p>	

<p><b>RM:</b> Asks Q7</p> <p><b>EX3:</b> I haven't spent much time on the DSM-5, it seems a little vague and only covers grandiose narcissism, or perhaps no other types. But honestly, I am not that familiar.</p>	<p>Expert is not familiar enough to give a conclusive answer</p>
<p><b>Q8:</b> How accurately do you believe the scientific community understands NPD? 12:20 – 14:17</p>	
<p><b>RM:</b> Asks Q8</p> <p><b>EX3:</b> I would say a minority of it is understood, but certainly not all. We are still just throwing things against the wall to see what sticks.</p> <p><b>RM:</b> I mean all of psychology is a pretty new field, at least scientific</p> <p><b>EX3:</b> I mean since we have no idea of what maximum understanding of NPD and psychology would look like or be reasoned its impossible to say how far we are along to truly understanding any mental disorders. We just have the metrics, but we are making progress especially within the last 20 years or so. Moving away from strict, yes or no categorisation of conditions and onto a more trait and percentage-based model, has really improved understanding of disorders.</p>	<p>Expert suggests that we still have a great deal more discovery to do on the subject matter. Inter-lapping with the discreet vs trait theme. The expert argues that the move towards trait theory has improved the understanding of narcissism.</p>
<p><b>Q9:</b> Which methodology of measuring narcissistic attributes do you consider to be the most valid and why? 14:18 : 17:31</p>	
<p><b>RM:</b> Asks Q9</p> <p><b>EX3:</b> Erm (ponders roughly 30 secs). Yeah, I'm not sure about this, as I've only used the NPI and a lot of the previous models I've used have long since been retired as standard practice in psychometrics.</p> <p><b>RM:</b> Okay no problem, what was your experience with the NPI like?</p> <p><b>EX3:</b> It's not a great measure, Josh Millers introduction of the FFM has improved its logic and direction as assimilation of character. The NPI itself doesn't take into consideration different types of narcissism so well, or rather as well as it could, so there is room there for improvement. Perhaps the introduction of subcategorizations looking at entitlement and exploitive-ness as traits, it how does this map on to psychopathy. I think it terms of</p>	<p>Expert not confident on NPD measures. Suggest that J. Millers FFM NPD instrument is a more valid and realising tool.</p>

<p>instruments to use it has become a little dated now. Although I'm sure they have revamped it since I last used it.</p>	
<p><b>Q10: Symptoms of NPD have been described as varying in appearance and recognition. Do you agree with this sentiment and why? Symptoms of NPD have been described as varying in appearance and recognition. Do you agree with this sentiment and why?</b> 17:32- 21:56</p>	
<p><b>RM:</b> Asks Q10  <b>EX3:</b> Yeah, I do, it's true with all diagnostic categories, with mental illness. The debate on whether personality disorders the five out of nine, captures it perfectly. Two individuals could have almost completely different symptoms, almost all of them different, but still be classified with the same disorder. For this reason alone, shows that there needs to be a change in classification. Trait based dimensional model, and perhaps a further focus on subcategories could help with this diagnostic problem  <b>RM:</b> <i>Since Vulnerable and grandiose are so different, arguably they should have their own disorder, but who knows. One of the reason I focused a lot of on the DSM-5 in this research is because much of the literature I looked at suggested that the DSM was the go to diagnostic model, do you agree with notion, have you used the DSM before?</i>  <b>EX3:</b> I have used the DSM a little, to be honest it mostly is for the purposes of insurances  <b>RM:</b> <i>That's interesting, for insurance?</i>  <b>EX3:</b> So when you are doing a clinical diagnosis you are looking for the symptoms, so and so displays these symptoms, that display with narcissistic tendencies, so we would treat that, rather than give the diagnosis of narcissism. Then for insurances purposes we would match them up with the DSM when needed, but I didn't have too much to do with that.</p>	<p>Expert suggest a divide in NPD would be good for diagnostic purposes.</p> <p>Expert also suggests much of the value of the DSM lies in its diagnostical interpretation for insurance. As a practising psychologist, the expert suggests this is a usual occurrence.</p>
<p><b>Q11: Which gender would you say is more like to suffer from NPD and why?</b> 21:57 – 23:50</p>	
<p><b>RM:</b> Asks Q11  <b>EX3:</b> You know I'm not entirely sure, but I would imagine that it is men, no sure why, probably partly</p>	<p>Suggests men are more prone to narcissistic thinking based on societal structures. There is a</p>

<p>to do with social distinction, patriarchal and males are taught to show dominance and toughness in society, all of those can be linked to narcissism. Women tend to be more compassionate, which is pretty much the opposite, as well as modesty.</p> <p><b>RM:</b> <i>So basically, our societal structure looks to nurture the opposite of narcissistic thinking for women.</i></p> <p><b>EX3:</b> Right, well it might in some way, in say the Kardashian way an aloofness there, but no mainly it does not.</p> <p><b>RM:</b> <i>That seems pretty controversial?</i></p> <p><b>EX:</b> Why? It has nothing to do with women, but marketing psychology and ancient societal structures. I think we have seen a move away In the more recent years. But women's rights have come a long way since the 20's, even since the 60's. That is very very recent in human history, so it will take some time for that cocky approach that could be considered narcissism in men. This is all starting to change now, with more women becoming managers and CEOs, moving towards a more neutral work environment over a male one.</p>	<p>crossover in themes in this answer.</p> <p>Between the genetics of being a female and the tolerant behaviour in a male-oriented work environment. The expert suggests that perhaps in the future we could see a change in narcissist attributes if the workplace becomes more gender neutral. Whilst this is occurring, I believe the expert is referring to upper management, which has tended to be dominated by men. Whether women would become more narcissistic or the work environment would become less narcissistic is unclear.</p>
<p><b>Q12:</b> To what extent do you believe age affects the severity of the NPD condition? 23:51 – 26:45</p>	
<p><b>RM:</b> <i>Asks Q9</i></p> <p><b>EX3:</b> *Pauses. I would assume that it doesn't have too great of affect, after a certain age. Of course, we tend to see narcissism develop out of people when they are young, in their twenties, as they get a little older, have some failures it starts to get reigned in. But the disorder is more severe and thus less tied to age, although I think it's more like a degree, maybe more likely to be ramped up in the teen, twenties years. When you reach the point when you have had enough failure as you move in the Kleinian depressive position more frequently they you reflect on your mistakes, but someone with NPD would be in schizoid position pretty much all the time, so it could take some time, that's why I'm not too certain about its relationship with age, NPD that's is not narcissism.</p>	<p>Expert is unsure in answer, but suggests that narcissism develops young, peaks in late teens and reduces throughout the next few years.</p>

<p><b>Q13:</b> In what aspects does substance abuse affect the severity of the NPD condition? 26:46 – 28:40</p>	
<p><b>RM:</b> Asks <i>Q13</i> <b>EX3:</b> Err I'm honestly not sure about that. Substance abuse is obvious shares a critical relation with clinical psychology, so I would imagine that you would see an increase in narcissistic traits or heightens destructive behaviour. Perhaps used as a crutch and thus be used in that way, but with narcissists, hmmm you have to imagine some narcissists take uppers and other stimulates to get that rush, I mean they are often very driven people, this again is narcissists not people with NPD, those who have the disorder would almost certainly be using drugs, if they are using drugs as a crutch to make it through the day. One imagines the abuse would be chronic use, as it tends to be in psychological disorders.</p>	<p>Expert states he does not have confidence in his answer. Suggest people with NPD may be driven towards using drugs as a crutch, particularly stimulants.</p>
<p><b>Q14:</b> What are some of the key issues facing the full understanding of NPD? 28:41 – 30:40</p>	
<p><b>RM:</b> Asks <i>Q14</i> <b>EX3:</b> Hmmm, well our recent trend towards individualism in the more recent years has seen that kind, sorry those kinds of narcissistic tendencies increase. I would say consolidate a lot of this research and put some practical measures in place. Hmmm key issues.. Large scale testing for sure, as much as possible, you can never really do enough, so more money for research in that regard. I mean when you really think about it, money in the major majority of research areas in narcissism. I would say we are very much in the middle, in terms of where human understanding is towards narcissism.</p>	<p>Suggests direction towards large-scale testing, looking at practical environments further. Suggests we are only halfway in our understanding of narcissism.</p>
<p><b>Q15:</b> In Stinson et al., 2008. The researchers argue that NPD is the least empirically researched of all personality disorders, to what extent do you agree with this sentiment and is there areas that require further research in your opinion? 30:41 – 34:08</p>	
<p><b>RM:</b> Asks <i>Q15</i> <b>EX3:</b> Really? That seems bizarre, I would have imagined it was one of the more researched. I don't think there is all that mush research done, on say histrionic but anti-social, borderline and NPD I</p>	<p>Expert disagrees with the Stinson Paper.</p>

<p>thought were the most researched. But you know I'm probably bias based on the background of my research, but yeah surprising and I can't imagine accurate.</p> <p><b>RM:</b> <i>Yeah it strikes me as odd, they argue, the authors, that because NPD has so much co-occurrence with other disorders, it is often referred to, but not actually the isolated focus on a paper.</i></p> <p><b>EX3:</b> Hmmm I'm not sure about that, seems errr not true</p> <p><b>RM:</b> <i>haha yeah probably, well the consensus is that are Stinson are wrong, among the people I have interviewed, but I suppose we don't really know.</i></p>	
<p><b>QC1:</b> What criteria would you use to classify someone as having a mental illness? 34:09 – 38:53</p>	
<p><b>RM:</b> <i>Asks QC1</i></p> <p><b>EX3:</b> <i>Hmm (pauses and considers some time) They have to be significant impairment in their daily functioning or significant emotional stress, so those are basically the criteria.</i></p> <p><b>RM:</b> <i>Do you like the terminology mental illness, because I have had some experts who didn't like it as a terminology because it draws that line once again.</i></p> <p><b>EX3:</b> <i>Well I see the point, it is called psychopathology for a reason, we need to be able to give a diagnosis and put names to illnesses, mental illnesses being no different for the purpose of treatment. I do prefer the points in traits-based approach, but it's obvious that people with a mental illness are mentally ill, after all one of the criteria is that society can see this in them when they interact. Also, when looking at genetical factors, having a mental illness means there is a good chance your offspring will inherit certain aspects of this or perhaps even the disorder themselves, so in this respect it is worth thinking of mental illness as a disease.</i></p>	<p>Expert supportive of mental illness terminology. Suggests that it is necessary for treatment purposes. Considers mental illness to be a disease.</p> <p>A thematic crossover with views on discreet versus trait theory, with the expert suggesting a trait-based approach that produces some discreet diagnostic markers for treatment purposes.</p>
<p><b>QC2:</b> To what extent would you consider a personality disorder to be a mental illness? 38:54 – 39:45</p>	
<p><b>RM:</b> <i>Asks QC2</i></p>	<p>Expert suggests mental illness and personality disorder are a</p>



<p><b>EX3:</b> I guess like the previous question, but I mean a personality disorder is definitely a mental illness, I mean they are somewhat interchangeable as term for a reason. I guess you could argue that they aren't on the grounds of the mental illness term being a somewhat undefined term, I mean I suppose a personality disorder is too, but regardless there is not much difference.</p>	<p>somewhat interchangeable term, with all personality disorders being considered a mental illness.</p>
<p><b>QC3:</b> To what extent do you consider NPD to be a mental illness? 39:46 – 40:20</p>	
<p><b>RM:</b> Asks <i>QC3</i> <b>EX3:</b> Yeah, I mean, it's both a mental disorder and a personality disorder, so for sure it's a mental illness, I think it's important that we distinguish once again though between NPD and narcissism, everyone of course has some narcissistic tendencies and they range in severity, and for the severity required to be classified as NPD, should hopefully 100% align with the notion that person is mentally ill and needs treatment.</p>	<p>Expert suggests that when diagnosed correctly NPD is without question a mental illness. Expert once again highlights the required severity for someone to have NPD rather than just narcissistic tendencies.</p>
<p><b>QE1:</b> What aspects of NPD could be viewed as dangerous to society? 40:21 – 43:23</p>	
<p><b>RM:</b> Asks <i>QE1</i> <b>EX3:</b> Superiority, entitlement, some of the general traits of narcissism which are destructive. Also, boundary issues, so frequently sexual assault, or abusive actions of some kind, physically or verbally, tends to be more verbal though. I mean with narcissists its very much a constant mind game of how to conquer others, analysing weaknesses and flaws in a person's lifestyle so it can be used as leverage at a later time, but yeah for sure they can be dangerous.</p>	
<p><b>QE2:</b> In your opinion, in what ways can those with both NPD and a position of power impact society? 43:24 – 47:12</p>	
<p><b>RM:</b> Asks <i>QE2</i> <b>EX3:</b> Well I mean we have a president right now who is a good example to look at. One thing that is interesting is the kind of people Trump employs around him, tend to be either these kind of weasel</p>	<p>Once again Trump is mentioned. Whilst this is an interesting response, I do not believe that the interview questions focus enough on the political to make</p>

people who suck up to him, or some other less bright pawns, he isn't putting anyone in a position of power that might be able to topple him. It's the reason why he picked someone so unlikeable as Pence to be Vice President.

**RM:** *Hmmm well I have a theory that Trump is going to help democracy, by rallying everyone together against him, you guys are going through a mad rodeo right now, but its bringing people together to put aside their differences and then look to bring things back to normality.*

**EX3:** It could be the case, of course the real issue is Trump is only elected for four years, but the people he has put in place for a long time, especially in the congress and in the senate, we could be paying for these mistakes for years to come.

**RM:** *Well at least for research purposes we get to see a narcissist put in the biggest position in the world.*

**EX3:** Hmmm (sad head shake)

**RM:** *Do you think Trump is more or less likely to put other narcissists people in positions of power, I mean on the one hand they are like him, on the other hand he could see that mentality as being competitive.*

**EX3:** hmm good question I believe it could go either way, I believe that what has happened, is a little blend of each, I mean he could be falling for their tricks, like Scaramooch, go fired immediately because they are kind of similar people, I mean you look at Trump's history, he has a legacy of being the figurehead of businesses, that didn't work, like gold plate airlines, the trump university, mad ideas that pretty much always failed, and trump gets away with it and just sacks the head of that project, as an icon as a brand he always has something to sale even when he doesn't, he's part of the legacy of what it means to be American. Not the American we want, but certainly one the world see as an ideal of a great American or the dream that we all have. Hopefully this view is somewhat outdated at this point, but yeah, it's a sad state of affairs.

any valid comments on NPD within the political sphere. It is worth noting, however, how often Donald Trump is brought up as a classic example of a person suffering from NPD who is also in the public eye.

**QE3:** What are your opinions on NPD being classified as a Personality Disorder in the DSM-5 but not in the ICD-10?

47:13 – 48:16

**RM:** *Asks QE3*

**EX3:** Err hmm, not too much to say on that, I mean the ICD looks at all types of medical conditions right, so it theoretically shouldn't go into as much detail as the DSM, I mean though even if the occurrence is one in a million it should really be present as a disorder, but honestly, we don't have too much dealing with the ICD-190.

**RM:** *Okay no problem, thank you very much for the interview.*

Expert is not familiar enough with the ICD-10 to pass any valid judgement.

## Interview with Expert 4

INTERVIEW 4	THEMATIC NOTES
<p>Q1: What do you consider to be the key traits and characteristics of a person displaying narcissistic personality disorder? 0:00 – 2:09</p> <p><b>RM:</b> Asks Q1</p> <p><b>EX4:</b> For me the big picture, is grandiosity is associated with self-esteem which is dependent upon social approval. There is this need to have approval for the approvals of others. When that approval is not there then you start to see these people lash out in some way. They tend to be driven individuals.</p> <p><b>RM:</b> And do you distinguish a difference between vulnerable and grandiose narcissism?</p> <p><b>EX4:</b> I think it you go to Kohut, there are pull that suggests a vulnerable and grandiose divide. The grandiosity is there relative to what, I mean its what diagnosticians focuses on. One of my paper was on sex roles and narcissism, and basically the results suggest that grandiosity seems to be more associated with males. And the vulnerability aspects seem to be more focused around women.</p>	<p>Expert suggest there is a divide between grandiose and vulnerable, with women being more likely to display vulnerable narcissism and men grandiose.</p>
<p>Q2: What would you consider the difference to be between a person displaying narcissistic tendencies and a person with NPD? 2:10 = 2:55</p> <p><b>RM:</b> Asks Q2</p> <p><b>EX4:</b> differentiate between adaptive and maladaptive in all disorders, maladaptive would be upon the social environment and on self-esteem and moves towards greater and greater intolerance and frustrations within the environment, coming out in anger and aggression. The difference being the degree of severity based upon control.</p>	<p>Suggests that the key difference between the two is the degree of severity based on control.</p>
<p>Q3: To what extent would you consider NPD to be prevalent in the general populace? 2:56 – 4:16</p> <p><b>RM:</b> Asks Q3</p> <p><b>EX4:</b> I actually don't know that, but I would say that research demonstrates a continual narcissism is present in everyone to some degree.</p>	<p>Suggest narcissistic traits appear in everyone and can be reduced with a good ethical role model.</p>

<p><b>RM:</b> <i>Yes, that's pretty much the response I have gotten from other experts, that narcissism acts on a continuum and is present in everyone.</i></p> <p><b>EX4:</b> in my time I found myself influenced greatly by Kohut, I think that individuals have a continuum of self-representation, with people having internalised self-structures, I think they are variants between people on their narcissism based upon where they are and their environments, which could alter whether the narcissist will have some semblance of maturity as well. So a parent or guardian that gives them a morally justice direction.</p> <p><b>RM:</b> <i>Yes, that makes sense.</i></p>	
<p><b>Q4:</b> In your opinion what is the role of genetics as a contributor to NPD? 4:17 – 5:28</p>	
<p><b>RM:</b> <i>Asks Q4</i></p> <p><b>EX4:</b> I have no honest idea, I guess based on a what we know, I mean Freud would suggest that it's a common a true characteristic in all. Are there variations in narcissism based upon genetics, that is hard to say? I mean we will get into the sex roles later, but you know the data is not there really.</p> <p><b>RM:</b> <i>Yeah that seems to be one of the running themes of this research is that we simply do not know too much about the role of genetics, even on the most ball park of level.</i></p> <p><b>EX4:</b> Part of the problem, is specifying with precision exactly what pathological narcissism, there could be some ideas which test this, so much is based upon speculation though.</p>	<p>Expert is unsure of nature versus nurture argument with respects to narcissistic behaviour.</p>
<p><b>Q5:</b> How influential would you consider society and the environment to be as contributors to NPD? 5:29 – 12:47</p>	
<p><b>RM:</b> <i>Asks Q5</i></p> <p><b>EX4:</b> Well my interested in narcissism comes from need to understand it in relation to social and environmental perspectives. There were two times early on in my career, a religious critic of psychology and the study of the works of Peter Lash. Lash suggests that the Western world has become exceptionally materialist and has built society around the striving of consumption. So there has</p>	<p>Suggests that contemporary structures promote a cult of narcissism, based upon the transition from religion to individualism.</p> <p>One reference the experts makes is to his paper on narcissism within Iran, comparing how</p>

been a lost in community as a force that helps give structure to human life. So, some of the criticism the most basic black and white ideas, said things like contemporary society and contemporary psychology were promoting a cult of narcissism. I would say things are a lot more complicated than they used to be, having a culture which is increased communal, less religious and more disconnected from value systems has aggravated tendencies towards a narcissistic disposition.

**RM:** *Yes I would agree with you, when you refer to the west do you mean specifically America, or Europe and that other countries which may fall in categorisation*

**EX4:** Yeah absolutely, I did a study in Iran though, in terms of the dynamic of narcissism, the family resemblance of the family, or rather the difference is in Iran, there is a religious submission, under Islam, which looks to squash some of the beliefs and goals that may back a person more narcissistic. By putting an emphasis on complete control of Allah, and one of the tenets that specifically focuses on charity.

**RM:** *I have spent some time in Muslim culture, about 15 years, and Muslim culture varies hugely depending on the country. And one of the tents of Islam is based upon ego and how you should view yourself as a servant to god, I'm not sure if people in Western society are under the same belief, although one could definitely draw similarities between Christianity and Islam. More cross-cultural studies should really be undertaken.*

**EX4:** well Christianity does have that same submission that is apparent in Islam, the difference is the culture, western Christianity, isn't organised, that's not to say there are not all kinds of problems with Muslim societies, but I do think in those kinds of society, that the prevalence of narcissism is not so common, because of there tenants.

**RM:** *I'm not sure if I have seen any difference in narcissism levels regardless of where I have been in the world, but then I was not paying attention and its speculation. I was wondering what your opinion of social media as a contributor to narcissism?*

Muslims and Christians take on their position under God. The expert suggests that by having Allah as all-powerful and having tenants that specifically focus on charity in a way Christian does not, there is reduced narcissistic tendencies. He links family values in conjunction with religion as a specific for the apparent reduced symptoms. This seems like a somewhat controversial claim. However, given the lack of focus the interview questions applied to religious constructions in combination with narcissism, the data did not produce a satisfactory theme.

The expert goes on to discuss the relationship social media has with narcissistic attributes, arguing that the transition from face to face into internet communications has caused a breakdown in optimal frustration points. In other words, the person is not forced to overcome obstacles of endurance. Instead, having the alternative of using others and sheer brute-headedness to succeed. Since this goes somewhat against a normal human life, the behaviour is altered accordingly. If the narcissistic doesn't encounter this optimal frustration by a certain point, there is no reason for the behaviour to change, as it has been successful so far.

*Especially something like Facebook which gives you mathematically basis behind your popularity.*

**EX4:** There has been quite a few studies that look for narcissism in Facebook and it seems that these kind of social media, is encouraging this individualism, and reduce tendencies toward optimal frustration which may promote narcissism. I mean according to Kohut, what is supposed to happen, narcissism is just fine in early life. And you go through times where you are optimately frustrated in your relationships, and what is supposed to happen is that you internalise sources of self esteem not allows for change in the understanding of relationship. So social media effects this optimum frustration does not occur so well in social media

**RM:** *How so?*

**EX4:** Well it requires that person to person interaction, so seeing emotions and experience so called real life, by contrast social media in its current form is a primitive spartan version of this that doesn't provide the necessary feedback to stimulate this optimal frustration.

**Q6:** What aspects of NPD could be seen as providing positive personal characteristics  
12:54 – 17:43

**RM:** *Asks Q6*

**EX4:** Leadership, self-esteem, appropriate assertiveness are one of the social issues looked at across cultures is the history of the last man. I wrote a paper that argues that narcissism is essentially narcissism, and so one of the things that must be true is commitment and assertiveness, so one of the strengths of narcissism allow the person to rise to the head of society. You know it's a self-fulfilling thing that narcissistic tendencies promotes more opportunities for the individual which promotes narcissism.

**RM:** *Could these characteristics be achieved without narcissistic tendencies?*

**EX4:** Hmm from the poles point of the narcissism, the non-ambitious to non-grandiose pool, could have more compassion but does not have the assertiveness that comes with that grandiosity. I think at the heart of democracy and leadership the necessary self-

The expert suggests that narcissism can be divided along Kohut's idea of two poles of narcissism, these being a bipolar structure characterized by grandiosity at one pole and dependency at the other. It is not apparent if people can move between these positions or rather, are likely to portray only a single pole when acting narcissistically.

Expert also referring to synthetic narcissism, this being narcissism created out of a social environment. This idea of synthetic narcissism would be an

<p>esteem is based in this idea of being somewhat narcissistic, they in a sense are linked in a manner which has been orchestrated by modern society. In Kohut's system the idea is to take both poles and join them together somewhat.</p> <p><b>RM:</b> <i>Could you explain the poles please?</i></p> <p><b>EX4:</b> In Kohut's analysis of narcissism, he says the self emerges as a bipolar structure characterized by grandiosity at one pole and dependency at the other.</p> <p><b>RM:</b> <i>Hmm when you look at monarchy reigns the ones who attempted to be modest are the ones often forgotten and seen as weak in comparison to the more narcissistic members of that family.</i></p> <p><b>EX4:</b> Yeah I would imagine that is correct, there seem to be a host of factors surrounding popularity, in drew westerns book he talks about synthetic narcissism as a methodology of combing the two poles, in a maturing, so I think you can't have leadership without that grandiosity and ambition but at the same time you need to be aware of the compassion and submission required in understanding others.</p> <p><b>RM:</b> <i>What exactly is synthetic narcissism?</i></p> <p><b>EX4:</b> It refers to a kind of narcissism that develops in a situation that is contrary to the ordinary. I one of my papers, the synthetic narcissism looked at was based around gender roles. If a woman, acts like a man, in a man's position, doing masculine work, do you see women develop a kind of narcissism normally related to men, as in an increase in grandiose characteristics. The correlation is actually quite strong.</p>	<p>interesting topic to delve into further in future research.</p>
<p><b>Q7:</b> To what extent would you consider the DSM-5 interpretation of NPD to accurate? 17:54 – 19:12</p>	
<p><b>RM:</b> <i>Asks Q7</i></p> <p><b>EX4:</b> I don't mean to be rude, but I don't really care about the DSM</p> <p><b>RM:</b> <i>That's interesting because it seems the DSM is the divided on whether or not it should be relevant.</i></p> <p><b>EX4:</b> Actually, some of my first research was predicting and finding inverse relations between empathy, I have some interaction with the DSM for</p>	<p>Expert has no interest in the DSM and no comment on the question.</p>



<p>this, but I'm not really interested in diagnostic. I'm more interested in theoretic classification.</p>	
<p><b>Q8: How accurately do you believe the scientific community understands NPD? 19:13 – 20:10</b></p>	
<p><b>RM:</b> <i>Asks Q8</i>  <b>EX4:</b> Who knows, I'm not sure how accurately I understand narcissism. When I first started my career, there was almost simplistic ideas, with all a few different beliefs and interpretations, now it's become more complex, I think that it is a very complex issue, that requires significant research  <b>RM:</b> <i>Yeah, I mean some psychologists have dedicated their entire lives to narcissism, like Kernburg and still there is so much to be done. Seems like it's a case of hidden depth and the more you know the less you know</i>  <b>EX4:</b> Haha that's why my hair is white. But to tell you the truth I would say, not very and I could still see us making huge headway with mental health, especially with the influence of machines and the internet. Advances in technology we can't even imagine.</p>	<p>Expert suggests that we have limited knowledge on the subject matter and we could potentially see large development in the near future. He references the involvement of the internet and machines, suggesting the kind of development we will make will most likely not be done by a single person, or even humans at all.</p>
<p><b>Q9: Which methodology of measuring narcissistic attributes do you consider to be the most valid and why? 20:11 – 23:51</b></p>	
<p><b>RM:</b> <i>Asks Q9</i>  <b>EX4:</b> I really don't think anything is better than anything else, I use questionnaires normally, but anyone using whatever method they want is a good way to generate data and continue to pioneer, it's about the conversation, I don't value any methodology really over the others.  <b>RM:</b> <i>which measures have you used in your own work so far?</i>  <b>EX4:</b> The main one was the NPI, this helped me clarify that narcissism was a spectrum, I've also used the narcissism scale, in recent versions of the dark triad, there is a narcissistic trait scale I have used, a Margolis scale, all kinds.  <b>RM:</b> <i>You have used quite a few scales, the last experts I asked him about the NPI because that is the</i></p>	<p>Expert suggests use of questionnaires, citing some success with NP and Margolis scale. Recommends using multiple approaches, making sure the scales all focus on one particular form of narcissism so as to not skew results. This again suggests a difference in the types of behaviour displayed in NPD.</p>

<p><i>only one he used, do you recommend a particular scale, or rather find most valid.</i></p> <p><b>EX4:</b> Well this predisposes our previous topic that suggest we have had accurate measure for narcissism, we don't know that of course, I do believe it is important to use multiple measures, the NPI proved to have all kinds of advantages for me, my friend in Iran, used grandiose narcissism scales in Iran and in the united states too and that seemed fine. Usually whatever model you are going to be using usually has some research behind it, although I am an advocator of using unique mythologies, for testing sake.</p> <p><b>RM:</b> <i>There really doesn't seem to be a downside to using multiple measures, just time.</i></p> <p><b>EX4:</b> Well the research I have been doing into adaptive and maladaptive, using some of the new scales, that interact with the NPI and seeing how they correlate, using more and more measures give you a good perspective on what exactly you are measuring.</p>	
<p><b>Q10:</b> Symptoms of NPD have been described as varying in appearance and recognition. Do you agree with this sentiment and why? 23:52 – 25:24</p>	
<p><b>RM:</b> <i>Asks Q10</i></p> <p><b>EX4:</b> I don't know, I would say that things I have suggested before, that an element of maladaptive narcissism requires social support, so if you have individuals and societal structures, and Kohut suggest with self-object function, there might be immature narcissism obscured by nurturing self-objects, when they disappear from relationships, then something you could then find in an appearance.</p> <p><b>RM:</b> <i>You mentioned earlier a model by Kohut that suggested two poles.</i></p> <p><b>EX4:</b> Yes, in this respect narcissism is divided, although you see some cross over between the grandiose and the dependant pole.</p> <p><b>RM:</b> <i>Do you believe they should be categorised differently under description of NPD.</i></p> <p><b>EX4:</b> Probably yes.</p>	<p>Expert again refers to the Kohutian explanation of narcissism.</p>
<p><b>Q11:</b> Which gender would you say is more like to suffer from NPD and why?</p>	

25:24 – 30:55

**RM:** Asks Q11

**EX4:** Yes, I noticed you said suffer, I think that the people around them tend to suffer more.

**RM:** *Ha-ha yeah, I think it retrospect I would have altered some of the phrasing and terminology in these questions.*

**EX4:** My data suggest that male masculine shows that there is a tendency for narcissism to be more present in males. We did a study in Iran which measures the dirty dozen measures the dark triad in school teachers in central iran, to make it short and sweet, males are going to be higher, if you look at masculinity even in females, this tends to predict narcissistic characteristics.

**RM:** *What exactly do you masculinity in females?*

**EX4:** If you go and look at the sexual inventory there is an inverse of positivity evaluated masculinity, positivity evaluated femininity, a bipolar masculine and feminine scale, then there are smaller scales which look at socially devalued forms of masculinity and femininity, so when I say to you that masculinity predicts narcissism in males and females, both males and females with show a spectrum of relationships which are more masculine or feminine relative to sexual stereotypes, and vice versa, and so masculinity of this kind measured in females and males alike, predicts narcissism.

**RM:** *So would you say that it's caused by hormones like testosterone?*

**EX4:** I don't know honestly, the dirty dozen had this evolutionary process, because of selection pressures, it is just a natural characteristic of males, I am sceptical of physiological reductionism, not because it is not important but because it's part of a complex picture, I mean it would make sense, but I do not have any definitive evidence. I mean on the one hand testosterone would seem to influence narcissistic tendencies, but then you see these characteristics in women, so it could be that the social construction of masculinity promotes narcissism, and the social structure of femininity promotes something different.

Expert suggest that narcissists tend to be male. Expert also suggests a factor of 'masculinity' can be shown in causal link to narcissism. Suggesting that such a characteristic in women could result in more narcissistic behaviour. Both males and females with show a spectrum of relationships which are more masculine or feminine relative to sexual stereotypes, and vice versa, and so masculinity of this kind measured in females and males alike, predicts narcissism.

<p><b>RM:</b> <i>Yeah, a common theme this research has been the lack of understanding on the genetics aspects of NPD. As much of your work is related around sexuality and its relationship with narcissism, at least from what I understand, is there anything else you would like to add.</i></p> <p><b>EX4:</b> I think that basically we have covered it, but it's not just genetic sex that produces narcissism, but the prevalence of the masculine mindset. We don't know the equations, we are just taking wild stabs.</p>	
<p><b>Q12: To what extent do you believe age affects the severity of the NPD condition? 31:36 – 35:50</b></p>	
<p><b>RM:</b> <i>Asks Q12</i></p> <p><b>EX4:</b> Kernburg theory that aging is the final insult to the narcissist, I think that age and aging is hopefully an optimal frustration, and within a Kohutian framework would lend to maturing.</p> <p><b>RM:</b> <i>Yes, I have heard this phrase before that ageing is the final insult on narcissism, what would you say about the older you are the more likely you are to get set in your way. For example, our good friend Donald Trump, is he at the point where his narcissism is set in such a way that it cannot be altered?</i></p> <p><b>EX4:</b> Well he was such a privileged person that he never got that frustration. I did this paper on narcissism based on parenting styles, I contrasted permissive, authoritarian and authoritative and permissive and authoritarian was show to contribute towards narcissistic tendencies, not a huge effect but its there. <b>We with regards to Trump he has had a life of minimal frustration, because of his wealth and situation so I don't know what to say about his age and narcissism, it is apparent that it would be extremely difficult if not impossible to get some sort of mindset change out of Trump at this point, he listens to himself above all else, above logical reasoning. This is of course one of the reasons why it is so difficult to treat NPD.</b></p>	<p>Expert suggest that age is the true enemy of narcissism. In trump's case however a combination of environmental factors, father involvement, privilege , wealth and lack of optimal frustration has meant the narcissism has gone unchecked or even promoted.</p>
<p><b>Q13: In what aspects does substance abuse affect the severity of the NPD condition 35:51 – 36:50</b></p>	

<p><b>RM:</b> Asks Q13</p> <p><b>EX4:</b> I don't have a good answer about that, I suppose theoretically that would make sense, it depends on the substance.</p> <p><b>RM:</b> <i>yes of course, the difference between stimulates and relaxants.</i></p> <p><b>EX4:</b> One would assume that narcissistic individuals would tend to abuse substances which fall in line with their ethos as a narcissist, I guess the theoretical point is if a narcissist finds themselves in an environment which does not in optimal frustration, they may substitute social supports for chemical support, I mean that's all very plausible.</p>	<p>Expert is unsure how to answer question validly, suggests a relationship between people unable to achieve optimal frustration and seeking out chemical support.</p>
<p><b>Q14:</b> What are some of the key issues facing the full understanding of NPD? 36:51 – 38:51</p>	
<p><b>RM:</b> Asks Q14</p> <p><b>EX4:</b> One of my problem is reducing issues to the individual, so I think that narcissism needs to be understood in terms of aggregate cultural dynamic, I think that is an important idea. I think cultural environment that doesn't look to be individualistic, doesn't have submission, maybe not Muslim submission, a kind of submission to ideals that control ambition, and the family dynamic and the cultural dynamic, I don't know if that answers what you looking for?</p> <p><b>RM:</b> <i>Mainly I was just wondering if you consider there to be large holes in the understanding of narcissism?</i></p> <p><b>EX4:</b> Hmm (pause) well honestly, I'm not sure, perhaps a wider issue of larger aggregation of views on narcissism, it is important to use as many different methodologies as possible.</p>	<p>Expert is unsure on future direction for narcissism, proposes investigation towards narcissism and aggregate cultural dynamic.</p>
<p><b>Q15:</b> In Stinson et al., 2008. The researchers argue that NPD is the least empirically researched of all personality disorders, to what extent do you agree with this sentiment and is there areas that require further research in your opinion? 38:52 – 41:20</p>	
<p><b>RM:</b> Asks Q15</p> <p><b>EX4:</b> I don't have enough knowledge or understanding of all personality disorders to comment on that accurately, psychopathy and antisocial disorder, borderline have been around a</p>	<p>Suggests that NPD is not least researched disorder. Argues for the influence of technology aggravating narcissistic tendencies.</p>

<p>long time, but the least that seems unlikely, you could google search each disorder and count the citation, but the least seems very unlikely</p> <p><b>RM:</b> <i>I agree the idea of narcissism can be seen as a central tenant in earlier psychology.</i></p> <p><b>EX4:</b> Yeah exactly, I also think your comment on Trump reflect the zeitgeist on understanding narcissism, its widely talked about.</p> <p><b>RM:</b> <i>With the rise of social media, and the ability to have a mathematic calculation of popularity has really upped that ability to thrive on individualism, it's a very widely talked about issue. I real societal issue. Perhaps that is just the nature of capitalism</i></p> <p><b>EX4:</b> That's exactly right, technology aggravates this tendency, and in conjunction with capitalist structures and ever-increasing technology, they all work with one another to exacerbate the symptoms.</p>	
<p><b>QC1:</b> What criteria would you use to classify someone as having a mental illness? 41:21 - 43:36</p>	
<p><b>RM:</b> <i>Asks QC1</i></p> <p><b>EX4:</b> You are going to hate me for this</p> <p><b>RM:</b> <i>Ha-ha you don't like the terminology 'mental illness' right</i></p> <p><b>EX4:</b> Well you know back in the old days when getting a diagnosis and working with patients was common and they needed a terminology, this term 'mental illness' is fine. I now don't think we need these terms, it isn't reflective of the times.</p> <p><b>RM:</b> <i>Okay unfortunately the next two questions specifically reference mental illness, and I don't want to alter the questions for the sake of validity. Would you mind giving me your thoughts regardless?</i></p> <p><b>EX4:</b> Sure</p> <p><b>RM:</b> <i>So just for reference sake if you had to classify a person as mentally ill how would you go about it?</i></p> <p><b>EX4:</b> I mean I just wouldn't I don't like to think with that terminology. I mean if the diagnosis helps people, but I don't think it does honestly. Doctors these days diagnosis people far too fast with far too much need to place a label on a disorder. They aren't interesting in listening as much as trying to quickly</p>	<p>Expert does not agree with the use of mental illness as a terminology, describing it as unreflective and old fashioned.</p>

<p>diagnosis. I'm not saying that it was different in the past, only that it is something we should be addressing now. I'm not even opposed to making a diagnosis like that, just not in the manner its used. For mental illness I just don't believe in it, so I wouldn't diagnosis someone as mentally ill.</p> <p><b>RM:</b> Sure, no problem let's move on.</p>	
<p><b>QC2:</b> To what extent would you consider a personality disorder to be a mental illness? 43:37 – 44:07</p>	
<p><b>RM:</b> Asks <i>QC2</i></p> <p><b>EX4:</b> Here is what I would say is useful it's nice to have diagnostic criteria to help with diagnosis, I think that with personality disorders all focus on a serious point of concern and should be managed accordingly.</p>	<p>Does not necessarily agree or disagree that PD's should be considered a mental illness.</p>
<p><b>QC3:</b> To what extent do you consider NPD to be a mental illness? 44:08 – 44:26</p>	
<p><b>RM:</b> Asks <i>QC3</i></p> <p><b>EX4:</b> Yeah I mean the same as before, a person with NPD is mentally ill by the definition you want to go by.</p>	<p>Suggests that a person with NPD is mentally ill but would not use the terminology.</p>
<p><b>QE1:</b> What aspects of NPD could be viewed as dangerous to society? 44:27 - 44:51</p>	
<p><b>RM:</b> Asks <i>QE1</i></p> <p><b>EX4:</b> Well if you have narcissistic leaders who doesn't not have submission, I think that this kind of authoritarianism leads to serious issues. There is an incentive to try and get away with as much as possible in this situation and that is always dangerous.</p>	<p>Suggests that unchecked narcissism leads to further narcissistic tendencies and unethical application of power.</p>
<p><b>QE2:</b> In your opinion, in what ways can those with both NPD and a position of power impact society? 44:52 – 45:50</p>	
<p><b>RM:</b> Asks <i>QE2</i></p> <p><b>EX4:</b> Well its Trump, its Putin, its Assad, it's a great deal of these powerful leaders, especially in developing worlds, no one is checking the power of these people, so it is no wonder it goes to their heads. But like I said before I'm less concern with the leaders and instead the mindset of the people.</p>	<p>Expert suggest that the real reason trump was elected was based on the ignorance of the people. A lack of education and critical thinking mean they get easily misled.</p>

<p>There is this meshing of very submissive people who can be used by very assertive people and I think it is a mixing of the two that leads to this issue. Without all people trying to educate themselves critically on matters we are doomed to this kind of mediocrity.</p>	
<p><b>QE3:</b> What are your opinions on NPD being classified as a Personality Disorder in the DSM-5 but not in the ICD-10? 45:51 – 46:26</p>	
<p><b>RM:</b> <i>Asks Q8</i> <b>EX4:</b> I completely clueless how to answer that I'm afraid I do not have too much dealing with either.</p>	<p>Expert is unsure how to answer question validly.</p>



**Interview with Expert 5**

INTERVIEW 5	THEMATIC NOTES
<p>Q1: What do you consider to be the key traits and characteristics of a person displaying narcissistic personality disorder? 0:00 – 1:39</p>	
<p><b>RM:</b> Asks Q1 <b>EX5:</b> I would mostly say in terms of low agreeableness and high extraversion, lack of Concern for others, Grandiosity, attention seeking, interpersonal dominance, those kinds of things.</p>	
<p>Q2: What would you consider the difference to be between a person displaying narcissistic tendencies and a person with NPD? 1:50 – 3:04</p>	
<p><b>RM:</b> Asks Q2 <b>EX5:</b> The key difference is probably one of trait extremity NPD should be more associated with impairments. So, for me it's mostly a matter of degree/intensity compared to tendencies. <b>RM:</b> And this impairment might be something like not functioning normally in society. <b>EX5:</b> Right so like Impairments within relationships work, school and such. I think it's just a result of these extreme traits. So that would be more of the kind of sliding scale type thing rather than the definitive line</p>	<p>Suggests it is a matter of degree and intensity. Requires an impairment in relationships and work environment.</p>
<p>Q3: To what extent would you consider NPD to be prevalent in the general populace? 3:05 – 3:59</p>	
<p><b>RM:</b> Asks Q3 <b>EX5:</b> I'm going to go with the DSM estimates to me somewhere between 3 to 5% we're like we're talking about the full-blown disorder. <b>RM:</b> According to Josh Miller he reckons it's like much lower even less than 0.1% but I think it depends how you look at it. <b>EX5:</b> I would say that he is most likely correct.</p>	<p>Expert is unsure on prevalence in general populace, arguably guesses quite high.</p>
<p>Q4: In your opinion what is the role of genetics as a contributor to NPD? 4:00 – 5:44</p>	

<p><b>RM:</b> <i>Asks Q4</i></p> <p><b>EX5:</b> Similar to my other answers. As a traits theorist, I think they reflect the same genetic influence as the traits that contributed to them. 45 to 60% from genetic variance. From a behavioural/genetics standpoint.</p> <p><b>RM:</b> <i>Do you have any kind of understanding of what researchers are focusing on NPD specifically the focus on genetics.</i></p> <p><b>EX5:</b> No.</p> <p><b>RM:</b> <i>I haven't either. it seems it's difficult to research, so what would your figure be based upon?</i></p> <p><b>EX5:</b> if you look at the general Five Factor model traits. I'm just comparing it to General personality traits.</p>	<p>Expert suggest that they are unsure how to answer validly with regards the role of genetics.</p>
<p><b>Q5: How influential would you consider society and the environment to be as contributors to NPD?</b> 5:45 – 8:24</p>	
<p><b>RM:</b> <i>Asks Q5</i></p> <p><b>EX5:</b> I suspect there are a lot of other personality traits which don't show a whole lot of shared Influence. Asperger's shows about 10% due to shared environments and the rest is due to unshared environments or measurement error. So, while I agree that the environments important I think it's probably the way that genetic shape it. So, I'm convinced That the traits lead to those environments themselves?</p> <p><b>RM:</b> <i>Could you explain that more detail?</i></p> <p><b>EX5:</b> There is good evidence, like if you look out of a lot of studies with twins, that have been separated at birth they look remarkably similar despite not being together and not living in the same environment. One of the big ideas behind that is similar genetics are constructing similar environments *inaudible* way people respond to the types of choices they make. It seems that their genes heavily influenced the kind of decisions that they make. I think a narcissist is not going to allow himself to spend the whole lot of time in environments that wouldn't support the way he seems himself/his view of themselves. So, they seek</p>	<p>Expert argues strongly in favour of the strength of genetics within the nature v nurture, suggesting that twin studies have helped positively demonstrate this argument.</p> <p>Expert also suggest the narcissist is likely to move environments if the environment does not support his tendencies. If he can find an environment that supports these tendencies, there is no reason to move.</p> <p>There was an issue with the recording software with this interview, so the backup recording on the researcher's phone was used. This resulted in some audio difficulties</p>

<p>out people that would support their grandiose and such.</p>	
<p><b>Q6: What aspects of NPD could be considered as providing positive personal characteristics?</b> 8:25 – 10:44</p>	
<p><b>RM:</b> <i>Asks Q6</i> <b>EX5:</b> I think traits such as confidence, social dominance and arrogance are not necessarily bad things. I think to the point where they become extreme then it becomes debilitating to the person. I think not having the flexibility in how intensely they display those traits, is what can become so impairing for narcissists. <b>RM:</b> <i>In that respect I suppose it depends on how much you can hide certain aspects of these NPD from your peers. Under the consideration that you are very narcissistic like Patrick Bateman from American Psycho level and he's just holding it just under the surface. Once you reach a certain point in a then I guess it becomes debilitating in all fronts</i> <b>EX5:</b> I also think it becomes very hard to hide the further down you go. You don't have a lot of options by responding different ways. They tend to be liked in initially and as time goes on other people's impressions of them decreases. I think that happens in most cases the more interactions you have with them the more debilitating they are because they can't regulate their behaviour.</p>	<p>The expert suggests the difference is based upon the level of debilitation and the degree of flexibility to which people extend their narcissistic tendencies. The expert also suggests he more narcissistic an individual is the less control they will have over their positive aspects of narcissism.</p>
<p><b>Q7: To what extent would you consider the DSM-5 interpretation of NPD to accurate?</b> 10:45 – 14:31</p>	
<p><b>RM:</b> <i>Asks Q7</i> <b>EX5:</b> I think the description is pretty good. The need for admiration, grandiosity, lack of empathy. Very consistent of the traits that I would associate with the condition. I think if I thought that there was more of an underlying vulnerability to these folks I'd be dissatisfied with calling it NPD. <b>RM:</b> <i>Would you say there is a distinction between vulnerable and grandiose narcissism?</i> <b>EX5:</b> I have a tough time understanding vulnerable narcissism as narcissism in most cases. It doesn't look like narcissism to me, particularly it seems</p>	<p>Suggests there is a difference in between people who display grandiose and vulnerable narcissism. The expert suggests that grandiose should remain NPD and vulnerable should be something else entirely. Rather than give this vulnerable narcissism a name the expert seems to perhaps use of trait theory.</p>

<p>more like borderline personality disorder. It's almost entirely comprised of high levels of neuroticism</p> <p><b>RM:</b> <i>In that case the lines must be very blurred between the two disorders. Is there a case being made for a category that lies somewhere between?</i></p> <p><b>EX5:</b> There could be. <i>*inaudible*</i> I think the grandiosity fits better with classic Descriptions of narcissism. I think the emotional vulnerability Is the result of psychoanalytic overthinking. With the whole putting up a front because they feel vulnerable and have very little self-worth I don't agree that should be categorised as NPD</p> <p><b>RM:</b> <i>Why do you think that?</i></p> <p><b>EX5:</b> Because I think you can get all of that without having this sort of underlying vulnerability. When you go about assessing it with vulnerable narcissism scales it doesn't look like Classic narcissism. There's not what research of showing that shows. That these people are at their core vulnerable. So it doesn't make sense to use the same instruments or terminology to measure the two.</p>	
<p><b>Q8: How accurately do you believe the scientific community understands NPD?</b> 14:32 – 19:26</p>	
<p><b>RM:</b> <i>Asks Q8</i></p> <p><b>EX5:</b> I'm a fan of self-reports I think they work pretty well as long as you're not asking about motivations for behaviour then self-reports work great. You're asking people to describe characteristic ways of thinking and feeling and acting. I think they're very good at doing that. If you believe that narcissism is some sort of dynamic process as the result of Vulnerability rising and grandiose. <i>*inaudible*</i> From my perspective it's about grandiosity, social dominance, lack of concern for others I think people are perfectly capable to report those traits. As a trait theorist I'm perfectly comfortable using trait Inventories.</p> <p><b>RM:</b> <i>do you think a narcissistic individual would be more prone to lying in the questionnaires.</i></p> <p><b>EX5:</b> Lying to what end? Not sure that the narcissist thinks that their behaviour or traits are wrong. Psychopaths seem to self-report pretty accurately. And they got the same thing is going on</p>	<p>Expert suggest that self-reports are effective tools for measuring NPD as long as you are not involving motivation for behaviour. Suggests that narcissists will behaviour quite truthfully in self report questionnaires, under the proviso that they are happy to boast about how they like to boast. The expert supports this idea by suggesting that psychopaths who would have more incentive to lie than those with NPD rarely do as they want to explain their thinking. According to the expert this idea can be applied to NPD, since a person with NPD wants to explain why they are great. This idea only extends to self-</p>

<p>Possibly worse. For example, they realise their acting too confident, so they know to tone things down. They are very special and very good at it</p> <p><b>RM:</b> <i>I suppose in that respect You often question yourself but there's nothing they would consider lying on perhaps.</i></p> <p><b>EX5:</b> There's obviously cases away this will not be true, but this is true for any self-reporting. If the motivational contingencies and Incentives and environments. Like you're not going to be psychopathic when you go to jail because that's not going to serve you well. I think there's every reason to think that narcissists will be generally truthful.</p>	<p>reporting questionnaires theoretically.</p>
<p><b>Q9:</b> Which methodology of measuring narcissistic attributes do you consider to be the most valid and why? 19:27 – 20:20</p>	
<p><b>RM:</b> <i>Asks Q9</i></p> <p><b>EX5:</b> We've used the NPI and bunch of other but I prefer the FFM model. It gives you Grandiose and vulnerable score based out of three factors neuroticism interpersonal antagonism, Extraversion.</p>	<p>Experts implies that FFM is a useful instrument for measuring both forms of narcissism.</p>
<p><b>Q10:</b> Symptoms of NPD have been described as varying in appearance and recognition. Do you agree with this sentiment and why? 20:21 – 23:19</p>	
<p><b>RM:</b> <i>Asks Q10</i></p> <p><b>EX5:</b> Assuming that you mean something more than there are a bunch of different ways than 5 out of 9 symptoms, I think there are a lot of ways of getting there. Symptom profiles can differ dramatically Is that all that you meant?</p> <p><b>RM:</b> <i>Could you have two people who are classified as having NPD but be very different in the symptoms and the appearance of the disorder enough to almost classify distinction between the two; that's the purpose of the question. Read a journal that listed five different or as many as 7 forms of narcissism, broken down into categories.</i></p> <p><b>EX5:</b> Certainly, I agree there are different ways of the symptoms showing/distorting? themselves. I'm not sure what you truly believe when these diagnostic subtypes or however you describe it. I think those might just be features of the same thing.</p>	<p>The expert suggests that there is not many types of narcissism as the paper I reference implies, instead these are all similar disorder to the point where they are not worth considering if a discreet diagnosis is required. In this event the expert suggests there is only a grandiose narcissism, with vulnerable narcissism being a different disorder entirely, placing it closer towards borderline personality disorder. The expert highlights the importance of moving to trait theory to move away from having a multitude of names for the same disorder.</p>

<p>I'm still more comfortable saying that vulnerable narcissism is still closer to borderline personality disorder and high levels of neuroticism</p>	
<p><b>Q11: Which gender would you say is more like to suffer from NPD and why?</b> 23:20 – 25:03</p>	
<p><b>RM:</b> Asks <i>Q11</i>  <b>EX5:</b> Men. Simply because the traits that comprise narcissism are much more prevalent in Men in general. Simple gender differences will make men more diagnosed with narcissism. Men are more antagonistic.  <b>RM:</b> Do you think that's more to do with testosterone or more to do with Society?  <b>EX5:</b> I would say testosterone.  <b>RM:</b> That is interesting, I have heard its more to do with society from others. Perhaps it's related to the survival type deal.  <b>EX5:</b> Well these structures in society are caused by genetics if you trace it back far enough. If you had to pick one dimension that would be a good place to start. In terms of determining trait It's probably agreeableness, sort of the connection with others and playing well with others.</p>	<p>Expert suggests that NPD is more prevalent in men, in many respects due to testosterone. The expert suggests that if you retrace lines back long enough testosterone will be the key factor in creating societal hierarchy.</p>
<p><b>Q12: To what extent do you believe age affects the severity of the NPD condition?</b> 25:04 – 29:37</p>	
<p><b>RM:</b> Asks <i>Q12</i>  <b>EX5:</b> I suspect across time NPD becomes less prevalent over time. I base that on research showing age-related changes and their effect on traits associated with NPD like antagonistic tendencies and agreeableness. As agreeableness increases over time I would say.  <b>RM:</b> Why would you say people become more agreeable as they age?  <b>EX5:</b> Some folks are talked about the socialization process. a lot of people have talked about a developmental process of Personality. Life's a lot harder if you leave it as an antagonistic person and as you age it makes people more likely to dial back on that behaviour.  <b>RM:</b> Over time many of those repercussions might internalise and change the person.</p>	<p>Expert suggest you are unlikely to be narcissist in old age as agreeableness rises. He attributes narcissism in old age to finding people who will accept these narcissitic traits.</p>

<p><b>EX5:</b> You're invested in relationships and jobs and you want to keep those things. You might act be a bit more accordingly.</p> <p><b>RM:</b> <i>What about where you reach an age and that you're still a narcissist individual and an older person that it might solidify it as your permanent characteristics that cannot be changed. Would you say that is caused by the npd condition or just becoming older and having traits stick as they do with older people?</i></p> <p><b>EX5:</b> From 50 onwards people tend to be much more stable and consistent with their traits. If you are markedly narcissistic moving through your fifties. Well at this point you sort of construct and environments. you piss off people they don't want to spend time with you at some point so you just move to next group of people until you find people who do accept this behaviour.</p> <p>The socialization process might contribute to the stability over time. You've got people who are relatively aggressive and have poor impulse control and lots of stuff in line with those traits that they piss everybody in their life develop criminal records. I think it can be similar in the way that narcissistic people develop.</p>	
<p><b>Q13:</b> In what aspects does substance abuse affect the severity of the NPD condition? 29:37 – 30:37</p>	
<p><b>RM:</b> <i>Asks Q13</i></p> <p><b>EX5:</b> Hmmm I suspect that certain substances with exacerbate the symptoms of NPD, I'm not sure really.</p>	<p>Expert suggest they do not have a valid understanding of the subject matter to pass opinion.</p>
<p><b>Q14:</b> What are some of the key issues facing the full understanding of NPD? 30:38 – 31:41</p>	
<p><b>RM:</b> <i>Asks Q14</i></p> <p><b>EX5:</b> Defining it. You can go back to the subtypes we sort of believe that vulnerability is an area of narcissism. I think redefining narcissism might be a good idea.</p>	
<p><b>Q15:</b> In Stinson et al., 2008. The researchers argue that NPD is the least empirically researched of all personality disorders, to what extent do you agree with this sentiment and is there areas that require further research in your opinion?</p>	

**RM:** *Asks Q15*

**EX5:** I think that was true in 2008 I don't think it's true now. I think due to the number of Personality Inventories in recent times that's been developed. Part of it depends do allow to explicitly need to be studying criteria already set to be talking about NPD? The criterion is probably still under researched. Lots of folks Developing New Inventories to access narcissism. People are looking for newer and better measurements that solve some problems that they see with NPI.

**RM:** *Is there any research in particular that you would like to see done that hasn't been done under the proviso you could have an extremely large budgets search something on a large scale?*

**EX5:** My research has always been that's what I see is the very complex sort of molecular compounds of traits. And breaking them down into them into further little pieces. There are more elemental pieces and asking do you need that big compound all the levels of antagonism in extraversion which different pieces and what kinds of problems can be associated with those. \*inaudible\* You look at these more basic traits and you ask what do these do to people throughout life. I don't think we know a lot about developmental issues. It's interesting for most personality disorders, the exception being Psychopathy. there's not much research on the people who would become narcissists as Adolescents and children. what do these use future narcissistic children look like? I'd like to see more developmental research done.

**RM:** *Yeah, I would have thought the actions that have done to you as a child would definitely shape you since becoming a narcissist. It's like the structure of the human being composed you don't really shake things off as being a kid.*

**EX5:** I think we need perspective research to do that and most of what we've done so far is just retrospect after the fact that it's happened rather than figuring it out while they're a kid, asking about family life, parents.

Suggests that Stinson is incorrect. Argues that further investigation into the minutia of narcissism, in conjunction with studies that specifically involve a testing in the present rather than the pass (to analyse families with parents who have NPD and make it ongoing).



**QC1: What criteria would you use to classify someone as having a mental illness?**  
38:11 – 41:11

**RM:** *Asks QC1*

**EX5:** Psychological characteristics that lead to distress impairments and harm to themselves or others. When I started doing research on narcissism I took a lot on psychopathy. So maybe in a case like that they're not so much distress but they're definitely harming others. But yeah those are my 3 criteria. I suppose you could tack on lack of control as well.

**RM:** *How do you feel about the terminology mental illness. Because I know trait theorists tend to be somewhat against that.*

**EX5:** It implies a sharp demarcation. At a high end that's pretty bad and that's a low and that's probably OK. You have to draw a line of demarcation? somewhere and when it gets to figuring out if it seems to be lack of control impairment distress and harm to others. I think it's fair to call it something and mental illness is ok with me.

**RM:** *I think one way of defining it could be that no one can tolerate you anymore and that's why you've defined someone having a mental illness.*

**EX5:** I think that's part of it honestly that's the impairment criteria where social relations are impaired, job prospects are impaired. Or you know you're in jail for harming others that's also impairment.

**RM:** *let's say you do something very narcissistic that should land you in jail and you just get out of it. Then you know you technically haven't filled that criteria even though you are very much treading on the line.*

**EX5:** Jail is the official version of that. Like you see with self-reports people harming others and not being put into jail or being arrested for it.

Expert suggest that their a benefit to the discreet disorder diagnosis. Arguing that a line needs to be draw somewhere and mental illness is an acceptable term for distinction.

The expert also suggest that mental illness is a terminology worth keeping, identifying 3 items that would highlight a person as mentally ill. Suggest that the key is impairment. The expert also suggests that going to jail because of a PD is a casual identifier of mental illness.

**QC2: To what extent would you consider a personality disorder to be a mental illness?**  
41:12 – 41:55

**RM:** *Asks QC2*

**EX5:** 100%. It meets the same criteria that most major personality disorders do. if you look at major depression it's also got thresholds that's distress and

Expert considered mental illness to be fairly interchangeable with PD.

<p>impairments. Mental illness also refer to the same kind of behavioural distress and impairment.</p>	
<p><b>QC3:</b> To what extent do you consider NPD to be a mental illness? 41:56 – 42:23</p>	
<p><b>RM:</b> Asks <i>QC3</i> <b>EX5:</b> I consider it to be like any other personality disorder even more so than most.</p>	
<p><b>QE1:</b> What aspects of NPD could be viewed as dangerous to society? 42:24 – 44:12</p>	
<p><b>RM:</b> Asks <i>QE1</i> <b>EX5:</b> The aspects that make it more likely that you will suffer in payments or make other people suffer. Not being able to feel empathy and compassion; being callous towards others making rules that don't apply to you because you're special. Responding with rage when you are slighted it's all setting the stage for a screw up yours and other people's lives. I think those are all potential dangerous to society.</p>	
<p><b>QE2:</b> In your opinion, in what ways can those with both NPD and a position of power impact society? 44:13 – 49:09</p>	
<p><b>RM:</b> Asks <i>Q8</i> <b>EX5:</b> you've got the same psychological characteristics that you have before they care about themselves and not so much for other people respond with rage when threatened. if you have somebody with power doing that and the ability to influence other people I expect those behaviours will be far more self-serving than the others with NPD. so, it's not just them beating up one person for slighting them but they'll be affecting entire groups of people. the more you are in power than more People you can hurt. <b>RM:</b> <i>What do you think about trump being described as a narcissist</i> <b>EX5:</b> I think he's also most a caricature of a narcissist. it's unbelievable he's so singled out. <b>RM:</b> <i>This is interesting because you say he's got the stereotypical characteristics yet going back to the aspects of NPD that can be considered positive apparently becoming president can be one of</i></p>	<p>Suggests that NPD is perhaps more self-serving than any other PD. In addition people with NPD often focus their efforts on covertly attacking people in some manner, so it is effecting a group of people in way that other PDs might not.</p> <p>Expert suggests that Trump is singled out as a individual with NPD as he comes across as a caricature. This presumably means that he displays most or even all of the specified characterises.</p>

<p><i>them. why do you think people might find us qualities attractive in the leader?</i></p> <p><b>EX5:</b> People like narcissists before truly meeting them, from a distance they seem strong entertaining I think they're looking for. I think it's only across time that they will become dissatisfied and disillusioned with them. it's only once you put him in a position of power, people realise that he's not even making decisions in line with the people who elected him.</p> <p><b>RM:</b> <i>Do you think it's more likely that he'll have other narcissists on his cabinet or just try and be the only one.</i></p> <p><b>EX5:</b> Honestly, I think his cabin is full of morons, I think he purposely chose people who are unlikely to challenge him and people who are not particularly qualified for their positions. I think he's chosen people who know that place in relation to him.</p> <p><b>RM:</b> <i>what about Kim Jong-un I suppose it's more difficult to tell but would you describe him as narcissistic.</i></p> <p><b>EX5:</b> the thing with trump is you have so much information what with his 6000 tweets and thousands of hours of interviews multiple biographies people constantly talking and researching about him. Kim Jong-un you don't have a whole lot.</p>	
<p><b>E3: What are your opinions on NPD being classified as a Personality Disorder in the DSM-5 but not in the ICD-10?</b> 49:10 - 51:04</p>	
<p><b>EX5:</b> I actually don't know. I haven't read enough to see what the ICD-10 was thinking. You seem to have everything in there, all the more severe /dangerous disorders except, narcissism and I don't understand that at all. I think the research shows that narcissism is truly impairing.</p> <p><b>RM:</b> <i>Could it be to do with co-occurrence?</i></p> <p><b>EX5:</b> I think it's assumed that it becomes under something like NPD. maybe some people are thinking it's a subset of psychopathy. I think the evidence is clear that it's not true.</p>	

## Interview with Expert 6

INTERVIEW 6	THEMES
<p>Q1: What do you consider to be the key traits and characteristics of a person displaying narcissistic personality disorder? 0:00 – 2:29</p> <p><b>RM:</b> <i>Asks Q1</i></p> <p><b>EX6:</b> I think the grandiose, one the elements is still definitely one of the most important pieces. I think in recent years the idea of the vulnerability component has become more interesting as well, although there seems to be a lot of controversy and confusion about exactly what that means.</p> <p><b>RM:</b> <i>From a lot of people I've spoken to, they would say that there is a difference between grandiose and vulnerable narcissism at least one that's worth some sort of medical distinction.</i></p> <p><b>EX6:</b> I would, I mean if we jump back maybe 8 or 10 years ago I actually at that point I actually thought I had a better kind of grasp from what was going on with vulnerable narcissism. Now I'm not sure, if anything I feel like it's getting to be a slippery concept. I think if we were having this conversation back then I would have said yeah I'm pretty sure kind of what this is starting to look like but now I just don't know. It doesn't make a lot of sense to me anymore so I think there's something important there but I'm not sure what exactly it was that we're trying to capture.</p> <p><b>RM:</b> <i>Yeah you sound like me when I was composing my literature review the further in you get you think wait a minute this is all contradicting and I don't know what's going on anymore.</i></p> <p><b>EX6:</b> It's odd because some of the folks who were opposed to the entire idea seem to have kind of come around to endorsing it now I still don't understand now what it is that they're looking at, it was a very odd time.</p>	
<p>Q2: What would you consider the difference to be between a person displaying narcissistic tendencies and a person with NPD?</p>	

2:30 – 5:21

**RM:** Asks Q2

**EX6:** I think there is definitely a correlated difference while they are displaying the characteristics. I think in terms of the differences I think one of the issues is going to be what kind of model are we talking about in terms of narcissistic tendencies. I think for example if we're talking about narcissistic tendencies coming from an NPI perspective I think it's a relatively healthy view of narcissism.

**RM:** *If you ignore the exploitation and entitlement components, the rest is captured by the NPI and a lot of other measures, non-clinical measures.*

**EX6:** I think a lot of it is just interesting that the literature has been so dominated by the measurements of narcissism which is really one of those cases of the tail wagging dog kind of thing. I think the measurements kind of dictated what the contract is rather than the other way around.

**RM:** *Would you say there's only a few components that separate a narcissistic individual who perhaps can just get by in society and people might tolerate them. Or maybe it's to do with how tolerable that person is, which could factor into whether you can be considered to have NPD as opposed to thinking of this person is an ass at times.*

**EX6:** Yeah, I think that's definitely a part of that I think there is a difference in terms of the extent in which they're showing these characteristics. Yes, I definitely think the continual sort of approach is an irrevocably good way looking at personality in general. If you imagine some people are far more tolerant of others, and we see that given enough time and attachment to a person they are willing to deal with a lot of anguish. We cannot expect the love ones of people with narcissistic tendencies to bring that person forward, seeing as they are most likely be dominated by the narcissist.

Q3: To what extent would you consider NPD to be prevalent in the general populace?

5:21 – 7:21

**RM:** Asks Q3

<p><b>EX6:</b> It's hard to know, the hit rates look very low because the government went for treatments but I'm guessing. I don't know it's a good question I'm guessing maybe like 5%. I reckon it's higher though than some institutions say like 1% I think the diagnostic criteria is a little weak for NPD so I'm going to say 3 to 5%.</p> <p><b>RM:</b> <i>I guess one of the problems of today is anyone with NPD it's probably not going to come in to be tested or thinks there's no real issue so why would they. Josh Miller who apparently has done some research on this and he reckons it's like 0.0 1% something it extremely small but then again it's only a certain sample and the jury is still out.</i></p> <p><b>EX6:</b> Yeah that's the number I always see prevalent.</p>	
<p><b>Q4:</b> In your opinion what is the role of genetics as a contributor to NPD? 7:22 – 7:59</p>	
<p><b>RM:</b> Asks Q4</p> <p><b>EX6:</b> I definitely think it has a huge role. the heritability estimates are always a little fuzzy, but I definitely think that there's a genetic contribution I reckon it's about half the genes half environments. I definitely think there's a strong genetic connection that gives people at disposition and tendencies to develop characteristics.</p>	<p>Expert suggests a fifty/ fifty break between the two factors.</p>
<p><b>Q5:</b> How influential would you consider society and the environment to be as contributors to NPD? 8:00 – 14:56</p>	
<p><b>RM:</b> Asks Q5</p> <p><b>EX6:</b> I think it's a huge contributor, I know that the data regarding whether or not there are generational influences people look at the exact same data and come up with different conclusions of what's going on. I think there is definitely something happening where I think societal changes really can have an impact on narcissism characteristics and I think narcissism probably is increasing in recent years since they have been a lot of changes in Society. I'm sure societal and environmental forces can have a huge impact.</p> <p><b>RM:</b> <i>why do you think they've been increasing recently?</i></p>	<p>Expert suggest that recent trends in culture and society may have impacted narcissism tendencies. Argues that the rise of social media has caused a rise in only surface level development and framed personal development more around the general populace. As a result, people are not developing in a naturally intended human way. Since this has never happened before the counter measures do not exist</p>

**EX6:** I'm not absolutely sure, I do think some of the things like social media . weather I think that's her a causal inference or just a symptom of the increasing narcissism I can't be sure. I definitely think there's something going on with this strong desire to be in public to have people looking at you constantly to be talking about what you're doing at every possible moment and I don't know if that's creating an impression for young folks in particular , that life is like a constant stage. Without any kind of time off stage so I , then again I think the causal force of this or a being a consequence of increasing narcissism. I think some of the changes in family environments also , might have something to do with this while there's more of a focus on surface level characteristics rather than character development .

So I think there's a large number things that have been changing that may be contributing to this. It's also possible that I am just getting old and this is one of those all those kids these days. I also worry about.

**RM:** *Have you heard of juvenoia?*

**EX6:** Yeah it certainly could be and I do worry about that possibility its in my head. But I really feel like recent cultural and economic conditions could be contributing to the appearance of narcissism but I'm not absolutely sure.

**RM:** *The internet does act as a megaphone so maybe narcissists seem more noticeable online . Do you think maybe the younger generation will see a wave of shifting away from narcissistic tendencies rather than further towards as popular voices of reason step forward .*

**EX6:** It's certainly possible, I don't know what would change. I don't know if the availability of the information would be enough to incite change. It could be possible that something else might start to shape that sort of change.

Maybe two years ago when I was doing a study when we are looking at kids and their career aspirations it wasn't connected to narcissists but one thing I did find a bit worrisome was when we asked what they want to do when they grow up. A large percentage said something that has to do with being a celebrity or an athlete or actor or musician which is

<p>interesting because they seem to be a lot more focused on fame and attention now than in past generations when you would see other things like I would want to be a police officer or astronaut which were a bit more common then So I don't know if there's something a bit more different now where we celebrate celebrity culture to such an extent that it's become this kind of overwhelming desire and a lot of young people. but I don't know if that's going to continue or if there'll be some kind of backlash.</p>	
<p><b>Q6: What aspects of NPD could be considered as providing positive personal characteristics?</b> 14:57 – 16:39</p>	
<p><b>RM: Asks Q6</b> <b>EX6:</b> I think some of the NPD criteria, I don't think they're necessarily horrible in the right context. I think the confidence and self promotion that comes with those characteristics I think are really helpful in the right context; for example Short-term interactions I think narcissistic individuals do quite well in those because they are interesting to other people , draw lot of attention to themselves their charming they are funny they are interesting. In the long-term they can be really annoying and drive people crazy, But I still do think that a lot of the characteristics are positive in the right situations and contexts. And that context is usually short term and I think that's why they do well in several organisations where they can minimise how well people in supervisory positions, necessarily know them. Where they can use their grandiosity to get themselves noticed but their interactions aren't actually deep enough to the point where people realise how Interpersonally stunted they are. But yeah that's why they do well in really large organisational settings.</p>	<p>Expert suggest that NPD is perhaps not as debilitating as other experts suggest. Suggest that in the short term it could even be useful.</p>
<p><b>Q7: To what extent would you consider the DSM-5 interpretation of NPD to accurate?</b> 16:40 – 21:24</p>	
<p><b>RM: Asks Q7</b> <b>EX6:</b> I don't think at the moment. I think a lot of work needs to be done I don't think we're anywhere close to having an idea of exactly what's going on</p>	<p>Expert suggest that grandiosity And Vulnerable are two different poles and a people can move between the two depending on</p>



and I think the grandiosity vs vulnerability argument really needs to be reconciled. So I don't think dsm-5 interpretation is quite there yet I definitely think NPD is a real construct don't think it should be completely stricken from the record. I think there's something real there and I think we're still struggling to understand it. For example, I've had some really interesting discussion, with folks about whether grandiosity and vulnerability are two different expressions. is it the case that people that people kind of oscillate between the two and I'm not sure? I like the idea that people can move between the two. For example, when things are going well, the grandiose expression comes to the surface. When things go badly for them the vulnerability component may come out. So I think there is a possibility for a subset of these individuals. I think it might be possible But there are different types of narcissism that's why things look so murky. But trying to explain slightly different manifestations using a similar language.

**RM:** *that's something I was thinking about before. Like it's pretty small right it was only two pages about it and it pretty much only talked about the grandiose side of things. and I'm thinking well maybe that's because it's the disorder that's louder and more prevalent. from other work I've read people seem to be on the fence but do you think it's stands to be expanded on, so maybe have it split into two separate disorders?*

**EX6:** I think it's probably too early to do that. I definitely want to be encouraging work in this area I think it's something we should be cautious with before splitting it into two categories. I like the fact that you mentioned Josh Miller and I like the work that he's been doing kind of stripping these personalities down to the basic underlying principles of the brains. And I really like his DSM 5 trait model. So I think there might be something there that will eventually help us understand these different manifestations of npd and I think the vulnerability stuff might have a really really strong neuroticism component that just isn't showing up. I think trying to understand the underlying traits structure is one of

the situation. For example, when things are going well, the grandiose expression comes to the surface. When things go badly for them the vulnerability component may come out.

Expert supports Miller's FFM DSM trait model understanding of narcissism.

<p>the nicer avenues for the near future to find out what exactly is going on. Because I think we understand the grandiosity to some extent it's the vulnerability stuff that I think is just kind of odd.</p>	
<p><b>Q8: How accurately do you believe the scientific community understands NPD?</b> 21:25 – 26:49</p>	
<p><b>RM:</b> <i>Asks Q8</i>  <b>EX6:</b> Not terribly accurately at the moment I think some of the things we talked about earlier like distinctions between the different forms of narcissism are not very well understood yet. I think it's still I also think it's the study of narcissism is a bit unusual in that we've allowed Measurement issues to get ahead of our understanding of the construct guide how we have made sense of the construct itself. I think people have let their own history have an influence or impact on it and maybe we don't understand maybe as much as we like I think some people are more reluctant to try out new ideas because they spent their entire careers building up this literature with one particular view. It's hard to make people let go of what we've done in the past. I think it's an absolutely fascinating construct. I think our knowledge gaps definitely shows when it comes to things like the dsm-5 and I think the personality disorders are a perfect example, of that we want this really simple categorical distinctions. Most of us realise and not really the best way to make sense of these things. Yes at the same time I'm really sympathetic to DSM 5 workers when because I like the idea looking at these things as a Continuum I think that is the best way for scientific approach to understanding these sorts of things. Also I recognise that clinicians have to have something that is tangible and that they can use like cut off scores I don't think we're in a position yet to give that to them and so I can understand why have there been reluctant to shift over to things like Bob Krueger's ideas?  <b>RM:</b> <i>If not cut off points, at least sectored areas that could give them more precise interpretation so everyone isn't treated exactly the same.</i></p>	<p>Expert argues that the community still does not understand narcissism and personality disorders very well.</p> <p>Expert suggests trait approach is necessary. When sector option was proposed expert argues that there would be difficulty in defining the location of these points, to the extent where the problem would not be any more solved.</p>

<p><b>EX6:</b> What I imagine would happen very quickly there is we would start having Arguments about where these sectors are, and it will probably be just as divisive as it is now. So I'm sure that will be the next point of contention so where are these cut off points going to be.</p> <p><b>RM:</b> <i>yeah I think the problem is that we're looking at us a block perspective not a fluid one.</i></p> <p><b>EX6:</b> Maybe we are just thinking about it wrong, but for practising clinicians I do think they need something tangible to grab onto and maybe just continuous works would be fine.</p>	
<p><b>Q9:</b> Which methodology of measuring narcissistic attributes do you consider to be the most valid and why? 26:50 – 33:00</p>	
<p><b>RM:</b> <i>Asks Q9</i></p> <p><b>EX6:</b> So this...are you talking about normal levels of narcissism?</p> <p><b>RM:</b> <i>More like how useful do you find NPI and other Inventories. I suppose the question is, if you were going to measure narcissism in a group of people how would you go about it?</i></p> <p><b>EX6:</b> The approach that I've been using Most recently is Midget box narcissistic admiration rivalry model. I like the idea that he and his collaborator are combining admiration components as well as a rivalry components. I don't think it's perfect. I don't think the admiration component is a good way of picking up sorts of things you want. The rivalry, I'm not confident exactly what that's picking up I mean it's clear what they were going for when it was being developed.</p> <p>I guess I'm not sure exactly what it is picking up and it's also my favourite component out of that model and I really like what they're trying to do which is why I became interested in using it.</p> <p>Also, really just the toxic components of narcissism. It also has a lot of eroticism mixed in and blends of vulnerability and grandiosity and I think that's really interesting. I like the idea, but I think it's so new that it needs time to make sure that it's really capable of producing results, but it seems very promising.</p> <p><b>RM:</b> How exactly does it work?</p>	<p>Expert argues for the use of the Midget box narcissistic admiration rivalry model. it splits and focuses on narcissism and grandiosity as to keep a grandiose self-view and an admiration component where individuals are focused on promoting their own grandiosity and being social, charming and charismatic etc. Another item referred to is the narcissistic rivalry which is really a very socially antagonistic and self-protective and paranoid.</p> <p>Suggest that the NPI is lacking as a model, with certain elements having a weak correlation. The box alpha or the E dimension was like a, 0.27. We can't have a measurement where there are only 3 or 4 items and it hangs together so poorly.</p>

**EX6:** So, it splits and focuses on narcissism and grandiosity as what they argue is different ways to basically keep a grandiose self-view and when they threw this admiration component where individuals are focused on promoting their own grandiosity and being social, charming and charismatic etc. The other thing which is referred to as narcissistic rivalry which is really a very socially antagonistic and self-protective, almost paranoid Manifestation. Where they want to tear everybody else down in essence. They argue that another strategy to maintain the grandiose-self, which I agree with, but there's also a lot of neuroticism that's kind of mixed in with the rivalry. People with high levels of rivalry a very reactive to setbacks, failures. So, I think there is a lot of potential for that.

You look at some of the other measures and ways of thinking about it like the NPI, I think the exploitation and entitlement don't mention it's already the most interested to me But then the psychometric qualities are also just ridiculously weak like I was reviewing a paper yesterday. The box alpha or the E dimension was like a, 0.27. We can't have a measurement where there are only 3 or 4 items and it hangs together so poorly. But I think it's really interesting because it taps into the more toxic elements of narcissism. I think this in particular has a lot of potential but it only came out in 2013. 10 years down the road I think it has the potential to be a real contender

**RM:** *Yes that does sound promising, so would you say that the NPI looks at narcissism to broadly?*

**EX6:** You can get such a diversity of symptoms with a simple checklist in the DSM where you have people who have the same diagnosis but have really different symptom profiles and I think that's part of what's happening with narcissism and I'm guessing that we probably do need some multidimensional approach to really understand it well.

**Q10:** Symptoms of NPD have been described as varying in appearance and recognition. Do you agree with this sentiment and why?

33:01 – 33:31

**RM:** *Asks Q10*

<p><b>EX6:</b> I do agree. I think the way in which people will manifest something, whether they're recognised or not, I think this is a great deal. So I think one of the things that societal changes and cultural changes also matter. I would definitely agree with that.</p>	
<p><b>Q11: Which gender would you say is more like to suffer from NPD and why?</b> 33:32 – 37:19</p>	
<p><b>RM:</b> Asks <i>Q11</i></p> <p><b>EX6:</b> Men are much more likely to be identified as far as why I think there's definitely in part because it's a way for males to gain status and power. Give some access to resources and is helpful with meeting especially short-term mating and I think men get some of the stronger benefits from it. At the same time, I think women typically display more than we give them credit for. I think the case may be that they manifest it in a slightly subtler way.</p> <p><b>RM:</b> <i>Do you think that is to do with testosterone or more to do with societal structure.</i></p> <p><b>EX6:</b> I think both I know testosterone can definitely play a role and men are socialised to do this. I think it's a biological inheritance that sets the stage. I'll socialization finishes things off where in many cultures is typical for men to gain status. I think the connections between social hierarchy and NPD and the navigation of those hierarchies it's one of the things I'm really interested in and I think there's something there. We talked about the past, but people haven't really dealt into that enough.</p> <p><b>RM:</b> <i>It certainly rewards narcissistic tendencies season doesn't particularly punish either. Like you can be a powerful CEO.</i></p> <p><b>EX6:</b> I think the connections between narcissism and power and status are very fascinating. In the idea that some people at least start to develop those tendencies when they are put in a position of having influence of power. it's certainly something that deserves more attention and it does make a lot of sense. If you're someone who suddenly has a lot of tremendous wealth and fame and people essentially worshipping you it might distort how you think about yourself and other people and there is definitely something there. There's important</p>	<p>Expert suggests that men are more likely to be narcissistic, citing testosterone is the key component in the narcissism, arguing that biological inheritance is the basis behind narcissistic tendencies, with socialization occurring secondary.</p> <p>Expert suggest that the involvement of power increases narcissistic tendencies, which would seem logical.</p>

<p>component in the type of people who seek out those sorts of things regarding to fame and power.</p>	
<p><b>Q12: To what extent do you believe age affects the severity of the NPD condition? 37:20 – 42:41</b></p>	
<p><b>RM:</b> <i>Asks Q12</i>  <b>EX6:</b> I definitely think it's a lot easier to notice some of the symptoms in individuals. I think that, or there is the appearance that narcissistic tendencies tend to decline over the lifespan. Whether that's true or simply being manifested in a different way is definitely something that's worth consideration. At the moment my guess is that there's probably a real decline in some of those symptoms and partly might be to do with things like testosterone and those kinds of changes.  <b>RM:</b> <i>What range of Ages would you be talking about?</i>  <b>EX6:</b> For men early 30s maybe late 20s. I think narcissistic males in particular maybe demonstrating the excuse because they are attracted to females and as they start to develop in their age they may not use the same sort of cues.  <b>RM:</b> <i>I suppose you should also think about it from that our bodies were sort of genetically setup going back to caveman survival ages, so maybe during the age where your most likely to be breeding during that time you show more narcissistic tendencies. Then when the man reaches the age of a teaching role and a fatherly personality those two ideas, they wouldn't align so well because a narcissistic teacher would be a bad teacher.</i>  <b>EX6:</b> I think it's an interesting idea, people age out of these things. Especially the impulsive kinds of issues that males especially tend to deal with for example age-related crime, I'm guessing part of it is just a completely biological testosterone thing.  <b>RM:</b> <i>I've also heard the argument that once you reach a certain age for some people they tend to become stuck in their ways. Especially narcissistic tendencies any point where even therapy really isn't helpful.</i>  <b>EX6:</b> I agree with that too, and then other things connected to age with Males for example as they</p>	<p>Expert supports the notion that narcissistic tendencies tend to decline in late 20's early thirties.</p>

<p>accrue more power and Status. if they're hanging onto these narcissistic tendencies I definitely think that's Sets the stage for a lot of really unpleasant kinds of behaviour like sexual harassment, that are getting so much attention now. I think a lot of that comes from narcissistic men who find themselves in positions of power. Like a perfect storm to engage in that behaviour.</p>	
<p><b>Q13: In what aspects does substance abuse affect the severity of the NPD condition?</b> 42:42 – 43:35</p>	
<p><b>RM: Asks Q13</b> <b>EX6:</b> I definitely think it can have an impact in terms of reducing inhibition and I think it can start to make people make impulsive choices that narcissists would already make and it would just exacerbate them. I think it plays a role in making it even worse and random for them. <b>RM:</b> <i>Would you say it depends on the substance in particular?</i> <b>EX6:</b> I would think so, I'll thinking primarily of alcohol.</p>	
<p><b>Q14: What are some of the key issues facing the full understanding of NPD?</b> 43:36 – 44:59</p>	
<p><b>RM: Asks Q14</b> <b>EX6:</b> Some of the issues we have already talked in terms of reconciling the different manifestations of narcissism. Moving away from this categorical understanding of NPD in that's you either have it or you don't. <b>RM:</b> <i>What about sample size, would you say there's been enough people to tell?</i> <b>EX6:</b> The vast majority of what is from non-clinical samples. I think that would certainly help if they were clinical.</p>	<p>Expert suggest that further work with more clinical studies would be a way to provide further proof to trait theory</p>
<p><b>Q15: In Stinson et al., 2008. The researchers argue that NPD is the least empirically researched of all personality disorders, to what extent do you agree with this sentiment and is there areas that require further research in your opinion?</b> 45:00 - 47:46</p>	
<p><b>RM: Asks Q15</b></p>	<p>Expert suggests that Stinson et al. were right with regards</p>

<p><b>EX6:</b> I think they are probably right, I think where things get a bit fuzzy is, how you connect that work with non-clinical populations. I think if you factor that in, narcissism jumps way up the list and I think they're right. I think they're right you're arguing for a strict view of this as just looking at NPD and the people who meets diagnostic thresholds. I think they're probably not far off they probably be far down on the list.</p> <p><b>RM:</b> <i>A lot of it has to do with measurement and research, There's very little aggregation in my opinion.</i></p> <p><b>EX6:</b> With certain other personalities like borderline personality disorder, there's a lot of...maybe part of it is just aggregation. There seem to have been a lot of studies that are using clinical samples. I think it really all just depends to me in parts or where people are making a really strong distinction and with clinical and non-clinical populations.</p>	<p>describing NPD as the least researcher personality disorder. Although he would disagree when viewing non-clinical populations.</p>
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**QC1: What criteria would you use to classify someone as having a mental illness?**  
47:47 – 50:07

<p><b>RM:</b> <i>Asks QC1</i></p> <p><b>EX6:</b> I think the biggest thing would be distress, I think the individual experiencing distress is definitely one of the huge things which obviously is going to be an issue for a narcissism because they typically don't experience a great deal of stress themselves.</p> <p><b>RM:</b> <i>So by that do you mean distress being caused to the individual *and* people around them?</i></p> <p><b>EX6:</b> If we were to sum up mental illness in general, distress is definitely one of the key components. I think you'll see that in the vast majority of things that show up in the DSM for example narcissism it's one of those disorders where the individual doesn't report typically a great deal of distress, but the distress that because other people around them is enough to meet the criteria to what I would consider important. I also think there's distress to the individual and that they're not necessarily aware of it, or what the source of it is.</p>	<p>Expert suggests the determining factor is distress. They are not necessarily aware of this distress</p>
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**QC2: To what extent would you consider a personality disorder to be a mental illness?**



50:08 – 50:28	
<p><b>RM:</b> Asks <i>QC2</i></p> <p><b>EX6:</b> I regard them are really the same thing.</p> <p><b>RM:</b> So, no differences?</p> <p><b>EX6:</b> Err not really no.</p>	<p>Expert considers no real difference between a PD and a mental illness.</p>
QC3: To what extent do you consider NPD to be a mental illness? 50:29 – 57:19	
<p><b>RM:</b> Asks <i>QC3</i></p> <p><b>EX6:</b> I do think that's a mental illness. My view is pretty standard and goes along with the traditional views that dsm-5 manuals go with. I think it can be a bit murky in terms of identifying and figuring out where people fall on it. I think there is a point where it can become pathological exactly where that point is like is there a qualitative shift? It makes it hard to find out where the dividing line is if there is one.</p> <p><b>RM:</b> So you mean with the literature changing all the time, the markers by which we identify a personality disorder?</p> <p><b>EX6:</b> Yes, the research is constantly evolving and seeing as the DSM looks to be up to date with diagnostics, it has to change frequently. That effects the validity somewhat, but at least it is moving forward in the right direction.</p> <p><b>RM:</b> Yes, for sure. Are there any additional measures that we should look to take in order to have narcissistic individuals consider themselves to have a mental illness and seek out treatment?</p> <p><b>EX6:</b> I wouldn't necessarily want us to go down that road. I think it would be great to get more people into treatment but it's a case of how easy would it be? As odd as it sounds I'm perfectly fine with saying yes these people have mental illnesses and yes it would be great if they went treatment. As far as making them go into treatment I don't think so. I honestly think that such a small percentage of these people would consider treatment and acceptance of their own volition as opposed to maybe a partner threatening to leave them or a supervisor at work forcing them to go into treatment. I would assume that would be the more common way if people would get into treatment.</p>	<p>Expert agrees that NPD is a mental illness.</p> <p>Suggest there is a difficulty in producing the distinct line in a discreet diagnosis due to ever changing literature and lack of supportive validity.</p>

QE1: What aspects of NPD could be viewed as dangerous to society?

57:20 – 62:18

**RM:** Asks *QE1*

**EX6:** I actually think there are various ones. The most other ones are the ones that have implications for how they immediately deal with other people in terms of their willingness to exploit and manipulate them. The more subtle ways, for example self-promotion and grandiosity can start to undermine some of the social connections that bind humans together. And that's affecting how groups of people function. I think it's hard for any of us to connect one another if everybody wants to perform to each other. And everybody wants an audience as if we're on a stage. I think there is a kind of the nasty aspects that can be detrimental on the long run.

**RM:** You mentioned the rivalry aspect which presumably, *On the survey end of things, has physical and psychological consequences.*

**EX6:** One of the things that those folks have found is that people in the rivalry component. When they see someone who's are performing better than them and they are envious of that person that way of dealing with the envy is dragging that person down to their level rather than them building themselves up and catching up to that person. I think all of us to some extent enjoy it when we build up other people or people even gaming celebrity Status. And then also enjoy seeing them fall, even more so for narcissists.

Expert suggests use in a rivalry element to measuring NPD, given that one of the more dangerous traits on a failing narcissist is to try and drag people down to their level, both in a social and mental aspect.

QE2: In your opinion, in what ways can those with both NPD and a position of power impact society?

62:19 – 66:23

**RM:** Asks *QE2*

**EX6:** One of the things that power does is it serves this inhibitor and what happens when you have that in the mission and coupled with the nasty elements of narcissism. You get the perfect storm with people will manipulate and exploit others and in some cases can lead to things you would see in the current media like sexual harassment and such. For example, you've got a narcissistic male in a position in power who uses it to get sexual Access to women that he

Expert suggest Trump won by being the more honest of two unlikeable candidates.

<p>wouldn't have been able to get otherwise. In politics you see this with our current president in the US who definitely has some narcissistic tendencies in the position of power. With this you see the unpleasant ramifications of these authoritarian approaches to dealing with conflict.</p> <p><b>RM:</b> <i>I was wondering if we could get through one of these interviews without talking about Mr trump. He dominates the media.</i></p> <p><b>EX6:</b> I know it's like I really hate using the word textbook example, but he fits into it so well. I think I last election was really strange in that we had two candidates were they were extremely disliked. He just put out whatever he wanted without any kind of filter and that contrast with the other candidate was so extreme that it made them look attractive to certain sections of the population in that he didn't look like a typical politician.</p>	
<p><b>QE3:</b> What are your opinions on NPD being classified as a Personality Disorder in the DSM-5 but not in the ICD-10? 66:24- 70:46</p>	
<p><b>RM:</b> <i>Asks QE3</i></p> <p><b>EX6:</b> I know with the DSM-5 being developed there was a lot of conversation about whether it was going to show up in it or not. Just because it's still in there I don't think . . . it was close to getting cut. Whether NPD will feature in the next version I don't know but I do hope so because I think something is there. I think people are concerned because there are so many deep questions and I don't think we've been making this much progress as at least I think we should.</p> <p><b>RM:</b> <i>Hypothetically why do you think it might be removed?</i></p> <p><b>EX6:</b> I think there's so much controversy About the definition. I think clinicians and researchers are still at odds about it. the conversation about it being cut went on for such a long time and it looked for a while that it was going to be certain that would be cut. Which I obviously think is a mistake I think it's a very interesting disorder and a real construct, not an artefact of something else. There are lots of unresolved issues that we need to work through and to be honest I haven't seen specifically what the</p>	<p>Suggest that NPD may be cut from the DSM in the future, but not with any confidence. Given the more to trait theory it is likely that if NPD was cut, it would be in a situation where disorder names and identifications were readdressed.</p>

<p>argument was from cutting it from the ICD. There were people in 2007 writing opinion pieces trying to convince the DSM people, that it should stay in since it was looking like it was going to get chopped.</p>	
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## Interview with Expert 7

INTERVIEW 7 Q1: What do you consider to be the key traits and characteristics of a person displaying narcissistic personality disorder? 0:00 – 3:59	THEMATIC NOTES
<p><b>RM:</b> <i>Asks Q1</i></p> <p><b>EX7:</b> Let me just start by saying I think narcissism is whatever the person who is studying it, says what it is. Meaning that a lot of different people have found different definitions and created measurement tools to study. so nobody seems to really agree what we're talking about. You could call me a sceptic. I think the DSM has it wrong, personality technology has it wrong. I don't think there such thing as NPD. it doesn't take long to take a bunch of traits, put them together and say "so now that's what narcissism is". it's sort of like saying if you took a woman with blonde hair and brown hair and freckles and maybe call that a "Blondivorg" And say well now we have a name. it doesn't make it a thing it just means it has a particular combination of features.</p> <p>So, then your question becomes; what do I think what the word narcissistic means and I don't think anybody at the university would agree with me but if it has a value to me, it's someone who has some kind of fragility or vulnerability inside and if you poke them in the right way, they act like an asshole, as a way of regulating their self-concept. The reason that that's important is because the inclination is diagnostic. knowing what you can do to poke at them and knowing how they're going to respond. that's the only aspect that has any value for me.</p> <p><b>RM:</b> <i>Quite a few experts I have spoken to, say they identify difference between grandiose narcissism and vulnerable narcissism. some people reckon there are maybe 5 or 6 subcategories.</i></p> <p><b>EX7:</b> I would say it very much depends on how you look at it.</p>	<p>Expert outlines that they do not think there is such a thing as NPD. They suggest that both trait theory and the DSM is incorrect.</p> <p>Expert suggests an unique perspective of looking at NPD, suggesting that if you were to provoke a person with narcissism in a certain way you expect to receive a homogenous response.</p>

**Q2: What would you consider the difference to be between a person displaying narcissistic tendencies and a person with NPD?**

4:00 – 5:54

**RM:** Asks Q2

**EX7:** It's probably arbitrary. I don't think any scientists can answer that question. Clinically it's like if a person has problems in their life that means that they have a problem, right? and then narcissism might be a way to describe the reason for those problems, but the fact that they have problems is already determined by the fact that they came into your office so you don't need to go above and beyond to determine whether or not they have problems. I don't think that's a scientific way to draw a line.

Expert suggests that NPD maybe an arbitrary term and is against the notion of discreet disorder diagnosis. He argues that it is not necessary to have a terminology at all, rather if a person needs therapy they will seek it and a definition is not required.

**Q3: To what extent would you consider NPD to be prevalent in the general populace?**

5:55 – 9:29

**RM:** Asks Q3

**EX7:** It's not uncommon I think a lot of people in general are very immature. I don't think it's particularly rare especially in academics of course like me and you know, there will be people who are easily provoked into becoming an asshole. A person like that can still hold a job, effective parent or even be president of the United States. People with privilege can have a lot more narcissism than people without because they have social bumpers. I worked in a prison for example and you run into people who are similarly successful. But what defines the difference between those people I don't think it's a level of narcissism but different opportunities that they have in life. It's really tricky to depend on percentages for a question like that. It's easy for me to poke at a patient and get a negative reaction in a clinical setting.

**RM:** like a weak spot?

**EX7:** Yeah, I think for example if I knew you a bit better I'd find a way to piss you off. I think what you can't do it's take the stance where you say, I'm going to accept the DSM criteria and cut-offs for that construct and then make an epidemiological study where we calculate the number of people number of

The expert suggests that there is a weak spot, a particular reference that would trigger narcissistic tendencies in the patient. In a similar manner in the approach outline by some other experts.

Expert is willing to accept criteria listed in DSM-5 given that it is necessary to make cut-offs for epidemiological studies.

<p>people within that construct. I think that's ridiculous and unsupportable.</p>	
<p><b>Q4: In your opinion what is the role of genetics as a contributor to NPD?</b> 9:30 – 10:38</p>	
<p><b>RM:</b> Asks Q4 <b>EX7:</b> Genetic studies generally show even if you're talking about relatively stable dispositions, the variance levels are too high. Genes aren't quite the right level of analysis to think about.</p>	
<p><b>Q5: How influential would you consider society and the environment to be as contributors to NPD?</b> 10:39 – 13:21</p>	
<p><b>RM:</b> Asks Q5 <b>EX7:</b> I think the impact on society is overstated. Usually, I think the idea of it being an epidemic is a hoax and I don't think it's very good evidence supporting the idea so I'm sceptical of that. <b>RM:</b> Could you go into more detail about it being a hoax? I think I know what you mean. maybe it's just a case of it being highlighted by social media more. <b>EX7:</b> A lot of papers by people supporting the arguments have turned out later on to be unsupported, except but other poorly supported papers, something of a snowball effect. I think people in western society like England or USA are becoming more individualistic. There are more references to personal pronouns and people are naming their children in stranger and less conventional ways. There are pieces of evidence that people are becoming more individualistic whether that's good or bad for Society is the question and it's not clear at all, because it's not associated with any negative outcomes? I think the trouble is that research is based on instruments, the NPI, which is not all that much related to dysfunction and function. Either the score for the measure of narcissism is increasing, Two, that measure of narcissism is measuring the clinical problems we tend to think of about when we think about that word. I accept the first part but not the second. <b>RM:</b> Sure, that seems logical.</p>	<p>Expert does not believe NPD has high levels in populace. He suggests this notion is created by the rise in individualism and the creation of the internet. Also says you can see this in personal pro-noun changes and children names. He suggests the reason for this change in opinion recently is more likely based upon the increased amount of problems being measured and reducing the severity required before mental health is issued.</p>

<p><b>EX7:</b> Just to add I think if you follow the money people who are pushing that argument on making a lot of money and selling books about it. I'm very sceptical about people who are making money on the scientific argument.</p>	
<p><b>Q6:</b> What aspects of NPD could be considered as providing positive personal characteristics? 13:22 – 15:29</p>	
<p><b>RM:</b> <i>Asks Q6</i> <b>EX7:</b> Depends on how you measure it and the problem of the construct that the way people have measured it is high self-esteem. In the absence of context there's nothing wrong with qualities like leadership and confidence. that's why I restrict the definition to its clinical meaning which is not a bad thing necessarily. There's a basic problem with the measurements with NPI. <b>RM:</b> <i>You mentioned self-esteem. something that comes under with somebody to consider with high levels of narcissism. self-esteem can be pretty broad in my opinion.</i> <b>EX7:</b> It all depends how you measure it. I can answer your question the other way around. To the degree that your narcissism measure is related to positive characteristics, I wouldn't qualify that as a way of measuring.</p>	
<p><b>Q7:</b> To what extent would you consider the DSM-5 interpretation of NPD to accurate? 15:30 – 18:14</p>	
<p><b>RM:</b> <i>Asks Q7</i> <b>EX7:</b> I find it pretty invalid. I can give you an extended answer about the origins of that construct. In the middle of the twentieth century, there were two dominant paradigms in psychiatry. There was the psychoanalytic Paradigm And the descriptive Reductionist paradigm. The latter, the ones that were in control of writing the DSM 3. The reason for that was because psychiatry overall was embarrassed about how inconsistent the diagnoses were. By turning the diagnostic criteria of a fundamentally Influential and complex dynamic construct into something that can be reliably rated, they fundamentally change the definition of the term.</p>	<p>Expert takes issue with the DSm-5 interpretation of the NPD. He suggest the issue with NPD is 'There was the psychoanalytic Paradigm And the descriptive Reductionist paradigm. The latter, the ones that were in control of writing the DSM 3. The reason for that was because psychiatry overall was embarrassed about how inconsistent the diagnoses were. By turning the diagnostic criteria of a fundamentally Influential</p>



<p><b>RM:</b> <i>Sure.</i></p> <p><b>EX7:</b> It basically became, narcissism means being a grandiose jerk. From a clinical perspective it's not enough to know that a person is a grandiose jerk you need to know that they're doing that because of an inner deficit and it's not presented in these criteria. I think there was a gambit the made where the analyst said, the only way we can get our construct in this manual, is if we agree to these criteria. The description of psychiatrists was like, the only way we can shut these psychoanalytic people up is to put these stupid constructs in the manual. So, it's essentially trivialised in the criteria sense in the DSM III and I think that persisted to DSM 4 and 5. So You'll end up having a list of attributes of a person that's an asshole but that doesn't mean the same thing that the psychoanalysts originally meant. We can say that's not a valid construct in the first place.</p>	<p>and complex dynamic construct into something that can be reliably rated, they fundamentally change the definition of the term'.</p> <p>The expert suggests this divide between creating diagnosis and actually accurately giving perfect care. By generalising the symptoms, it has become easier to diagnose but also created a simplified version of what the patient needs.</p>
<p><b>Q8:</b> How accurately do you believe the scientific community understands NPD? 18:15 – 21:01</p>	
<p><b>RM:</b> <i>Asks Q8</i></p> <p><b>EX7:</b> I think it's going to complete disarray and you'll find out if you interview people who give you 10 different answers to the same question.</p> <p><b>RM:</b> <i>it depends, some have been pretty unanimous some have been very split. You can kind of bring it together to an aggregate, but do you think they're still needs more work to be done to get the pieces in place?</i></p> <p><b>EX7:</b> I could reliably sort people into clusters who could give you some Similar answers. So, Josh Miller and Don Martin would have very similar answers. There's massive variance across the spectrum. I would not accept Josh's view, if you're a trait psychologist, you should pick the traits and not arbitrarily create questions that sort people into constructs. it's superfluous and not necessarily accurate</p> <p><b>RM:</b> <i>I suppose the kind of people who should be making diagnostic decisions, should be people who can Read more than 2 pages. So, you think it's too basic in the sense?</i></p>	<p>Expert suggests there is no need to have such a reductionist perspective to diagnosing. Given that the clinician must be intelligent to get to this point where they are counselling it makes sense for the personality disorders to be more in depth, since the clinician will most likely be able to understand them.</p> <p>He also suggests an issue with trait theory such as the one proposed by Josh Miller, as it is a creates a series of sorting constructs which does not necessarily provide therapy or accurately work a hundred percent. The expert suggests a more hands on approach to</p>

<p><b>EX7:</b> I mean what is the point of the diagnosis? to get paid by the NHS or an insurance company in the states then who gives a s***, put any diagnostics you want so you can get paid. If the point is to guide treatment just listing a few traits, like grandiose, attention seeking. I think you can honestly learn that by 30 Seconds of interactions with them. So how does that guy treatment in any way that specific, that doesn't do anything for me.</p>	<p>diagnosing and engaging a more complex treatment.</p>
<p><b>Q9:</b> Which methodology of measuring narcissistic attributes do you consider to be the most valid and why? 21:02 – 24:24</p>	
<p><b>RM:</b> <i>Asks Q9</i></p> <p><b>EX7:</b> That's exactly the right question. I don't think anybody has a good answer for it. You want to have measures that do 2 things. First, using multiple methods so not just relying on self-reports and secondly, methods that can account for time. My overall take on narcissism is that this is a complex Interesting construct and the science of measurement is not adequate to determine whether it's real. We haven't had the chance to test it yet and we don't have the methods to do so in my opinion.</p> <p><b>RM:</b> <i>Has there been any Inventories that you found to be valid or particularly invalid?</i></p> <p><b>EX7:</b> I think the NPI is a huge distraction. I think it has *back necking? * Because it the perverted the meaning of the construct and because it has some psychometric limitations that I don't want to bore you with. I think the precautionary response scale is kind of dumb. I think it's got structure that hasn't been well characterized, those three factors have completely different correlation, but people put it down to 1 construct. I think it's been a huge mistake relying so much on the NPI.</p> <p><b>RM:</b> <i>And with so much research been done that bases itself on the NPI, it almost seems like a self-fulfilling prophecy at this point?</i></p> <p><b>EX7:</b> So, when you have something like the narcissistic epidemic. But then you have to consider that it may not be measuring narcissism in the first place. In general, I would say the favourite of my cross-sectional questionnaires is the PNI? Or the</p>	<p>Expert is somewhat against the NPI, suggesting that it lacks has been misleading other inventories based on its simplicity. I think the NPI is a huge distraction. I think it has *back necking? * Because it the perverted the meaning of the construct and because it has some psychometric limitations that I don't want to bore you with. I think the precautionary response scale is kind of dumb. I think it's got structure that hasn't been well characterized, those three factors have completely different correlation, but people put it down to 1 construct. I think it's been a huge mistake relying so much on the NPI.</p> <p>He argues for multiple measures and suggest there is not enough understanding on narcissism to be making such judgement, even suggesting it may not be real.</p> <p>Recommends instead his PNI questionnaire or the FFM made by Josh Miller. However in all cases she suggests multiple</p>

<p>FFM that Josh and Don and those guys have made. But I think the more important answer is you can't get away with measuring such a complicated construct using a simple questionnaire no matter what the questions are. Even if you want to get beyond questionnaires in general all the questionnaires in the world together still not going to capture this construct.</p>	<p>measures, perhaps as many as possible.</p>
<p><b>Q10: Symptoms of NPD have been described as varying in appearance and recognition. Do you agree with this sentiment and why?</b> 24:25 – 27:06</p>	
<p><b>RM:</b> Asks Q10  <b>EX7:</b> I think the pages on the outside of going to be different. you have to go to the inside of the person to see what's really going on and seeing if it's narcissism or not.  <b>RM:</b> Are you not interested in making distinctions between different types of narcissism how do you propose to do it?  <b>EX7:</b> I don't find that particularly helpful, I want to know what can a person do that would really bother you and threaten your sense of self-esteem and then what you going to do about it? and that's a highly contextualized thing. Let's compares events between trump and Morrissey. Both are narcissists, but would we say that Morrissey and Donald Trump other same some type of narcissism? I don't think so.</p>	<p>Suggests there are certainly differences in behaviour but the expert insists that instead of identifying and categorising narcissists, like how grandiose and vulnerable would do, insists on the clinicians discretion.</p>
<p><b>Q11: Which gender would you say is more like to suffer from NPD and why?</b> 27:07 – 29:48</p>	
<p><b>RM:</b> Asks Q11  <b>EX7:</b> I don't know, if he measures it the way that the DSM does but I don't accept that approach. It could be manifested very differently between men and women.  <b>RM:</b> Yeah it might be more concealable when done by women  <b>EX7:</b> I would say men on average tend to be a little bit concerned with power status and authority and women would be focused on communal connections.  <b>RM:</b> Do you think that is to do with testosterone and oestrogen levels or possibly patriarchal Society thing?</p>	<p>Doesn't suggest either is more likely to be narcissistic. He also does not necessarily attribute traits to certain hormones. Expert instead suggest I would say men on average tend to be a little bit concerned with power status and authority and women would be focused on communal connections.</p>

<p><b>EX7:</b> That's a complicated question probably a little of both. There German psychologist whose studies Narcissism, He has the idea there are both agentic and communal forms of narcissism in which case I think you would have to say it depends on which flavour you are talking about. and maybe oestrogen and being a victim of a patriarchal Society could make you communal narcissist.</p>	
<p><b>Q12:</b> To what extent do you believe age affects the severity of the NPD condition? 29:49 – 31:44</p>	
<p><b>RM:</b> Asks <i>Q12</i>  <b>EX7:</b> I think it's normal for a 3-year old to be narcissistic. the problem is when you're 18 or even 40 then it becomes a problem.  <b>RM:</b> <i>Would you say if you get 40, and display symptoms of NPD, would you become stuck in your ways and will not change?</i>  <b>EX7:</b> There is good evidence that personality is more difficult to change at older ages so there's more hope for you then there is for me ha-ha. It is difficult to say, I would say more around the 60 mark you are noticeably less likely to have some sort of revelation and by 80 you may as well forget it.</p>	<p>Expert does not necessarily specify an age where NPD is most likely to be present.</p>
<p><b>Q13:</b> In what aspects does substance abuse affect the severity of the NPD condition? 31:45 – 36:22</p>	
<p><b>RM:</b> Asks <i>Q13</i>  <b>EX7:</b> You can see substance abuse being intertwined with the narcissistic dynamic, which is the cause and which is the effect is difficult to know. it's interesting because substance abuse is fine until it's not a problem. Get high all you want but once your life starts going wrong and then you can't cut out getting high then it's a problem. if you can get away with it rock on. If one of my patients comes to me and says I'm having all these problems in life and they also get high every night, I'm not going to necessarily say getting high every night is why you have these problems but one really the easy thing you can do is you can stop getting high every night. it's much easier than changing your personality.</p>	<p>Suggests that substance disorder and personality disorder may be tied. Although the expert suggests that any chemical which effects the dopamine receptor is going to have a significant impact on mood and personality disorders by proxy.</p>

<p><b>RM:</b> <i>The way I view substance abuse is, the person has an issue and they need a crutch and if there isn't a supportive person in place. They might turn to substance abuse or something like prostitutes. would you say that different substances affect the severity?</i></p> <p><b>EX7:</b> I think of challenge with answering that question is that I think of narcissism biological and not methodically. I think anything that messes with dopamine it's going to be much worse for example cocaine.</p> <p><b>RM:</b> <i>What about drugs designed for high performance. like speed or Adderall, things that boost your productivity or at least in appearance.</i></p> <p><b>EX7:</b> Yeah those also affect dopamine, so I would reiterate that ones that affect dopamine would be most likely.</p>	
<p><b>Q14:</b> What are some of the key issues facing the full understanding of NPD? 36:22 – 37:54</p>	
<p><b>RM:</b> <i>Asks Q14</i></p> <p><b>EX7:</b> Measurement is the key issue. We don't have the tools to measure the construct and all of its theoretical complexity. it's like trying to argue about the nature of water without understanding the periodic table.</p> <p><b>RM:</b> <i>If you had a load of money how would you go about researching that?</i></p> <p><b>EX7:</b> I think you have to figure out time and multiple methods and there's a both tremendously challenging</p> <p><b>RM:</b> <i>Do you mean more pioneering work in that respect?</i></p> <p><b>EX7:</b> Yes in a way, I would honestly need to really think about it, in fact I really will.</p>	<p>Suggests pioneering and further work into theoretical complexity.</p>
<p><b>Q15:</b> In Stinson et al., 2008. The researchers argue that NPD is the least empirically researched of all personality disorders, to what extent do you agree with this sentiment and is there areas that require further research in your opinion? 37:55 – 39:39</p>	
<p><b>RM:</b> <i>Asks Q15</i></p> <p><b>EX7:</b> No that doesn't seem right. Hmmm even if you were to look at works that only focused on NPD and no other disorders, only looked at the paper that</p>	<p>Expert suggests that NPD is not the least researched disorder empirically.</p>

<p>somehow separated them, then perhaps. But no I don't think so, histrionic for sure hasn't received that kind of attention</p> <p><b>RM:</b> This seems to be the prevailing opinion.</p> <p><b>EX:</b> Perhaps they wrote that to some how encourage more investment into narcissism, but really that doesn't make any sense. Further research into the theoretical complexity of the narcissistic condition, how it interacts with other moods, other emotions. I think when you look at these kinds of ideas from such a clinical perspective you are failing to take into consideration just life in general. Trying to categorise what, it doesn't even make sense to think of people as a series of traits. People aren't two-dimensional movie characters, they all have the same stuff inside of them creating complex emotions. Intelligence doesn't even factor into this.</p>	<p>Suggest that for further research we should move away from this idea of categorisation through traits and instead create more complex models that fully and accurately capture the scope of human psyche.</p>
<p><b>QC1:</b> What criteria would you use to classify someone as having a mental illness? 39:40 – 40:54</p>	
<p><b>RM:</b> Asks <i>QC1</i></p> <p><b>EX7:</b> I don't really like that term. I think it's important for people who have problems in their lives to get help. I'm quite pragmatic about this issue. People are very preoccupied about biological origins and that changing the perception on how valid their problem is. And they feel if it was it would be more valid. I feel obligated as a person of privilege to use some of my tax money to help people with problems and as a licensed health professional. I don't care if the problem is their fault their parents fault their genes it doesn't matter. what I'm interested in is that people having problems have opportunity to improve. I just wouldn't really use terminology.</p>	<p>Expert does not look fondly on the term mental illness, there is again some movement away from discreet diagnosis and labelling.</p>
<p><b>QC2:</b> To what extent would you consider a personality disorder to be a mental illness? 40:55 – 41:39</p>	
<p><b>RM:</b> Asks <i>QC2</i></p> <p><b>EX7:</b> If they have a problem in their lives that is causing distress or dysfunction for themselves or people close to them, then they have a mental illness I guess.</p>	<p>Suggests all PD's are mental illnesses but again is not supportive of the terminology.</p>

<p><b>RM:</b> <i>To what extent do you consider a personality disorder to be a mental illness?</i></p> <p><b>EX7:</b> If it meets that criteria.</p> <p><b>RM:</b> <i>So, some personality disorders are not mental illness?</i></p> <p><b>EX:</b> To put it differently I would say all mental illnesses are personality disorders</p>	
<p><b>QC3:</b> To what extent do you consider NPD to be a mental illness? 41:40 – 43:40</p>	
<p><b>RM:</b> <i>Asks QC3</i></p> <p><b>EX7:</b> Being of developmentally immature is one path having problems in life.</p> <p><b>RM:</b> <i>is it particularly egregious disorder in comparison to others?</i></p> <p><b>EX7:</b> I think there are problems in life that are very chronic and debilitating like severe autism, extremely low intelligence, traumatic brain injuries flavours of psychosis. I'm more hopeful for a person who is narcissistic than any of those.</p>	<p>Suggests that NPD is perhaps not as debilitating as some other types of psychosis.</p>
<p><b>QE1:</b> What aspects of NPD could be viewed as dangerous to society? 43:41 – 44:04</p>	
<p><b>RM:</b> <i>Asks QE1</i></p> <p><b>EX7:</b> The question is kind of frames for me to accepted definition of narcissism.</p> <p><b>RM:</b> <i>Just speak about how you want to speak about it that's the point of this research you don't necessarily come from our angle. I want to get a whole different perspective. it's really good.</i></p>	
<p><b>QE2:</b> In your opinion, in what ways can those with both NPD and a position of power impact society? 44:05 – 48:09</p>	
<p><b>RM:</b> <i>Asks QE2</i></p> <p><b>EX7:</b> One of the characteristics of narcissism that lead to problems for other people, is that people with the problem aren't very reflective or self-aware. If you're not careful, you're not thinking about the impact of your behaviour and the origins of that behaviour then you have all kinds of potentials to cause damage. especially if you have the privilege to be in a position of power. If you think about people like Donald Trump they live life in a way to avoid</p>	

<p>feeling small. sometimes you have to reconcile the fact that you are small that your life is meaningless, if you have a hard time doing that you can do all kinds of things to compensate for that concern and caused damage and you don't think at the fact that you're causing damage.</p> <p><b>RM:</b> <i>Or maybe even revel in the destruction to a degree.</i></p> <p><b>EX7:</b> Yeah, for example Margaret Thatcher. I consider her to be reflective despite the damage that she's done to the Country I wouldn't compare her to Someone Like Ronald Reagan.</p>	
<p><b>QE3:</b> What are your opinions on NPD being classified as a Personality Disorder in the DSM-5 but not in the ICD-10? 48:10 – 49:34</p>	
<p><b>RM:</b> <i>Asks QE3</i></p> <p><b>EX7:</b> I think it's time to move on at this point so it can prove its value. I think we should delete narcissism from diagnostic manuals until the current definition has proven its value.</p> <p><b>RM:</b> What would you put in its place if anything?</p> <p><b>EX7:</b> Some combination of traits and dysfunction.</p>	<p>Expert proposes a radical overhaul of diagnosis, suggesting removing NPD and narcissism in general from the diagnostic manual until it can be considered meaningful. Although what it should be changed to, and how it should be done is not specified in detail.</p>



## Interview with Expert 8

INTERVIEW 8	THEMATIC
<p>Q1: What do you consider to be the key traits and characteristics of a person displaying narcissistic personality disorder? 0:00 – 2:38</p> <p><b>RM:</b> <i>Asks Q1</i></p> <p><b>EX8:</b> Yeah, so I would say in my opinion the key characteristics, the one that stands out to me the most would be just the sense of arrogance and acts of self-interest. One of the characteristics people have this a real of sense of superiority, the sense of grandiosity and entitlement, some people thinking that they deserve better treatment than the others or special treatment. Then I would also include selfishness, self-centred, really prioritizing one's needs over the needs of others. And the last one that stands out to me is sort of the sense of exhibitionism and attention-seeking, trying to be in the spotlight and having power, that kind of thing</p> <p><b>RM:</b> <i>Do you distinguish the difference between vulnerable and grandiose narcissism?</i></p> <p><b>EX8:</b> So yeah, that's what I can probably talk a lot about. I would make a distinction, yes. I probably fall more into the camp where grandiose and vulnerable narcissisms are different presentations of narcissism rather than present just that different types of the same person. I think individuals who are very grandiose, they might show anger in their reaction rather dominant than vulnerable narcissistic individuals. But I think there are certainly people out there who are narcissistic just because they are narcissistic and not because they are trying to master underline vulnerability or something that they don't like about themselves. So, I would make distinguish between those 2 things.</p>	<p>Expert suggest differences in anger displayed between narcissists might be one of the factors worth considering in their separation.</p>
<p>Q2: What would you consider the difference to be between a person displaying narcissistic tendencies and a person with NPD?</p>	

2:39 – 5:12

**RM:** asks Q2

**EX8:** I guess I would think about it as an issue of severity and how much that interferes with the person's functioning or another people's functioning. So for example, you could probably think of somebody who may be, I would say, they are a little bit smart or arrogant, but they are still likable or overall generally a fine, or average member of society. Maybe they talk about themselves too much but in general they are enjoyable person to be around. Whether if you're thinking about it as a full-blown disorder those traits are present very strongly and they either interfere with person's functioning. For example, maybe it makes their relationships difficult, or they make the lives of other people really difficult. So perhaps they are manipulative and self-centred in relationships or seek power just for the sake of seeking power and you could see a situation where it becomes a problem for other people. And I think and the disorder I really think about is an extreme version of some Machiavellian characteristics.

**RM:** *It's interesting that NPD is a little bit different, perhaps, to other personality disorders on which extend to how you consider someone to have NPD or not tend to be a lot on how tolerable people find them in a way. Like there are certainly people who kind of write that line of like... I think perhaps, may be Robert Downy Jr...*

**EX8:** Yeah, sure

**RM:** *kind of cheeky cocky guy but everyone loves that about them. Maybe it's almost like a leader quality in a way or something like that*

**EX8:** yeah.

**RM:** *Or like a bonding element in a way. Then that's not exactly narcissism, that's something else, I suppose.*

**EX8:** Yeah, I think that's a good example and I think this may be getting in some other

Suggests that normal levels of narcissism are fine, but when the person is deliberately trying to make our lives difficult to the complete disregard of the emotions of others, then it can be considered a serious condition. This would suggest that the expert considers NPD to be a serious condition.

<p>questions a little bit. But I think that with narcissism the ugliest how I see it the issues of [redacted] the distresser has always been jealousy to the detriment of themselves and others, but they might cause problems for other people, [redacted] like manipulative relationships, that kind of things.</p>	
<p><b>Q3: To what extent would you consider NPD to be prevalent in the general populace?</b> 5:13 – 6:49</p>	
<p><b>RM:</b> Asks Q3 <b>EX8:</b> I would say that the prevalence is very low of NPD that is. Although that's of course subjective. Estimates I've seen of range like anywhere from 1 to 5 percent I mean based on qualitative experience of what I've read <b>RM:</b> On the estimate I've heard, perhaps, somewhere around the 0.1 to 1 percent even less maybe <b>EX8:</b> Oh, WOW, yeah <b>RM:</b> Extremely low. It's very subjective. <b>EX8:</b> It is indeed.</p>	
<p><b>Q4: In your opinion what is the role of genetics as a contributor to NPD?</b> 6:50 – 8:46</p>	
<p><b>RM:</b> Asks Q4 <b>EX8:</b> I think that's an interesting question and, in my opinion, as far as the development of narcissism we don't have very good understanding of, there different theories out there but to my knowledge there have been a lot of societal research examining these kinds of issues but not so many genetic studies. I would say that genetics is pretty big component to it that would explain a lot of the characteristics, where you see it in siblings or children and parents. Even when you conduct twin studies and separate them, then tend to grow up with some innate traits from their parents. Also I mean given how similar humans are biologically, it would make sense that genetics influence behaviour in a huge way. I would think that it definitely is the central component as important as the environment, certainly, I would think. <b>RM:</b> Would you say it is roughly 50%, I suppose it's where most people fall. It seems very</p>	<p>Suggests that some narcissistic characteristic or behaviours from the parents are epi-genetical and behaviours can be passed down genetically. In addition, given the biological similarities all humans have, it would be reasonable to imagine that behaviour is recreated, manifested and understood in a similar way within the brain. This would suggest that human biology could effect mood a great deal.</p>

*difficult to determine ultimately because I've never met anyone, or rather I haven't interviewed anyone who really can say with definition about the role of genetics that pretty much (I'm going to get to this later) all based on the society and the environment because people just don't know. It's too dangerous because of the problem of multi-generational studies which people going to conduct.*

**EX8:** Yeah, absolutely. I think environmentally I don't think we know whole lot about narcissism. But then again, we know very little and that is difficult and important question to be answered, certainly.

**Q5:** How influential would you consider society and the environment to be as contributors to NPD?  
8:47 – 13:45

**RM:** Asks Q5

**EX8:** I think genetics is probably more primary and genetics help dictate the environment that you choose, that kind of thing. That being said, I think just like anything there certainly is more important environmental contribution and so from what I've read there 2 sorts of theories of development of narcissism. One of them seems to be that narcissist is chosen at birth to develop these tendencies. Another one is the person who is narcissistic as an adult was spoiled as a child and thought they were special, they were great. I would personally see that as a bigger influence of narcissism, but again, I don't think we have the answers to these questions and I think that is an important direction for narcissism research quite forward.

**RM:** *That is interesting because arguably schooling in more recent decades had that kind of spin on it which is bigging children up a lot like 'you are great'.*

**EX8:** Right

**RM:** *I was wondering if you think, well, firstly, if you agree with it, secondly, if you*

Expert suggests 'there 2 sorts of theories of development of narcissism. One of them seems to be that narcissist is chosen at birth to develop these tendencies. Another one is the person who is narcissistic as an adult was spoiled as a child and thought they were special, they were great. I would personally see that as a bigger influence of narcissism, but again, I don't think we have the answers to these questions

*think that could lead potentially to more narcissistic as a general populus? Or is it, perhaps, may be more deeper issue than that, and this is only self-esteem issue*

**EX8:** Yeah, it is an interesting question. There is a lot of stuff now about generation millennials and narcissism, whether the society is promoting that. I think there's been some debate about that. In the States there's increasing valuation narcissism being measured. Once could argue that the president chosen for the country is a reflection of this. But the thing is a leader and being really confident and really persuasive is a good thing. I think those traits are really being valued by younger generation. So, I could think that contributing to some degree or maybe people who don't have those traits can feel like something's wrong about them and they're not leadership type. But I think we can only have so many leaders and I think telling everybody they are going to be a leader probably is unrealistic. And I could see that contributing to narcissism in some way shape or form. Because, again, I don't think everybody can be a leader, but I can see at schools, at least in the States, where everybody is told to be a leader and to stand out and that's sort of interesting perspective.

**RM:** *Mathematically for everyone to be a leader it would be impossible. I think for lots of people think they want it but actually they don't particularly want to be a leader, they hope to follow a leader they believe in. You've gotta be a little bit narcissistic to be a leader because you want to stand in front. Maybe he will tell "oh, I'm doing it to help society" or whatever but there's still something underline there.*

**EX8:** Oh yeah, I mean you have to be ok with the attention, be comfortable with the fame and still manage it

**RM:** *Do you think recent integration of social media has influenced narcissistic tendencies?*

**EX8:** I think it's possible. I think may be to some degree, but I think it also may be that people who are

<p>already type of narcissistic or histrionic just are louder and able to express themselves better on social media. Just now that we see it more. But companies like Facebook have massive massive marketing teams designed to among other things bring out that kind of narcissism which keeps you posting. So I think it probably contributes to some extent, but I think a lot of it is just giving the people the outlet to what they already have. It's just now on display more.</p> <p><b>RM:</b> Well, you get a mathematical representation to something like Facebook or you get an amount of likes and comments that you wouldn't have mentioned if you were alone. It was just based on how you or other people were experiencing it. Whether now it has mathematical basis behind your thinking of how the people think about you.</p> <p><b>EX8:</b> Yeah</p> <p><b>RM:</b> Who knows? It's going to take a long time now to do the research on it</p>	
<p><b>Q6:</b> What aspects of NPD could be considered as providing positive personal characteristics? 13:47 – 15:07</p>	
<p><b>RM:</b> <i>Asks Q6</i></p> <p><b>EX8:</b> I think some of the things we talked about in their less extreme forms like the leadership aspect. Like you were saying, to be an effective leader you have to have some confidence, to be the centre of attention, assertive, driven and have a strong sense of self-belief. So I could see a lot of situations, you know, when you're running a company, you're running group or even in a clinical psychology world if you want to be a top scientist or researcher. There some of those traits that could be adopted. I think some of this leadership and confidence aspects could be adapted. But I think if you're a professional athlete, I think that athletes who have certain degree of narcissism or a lot of narcissism, I think it is legitimately helpful for</p>	

<p>them or if they want to be the person who takes the final shot or the final shot or the final shot of big name. There is a lot of variable and it all intermingles with what it means to be human.</p>	
<p><b>Q7: To what extent would you consider the DSM-5 interpretation of NPD to accurate?</b> 15:08 – 18:14</p>	
<p><b>RM:</b> <i>Asks Q7</i></p> <p><b>EX8:</b> So, I would say, overall, it's a good representation. I think some of the criteria are probably just different ways of asking the same thing. But I think overall, it is a good reflection of some of the core traits that at least that I think of as defining narcissism. I think it reflects here against entitlement those kind of things. I think having a bit of a fuller and cleverer dimensional model will be preferable to the criteria. Also, some of criteria themselves seem a bit redundant So I I prefer a complex model with the trait dimensions rather than categoric criteria.</p> <p><b>RM:</b> <i>That's been a hot question. One expert said "you should throw that all out because it is much too vague – classifying people with the sort which just putting them into the category and not actually treating them on individual basis". He said it's kind of a problem when it's quite brief and also it doesn't necessary reflect the use of vulnerable narcissism. It's still up in the air and everyone is coming to it from a different kind of angle.</i></p> <p><b>EX8:</b> I think, like you said, there is not a lot of consensus, I think people are not happy with it as it is. I would generally agree that these categories, but they don't know exactly what that means, we're saying you can't take into account another trait as well that might also be present, or some other disorder.</p>	
<p><b>Q8: How accurately do you believe the scientific community understands NPD?</b> 18:15 – 19:56</p>	
<p><b>RM:</b> <i>Asks Q8</i></p>	<p>Expert suggest one of the key issues in the understanding of</p>

<p><b>EX8:</b> I think, honestly, there people who are really passionate about that and I think they are taking these issues really seriously but this is based just on my personal experiences, when I've discussed vulnerable and grandiose narcissism and those concepts with other people and other researchers, most of it is just kind of speculative. I think some of the issues with that are that narcissism is studied a lot in clinical psychology, also studied a lot in personality psychology and social psychology. And you have years of intermixing literature and so may be people are more or less familiar with those individual literatures and it is hard, and have their own interpretations I think it is challenging for anybody to integrate those literatures and make sense of it all, especially even when the experts, like you're saying, who studied NPD, narcissism specifically, can't agree on consensual definition, that makes it tough to compare and contrast the research with one another. I don't think that we can expect them to have a good definition because we don't have one actually.</p>	<p>narcissism is the multiple backgrounds and methodologies having issue being compared and contrasted. Whilst it can be done, it does not accurately display the full picture of narcissism and can be interpreted in many ways. Also given its entirely theoretical nature it is difficult to even define it properly.</p>
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**Q9:** Which methodology of measuring narcissistic attributes do you consider to be the most valid and why?  
19:57 – 23:11

<p><b>RM:</b> Asks Q9</p> <p><b>EX8:</b> I guess maybe this is kind of cheating, but I would say as much as possible getting multiple measures and sources of information from the person themselves, also from informant, so perhaps, people who've known that person for a while, because they can bring different perspective. A person that you meet for one hour in a clinic might not get an accurate picture. Also a really narcissistic and self-centred might be worried that you are going to try and change and influence them so they might try and hind their condition from you, especially if they know the reason for their clinical visit. One really important future direction for narcissism is really get out this question of vulnerability assessed, by using broad longitude studies, that use large sample sizes.</p>	<p>Expert suggest multiple sources, and utilising interviews with close family members.</p> <p>Expert recommends using ecological momentary assessment designs. This would mean following a narcissistic individual imoving throughout their daily lives if they do show these fluctuations of grandiosity to vulnerability. I think that the research that is focused on vulnerable is really just speculative.</p> <p>This kind of design involves the individual and individuals</p>
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<p>Also using ecological momentary assessment designs that we can actually test to the extent that narcissist is moving throughout their daily lives if they do show these fluctuations of grandiosity to vulnerability. I think that the research that is focused on vulnerable is really just speculative.</p> <p><b>RM:</b> <i>How would you test it?</i></p> <p><b>EX8:</b> I think you could do couple different ways. I think you could do it when you're just using EMA of what happened to person, by filling out a diary. In that case of EMA approach you just track them of complete assessment, you know, several random assessments a day for so many days, track whether or not they were in a social situation and how they've responded. That would be one way to get at it. But then you can see if there is anything that is unusual. Do you see fluctuations or narcissistic outbursts or is this person pretty much always says that they feel good about themselves and that would be interesting. Another way to get at it would be to use more of an experimental design where, for example, you actually bring narcissist to a lab studying, have them do some sort of task to see if they show more reactivity to criticism from others or to negative abuse from others. I think that there are couple of different ways you can go about it. I think that would be interesting approaches that would really take these researches a step forward.</p>	<p>around them filling in diaries that record outburst of narcissism from the individual. Acting as both self-reflection and data taking.</p>
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Q10: Symptoms of NPD have been described as varying in appearance and recognition. Do you agree with this sentiment and why?  
23:11 – 27:04

<p><b>RM:</b> <i>Asks Q10</i></p> <p><b>EX8:</b> I would say for the most part no, I think I'm most interested in studying different approaches like methodology (pathology?), what are the elements of NPD that can distinguish it from other disorders. So I'm guessing with this question getting about grandiose vs vulnerable distinction and I think for somebody to be a narcissist there's a</p>	<p>Expert suggest there is no need to further split NPD and this would intermingle more with other disorders. Expert argues for the adoption for a trait-based model for medical diagnostics, suggesting NPD should only be used for a n individual with particular grandiose tendencies.</p>
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grandiosity and entitlement and attention seeking that really has to be there. And I think you just have these vulnerable features are like some other personality disorder. For example: avoidance personality disorder, really something that's different and I think what stands out about narcissism or the grandiose aspects is just they focus on self-entitlement and grandiosity and if those are not present you don't have in narcissist. That person could also just be having some brief mood swings, or could be self-conscious in some situations and I think grandiosity is the thing that distinguishes narcissism. Without it the condition becomes something else.

**RM:** *Would you consider doing split and kind of disorder labels and moving away from the idea of NPD to grandiose personality disorder or vulnerable personality disorder?*

**EX8:** I think that the best way to capture that will be some sort of a trait model where you could have somebody who is high on grandiose traits or you some sort of specify if they also show elevation on vulnerable traits.

**RM:** *Is there an issue with trait theory not providing a diagnostic name for people? It only provides them with point score? Would that be an issue?*

**EX8:** I think that would be important if we adapt some kind of trait scheme you still have labels of some sort of greater purposes and reinvestment, also communication with the patients. So, I think the challenge of that would be determining where are the key markers. For somebody to meet even if you're using the trait model to be diagnosed with NPD. I think they would have to have eye caught on high scores of grandiose traits such as entitlement and exhibitionism and inflated self-esteem. Again, I think at the most fundamental cores of those high scores that would have to be there to get somebody this label. But I think that label is important for a lot of purposes. With using this dimensional scheme, we don't have to parallel label entirely, we just say the most

Expert suggests that most practical model is a trait based one, however it is necessary to have disorder cut off points for diagnostic purposes.

<p>primary thing going on there seems to be these grandiose traits.</p>	
<p><b>Q11: Which gender would you say is more like to suffer from NPD and why?</b> 27:05 – 29:52</p>	
<p><b>RM:</b> <i>Asks Q11</i>  <b>EX8:</b> I would say males are. I would think it could definitely be problematic in some females but looking at the personality literature I think the men are higher on the measures of leadership and measures of antagonism and some of these other traits that we've talked about being central to narcissism, there are probably some cultural factors that includes that: for example, where men are just put into the leadership roles more respected as the leaders then women, so I would say – men.  <b>RM:</b> <i>Do you reckon that is to do with testosterone and estrogen or society structure?</i>  <b>EX8:</b> I think probably both of those things. I do think the societal structure is probably some of it where I could say there are probably more expectations for males that there will be leaders. I mean, look at the USA, supposed to be one of the leaders in global progression and freedom you've never had a female president. There certainly seem to be strong environmental influences there too, and I think for men perhaps it's more appropriate or OK to be narcissistic whereas women might receive harsh environmental feedback for seeming to arrogant or too much of a leader type.  <b>RM:</b> <i>It is very difficult for a woman to pull of because men are looking to put them down especially in a way of the challenges in a narcissistic way, in a way, perhaps, a man could or would act. Could you imagine, for example, a female Donald Trump in a way he would act? It is very hard to imagine</i>  <b>EX8:</b> Absolutely. I think for women it is much finer line and more difficult line to walk. And I mean I couldn't really imagine situation where we would have a female Donald Trump – that person is just hard to imagine.</p>	<p>Expert suggest men are more likely to have narcissistic tendencies.</p>

Q12: To what extent do you believe age affects the severity of the NPD condition?  
29:53 – 32:37

**RM:** Asks Q12

**EX8:** I think to some degree, but I also think we don't have really clear answer on this. I think it's hard to imagine somebody in their 70s or 80s just being as aggressive about their narcissism I guess where it's really out there and they are really seeking attention especially if you are, or used to be an exhibitionist.

Any exhibitionist has aspects of the NPD disorder: it might be about one's aging body or being a centre of attention, or progressing sexual boundaries, the need to for fill a kind of kink.

I think those things are probably associated to age to some degree. Whereas again people who are poor, look plain and never had much interest in mating. They are not really judged based on their appearances as much as narcissist who is under the impression everyone envies them and wants to have what they have. So, I can see it influencing those particular traits the most, the ones that are based on exhibitionism and attention seeking and liking someone's body and finding it attractive

**RM:** *I was speaking to one of the experts and he said that that's the thing about age: it's the ultimate fight for narcissistic individuals, because they can't win. You can fight it with face lifts and tummy tucks, but ultimately, it's going to get you in the end. But interestingly it also seems that highly narcissistic attributes seem to draw off kind of in the early 20s – like 25. Do you have any idea why is that might be?*

**EX8:** You know, one theory might be that in your teens - early 20s some level of narcissism is adaptive, sort of gives you confidence to go off and do your own things. That could be some of it. I think at that age they are probably also much more focused in popularity, if you think about people who are in college and if we are talking about something like Facebook or Instagram there is a lot of reinforcement at that age for appearing to be very socially active, loving and kind of wild and I think that there are a lot of environmental

Suggests that people who display exhibitionist tendencies most likely have some aspect of NPD in their psyche. The wanton need to expose oneself is suggested to have ties with the need for public attention and admiration associated with NPD. This is in conjunction with the sexual boundaries that suffers of NPD often seem to have issue affirming too.

Expert also suggests that narcissistic tendencies in the teens and tweenies can be aggravated and heightened by the rise of social media and heavy market directions towards consumerism.

<p>expectations at that age too that contribute to narcissism showing up. Since these kids think that this will make them happy, they are willing to push the ethical and moral boundaries to achieve this kind of mad high expenditure lifestyle. Its all just marketing though of course.</p>	
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**Q13: In what aspects does substance abuse affect the severity of the NPD condition?  
32:38 – 34:26**

<p><b>RM:</b> <i>Asks Q13</i>  <b>EX8:</b> I would see it almost as substances I tend to think sort of caused by some other underlying issue whether it would be sensation seeking or to cope with pain of living, as a numbing mechanism. With narcissism I would see it linked more to sensation seeking and I guess if somebody who is narcissistic also reported a lot of substance abuse I think overall it would be indicative of just generally more externalizing difficulties. I wouldn't say they are going to be more narcissistic, they already have the condition right, but maybe it reduces their inhibitions and further reduces their ability to withhold thoughts.  <b>RM:</b> <i>Do you think certain substances would increase the severity more than others? Or rather are there some substances narcissistic personalities are drawn more to?</i>  <b>EX8:</b> That I don't really know, and I think special substances are more apt for some people in general and I think that would probably be the same case for narcissist as well. So, for example if you had cocaine or heroin addiction, that's probably going to be more problematic for most people than smoking marijuana or occasionally misusing alcohol. I don't think necessarily in a way that it is any different from anyone else.</p>	<p>Expert does not necessarily suggest that NPD would be worse as result of substance abuse. Suggest that individuals with NPD already will display narcissistic tendencies without substance, only that substances might reduce ability to withhold expressing all thoughts and ideas without a filter.</p>
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**Q14: What are some of the key issues facing the full understanding of NPD?  
34:27 – 37:39**

<p><b>RM:</b> <i>Asks Q14</i>  <b>EX8:</b> I think some of these we've already touched. I guess I see 2 issues. The 1st one is how much should vulnerability be represented, definition on the</p>	<p>Experts suggests one of the key issues is to do with how much emphasis is placed on the role of vulnerability within narcissism.</p>
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concept of narcissism - I think we need to determine that. And then if we determine that (yes or no), to what degree a person needs to be in a category that suggests expressive narcissistic tendencies. Then I think we need to come up with the best way to measure it whether it would be the traits or some sort of combination where we use traits and then the category. So, I think one is to determine the extent to which the vulnerability is also part of narcissism. But before we do that I think we need to pin down what the key traits and aspects of disfunction are. That's a really important issue, obviously: when you're going all the way down to what the disorder is and how we define it, I don't think not necessarily asking those questions for something like depression is a bad idea either

**RM:** *Why do you think we still haven't kind of established a precise measuring method. I'm not going to say we haven't come long way but it still seems like almost pioneering research still needs to be done in some*

*ways and if it's not that, like you said, the implementation of a multi-dimensional attribution model. Why is it taking so long to be put in place?*

**EX8:** I think some of that is as far as the definition. Like I said, I think there is a lot of studies of narcissism but all different directions.

There is the conceptualization of narcissism focuses heavily on grandiosity. In the clinical world I think it is a little different. Psycho-dynamic theorists and therapists who really see the vulnerability as an important piece and I think we've kind of got to the point where people are really stuck in their views. I think honestly that's some of it where they are not willing to amend and try to find common points of their agreement where some people saying "no, you're wrong, I had clinical cases, vulnerable narcissism is a thing, should we treat it like narcissism or like something else entirely. I think the progress is then really slow because of that. Like I

The second issue is due to lack of consensus within the community on basically all aspects of narcissism, with no new information coming to light that will currently change minds.

<p>said earlier, another important thing is that narcissism really hasn't been studied developmentally or cross cultural or really had environmental design and experimental design very often. So, I think there are some really big holes there, we just don't really have good sense of how core the vulnerability aspect is.</p>	
<p><b>Q15:</b> In Stinson et al., 2008. The researchers argue that NPD is the least empirically researched of all personality disorders, to what extent do you agree with this sentiment and is there areas that require further research in your opinion? 37:40 – 41:17</p>	
<p><b>RM:</b> <i>Asks Q15</i> <b>EX8:</b> I guess I'm going to look at it as the different diagnosis that is lowly researched. I don't really know anybody who their primary area of study is histrionic personality disorder, or schizoid personality disorder or obsessive-compulsive personality disorder. However even so this sounds like a false claim. I do think the literature has picked up, especially in recent years as narcissism seems to be a topic of continuing public interest. And like I was saying, I think the important future directions is to use latitudinal and EMA designs where we can really assess how stable some of these traits are and how central to narcissism they are. I think without those design we are not being able to answer some of those questions about how central vulnerability. Another big area that I think is important is once we have figured out, we are going to need to push through the dimensional model which I think we should, we need to have some clinical field trials that we show can use these measures effectively and if it does actually, improve diagnostic specimen. <b>RM:</b> <i>It's interesting that you've mentioned the history of narcissism not being focused on because I've heard that from other people as well and I think that distance of papers I researched is something like 10 years old so it turns out to not being exactly</i></p>	<p>Expert does not agree with Stinson claim.  Suggest that often histrionic disorder and NPD get measured together which maybe one of the reasons why Stinson et al made this claim. Regardless the expert suggests that this claim by Stinson is false based on a lack of research done specifically on histrionic disorder.</p>

<p><i>true at all now.</i></p> <p><b>EX8:</b> I think that some of it is becoming increasingly more recognized certainly for shifting cultural reasons. I also think when you think of histrionic a lot of models sort of blend in with narcissism and histrionic PD share same features as narcissism, so those things are often end up being studied together or similar traits end up being studied together. You just don't see whole lot of papers where you know, for example, the histrionic disorder is the sole focus where you can see a lot of them where narcissistic is the sole focus.</p>	
<p><b>QC1:</b> What criteria would you use to classify someone as having a mental illness? 41:18 – 42:04</p>	
<p><b>RM:</b> <i>Asks QC1</i></p> <p><b>EX:</b> I think the most important thing I could see, I guess there are 2 things: 1 is it very distressing to the person or to other people around them. That's the core criteria. The 2nd thing I would say, especially if you're thinking about severity, almost how much functional can that person done a job, can they go to school, anything that overlapping with the distress. I think sometimes we tend to think of distress and failure to function in a pyramid that's two really separate dimensions. I think they are overlapping to quite some degree, but I think also deserve there own focus.</p>	<p>Suggests that distress and lack of function are both good signs of mental illness.</p>
<p><b>QC2:</b> To what extent would you consider a personality disorder to be a mental illness? 42:05 – 43:12</p>	
<p><b>RM:</b> <i>Asks QC2</i></p> <p><b>EX8:</b> I think pretty much 100% and if you think of something like anti-social personality disorder or grandiose narcissism again, the problems might not be in that person but in the disorder as present as pathological, it may cause problems for other people, so for example the person who is a narcissist might play a lot of games in the relationships, might always be out for themselves whether it's inside the job or in another setting,</p>	<p>Expert again highlights differences between distress and a lack of functionality. This suggests that people with NPD may have high functionality but are still distressed, meaning they count as having a PD or mental illness.</p>



<p>may be disruptive to the other people just because they are so arrogant. Somebody with anti-social PD, for example, we still say they have a disorder and have a PD even they aren't particularly distressed just because they're breaking laws or something like that. I don't think it necessarily has to be about distress of a person, I think it can be functionality in society's eye, which is a complicated issue but exceptionally impactful.</p>	
<p><b>QC3: To what extent do you consider NPD to be a mental illness?</b> 43:13 – 43:41</p>	
<p><b>RM:</b> <i>Asks QC3</i> <b>EX8:</b> Again, I think I absolutely would. I think there might not necessarily be a lot of distress or that person with the disorder, but that person can be causing a lot of problems for other people.</p>	
<p><b>QE1: What aspects of NPD could be viewed as dangerous to society?</b> 43:42 – 44:57</p>	
<p><b>RM:</b> <i>Asks QE1</i> <b>EX8:</b> I'm sure you've got I would guess that you've interviewed a lot of joking authors from the America about Donald Trump <b>RM:</b> <i>He has pretty much dominated the research</i> <b>EX8:</b> I think that is a good example when somebody so aggrandising and so self-absorbed and the primary goal really there is to promote the image, their product (you know, their product is themselves). That's not really a good thing when everything is self-centred. I think again, you know, it's not necessarily just Donald Trump but we could probably think of other examples like business executive or even somebody at school who is a bully because they are very narcissistic. There are probably different manifestations and examples but I think narcissism is a very dominant space thing and so I think in some ways it's hard to reason with a person who is very dominant but for the people whom they</p>	

<p>are backing whether it is subordinates or dominated individuals they might see some positivity in the actions displayed by the narcissists. And often narcissists feel like they are going to war, they want to rally their troops and get ready to attack. It's kind of a game which other people aren't really playing but caught in the crossfire. You see this a lot in office politics.</p>	
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**QE2:** In your opinion, in what ways can those with both NPD and a position of power impact society?  
44:58 – 47:13

<p><b>RM:</b> Asks <i>QC2</i></p> <p><b>EX8:</b> Hmmm, maybe in some sense a level of stubbornness when that person really needs to be right just to be right and this really dogmatic and authoritarian to the point when it's got to be a highway where there is no negotiation, no compromise, it is all about that person and their agenda. When you think of your political leaders at various levels of the government, I think we want somebody confident but not somebody who is a loose canon and whose point is just to be right and proof their agenda. I think the issue there is we can think of how confident somebody is and what other traits they have. For example, if somebody is very confident but they have good impulse control, they are self-restrained and in personal interactions they are very nice person, then it's not so bad if they think they are really great and they are doing really great job. The problem when they think they are great but they are also think they are jerk and they are loose cannon and have no self-control and just kind of all over the place, floundering for improvements without thought.</p>	<p>Suggests that a narcissistic leader is not necessarily a bad thing if the leader is delivering, it's when the leader thinks they are great because of their narcissism, but in actuality they are failing the people, and they are just blind or dismissive of their pleas.</p>
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**QE3:** What are your opinions on NPD being classified as a Personality Disorder in the DSM-5 but not in the ICD-10?  
47:14 – 49:44

<p><b>RM:</b> Asks <i>QE3</i></p> <p><b>EX8:</b> I don't see it as a huge issue as I'm not as up to that ICD test. It seems more like</p>	
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they are moving towards and more generalist trait sort of model and I think that probably is way to go. I think ideally, I would like to see a DSM follow where the ICD headed not the other way around. I think there's been a lot of resistance to change into trait models and so I would like to see the DSM go more where it looks ICD is going. And I think I'll be happy with ICD whether it's 10 or 11.

**RM:** *I'm not sure whether it's been published or not though*

**EX8:** I don't think so. I think they are working on a revision right now so may be what I'm saying doesn't make a lot of sense. But I guess generally what I've heard of the generalist perspective of the recognition of different traits, but I would also like for DSM to go that way. I think it's a problem if you don't have the same conditions but there are so many categories like if you look into the depressive disorders. There's 10 different depressive disorder diagnoses and again I think we're better off with having just 1 depressive disorder with some different specifiers and traits rather than 10 different diagnosis that essentially capture different degrees or manifestations of the same thing.

**Interview with Expert 9**

INTERVIEW 9	THEMES
<p>Q1: What do you consider to be the key traits and characteristics of a person displaying narcissistic personality disorder? 0:00 – 2:04</p> <p><b>RM:</b> <i>Asks Q1</i></p> <p><b>EX9:</b> Er yeah sure, so I mean there are some common traits shared by all narcissists and then there are traits that say a vulnerable narcissist would have as compared to a grandiose one. Common traits would be the detachment of self that a person has that causes them to foster resentful tendencies, so normally the narcissism is a reflection of the behaviour of the parent. The commonality is that the behaviour is abusive in some nature. Other communalities would be highly sensitive to criticism, although how this manifests as behaviour would alter. Grandiosity, lack of empathy Err just little understanding of the emotions of others. Traits like self-entitlement, perceived feeling of uniqueness to an extreme extent err self-disregard for others, I mean all narcissistic tendencies but ones that are obviously extreme, NPD is an extreme disorder.</p>	
<p>Q2: What would you consider the difference to be between a person displaying narcissistic tendencies and a person with NPD? 2:05 - 6:12</p> <p><b>RM:</b> <i>Asks Q2</i></p> <p><b>EX9:</b> That's a good question, hmm one thing I would really emphasis is the lack of self-control a person with NPD has. They behave almost mindlessly towards simple goals, kind of in a miasma. Just trapped in their thinking. The grandiosity come along with the disorder, but at its core, it's a disability. I think this delusion of grandiosity and arrogance is a manifestation of being unable to correctly process how to behave within society. They are so unhappy in their own lives that they really struggle to be compassionate to others, I really don't think they can help it. For diagnosing this difference, we recently we have seen a move to</p>	<p>Expert suggests that narcissistic tendencies come from childhood trauma, in particular bullying and abuse. Without a proper role model which the child is loved by these aspects of abuse build and form future narcissistic intensity.</p>

trait theory. It's the more accurate method and has been peer reviewed so much at this point it should be implemented. Really, it is debatable whether or not NPD even exists, where is the hypothetical line drawn, you know.

**RM:** *Right.*

**EX9:** So I mean it has to be debilitating, yeah so that it interferes in that person's life and the life of others around them to a intolerable state.

**RM:** *So it's a case of tolerance?*

**EX9:** Sure, I mean that is subjective of course, what is tolerable, who is to say. Maybe that attributes to its rareness, because it is indistinguishable from being human in a way. Of course, NPD is very serious in its effects on others, of course. It of course depends which perspective you use as a determinate of what is too much narcissism. It's all based on personal interpretation that is the issue, and all the marker points are subjective. The DSM criteria is only nine little vague descriptions and from that an entire medical diagnosis is made.

**RM:** *That is what I have heard*

**EX9:** Of course, we now know that it is more complex than that, how much more complex who could say. Perhaps it is due to the extent of their childhood trauma.

**RM:** *Could you elaborate?*

**EX9:** Sure, so let's say the degree to which that child experienced abuse from bullies, or abuse from adults, whether sexual. Physical or verbal, they can all be effective at unleashing narcissistic tendencies later in life.

**RM:** Sure

**EX9:** that's not to say such trauma would in any way guarantee narcissistic tendencies, only that extreme cases could be more likely to cause NPD, especially if that child does not have a loving and teaching support group.

**RM:** *You mean parental?*

**EX9:** Predominately, but it could also be the support and love of a sibling or guardian, like grandparent that helps guide and channel malevolent tendencies.

**Q3:** To what extent would you consider NPD to be prevalent in the general populace?

6:13 – 7:52	
<p><b>RM:</b> Asks Q3</p> <p><b>EX9:</b> Very rare, very rare, hmmm maybe around say one in 200 maybe 300.</p> <p><b>RM:</b> I hear estimates between 0.01 – 1 percent</p> <p><b>EX9:</b> Yeah perhaps my first estimate was an over estimation, I honestly have not done enough research to say with some determination, but then who really has.</p> <p><b>RM:</b> Sure, that seems to be the consensus</p> <p><b>EX9:</b> Again, it really depends where you are going to draw the line, what are the parameters behind the diagnosis, of course different psychologists are doing to diagnose differently, so I can't imagine these figures are precisely accurate.</p> <p><b>RM:</b> No, I do not think so, it's just what I have heard.</p>	
Q4: In your opinion what is the role of genetics as a contributor to NPD? 7:53 – 10:22	
<p><b>RM:</b> Asks Q4</p> <p><b>EX9:</b> Hmmm I'm not too sure, certainly it plays some role. I forget the authors of the paper, but I read in the not too distant past. It focused on the likelihood of children becoming narcissistic if their parents were. The children had been separated from the parents at birth. I mean the paper proved that these two factors do correlate relatively well, however the why is unclear, so this reference isn't too useful I guess,</p> <p><b>RM:</b> Ha-ha</p> <p><b>EX9:</b> Well, I mean it just impossible to know, does every one of the previous interviewees know?</p> <p><b>RM:</b> Erm I would have to go back and check, but im pretty sure no, no one has any real knowledge.</p> <p><b>EX9:</b> The thing is it is an interesting question but given the amount of data we have and the requirements to set up such an experiment, would be just about impossible, to isolate all the factors and its highly open to some bias, and ultimately it isn't worth spending too much time on. Unless you conducted a great deal of interviews.</p> <p><b>RM:</b> Since it lacks practical application</p>	<p>Argues that genetics testing is too difficult to isolate factors, there is also not too much point currently</p>

<p><b>EX9:</b> Well no not exactly, it arguably does lack application, but its more that it would be very unlikely to prove with any credibility the relevance of genetics. It's just not possible right now.</p>	
<p><b>Q5:</b> How influential would you consider society and the environment to be as contributors to NPD? 10:23 – 14:57</p>	
<p><b>RM:</b> Asks Q5  <b>EX9:</b> Yeah well on the other hand we know quite a bit more about the effects of the environment in comparison to genetics.  <b>RM:</b> Sure, could you go into some more detail about what you mean when you say key role models.  <b>EX9:</b> Yeah sure, so the mother and father figure of course. If one of these two sets a good example, with plenty of love, this role model can overcome the development of narcissistic tendencies. If both the mother and father fail, it is likely that the child will grow up with some degree of heighten narcissistic tendencies, but a good sibling or guardian figure, maybe even a childhood friend can reduce the likelihood of NPD. I think it was Arson and Wick's paper which goes into a little more depth over the subject matter. I mean the thing is though a child is constantly learning, the camera is always recording so to speak. If a teacher isn't present they will find one in the form of the world around them, test things curiously. Since the world is filled with more than its fair share of pain and suffering, anxiety and misery it is possible and very probable that a child in a poor environment with be influenced by negative effects of the environment. Even a child living in the safe loving environment will always see aspects of the world which they dislike and can be heavily influenced by.</p>	
<p><b>Q6:</b> What aspects of NPD could be considered as providing positive personal characteristics? 14:58 – 20:12</p>	
<p><b>RM:</b> Asks Q6  <b>EX9:</b> Hmm I mean by definition, none. It's a mental disorder right so it is affecting the patient to such an extent where they can no longer function in the real</p>	

world. If they are diagnosed with NPD. Do you mean what are some of the benefits of narcissistic tendencies?

**RM:** *Hehe yeah exactly.*

**EX9:** So, I mean we see it in all aspects of the public eye, through entertainment and sport, narcissistic characters often tend to bring the attention of the populace. I think a good example is Floyd Mayweather, so when he was known as Pretty Boy Mayweather he was smashing people, but nobody was interested in watching him fight. He has kind of a boring points based defensive style, that isn't all that interesting to watch, plus he is a small weight class.

**RM:** *Sure*

**EX9:** But then he changed his name to Money Mayweather, started talking lots of shit; saying he was better than everyone else; throwing money around; really being as narcissistic as he could be. It was almost a persona. He literally has the intention of getting everyone to hate him. Suddenly all eyes are on him and everyone wants to see him get mauled, so his pay-per-view buys surge and suddenly he is one of the most famous boxers of all time. Now in the last few years he has kind of changed into a more kind-hearted individual, but he realised that some of his success was based upon people wanting to see him get badly hurt. I wouldn't say this is normally how a true narcissist thinks, but I think that partial Floyd stumbled upon this technique partially because he was so narcissistic, and partly because it is a truism of human nature, to what to the see the narcissistically arrogant get punished for their hubris. Sorry I haven't really answered the question here.

**RM:** *No you have although im not to sure if having people hate you is such a great benefit.*

**EX9:** Haha no of course not, that is an extreme example. The grandiosity, being characterised as a trait of leader, you see narcissistic individuals often become leaders. I think it was Josh Miller who did a lot of work regarding the relation between the proportion of people who held elevated narcissistic traits and were in position of power, and the



<p>correlation was rather strong I believe. I would also say there is a certain level of protection one gets from a purely headstrong narcissistic approach, although I don't believe that there are truly any benefits to be narcissistic in comparison to the person you could be.</p>	
<p><b>Q7: To what extent would you consider the DSM-5 interpretation of NPD to accurate?</b> 20:13 – 21:39</p>	
<p><b>RM:</b> <i>Asks Q7</i>  <b>EX9:</b> Hmm its pretty good I would say, there is a hard learning on the grandiose aspect of narcissism, but I believe that is what is should be predominately trying to capture. More detail on the criteria probably would not help.  <b>RM:</b> <i>You mean the split to vulnerable and the grandiose.</i>  <b>EX9:</b> Yes, but really people aren't sure enough about the split to be implanting it into the DSM yet. Millers FFM model seems like a smarter approach. To be honest moving to a more trait-based approach certainly seems the more sensible way to approach the subject. The DSM has its uses for sure, but really clinicians should not be banking on it to hard when it comes to therapy, it's a diversion from the core issue.</p>	<p>Suggests a place for both the DSM and a trait based diagnostic approach.</p>
<p><b>Q8: How accurately do you believe the scientific community understands NPD?</b> 21:40 – 23:04</p>	
<p><b>RM:</b> <i>Asks Q8</i>  <b>EX9:</b> Err I think its kind of relative, in comparison to what we are going to know in fifty years, I think we will look back and say we knew very little. In terms of being to treat it currently, I think we do okay, just okay but okay, especially if you compare to just a hundred years ago, there was basically no structured mental health system anywhere.  <b>RM:</b> <i>Sure.</i>  <b>EX9:</b> Also when you say compare our mental health programs to say what Freud and Jung were suggesting, things have completely changed. This idea of hard diagnosing conditions. Its going to be the same in just a few years, especially with future robotic diagnosing assistance.</p>	

<p><b>RM:</b> <i>Okay that brings us to my next question.</i></p>	
<p><b>Q9:</b> Which methodology of measuring narcissistic attributes do you consider to be the most valid and why? 23:05 – 24:11</p>	
<p><b>RM:</b> <i>Asks Q9</i> <b>EX9:</b> Hmmm I don't really know what to say, I'm probably not a great source on comparison. Probably the NPI I guess <b>RM:</b> <i>That's what a lot of people have said</i> <b>EX9:</b> Of course it depends entirely on what you are trying to measure. Any research you are planning to undertake, you should have a great deal of knowledge about the most valid instruments, but I'm afraid I haven't done really any work with the presented inventories. From what I've read on the NPI it seems relatively well regarded. Sorry I'm not more help.</p>	<p>Expert unfamiliar with using inventories.</p>
<p><b>Q10:</b> Symptoms of NPD have been described as varying in appearance and recognition. Do you agree with this sentiment and why? 24:15 – 27:23</p>	
<p><b>RM:</b> <i>Asks Q10</i> <b>EX9:</b> Yes I would say so, I would say there is enough definitive proof that suggests multiple different behavioural patterns can be observed in NPD sufferers. The five in nine systems is not entirely correct in its approach. It's a little bit too broad to be entirely accurate. <b>RM:</b> <i>I would say it seems like there is a lot of agreement for this position.</i> <b>EX9:</b> Yeah I would say so, its hard to tell, but a great deal of people have written about the subject, and I don't believe there would too many negative ramifications to introducing a grandiose and vulnerable split, although as I mentioned the trait based approach especially the FFM one is very impressive and probably the future. <b>RM:</b> <i>Why not split it more?</i> <b>EX9:</b> Well yeah that's the thing, should it be split into more categories, I personally would say no. The way to approach this is with small steps, continuously little changes. This allows us to utilise the data we have and keep some semblance of</p>	<p>Suggests that whilst vulnerable and grandiose may be a fine division, further division would most likely cause confusion to diagnose. Expert proposed moving to a more trait-based approach for this reason, describing the FFM as the future.</p>

<p>structure. I would say if you made say four sub categories of NPD for example, then the dispute over why four categories and what they should be there would be a rampant one.</p>	
<p><b>Q11: Which gender would you say is more like to suffer from NPD and why? 27:24 – 28:47</b></p>	
<p><b>RM: Asks Q11</b>  <b>EX9:</b> For sure men, I'm not saying you don't encounter narcissistic women, you do all the time. Narcissism is more suppressed in women, and since NPD is largely centred around blatant symptoms, NPD is certainly diagnosed far more in men.  <b>RM: Why is that?</b>  <b>EX9:</b> Who can say, many reasons. The patriarchal shape of society, the validation and encouragement of such traits in men over women, perhaps based in hormones, or in general physical strength. It is a combo of biological and societal that is for sure. Biology influences society in a rather meaningful way, but we have no real idea what kind of influence that it. No one really does, the data just isn't that producible on any meaningful level.</p>	
<p><b>Q12: To what extent do you believe age affects the severity of the NPD condition? 28:49 – 30:02</b></p>	
<p><b>RM: Asks Q12</b>  <b>EX9:</b> I'm not sure to be honest, it probably tapers in the twenties, thirties perhaps. I mean it depends on the circumstances of the life, how much influence and money that person has. Its easy to become a narcissist if people worship you like a god, at the same time its hard to remain a narcissist when people constantly put you down and dominate you.  <b>RM: Would you say if you are born rich you are more likely to become a narcissist.</b>  <b>EX9:</b> Of yeah for sure, it's a generational thing, if the parents are highly narcissistic, its likely that the child with become that too, especially if it's a boy observing the behaviour of his narcissistic father. This is how the boy thinks a man should act, and often grows up believing this. This is then passed on to his children.</p>	<p>Suggest that NPD is likely to decline in twenties/ thirties but obviously depending on the circumstances of the life, how much power that person has over others, and if factors have occurred that would stop them from abusing the power.</p>

Q13: In what aspects does substance abuse affect the severity of the NPD condition?  
30:03 – 31:26

**RM:** Asks Q13

**EX9:** Again, I'm not entirely sure, I have to imagine that certain drugs, ones that are renown for making a person behave in a more narcissistic manner, like alcohol or cocaine, you have to imagine they exacerbate the problem. A person with NPD is quite likely to have some sort of addiction, whether it is to the constant maintenance of their body, their social appearance often requiring a crutch. By I mean that is true of most mental disorders. Narcissism is a little different though because it is present to some degree in everyone. What NPD refers to is an extreme display of common traits.

Q14: What are some of the key issues facing the full understanding of NPD?  
31:27 – 33:49

**RM:** Asks Q14

**EX9:** This is pretty difficult to say, who knows what the future has to offer. I mean I think we as a community addressing the shortcomings of our understanding. The things being pursued pretty much most things that should be pursued. I mean scientists are always looking to make their research count and be cited by others, so interesting topics often get tackled. The big problems facing the understanding of NPD are the same as the problems facing the understanding of most disorders. We need to do larger scale testing, using a whole lot of different methods to support, just trying a whole bunch of different ideas and items. I mean the breakthroughs we are talking about are going to be in the form of new and interesting discoveries obviously right. So really the more and varied the testing the better chance we have of understanding human psychology as a whole concept. I wouldn't say there is anything about NPD specifically which is hard to test, it's a pretty obvious disorder and we have some great metrics already for determining it with high accuracy.

Suggests that research is going in the right direction and the community is making breakthroughs. Suggests larger scale testing and a variety of different experiments with varied methodologies could also help.

<p><b>Q15:</b> In Stinson et al., 2008. The researchers argue that NPD is the least empirically researched of all personality disorders, to what extent do you agree with this sentiment and is there areas that require further research in your opinion? 33:50 – 34:21</p>	
<p><b>RM:</b> Asks <i>Q15</i> <b>EX9:</b> Hmm I don't really know what to think of that. Sounds wrong honestly. Hmm well, I personally don't think it is the least researched of all disorders, in my mind for sure it isn't, but I really haven't done the research. I mean would it even be worth doing the research to find out? Research should really be generated by relevant subject matter, not by need to have an arbitrary equal distribution of resources.</p>	<p>Suggests Stinson claim is irrelevant and as it wouldn't effect the amount of research being done on NPD.</p>
<p><b>QC1:</b> What criteria would you use to classify someone as having a mental illness? 34:22 – 35:27</p>	
<p><b>RM:</b> Asks <i>QC1</i> <b>EX9:</b> A mental illness? Hmm a big one is disorder, the complete loss of control over their behaviour, to the point where they are harming others with their behaviour, in ways they really don't want to. It's a disease, a mental disorder and when you think of it as one, a disease that manifests not for a day or a year, but the whole life span even, some days manageable but most days it is not. I'm not sure how I feel about the term mental illness, it is something of a dated term. Especially for something like narcissism it is better to think of it as a spectrum over whether the person qualifies for a mental illness.</p>	
<p><b>QC2:</b> To what extent would you consider a personality disorder to be a mental illness? 35:28 – 36:21</p>	
<p><b>RM:</b> Asks <i>QC2</i> <b>EX9:</b> Hmm I thought they are roughly the same thing, no? <b>RM:</b> <i>It seems to be a matter of opinion, I guess it is based around how you feel about the term mental illness.</i> <b>EX9:</b> Sure, well I mean anyone who has a mental disorder a mental impairment is essentially going to be mentally ill.</p>	<p>Suggests PD's and mental illness to be roughly the same thing.</p>

<b>QC3: To what extent do you consider NPD to be a mental illness?</b> 36:22- 37:19	
<b>RM:</b> Asks <i>QC3</i> <b>EX9:</b> To the extent that I would consider any other mental illness to be a disorder. I think that NPD when correctly diagnosed is for sure a mental illness. However, I wouldn't say someone with narcissistic tendencies is mentally ill. If you are going to go by that kind of diagnostic method of identifying disorders over the trait-based approach, NPD is a mental illness. But with a trait-based approach I feel you are best to avoid these kinds of terminologies.	
<b>QE1: What aspects of NPD could be viewed as dangerous to society?</b> 37:19 – 40:04	
<b>RM:</b> Asks <i>QE1</i> <b>EX9:</b> Actually, sometime really important to consider is how people deal with narcissistic tendencies. Often you see people wanting to silence them. A typical example of this is how people react to Trump, so he says some crazy shit and the liberals want to have him silenced and removed, you can obviously see their justifications. <b>RM:</b> Sure. <b>EX9:</b> But then, Trump fires back saying people are trying to stifle free will, that he is being oppressed and all his supporters are being oppressed along with him, but trying to silence Trump, the liberals end up trying to silence his supporters. This creates a rivalry between the populace, where communication breaks down as each party tries to silence one another. Really this is a very serious issue we are facing, this break down in communication, in conjunction with his tendency to say things that often have a small degree of truth to them, especially in the case of stating issues that other politicians are willing to ignore or lie implicitly about. We really saw this in the campaign trail leading to Trump's presidency.	Suggest that narcissistic abuse from a person in a position of power can lead to the divide within the community between supporters and people the narcissist thinks of as enemies. This division is very made for society and for social communication.  Mention once again of Donald Trump.
<b>QE2: In your opinion, in what ways can those with both NPD and a position of power impact society?</b> 40:05 – 44:16	
<b>RM:</b> Asks <i>QE2</i>	Argues that to stop consistently getting narcissistic leaders in

**EX9:** Well I suppose like I said, you often see highly narcissistic people in position of power. Especially in roles that especially require the person act powerful, like in politics. This is an unfortunate consequence of the governmental structure we have built.

**RM:** *Yes, it is.*

**EX9:** I mean in a position of power, for a narcissist there is joy in exploitation, in the utilisation of this power. So, its obvious why jobs that very obviously suited for those who want to be powerful. One of the great failings of modern society is that the people who would make the best leaders, very often don't want to be powerful and so never strive to be.

**RM:** *Do you think video recordings and in recent years has held these narcissistic leaders more accountable.*

**EX9:** These things certainly help prove the point, I'm not sure if the truly narcissistic leaders care or can be stop by these events, it really depends on which society we are talking about. But in general, whatever promoted freedom and transparency in government action are the most effective tool to beating fascism and by proxy a narcissistic leader.

**RM:** *What do you think about Trump tactic of calling sources fake news.*

**EX9:** It's a tactic that I think works on the surface, because it calls into question the validity of the source, it a very meaningful way. Of course, if someone can actually prove it and show the facts to the public, then that's another thing. The fake news thing honestly only works on the dumber members of society. On every source of news, you consume you really need to put it context and evaluate it in an unbiased manner. It's a tough skill to learn, but very necessary.

**RM:** *I agree it's something we should spend more time educating our children in.*

**EX9:** I couldn't agree more, focusing on the most effective way to educate the populace from a young age should be a chief focus by the government.

power, the main change that needs to occur is schooling direction is the induction of politics and logical thinking in a way that engages the child.

**QE3:** What are your opinions on NPD being classified as a Personality Disorder in the DSM-5 but not in the ICD-10?

44:17 – 45:09

**RM:** Asks *QE3*

**EX9:** I would say that it is perhaps a problem, but a minor one. On the one hand having a unified structure on NPD would have for understanding and diagnostic purposes, for sure. But then getting trying to force a decision on a disorder that have a great deal of discussion is not a smart move either. I think the DSM's idea of narcissism is pretty fine overall. there is no real need to split the diagnosis up into smaller subcategories and identities, I would say that it would probably be better if it was put back in the ICD-10, but really since the DSM-5 is the manual most used and even then, it's not used that much, I don't think it's such a problem.

Suggests that it is not really a problem as the DSM to be the go to diagnostical tool for personality disorders.



## Interview with Expert 10

INTERVIEW 10 Q1: What do you consider to be the key traits and characteristics of a person displaying narcissistic personality disorder? 0:00 – 4:39	THEMES
<p><b>RM:</b> <i>Asks Q10</i></p> <p><b>EX10:</b> I think the key traits are a sense of grandiosity, a willingness to exploit other people for one's personal gain, and a pronounced sense of entitlement.</p> <p><b>RM:</b> <i>Do you discern any kind of difference between vulnerable and grandiose narcissism?</i></p> <p><b>EX10:</b> I imagine there is definitely one, those are two definitions of narcissism, especially with the most recent research which has shown that narcissism is not the same as self-esteem. However, a fragile sense of self-esteem can start a sense of vulnerability, and thus someone who has vulnerable narcissism is more prone to retaliate and lash out as they think they should be.</p> <p><b>RM:</b> <i>That's interesting, in comparison to grandiose narcissism you think they are more likely to have uncontrolled bursts? That kind of makes sense.</i></p> <p><b>EX10:</b> It does, but I don't think the two are completely unrelated. It would be rare if someone only had grandiose or only vulnerable. They seem to slightly colinear features.</p> <p><b>RM:</b> <i>Yeah that's something one of the experts was talking about was talking about, he said that it might be the case that people fluctuate between being in these two states. Particularly someone you would describe as a grandiose narcissist would spend much longer in the grandiose state of narcissism and less in the vulnerable state.</i></p> <p><b>EX10:</b> Absolutely yeah.</p>	<p>Expert suggests that there is a difference between behaviour displayed by an narcissistic individual, but it may be the case that an individual cycles between grandiose and narcissism, depending on the situation and mood.</p>
<p>Q2: What would you consider the difference to be between a person displaying narcissistic tendencies and a person with NPD? 4:40 – 7:22</p>	
<p><b>RM:</b> <i>Asks Q2</i></p> <p><b>EX10:</b> In my own research I've studied clinical narcissism, and not full-blown NPD. <b>I would say</b></p>	

someone displaying narcissistic tendencies has not risen to an appropriate level so that it causes some sort of pronounced functional impairment or that it would be something making it difficult to have meaningful bonds and relationships with others.

**RM:** *So, when they stop being able to function in society to a point? Do you discern there would be a line in the sand I suppose for the people around them?*

**EX10:** Oh gosh that line in the sand thing falls into the categorical narcissistic personality disorders and I've never been a real fan. I think that line is different for everyone. There is some range where the line actually is. And so it's a particular confluence of the experiences and disorders, thinking, and emotional responses, and maladapted egos. That particular confluence can rise to a high enough level where it becomes a full-blown personality disorder.

**Q3:** To what extent would you consider NPD to be prevalent in the general populace?  
7:23 – 10:46

**RM:** *Asks Q3*

**EX10:** *It's my understanding that it ranges between 1 – 6% of the population, however there is an argument that since the evolution of the Diagnostic Statistical Manual everybody's got something wrong with them, because that's a complication, however it may or may not be true. But rephrase the question for me?*

**RM:** *What percentage of the general population, or the US, would you say have NPD? I've heard of all things from less than 0.0001% to somewhere like around 2-5%. The jury seems pretty out.*

**EX10:** Basically you said around the world, because personality disorders can only be diagnosed in their cultural context. So something that is bad enough, shall we say, to be a disorder in one culture may not be bad enough to some other cultures.

**RM:** *Yeah for sure. We're talking about categorization of something which, like you say, depending on your culture or your background is complete interpretable. It's interpretable within America and might not be around the world inclusive.*

Expert suggests that NPD is diagnosed in a cultural and subjective context so the line in the sand is purely based upon one's own judgement and thus becomes arbitrary.

<p><b>EX10:</b> I would say there are more narcissists in America than there are in any other place in the world.</p>	
<p>Q4: In your opinion what is the role of genetics as a contributor to NPD? 10:47 – 15:21</p>	
<p><b>RM:</b> <i>Asks Q4</i></p> <p><b>EX10:</b> Well as we know from twin studies of modern psychotic twins we know that about 51% of anyone's personality is inherited. So I would suggest that a personality disorder which is so fundamentally based upon trait levels, the majority of one's inherited disorder comes from one's parents. A shame, because you don't get to pick your parents.</p> <p><b>RM:</b> <i>You just have to work with what you've got. Yeah, 51%, that's interesting. It's so difficult to say though, even if look at twin studies, how do you know that they're still not influenced by their parents? Or even if separate, parenting is still not influencing on that level? Because by the time they get those kind of tendencies, they might be two, three years old maybe more before they start showing. And for NPD to be determined you have to be maybe 12 plus?</i></p> <p><b>EX10:</b> Yeah, but, NPD cannot be diagnosed until the later years of adolescence and primarily early years of adulthood. In fact most personality disorders, only anti-social personality disorders, cannot be diagnosed in anyone under the age of 18. And so when they diagnose personality disorders, it's almost always has an onset in the early teen years and early 20's. By that time one's personality is starting to congeal, so we know that over the course of one's life, by the time of the age of about 30, one's personality is very much set in stone. It's not completely immutable, but they're pretty well established. There are four personality disorders based upon conglomeration of trait levels, and a personality disorder can be set in stone as well around that age. So once we have a stable maladapted set of traits we can measure those and in these twin studies we simply measure them, it doesn't really matter who raised you, the correlation between the two comes across in the genetic inputs.</p>	<p>Expert suggest that genetics are more influential than environmental factors. Expert suggests use of twin studies to prove this point. Suggesting even when the twins are separated at birth we see similar traits being displayed in the children.</p>

<b>Q5: How influential would you consider society and the environment to be as contributors to NPD?</b> 15:22 – 22:08	
<p><b>RM:</b> <i>Asks Q5</i></p> <p><b>EX10:</b> I'm glad you asked, as I've asked my friends, is social media for example causing Narcissism, or simply an avenue for expression of narcissism? The way I look at it is imagine the 1880s pioneer woman crossing the American West in a covered wagon. She could have been a raging, flaming narcissist, but had no one to express it to. Today we have social media, and people can go on and relatively anonymously express how great they think they are.</p> <p><b>RM:</b> <i>Or completely anonymously if you so choose. Or you could be an old bald man and pretend you're a hot girl and do whatever you like. You can completely alter who you are as a person and get the feedback you are looking for from society.</i></p> <p><b>EX10:</b> Oh sure. Then we have internet trolls and people like that who just thrive off of thinking that somebody's dead.</p> <p><b>RM:</b> <i>I don't think it's making people worse, it's just way easier to express that internal monologue.</i></p> <p><b>EX10:</b> That's exactly my point. It doesn't make them worse, they're already bad. I believe they have a way to express it.</p> <p><b>RM:</b> <i>You could argue that it's a self-fulfilling prophecy because it gives you positive reinforcement, getting likes, getting popularity, etc. If you're not good at analysing it from a back seat you can get very wrapped up in it, my parents get wrapped up in it, they're obsessed with social media.</i></p> <p><b>EX10:</b> That's the purpose right?</p> <p><b>RM:</b> <i>Yeah right.</i></p> <p><b>EX10:</b> I have no Facebook account. I don't care if you had a ham sandwich for lunch. I wont tell you what I had.</p> <p><b>RM:</b> <i>In fairness, Facebook is a good way for storing photos, and I get the benefit of other people's albums. It's also a good way for organizing an event.</i></p> <p><b>EX10:</b> I have a theory, I don't know if you're familiar with the American comedian Jeff Foxworthy? Well I say "you might be a narcissist if:</p>	<p>Expert suggest the role of social media and in particular Facebook has given rise to more narcissistic tendencies, by giving people the platform and the opportunity to express their internal monologue. The expert suggests that by knowing how many friends you have exactly on Facebook you are paying a high level of attention to your perceived popularity.</p>

<p>you know exactly how many Facebook friends or followers you have”</p> <p><b>RM:</b> <i>I think that's right on the money.</i></p> <p><b>EX10:</b> If you regularly check how many followers you have, and you get upset when you lose followers, and get upset at who did it.</p> <p><b>RM:</b> <i>You could get obsessed and figure it out too.</i></p>	
<p><b>Q6:</b> What aspects of NPD could be considered as providing positive personal characteristics? 22:09 - 26:37</p>	
<p><b>RM:</b> <i>Asks Q6</i></p> <p><b>EX10:</b> Any personality disorder has pronounced effects on one's emotional life and their ability to forge relationships and caters to such stuff. If we're talking about subclinical narcissism, then superiority and leadership are usually considered “adaptive” components of narcissism. That's one of the problems with NPD is that it measures adaptive and maladaptive components of narcissism, and scores these components, and masks the individual differences. Someone could have a high level fo these adaptive components, and have a high narcissism score another person has high levels of maladaptive components, and also has a high score.</p> <p><b>RM:</b> <i>Interesting, I hadn't heard that before. It sounds like it needs more categorization in that respect. In a paper I read, there were 5 forms of NPD identified, it's complex. In terms of providing positive characteristics, you could say someone like Trump has achieved a lot because of that bull-headedness.</i></p> <p><b>EX10:</b> It's beneficial to a lot of successful people. You want your brain surgeon to say “Yes, I am so good I can cut your head open, cut your brain, and save your life.”</p> <p><b>RM:</b> <i>You're right, you might even pick that over someone more modest but who might be more competent.</i></p>	<p>Expert argues for a difference between adaptive and maladaptive traits presented by narcissism.</p> <p>Suggests that in a clinical case there would be little to no adaptive traits, with the condition being debiltating by most accounts.</p>
<p><b>Q7:</b> To what extent would you consider the DSM-5 interpretation of NPD to accurate? 26:38 – 28:04</p>	
<p><b>RM:</b> <i>Asks Q7</i></p>	<p>Expert finds DSM to be highly accurate in its diagnostic</p>

<p><b>EX10:</b> I think it's highly accurate, I like it. I like that they got rid of the whole "access to" thing, and now it's included in the general taxonomy of mental disorders. Access to group B is now group B.</p> <p><b>RM:</b> <i>Is there anywhere they can take it you would like to see? Changing the DSM that is.</i></p> <p><b>EX10:</b> Hmm, well I'm a fan of section 3 of the DSM 5, the whole trait taxonomy, measurement of particular disorders, I expect in future generations, there will be even more of that. Have it expanded upon, perhaps with a little more complexity? After models of personality have been able to be used to measure personalities of all types, we need more work that delves further into classification too.</p>	<p>determination. Suggest expanding section 3 of the DSM would be a positive consideration.</p>
<p><b>Q8: How accurately do you believe the scientific community understands NPD?</b> 28:05 – 33:13</p>	
<p><b>RM:</b> <i>Asks Q8</i></p> <p><b>EX10:</b> Very accurately, I think we have a pretty good grip on this stuff.</p> <p><b>RM:</b> <i>Interesting, this question has had very varied answers. What are the reasons behind thinking we already have a lot of the research in place?</i></p> <p><b>EX10:</b> I think there is a clear set of requirements for diagnosis of NPD in the DSM 5, that very clear set is really helpful in initial recognition and diagnosis. If there were only one standard, that would be more difficult. Here is one of the diagnostic criteria: expects to be recognized as a superior without achievements. I think that these diagnostic criteria are really helpful, I'm a fan. I'm a fan of any rigid taxonomy.</p> <p><b>RM:</b> <i>As opposed to the trait theory?</i></p> <p><b>EX10:</b> That would be part of the taxonomy theory, as opposed to some loose amorphous psychodynamic approach. They delve into "for the next fourteen months tell me about your mother". I think that many mental disorders are not quite that complicated.</p> <p><b>RM:</b> <i>Or they're blurred I suppose, there should be a different way of talking about them. You're talking about going back to old psychotherapy. Where it was like "I understand this guys psychology and I'm trying to tell you this" rather than "I'm trying to tell</i></p>	<p>Expert suggest that without a rigid taxonomy, there is more room for ego and for misdiagnosis on behalf of the clinician.</p> <p>Suggests that having no clear-cut categories for both OCD and schizoid had made diagnosis blurred and difficult for these conditions, leading to further misdiagnosis.</p>

<p><i>you personally”.</i></p> <p><b>EX10:</b> One of the things about things being clear is that there is OCD and then there is OCPD and then Schizoid personality type which can be confused with Schizophrenia. There is no real clear-cut category for these, which is why I'm a fan of a rigid taxonomy. It gives us a frame of understanding the various components of these disorders which may or may not overlap.</p>	
<p><b>Q9:</b> Which methodology of measuring narcissistic attributes do you consider to be the most valid and why? 33:14 – 33:57</p>	
<p><b>RM:</b> <i>Asks Q9</i></p> <p><b>EX10:</b> Sure, well I used the NPI on a couple of my studies and I found it to be relevant and effective, also its been rather widely peer reviewed so I was happy with the outcome, even though I tried to critique it a little (chuckles), apart that the NPI I haven't used too many other psychometric models with relation to narcissism, it's not exactly my field.</p>	<p>Suggest benefit of NPI.</p>
<p><b>Q10:</b> Symptoms of NPD have been described as varying in appearance and recognition. Do you agree with this sentiment and why? 33:58 – 36:04</p>	
<p><b>RM:</b> <i>Asks Q10</i></p> <p><b>EX10:</b> I'm not familiar with that view on NPD. I don't know what to say.</p> <p><b>RM:</b> <i>Some clinicians believe that a grandiose narcissist and a vulnerable narcissist are two different disorders, so they appear very different in recognition, whereas other clinicians might say its the same, just at different points along a spectrum.</i></p> <p><b>EX10:</b> Well I think that spectrum can be further dissected, such that there are varying components where one narcissist may be more vulnerable, and another less, but if grandiose and vulnerable narcissism were entirely separate things, then scores on any test designed to measure those two things would be entirely orthodical, and that's not the case.</p> <p><b>RM:</b> <i>Yeah, you're right. Okay that makes a lot of sense. Isn't it the case that the evidence is somewhat, erm not entirely valid to suggest that testing accurately captures both vulnerable and grandiose.</i></p>	<p>Expert suggest hat by having tests that measure both aspects of grandiose and of vulnerable narcissism and have them come together and create valid testing demonstrates that grandiose and vulnerable narcissism share similar characteristic.</p>

<p><b>EX10:</b> Oh sure, yeah but im talking about just the essence of what those distincitons mean, in that respect we see clear overlap.</p> <p><b>RM:</b> <i>I see okay.</i></p>	
<p><b>Q11: Which gender would you say is more like to suffer from NPD and why?</b> 36:05 – 41:47</p>	
<p><b>RM:</b> <i>Asks Q11</i></p> <p><b>EX10:</b> Males, the literature clearly supports the fact NPD is far more likely to be present in males than females. Generally, males score higher than females. The reason for this is some sort of longstanding cultural bias in favour of the success of male children than female children. For many generations women were told their only option in life was to be a nurse or have children, and if they got married they were to stay home and cook, but men are supposed to go out and conquer the world. Why men? They're special, they're powerful, they're smart, women are not.</p> <p><b>RM:</b> <i>What about testosterone and oestrogen as influencers?</i></p> <p><b>EX10:</b> I'm sure that has some particular role in one's drive and tendency towards NPD, correlated with risk taking, and things like that.</p> <p><b>RM:</b> <i>So by your theory, as we begin to see more females in position of power hopefully, we're more likely to see narcissistic female CEOs as well?</i></p> <p><b>EX10:</b> Absolutely, in fact some pop culture icons develop narcissism, such as the Kardashians. They operate as icons, do you want to grow up to be a CEO or a model on Instagram?</p> <p><b>RM:</b> <i>I'm not sure, you could argue Kardashian works as something to scare your kids with, do you want to grow up to just be a model, potentially doing porn? Or do you want to actually achieve things? She's got an easy life, yeah, but you could argue she doesn't look happy, and probably isn't. How could you be if that was your lifestyle?</i></p> <p><b>EX10:</b> To a 14-year-old girl, they'll see Kim Kardashian and think "I want to be rich and famous".</p> <p><b>RM:</b> <i>Surely there's, for western society, there's always been these figures around. Perhaps not.</i></p>	<p>Expert suggest men score higher in narcissistic tendencies. The expert argues this could be largely due to patriarchal structures and male dominance. Expert is unsure about genetic contributors.</p> <p>Expert suggests in time we will begin to see more women CEO and see more narcissistic tendencies from women if they attempt to adopt the same role as men.</p>



<p><b>EX10:</b> I'm sure the American actress May West back in the 30's was held up as an example of things you dont want your daughter to be.</p> <p><b>RM:</b> <i>Wasn't May West quite an intelligent woman?</i></p> <p><i>I'm not sure.</i></p> <p><b>EX10:</b> If she was, she was able to catapult this coquette personality into star status.</p>	
<p><b>Q12: To what extent do you believe age affects the severity of the NPD condition?</b> 41:48 – 45:32</p>	
<p><b>RM:</b> <i>Asks Q12</i></p> <p><b>EX10:</b> I think that with age things tend to moderate a little bit. Not so much wild swaying in terms of personality traits, in general they tend to stabilize over time and while one who is dumb and attractive might think they're all that and a bag of chips as they get older in life they tend to realize that perhaps they're not and their expectations of others and how others perceive them tend to become more in line with cultural norms.</p> <p><b>RM:</b> <i>What age would you say that roughly would be?</i></p> <p><b>EX10:</b> It used to be around 30 but now it's about 50.</p> <p><b>RM:</b> <i>What about the idea that once you reach a certain age, if you're a narcissist, it's going to be harder to get rid of those aspects of your personality, being set in your ways a little?</i></p> <p><b>EX10:</b> I'm sure there's some validity to that, just like personality traits in general, they tend to be set in stone. However, if you have full blown NPD, over life you develop coping skills, realizations, self-awareness, that help them change not only how they're being, but also how they see themselves and how others see them. That's my theory.</p> <p><b>RM:</b> <i>We still have people like Trump though, and older CEOs who are quite narcissistic, and it's obviously quite hard for them to change.</i></p> <p><b>EX10:</b> That's mostly because those personality traits are largely responsible for where they are in life.</p> <p><b>RM:</b> <i>You'd be asking them to get rid of what they consider a good part of their success.</i></p>	<p>Suggests that NPD tendencies tend to drop off between 30 to 50.</p>
<p><b>Q13: In what aspects does substance abuse affect the severity of the NPD condition?</b> 45:33 – 48:12</p>	

<p><b>RM:</b> <i>Asks Q13</i></p> <p><b>EX10:</b> It's my understanding that people who have NPD are more likely to engage in substance abuse, especially cocaine, as it is supposed to make you feel smart and intelligent and pretty and powerful, and all those things, which then just acts as fuel for the narcissism fire.</p> <p><b>RM:</b> <i>Would you say there would be a difference in the type of substance depending on the effect of their disorder? Maybe taking stimulants might make certain traits worse than the average person.</i></p> <p><b>EX10:</b> I would think people with different disorders would tend to gravitate towards different substances to abuse, for example someone with a general anxiety disorder, may be more likely to abuse tranquilizers, as it takes away their anxiety. A narcissist might be more likely to take stimulants because it makes them feel even prettier.</p> <p><b>RM:</b> <i>Or even more like the "big shark in the water".</i></p>	<p>Expert suggests substances would most likely heighten narcissistic tendencies</p>
<p><b>Q14:</b> What are some of the key issues facing the full understanding of NPD? 48:13 – 53:34</p>	
<p><b>EX10:</b> I think the popular press really hinders the public's understanding of what a personality disorder actually is. I'm kind of torn on the work of Jean Twinkling, who's written some really cool books, but I think the fact she had to dumb down some of scientific research into a pop culture book for the bookshelf made the public's access to this easier, but their understanding became worse.</p> <p><b>RM:</b> <i>Interesting, you're talking about high level results which many people wouldn't be able to mentally interpret, though.</i></p> <p><b>EX10:</b> She made her name doing Cross Temporal Meta Analyses, the average person has no idea what a meta-analysis is, so she explained it in layman's terms because it made for better reading, it required some simplification, and the problem is everyone in the west does not have NPD, and everyone does not have high level clinical narcissism, but when we see someone acting superior and grandiose, we think they are.</p> <p><b>RM:</b> <i>It's something of a witch hunt in that respect. I suppose it's just how people work, cocky. Interesting.</i></p>	<p>Expert suggests that the popular press and the general 'dumbing down' of media has caused the understanding of personality disorders to be warped, and given a false pretence.</p> <p>As a result of this simplification, much of society deems a few narcissistic tendencies such as superiority and grandiosity to be full blown disorders.</p>

<p><i>How do you think we're going to address that issue? The education of society?</i></p> <p><b>EX10:</b> That would be a good start. The popular press could start coming up with explanations, rather than just categorizing everyone as a narcissist. Every cocky person is not a narcissist, just over confident.</p> <p><b>RM:</b> <i>A lot of the way I get my knowledge is through Youtube and content like that, my dyslexia is quite bad, but I retain the knowledge much better coming from a lecture that is specifically designed to teach. Maybe we need researchers who put this information into passable terms for people because you've got to catch them up, you can't expect them to jump onboard and understand her research as she's written it. There has to be some joining point.</i></p> <p><b>EX10:</b> I've hybridized all of my lectures, and now I have a YouTube channel, maybe quite narcissistic, my face is on everything.</p> <p><b>RM:</b> <i>Some people I chose to interview have YouTube channels, I think it's the future of education. It shouldn't just be a tool for cat videos, it should be something that transcends modern media.</i></p>	
<p><b>Q15:</b> In Stinson et al., 2008. The researchers argue that NPD is the least empirically researched of all personality disorders, to what extent do you agree with this sentiment and is there areas that require further research in your opinion? 53:35 - 55:54</p>	
<p><b>RM:</b> <i>Asks Q15</i></p> <p><b>EX10:</b> That cannot be true, you cannot tell me NPD is researched less than schizoid.</p> <p><b>RM:</b> <i>Stinson has gotten a lot of abuse for this question admittedly. Are there areas you think require further research?</i></p> <p><b>EX10:</b> I would like to see more research on the overlap between antisocial personality disorder and NPD, there's been some critical work on this.</p> <p><b>RM:</b> <i>How do you define Machiavellianism?</i></p> <p><b>EX10:</b> The belief that the ends always justify the means, and someone is always on their own quest for glory.</p>	
<p><b>QC1:</b> What criteria would you use to classify someone as having a mental illness? 55:55 – 56:46</p>	

<p><b>RM:</b> Asks <i>QC1</i></p> <p><b>EX10:</b> A mental illness is when someone has issues forging meaningful relationships with other people and impairs major life activity like working and such. It should be debilitating in nature, to the point where the person cannot function as they desire and obviously cannot function within society.</p>	<p>Expert would seem to bot have an issue with the term mental illness, although this is not confirmed. Expert suggests that mental illness is debilitating to where the person cannot function appropriately</p>
<p><b>QC2:</b> To what extent would you consider a personality disorder to be a mental illness? 56:47 – 58:02</p>	
<p><b>RM:</b> Asks <i>QC2</i></p> <p><b>EX10:</b> A mental illness is when someone has issues forging meaningful relationships with other people and impairs major life activity like working and such. It should be debilitating in nature, to the point where the person cannot function as they desire and obviously cannot function within society.</p> <p><b>RM:</b> I hadn't thought of it that way before, but you're right I suppose.</p>	<p>Expert suggest that PD's are a niche section of mental disorders. PD are resistant to treatment with no curing medication available.</p>
<p><b>QC3:</b> To what extent do you consider NPD to be a mental illness? 58:03 – 59:08</p>	
<p><b>RM:</b> Asks <i>QC3</i></p> <p><b>EX10:</b> 100%. I have no doubt its a mental illness when its present to fulfil the requirement for NPD, not just general narcissism found in the populace. If you have full blown NPD, you suffer from a mental disorder you know. NPD is very much an apparent condition, that effects a great deal of people, some in small and some in large ways, but a very large impact overall.</p>	
<p><b>QE1:</b> What aspects of NPD could be viewed as dangerous to society? 59:09 – 60:05</p>	
<p><b>RM:</b> Asks <i>QE1</i></p> <p><b>EX10:</b> Grandiosity in leaders, military, political, business, can lead one to lead others down the wrong path. If one of these leaders is just trying to instil a sense of grandiosity by misleading their followers, very little good can come from that. I'm talking dictatorial behaviour with little regard for the citizens. Given that the citizens then tend to resent to tyrant in a loud and aggravating fashion to the</p>	<p>Expert suggest that narcissism in a position of power can often end up oppressing and resenting their subjects, an intron become resented, creating something of a self-fulfilling prophecy.</p>

<p>narcissist, you are going to see oppressive action taken. A kind of its me versus them mentality.</p>	
<p>QE2: In your opinion, in what ways can those with both NPD and a position of power impact society? 60:06 – 64:08</p>	
<p><b>RM:</b> Asks <i>QE2</i></p> <p><b>EX10:</b> They can impact it for good and for bad. A grandiose leader who is a charismatic visionary can help an entire segment of the world for the better. I'm fairly sure Mahatma Gandhi was a narcissist but (he) was also a tremendous charismatic visionary who helped unshackle India from the reins of British Imperialism. Anyone who is that functional, performing at that level, needs a hefty dose of narcissism.</p> <p><b>RM:</b> <i>That could be brought about by constant praise, reflective from society, Gandhi has to be an outlier.</i></p> <p><b>EX10:</b> Most people who have NPD have no impact on major society, just playing World of Warcraft and feeding off of their parents. If they have influence, it can be influence for good or bad. Look at Hitler, very grandiose, lots of entitlement, superiority, exploitativeness.</p> <p><b>RM:</b> <i>An interesting book is called Dinner Talks at Hitler's Table, all things he talked about at the dinner table, interesting because he didn't consider what he was doing to be wrong, he considered himself a batman figure, doing what he had to do to pave the way for greatness. You could label that at Machiavellianism. Jordan Peterson says you would definitely be a Nazi if you had been there, and based on the Stanford Prison Experiment you would do what you're told, and not make a decision to get out of that. Mad.</i></p> <p><b>EX10:</b> I love Jordan Peterson.</p> <p><b>RM:</b> <i>Yeah he's a personal hero of mine.</i></p>	
<p>QE3: What are your opinions on NPD being classified as a Personality Disorder in the DSM-5 but not in the ICD-10? 64:09 – 64:57</p>	
<p><b>RM:</b> Asks <i>QE3</i></p>	

<p><b>EX10:</b> I'm not a clinician so I don't look at the ICM10 or upcoming ICM11. I look at the DSM5 because it helps what I want to measure. So I don't have an opinion on that. When I took a doctoral level class, we had to make diagnoses and use the codes from both books.</p>	
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## Appendix C: Thematic Groupings

Below are selected quotations taken from the data and sorted according to relevant themes for thematic analysis:

### THEMATIC GROUPINGS BY QUOTATION

**Symptoms of NPD:** This theme refers to reference of the symptoms displayed in a person with NPD (or a person displaying narcissistic traits). Its purpose is to determine the general approach the expert has for narcissism and what they identify the symptoms as being. This theme also highlights reference to narcissistic traits both negative and positive. An example answer would be reference to grandiosity, egocentric and sensitivity to criticism.

**EX1:** Self involvement, egocentricity, a difficulty getting beyond encapsulation in the self, getting across the divide in the other, so as seeing them as fully real as they are. All narcissists have issues with empathy, although they can emphasise, using it as a tool to extract useful information from others. What they really have trouble with sympathy and compassion. I think of empathy as cognizant and sympathy as caring. Psychopaths are often cognizant of the feelings of others, but they don't give a damn. But all narcissists have issues with empathy and have trouble with sympathy. I think of empathy as cognizant and sympathy as caring.

**RM** – *The difference being compassion.*

**EX1** – I think so, narcissists have real difficulty feeling sympathy and caring for the views of other people, especially the feelings of other people.

**EX1:** I mean I am listening to a client talking and paying attention to the death of the description of the other people in his life. Say I want to talk about his wife or children, but he may go through the whole session without talking about others in their lives, then that is a pretty strong indication. Other people to mention their wives and children but at the end of the hour you are left with a feeling, that they are kind of cardboard figures, he hasn't spoken about them in that in any way brings them to life. He is not communicating any depth to these people, because he is not interested in their depth, just as them as object affecting him.

**EX2:** Err for me the grandiosity is sort of the lynchpin, idea that you are better than others, entitlement, idea that you are unique, rules don't apply to you, be willing to exploit others in part because of those traits. Also showing off exhibitionism, being a domineering person and having a domination approach, perhaps in some sort of hierarchical model.

**EX2:** Flexibility, I mean if you are a little cocky you are going to keep it to yourself a bit and still fit in, I shouldn't brag about how much money I make, the quality of my life such as that. Also, people with the disorder have a great deal of failure, maybe in the workplace or in relationship between of the condition, it's a flexible and fine line. Also, less control over the manifestation over the traits.

**EX3:** There tends to be a high degree of sense of superiority to others and a sense or a need to be associated with indicators of status. One patient I had told me he was diagnosed with bi-polar, even though he turn out to have NPD, this guy was so narcissistic in his belief of his own bipolar disorder that he claimed that the scientific world had produced an additional four disorders based on his case. So, there is this association with a sense of uniqueness and entitlement, I think an ironic failed status as well, you know boasting or a serious of excuses.

**EX4:** For me the big picture, is grandiosity is associated with self-esteem which is dependent upon social approval. There is this need to have approval for the approvals of others. When that approval is not there then you start to see these people lash out in some way. They tend to be driven individuals.

**EX5:** I would mostly say in terms of low agreeableness and high extraversion, lack of Concern for others, Grandiosity, attention seeking, interpersonal dominance, those kinds of things.

**EX6:** I think the grandiose, one the elements that is still definitely one of the most important pieces.

**EX8:** Yeah, so I would say in my opinion the key characteristics, the one that stands out to me the most would be just the sense of arrogance and acts of self-interest. One of the characteristics people have this a real sense of superiority, the sense of grandiosity and entitlement, some people thinking that they deserve better treatment then the others or special treatment. Then I would also include selfishness, self-centred, really prioritizing one's needs over the needs of others. And the last one that stands out to me is sort of the sense of exhibitionism and attention-seeking, trying to be in the spotlight and having power, that kind of thing

**EX9:** Highly sensitive to criticism, although how this manifests as behaviour would alter. Grandiosity, lack of empathy Err just little understanding of the emotions of others. Traits like self-entitlement, perceived feeling of uniqueness to an extreme extent err self-disregard for others,



**Brief analysis of theme:** On a surface level it would seem the experts all suggest similar characteristics. In particular reference to: grandiosity, self-involvement, resilience to criticism, sense of superiority over others, difficulty in expressing and understanding sympathy (compassion). The only key difference is the interpretation of empathy. For some experts (EX9) suggest NPD sufferers have little to no empathy towards others. Other experts argue that narcissists (EX1) do empathise, and they use it as a tool to find out a person weakness. It is compassion that they have trouble expressing.

**Severity of NPD condition:** This theme specifically focuses on how dangerous and severe symptoms of NPD are, both to the individuals and to others. Specifically, this theme looks at the severity of the condition, focusing on the damage caused internally upon the psyche as well as damage through behaviour to others. In this manner this theme also considers if NPD should count as a personality disorder/ mental illness.

**EX1:** The most extreme form of NPD is a psychopath and they are extremely dangerous to society, conscienceless people, everyone has a degree of psychopathy but people who have a lot of psychopathy are aware of it and having studied psychopaths who are criminals and also highly narcissistic successful business individuals you can definitely see the similarities and reoccurring themes. Individuals who display these kinds of tendencies are extremely dangerous to the people around them, seeing them as tools or pawns, especially to their partners and children, they do immense damage to these children and the narcissistic parents is incapable of loving and sacrificing so in this way it damages the child.

**EX2:** I don't know I mean when you get to a disorder its going to be bad, but if you have say some narcissistic tendencies then sure, I mean we know confidence is attractive and so it finds dates and helps people rise in jobs to positions of leadership so yeah there are some positives to having high narcissism, extroversion assertive, can be positive at least at first, I mean over time people will catch on to the negative aspects the manipulation and lying, but yeah there are some positive qualities. Mainly through extroversion.

**EX2:** I mean some studies have shown that some people who display grandiose narcissism are less likely to internalise the criticisms of others and this has allowed them to push through and achieve in a manner that others cannot, you know just incredible confidence in yourself and when bad events occur you just shift the blame onto someone else. It can protect you in form some of that self-doubt and give you some psychological resilience.

**EX2:** Given all the time I spent looking at NPD and the narcissistic condition, I have of course seen it in people, and its very real. It should absolutely be taken seriously,

especially given how our society currently views narcissistic tendencies. Yeah, it's a personality disorder, it absolutely should be, so that makes it a mental illness I guess.

**EX2:** The grandiosity the entitlement, it's not necessarily dangerous, but when it leads to entitled and exploitive behaviour, it stops them from caring about others, showing the kind of compassion that is vital. Especially if it leads to success, these abusive behaviours, so they think they don't need to care about others, it's not their responsibility. So, they might not feel bad about bankrupting a million people, it's all about me and my stakeholder. This Is both dangerous and sadly common in business practices, and in desperate times it only gets worse.

**EX3:** A person who has the disorder will have impairment in their social function, will frequently cycle through jobs, loses and changes friends frequently, just has an uncontrollable difficulty in the world. A narcissistic individual with just more apparent tendencies could have the same problem but would be able to manage their life and their societal relationships, at least to the degree of some control.

**EX3:** So, I would say on a level where there is a disorder, there is like nothing that is positive about the disorder, its causing them major life problems. I mean if a person is narcissistic, but not have NPD, they might have that grandiosity, and swagger and confidence which helps them climb the ladder and become successful ironic. There is an optimal level of anxiety to narcissism. Think about if you go to a Dr. you want the narcissistic DR. who says they are the best, to trust you. People are more likely to gravitate and trust those who seem to know what they are doing. Narcissists give off a good first impression, it's a double-edged sword with their inability to see their own flaws.

**EX3:** Prevalence to commit exhibitionary or exploitive sexual acts.

**EX3:** Superiority, entitlement, some of the general traits of narcissism which are destructive. Also, boundary issues, so frequently sexual assault, or abusive actions of some kind, physically or verbally, tends to be more verbal though. I mean with narcissists its very much a constant mind game of how to conquer others, analysing weaknesses and flaws in a person's lifestyle so it can be used as leverage at a later time, but yeah for sure they can be dangerous.

**EX3:** Well I mean we have a president right now who is a good example to look at. One thing that is interesting is the kind of people Trump employs around him, tend to be either these kind of weasel people who suck up to him, or some other less bright pawns, he isn't putting anyone in a position of power that might be able to topple him. It's the reason why he picked someone so unlikeable as Pence to be Vice President.

**EX3:** We with regards to Trump he has had a life of minimal frustration, because of his wealth and situation so I don't know what to say about his age and narcissism, it is apparent that it would be extremely difficult if not impossible to get some sort of mindset change out of Trump at this point, he listens to himself above all else, above logical reasoning. This is of course one of the reasons why it is so difficult to treat NPD.

**EX4:** I differentiate between adaptive and maladaptive in all disorders, maladaptive would be upon the social environment and on self-esteem and moves towards greater and greater intolerance and frustrations within the environment, coming out in anger and aggression. The difference being the degree of severity based upon control.

**EX4:** Well if you have narcissistic leaders who doesn't not have submission, I think that this kind of authoritarianism leads to serious issues. There is an incentive to try and get away with as much as possible in this situation and that is always dangerous.

**EX4:** Well its Trump, its Putin, its Assad, it's a great deal of these powerful leaders, especially in developing worlds, no one is checking the power of these people, so it is no wonder it goes to their heads.

**EX5:** I think traits such as confidence, social dominance and arrogance are not necessarily bad things. I think to the point where they become extreme then it becomes debilitating to the person. I think not having the flexibility in how intensely they display those traits, is what can become so impairing for narcissists.

**EX5:** I also think it becomes very hard to hide the further down you go. You don't have a lot of options by responding different ways. They tend to be liked in initially and as time goes on other people's impressions of them decreases. I think that happens in most cases the more interactions you have with them the more debilitating they are because they can't regulate their behaviour.

**EX5:** The aspects that make it more likely that you will suffer in payments or make other people suffer. Not being able to feel empathy and compassion; being callous towards others making rules that don't apply to you because you're special. Responding with rage when you are slighted it's all setting the stage for a screw up yours and other people's lives. I think those are all potential dangerous to society.

**EX5:** you've got the same psychological characteristics that you have before they care about themselves and not so much for other people respond with rage when threatened. if you have somebody with power doing that and the ability to influence other people I expect those behaviours will be far more self-serving than the others with NPD.

**EX5:** I think the research shows that narcissism is truly impairing.

**EX6:** I think the confidence and self-promotion that comes with those characteristics I think are really helpful in the right context; for example short-term interactions I think narcissistic individuals do quite well in those because they are interesting to other people, draw lot of attention to themselves their charming they are funny they are interesting. In the long-term they can be really annoying and drive people crazy, But I still do think that a lot of the characteristics are positive in the right situations and contexts.

**EX6:** I think the connections between narcissism and power and status are very fascinating. In the idea that some people at least start to develop those tendencies when they are put in a position of having influence of power. it's certainly something that deserves more attention and it does make a lot of sense. If you're someone who suddenly has a lot of tremendous wealth and fame and people essentially worshipping

you it might distort how you think about yourself and other people and there is definitely something there. There's important component in the type of people who seek out those sorts of things regarding to fame and power.

**EX6:** In politics you see this with our current president in the US who definitely has some narcissistic tendencies in the position of power.

**EX7:** One of the characteristics of narcissism that lead to problems for other people, is that people with the problem aren't very reflective or self-aware. If you're not careful, you're not thinking about the impact of your behaviour and the origins of that behaviour then you have all kinds of potentials to cause damage. especially if you have the privilege to be in a position of power. If you think about people like Donald Trump they live life in a way to avoid feeling small. sometimes you have to reconcile the fact that you are small that your life is meaningless, if you have a hard time doing that you can do all kinds of things to compensate for that concern and caused damage and you don't think at the fact that you're causing damage.

**EX8:** I guess I would think about it as an issue of severity and how much that interferes with the person's functioning or another people's functioning. So for example, you could probably think of somebody who may be, I would say, they are a little bit smart or arrogant, but they are still likable or overall generally a fine, or average member of society. Maybe they talk about themselves too much but in general they are enjoyable person to be around. Whether if you're thinking about it as a full-blown disorder those traits are present very strongly and they either interfere with person's functioning. For example, maybe it makes their relationships difficult, or they make the lives of other people really difficult. So perhaps they are manipulative and self-centred in relationships or seek power just for the sake of seeking power and you could see a situation where it becomes a problem for other people. And I think and the disorder I really think about is an extreme version of some Machiavellian characteristics.

**EX8:** But I think that with narcissism the ugliest how I see it the issues of the distresser has always been jealousy to the detriment of themselves and others, but they might cause problems for other people, like manipulative relationships, that kind of things.

**EX8:** I'm sure you've got I would guess that you've interviewed a lot of joking authors from the America about Donald Trump

**RM:** *He has pretty much dominated the research*

**EX8:** I think that is a good example when somebody so aggrandising and so self-absorbed

and the primary goal really there is to promote the image, their product (you know, their

product is themselves). That's not really a good thing when everything is self-centred. I think again, you know, it's not necessarily just Donald Trump but we could probably think of other examples like business executive or even somebody at school who is a bully because they are very narcissistic. There are probably different manifestations and

examples but I think narcissism is a very dominant space thing and so I think in some ways it's hard to reason with a person who is very dominant but for the people whom they are backing whether it is subordinates or dominated individuals they might see some positivity in the actions displayed by the narcissists. And often narcissists feel like they are going to war, they want to rally their troops and get ready to attack. It's kind of a game which other people aren't really playing but caught in the crossfire. You see this a lot in office politics

**EX8:** Hmmm, maybe in some sense a level of stubbornness when that person really needs to be right just to be right and this really dogmatic and authoritarian to the point when it's got to be a highway where there is no negotiation, no compromise, it is all about that person and their agenda. When you think of your political leaders at various levels of the government, I think we want somebody confident but not somebody who is a loose canon and whose point is just to be right and prove their agenda.

**EX9:** for a narcissist there is joy in exploitation, in the utilisation of this power. So, it's obvious why jobs that are very obviously suited for those who want to be powerful. One of the great failings of modern society is that the people who would make the best leaders, very often don't want to be powerful and so never strive to be.

**EX9:** So, I mean we see it in all aspects of the public eye, through entertainment and sport, narcissistic characters often tend to bring the attention of the populace. I think a good example is Floyd Mayweather, so when he was known as Pretty Boy Mayweather he was smashing people, but nobody was interested in watching him fight. He has kind of a boring points based defensive style, that isn't all that interesting to watch, plus he is a small weight class.

**RM:** *Sure*

**EX9:** But then he changed his name to Money Mayweather, started talking lots of shit; saying he was better than everyone else; throwing money around; really being as narcissistic as he could be. It was almost a persona. He literally has the intention of getting everyone to hate him. Suddenly all eyes are on him and everyone wants to see him get mauled, so his pay-per-view buys surge and suddenly he is one of the most famous boxers of all time. Now in the last few years he has kind of changed into a more kind-hearted individual, but he realised that some of his success was based upon people wanting to see him get badly hurt. I wouldn't say this is normally how a true narcissist thinks, but I think that Floyd stumbled upon this technique partially because he was so narcissistic, and partly because it is a truism of human nature, to what to see the narcissistically arrogant get punished for their hubris.

**EX10:** Any personality disorder has pronounced effects on one's emotional life and their ability to forge relationships and caters to such stuff. If we're talking about subclinical narcissism, then superiority and leadership are usually considered "adaptive" components of narcissism

**EX10:** Grandiosity in leaders, military, political, business, can lead one to lead others down the wrong path. If one of these leaders is just trying to instil a sense of grandiosity by misleading their followers, very little good can come from that. I'm talking dictatorial behaviour with little regard for the citizens. Given that the citizens then tend to resent to tyrant in a loud and aggravating fashion to the narcissist, you are going to see oppressive action taken. A kind of its me versus them mentality.

**Brief analysis of theme:** This theme shares a lot of similarities with the grey theme (**Reference to symptoms of NPD**). However, the key difference is this theme looks at the more severe actions and behaviours taken by people with NPD and poses whether nor not NPD should be considered as a PD and as a mental illness. In comparison the grey category acts only has a start just to determine whether the experts agree on what symptoms of NPD actually look like. There was some consideration to merging these themes, but as they look to poses different questions and accomplish different things they were separated.

The consideration for the severity of narcissistic behaviour varies. Narcissistic behaviour is stated to have some positive qualities, especially in leadership or in situations of assuming authority. However, in the case of NPD, the conditions are considered to be uncontrolled to the point of social determent, this might be insulting others without meaning to, or dominating others in a patronising fashion. The condition is severe because this lack of control over malicious tendencies can lead to violent or manipulative behaviours. This is especially dangerous in the case of leadership where the behaviour of a narcissistic leader can ruin the lives of all they have power over.

**Narcissistic individuals within the public eye:** In nearly all conversations reference was made to President Donald Trump with regards narcissism. Trump dominated this opinion with only a few other individuals such as Kim Jon Un, Kim Kardashian and Johnny Depp being named. There could be a few reasons for this choice. Firstly, as president of the United States, Trump is perhaps the most famous person in the world. In conjunction with a sordid pass with narcissistic events and a long public attention, Donald Trump has become an institution, that is in a way known for its narcissism. One of the continuous mottos of Trump is the suggestion that he is the best, his actions are better than others and his products are better than any others. Given that he fails on all three accounts, having a history of failed businesses and bankruptcy, Trump proves that on some levels a narcissist can succeed in America. In this way he acts for a number of other narcissists to be inspired to continue their narcissistic tendencies. Having this lightening rod effect is most likely the reason why he personally was singled out by the experts as an individual in the public image that has NPD.

**NPD relationship with mental illness:** This theme looks to highlight discussion of mental illness as a concept. This means looking at the term 'mental illness' as a valid term in addition to discussing its meaning. The theme looks to capture what an expert considers a mental illness to be and how severe must a disorder be to be considered a mental illness.

**EX1:** Well you see here we get into core problem. I don't believe in mental illness, there is no such thing, when something has been called a mental illness, if they discover a biochemical or some neurological deficit, once that's discovered, that doesn't prove that's a mental illness, it proves that it's a physical illness, Mental illness is a category of those behaviours that we want to think of as sick but that we can't think of as sick. As soon as we can prove that they are sick it becomes a physical illness. Mental illness applies to behaviour that we know is sick but we can't prove is sick. There sickness is biological, you cannot apply the language of sick to mental behaviour it is simply a metaphor, a person is sick in the way an economy is sick, that is its merely a metaphor.

**EX2:** I mean its super hard when dealing with a multi-dimensional disfunction (classifying someone with mental illness). Tom Whitaker and Jerome Wakefield argue that it has to be harmful and unmanageable and stop the function of family and intimate relationships and friends. Also, its self-control, you lose the ability to modulate your own thoughts and emotions. Like just cocky there is some control over, you would turn it down for say an interview.

**EX2:** I consider a personality disorder to be a mental illness in the same way anxiety and depression is. I suppose you would consider them as mental illness if you want a precise answer, but I would rather not look at personality disorders in such a way.

**EX3:** Hmm (pauses and considers some time) They have to have a significant impairment in their daily functioning or significant emotional stress, so those are basically the criteria.

**EX3:** Well I see the point, it is called psychopathology for a reason, we need to be able to give a diagnosis and put names to illnesses, mental illnesses being no different for the purpose of treatment. I do prefer the points in traits-based approach, but it's obvious that people with a mental illness are mentally ill, after all one of the criteria is that society can see this in them when they interact. Also, when looking at genetical factors, having a mental illness means there is a good chance your offspring will inherit certain aspects of this or perhaps even the disorder themselves, so in this respect it is worth thinking of mental illness as a disease.

**EX3:** I guess like the previous question, but I mean a personality disorder is definitely a mental illness, I mean they are somewhat interchangeable as term for a reason. I guess you could argue that they aren't on the grounds of the mental illness term being a somewhat undefined term, I mean I suppose a personality disorder is too, but regardless there is not much difference.

**EX3:** (On NPD) Yeah, I mean, it's both a mental disorder and a personality disorder, so for sure it's a mental illness

**EX4:** Well you know back in the old days when getting a diagnosis and working with patients was common and they needed a terminology, this term 'mental illness' is fine. I now don't think we need these terms, it isn't reflective of the times.

**EX4:** I mean I just wouldn't I don't like to think with that terminology. I mean if the diagnosis helps people, but I don't think it does honestly. Doctors these days diagnose people far too fast with far too much need to place a label on a disorder. They aren't interesting in listening as much as trying to quickly diagnosis. I'm not saying that it was different in the past, only that it is something we should be addressing now. I'm not even opposed to making a diagnosis like that, just not in the manner its used. For mental illness I just don't believe in it, so I wouldn't diagnosis someone as mentally ill.

**EX4:** Yeah I mean the same as before, a person with NPD is mentally ill by the definition you want to go by.

**EX5:** Psychological characteristics that lead to distress impairments and harm to themselves or others. When I started doing research on narcissism I took a lot on psychopathy. So maybe in a case like that they're not so much distress but they're definitely harming others. But yeah those are my 3 criteria. I suppose you could tack on lack of control as well.

**EX5:** I think that's part of it honestly that's the impairment criteria where social relations are impaired, job prospects are impaired. Or you know you're in jail for harming others that's also impairment.

**EX5:** (On if NPD should be a mental disorder) 100%. It meets the same criteria that most major personality disorders do. if you look at major depression it's also got thresholds that's distress and impairments. Mental illness also refers to the same kind of behavioural distress and impairment.

**EX6:** I think the biggest thing would be distress, I think the individual experiencing distress is definitely one of the huge things which obviously is going to be an issue for a narcissism because they typically don't experience a great deal of stress themselves.

**RM:** *So by that do you mean distress being caused to the individual \*and\* people around them?*

**EX6:** If we were to sum up mental illness in general, distress is definitely one of the key components. I think you'll see that in the vast majority of things that show up in the DSM for example narcissism it's one of those disorders where the individual doesn't report typically a great deal of distress, but the distress that because other people around them is enough to meet the criteria to what I would consider important. I also think there's distress to the individual and that they're not necessarily aware of it, or what the source of it is.

**EX6:** (On PD's being mental illnesses) I regard them are really the same thing.

**RM:** So, no differences?

**EX6:** Errr not really no.



**EX7:** (On mental illness) I don't really like that term.

**EX7:** I just wouldn't really use terminology.

**EX7:** To put it differently I would say all mental illnesses are personality disorders

**EX8:** I think the most important thing I could see, I guess there are 2 things: 1 is it very distressing to the person or to other people around them. That's the core criteria. The 2nd thing I would say, especially if you're thinking about severity, almost how much functional can that person done a job, can they go to school, anything that overlapping with the distress. I think sometimes we tend to think of distress and failure to function in a pyramid that's two really separate dimensions. I think they are overlapping to quite some degree, but I think also deserve their own focus.

**EX8:** I think pretty much 100% and if you think of something like anti-social personality disorder or grandiose narcissism

**EX9:** A mental illness? Hmmm a big one is disorder, the complete loss of control over their behaviour, to the point where they are harming others with their behaviour, in ways they really don't want to. It's a disease, a mental disorder and when you think of it as one, a disease that manifests not for a day or a year, but the whole life span even, some days manageable but most days it is not. I'm not sure how I feel about the term mental illness, it is something of a dated term.

**EX9:** To the extent that I would consider any other mental illness to be a disorder. I think that NPD when correctly diagnosed is for sure a mental illness. However, I wouldn't say someone with narcissistic tendencies is mentally ill.

**EX10:** A mental illness is when someone has issues forging meaningful relationships with other people and impairs major life activity like working and such. It should be debilitating in nature, to the point where the person cannot function as they desire and obviously cannot function within society.

**EX10:** A mental illness is when someone has issues forging meaningful relationships with other people and impairs major life activity like working and such. It should be debilitating in nature, to the point where the person cannot function as they desire and obviously cannot function within society.

**EX10:** 100%. I have no doubt its a mental illness when its present to fulfil the requirement for NPD, not just general narcissism found in the populace. If you have full blown NPD, you suffer from a mental disorder you know

**Brief analysis of theme:** This theme ends up being quite broad, as the terminology mental illness is held in connection with many of the experts. The experts end up being pretty split on the existence of mental illness and again split on whether this term

should be used. This is one of the core themes examined in further detail within the analysis

**Differences in NPD Behaviour:** The theme uses quotations in reference to suggestion of divide with the NPD diagnostic bracket. One of the core discussed issues within the literature is a discussion on the nine descriptive traits outline in the DSM and whether they fully encompass the full scope of narcissism. One of the most commonly discussed splitting to dividing NPD into a grandiose and vulnerable categorisation.

**EX1:** So the grandiose narcissism it's all about how great he is. The depressed narcissist is equally obnoxious because it is all about how terrible everything is.

**EX:** That they vary, yes, the big variation being between grandiose and depressed.

**RM:** *I read a work that split narcissism into 5 separate types of disorder, something like two poles, grandiose and vulnerable with some other variants in-between.*

**EX1:** Yeah that could be true, thinking of different types of narcissism remind some of Kohut psychology and he distinguishes the difference between the type of narcissist who is constantly looking for mirroring, who is constantly looking for mirroring, as opposed to the idealising narcissist who are narcissists who are engaged in hero worship they are worshipping gurus and they are just projecting their ideal self in a character, like Doyle Brunson or Donald Trump or even God, or the Pope or whatever. It's a variation of narcissism to idealise people. That's certainly different from the mirroring narcissist who wants to be God. The worshipping of God is a more indirect version of this.

**RM:** *I wonder if there should be at least two different names and disorders on narcissism.*

**EX1:** Yes there probably should be.

**EX1:** The thin skinned are borderline, the thin skinned are not necessarily borderline, more obsessive, more intellectual, obsessive compulsive. The thin skinned are people who are overwhelmed by their feelings, overwhelmed by their feelings, this sensitivity makes them very hard to work with. The thick skinned are insensitive and would rather not have them, they want to have distant from their emotions and understand themselves on an intellectual basis, they just don't feel much

**EX2:** Oh, they are super different, grandiose being the proto-typical one, with vulnerable less so. In terms of vulnerable narcissism many of those people aren't even grandiose. I think they are ego central and self-absorbed, but it often comes from a place of victimisation, a defence mechanism and are quite different in my mind.

**EX2:** I think if you think about grandiose and vulnerable, at the core and traits from agreeableness with the five factor model, so you are going to display some of the obvious traits of narcissism present in both, the self-entitlement, the constant self-involvement but then a grandiose narcissist displays some other traits like desire to rule

the hierarchy, to be outgoing and always after the newest object with can be praised, like a car or watch. All about attention. Vulnerable are shy, sensitive to criticism, anxiety and so are every different. Some people are very obvious in their narcissism, like Donald Trump it's hard for people not to agree on this. But then there is hidden or covert narcissism, who don't reveal this narcissism until you get to know them intimately.

**EX3:** Yeah, I do, it's true with all diagnostic categories, with mental illness. The debate on whether personality disorders the five out of nine, captures it perfectly. Two individuals could have almost completely different symptoms, almost all of them different, but still be classified with the same disorder. For this reason alone, shows that there needs to be a change in classification. Trait based dimensional model, and perhaps a further focus on subcategories could help with this diagnostic problem

**EX4:** I think if you go to Kohut, there are pull that suggests a vulnerable and grandiose divide. The grandiosity is there relative to what, I mean it's what diagnosticians focuses on.

**EX4:** Hmm from the poles point of the narcissism, the non-ambitious to non-grandiose pool, could have more compassion but does not have the assertiveness that comes with that grandiosity. I think at the heart of democracy and leadership the necessary self-esteem is based in this idea of being somewhat narcissistic, they in a sense are linked in a manner which has been orchestrated by modern society. In Kohut's system the idea is to take both poles and join them together somewhat.

**EX5:** I think the description is pretty good. The need for admiration, grandiosity, lack of empathy. Very consistent of the traits that I would associate with the condition. I think if I thought that there was more of an underlying vulnerability to these folks I'd be dissatisfied with calling it NPD.

**EX5:** I have a tough time understanding vulnerable narcissism as narcissism in most cases. It doesn't look like narcissism to me, particularly it seems more like borderline personality disorder. It's almost entirely comprised of high levels of neuroticism

**EX5:** I think that grandiosity fits better with classic descriptions of narcissism. I think the emotional vulnerability is the result of psychoanalytic overthinking. With the whole putting up a front because they feel vulnerable and have very little self-worth I don't agree that should be categorised as NPD

**EX5:** Assuming that you mean something more than there are a bunch of different ways than 5 out of 9 symptoms, I think there are a lot of ways of getting there. Symptom profiles can differ dramatically Is that all that you meant?

**EX5:** vulnerable narcissism is still closer to borderline personality disorder and high levels of neuroticism

**EX6:** I've had some really interesting discussion, with folks about whether grandiosity and vulnerability are two different expressions. Is it the case that people that people kind of oscillate between the two and I'm not sure? I like the idea that people can move

between the two. For example, when things are going well, the grandiose expression comes to the surface. When things go badly for them the vulnerability component may come out. So, I think there is a possibility for a subset of these individuals. I think it might be possible but there are different types of narcissism that's why things look so murky. But trying to explain slightly different manifestations using a similar language.

**EX6:** So, I think there might be something there that will eventually help us understand these different manifestations of NPD and I think the vulnerability stuff might have a really really strong neuroticism component that just isn't showing up.

**EX7:** I think the pages on the outside of going to be different. you have to go to the inside of the person to see what's really going on and seeing if it's narcissism or not.

**RM:** *Are you not interested in making distinctions between different types of narcissism how do you propose to do it?*

**EX7:** I don't find that particularly helpful, I want to know what can a person do that would really bother you and threaten your sense of self-esteem and then what you going to do about it? and that's a highly a contextualized thing. Let's compares events between trump and Morrissey. Both are narcissists, but would we say that Morrissey and Donald Trump other same some type of narcissism? I don't think so.

**EX8:** So yeah, that's what I can probably talk a lot about. I would make a distinction, yes. I

probably fall more into the camp where grandiose and vulnerable narcissisms are different presentations of narcissism rather than present just that different types of the same person. I think individuals who are very grandiose, they might show anger in their reaction rather dominant than vulnerable narcissistic individuals. But I think there are certainly people out there who are narcissistic just because they are narcissistic and not because they are trying to master underline vulnerability or something that they don't like about themselves. So, I would make distinguish between those 2 things.

**EX9:** Yes, I would say so, I would say there is enough definitive proof that suggests multiple different behavioural patterns can be observed in NPD sufferers. The five in nine systems is not entirely correct in its approach. It's a little bit too broad to be entirely accurate.

**RM:** *I would say it seems like there is a lot of agreement for this position.*

**EX9:** Yeah, I would say so, it's hard to tell, but a great deal of people have written about the subject, and I don't believe there would too many negative ramifications to introducing a grandiose and vulnerable narcissism distinction.

**EX9:** Well yeah that's the thing, should it be split into more categories, I personally would say no. The way to approach this is with small steps, continuously little changes. This allows us to utilise the data we have and keep some semblance of structure. I would say if you made say four sub categories of NPD for example, then the dispute over why four categories and what they should be there would be a rampant one.

**EX10:** Well I think that spectrum can be further dissected, such that there are varying components where one narcissist may be more vulnerable, and another less, but if grandiose and vulnerable narcissism were entirely separate things, then scores on any test designed to measure those two things would be entirely orthogonal, and that's not the case.

**EX10:** They can impact it for good and for bad. A grandiose leader who is a charismatic visionary can help an entire segment of the world for the better. I'm fairly sure Mahatma Gandhi was a narcissist but (he) was also a tremendous charismatic visionary who helped unshackle India from the reins of British Imperialism. Anyone who is that functional, performing at that level, needs a hefty dose of narcissism.

**Brief analysis of theme:** This theme looks at quotations with specifically reference to the differences in behaviour displayed under the umbrella of NPD. Some experts suggest a splitting of NPD into two separate conditions, vulnerable and grandiose narcissism. Other experts such as EX7 argue that further division of the condition leads away from actual useful treatment capabilities. There is some intersecting here with the yellow theme (**Reference to Measuring Instruments**) and the Dark Yellow (**Decline of Discreet Diagnosis/ Discussion of NPD Prevalence Rates**) given that all three focus on the measurement of NPD in some manner and the current trends in the understanding of narcissism.

All experts identified a grandiose narcissism, however not all identified a vulnerable narcissism. In the case of EX1 he refers to pseudo vulnerable narcissist, the depressed narcissist. In addition, EX1 argues for a difference between thick and thin-skinned narcissists. Others like EX5 argue vulnerable narcissism is closer to borderline personality disorder with high levels of neuroticism.

**Relevance of environment as NPD contributor:** This theme uses quotations that reference the argument between the relevance of genetics versus the relevance of the environment as primary contributor for NPD traits. The literature would suggest this is approximately a fifty/ fifty split, however the literature is very much divided.

**EX1:** Clearly, we have brains as well as minds so clearly there is something there to begin with not just the environment. To me it's in a black cloth, I don't know how to estimate it. I don't think about it very much because the whole of the psychotic approach is based around environmental factors, the quality of the maternal holding. I'm far more likely to think in the case of a severe narcissist, sometime seriously went

wrong in the mother infant relationship. I'm more likely to think that than I am biological factor.

**EX1:** I don't think it is particularly leaning towards one gender, although it certainly takes on different manifestations. So you have the sadistic narcissistic domineering male, but you have the seductive female, who is out to get you addicted to her, her narcissism takes the form of a trying to make her the centre of your desire and attention. She goes about it in a different way.

**RM:** *Is that because men and women want fundamentally different things from life.*

**EX1:** Err I think actually they kind of want the same thing, they just have two different ways of thinking, two different applied strategies. They just want to be the centre.

**EX2:** I mean genes play a huge role in all psychology and in all psychopathy, so probably about 50%.

**EX2:** Yeah actually I think I go to the opposite I don't think that psychoanalytic theory really goes that far, like it all being about parenting. I don't think you can address that unless you have designs that let you intertwine genetics from environmental feature, that's all speculation really, even showing a correlation between narcissistic parenting style and a child's narcissistic personality does not say that a nurture issue or a genetic issue, because the two still have not been separated. I think it's a very poorly understood issue as to how any of the personality disorder divide into nature versus nurture?

**EX3:** Genetics play a role in everything... The research that links narcissism to biological substrates, there isn't anything too conclusive, it can't be, the science is not there yet to make some conclusive decision. At least I believe so. There is some genetic component to it obviously, I think this one of the personality disorder, which is more influenced by the environment, more so than other sides might be by genetics.

**EX4:** I have no honest idea, I guess based on a what we know, I mean Freud would suggest that it's a common a true characteristic in all. Are there variations in narcissism based upon genetics, that is hard to say? I mean we will get into the sex roles later, but you know the data is not there really.

**EX4:** One of my paper was on sex roles and narcissism, and basically the results suggest that grandiosity seems to be more associated with males. And the vulnerability aspects seem to be more focused around women.

**EX4:** My data suggest that male masculine shows that there is a tendency for narcissism to be more present in males. We did a study in Iran which measures the dirty dozen measures the dark triad in school teachers in central iran, to make it short and sweet, males are going to be higher, if you look at masculinity even in females, this tends to predict narcissistic characteristics.

**RM:** *What exactly do you masculinity in females?*

**EX4:** If you go and look at the sexual inventory there is an inverse of positivity evaluated masculinity, positivity evaluated femininity, a bi-polar masculine and feminine scale, then there are smaller scales which look at socially devalued forms of

masculinity and femininity, so when I say to you that masculinity predicts narcissism in males and females, both males and females with show a spectrum of relationships which are more masculine or feminine relative to sexual stereotypes, and vice versa, and so masculinity of this kind measured in females and males alike, predicts narcissism.

**EX5:** As a traits theorist, I think they reflect the same genetic influence as the traits that contributed to them. 45 to 60% from genetic variance.

**EX5:** I suspect there are a lot of other personality traits which don't show a whole lot of shared influence. Asperger's shows about 10% due to shared environments and the rest is due to unshared environments or measurement error. So, while I agree that the environments important I think it's probably the way that genetic shape it. So, I'm convinced that the traits lead to those environments themselves?

**EX5:** There is good evidence, like if you look out of a lot of studies with twins, that have been separated at birth they look remarkably similar despite not being together and not living in the same environment. One of the big ideas behind that is similar genetics are constructing similar environments \*inaudible\* way people respond to the types of choices they make. It seems that their genes heavily influenced the kind of decisions that they make.

**EX5:** Well these structures in society are caused by genetics if you trace it back far enough. If you had to pick one dimension that would be a good place to start. In terms of determining trait It's probably agreeableness, sort of the connection with others and playing well with others.

**EX6:** I definitely think it has a huge role. the heritability estimates are always a little fuzzy, but I definitely think that there's a genetic contribution I reckon it's about half the genes half environments. I definitely think there's a strong genetic connection that gives people a disposition and tendencies to develop characteristics.

**EX6:** I think both I know testosterone can definitely play a role and men are socialised to do this. I think it's a biological inheritance that sets the stage. I'll socialization finishes things off where in many cultures is typical for men to gain status. I think the connections between social hierarchy and NPD and the navigation of those hierarchies it's one of the things I'm really interested in and I think there's something there.

**EX7:** Genetic studies generally show even if you're talking about relatively stable dispositions, the variance levels are too high. Genes aren't quite the right level of analysis to think about.

**EX8:** As far as the development of narcissism we don't have very good understanding of, there different theories out there but to my knowledge there have been a lot of societal research examining these kinds of issues but not so many genetic studies. I would say that genetics is pretty big component to it that would explain a lot of the characteristics, where you see it in siblings or children and parents. Even when you conduct twin studies and separate them, then tend to grow up with some innate traits

from their parents. Also, I mean given how similar humans are biologically, it would make sense that genetics influence behaviour in a huge way. I would think that it definitely is the central component as important as the environment.

**EX8:** I think genetics is probably more primary and genetics help dictate the environment that you choose, that kind of thing. That being said, I think just like anything there certainly is more important environmental contribution and so from what I've read there 2 sorts of theories of development of narcissism. One of them seems to be that narcissist is chosen at birth to develop these tendencies. Another one is the person who is narcissistic as an adult was spoiled as a child and thought they were special, they were great. I would personally see that as a bigger influence of narcissism, but again, I don't think we have the answers to these questions and I think that is an important direction for narcissism research quite forward.

**EX9:** High likelihood of children becoming narcissistic if their parents were. The children had been separated from the parents at birth. I mean the paper proved that these two factors do correlate relatively well

**EX9:** You mean nature versus nature what percent of each? Hmm well honestly it is impossible to tell, for argument sake we can say 50/50. But we know that childhood abuse increases the likelihood of developing NPD later in life, and we know that growing up in an environment where a key role model displays narcissistic tendencies increases the likelihood of growing up with heightened narcissistic tendencies.

**EX10:** Well as we know from twin studies of modern psychotic twins we know that about 51% of anyone's personality is inherited. So, I would suggest that a personality disorder which is so fundamentally based upon trait levels, the majority of one's inherited disorder comes from one's parents

**EX10:** So, once we have a stable maladapted set of traits we can measure those and in these twin studies we simply measure them, it doesn't really matter who raised you, the correlation between the two comes across in the genetic inputs.

**Brief analysis of theme:** A reoccurring sentiment is that there is difficult conducting conclusive data on entirely genetic based studies, both of PD and NPD alike. Given that genetics testing is still very basic in design, it is currently impossible to isolate genes or DNA strands that relate to narcissistic tendencies. However, all experts agree that it is a significant factor, most likely 50 (in EX5 potentially 60 or 51% in the case of EX10) percent and in the case of some experts even more impactful than the environment. As there is little way to measure the biological impact, most of the experts tend to avoid including it in their analysis. However, since none of the experts had a good understanding of the impact biology has on NPD, clearly there is need for further research in this area.



**Role of gender:** Nearly all of the experts suggested that men display equal to or more dominant narcissistic traits. However, there was some contention over female narcissistic tendencies suggesting that women can be as narcissistic as men although the symptoms present differently. Most experts described this female narcissism as being more cunning, manipulative and secretive in nature. In addition, experts that described a difference between grandiose and vulnerable narcissism often characterised women as have tendencies which favoured vulnerable narcissism.

**Relevance of environment as NPD contributor:** This theme focuses on the most prevailing environmental impacts that occur on a macro-scale. Given that most experts agree that the genetic portion of the disorder is somewhat unmeasurable, attention has been paid to macro scale events which impact the society as a whole in relation to narcissistic tendencies. Some example of this might be the rise in individualism, or the relationship between social media and narcissistic tendencies.

**EX1:** Well okay sure, ruthlessness is useful, especially under capitalism.

**RM:** *Yes, it would seem that a lot of CEO's seem to be narcissistic, it seems kind of necessary to get to the top*

**EX1:** Exactly, you need to be willing and able to step on other people

**EX1:** Hmm I was watching an ad play during the Canadian Football League for GMC. The ad goes 'what kind of a person do you want to be, a good person a good friend, a good parent, is that it? (it belittles this notion) 'No you want to be the best'! Well you see that's narcissism talking right there.

**RM:** *But I mean if that resonances within everyone, then that's genius. They have brought along this product and said look how niche and this is and how unique you will be if you have this, but deep down it is relevant to everyone.*

**EX1:** Right, it's very easy to tempt people's narcissism.

**EX1:** Well now we go back to the environmental question, I personally think this whole culture including our educational system, this structure we live in breed narcissism, a culture of achieving and doing and doesn't pay any attention to being, always about doing and achieving, not about being

**RM:** *Is narcissism a parentally influenced phenomenon or could say the abuse of peers and other influences like teacher abuse or from family members.*

**EX1:** Yeah, I think it can be from other kids and bullying the meanest, the cruelty of other kids, especially if they identify something odd or unusual about the person they tease him or her, the ostracize that person. Even with really good parenting that can be very damaging. Although my bias to kids who have a really loving mother and father and a really great environment, even if that kid encounters sever bullying later in childhood or adolescence, although the child will be hurt, if the kid has really good loving, he is going to have a core, that's going to be pretty strong and endure the later cruelty better than someone who has been deprived.

**RM:** *So they have more of a backbone or self because of this loving nurture, they have this foundation of love to be supported by.*

**EX1:** Yeah exactly a person who has been raised with love knows what it is and they have received it, he knows that it exists in the world and if he is not getting it he will not be ingeniously be able to find it. He will find the one teacher or coach or friend who can prove them a semblance of this love. They will find it in god or in their imagination, some semblance of this love.

**EX1:** I think can a number of ways, you could have a person who is a narcissist. A person who turns to drugs to numb, terrible feelings of not being good enough, using the drugs to numb low self-esteem, but the drugs make him more narcissistic. Take alcohol, it certainly makes people more introspective and self-focused, and in the case of a narcissistic individual it heightens these effects. A grandiose narcissist may abuse drugs because they like this heighten self-aggrandising and revel in the feeling

**EX2:** I'm more pessimistic about it to be honest, I don't think parenting and selfies and the self-esteem movement plays a huge role frankly in the contributor of narcissism. I mean there was a study to look at narcissistic traits in pre-schoolers and studied to see if they continued and the correlation suggest that by preschool they were able to pick out these traits. That experiment was relatively successful. I think you bring some of those traits straight out of the womb with them. I think some cultures can inhibit this too, like some Asian cultures, where being self-absorbed can bring shame on your family in a way that isn't fully comprehended in the west, and this pushes down some of these traits, where as a western culture may encourage individualism on a level that encourages narcissistic attributes but you know I don't think nurture is as impactful as people give it credit for.

**EX2:** I think both show it, I come from a trait-based background, that all personality disorders can be linked to normal personality. So, we know across the world men are less agreeable to women, less tender minded, more self-focused. This doesn't mean that women don't do some disagreeable that others, just men tend to me more disagreeable, so looking at the curve at the high end you are going to see mainly men at the part of the spectrum where this is going to be represent as NPD or some other disorder.

**RM:** *Do you think that is a societal thing or more a physical one.*

**EX2:** I don't know it may well be that there are hormonal factors, like testosterone, but also culturally men have been praised and encouraged for narcissistic traits to an extent whereas these qualities have often been oppressed or even attempt to breed out of woman. There is an interesting study done by Judge who showed that being disagreeable predicts higher salaries for men but not for women. So if you are some asshole dude, who says I should get a raise I kick ass, isn't going to go so well for a women.

**EX2:** I have a good sense of that to be honest, narcissism like most other disorders seem to have co morbidity with substance disorder and anti-social behaviour, but it's not a robust correlate like anti-social and psychopathy disorders. I mean it makes things worse because substance disorders tend to make all disorders worse and

reinforce negative behaviours or at the least numb the individual from dealing with said negative behaviour. Does it dramatically change it though, I don't really know

**EX3:** Society is more measurable of course, there are lots of studies which show the influence of narcissistic parents on children, and narcissistic bullies or the involvement of verbal or sexual abuse. NPD really has its roots in childhood where the environment can impact you in a huge way, in a way you can't deal with or understand. We can see this in the research, but I'm really not sure how to evaluate and answer this question.

**EX3:** You know I'm not entirely sure, but I would imagine that it is men, no sure why, probably partly to do with social distinction, patriarchal and males are taught to show dominance and toughness in society, all of those can be linked to narcissism. Women tend to be more compassionate, which is pretty much the opposite, as well as modesty

**EX3:** You know I'm not entirely sure, but I would imagine that it is men, no sure why, probably partly to do with social distinction, patriarchal and males are taught to show dominance and toughness in society, all of those can be linked to narcissism. Women tend to be more compassionate, which is pretty much the opposite, as well as modesty.

**RM:** *So basically, our societal structure looks to nurture the opposite of narcissistic thinking for women.*

**EX3:** Right, well it might in some way, in say the Kardashian way an aloofness there, but no mainly it does not.

**RM:** *That seems pretty controversial?*

**EX3:** Why? It has nothing to do with women, but marketing psychology and ancient societal structures. I think we have seen a move away In the more recent years. But women's rights have come a long way since the 20's, even since the 60's. That is very very recent in human history, so it will take some time for that cocky approach that could be considered narcissism in men. This is all starting to change now, with more women becoming managers and CEOs, moving towards a more neutral work environment over a male one.

**EX3:** Err I'm honestly not sure about that. Substance abuse is obvious shares a critical relation with clinical psychology, so I would imagine that you would see an increase in narcissistic traits or heightens destructive behaviour. Perhaps used as a crutch and thus be used in that way, but with narcissists, hmmm you have to imagine some narcissists take uppers and other stimulates to get that rush, I mean they are often very driven people, this again is narcissists not people with NPD, those who have the disorder would almost certainly be using drugs, if they are using drugs as a crutch to make it through the day. One imagines the abuse would be chronic use, as it tends to be in psychological disorders.

**EX4:** The western world has become exceptionally materialist and has built society around the striving of consumption. So, there has been a lost in community as a force that helps give structure to human life. So, some of the criticism the most basic black and white ideas, said things like contemporary society and contemporary psychology were promoting a cult of narcissism. I would say things are a lot more complicated

than they used to be, having a culture which is increased communal, less religious and more disconnected from value systems has aggravated tendencies towards a narcissistic disposition.

**EX4:** There has been quite a few studies that look for narcissism in Facebook and it seems that these kind of social media, is encouraging this individualism, and reduce tendencies toward optimal frustration which may promote narcissism. I mean according to Kohut, what is supposed to happen, narcissism is just fine in early life. And you go through times where you are optimately frustrated in your relationships, and what is supposed to happen if you internalise sources of self-esteem not allows for change in the understanding of relationship. So social media effects this optimum frustration does not occur so well in social media

**RM:** *How so?*

**EX4:** Well it requires that person to person interaction, so seeing emotions and experience so called real life, by contrast social media in its current form is a primitive spartan version of this that doesn't provide the necessary feedback to stimulate this optimal frustration.

**RM:** *What exactly is synthetic narcissism?*

**EX4:** It refers to a kind of narcissism that develops in a situation that is contrary to the ordinary. I one of my papers, the synthetic narcissism looked at was based around gender roles. If a woman, acts like a man, in a man's position, doing masculine work, do you see women develop a kind of narcissism normally related to men, as in an increase in grandiose characteristics. The correlation is actually quite strong.

**EX4:** That's exactly right, technology aggravates this tendency, and in conjunction with capitalist structures and ever-increasing technology, they all work with one another to exacerbate the symptoms.

**EX4:** One would assume that narcissistic individuals would tend to abuse substances which fall in line with their ethos as a narcissist, I guess the theoretical point is if a narcissist finds themselves in an environment which does not in optimal frustration, they may substitute social supports for chemical support, I mean that's all very plausible.

**EX5:** While I agree that the environments important I think it's probably the way that genetic shape it

**EX6:** I think there is definitely something happening where I think societal changes really can have an impact on narcissism characteristics and I think narcissism probably is increasing in recent years since they have been a lot of changes in society. I'm sure societal and environmental forces can have a huge impact.

**RM:** *Why do you think they've been increasing recently?*

**EX6:** I'm not absolutely sure, I do think some of the things like social media. Whether that's a causal inference or just a symptom of the increasing narcissism I can't be sure. I definitely think there's something going on with this strong desire to be in public to have people looking at you constantly to be talking about what you're doing at every possible moment and I don't know if that's creating an impression for young folks in

particular, that life is like a constant stage. Without any kind of time off stage so I, then again I think the causal force of this or a being a consequence of increasing narcissism.

**EX6:** I think some of the changes in family environments also, might have something to do with this while there's more of a focus on surface level characteristics rather than character development.

**EX6:** looking at kids and their career aspirations it wasn't connected to narcissists but one thing I did find a bit worrisome was when we asked what they want to do when they grow up. A large percentage said something that has to do with being a celebrity or an athlete or actor or musician which is interesting because they seem to be a lot more focused on fame and attention now than in past generations when you would see other things like I would want to be a police officer or astronaut which were a bit more common back then

**EX7:** I think the impact (of NPD) on society is overstated usually, I think the idea of it being an epidemic is a hoax and I don't think it's very good evidence supporting the idea so I'm sceptical of that.

**EX7:** You can see substance abuse being intertwined with the narcissistic dynamic, which is the cause and which is the effect is difficult to know.

**EX8:** There is a lot of stuff now about generation millennials and narcissism, whether the society is promoting that. I think there's been some debate about that. In the States there's increasing valuation narcissism being measured. Once could argue that the president chosen for the country is a reflection of this. But the thing is a leader and being really confident and really persuasive is a good thing. I think those traits are really being valued by younger generation. So, I could think that contributing to some degree or may be people who don't have those traits can feel like something's wrong about them and they're not leadership type. But I think we can only have so many leaders and I think telling everybody they are going to be a leader probably is unrealistic. And I could see that contributing to narcissism in some way shape or form. Because, again, I don't think everybody can be a leader, but I can see at schools, at least in the States, where everybody is told to be a leader and to stand out and that's sort of interesting perspective.

**EX8:** I think it's possible. I think may be to some degree, but I think it also may be that people who are already type of narcissistic or histrionic just are louder and able to express themselves better on social media. Just now that we see it more. But companies like Facebook have massive massive marketing teams designed to among other things bring out that kind of narcissism which keeps you posting. So I think it probably contributes to some extent, but I think a lot of it is just giving the people the outlet to what they already have. It's just now on display more.

**EX8:** I would see it almost as substances I tend to think sort of caused by some other underlying issue whether it would be sensation seeking or to cope with pain of living, as a numbing mechanism. With narcissism I would see it linked more to sensation seeking and I guess if somebody who is narcissistic also reported a lot of substance abuse I think

overall it would be indicative of just generally more externalizing difficulties. I wouldn't say they are going to be more narcissistic, they already have the condition right, but maybe it reduces their inhibitions and further reduces their ability to withhold thoughts.

**EX9:** Sure, so let's say the degree to which that child experienced abuse from bullies, or abuse from adults, whether sexual. Physical or verbal, they can all be effective at unleashing narcissistic tendencies later in life.

**EX9:** That's not to say such trauma would in any way guarantee narcissistic tendencies, only that extreme cases could be more likely to cause NPD, especially if that child does not have a loving and teaching support group

**EX9:** Predominately, but it could also be the support and love of a sibling or guardian, like grandparent that helps guide and channel malevolent tendencies.

**EX9:** Who can say, many reasons. The patriarchal shape of society, the validation and encouragement of such traits in men over women, perhaps based in hormones, or in general physical strength. It is a combo of biological and societal that is for sure. Biology influences society in a rather meaningful way, but we have no real idea what kind of influence that it. No one really does, the data just isn't that producible on any meaningful level.

**EX9:** Again, I'm not entirely sure, I have to imagine that certain drugs, ones that are renown for making a person behave in a more narcissistic manner, like alcohol or cocaine, you have to imagine they exacerbate the problem. A person with NPD is quite likely to have some sort of addiction, whether it is to the constant maintenance of their body, their social appearance often requiring a crutch.

**EX10:** I'm glad you asked, as I've asked my friends, is social media for example causing Narcissism, or simply an avenue for expression of narcissism? The way I look at it is imagine the 1880s pioneer woman crossing the American West in a covered wagon. She could have been a raging, flaming narcissist, but had no one to express it to. Today we have social media, and people can go on and relatively anonymously express how great they think they are.

**EX10:** Well I say "you might be a narcissist if: you know exactly how many Facebook friends you have.

**EX10:** Generally, males score higher than females. The reason for this is some sort of longstanding cultural bias in favour of the success of male children than female children. For many generations women were told their only option in life was to be a nurse or have children, and if they got married they were to stay home and cook, but men are supposed to go out and conquer the world. Why men? They're special, they're powerful, they're smart, women are not.

**RM:** *So by your theory, as we begin to see more females in position of power hopefully, we're more likely to see narcissistic female CEOs as well?*

**EX10:** Absolutely, in fact some pop culture icons develop narcissism, such as the Kardashians. They operate as icons, do you want to grow up to be a CEO or a model on Instagram?

**EX10:** It's my understanding that people who have NPD are more likely to engage in substance abuse, especially cocaine, as it is supposed to make you feel smart and intelligent and pretty and powerful, and all those things, which then just acts as fuel for the narcissism fire.

**RM:** *Would you say there would be a difference in the type of substance depending on the effect of their disorder? Maybe taking stimulants might make certain traits worse than the average person.*

**EX10:** I would think people with different disorders would tend to gravitate towards different substances to abuse, for example someone with a general anxiety disorder, may be more likely to abuse tranquilizers, as it takes away their anxiety. A narcissist might be more likely to take stimulants because it makes them feel even prettier.

**Brief analysis of theme:** This theme intersects with the scarlet theme (Reference to **Debate Over Nature/Nurture as Prevailing NPD Contributor**) given that both assess the impact of the environment as an impactor on NPD. In this manner it was difficult to separate the two themes. However, given that there is very little conclusive research on the genetic aspect of NPD research. This theme looks to focus on the types of impactors we can see in the environment which happen on a macro scale. The crimson theme on the other hand looks to focus solely on the debate on which is more relevant. Originally this was a single category, but given the broad spectrum of the ideas, it was necessary to separate the two.

**Role of Social Media:** One of the most common suggest for the apparent rise in narcissistic tendencies is the impact of the internet and in particular social media. All experts agree that social media is at the very least allowing narcissistic behaviour to be rewarded and pursued. It also acts as a megaphone for all narcissists to broadcast their actions with. However, there is a divide on whether using social media increases narcissistic tendencies. EX8 argues '*I think it also may be that people who are already type of narcissistic or histrionic just are louder and able to express themselves better on social media*'. In order to conclusive resolve this much more research would need to be undertaken, most likely using some of statistics gathered through Facebook.

**Role of substance abuse:** There was some variance in the expert opinion although there is general agreement on a few issues. Firstly, that substance abuse tends to heighten narcissistic behaviour, especially if the substance is in somewhat a stimulant or depressant. Secondly most experts agreed that substance would be adopted as a crutch, although the argument over if the drugs are used as an addict's crutch or as a

method of aiding narcissistic tendencies (i.e. impervious to personal criticism and the criticism of others out of apathy), was contended.

**Relevance of Parents:** A reoccurring theme highlighted by the experts is the role parents and parenting styles have on creating narcissistic tendencies. In particular it would seem that if the parents act too strictly and verbally abusive towards their children, especially if they use repeated punishment involving shame and guilt causes narcissistic tendencies. In addition parents who are too easy and coddle their children can cause narcissistic tendencies as coddling can promote grandiosity which can get magnified when facing the trials of the world.

**Decline of Discreet Diagnosis:** This theme focuses on the move from discreet diagnosis to a more trait-based approach, or in the case of some experts a completely different diagnostical approach. Given this transition to what is and what isn't NPD, this theme also focuses on how prevalent we can expect to see NPD be in the populace given the moving of the markers.

**EX1:** I don't really think of it as a line, I think of it as a continuum.

**RM:** *So there is no point, or there is no straw you consider to be the one that breaks the back. A point that we say, no no this is too much.*

**EX1:** Ahhh I don't really think that we can. I don't really think we can ethically perspective. I mean it's almost based upon different ethically judgements. I mean what you are really asking is how much selfishness is too much selfishness.

**EX1:** As much. I mean everyone needs narcissistic gratification, everyone needs mirroring, validating, applause appreciation. But some people are desperate for it. So as a relatively more mature person would be sad, and he comes home and he wants narcissistic gratification from his partner and he tells her about his bad day, and basically he wants soothing and bucking up. But after 15 minutes of this attention he realises she is a human too and gets up. He will ask 'oh how was your day'.

**RM:** *Yeah.*

**EX1:** Now some people never get up, they spend their whole lives as using other people as mirrors.

**EX1:** Okay well my answer has to be that I do not consider narcissistic personality disorder to be a mental illness because I do not consider hysteria or grandiosity or any of these things to be a mental illness, because mental illness doesn't exist.

**EX1:** Well certainly NPD is not a physical illness, I mean to do that you would have to prove with microscopic data that empirically prove that there is a biological malfunction, defect or disease. You can't do that for these behaviours that are called mental illness. I mean what am I doing then when I'm so called treating these traits. I'll tell you what it is, narcissism is not sick its bad, the whole of psychology has devoted



itself to avoiding the law and that's its fundamental error. These forms of behaviours that we consider to be mental illness, if we were to be honest we would call them wrong and bad, we don't like these behaviours. Even down to weird behaviours like someone standing too close to you when they talk, so we think there is something mental wrong with them.

**EX2:** I mean using the DSM cut off point, the data would suggest extraordinarily rare, the Stinson paper you put forth is really an outlier but most epidemiological studies the modal percent is zero to 0.1 % but I think that's there an artificial cut off, so if you made the cut off instead of four symptoms, three or two them absolutely the rate would be higher. You know when you have a dimensional construct that you pretend is categorical, resulting a yes/ no I don't even know how useful knowing prevalence rates are as it's an arbitrary cut-off,

**EX2:** I don't have a terrible problem with the five of nine seems pretty relevant to narcissism as term of construction validity if you meet this criterion you are narcissistic. But I quibble over that if you have five of nine you have it and four of nine you don't. We have argued that the DSM should not favour vulnerable. I mean either though it only focuses on the grandiose and not the vulnerable I think that okay because NPD should be considered to be an impairment in society and the listed traits should reflect that as opposed to a weaker, vulnerable condition which impairs society. If we can capture both that would be a benefit, but that would broader the symptoms of NPD but the things is if you include the traits to say include shyness, sensitive to criticism and other vulnerable qualities that you are just going to increase the likelihood of co-occurrence, with borderline dependence and so. This is why we see so must cooccurrence due to the general overlap of traits within disorders.

**EX2:** I consider a personality disorder to be a mental illness in the same way anxiety and depression is. I suppose you would consider them as mental illness if you want a precise answer, but I would rather not look at personality disorders in such a way. They tend to be hard to treat given the genetic underpinning. Also, It's hard because the lines are arbitrary on whether or not you have the condition, the cut offs could really be changed at any time, altering the meaning. Like are you really talk or not, yes no, like who knows. So, you can make cut-offs but it's worth bearing this in mind. So, with disorders we should be really consolidating a model which address trait theory in the best possible way. It would help remove some of these tough issues.

**EX3:** I'm not sure but on a truly clinical diagnosed level (of NPD), extremely small like less than one percent, perhaps higher.

**EX3:** Moving away from strict, yes or no categorisation of conditions and onto a more trait and percentage-based model, has really improved understanding of disorders.

**EX3:** I think it's important that we distinguish once again though between NPD and narcissism, everyone of course has some narcissistic tendencies and they range in severity, and for the severity required to be classified as NPD

**EX4:** I actually don't know that, but I would say that research demonstrates a continual narcissism is present in everyone to some degree.

**EX5:** The key difference is probably one of trait extremity NPD should be more associated with impairments. So, for me it's mostly a matter of degree/intensity compared to tendencies.

**RM:** *And this impairment might be something like not functioning normally in society.*

**EX5:** Right so like Impairments within relationships work, school and such. I think it's just a result of these extreme traits.

So that would be more of the kind of sliding scale type thing rather than the definitive line.

**EX5:** I'm going to go with the DSM estimates to me somewhere between 3 to 5% we're like we're talking about the full-blown disorder.

**EX5:** It implies a sharp demarcation. At a high end that's pretty bad and that's a low and that's probably OK. You have to draw a line of demarcation? somewhere and when it gets to figuring out if it seems to be lack of control impairment distress and harm to others. I think it's fair to call it something and mental illness is ok with me.

**EX6:** It's hard to know, the hit rates look very low because the government went for treatments but I'm guessing. I don't know it's a good question I'm guessing maybe like 5%. I reckon it's higher though than some institutions say like 1% I think the diagnostic criteria is a little weak for NPD so I'm going to say 3 to 5%.

**EX6:** Also, I recognise that clinicians have to have something that is tangible and that they can use like cut off scores I don't think we're in a position yet to give that to them and so I can understand why have there been reluctant to shift over

**RM:** *If not cut off points, at least sectorised areas that could give them more precise interpretation, so everyone isn't treated exactly the same.*

**EX6:** What I imagine would happen very quickly there is we would start having Arguments about where these sectors are, and it will probably be just as divisive as it is now. So I'm sure that will be the next point of contention so where are these cut off points going to be.

I think there is a point where it can become pathological exactly where that point is like is there a qualitative shift? It makes it hard to find out where the dividing line is if there is one.

**RM:** So, you mean with the literature changing all the time, the markers by which we identify a personality disorder?

**EX6:** Yes, the research is constantly evolving and seeing as the DSM looks to be up to date with diagnostics, it has to change frequently. That effects the validity somewhat, but at least it is moving forward in the right direction.

**EX7:** I think narcissism is whatever the person who is studying it, says what it is. Meaning that a lot of different people have found different definitions and created measurement tools to study. so nobody seems to really agree what we're talking about. You could call me a sceptic. I think the DSM has it wrong, personality technology has

it wrong. I don't think there such thing as NPD. it doesn't take long to take a bunch of traits, put them together and say “so now that's what narcissism is”.

**EX7:** narcissism might be a way to describe the reason for those problems, but the fact that they have problems is already determined by the fact that they came into your office so you don't need to go above and beyond to determine whether or not they have problems. I don't think that's a scientific way to draw a line.

**EX7:** It's not uncommon I think a lot of people in general are very immature.

**EX8:** I would say that the prevalence is very low of NPD that is. Although that's of course subjective. Estimates I've seen of range like anywhere from 1 to 5 percent I mean based on qualitative experience of what I've read

**EX9:** For diagnosing this difference, we recently we have seen a move to trait theory. It's the more accurate method and has been peer reviewed so much at this point it should be implemented.

**EX9:** Very rare, very rare, hmmm maybe around say one in 200 maybe 300.

**EX10:** It's my understanding that it ranges between 1 – 6% of the population,

**EX10:** Oh gosh that line in the sand thing falls into the categorical narcissistic personality disorders and I've never been a real fan. I think that line is different for everyone. There is some range where the line actually is. And so it's a particular confluence of the experiences and disorders, thinking, and emotional responses, and maladapted egos. That particular confluence can rise to a high enough level where it becomes a full-blown personality disorder.

**EX10:** Basically, you said around the world, because personality disorders can only be diagnosed in their cultural context

**Brief analysis of theme:** This is one of the more controversial themes with some experts supporting the implementation of trait theory, whilst others suggesting discreet diagnosis is still the correct method. In general, there is a majority calling for having some aspects of the diagnostic process measured with trait theory. The argument against the implementation of traits is made by EX1 who suggests this is diverting time away from the diagnostic process. However, given the large amount of support for the inclusion of trait-based instruments, it would seem to make sense to implement at least one trait-based instrument when calculating the severity of a person's narcissistic tendencies.

When asked about the prevalence rates, many of the experts guessed between 1 and 5 percent. According to EX2 who conducted research in the past, placed prevalence rates somewhat lowers, from as 0 to 1 percent. Review of the surrounding literature has suggested around 0.01 percent. Given that most of the experts seemed to overestimate

prevalence rates or judge them by completely different standards, shows that there is some stigma and confusion about the PD.

**NPD measuring instruments:** This theme refers to the current instruments used to measure narcissism and narcissistic attributes. It looks to examine which methodologies the experts deem to be valid, and which they do not consider to be valid.

**EX1:** You know I generally avoid reading the DSM, I don't find that pigeon hole kind of thinking to be helpful

**EX1:** (relation to NPI other metrics) I'm sorry I can't comment I haven't used any of these inventories

**EX1:** Honestly, I do not use the ICD-10, I'm only vaguely familiar with it.

**EX2:** Well the previous data shows it to be zero to one percent given on the paper, this Stinson once you showed me seems to be an outlier in that regard. It depends how you access it. If you use semi-structured or fully structured interviews like the paper they are not going to necessarily be that accurate as people tend to over think the scale and magnitude of these disorders. You are going to find high rates when you ask people but then speaking with clinicians it's a lot rarer because of the severity of the symptoms required to meet these criteria. There are plenty of very narcissistic people, that its rather rare for people to meet that five of nine criteria

**EX2:** I would go on a self-report basis, I mean narcissistic people are pretty willing to discuss themselves and their views, you could even ask 'are you a narcissist' but things like 'would the world be a better place if I ran it'. I trust self-report more than I think most people do, I mean more than normal people. Also you could ask family member, partners and friends and see what they agree on trait wise and where they differ. Most provide relatively valid information especially if you collect the data from enough sources.

**EX2:** I think the NPD is heavily criticised, but very commonly used though and the data suggest it works just fine. I'm a co-author on a FFM relationship to NPI, so it relates to something that resonates with all people, FFM works for all.

**EX2:** It's more around the world, the DSM follows the ICD codes, but the DSM is more developed in terms of mental health. The ICD is all about health problems for all parts of the anatomy. The DSM is more mental illness. If narcissism was taken out of the DSM it would not stop research from occurring, they actually tried to take it out and I wrote a paper concerning this, but yeah people still would study narcissism even if it was no longer listed. Just because its so fascinating and relevant and complex in nature. The ICD-11 is going to get rid of all personality disorders and just describe personality disorders based on traits, so narcissism will still be there maybe not by title but will still be possible to determine based on trait allocation.

**EX3:** I haven't spent much time on the DSM-5, it seems a little vague and only covers grandiose narcissism, or perhaps no other types. But honestly, I am not that familiar.

**EX3:** It's not a great measure, Josh Miller's introduction of the FFM has improved its logic and direction as assimilation of character. The NPI itself doesn't take into consideration different types of narcissism so well, or rather as well as it could, so there is room there for improvement. Perhaps the introduction of subcategorizations looking at entitlement and exploitive-ness as traits, it how does this map on to psychopathy.

**EX3:** So, when you are doing a clinical diagnosis you are looking for the symptoms, so and so displays these symptoms, that display with narcissistic tendencies, so we would treat that, rather than give the diagnosis of narcissism. Then for insurance purposes we would match them up with the DSM when needed, but I didn't have too much to do with that.

**EX3:** Err hmm, not too much to say on that, I mean the ICD looks at all types of medical conditions right, so it theoretically shouldn't go into as much detail as the DSM.

**EX5:** I'm a fan of self-reports I think they work pretty well as long as you're not asking about motivations for behaviour then self-reports work great. You're asking people to describe characteristic ways of thinking and feeling and acting. I think they're very good at doing that. If you believe that narcissism is some sort of dynamic process as the result of vulnerability rising and grandiosity.

**EX5:** We've used the NPI and bunch of others, but I prefer the FFM model. It gives you grandiose and vulnerable score based out of three factors neuroticism interpersonal antagonism, Extraversion.

**EX5:** I actually don't know. I haven't read enough to see what the ICD-10 was thinking. You seem to have everything in there, all the more severe /dangerous disorders except, narcissism and I don't understand that at all.

**EX6:** I think in terms of the differences I think one of the issues is going to be what kind of model are we talking about in terms of narcissistic tendencies. I think for example if we're talking about narcissistic tendencies coming from an NPI perspective I think it's a relatively healthy view of narcissism.

**EX6:** I like the fact that you mentioned Josh Miller and I like the work that he's been doing kind of stripping these personalities down to the basic underlying principles of the brains. And I really like his DSM 5 trait model.

**EX6:** You look at some of the other measures and ways of thinking about it like the NPI, I think the exploitation and entitlement don't mention it's already the most interested to me. But then the psychometric qualities are also just ridiculously weak like I was reviewing a paper yesterday. One of the alpha or the E dimension was like a, 0.27. We can't have a measurement where there are only 3 or 4 items and it hangs together so poorly. But I think it's really interesting because it taps into the more toxic elements of narcissism. I think this in particular has a lot of potential, but it only came out in 2013. 10 years down the road I think it has the potential to be a real contender

**EX6:** You can get such a diversity of symptoms with a simple checklist in the DSM where you have people who have the same diagnosis but have really different symptom

profiles... I'm guessing that we probably do need some multidimensional approach to really understand it well.

**EX6:** I know with the DSM-5 being developed there was a lot of conversation about whether it was going to show up in it or not. Whether NPD will feature in the next version I don't know but I do hope so because I think something is there. I think people are concerned because there are so many deep questions and I don't think we've been making this much progress as at least I think we should.

**EX7:** (on DSM-5) I find it pretty invalid. I can give you an extended answer about the origins of that construct. In the middle of the twentieth century, there were two dominant paradigms in psychiatry. There was the psychoanalytic Paradigm And the descriptive Reductionist paradigm. The latter, the ones that were in control of writing the DSM 3. The reason for that was because psychiatry overall was embarrassed about how inconsistent the diagnoses were. By turning the diagnostic criteria of a fundamentally Influential and complex dynamic construct into something that can be reliably rated, they fundamentally change the definition of the term.

**EX7:** I think the NPI is a huge distraction. I think it has \*back necking? \* Because it the perverted the meaning of the construct and because it has some psychometric limitations that I don't want to bore you with. I think the precautionary response scale is kind of dumb. I think it's got structure that hasn't been well characterized, those three factors have completely different correlation, but people put it down to 1 construct. I think it's been a huge mistake relying so much on the NPI.

**EX7:** But then you have to consider that it may not be measuring narcissism in the first place. In general, I would say the favourite of my cross-sectional questionnaires is the PNI Or the FFM\_that Josh and Don and those guys have made. But I think the more important answer is you can't get away with measuring such a complicated construct using a simple questionnaire no matter what the questions are. Even if you want to get beyond questionnaires in general all the questionnaires in the world together still not going to capture this construct.

**EX8:** So, I would say, overall, it's a good representation. I think some of the criteria are probably just different ways of asking the same thing. But I think overall, it is a good reflection of some of the core traits that at least that I think of as defining narcissism. I think it reflects here against entitlement those kind of things. I think having a bit of a fuller and cleverer dimensional model will be preferable to the criteria. Also, some of criteria themselves seem a bit redundant so I prefer a complex model with the trait dimensions rather than categoric criteria.

**EX8:** I would say as much as possible getting multiple measures and sources of information from the person themselves, also from informant, so perhaps, people who've known that person for a while, because they can bring different perspective. A person that you meet for one hour in a clinic might not get an accurate picture. Also a really narcissistic and self-centred might be worried that you are going to try and change and influence them so they might try and hind their condition from you, especially if they know the reason for their clinical visit. One really important future direction for

narcissism is really get out this question of vulnerability assessed, by using broad longitude studies, that use large sample sizes. Also using ecological momentary assessment designs that we can actually test to the extent that narcissist is moving throughout their daily lives if they do show these fluctuations of grandiosity to vulnerability. I think that the research that is focused on vulnerable is really just speculative.

**EX8:** I think you could do couple different ways. I think you could do it when you're just using EMA of what happened to person, by filling out a diary. In that case of EMA approach you just track them of complete assessment, you know, several random assessments a day for so many days, track whether or not they were in a social situation and how they've responded. That would be one way to get at it. But then you can see if there is anything that is unusual. Do you see fluctuations or narcissistic outbursts or is this person pretty much always says that they feel good about themselves and that would be interesting. Another way to get at it would be to use more of an experimental design where, for example, you actually bring narcissist to a lab studying, have them do some sort of task to see if they show more reactivity to criticism from others or to negative abuse from others. I think that there are couple of different ways you can go about it. I think that would be interesting approaches that would really take these researches a step forward.

**EX9:** Yes, but really people aren't sure enough about the split to be implanting it into the DSM yet. Millers FFM model seems like a smarter approach. To be honest moving to a more trait-based approach certainly seems the more sensible way to approach the subject. The DSM has its uses for sure, but really clinicians should not be banking on it to hard when it comes to therapy, it's a diversion from the core issue.

**EX10:** That's one of the problems with NPD is that it measures adaptive and maladaptive components of narcissism, and scores these components, and masks the individual differences. Someone could have a high level of these adaptive components, and have a high narcissism score another person has high levels of maladaptive components, and also has a high score.

**EX10:** I think it's highly accurate, I like it. I like that they got rid of the whole "access to" thing, and now it's included in the general taxonomy of mental disorders. Access to group B is now group B. I think that these diagnostic criteria are really helpful, I'm a fan. I'm a fan of any rigid taxonomy.

**EX10:** One of the things about things being clear is that there is OCD and then there is OCPD and then Schizoid personality type which can be confused with Schizophrenia. There is no real clear-cut category for these, which is why I'm a fan of a rigid taxonomy. It gives us a frame of understanding the various components of these disorders which may or may not overlap.

**EX10:** Sure, well I used the NPI on a couple of my studies and I found it to be relevant and effective, also its been rather widely peer reviewed so I was happy with the outcome, even though I tried to critique it a little. Apart that the NPI I haven't used too many other psychometric models with relation to narcissism, it's not exactly my field.

**Brief analysis of theme:** This theme provided a variety of responses. Some of the experts had not used any previous narcissists attribute measuring models. Experts who had tested models tended to report success with both the NPI and Miller's FFM model. EX7 argues against the NPI however describing it as perverting the meaning of the construct and because of having validity issues with the precautionary response scale. broad longitude studies

Most people were against the Stinson papers claim of NPD being the least researched disorders. EX2 calls it an outlier in this regard.

**Future direction of NPD research:** This theme is with reference to the experts predicted future for the direction of narcissism related research. This theme looks at both what the expert would like to see happen in the field in the future, and what actually will happen in the future.

**EX1:** I think the understanding of narcissism is there, it's just scattered and needs to be brought together even in psychoanalyse let alone other areas of psychology. There have been a variety of different contributions from all fields and different perspectives. What we need is an integration of these put together what is true in Kernburg and what is true in Kohut and so one. I think we have all the pieces, we just need to put them together.

**RM:** *How could you go about doing that?*

**EX1:** I think a classically composed peer reviewed full comprehensive study is a good start, I would review Kernburg in one chapter, and each contributor a chapter.

**EX2:** I think from a behavioural genetic perspective there can be further research done but the papers so far keep it within roughly the 50% bracket, and with inheritability they have correlation of 0.5 so certainly more conclusive results are needed. You need twin adoption approaches, they aren't easy to do and I don't know if we have any understanding of molecular cause, and especially for NPD that's going to be low on the list for conditions that receive the necessary attention to understand the condition, on a molecular level.

**EX2:** I would like to see the DSM incorporate something that is going to be basic trait model like ICD-11 and have a section like antagonism or anti-social dissocial that will capture a lot of the traits of narcissism grandiosity untrustworthy malevolence. So people will be interested in in traits and narcissism with very little knowledge of the DSM captures it and we know people who are narcissists in our lives and we would like have knowledge on why these people are as they are on a basic level.



**EX2:** Is pathological narcissism the same as narcissism, is it a continuous stream like I believe or is there a distinctive difference between the two, like something like should be consider a separate entity. How would you help someone with NPD, If someone wants to get better how do you help them get better? The answers to these questions are still pretty simplistic compared to what a full review could show with some time and planning.

**EX2:** I would like to see more large scale research undertaken in societies, especially in corporate and prison environments, where narcissistic people can be found. Clinical studies are just one person and you are capturing them in one instances and may not be accurately reflective of general populace

**EX2:** I think we just need to know what kind of narcissism we are measuring and making sure the data makes sense together and is valid, so multiple inventories and multiple testing with the same experiment design help with this. We have a paper showing though that some scales are more than relevant and can skew the results, so it's worth bearing in mind when selecting from the available instruments.

**EX3:** I mean since we have no idea of what maximum understanding of NPD and psychology would look like or be reasoned it's impossible to say how far we are along to truly understanding any mental disorders. We just have the metrics, but we are making progress especially within the last 20 years or so.

**EX3:** I would say consolidate a lot of this research and put some practical measures in place. Hmmm key issues. Large scale testing for sure, as much as possible, you can never really do enough, so more money for research in that regard. I mean when you really think about it, money in the major majority of research areas in narcissism. I would say we are very much in the middle, in terms of where

**EX5:** Haha that's why my hair is white. But to tell you the truth I would say, not very and I could still see us making huge headway with mental health, especially with the influence of machines and the internet. Advances in technology we can't even imagine.

**EX5:** One of my problem is reducing issues to the individual, so I think that narcissism needs to be understood in terms of aggregate cultural dynamic, I think that is an important idea. I think cultural environment that doesn't look to be individualistic, doesn't have submission, maybe not Muslim submission, a kind of submission to ideals that control ambition, and the family dynamic and the cultural dynamic, I don't know if that answers what you looking for?

**EX5:** Hmm (pause) well honestly, I'm not sure, perhaps a wider issue of larger aggregation of views on narcissism, it is important to use as many different methodologies as possible.

**EX5:** (On Improving NPD validity) Defining it. You can go back to the subtypes we sort of believe that vulnerability is an area of narcissism. I think redefining narcissism might be a good idea.

**EX5:** I think we need perspective research to do that and most of what we've done so far is just retrospect after the fact that it's happened rather than figuring it out while they're a kid, asking about family life, parents.

**EX6:** Not terribly accurately at the moment I think some of the things we talked about earlier like distinctions between the different forms of narcissism are not very well understood yet

**EX6:** Moving away from this categorical understanding of NPD in that's you either have it or you don't.

**RM:** *What about sample size, would you say there's been enough people to tell?*

**EX6:** The vast majority of what is from non-clinical samples. I think that would certainly help if they were clinical.

**EX7:** Measurement is the key issue. We don't have the tools to measure the construct and all of its theoretical complexity. It's like trying to argue about the nature of water without understanding the periodic table.

**RM:** *If you had a load of money how would you go about researching that?*

**EX7:** I think you have to figure out time and multiple methods and there's a both tremendously challenging

**RM:** *Do you mean more pioneering work in that respect?*

**EX:** Yes, in a way, I would honestly need to really think about it, in fact I really will.

**EX7:** Further research into the theoretical complexity of the narcissistic condition, how it interacts with other moods, other emotions. I think when you look at these kinds of ideas from such a clinical perspective you are failing to take into consideration just life in general. Trying to categorise what, it doesn't even make sense to think of people as a series of traits. People aren't two-dimensional movie characters, they all have the same stuff inside of them creating complex emotions. Intelligence doesn't even factor into this.

**EX9:** I think it's kind of relative, in comparison to what we are going to know in fifty years, I think we will look back and say we knew very little. In terms of being to treat it currently, I think we do okay, just okay but okay, especially if you compare to just a hundred years ago, there was basically no structured mental health system anywhere.

**EX9:** We need to do larger scale testing, using a whole lot of different methods to support, just trying a whole bunch of different ideas and items.

**EX10:** Hmm, well I'm a fan of section 3 of the DSM 5, the whole trait taxonomy, measurement of particular disorders, I expect in future generations, there will be even more of that. Have it expanded upon, perhaps with a little more complexity? After models of personality have been able to be used to measure personalities of all types, we need more work that delves further into classification too.

**EX10:** I would like to see more research on the overlap between antisocial personality disorder and NPD, there's been some critical work on this.

**Brief analysis of theme:** Most experts agreed that more studies, based in multiple backgrounds would be useful in calculating NPD. Many experts argue that we are still in a discover phase for mental disorders and a great deal of further pioneering work is needed. EX7 for example argues that a definitive definition of narcissism is required to make further progress.

All experts argue for increase in sample sizes. In addition, developing research that focuses on more cross-cultural studies and looks to analyse people from all backgrounds in comparison. EX2 suggests more studies that focus on prison environments and in corporate environments. This would be a meta-analysis of traits within a tribal context. EX2 argues for the DSM incorporate to a section like antagonism or anti-social dissocial which will capture a lot of the traits of narcissism grandiosity untrustworthy malevolence

# Appendix D: IOREC Application for Approval

**Declaration of the:**

**Principal Investigator**                      **OR**    **Supervisor and Student Investigator**   
(please enter an X as appropriate)

- The information in this form is accurate to the best of my knowledge and belief, and I take full responsibility for it.
- I have read and understand the University's Policy on Research Ethics.
- I undertake to abide by the ethical principles underlying the Declaration of Helsinki and the University's good practice guidelines on the proper conduct of research, together with the codes of practice laid down by any relevant professional or learned society.
- If the research is approved, I undertake to adhere to the study plan, the terms of the full application of which the REC has given a favourable opinion, and any conditions set out by the REC in giving its favourable opinion.
- I undertake to seek an ethical opinion from the REC before implementing substantial amendments to the study plan or to the terms of the full application of which the REC has given a favourable opinion.
- I understand that I am responsible for monitoring the research at all times.
- If there are any serious adverse events, I understand that I am responsible for immediately stopping the research and alerting the Research Ethics Committee within 24 hours of the occurrence, via [ethics@liv.ac.uk](mailto:ethics@liv.ac.uk).
- I am aware of my responsibility to be up to date and comply with the requirements of the law and relevant guidelines relating to security and confidentiality of personal data.
- I understand that research records/data may be subject to inspection for audit purposes if required in future.
- I understand that personal data about me as a researcher in this application will be held by the University and that this will be managed according to the principles established in the Data Protection Act.
- I understand that the information contained in this application, any supporting documentation and all correspondence with the Research Ethics Committee relating to the application, will be subject to the provisions of the Freedom of Information Acts. The information may be disclosed in response to requests made under the Acts except where statutory exemptions apply.
- I understand that all conditions apply to any co-applicants and researchers involved in the study, and that it is my responsibility to ensure that they abide by them.
- **For Supervisors:** I understand my responsibilities as supervisor, and will ensure, to the best of my abilities, that the student investigator abides by the University's Policy on Research Ethics at all times.

- **For the Student Investigator:** I understand my responsibilities to work within a set of safety, ethical and other guidelines as agreed in advance with my supervisor and understand that I must comply with the University's regulations and any other applicable code of ethics at all times.

**Signature of Principal Investigator or Supervisor** : Penny Cortvriend.....

**Date:** (14/08/2017)

**Print Name:** DR. PENNY CORTVRIEND

**Signature of Student Investigator:** Ryan McConnell

**Date:** (07.09.2017)

**Print Name:** RYAN PAUL MCCONNELL

**SECTION A - IDENTIFYING INFORMATION**

**A1) Title of the research (PLEASE INCLUDE A SHORT LAY TITLE IN BRACKETS).**

A review of the opinions of experts regarding Narcissistic Personality Disorder and it's connection to mental illness.

**A2) Principal Investigator OR Supervisor x (please check as appropriate)**

<b>Title:</b>	Dr	<b>Staff number:</b>	
<b>Forename/Initials:</b>	Penny	<b>Surname:</b>	Cortvriend
<b>Post:</b>	Dissertation Advisor	<b>Department:</b>	School of Psychology
<b>Telephone:</b>		<b>E-mail:</b>	Penny.cortvriend@online.liverpool.ac.uk

**A3) Co-applicants (including student investigators)**

Title and Name	Post / Current programme (if student investigator)	Department/ School/Institution if not UoL	Phone	Email
Mr. Ryan McConnell	Current	Psychology		ryan.mcconnell@online.liverpool.ac.uk

**SECTION B - PROJECT DETAILS**

**B1) Proposed study dates and duration (RESEARCH MUST NOT BEGIN UNTIL ETHICAL APPROVAL HAS BEEN OBTAINED)**

*Please complete as appropriate:*

EITHER

- a) Starting as soon as ethical approval has been obtained  (please check if applicable)

Approximate end date:	07.03.2018
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OR

- b) Approximate dates:

Start date:	01.09.2017	End date:	07.03.2018
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B2) Give a full lay summary of the purpose, design and methodology of the planned research.

**UOL ONLINE MSc PSYCHOLOGY PROGRAMMES**  
**DISSERTATION PROPOSAL PRO FORMA**

**STUDENT:** RYAN MCCONNELL

**DISSERTATION ADVISER:** PENNY CORTVRIEND

1. Title	
The expert opinions on the relationship between Narcissistic Personality Disorder (NPD) and mental illness classification.	
1.1. Version	Final.
1.2. Date of submission	7th March 2018.

2. Background	
2.1. What is the general topic of the study?	The main topic of study is Narcissistic Personality Disorder (NPD) and an analysis of its classification within the medical and psychological field. NPD according to the DSM-5 is characterised by a long-term display of abnormal behaviour. This manifests as: a pervasive pattern of grandiosity (in fantasy or behavior); need for admiration; and lack of empathy, beginning by early adulthood and present in a variety of contexts (American Psychiatric Association, 2013).

<p>2.2. Summarise in no more than two paragraphs the state-of-the-art of research on this topic</p>	<p>There is some controversy with regards the recognition of NPD and it's symptoms. It can be argued that it shares many overlapping traits with other disorders, such as histrionic personality disorder (see Pfohl, 1995). An example of this is within the DSM-5 as NPD is classified as a cluster 2 personality disorder alongside borderline, antisocial and histrionic personality disorder (American Psychiatric Association, 2013). The ICD-10 however does not include NPD as a separate category, instead grouping it within the 'Diagnostic Related Group' (Ottosson et al., 1995). Additionally, one can argue that narcissism is not necessarily a poor personality attribute, since it can be classified as either healthy or pathological, with healthy being considered just a personality quirk (see Watson &amp; Bagby, 2011; Miller, Widiger &amp; Campbell, 2010). Indeed in some instances researchers argue that narcissism is seen by others as a strong dominate trait that often garners the respect of others and therefore does not require treatment (Russ et al., 2008).</p> <p>With regards the classifying NPD as a mental illness there is again some debate. The ICD-10 suggests that personality disorders are deeply ingrained within a person's psyche and are essentially part of the person's character. Mental illness on the other hand is considered to be a more fleeting phenomenon (Kendell, 2002). It can also be argued that NPD is learned through social experience and thus can be corrected, making it an outlier in comparison to other personality disorders (see Cooper, Balsis &amp; Oltmanns, 2012). Finally NPD has a high rate of co-morbidity with other personality disorders, depression and bi-polar disorder occurring frequently (Paris, 2014). All these factors combined mean that NPD is very interpretable in terms of both nature and severity.</p> <p>One aspect of this research will describe and briefly analyse each expert's contribution to the field of NPD and how it is relevant to this research.</p>
<p>2.3. Summarise in one paragraph what are the main limitations of the research above?</p>	<p>There are multiple theories regarding NPD, its traits and its severity, with significant future research being required to fully understand the condition (Wright et al., 2013). In addition, there is limited research undertaken on the aggregation of knowledge regarding NPD. With regards research that involves the amalgamation of expert opinions there appears to be no other literature on the subject that was easily available. Instead the clear majority of the conducted research on NPD is focused on determining traits, measuring them and combating difficulty in treating patients with NPD (see Cain, Pincus &amp; Ansell, 2008). Perhaps the most conflicting issue within NPD research is with regards its underlying conception. One argument suggests that NPD is a defensive response to being abandoned, shamed or deeply injured (Salvatore, Carcione &amp; Dimaggio, 2011). Others argue the opposite, that it is an aggressive trait with no inner self-loathing (see Vazire &amp; Funder, 2006; Tracy, et al., 2009). All this would suggest that NPD remains still somewhat undefined.</p>

<p>2.4. What is the gap in current knowledge that you intend to investigate? What is the original contribution of your work?</p>	<p>Upon review, there seems to be little literature regarding the classification of NPD mental illness. Therefore one reason for conducting this research is to establish more understanding of NPD and how the scientific community perceives it.</p> <p>Additionally, we can identify NPD is various figures in politics (see Post, 1993), as well as in many current social situations, that are very relevant to modern-day social behavioural dynamics (Millon, et al., 2012). Indeed, further understanding of NPD could be extremely beneficial to modern psychology and sociology. It is therefore within the interest of the scientific community to improve our understanding of NPD.</p> <p>By conducting interviews with multiple field experts we can look to contest some of the inconsistencies present, thus the work will act as something of a topical review. In addition, some of the research questions will focus on the inconsistencies present in current NPD research. These questions posed to the experts should produce data that helps rationalise and weight each idea presented with the current NPD understanding. From this data, an evaluation can occur on the relevance and validity of each theory proposed regarding NPD and its link to mental illness. However, this research will not look to solve the said inconsistencies, but rather rationalise them and weight them within a single document.</p>
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3. Research question, aims and objectives	
3.1. What is your research question?	What are the expert opinions on the relationship between Narcissistic Personality Disorder (NPD) and mental illness classification.
3.2. What are the aims of the study?	To explore the expert opinions of established NPD related experts with regard NPD and it's understanding and classification.
3.3 What are the objectives of the study?	<p>1) To explore experts' perceptions of what constitutes NPD, using a qualitative approach.</p> <p>2) To explore the expert opinions regarding the classification and identification of NPD as a form of mental illness.</p>
3.4. What are the hypotheses? (if quantitative design)	N/A



4. Method		
4.1 Select which design you plan to use	Quantitative	
	Qualitative	X
4.2. Summarily justify your decision above	In order to explore the expert views of NPD detailed explanations on the subject of NPD will be required. Such detailed explanations require an in-depth verbal response and probing , therefore making the qualitative method more appropriate.	
4.3. Select which of the following methods/procedures will be used in the study	Archival research or secondary analysis of data	
	Interviews (including focus groups)	X
	Observations	
	Experiments on human participants	
	Questionnaires (including surveys)	
	Other(s) – Please specify	
4.4. If you are using questionnaires, indicate which one(s), briefly describe them (including main psychometric properties) and justify your decision	N/A	
4.5. If you are using other materials (e.g., photos, drawings, measurements equipment, etc.), describe them and justify your decision	No other materials are required.	
4.6. Describe the participants in your study (what are the inclusion criteria?)	It is of critical importance that all interviewees are respected experts in the field of NPD. In order to fulfil this criteria, they need to have published at least one piece of peer reviewed literature on NPD. This is just a minimum requirement however and experts who have years of experience in the field and those who have published multiple papers will be sort after first.	

	Additional experts with research that is more recent and therefore more topically will be sort after more highly.
4.7. What are the exclusion criteria?	All other people who do not meet the requirement of having published literature on NPD.
4.8. Justify your exclusion criteria	Those who have not worked in the area of NPD may not be able to provide the relevant information to accurately achieve the aims of the study. In order to produce accurate results, it is of course vital that all participants are indeed 'experts' in the field of NPD. It is expected that these experts will hold various positions in the scientific community. Some will be psychologists or psychiatrists; whilst others may be practicing doctors or neurologists. This should present result in producing a range of useful data that is extremely relevant to the research question.
4.9. State the total number of research participants to be recruited (sample size)	Ten participants.
4.10. Describe how the sample size was calculated	Similar studies which look to conduct a detailed interview with experts tend to have approximately ten experts as an average (see Baker, Edwards & Doidge, 2012 for details). In addition, having ten participating experts each conducting a thirty to forty-five minute interview should present enough data to be accurately interpreted (approximately 8 hours), thus fulfilling to the needs of the research question whilst keeping the interview process both conservative and focused (as Marshall et al., 2013 suggests).
4.11. Please describe the procedure	<p>Experts will be identified through the study NPD literature via a variety of internet journal search engines included Discover and Google Scholar. The email addresses and contact details of experts who meet the criteria will be recorded. A Participant Information Sheet (PIS) will be attached to each email sent. In addition, before proceeding with the interviews all participants will be presented the option to ask any questions about the research. The details of approximately forty experts will be gathered and each messaged regarding the details of the research. As many of the them will most likely not respond or will decline the interview, one might expect the need to email more experts if the original forty does not yield enough confirmations.</p> <p>Initially the experts will receive a PIS describing the research question, aim and objectives. This will include the goals this research looks to achieve, why they are a suitable candidate and the average time the interview would last. The student researcher's contact details will also be included I the initial information package so that potential participants can contact the student researcher for more information if necessary. Once confirmed</p>

		<p>the experts will receive the letter of consent and an interview will be scheduled.</p> <p>The study will conclude when all ten selected experts have been interviewed.</p> <p>As these experts will most likely be located in different parts of the world and meeting with them all in person would be impractical, the interviews will instead be conducted via Skype or another online communication system. The interviews will be recorded with the permission of the expert, then transcribed and analysed. The interview will be voluntary and the experts will have the right to conclude the process and void their data at any time.</p> <p>The interview will be designed to include many open-ended questions so as to properly explore the expert's full understanding of the topic. The recordings and transcriptions of the interviews will be the only data analysed. These interview recordings will be kept only on a single personal laptop and backed up on a single external hard drive; all data will be password protected/encrypted.</p>	
4.12. Will the study involve the discussion of sensitive topics that may cause distress or embarrassment to the participant?		Yes	
		No	X
4.13. What are the arrangements for obtaining consent from participants (please tick)	Information sheet		X
	Consent form		X
	Other (explain)		
4.14. Will you require the ethical approval of bodies or institutions other than the University of Liverpool?		Yes	
		No	X
4.15. If the answer above was YES, please indicate which are the bodies or institutions	N/A		
4.16. Are there any additional ethical issues you would like to discuss that are not mentioned?	No		
4.17. What ethics approval process do you consider corresponds to your study?		Expedited	X
		Full committee review	

<p>4.18. Describe how you will you analyse your data, and justify your decision</p>	<p>Although a research question is present, there will most likely be several interpretations and views that contradict one another in some way. This would suggest that an interpretative phenomenological approach (IPA) should be undertaken. An IPA is often used to show how a phenomenon is understood given context, in this case NPD it's classification within the scientific community (Gill, 2014). In addition IPAs are predominately used in small interview process with just a few participants providing a highly detailed analysis on subject (Pringle, et al., 2011).</p> <p>An IPA does not require that the analyst give a hypothesis. Instead the analyst generates codes from the data (Brocki &amp; Wearden, 2006). After the data is collected several techniques will be used in order to properly analyse the data. This includes: coding; classifying and identifying themes; connecting and interrelating data; interpretation and development of the explanatory meaning (as suggested by Strauss &amp; Corbin, 1994).</p>
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**5. What are the expected outcomes of the research?**

This research looks to improve understanding on why the classification of NPD is so varied and controversial. In particular the research will focus on explicitly exploring the views of experts in the field and as such act as an aggregate of expert views and help explain the contemporary zeitgeist surrounding NPD. This research should firstly help consolidate existing ideas regarding NPD and severity. In addition review its connection to mental illness in expansive detail.

**6. Timetable**

June 2017 – Approval of proposal/ supervisor assigned.  
 July 2017 – Proforma works.  
 August 2017 – Completion of proposal/ ethical approval granted.  
 September 2017 – Data collection/ literature review.  
 October 2017 – Final data collection.  
 November 2017 – Finalized data analysis.  
 December 2017 – Completion of Key sections of dissertation.  
 January 2017 – Completion and hand in of first draft.  
 February 2017 – Revisions and amendments.  
 March 2017 – Completion of dissertation.

This timetable should be subject to change should any delays occur. In addition most sections of the dissertation will be worked on starting from July 2017, but will be completed as the timetable suggests.

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**B3) List any research assistants, sub-contractors or other staff not named above who will be involved in the research and detail their involvement.**

N/A

**B4) List below all research sites, and their Lead Investigators, to be included in this study.**

Research Site	Individual Responsible	Position and contact details
N/A		

B5) Are the results of the study to be disseminated in the public domain?

YES X NO

➤ If not, why not?

N/A

B6) Give details of the funding of the research, including funding organisation(s), amount applied for or secured, duration, and UoL reference

Funding Body	Amount	Duration	UoL Reference
N/A			

B7) Give details of any interests, commercial or otherwise, you or your co-applicants have in the funding body.

N/A

**SECTION C - EXPEDITED REVIEW**

C1)

	Yes or No?
a) Does the study involve participants who are particularly vulnerable or unable to give informed consent? (e.g. children, people with learning or communication disabilities, people in custody, people engaged in illegal activities such as drug-taking, your own students in an educational capacity) (Note: this does not include secondary data authorised for release by the data collector for research purposes.)	No
b) Will the study require obtaining consent from a "research participant advocate" (for definition see guidance notes) in lieu of participants who are unable to give informed consent? (e.g. for research involving children or, people with learning or communication disabilities)	No
c) Will it be necessary for participants, whose consent to participate in the study will be required, to take part without their knowledge at the time? (e.g. covert observation using photography or video recording)	No
d) Does the study involve deliberately misleading the participants?	No
e) Will the study require discussion of sensitive topics that may cause distress or embarrassment to the participant or potential risk of disclosure to the researcher of criminal activity or child protection issues? (e.g. sexual activity, criminal activity)	No

f) Are drugs, placebos or other substances (e.g. food substances, vitamins) to be administered to the study participants or will the study involve invasive, intrusive or potentially harmful procedures of any kind?	No
g) Will samples (e.g. blood, DNA, tissue) be obtained from participants?	No
h) Is pain or more than mild discomfort likely to result from the study?	No
i) Could the study induce psychological stress or anxiety or cause harm or negative consequences beyond the risks encountered in normal life?	No
j) Will the study involve prolonged or repetitive testing?	No
k) Will financial inducements (other than reasonable expenses and compensation for time) be offered to participants?	No

C2)

	Yes or No?
a) Will the study seek written, informed consent?	Yes
b) Will participants be informed that their participation is voluntary?	Yes
c) Will participants be informed that they are free to withdraw at any time?	Yes
d) Will participants be informed of aspects relevant to their continued participation in the study?	Yes
e) Will participants' data remain confidential?	Yes
f) Will participants be debriefed?	Yes

If you have answered 'no' to all items in SECTION C1 and 'yes' to all questions in SECTION C2 the application will be processed through expedited review.

If you have answered "Yes" to one or more questions in Section C1, or "No" to one or more questions in Section C2, but wish to apply for expedited review, please make the case below. See research ethics website for an example "case for expedited review".

**C3) Case for Expedited Review – To be used if asking for expedited review despite answering YES to questions in C1 or NO to answers in C2.**

N/A

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**SECTION D - PARTICIPANT DETAILS**

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**D1) How many participants will be recruited?**

10

**D2) How was the number of participants decided upon?**

Similar studies which look to conduct a detailed interview with experts tend to have approximately eight to twelve experts as an average (in reference to studies that required approximately 8 hours of interview data as Marshall et al., 2013 suggests). In addition, having ten participating experts each conducting a forty-five to sixty-minute interview should present enough data to be accurately interpreted (approximately 8 hours), thus fulfilling to the needs of the research question whilst keeping the interview process both conservative and focused

**D3)**

**a) Describe how potential participants in the study will be identified, approached and recruited.**

All participants (experts who have published a paper on NPD) will be identified through their works on a variety of search engines (Discover/ Google Scholar). The email addresses will be found on the authors publications or via their university website details (or other organizations). The email addresses used in the study will only be ones listed within the public domain.

Each expert will first be approached by email. If no response occurs within two weeks a single call will be made (the email will state that there will be a call made). If this is unanswered or the initial approach is rejected by the expert, no further attempt will be made to contact them. The email will include a cover letter and a PIS. In addition, before proceeding with the interviews all participants will be presented the option to ask any questions about the research. The details of approximately forty experts will be gathered and each messaged regarding the details of the research. As many of the them will most likely not respond or will decline the interview, one might expect the need to email more experts if the original forty does not yield enough confirmations.

Initially the experts will receive a PIS describing the research question, aim and objectives. This will include the goals this research looks to achieve, why they are a suitable candidate and the average time the interview would last. The student researcher's contact details will also be included in the initial information package so that potential participants can contact the student researcher for more information if necessary. Once confirmed the experts will receive the letter of consent and an interview will be scheduled.

The study will conclude when all ten selected experts have been interviewed.

**b) Inclusion criteria:**

It is of critical importance that all interviewees are respected experts in the field of NPD. In order to fulfil this criterion, they need to have published at least one piece of peer reviewed literature on NPD. This is just a minimum requirement however and experts who have years of experience in the field and those who have published multiple papers will be sought first. Additional experts with research that is more recent and therefore more topical will be sort after more highly.

**c) Exclusion criteria:**

All people who have not published any works relating to NPD.

- d) **Are any specific groups to be excluded from this study? If so please list them and explain why:**

Those who have not worked in the area of NPD may not be able to provide the relevant information to accurately achieve the aims of the study. In order to produce accurate results, it is of course vital that all participants are indeed 'experts' in the field of NPD. It is expected that these experts will hold various positions in the scientific community. Some will be psychologists or psychiatrists; whilst others may be practicing doctors or neurologists. This should present result in producing a range of useful data that is extremely relevant to the research question.

- e) **Give details for cases and controls separately if appropriate:**

N/A

- f) **Give details of any advertisements:**

N/A

**D4)**

- a) **State the numbers of participants from any of the following vulnerable groups and justify their inclusion**

<b>Children under 16 years of age:</b>	0
<b>Adults with learning disabilities:</b>	0
<b>Adults with dementia:</b>	0
<b>Prisoners:</b>	0
<b>Young Offenders:</b>	0
<b>Adults who are unable to consent for themselves:</b>	0
<b>Those who could be considered to have a particularly dependent relationship with the investigator, e.g. those in care homes, students of the PI or Co-applicants:</b>	0
<b>Other vulnerable groups (please list):</b>	N/A

- b) **State the numbers of healthy volunteer participants:**

<b>Healthy Volunteers</b>	10
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**D5)**

- a) **Describe the arrangements for gaining informed consent from the research participants.**

In the initial email sent to each participant the necessary paper work will be sent regarding informed consent. Once the necessary documentation has been completed, it will be stored with the other informed consent documents, in a secure location (a locked cabinet and password protected laptop).

- b) **If participants are to be recruited from any of the potentially vulnerable groups listed above, give details of extra steps taken to assure their protection, including arrangements to obtain consent from a legal, political or other appropriate representative in addition to the consent of the participant** (e.g. *HM Prison Service for research with young offenders, Head Teachers for research with children etc.*).

N/A

- c) **If participants might not adequately understand verbal explanations or written information given in English, describe the arrangements for those participants** (e.g. translation, use of interpreters etc.)

N/A

- d) **Where informed consent is not to be obtained (including the deception of participants) please explain why.**

N/A

- D6) **What is the potential for benefit to research participants, if any?**

Aside from the opportunity to explore and discuss their views and have them used in research there is no other benefit.

- D7) **State any fees, reimbursements for time and inconvenience, or other forms of compensation that individual research participants may receive. Include direct payments, reimbursement of expenses or any other benefits of taking part in the research?**

None

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#### **SECTION E - RISKS AND THEIR MANAGEMENT**

- E1) **Describe in detail the potential physical or psychological adverse effects, risks or hazards (minimal, moderate, high or severe) of involvement in the research for research participants.**

None

- E2) **Explain how the potential benefits of the research outweigh any risks to the participants.**

There are no risks and no benefits.

E3) Describe in detail the potential adverse effects, risks or hazards (minimal, moderate, high or severe) of involvement in the research for the researchers.

N/A

E4) Will individual or group interviews/questionnaires discuss any topics or issues that might be sensitive, embarrassing or upsetting, or is it possible that criminal or other disclosures requiring action could take place during the study (e.g. during interviews/group discussions, or use of screening tests for drugs)?

YES  NO

➤ If Yes, give details of procedures in place to deal with these issues.

N/A

E5) Describe the measures in place in the event of any unexpected outcomes or adverse events to participants arising from their involvement in the project

If any participant becomes upset or uncomfortable during the interview or any other part of the research process, the interview will be stopped and every effort made to assist the participant. Participants will also be reminded that they can end their involvement in the research at any time.

E6) Explain how the conduct of the project will be monitored to ensure that it conforms with the study plan and relevant University policies and guidance.

The student researcher will be supervised by a dissertation adviser from the University of Liverpool who will be informed of progress at regular points during the research process. All university policies and procedures will be adhered to.

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#### SECTION F - DATA ACCESS AND STORAGE

F1) Where the research involves any of the following activities at any stage (including identification of potential research participants), state what measures have been put in place to ensure confidentiality of personal data (e.g. encryption or other anonymisation procedures will be used)

Electronic transfer of data by magnetic or optical media, e-mail or computer networks	Standard email encryption
Sharing of data with other organisations	N/A
Export of data outside the European Union	N/A

<b>Use of personal addresses, postcodes, faxes, e-mails or telephone numbers</b>	N/A
<b>Publication of direct quotations from respondents</b>	Direct quotations from participants may be used in the write up of the dissertation but all participants will be anonymised as they will be given either a pseudonym or a number as an identifier.
<b>Publication of data that might allow identification of individuals</b>	N/A
<b>Use of audio/visual recording devices</b>	All interviews will be audio recorded with the participant's permission. All recordings will be transferred to a password protected laptop and the original recordings will then be deleted.
<b>Storage of personal data on any of the following:</b>	N/A
<b>Manual files</b>	Any hard copies of informed consent forms will be stored in a locked cupboard accessible only by the student researcher.
<b>Home or other personal computers</b>	Password encryption
<b>University computers</b>	N/A
<b>Private company computers</b>	N/A
<b>Laptop computers</b>	N/A

**F2) Who will have control of and act as the custodian for the data generated by the study?**

The student researcher

**F3) Who will have access to the data generated by the study?**

The researcher and the researchers dissertation adviser. In addition, assessors and the faculty manager may also have access to the data.

**F4) For how long will data from the study be stored?**

5 years, after which time it will be destroyed or deleted.

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**SECTION G – PEER REVIEW**

**G1)**

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a) **Has the project undergone peer review?**

YES x  NO

b) **If yes, by whom was this carried out?** (please enclose evidence if available)

The research proposal was reviewed by two faculty members at the University of Liverpool.

**SECTION G - CHECKLIST OF ENCLOSURES**

Study Plan / Protocol	x
Recruitment advertisement	N/A
Participant information sheet	x
Participant Consent form	x
Research Participant Advocate Consent form	N/A
Evidence of external approvals	N/A
Questionnaires on sensitive topics	N/A
Interview schedule	x
Debriefing material	x
Other (please specify)	N/A

**REFERENCES**

Marshall, B., Cardon, P., Poddar, A., & Fontenot, R. (2013). Does sample size matter in qualitative research?: A review of qualitative interviews in IS research. *Journal of Computer Information Systems*, 54(1), 11-22.

Millon, T., Millon, C. M., Meagher, S. E., Grossman, S. D., & Ramnath, R. (2012). *Personality disorders in modern life*. John Wiley & Sons.

# Appendix E: Ethics Response Form

ETHICS RESPONSE FORM

Researcher name (student): Ryan McConnell	Faculty reviewer: S. FLNTIB	Date of Review: 20.09.17
Working Title of Proposal or summary of study scope: The expert opinions on the relationship between Narcissistic Personality Disorder (NPD) and mental illness classification.		
Proposal attached? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Academic Honesty Declaration signed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

Each of the ethical standards below must be adequately addressed by the researcher in order to obtain ethics approval.

In the blue column, the RESEARCHER (student) should perform a self-check using these 35 questions before submitting the ethics form to the faculty member supervising the study. In each row of the blue column, the RESEARCHER should enter YES, NO, or NA as well as a very brief explanation. The Academic Honesty Declaration must be attached and should be signed and dated.

In the yellow column the ETHICS REVIEWER (supervising faculty member) will enter YES, NO, or NA to confirm or challenge the RESEARCHER'S self-check on each standard. With each NO, the ETHICS REVIEWER will indicate what revisions are required for ethics approval. The faculty reviewer will also render a decision at the end of this form and return the form to the RESEARCHER.

If the ETHICS REVIEWER (supervising faculty member) is able to approve "as is" then the orange column is left blank.

In the orange column, the RESEARCHER (student) will respond to each of the ETHICS REVIEWER'S concerns to explain where/how each of the reviewer's concerns was met in the resubmitted materials.

Table 2  
Ethics Response Form Table

	Researcher's ethics self-check	Ethics Reviewer's assessment:	Researcher's response to Ethics Reviewer
<i>Example: Will data be stored securely?</i>	Yes. Data files will be kept on a password protected computer.	No. Please also address how the paper surveys will be secured prior to being entered as electronic files.	Researcher must use this column to explain how and where each of the Ethics Reviewer's concerns (in the yellow column) has been addressed.  Paper surveys will be in a locked file cabinet. Proposal has been updated.
<p>The first 11 questions apply to all studies (even when the researcher is not interacting with participants to collect new data).  <a href="#">Hover the mouse over the blue footnoted words to view extra tips and definitions.</a></p>			
1. Are participant recruitment and data collection steps adequately described, such that the study's risks and burdens can be discerned?	Yes, the following steps will be undertaken. Experts will be identified through the study of NPD literature via a variety of internet journal search engines included 'Discover' and 'Google Scholar'. The email addresses and contact details of the experts who meet the criteria will be recorded. A Participant Information Sheet (PIS) will be attached to each email sent. In addition, before proceeding with the interviews all participants will be presented the option to ask any questions about the research. The details of approximately forty experts	YES	

	<p>will be gathered and each messaged regarding the details of the research. As many of them will most likely not respond or will decline the interview, one might expect the need to email more experts if the original forty does not yield enough confirmations.</p> <p>Initially the experts will receive a PIS describing the research question, aim and objectives. This will include the goals this research looks to achieve, why they are a suitable candidate and the average time the interview would last. The student researcher's contact details will also be included in the initial information package so that potential participants can contact the student researcher for more information if necessary. Once confirmed the experts will receive a letter of consent and an interview will be scheduled.</p> <p>The study will conclude when all twelve selected experts have been interviewed.</p> <p>As these experts will most likely be located in different parts of the world and meeting with them all in person would be impractical, the interviews will instead be conducted via</p>		
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	<p>Skype or another online communication system. The interviews will be recorded with the permission of the expert, then transcribed and analysed. The interview will be <u>voluntary</u> and the experts will have the right to conclude the process and void their data at any time.</p> <p>The recordings and transcriptions of the interviews will be the only data analysed. These interview recordings will be kept only on a single personal laptop and backed up on a single external hard drive; all data will be password protected/encrypted.</p>		
<p>2. Will the research procedures ensure <u>privacy</u><sup>b</sup> during data collection?</p>	<p>Yes, other than the expert no other people will be present at the time of the interview. All interviews will take place on skype, with the researcher being the sole person in the room. The researchers will be asked prior to start of the interview if they are comfortable with the situation before beginning.</p>	<p>YES</p>	
<p>3. Will data be stored <u>securely</u><sup>c</sup> with adequate provisions to maintain the confidentiality of the data?</p>	<p>Yes. Data will be stored on the research laptop and on a single external hard drive. Both will be password protected.</p>	<p>YES</p>	
<p>4. Will the data be stored for at least</p>	<p>Yes, the data will be stored for</p>	<p>YES</p>	



5 years?	5 years after which time it will be deleted/destroyed.		
5. If participants' names or contact info will be recorded in the research records, are they absolutely <u>necessary</u> ?	Yes, the participants names will be recorded on the informed consent forms. These forms will be kept in a locked cupboard and accessible only by the researcher. All electronic versions will be stored on a password protected laptop.	YES	
6. Do the research procedures and analysis/write-up plans include all possible measures to ensure that participant identities are not directly or <u>indirectly</u> disclosed? For secondary data analyses, the proposal must clearly state when/how de-identification will occur.	All participants will be provided with a pseudonym which will be used on all write ups of the dissertation. The <u>true identity</u> of the participants will not be known to anyone other than the researcher.	YES	
7. Have all potential <u>psychological</u> , <u>relationship</u> , <u>legal</u> , <u>economic/professional</u> , <u>physical</u> , and other risks been fully <u>acknowledged</u> and described?	Yes, there are no known risks to participants regard this <u>particular research</u> .	YES	
8. Have the above risks been <u>minimized</u> as much as possible?	Yes.	YES	
9. Has the researcher proactively managed any potential conflicts of <u>interest</u> ? Note that student researchers may <u>not</u> <u>utilise</u> research assistants to recruit participants or collect research data on behalf of the researcher.	There should be no conflicts of interested present in this study. No participants are personally known by the researcher and no family or personal friends will be involved in the research in any way.	YES	
10. Are the research risks and <u>burdens</u> reasonable, in consideration of the <u>new knowledge</u> ?	Yes.	YES	

that this research design can offer?			
11. Is the research site willing to provide an <u>Authorisation Letter</u> (or email) granting <u>permission</u> for all relevant <u>data</u> access, access to participants, facility use, and/or use of personnel time for research purposes?	N/A	YES	
<p>The remaining questions only apply to studies that involve recruiting participants to collect new data (such as surveys, interviews, observations).</p> <p><u>Please</u> place an X on this line if <u>NONE</u> of the questions in the next section are applicable to the proposed study.</p>			
12. Applicable for student researchers: Will this researcher be appropriately <u>qualified</u> and <u>supervised</u> in all data collection procedures?	Yes, the student researcher will be supervised throughout the duration of the study by a dissertation adviser from the university of Liverpool.	YES	
13. Is participant recruitment coordinated in a manner that is <u>non-coercive</u> ? Coercive elements include: leveraging an existing relationship to "encourage" participation, recruiting in a <u>group</u> setting, extravagant compensation, recruiting individuals in a context of their treatment or <u>evaluation</u> , etc. A researcher must disclose here whether/how the researcher may already be known to the participants and explain how perceptions of coerced research participation will be <u>minimized</u> .	Yes. None of the participants are currently known and no further attempt will be made to recruit the participants into the research if rejection of the initial contact occurs. All participants will be given time to ask any questions about the study (14 days) before they agree to the study.	YES	
14. If anyone would be excluded from participating, is their exclusion justified? Is their exclusion handled respectfully and without <u>stigma</u> ?	Yes, the exclusion criteria is entirely relative to the study and no other exclusion criteria is present.	YES	

15. Where the researcher proposes to use an interpreter, has adequate consideration been given to the interpreter's training regarding confidentiality and principles of informed consent, etc.?	N/A	YES	
16. Do the <a href="#">informed consent</a> <sup>9</sup> procedures provide adequate time to review the study information and ask questions before giving consent?	Yes, a period of two weeks will be given to each participant to resolve these issues.	YES	
17. Will informed consent be <a href="#">appropriately</a> <sup>7</sup> documented?	Yes. In <a href="#">addition</a> all participants will be notified all details regarding informed consent in the initial contact phase.	YES	
18. Is the participant information sheet (PIS) written using language that will be <a href="#">understandable</a> <sup>25</sup> to the potential participants?	As all participants are academics in English, there should be little issue with the participants not being able to understand the language. The PIS is written in plain English for this reason.	YES	
19. Does the PIS include an <a href="#">understandable</a> <sup>26</sup> explanation of the research purpose?	Yes. Care will be taken to meet <a href="#">this criteria</a> , however as all experts will have published a paper in the English language, this should not be an issue.	YES	
20. Does the PIS explain the sample's inclusion criteria in such a <a href="#">way</a> <sup>27</sup> that the participants can understand how/why THEY are being asked to participate?	Yes, all participants will fully understand why they have been asked.	YES	
21. Does the PIS clearly state that participation is voluntary?	Yes.	YES	
22. Does the PIS convey that the	Yes, this is included in the PIS.	YES	

participant has the <a href="#">right</a> <sup>28</sup> to decline or discontinue participation at any time?			
23. Does the PIS include an understandable description of the data collection procedures?	Yes.	YES	
24. Does the PIS include an estimate of the time <a href="#">commitment</a> <sup>29</sup> for participation?	Yes the single interview is aptly described as thirty to fifty minutes in length in the PIS.	YES	
25. Does the PIS describe any thank <a href="#">you</a> gifts, compensation, or reimbursement to participants (for travel costs, etc.) or lack thereof?	Yes, no compensation or gift will be offered or provided to any participant.	YES	
26. Does the PIS include a description of reasonably foreseeable <a href="#">risks</a> <sup>30</sup> or discomforts?	Yes, there are no risks or discomforts envisaged in this research.	YES	
27. Does the PIS include a description of anticipated benefits to <a href="#">participants</a> <sup>31</sup> and/or others?	Yes, anticipated benefits to the wider academic community are detailed on the PIS.	YES	
28. Does the PIS explain how the participant can contact the researcher and the university's Research Participant Advocate? (USA number 001-612-312-1210 or email address <a href="mailto:liverpoolethics@ohcampus.com">liverpoolethics@ohcampus.com</a> )	Yes.	YES	
29. Does the PIS describe how privacy will be <a href="#">maintained</a> <sup>32</sup> ?	Yes.	YES	
30. Does the PIS disclose all potential conflicts of interest (specifying that this study is separate from the researcher's other professional role)?	Yes	YES	
31. Do the consent documents <a href="#">preserve the participant's legal</a> <sup>33</sup>	Yes	YES	

rights?			
<p>The remaining questions regarding sensitive content and vulnerable populations should be reviewed and addressed by the researcher (student) and faculty reviewer, but must also be confirmed by the International Online Research Ethics Committee before the study may go ahead.</p> <p><u>X</u> Please place an X on this line if <b>NONE</b> of the questions in the next section are applicable to the proposed study.</p>			
32. If <u>vulnerable</u> individuals will be specifically sought out as participants, is such targeted recruitment <u>justified</u> by a research design that will specifically benefit that vulnerable group at large?	N/A		
33. If the researcher happens to also serve in a trusted or <u>authoritative</u> role to the participant (e.g., health care provider, teacher etc.), do the recruitment procedures ensure voluntary participation?	N/A		
34. If the research procedures might reveal or create an acute psychological state that necessitates referral, are there suitable procedures in place to manage this?	N/A		
35. If the research procedures might reveal criminal activity, child/elder abuse, or employer policy non-compliance that <u>necessitates</u> reporting, are there suitable procedures in place for managing this? Are limits to confidentiality (i.e., duty to report) appropriately mentioned in the Participant Information Sheet?	N/A		

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### ETHICS APPROVAL DECISION

THIS DOCUMENT MUST BE POSTED IN THE GRADEBOOK AFTER THE SUPERVISING FACULTY MEMBER HAS RENDERED A DECISION. THE APPROPRIATE ETHICS PATHWAY(S) MUST ALSO BE ENTERED INTO THE MITSA LOCAL, EXPEDITED OR IOREC APPROVAL(S)

The supervising Faculty Member will mark an X next to box A, B, or C. If box A or B is marked, then the supervising faculty member will also mark an X next to the applicable subcategory (1, 2, 3, etc.):

<b>X</b>	<b>A. APPROVED VIA EXPEDITED (LIGHT TOUCH) ETHICS REVIEW:</b>					
	<ul style="list-style-type: none"> <li>• As the supervising faculty member, I confirm that all applicable criteria 1-35 above are met with either a "Yes" or "N/A."</li> <li>• I understand my responsibilities as <u>supervisor and</u> will ensure to the best of my abilities that the student investigator abides by the University's policy on Research Ethics at all times.</li> <li>• I affirm that the research activities fall entirely within the parameters of the design indicated with an X below (1, 2 or 3) that the International <u>Online Research</u> Ethics Committee has authorized faculty members to approve via the expedited (light touch) review:</li> </ul>					
	<table border="1"> <tr> <td style="text-align: center; vertical-align: middle;"><b>X</b></td> <td>1. analysis of <u>public</u> documents, artifacts, <u>behaviour</u> or data;</td> </tr> <tr> <td></td> <td>2. secondary analysis of <u>existing</u> data that is privately held but released for research purposes (with all identifiers removed);</td> </tr> <tr> <td></td> <td>3. surveys or interviews of <u>non-vulnerable</u> adults on <u>non-sensitive</u> topics (i.e., no potential to participants of coercion, distress, loss of work/school time, damage to professional reputation). Vulnerable populations include children, clinic patients, prisoners, military personnel, facility residents, anyone over whom the researcher holds authority (e.g., students, subordinates), anyone who might feel undue pressure to participate in the study, and any individuals with severe enough mental disabilities to interfere with capacity to consent to the study.</td> </tr> </table>	<b>X</b>	1. analysis of <u>public</u> documents, artifacts, <u>behaviour</u> or data;		2. secondary analysis of <u>existing</u> data that is privately held but released for research purposes (with all identifiers removed);	
<b>X</b>	1. analysis of <u>public</u> documents, artifacts, <u>behaviour</u> or data;					
	2. secondary analysis of <u>existing</u> data that is privately held but released for research purposes (with all identifiers removed);					
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	<p><b>B. REFERRED TO ETHICS COMMITTEE:</b></p> <ul style="list-style-type: none"> <li>As the supervising faculty member, I am referring this study to the full ethics committee (IOREC) because [mark 1, 2, 3, 4 or Other below].</li> <li>I will email the student's ethics application and all attachments as a single zip file to the ethics committee via <a href="mailto:liverpoolethics@ohecampus.com">liverpoolethics@ohecampus.com</a>, copying the DOS (or <a href="#">Programs</a> Director where this exists).</li> </ul> <p>The ethics committee accepts applications until 5 pm Liverpool <del>timezone</del> on the 3<sup>rd</sup> Thursday of every month. Decisions and feedback will be emailed to the student and DA within 5 business days after the 4<sup>th</sup> Thursday of the month.</p> <p>1. the researcher proposes to collect data from vulnerable individuals such as children, clinic patients, prisoners, military personnel, facility residents, anyone over whom the researcher holds authority (e.g., students, subordinates), anyone who might feel undue pressure to participate in the study, and any individuals with severe enough mental disabilities to interfere with capacity to consent to the study.</p> <p>2. some (potential) participants may find the research topic or premise sensitive</p> <p>3. participants' jobs or livelihoods may be placed at any risk by the study activities</p> <p>4. the participants' culture and/or international location suggest that extra participant protections may be necessary</p> <p>Other: _____</p>
	<p><b>C. REVISIONS REQUIRED:</b></p> <p>The student needs to revise the proposal and ethics materials to address the concerns in the yellow column and resubmit to me before I can select A or B above.</p>

#### Footnotes

<sup>a</sup> In order to weigh potential risks against benefits, the researcher first needs to plan and clearly articulate all of the following that apply:

how existing data or contact information of potential participants will be obtained, format and context of the initial contact with potential participants, informed consent procedures, assignment to groups (if applicable), description of any pilot activities, data collection steps, transcript review and/or member check (if applicable), and how results will be shared with stakeholders.

<sup>b</sup> Privacy risks might include unintended breach of confidential information (such as educational or medical records); being observed/overheard by others while meeting researcher or providing data; or intrusion on the privacy of others who are not involved in the study (e.g. participant's family).

<sup>c</sup> Secure data storage requires password protection on electronic files and locks for physical data.

<sup>d</sup> Note that consent forms do not require signatures if the participant can indicate consent by some action such as clicking on a link, returning a completed survey, etc.

<sup>e</sup> Participant identities might be "indirectly" and unintentionally disclosed if a researcher's final research report fails to ~~omit~~ demographic details or site descriptions that might permit a reader to deduce the identity of a participant. ~~As~~ the researcher needs to think about which demographic descriptors are most important to collect and report, while ensuring that the identity of individual participants is protected. Also, the name of the site/organization is typically masked in scholarly research though in some cases, the organization can elect to publicize their name along with the research results.

<sup>f</sup> Psychological risks include stress greater than what one would experience in daily life (e.g., materials or topics that could be considered sensitive, offensive, threatening, degrading).

<sup>g</sup> Relationship risks are present if the recruitment or data collection process are likely to alter the existing dynamics between the researcher and participant (who may be coworkers or have some professional relationship), among participants (if they know one another), or between the participant and the participant's friends, coworkers, or family members.

<sup>h</sup> Legal risks are present if data collection might result in a participant's disclosure of violation of laws.

<sup>i</sup> Economic/professional risks are present if data collection could result in the participant disclosing violation of workplace policies, disagreement with leadership decisions, poor work performance, or anything else that could be damaging to the participant's position, professional reputation, promotability, or employability. Risks are acceptable but participants need to be made aware of professional risks during the consent process so they can make an informed decision.

<sup>j</sup> Physical risks are not common in social science research but would involve risk of serious physical injury to the participant or the researcher.

<sup>k</sup> Minimal risks are acceptable but must be identified upfront. Minimal risk is defined as when: "the probability and magnitude of harm or discomfort anticipated in the research are not greater in and of themselves than those ordinarily encountered in daily life."

<sup>l</sup> The researcher is responsible for planning measures that will provide participants with reasonable protection from privacy loss, distress, psychological harm, economic loss, damage to professional reputation, and other possible harms.

<sup>m</sup> A conflict of interest is caused when the researcher has some sort of dual role in the research context, such as being a teacher, therapist, investor, business-owner, manager, etc. Conflict of interest must be managed to ensure that the research reveals "truth," not just the outcome that the researcher might ~~desire~~ to see due to their other role.

<sup>n</sup> All research activities place some degree of burden on the participants by asking the participants to share personal information, volunteer time, and assume risks.

<sup>o</sup> Examples of "new knowledge" include: effectively addressing a gap in the literature, generating new theory, enhancing understanding of a phenomenon, assessing effectiveness of a particular ~~practice~~, ~~practice~~ practice, addressing a local practical problem via data analysis.

<sup>p</sup> No documentation of permission is required (a) if the researcher will simply be asking organizations to distribute research invitations on the researcher's behalf, or (b) if the researcher is using only public means to identify/contact participants.

<sup>q</sup> Note that when medical, educational, or business records would be analyzed or used to identify potential research participants, the site needs to explicitly approve access to data for research purposes (even if the researcher normally has access to that data to perform his or her job).

<sup>r</sup> Researchers must be able to document their training in the data collection techniques and the ethics committee might require the researcher to obtain additional training prior to ethics approval. For most student researchers, the research course sequence is sufficient but some research procedures (such as interviewing people with mental disabilities) may require additional training. For psychological assessments, the manual indicates specific qualifications required. Data collection from children requires a background check/clearance through a local agency.

<sup>s</sup> Remote supervision is suitable for most studies, but onsite supervision may be required for certain types of sensitive data collection (e.g., interviews or assessment regarding emotional topics).

<sup>t</sup> For example, anonymous surveys and/or low-pressure communications such as email invitations permit potential participants to opt out with minimal fear of retaliation or other negative consequences.

<sup>u</sup> It is not ethically acceptable to invite a "captive audience" to participate in research on the spot (i.e., to ask an entire class or a group of meeting attendees to complete a survey during their session).

<sup>v</sup> Such a dynamic would not provide sufficient privacy or respect for their right to decline research participation. However, a researcher may use the last few minutes of a meeting to introduce a study and distribute materials, such that the potential participants can then take their time to decide later about participation.

<sup>w</sup> Generally, data collection cannot be approved during work hours or school hours unless a "free period" has been identified (e.g., lunch) so the research activities can be separated from the participants' regular activities. It is important to maintain an "opt in" dynamic rather than implying that employees/students/group members are ~~expected~~ to participate.

<sup>x</sup> Completion of the study directly benefits the student (allowing him or her to obtain a degree), and so the researcher should minimize the potential for either (a) conflict of interest or (b) perceived coercion to participate. Researchers who are in positions of authority or familiarity must take extra precautions to ensure that potential participants are not pressured to take part in their study. Examples: an instructor researcher may recruit her students AFTER grades have been assigned; a psychologist researcher may recruit clients from ANOTHER psychologist's practice; a manager researcher may conduct ANONYMOUS data collection so that subordinates do not perceive their responses or [non]participation as being associated with their job standing.

<sup>y</sup> When applicable, the exclusion criteria should be listed on the recruitment material (flyer, invitation email, etc.) or participant information sheet (PI3) to prevent situations in which the researcher rejects volunteers in a stigmatizing manner.

<sup>z</sup> Informed consent is not just a form; it is a process of explaining the study to the participant and encouraging questions before the participant makes a decision about participation.

<sup>3</sup> While documenting consent via signature is common, note that anonymous surveys can obtain "implied consent" by informing the participant, "To protect your privacy, no consent signature is requested. Instead, you may indicate your consent by clicking here/returning this survey in the enclosed envelope.") It is also acceptable to ~~audio record~~ verbal consent for interviews, ~~in order to~~ not have any record of the interviewee's name.

<sup>44</sup> The ethics committee encourages tailoring the language to the readers ~~as long as~~ a professional tone is maintained.

<sup>45</sup> Minimal jargon should be used during the informed consent process. Everyday layperson language is most appropriate to help a participant make an informed decision about participation.

<sup>46</sup> People receiving the PIB should not be left wondering, "How did the researcher get my name?" or "Why am I being invited and not others?" or "Does the researcher already know ~~private information~~ about me?" ~~The needs to which~~ the researcher has identified and contacted the potential participant needs to be made clear, if it is not already clear from the context. Sample explanations of inclusion criteria in PIB: (a) The human resources department has forwarded this invitation to all employees who meet the researcher's study criteria (i.e., have been with the organization at least 2 years and have transitioned into a managerial role within the past year); or (b) The researcher is inviting all attendees of the past year's XYZ professional conference to be in the study; or (c) The researcher will be randomly selecting possible participants by approaching the residents of every 5<sup>th</sup> home in this neighborhood until 100 responses are obtained.

<sup>48</sup> When the researcher is already known to the participant, the PIB must include written assurance that declining or discontinuing will not negatively impact the participant's relationship with the researcher or (if applicable) the invitee's access to services.

<sup>49</sup> Provide an estimate (in minutes or hours) of each component of data collection (e.g., survey, interview, ~~memberchecking, etc.~~).

<sup>50</sup> Describe only the possible harms that go beyond the risks of daily life.

<sup>51</sup> For most social science studies, it is appropriate to state that there are no ~~particular direct~~ benefits to the individual. In this case, just present the benefits to society.

<sup>52</sup> The PIB should explain that the research report will not include names and that the data will not be used for any purposes other than research. It is not always clear to participants how a research interview is different from a journalistic interview, in which informants might be named. ~~So~~ the PIB should also describe any coding system that will permit the researcher to not use names. For sensitive interviews, the researcher might also want to assure participants that recordings will be destroyed immediately after transcription.

<sup>53</sup> The consent forms/process should not ask a participant to waive any legal rights.

<sup>54</sup> Vulnerable participants include children, clinic patients, prisoners, military personnel, facility residents, anyone over whom the researcher holds authority (e.g., students, subordinates), anyone who might feel undue pressure to participate in the study, and any individuals with severe enough mental disabilities to interfere with capacity to consent to the study. Pregnant women (and their unborn children) are only considered a vulnerable population when a study involves physically risky data collection.

<sup>55</sup> Targeted recruitment of vulnerable participants can only be approved when the ethics committee determines that the study's benefits justify its risks/costs.

<sup>56</sup> A researcher with a dual role must use anonymous surveys or some other method that permits potential participants to opt out without fear of negative consequences. Patients, students, and subordinates of the researcher need explicit assurance that their decision about participation will in no way impact their ongoing relationship with the researcher.

<sup>57</sup> Any limits to confidentiality (i.e., duty to report) must be mentioned in the participant information sheet (PIB).



# Appendix G: Participant Information Sheet



## PARTICIPANT INFORMATION SHEET

**Title of the study:**

The expert opinions on the relationship between Narcissistic Personality Disorder (NPD) and mental illness classification.

**Date:** 17.11.2017

Dear Participant,

You are being invited to participate in a research study. Before you decide whether to participate, it is important for you to understand why the research is being done and what it will involve. Please take time to read the following information carefully and feel free to ask us if you would like more information or if there is anything that you do not understand. Please feel free to discuss this with anyone you feel it would be useful to discuss it with. We would like to stress that you do not have to accept this invitation and should only agree to take part if you want to.

Thank you for reading this.

**What is the purpose of the study?** To aggregate the general perceptions on NPD (Narcissistic Personality Disorder) and to explore perceptions about the classification of NPD as a mental illness.

**Why have I been chosen to take part?** Due to your previous experience researching NPD, you are deemed to be an expert on the subject, and your insights and knowledge are deemed vital for the research.

**Do I have to take part?** No, all participation is voluntary and you can withdraw from the study at any point in time with no recourse or disadvantage.

**What will happen if I take part?** An interview will be conducted (via skype) of roughly 30-45 minutes in length. The interview questions are purposely designed for the research question.

**Are there any expenses and/or payments?** No expenses or payments will be made to participants and no expenses will be incurred because all interviews will take place online.

**What are the risks in taking part?** There are no foreseeable risks to taking part in this study but if you wish to stop the interview at any point or feel uncomfortable, please tell the researcher. You are free to withdraw from the research at any point in the research process.

**What are the benefits from taking part?** There are no direct benefits to you from taking part but that it is hoped the results of the study will be of benefit to the wider academic community.

**What if I am unhappy or there is a problem?** Your information can be discarded and you can withdraw at any time. If you become uncomfortable for any reason at any point during the interview, please tell me and we can stop the interview. .

**Will my participation be kept confidential?** Yes, no names will be mentioned in any write up of the dissertation and all participants will be anonymised by means of a pseudonym.

**What will happen to the results of the study?** The will used for purposes of completing a dissertation. The results will not be shared with anyone other than the dissertation adviser prior to submittal.

**What will happen if I want to stop taking part?** Your information will be withdrawn and deleted. You can withdraw from the research at any point of the process.

**Who should I contact if I have any questions?** Contact the researcher Ryan McConnell at [ryan.mcconnell@liverpool.online.ac.uk](mailto:ryan.mcconnell@liverpool.online.ac.uk) or [tel:+212 682499708](tel:+212682499708)