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IS PARENT-INITIATED TRIANGULATION ASSOCIATED WITH
PATHOLOGICAL NARCISSISM IN YOUTH?

by

Lauren Marie Lee-Rowland

A Dissertation
Submitted to the Graduate School,
the College of Education and Human Sciences
and the School of Psychology
at The University of Southern Mississippi
in Partial Fulfillment of the Requirements
for the Degree of Doctor of Philosophy

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ABSTRACT

The current study examined the proposed link between parent-initiated triangulation (i.e., directly involving a child in parental conflict in such a way that he/she forms an alliance with one parent against the other parent) and pathological narcissism in a sample of 148 adolescents, ages 12-14. Moreover, the moderating influence that different parenting practices and styles (i.e., parental overindulgence, overvaluation, warmth, inconsistent discipline) have on the relation between parent-initiated triangulation and pathological narcissism was explored. Findings from the current study indicated that adolescent self-reported pathological narcissism was associated with higher levels of adolescent-reported triangulation and parental overvaluation and was negatively related to parental warmth. The Vulnerable Narcissism dimension of pathological narcissism was positively related to inconsistent discipline. Contrary to hypotheses, no significant relation emerged between pathological narcissism and parental overindulgence; moreover, none of the maladaptive parenting approaches significantly moderated the relation between triangulation and pathological narcissism. Results suggest that perceived triangulation, parental overvaluation, inconsistent discipline, and lack of parental warmth are all parenting approaches that may relate to maladaptive adolescent self-perception.

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I would also like to thank my committee members, Dr. Nora Charles, Dr. Bradley Green, and Dr. Donald Sacco for their ideas, thoughtful insights, and support throughout this project.

DEDICATION

I would like to dedicate this project to my husband, Andrew, who braved the tempests of graduate school with me through every last storm. Somehow you managed to support me, encourage me, and be my rock in the midst of all the challenges we encountered. Thank you for being the man that you are and for supporting all of my endeavors. I also dedicate this project to my beautiful daughter Anna—seeing the world through your eyes these past three years has made all the difference. You truly are the light of my life.

Finally, I would like to dedicate this project to my parents. Your support, love, and guidance throughout these last five years, and by extension, my entire life, has allowed me to realize my dreams, remain steadfast, and never give up—even in the most trying of times. Thank you for all that you do.

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CHAPTER I – INTRODUCTION

According to Bowen’s family systems theory, how a person functions emotionally is rooted in his/her nuclear family of origin. This family system involves reciprocal relationships that have a significant impact on how that person learns to function emotionally in his/her environment (Bowen, 1978). According to Bowen’s theory, this emotional process, which “...involves the reciprocal responding of living organisms to each other and to the conditions of life to which they must adapt to survive or enjoy an acceptable level of well-being” (Comella, 2011, p. 7) shapes how a person learns to function in relationships with people within and outside of the family system. In line with this idea, social learning theory suggests that adolescents learn how to behave by observing, experiencing, and interacting with people in their environment, particularly their parents (Bandura, 1986; Halgunseth, Perkins, Lippold, & Nix, 2013). In this way, it is clear that a child’s early socialization experiences with his/her caregivers are highly predictive of how that child will interact with others as he/she develops. As such, it is important to examine the interaction style between parents and their children to gain a comprehensive understanding of how and why children develop maladaptive interpersonal behaviors and personality tendencies.

Of particular interest in the present study are the familial factors associated with a narcissistic interpersonal orientation in adolescents. Despite the myriad theories that propose why and how narcissism develops, the origins of narcissism have not been clearly established (Brummelman et al., 2015). A small number of empirical studies have examined how parenting practices are related to the expression of narcissistic characteristics in adolescents (e.g., Brummelman et al., 2015; Mechanic & Barry, 2014).

However, to date, no known studies have investigated parent-child interaction styles in relation to adolescent narcissism. Therefore, the purpose of the current study was to investigate whether parent-initiated triangulation (i.e., involving a child in marital conflict in order to relieve tension) coupled with different types of parenting practices and styles, plays a significant role in the presence of narcissistic tendencies in adolescents. Although there is no direct evidence to suggest that such a link exists, various theories of narcissism, along with established associations between certain types of parenting practices/styles and narcissism, provide justification for exploring this proposed connection. Further research regarding the origins of narcissism may help generate prevention and intervention methods, specifically ones tailored to increase parents' awareness of how certain parent-child interaction styles can be detrimental to their child's self-development.

Narcissism

Narcissism refers to an unrealistic, inflated self-image and a preoccupation with establishing and retaining that image at the expense of forging healthy interpersonal relationships (Morf & Rhodewalt, 2001). Individuals with high levels of narcissism often present as arrogant, have an exaggerated sense of self-importance, and are preoccupied with being venerated by others to affirm their grandiose sense of self (McCullough, Emmons, Kilpatrick, & Mooney, 2003). They typically exhibit feelings of superiority to others (Morf & Rhodewalt, 2001) and go to excessive lengths to uphold a sense of superiority and dominance. Likewise, they often exploit and manipulate others and demonstrate low levels of empathy for those around them (McCullough et al., 2003; Morf & Rhodewalt, 1993; Sedikes, Rudich, Gregg, Kumashiro, & Rusbult, 2004).

Paradoxically, although narcissistic individuals tend to outwardly display a sense of superiority and entitlement, in actuality, their self-view is quite tenuous (Rhodewalt, Madrian, & Cheney, 1998) and highly dependent on the feedback they receive from others (Morf & Rhodewalt, 2001). In this way, the narcissist's sense of self is highly unstable because it depends on receiving constant admiration (Morf & Rhodewalt, 2001).

Both non-pathological and pathological forms of narcissism are commonly studied. The focus of the current study is pathological narcissism, which is characterized by the use of maladaptive self-regulation strategies to cope with threats to a positive self-image (see Pincus et al., 2009). Pathological narcissism is commonly delineated into two dimensions: grandiose and vulnerable. Grandiose narcissism is characterized by unabashed arrogance, excessive self-absorption, and a sense of entitlement (Ziegler-Hill, Clark, & Pickard, 2008). At the same time, it involves a persistent need for validation from others and intense, negative reactivity to criticism (Besser & Priel, 2010).

Like grandiose narcissism, vulnerable narcissism involves a penchant for exploiting others and a tendency to behave in an entitled manner (Ziegler-Hill et al., 2008); however, vulnerable narcissism is associated with a fragile self-esteem and relatively less use of self-enhancement strategies to maintain self-esteem. Someone with characteristics of vulnerable narcissism may experience anxiety regarding his/her relationships with others and significant distress at the thought of being rejected by and/or separated from others (Besser & Priel, 2010; Miller et al., 2011; Schoenleber, Sadeh, & Verona, 2011). Furthermore, unlike grandiose narcissism, vulnerable narcissism has been consistently linked to internalizing issues, such as feelings of

emptiness, helplessness, low self-esteem, shame, and at times, suicidality (see Pincus & Roche, 2011).

Narcissism in Adolescence

Research supports the idea that narcissism develops and is measurable before adulthood (Bardenstein, 2009; Barry, Frick, & Killian, 2003; Thomaes, Bushman, Stegge, & Olthof, 2008). More specifically, it is believed that narcissism manifests at some point in, or directly after, late childhood, as studies have indicated that narcissism can be reliably assessed as young as age 8 and that narcissism in children and adolescents essentially mirrors the psychological and interpersonal aspects of narcissism in adults (Thomaes et al., 2008, 2009).

Additionally, many theories of narcissism identify childhood and adolescence as the primary stages in which narcissism takes shape (Hill & Roberts, 2011). Likewise, adolescents are often conceptualized as being more narcissistic and self-involved than individuals in other age groups (Buchanan & Holmbeck, 1998 as cited by Hill & Roberts, 2011), a notion which has been supported by cross-sectional research (see Hill & Roberts, 2011 for review). From a developmental standpoint, adolescence is marked by the need to develop a personal identity and individuality, which are facilitated when adolescents make their own choices. Failing to work toward this developmental milestone may be connected to unhealthy levels of self-doubt and feelings of inadequacy (Blos, 1962 as cited by Hill & Roberts, 2011). Interestingly, there is a link between an adolescent's inability to separate/differentiate from his/her parents and greater levels of narcissism (see Hill & Roberts, 2011).

Furthermore, at certain levels, narcissism may be adaptive for adolescents, acting as a buffer to help them maintain their self-esteem in the midst of attempting to establish their self-identity at this sensitive and crucial stage of development (Blos, 1962).

However, adolescents who think they are particularly unique and special to the extent that others are unable to understand them are more susceptible to a host of pathological symptoms (Aalsma, Lapsley, & Flannery, 2006; Hill & Lapsley, 2011). Specifically, certain characteristics of narcissism (e.g., exploitativeness, entitlement, exhibitionism) are risk factors for conduct problems and delinquency (e.g., Barry et al., 2003; Barry, Frick, Adler, & Grafeman, 2007).

As previously mentioned, individuals high in pathological narcissism are hypersensitive to criticism and experience significant emotional distress when they do not receive admiration from others and their inflated self-image is threatened (Pincus et al., 2009). Moreover, high levels of pathological narcissism are particularly problematic in adolescents and have been linked to low self-esteem, aggression, internalizing issues, and perceptions of poor interpersonal relationships, whereas high levels of non-pathological narcissism are positively related to self-esteem and negatively related to internalizing problems (see Barry & Kauten, 2014). In this way, it is particularly important to examine the etiological underpinnings of pathological narcissism (e.g., parent-child interaction styles) to assist in the creation of intervention methods designed to prevent the development of pathological narcissism, and by extension, the emotional and behavioral problems to which it is related.

Triangulation

Triangulation in the family system refers to a process whereby a child is directly involved in the conflicts that arise between his/her parents. This process typically involves a parent and child forming an alliance against the other parent (Etkin, Koss, Cummings, & Davies, 2013). This type of family dynamic is thought to contribute to boundary confusion and may elicit feelings in the child that he/she has to take sides with one parent or the other (Buehler, Franck, & Cook, 2009; Etkin et al., 2014).

Triangulation can also manifest in several other ways: 1) one parent complains to his/her child about the other parent, usually in the form of criticism and insults; 2) the parents blame the child for their marital problems; and 3) the child becomes the messenger and delivers information from one parent to the other (Buehler et al., 2009). Overall, despite taking on different forms, these patterns of triangulation are thought to comprise a unidimensional concept of triangulation, which is typically assessed using both parent and child-report of parenting behaviors (Buehler et al., 2009; Etkin et al., 2014).

Although triangulation may manifest differently across families, it essentially involves a diffusion of boundaries, such that a child is forced to take on a developmental role for which he/she is not prepared. The nature of this role often varies according to context. Studies have delineated several common roles that children often serve when triangulated into their parents' marital issues. One of these roles places the child as the emotional caretaker of the parent, who recruits the child to form an alliance against the other parent. In this situation, a child may become his/her mother's or father's emotional confidant (Etkin et al., 2014). This pattern is a form of parentification, in which the parent relies on his/her child for emotional support during periods of stress, essentially

causing the child to take on a parental role (Peris, Goeke-Morey, Cummings, & Emory, 2008).

According to family systems theory, when intergenerational boundaries become blurred between the interparental and the child-parent subsystems, the adolescent may feel compelled to take on the executive functioning role of the family (e.g., making important decisions, taking on a leadership role; Fosco & Grych, 2010), which is a developmentally atypical responsibility and one that has been linked to poorer adjustment (Kerig, 2005). Permeable boundaries between the parent and child may also alter an adolescent's sense of authority. When an adolescent forms a coalition with one parent against another parent, he/she is essentially placed into a role of power that undermines the natural parent-adolescent hierarchy that is necessary for maintaining a healthy family system. The adolescent could become confused about his/her role in the family and may begin to disrespect parental authority altogether (Fosco & Grych, 2010).

Davies and Forman (2002) concluded that triangulation is more common during adolescence than childhood because adolescents have developed the emotional and verbal capacity necessary to develop a parent-child alliance, whereas younger children do not have these abilities. According to Dallos and Vetere (2012), there are two main ways that an adolescent usually responds to being triangulated into his/her parents' marital discord, each of which carries its own unique set of socioemotional consequences. One of these methods is to avoid the conflict altogether, which the adolescent may do a variety of ways such as by withdrawing to his/her room, leaving the home as often as possible, or emotionally disconnecting him/herself from the parents and the situation. Another common response is to directly intervene and attempt to help the parents

maintain their relationship by trying to reason with them and/or being particularly pleasant. Children may also choose to stay loyal to one parent over the other. According to Etkin et al. (2013), all of these patterns are distressing to the adolescent and have been linked to adjustment problems. The current study proposes that triangulation may also be related to adolescent narcissism in that it may contribute to an adolescent's unstable sense of self, which is a defining characteristic of narcissism.

Narcissism and Triangulation

No known empirical studies have established a relation between triangulation and pathological narcissism; however, the juxtaposition of these two constructs reveals several similarities, particularly in terms of their impact on adolescent development and interpersonal functioning. That is, certain aspects of the parent-child interactions involved in this dynamic may be related to the development of adolescent narcissism.

Adolescence is a period in which an individual begins to develop a sense of autonomy by spending less time with his/her parents and more time with his/her peers. When a child is triangulated and gets involved within his/her parents' marital discord, this developmental task is stymied, because he/she concentrates more on spending time with his/her parents in an attempt to repair their relationship (Buehler & Welsh, 2009). As stated earlier, narcissism in adolescence can serve as a "buffer," particularly for youth who have not been given the opportunity to develop an autonomous sense of self and differentiate their self-identity from their parents (Blos, 1962). For these reasons, it is possible that an adolescent may begin to demonstrate higher levels of narcissism as a means of attenuating the negative impact that triangulation has had on his/her identity and sense of self. For instance, adolescents may consistently seek "approval from

idealized others” (Segrin et al., 2013, p. 590)—a pattern that is indicative of narcissism—to promote a stable sense of self.

Moreover, failing to engage in developmentally necessary tasks may manifest in internalizing symptoms such as depression and anxiety (Buehler & Welsh, 2009). More specifically, Fosco and Grych (2010) suggested that triangulation has the potential to engender self-blame in children, because they often feel responsible for either causing the conflict between their parents and/or not being able to resolve it. As a result, triangulated youth may experience significant internalizing problems such as high anxiety, tension, fear, resentment, and/or guilt (Buehler & Welsh, 2009). Other studies have found that adolescents who become involved in their parents’ marital difficulties are at-risk for experiencing depressive symptoms and the tendency to withdraw from others (Bradford et al., 2004; Miller, Anderson, & Keala, 2004). Interestingly, these internalizing symptoms are also characteristic of adolescents exhibiting high levels of vulnerable narcissism (Pincus & Roche, 2011).

Furthermore, vulnerable narcissism also may involve a certain level of selflessness and a sense of responsibility toward others, which can generate both positive feelings of self-worth and a sense of authority for providing for and taking care of others (Huprich et al., 2012). Such a description also seems to fit youth who may feel caught in the middle of their parents’ marital strife but at the same time feel responsible for the well-being of the parent with whom they have formed an alliance. Another similarity between triangulated youth and youth who demonstrate high levels of vulnerable narcissism are the ways in which they perceive social support from others. Buehler et al. (2009) found that youth who are triangulated within their parents’ relationship tend to

perceive lower levels of friend support and higher levels of rejection over time, perhaps due to impairment in the child's ability to develop friendships with peers (Bowen, 1978). In line with this pattern, Barry, Kauten, and Lui (2014) noted that vulnerable narcissism in adolescents was negatively associated with perceived social support, which the authors concluded might speak to the reason that individuals high in vulnerable narcissism have a tendency to report withdrawing from others.

The maladaptive ways in which triangulated youth and youth who display higher levels of pathological narcissism interact with others are also similar. Specifically, Markiewicz et al. (2001) proposed that triangulated adolescents often learn to meet their needs for intimacy using manipulation and coercion tactics, as their parents are wont to manipulate them into forming a coalition against the other parent. Likewise, manipulating and exploiting others is a hallmark characteristic of narcissism (Diamond, Yeomans, & Levy, 2011; Ziegler-Hill et al., 2008).

Beyond sharing similarities with pathological narcissism, it is possible that certain aspects of the child-parent dynamics involved in triangulation could be related to the development of narcissism in adolescents. As aforementioned, being triangulated into their parents' relationship may misshape an adolescent's sense of authority. The act of forming an alliance with one parent against the other parent puts the adolescent in a role of power that undermines the natural parent-adolescent hierarchy. This process could potentially result in an adolescent disrespecting parental authority altogether (Fosco & Grych, 2010) and set the stage for a child to develop a grandiose sense of self, which is characteristic of narcissism, from having been placed in a role of authority prematurely.

The unstable sense of self that is characteristic of pathological narcissism may also be related to the triangulated adolescent's inappropriate role in the family. More specifically, a sense of authority coupled with the unhealthy interactions that are characteristic of triangulation, which have the potential to leave adolescents feeling emotionally insecure (Fosco & Grych, 2010), could promote a tenuous sense of self. For instance, an adolescent may not receive the emotional support and acceptance that he/she needs from both parents if he/she rejects the solicitous parent's attempt to "recruit" the child for personal goals (Buehler et al., 2009). Conflict between the parent and child may heighten; thus, the adolescent may simultaneously feel unworthy while also being placed in a developmentally inappropriate role, preventing him/her from gaining a strong sense of self.

Likewise, problematic levels of parental warmth associated with triangulation may also contribute to this unstable sense of self. According to Grych et al. (2004), parental warmth, perhaps paradoxically, often carries negative consequences in a triangulated situation. For instance, a child often has a warmer relationship with the parent with whom he/she has allied; however, this alignment may increase interparental conflict and promote more distress in the child. Specifically, when both triangulation and parental warmth are high, it may be that the child is enmeshed with one of his/her parents; consequently, warmth is not used in service of the child's needs but rather to support the emotional needs of the parent (Etkin et al., 2014).

Taken as a whole, it is clear that the parent-child interactions involved in triangulation may be associated with adolescent narcissism. Based on the literature, it is possible that adolescents may develop narcissistic tendencies, such as constantly seeking

approval from others in an attempt to develop individuality and a sense of self that is separate from the influence of the parent with whom he/she has formed an alliance. Pathological narcissism may also be connected to the adolescent's inappropriate sense of authority by virtue of being compelled to take on an adult role (e.g., that of emotional caretaker) when triangulated into his/her parent's marital discord. This process, in combination with the lack of emotional support and/or genuine warmth that triangulated children receive from their parents, may be associated with development of the grandiose, albeit tenuous, sense of self that is paramount to narcissism.

Overall, when considering certain parent-child interaction styles involved in triangulation along with some of the similar behaviors that triangulated youth and youth high in pathological narcissism display, it is plausible to suggest that there is a connection between the two constructs. It is also important to consider that the relation between triangulation and adolescent narcissism may be significantly impacted by the presence of certain maladaptive parental practices (e.g., overvaluation, lack of parental warmth) that have been tied to the development of adolescent narcissism.

Parenting Dimensions and Youth Narcissism

Over time, many theories regarding the etiology of narcissism have been proposed. Most of these theories pinpoint parental behavior as a precursor to narcissistic characteristics (Horton, 2011). Although theories differ regarding parenting influences on narcissism (Horton, Bleau, & Drwecki, 2006), they typically fall into one of two perspectives: 1) that children develop narcissism as a result of emotional neglect from parents or 2) as a consequence of excessive parental attention and unwarranted praise and admiration. Campbell and Foster (2007) sum up this distinction as being either the

“wounded or spoiled” childhood (p. 129). According to Thomaes et al. (2009), children can be exposed to different types of these parental behaviors while developing the same narcissistic tendencies in which they rely on others to validate their unrealistic, inflated sense of self. Specifically, the theoretical and empirical literature has suggested that the following types of parental behavior facilitate narcissism in youth (each of which fall into one of the two aforementioned categories): lack of parental warmth, inconsistent discipline, parental overindulgence, and parental overvaluation.

Parental warmth. Within the literature, parental warmth has been labeled in a variety of ways, such as child-centeredness, responsiveness, and involvement (Horton et al., 2006). This parenting factor is commonly operationalized as a parent’s positive affect, affection, and admiration toward his/her child. It involves the parent expressing enjoyment of his/her child, both in a spontaneous manner and when the child seeks out this type of response from the parent (see Davidov & Grusec, 2006). According to Kernberg (1975), narcissistic individuals often come from homes lacking in parental warmth, in that one of their parental figures (often the mother) exhibits callousness, indifference, and nonverbalized aggression toward them. According to this perspective, this process lays the foundation for the child to develop maladaptive defense mechanisms to ward off envy and/or hatred from his/her parental figure. In some cases, the child may not only have an unfeeling and uncaring parent but may be used in a narcissistic way by that parent. In other words, the parent may put his/her child on display, praising and making him/her feel “special” for certain characteristics, while devaluing him/her for others. This parent-child dynamic presumably prompts the child to seek admiration from others as a means of compensating for the rejection that he/she receives from the parent.

In this way, Kernberg's theory suggests that the narcissistic self is a product of a parent's lack of overall warmth for the child coupled with admiration for some characteristics that the child exudes (e.g., high intelligence), which the parent essentially exploits. The child may then develop a false sense of grandiosity about these characteristics while at the same time developing a highly unstable sense of self and personal insecurity (Kernberg, 1975 as cited by Mechanic & Barry, 2014).

Although Kohut's (1966) theory of narcissism is often thought to contradict Kernberg's propositions, there are certain aspects of these perspectives that are aligned. Kohut (1977) believed that an imperative aspect of a child's development of a healthy sense of self is receiving an appropriate amount of parental empathy. Parents who do not respond to their child's needs for understanding and/or overtly reject their child preclude him/her from internalizing an ideal image of the self or the parent, which is necessary for the healthy development of a child's self-perception and sense of self-worth. Thus, lack of parental warmth can be thought of as a major precursor to the development of a narcissist's dependence on consistently receiving adulatory feedback from others to validate his/her tenuous sense of self.

In line with these theories and as previously mentioned, Otway and Vignoles (2006) found that both overt narcissism (i.e., a subtype that is highly similar to grandiose narcissism) and covert narcissism (i.e., a subtype that is highly similar to vulnerable narcissism) were predicted by participants' recollections of experiencing both parental coldness and parental overvaluation. These findings directly support Kernberg's theory, which proposes that the combination of these two parenting approaches plays a role in the development of narcissism. However, a study conducted by Horton, Bleau and Drwecki

(2006) found slightly contradictory results. That study examined the relation between several parenting dimensions, including parental warmth, and both healthy and unhealthy forms of narcissism as measured by the Narcissistic Personality Inventory (NPI; Raskin & Terry, 1988). Their results indicated that parental warmth was positively associated with both unhealthy and healthy forms of narcissism. The fact that higher parental warmth was also associated with higher levels of unhealthy narcissism lays in contrast to Kernberg's theory. It is important to note that other factors played a role in this connection such as participant gender and the presence of other parenting practices (e.g., psychological control; Horton et al., 2006). The results of this study clearly indicate that parental warmth is related to narcissism. However, it also suggests that both high and low warmth may be related to narcissism depending on the presence of other parenting approaches, such as the psychological control a parent may exert over his/her child in a triangulated situation (Etkin et al., 2014). Brummelman et al. (2015) also investigated whether a lack of parental warmth plays a role in the development of narcissism. That study indicated that lack of parental warmth predicted self-esteem rather than narcissism.

Taken as a whole, the findings regarding the role that parental warmth plays in the development of child/adolescent narcissism are mixed. Furthermore, some findings connecting these two constructs typically involve another variable that also impacts the relation (e.g., parental overvaluation). As with the other precursors of narcissism mentioned, the link between lack of parental warmth and child/adolescent narcissism is unclear and warrants further investigation.

Inconsistent parenting. Another focus in the empirical literature is whether particular parenting practices (i.e., parents' actions; Tramonte, Gauthier, & Willms, 2015) contribute to the development of narcissism in adolescents. Parenting practices are commonly thought of in terms of how parents interact with their child in different activities (i.e., engagement) and the degree to which they set expectations for their child to follow in terms of exhibiting age-appropriate behavior (i.e., guidance; Tramonte et al., 2015). Although a limited number of studies have examined this notion, there has been a consistent link between how parents guide their children and adolescent narcissism. For example, a study conducted by Barry, Frick, and colleagues (2007) found that maladaptive narcissism (i.e., exploitativeness, entitlement, and exhibitionism) was significantly related to negative parenting practices, which included inconsistent discipline. Of particular relevance to the current study were the findings of Mechanic and Barry (2014), who noted a positive association between adolescents' perception of inconsistent discipline and vulnerable narcissism. Furthermore, this perceived inconsistency was linked to aspects of vulnerable narcissism involving contingent self-esteem, entitlement, and the proclivity to diminish a need for others. Parenting that rewards and punishes children inconsistently could contribute to a child's experience of shame, as the child attempts to protect his/her sense of self against potential unforeseen threats (Kernberg, 1975 as cited by Mechanic & Barry, 2014). Moreover, youths high in vulnerable narcissism are likely to downplay the degree of emotional closeness they need from their parents if they are unable to depend on them to be consistent in how they discipline, as again, this inconsistency is a threat to their tenuous, albeit inflated sense of self.

Parental overindulgence. It is commonly believed that narcissism stems from parental overindulgence, which can be defined as consistently and unconditionally gratifying all of a child's wants (Capron, 2004). According to Bredehoft, Mennicke, Potter, and Clarke (1998), parents who engage in overindulgence "give children too much of what looks good, too soon, and too long and at developmentally inappropriate times" (p. 4). Overindulgent parents often bestow their children with excessive material wealth and experiences while failing to set standards or provide them with responsibility. This approach creates a nonrealistic environment for children, in which all of their demands are satisfied without having to put forth any effort to work for or earn things (Bredehoft et al., 1998). Essentially, the child is hindered from developing important life skills (e.g., perseverance, coping with failure effectively, compromising with others; Bredehoft et al., 1998). As such, overindulgence often sets the stage for a child to develop exploitative behavior and the belief that he/she is entitled to positive regard and favors from others (Capron, 2004).

Kohut (1977) maintained that overindulgent parenting, in which parents excessively respond to their child's needs/demands, catalyzes the development of a grandiose sense of self because it does not allow for the necessary frustration needed to abate the development of a grandiose self-image. In accordance with Kohut's theory, Imbesi (1999) proposed that the primary reason narcissism develops is that parents overindulge their children in part by not implementing proper generational boundaries. This failure to provide children with frustrating experiences may limit his/her acquired capacity to adapt to and accept his/her limitations.

Some empirical evidence has supported overindulgence as a factor in narcissism. For example, a study conducted by Capron (2004) examined the relations of four types of parent-child interaction styles that are thought to represent pampering (i.e., overindulgence, overdomineering [the parent makes all decisions for the child], overpermissive, overprotective), with narcissism as measured by the NPI, in male and female undergraduate students. Of the four pampering styles examined, overindulgence was correlated with the most NPI domains and was the most strongly associated with overall narcissism.

The results of a study conducted by Cramer (2011) suggested that parental indulgence¹ may play a role in the development of narcissism but that its relation to youth narcissism is somewhat complex. Participants were assessed for the presence of narcissistic precursors (e.g., excessive need for attention, impulsivity, exhibitionism) when they were in preschool and later completed measures of narcissism as young adults. The findings revealed that the interaction between the presumed precursors of narcissism and indulgence during adolescence (i.e., being overly responsive to the child and failing to make appropriate demands of the child), were indeed related to maladaptive narcissism in young adulthood. Thus, it is clear that overindulgence is related to narcissism; however, more research is needed to determine what other familial factors may influence this relation.

¹ The author defined indulgence as parenting that is “responsive, but not demanding” (p. 21). This description of indulgence in adolescence (e.g., providing excessive praise, allowance, too many expensive clothes) is synonymous with the present study’s definition of parental overindulgence.

Parental overvaluation. Brummelman, Thomaes, Nelemans, Orobio de Castro, and Bushman (2015) define parental overvaluation as “parents’ belief that their own child is more special and more entitled than other children” (p. 666). Parents who overvalue their children often excessively praise them, even when it is not warranted (Millon, 1969). This concept has received relatively little attention in the empirical literature concerning its impact on the development of narcissism in children and adolescents. However, theoretically, overvaluation has been implicated in the development of narcissism for quite some time. For instance, Millon’s biosocial learning theory (1969) proposes that parental overvaluation engenders an unrealistic and inflated self-image in a child who is unable to persist in the real world. Nevertheless, according to this perspective, individuals who have internalized this type of unrealistic self-perception will attempt to maintain it, displaying a wide range of behaviors that have come to be known as “narcissistic” (e.g., entitlement, arrogance).

What little empirical evidence that exists on the relation between parental overvaluation and narcissism in children and adolescents is somewhat contradictory, albeit compelling. A study conducted by Otway and Vignoles (2006) investigated the role that parental overvaluation and parental coldness (i.e., lack of parental warmth) have on the development of overt and covert narcissism based on the childhood recollections of adult participants. In that study, parental overvaluation was not specifically associated with either type of narcissism. Interestingly, it was the combination of parental overvaluation and parental coldness that was predictive of both overt (grandiose) and covert (vulnerable) forms of narcissism. However, there were some nuances in this relation, such that parental overvaluation more weakly predicted covert narcissism

relative to overt narcissism. It follows that when parents excessively praise their child out of self-interest (i.e., they want their child to be “the best” at something because it reflects favorably on them) but do not provide the child with warmth, the child would develop characteristics of covert/vulnerable narcissism, such as consistently seeking admiration for those qualities, as a means of compensating for a highly unstable self-esteem. That is, parental overvaluation, when combined with parental coldness, may contribute to the development of covert (vulnerable) characteristics of narcissism, and there may be a unique relation between overvaluation and overt (grandiose) narcissism that is also deserving of further research.

Somewhat contrary to these findings were the results of a study by Brummelman et al. (2015), in which parental overvaluation predicted increased child narcissism over time, whereas lack of parental warmth did not. These findings fall in line with Millon’s biosocial learning theory and suggest that narcissism may develop when children internalize their parents’ aggrandized view of them. Finally, Horton and Tritch (2014) did not find a significant association between parental overvaluation and narcissism. Clearly, the results of these studies are quite mixed. However, some of them are indicative of a relation between parental overvaluation and narcissism. Furthermore, parental overvaluation has been proposed by social learning theorists as being the primary factor that contributes to the development of narcissism, suggesting that this construct has potential relevance for understanding narcissism in youth. For this reason, further consideration of the relation of parental overvaluation with narcissism is warranted. The current study will determine whether parental overvaluation is related to

narcissism and if so, whether it contributes to the proposed relation between parent-initiated triangulation and adolescent narcissism.

Parenting Dimensions as Moderators of the Relation between Triangulation and Narcissism

Although no known evidence has directly linked triangulation to the aforementioned parenting dimensions (i.e., lack of warmth, inconsistent parenting, overindulgence, overvaluation), various studies have demonstrated an association between marital conflict (which underlies parent-initiated triangulation) and negative parenting (e.g., Ato, Galián, & Fernández-Vilar, 2015; Gerard, Krishnakumar, & Buehler, 2006; Shelton & Harold, 2008). Moreover, it is important to consider the interrelation between parenting practices/styles and marital discord. In many instances, marital dissatisfaction translates into maladaptive parenting (Pedro, Ribeiro, & Shelton, 2012). For example, a study conducted by White (1999) found that mothers' and fathers' warmth toward their child depended on both the quality of their marriage and the quality of the opposite spouse's relationship with the child. In this way, it is likely that parents who engage in triangulation are also likely to engage in other maladaptive parenting styles and practices, which are also related to adolescent narcissism.

Although it is possible that parents who engage in triangulation also engage in the negative parenting strategies under investigation, these types of maladaptive parenting approaches might also exacerbate the proposed relation between parent-initiated triangulation and adolescent narcissism. As described above, each of the aforementioned parenting approaches has theoretically and/or empirically been linked to narcissism. Therefore, it follows that when parenting approaches that have been associated with

narcissism are present in combination with parent-initiated triangulation, there is a greater likelihood that narcissism in adolescents will also be present.

Summary

The focus of the current study was on pathological narcissism, which is associated with similar adolescent outcomes (e.g., internalizing problems, negative perceptions of social support) as parent-initiated triangulation. Therefore, pathological narcissism is perhaps most relevant for understanding how a negative parenting approach, like parent-initiated triangulation, is related to narcissism in adolescents. Moreover, based on the empirical literature, it is likely that the other negative parenting variables under investigation (i.e., lack of parental warmth, inconsistent discipline, overindulgence, overvaluation) are also related to higher levels of pathological narcissism, as each of these parenting approaches has been linked to at least some aspect of pathological narcissism.

In this way, based on the literature, it is plausible that a connection exists between triangulation and pathological narcissism. More specifically, triangulation and pathological narcissism may be related for the following reasons: (a) triangulation has the potential to impede an adolescent from developing an individual sense of self, which has long been thought to underlie narcissistic behavior; (b) both triangulation and pathological narcissism are associated with similar adolescent intrapersonal problems (e.g., internalizing issues, perceived lack of peer support); (c) both triangulated youth and narcissistic youth demonstrate similar maladaptive interaction patterns (e.g., coercion, manipulation); (d) dynamics involved in triangulation (i.e., the child gaining an inappropriate amount of authority coupled with lack of parental support and/or parental

warmth) may contribute to the tenuous sense of self that is a defining characteristic of narcissism (Rhodewalt, et al., 1998). Furthermore, as noted above, the presence of negative parenting practices and styles (i.e., lack of warmth, inconsistent parenting, overindulgence, overvaluation) that have been associated with adolescent pathological narcissism may exacerbate the connection between triangulation and adolescent pathological narcissism.

As mentioned above, triangulation most often takes place during adolescence, because adolescents have developed the emotional and verbal skills necessary to form a parent-child coalition (Forman, 2002). Moreover, narcissism typically develops either during or directly after late childhood (Thomaes et al., 2008, 2009). For these reasons, the current study examined these constructs in adolescents ages 12-14.

Hypotheses

The following hypotheses were examined:

Hypothesis 1. It was hypothesized that a significant, positive correlation between parent-initiated triangulation and adolescent pathological narcissism would emerge, such that higher levels of both child and parent-reported triangulation would be associated with higher levels of self-reported adolescent pathological narcissism.

Hypothesis 2. Parental warmth was expected to be negatively correlated with adolescent pathological narcissism, such that lower levels of child- and parent-reported parental warmth would be associated with higher levels of self-reported adolescent pathological narcissism.

Hypothesis 3. Parental overvaluation and parental overindulgence, as reported by both parent and child, were expected to be positively correlated with self-reported, adolescent pathological narcissism.

Hypothesis 4. Parent- and child-reported inconsistent discipline were expected to be positively correlated with self-reported, adolescent vulnerable narcissism.

Hypothesis 5. Parental overindulgence was expected to moderate the relation between parent-initiated triangulation and adolescent pathological narcissism, such that high levels of overindulgence in combination with high levels of triangulation would predict relatively higher levels of adolescent pathological narcissism.

Hypothesis 6. Parental overvaluation was hypothesized to moderate the relation between parent-initiated triangulation and adolescent pathological narcissism, such that high levels of overvaluation in combination with high levels of triangulation would predict relatively higher levels of adolescent pathological narcissism.

Hypothesis 7. As previously noted, high warmth is related to narcissism when psychological control is also present (Horton et al., 2006). For this reason, parental warmth was expected to moderate the relation between parent-initiated triangulation (i.e., a form of psychological control) and adolescent pathological narcissism, such that high levels of parental warmth in combination with high levels of triangulation would predict relatively higher levels of adolescent pathological narcissism.

Hypothesis 8. Inconsistent discipline was hypothesized to moderate the relation between parent-initiated triangulation and vulnerable narcissism, such that high levels of inconsistent discipline in combination with high levels of triangulation would predict relatively high levels of vulnerable narcissism.

CHAPTER II - METHOD

Participants

A total of 148 adolescents (69 males, 79 females) participated in this study. Participants ranged in age from 12 to 14 years (M age = 12.9 years, $SD = .70$). The majority of participants were Caucasian (58.8%), with 21.6% identifying as African American, 18.9% identifying with another racial group, and .7% reporting no racial identity. Notably, 94 participants were recruited from a middle school in Hattiesburg, Mississippi and 54 participants from throughout the United States were recruited online using the Qualtrics survey company. To determine the degree of equivalence between the two samples, an independent samples t -test was conducted to compare the samples across the primary variables of interest. There was a significant difference in pathological narcissism, $t(146) = -2.83$, $p = .005$, between the middle school sample ($M = 2.13$, $SD = .80$) and the Qualtrics sample ($M = 2.52$, $SD = .84$), with the latter sample scoring higher. The magnitude of this difference was moderate ($d = .47$). There was also a significant difference in vulnerable narcissism $t(146) = -3.04$, $p = .003$ between the middle school sample ($M = 1.86$, $SD = .96$) and Qualtrics sample ($M = 2.36$, $SD = .99$), again with the Qualtrics sample scoring higher. The magnitude of this difference was also moderate ($d = .50$). As a result of these differences, supplementary analyses were conducted with each sample, which revealed that the overall pattern of results did not significantly differ between each sample (see Appendix N).

From the adolescents in the middle school sample who initiated participation, only 18 parents completed the survey questions about their parenting approaches (19.15% response rate). Moreover, only 15 adolescent participants (6 males, 9 females) had

corresponding parent report data. Given the poor parent-response rate and lack of corresponding parent-child data, parent data were excluded from analyses.

Materials

Demographic Questionnaire. A 14-item demographic questionnaire was administered to the child's primary caregiver to obtain information about the child's age, race, gender, and about the caregiver him/herself (e.g., marital status, income, educational level; see Appendix A).

Pathological Narcissism Inventory (PNI; Pincus et al., 2009). The PNI is a 52-item self-report inventory used to assess grandiose and vulnerable dimensions of pathological narcissism in both adults (e.g., Fossati, Feeney, Pincus, Borroni, & Maffei, 2015) and adolescents (e.g., Barry et al., 2014). The PNI is associated with maladjustment in adolescents, including low self-esteem and internalizing problems (Barry & Kauten, 2014). Responses to PNI items are provided on a 6-point scale ranging from 0 (*not at all like me*) to 5 (*very much like me*). Sample items that measure Grandiose Narcissism include, "I often fantasize about being recognized for my accomplishments" and "I find it easy to manipulate people." For the Vulnerable Narcissism scale, sample items include, "I can't stand relying on other people because it makes me feel weak" and "When others don't notice me, I start to feel worthless" (see Appendix B). Thomas, Wright, Lukowitsky, Donnellan, and Hopwood (2012) found support for the PNI's criterion validity. The PNI has also demonstrated acceptable total scale reliability ($\alpha = .94$) and good scale reliability for both the Grandiose Narcissism ($\alpha = .89$) and Vulnerable Narcissism ($\alpha = .92$) dimensions in adolescents (Kauten & Barry, 2016). In the current study, the internal consistency of the composite score was $\alpha = .95$.

Internal consistency was $\alpha = .96$ for the Vulnerable Scale and $\alpha = .85$ for the Grandiose Scale.

Triangulation Questionnaire – Youth Report. The current study used the youth version of the triangulation questionnaire employed by Buehler et al. (2009) to assess adolescents' perceptions of the degree to which their parents/caregivers attempt to triangulate them into their marital/relationship discord. The youth measure (see Appendix C) consisted of 7 items adapted from the Covert Conflict Scale developed by Buehler et al. (1998) and the Children's Perceptions of Interparental Conflict scale (CPIC; Grych, Seid, & Fincham, 1992). This adaptation has been used in previous research to measure youth-reported triangulation (see Buehler et al., 2009). Item responses were provided on a 4-point scale ranging from 1 (*never*) to 4 (*very often*). Sample items included, "How often do you feel like you have to take sides when your parents fight?" and "How often does one of your parents insult (show disrespect for) the other one when they are not there?". Buehler et al. (2009) reported good reliability ($\alpha = .79$) for the 7-item scale, and construct validity for this scale has been established (see Bradford et al., 2004 as cited by Buehler et al., 2009). In the current study, the internal consistency for this scale was $\alpha = .88$.

Parental Overindulgence Assessment Scale, Child Report (POAS-C; adapted from Bredehoft & Walcheski, 2005). The POAS-C is a 30-item questionnaire that was used to assess parental overindulgence from the child's perspective (adapted directly for the proposed study from the parent report POAS; Walcheski, Bredehoft, & Leach, 2006). Sample items included, "My mom/dad gives me a great deal of attention" and "My mom/dad gives me all the toys I want" (see Appendix J). Responses were made on a 5-

item Likert scale ranging from 1 (*Never or almost never*) to 5 (*Always or almost always*). In the current study internal consistency for this scale was $\alpha = .84$.

Parental Overvaluation Scale, Child Report (POS-C; adapted from Brummelman, Thomaes, Nelemans, Orobio de Castro, & Bushman, 2014). The POS-C is a 7-item child-report questionnaire that assesses the degree to which parents believe that their child is more unique and special than other children (i.e., their level of overvaluation) from the child's perspective. This scale was adapted directly from the parent-report POS for the proposed study. Responses were provided on a 4-point Likert scale ranging from 0 (*Not really true*) to 3 (*Completely true*). Sample items included, "My mom/dad thinks I am more special than other children" and "My mom/dad thinks that I deserve special treatment" (see Appendix L). The internal consistency for this scale in the current study was $\alpha = .77$.

Parental Acceptance-Rejection Questionnaire (PARQ; Rohner, 1980). The PARQ is a 60-item questionnaire that was used to measure perceived parental warmth or rejection from both the child's and parent's perspective. Responses were made on a 4-point Likert scale ranging from 1 (*Almost never true*) to 4 (*Almost always true*). There are three versions of the PARQ (i.e., the Parent², Adult, and Child versions). For the purposes of the current study, both the parent and child version of the PARQ were used. The parent version of the measure assessed parents' (i.e., the primary caregivers') perceptions of how they treat their children, whereas the child version assessed how the child perceived that their primary caregiver treats them. The current study focused on the

² Rohner (1980) describes this scale as the Mother PARQ. However, for the purposes of the current study, this scale will be referred to as the Parent scale, as Rohner (1980) specified that this scale is to be filled out by whoever acts as the child's primary caregiver(s).

20-item warmth/affection subscale, which specifically measured the degree to which parents were perceived to provide their children with love and affection without condition. Sample items included, “I make it easy for my child to confide in me” (parent version; see Appendix E) and “My mother/father makes me feel proud when I do well” (child version; see Appendix F). When analyzed as a separate subscale, low scores indicate minimum perceived warmth/affection (i.e., maximum perceived rejection), and high scores reveal maximum perceived warmth/affection. The PARQ demonstrated acceptable criterion validity based on relations with other established parent behavior measures (see Rohner, 1980). The warmth/affection subscale from the child version has exhibited excellent reliability ($\alpha = .90$). Scores on the child version also exhibited exceptional reliability ($\alpha = .95$) in the present sample. Rohner (1980) obtained reliability coefficients ranging from .67 to .85 for the parent version of the PARQ, with the warmth/affection subscale having the highest reliability ($\alpha = .85$). The warmth/affection subscale for the parent report in the current study had a reliability coefficient of $\alpha = .65$.

Alabama Parenting Questionnaire (APQ; Shelton, Frick, & Wootton, 1996). The APQ is a 42-item multi-informant (child and parent) measure, useful in identifying specific types of parenting behaviors that may impact the development and functioning of youth (Zlomke, Bauman, & Lamport, 2015). The APQ is composed of five subscales that assess different parenting practices: Positive Parenting, Corporal Punishment, Inconsistent Discipline, Parental Involvement, and Poor Monitoring/Supervision. For the purposes of the current study, only the Inconsistent Discipline scale (6 items) was used for analysis. Responses on the APQ were made on a 5-point Likert scale ranging from 1 (*Never*) to 5 (*Always*). Examples of inconsistent discipline items on the parent APQ

included, “You threaten to punish your child and then do not actually punish him/her” and “The punishment you give your child depends on your mood” (see Appendix G). Corresponding items from the child APQ are “Your parents threaten to punish you and then do not do it” and “The punishment your parents give depends on their mood” (see Appendix H). The Inconsistent Discipline Subscale has shown moderate internal consistency on the parent version ($\alpha = .64-.74$) and lower internal consistency on the child version ($\alpha = .53-.66$) in a sample of children/adolescents aged 6 to 13 years (Shelton et al., 1996). In the current study, the parent version yielded an internal consistency of $\alpha = .72$ and the child version yielded a reliability coefficient of $\alpha = .76$.

Triangulation Questionnaire – Parent Report. In the current study, the parent version used by Buehler et al. (2009) was used to assess how the child’s primary caregiver (i.e., parent/guardian) viewed the spouse’s/other guardian’s behavior in terms of whether he/she tries to form an alliance with the child against the primary caregiver (see Appendix D). The parent questionnaire included 13 items that were derived from three pre-existing measures (i.e., CPIC, Grych et al., 1992; Conflict and Problem Solving Scale, Kerig, 1996; Coparenting Questionnaire, Margolin, Gordis, & John, 2001). This adaptation has also been used in previous research (see Buehler et al., 2009). Responses were made on a 5-point scale ranging from 1 (*never*) to 5 (*always*) with higher scores indicating more triangulation. Sample items included, “How often does your spouse undermine your parenting?” and “How often does your spouse involve the child in disagreements between you and your spouse?” (see Appendix D). Buehler et al. (2009) reported acceptable reliability coefficients for both the husband about wife ($\alpha = .84$) and the wife about husband ($\alpha = .82$). Given that custodians who participated in the current

study varied in terms of their roles as caregiver (e.g., aunt, stepmother), an internal consistency coefficient was generated for the primary caregiver about a co-caregiver. The internal consistency for the full scale was $\alpha = .85$. However, as noted above, parent report was not considered in the primary analyses as a result of the low response rate.

Parental Overindulgence Assessment Scale (POAS; Bredehoft & Walcheski, 2005). The POAS is a 30-item questionnaire used to assess parental overindulgence from the parent's perspective (Walcheski, Bredehoft, & Leach, 2006). More specifically, it measures the degree to which a parent holds overindulgent attitudes and displays overindulgent behavior toward his/her child. Sample items included, "I give my child all the toys he/she wants" and reverse-scored items such as, "I have my child do chores" (see Appendix I). Responses were made on a 5-item Likert scale ranging from 1 (*Never or almost never*) to 5 (*Always or almost always*). The POAS consists of three subscales that comprise the total score: (1) Too much (i.e., too many clothes, toys, privileges, etc.), (2) Over-nurture (i.e., excessive attention, over-involvement, etc.), and (3) Soft structure (i.e., no chores, unenforced rules, etc.). This scale has demonstrated good total scale reliability ($\alpha=.85$) and subscale reliability (Too much, $\alpha = .78$; Over-nurture, $\alpha = .75$; Soft-structure, $\alpha = .71$; Walcheski et al., 2006). Construct validity has been supported using several different established parenting measures (see Bredehoft & Walcheski, 2005). In the current study internal consistency for the full scale was $\alpha = .86$.

Parental Overvaluation Scale (POS; Brummelman, Thomaes, Nelemans, Orobio de Castro, & Bushman, 2014). The POS is a 7-item parent-report questionnaire that assesses the degree to which parents believe that their child is more unique and special than other children (i.e., their level of overvaluation). Responses were provided on a 4-

point Likert scale ranging from 0 (*Not really true*) to 3 (*Completely true*). Sample items included, “My child is more special than other children” and “My child deserves special treatment” (see Appendix K). The POS has demonstrated good internal consistency (α levels ranging from .70 to .84) and convergent, discriminant, and criterion validity (see Brummelman et al., 2014). Specifically, the POS has been associated with parental narcissism, parents’ tendencies to overestimate their child’s knowledge and intelligence relative to their actual IQ score, and with the desire for their child to stand out from other children (Brummelman et al., 2014). The internal consistency for this scale was $\alpha = .74$ in the current study.

Rosenberg Self-Esteem Scale (RSES; Rosenberg, 1965). The RSES is a 10-item questionnaire that evaluates self-reported global self-worth. Given the complex relation between pathological narcissism and self-esteem, the RSES was administered to explore how this variable functions in relation to the other variables of interest (i.e., in exploratory analyses). Responses were provided on a 4-point Likert scale ranging from 1 (*Strongly Agree*) to 4 (*Strongly Disagree*). Sample items included, “I feel that I have a number of good qualities” and “At times I think I am no good at all” (see Appendix M). The RSES has demonstrated good internal consistency in adolescent samples ($\alpha = .81$; Barry, McDougall, Anderson, & Bindon, 2018). The internal consistency of the RSES was $\alpha = .89$ in the current study.

Procedure

Initial data were collected after receiving approval from the Institutional Review Board (IRB) and the superintendent and classroom instructors of the school district from which the first 94 participants were recruited. Parents/guardians were asked to provide

informed consent for their adolescent(s) to take part in the study on a consent form that was sent home with the adolescents. Parents/guardians were asked to provide their email and/or home address on the consent forms so that they could complete the parent measures electronically, by clicking a link sent to them via email, or by hard copy. All adolescent participants who returned the consent form, regardless of whether parents provided consent, were rewarded with a small incentive. Adolescents were also asked to provide their assent to participate in the study. Upon receiving parental consent and adolescent assent, data from participants were collected in a classroom setting using the Qualtrics system (i.e., each adolescent was given access to a laptop and completed the survey online). A pizza party was provided to participants in exchange for their time and effort in the study. Parents were incentivized with a chance to win one of five \$50 Visa gift cards by having their name put into a lottery. Due to low parent participation, those parents who consented to participate in the study were sent three reminder emails to complete the study, over the course of approximately 6 months. Notably, these attempts were unsuccessful at obtaining a meaningful number of parent responses.

A second round of data were collected online using the Qualtrics survey company to recruit additional adolescent participants. Subsequent to receiving IRB approval to make modifications to the participant recruitment process, parents of adolescents ages 12 to 14 were contacted via email about the opportunity for their child to participate in the current study. Each email contained a link that included electronic copies of the parent consent form, adolescent assent form, and the survey questions. Parents and adolescents provided their consent and assent, respectively, by clicking “agree” or “disagree.” Notably, in providing their consent for their child to participate in the study, parents also

agreed to not monitor their child's survey and/or complete the survey themselves. Each parent received an incentive for their child's participation, provided that their child fully completed the survey questions. Incentives varied and included cash, airline miles, gift cards, redeemable points, sweepstakes entrance, and vouchers. Given the poor parental response rate that emerged during the first round of data collection, parent-report data were not collected in the second round of data collection. Moreover, the self-report measures that were completed by the adolescents were slightly modified in order to clarify the instructions; however, the content of the items remained unchanged.

CHAPTER III - RESULTS

Preliminary Analyses

Descriptive statistics for the primary adolescent-reported variables of interest are displayed in Table 1. It is important to note that parent-report variables are not displayed, due to poor parental response ($N = 18$); analyses involving parent-report variables are discussed in Appendix O. The majority of variables were normally distributed, with the exception of adolescent-reported triangulation and parental warmth, which were somewhat positively and negatively skewed, respectively. Regarding the former, the majority of participants indicated experiencing low levels of triangulation. In terms of the latter, participants tended to report experiencing relatively high levels of parental warmth. Notably, no data were truncated or removed, as the screening process did not indicate the presence of any extreme outliers (i.e., no data were greater than 4 standard deviations above the mean).

Table 1

Descriptive Statistics for Primary Variables of Interest (Adolescent Report)

Variable (Possible Range)	<i>N</i>	Min.	Max.	<i>M</i>	<i>SD</i>	<i>Skewness</i> (<i>Std</i> <i>Error</i>)	<i>Kurtosis</i> (<i>Std</i> <i>Error</i>)
Pathological Narcissism (0 to 5)	148	.65	4.35	2.27	.83	.44 (.20)	-.40 (.40)
Vulnerable Narcissism (0 to 5)	148	.18	4.79	2.04	1.00	.48 (.20)	-.52 (.40)
Triangulation (7 to 28)	148	7	27	11.15	4.81	1.39 (.20)	1.23 (.40)
Overindulgence (30 to 150)	148	51	134	89.26	14.14	.24 (.20)	1.14 (.40)
Overvaluation (0 to 21)	148	7	28	16.64	4.46	.33 (.20)	-.00 (.40)
Warmth	148	40	80	69.81	10.26	-1.24 (.20)	.71 (.40)

Table 1 (continued)

(20 to 80) Inconsistent Discipline (6 to 30)	148	6	29	14.11	4.39	.43 (.20)	.28 (.40)
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Correlational analyses were conducted to determine whether gender (coded as 1 = male, 2 = female) and/or ethnicity (coded as White = 1, Non-White = 2) were related to either measure of adolescent narcissism (i.e., pathological or vulnerable narcissism). No significant associations resulted among these variables; as a result, gender and ethnicity were not controlled for in the remaining primary analyses.

Correlational Analyses

Correlations among the primary variables of interest are listed in Table 2. In support of Hypothesis 1, a significant, positive correlation resulted between pathological narcissism and triangulation, $r = .38, p < .001$. In addition, a significant, negative association was found between pathological narcissism and parental warmth, $r = -.17, p = .04$, providing support for Hypothesis 2. Pathological narcissism was positively related to overvaluation, $r = .33, p < .001$ but demonstrated no association with overindulgence, $r = .00, p = .99$; thus, Hypothesis 3 was only partially supported. Vulnerable narcissism and inconsistent discipline were positively correlated, $r = .35, p < .001$, providing support for Hypothesis 4.

Table 2

Correlations among Primary Variables of Interest (Adolescent Report)

	1	2	3	4	5	6	7	8
1. Pathological Narcissism	1	.97***	.77***	.38***	.00	.33***	-.17*	.40***

Table 2 (continued)

2. Vulnerable Narcissism	1	.58***	.37***	-.03	.25**	-.20*	.35***
3. Grandiose Narcissism		1	.29***	.09	.41***	-.04	.39***
4. Triangulation			1	-.07	.19*	-.22**	.44***
5. Overindulgence				1	.33***	.32***	.09
6. Overvaluation					1	.20*	.28***
7. Warmth						1	-.33***
8. Inconsistent Discipline							1

Note. * $p < .05$; ** $p < .01$; *** $p < .001$

Regression Analyses

Four linear regression models were conducted to examine the degree to which child-reported parenting (i.e., parental warmth, overvaluation, overindulgence, inconsistent discipline) moderated the relation between triangulation and pathological narcissism. Regarding the first three models, triangulation was entered into the first step along with the moderator of interest (i.e., parental warmth, overvaluation, or overindulgence). The interaction term between triangulation and the moderating variable (e.g., triangulation x parental warmth) was entered into the second step of each of the three models. Pathological narcissism served as the dependent variable in each of the models (see Table 3). A Bonferroni correction (i.e., $\alpha_{pc} = .0125$) was used to control for family-wise error, given that four moderation models were conducted. The computational tool, PROCESS (Hayes, 2012), was used in SPSS to analyze the data.

The model for overindulgence yielded a main effect for triangulation, $B = .07$, $SE = .01$, $p < .001$; however, no main effect emerged for overindulgence, $B = .00$, $SE = .01$, $p = .74$. There was no significant interaction effect, $B = .00$, $SE = .00$, $p = .57$; thus, Hypothesis 5 was not supported. In the model examining the moderating impact of

overvaluation, there were main effects found for both overvaluation, $B = .05$, $SE = .01$, $p = .001$ and triangulation, $B = .06$, $SE = .01$, $p < .001$, but the interaction effect was non-significant, $B = .00$, $SE = .00$, $p = .35$. As a result, Hypothesis 6 was not supported.

Finally, in the model examining parental warmth, a main effect was evident for triangulation, $B = .06$, $SE = .01$, $p < .001$, but not for parental warmth, $B = -.01$, $SE = .01$, $p = .25$. Moreover, no significant interaction effect emerged, $B = -.00$, $SE = .00$, $p = .73$.

Therefore, Hypothesis 7 was not supported.

Table 3

Prediction of Pathological Narcissism from Triangulation, Overindulgence, Overvaluation, and Warmth

Predictor	Overvaluation			Overindulgence			Parental Warmth		
	<i>B</i>	<i>SE</i>	<i>f</i> ²	<i>B</i>	<i>SE</i>	<i>f</i> ²	<i>B</i>	<i>SE</i>	<i>f</i> ²
<i>Step 1</i>	<i>R</i> ² = .214**			<i>R</i> ² = .146**			<i>R</i> ² = .154**		
Triangulation	.06**	.01	.14	.07**	.01	.17	.06**	.01	.15
Parenting approach	.05*	.01	.09	.00	.01	.00	-.01	.01	.01
<i>Step 2</i>	<i>R</i> ² change = .005			<i>R</i> ² change = .002			<i>R</i> ² change = .001		
Triangulation	.06**	.01	.11	.07**	.01	.17	.06**	.01	.15
Parenting approach	.05**	.01	.09	.00	.01	.00	-.01	.01	.01
Triangulation X Parenting approach	.00	.00	.01	.00	.00	.00	-.00	.00	.00

Note. * $p < .025$; ** $p < .001$

For the fourth model, triangulation was entered into the first step along with inconsistent discipline. The interaction term between triangulation and inconsistent

discipline was entered into the second step of the model, with vulnerable narcissism serving as the dependent variable (see Table 4). The results of this analysis revealed main effects for both triangulation, $B = .06$, $SE = .02$, $p = .002$, and inconsistent discipline, $B = .05$, $SE = .02$, $p = .005$. The interaction effect was not significant, $B = -.00$, $SE = .00$, $p = .47$. Thus, there was no support for Hypothesis 8.

Table 4

Prediction of Vulnerable Narcissism from Triangulation and Inconsistent Discipline

Predictor	<i>B</i>	<i>SE</i>	f^2
<i>Step 1</i>		$R^2 = .184^{**}$	
Triangulation	.06*	.02	.07
Inconsistent discipline	.05*	.02	.06
<i>Step 2</i>		$R^2 \text{ change} = .003$	
Triangulation	.06*	.02	.08
Inconsistent discipline	.06*	.02	.06
Triangulation X Inconsistent discipline	-.00	.00	.00

Note. * $p < .025$; ** $p < .001$

Exploratory Analyses

To examine what specific facets of pathological narcissism were related to the parenting variables of interest (as reported by the adolescent participants), *post hoc* correlational analyses were conducted. Contingent Self-Esteem, Exploitativeness, Self-Sacrificing Self-Enhancement, Hiding the Self, Grandiose Fantasy, Devaluing the Self and Others, and Entitlement Rage were all positively associated with triangulation,

overvaluation, and inconsistent discipline. Additionally, Contingent Self-Esteem, Devaluing the Self and Others, and Entitlement Rage were negatively related to parental warmth. Notably, none of the facets were significantly associated with overindulgence.

Table 5

*Correlations among Pathological Narcissism Facets and Parenting Variables
(Adolescent Report)*

	Triangulation	Over-indulgence	Over-valuation	Warmth	Inconsistent Discipline
Contingent Self-Esteem	.32***	-.09	.24**	-.19*	.33***
Exploitativeness	.26**	.11	.23**	.00	.36***
Self-Sacrificing	.21*	.14	.32***	.04	.26**
Self-Enhancement					
Hiding the Self	.34***	-.05	.17*	-.12	.21**
Grandiose	.21*	-.01	.36***	-.11	.29***
Fantasy					
Devaluing the Self and Others	.37***	.00	.23**	-.20*	.31***
Entitlement	.31***	.05	.25**	-.18*	.38***

Note. $N = 148$; * $p < .05$; ** $p < .01$; *** $p < .001$

Relationship Satisfaction. As previously mentioned, parent participants completed the triangulation measure about their own parenting approach (i.e., the degree to which they initiate triangulation) and that of their child's other primary caregiver. Notably, 10 (66.7%) of the parent participants indicated that they completed the triangulation measure about their husband, 1 (6.7%) about an ex-husband, and 4 participants (26.7%) did not indicate about whom they completed the measure. Additionally, only 9 of the 15 (60%) parent participants indicated that they completed the triangulation measure about the same individual who they rated on the Relationship Satisfaction scale (using a scale ranging from 1 to 5, with 1 indicating the lowest level of satisfaction and 5 the highest).

As a result, only these 9 participants were considered in analyses regarding relationship satisfaction and its relation to the other variables of interest (see Table 6); however, these results should be interpreted with significant caution given the underpowered nature of the sample.

Table 6

Correlations among Parent-Reported Relationship Satisfaction and other Parent-Reported Variables of Interest

	1	2	3	4	5	6
1. Relationship Satisfaction	1	-.75*	.05	.06	.35	-.14
2. Triangulation		1	.32	.07	-.40	.38
3. Overindulgence			1	.82**	.20	-.29
4. Overvaluation				1	.26	-.21
5. Warmth					1	-.68*
6. Inconsistent Discipline						1

Note. $N = 9$; * $p < .05$; ** $p < .01$; *** $p < .001$

Relationship satisfaction was negatively correlated with triangulation, $r = -.75$, $p = .02$, such that lower relationship satisfaction was associated with higher levels of parent-initiated triangulation.

Adolescent Self-Esteem. Correlations were examined between adolescent-reported self-esteem and the primary variables of interest and are listed in Table 7. Significant negative correlations were found between self-esteem and pathological narcissism, $r = -.49$, $p < .001$, vulnerable narcissism, $r = -.58$, $p < .001$, triangulation, $r = -.32$, $p < .001$, and inconsistent discipline, $r = -.22$, $p = .007$. Self-esteem was positively correlated with overindulgence, $r = .19$, $p = .02$, and perceived parental warmth, $r = .33$, $p < .001$. No significant correlation emerged between self-esteem and overvaluation, $r = .07$, $p = .41$, or grandiose narcissism, $r = -.09$, $p = .27$.

Table 7

Correlations among Primary Variables of Interest and Self-Esteem (Adolescent Report)

	Self-esteem
Pathological Narcissism	-.49***
Vulnerable Narcissism	-.58***
Grandiose Narcissism	-.09
Triangulation	-.32***
Overindulgence	.19*
Overvaluation	.07
Warmth	.33***
Inconsistent Discipline	-.22**

Note. $N = 148$; * $p < .05$; ** $p < .01$; *** $p < .001$

Four regression models were conducted that mirrored the models from primary analyses; however, self-esteem was examined as the dependent variable instead of narcissism. Consistent with the primary analyses, a Bonferroni correction (i.e., $\alpha_{pc} = .0125$) was used to control for family-wise error. In the first model, there was a main effect for triangulation, $B = -.45$, $SE = .11$, $p < .001$, such that higher levels of triangulation predicted lower levels of self-esteem. No main effect was found for overvaluation, $B = .19$, $SE = .11$, $p = .10$. There was no significant interaction effect between triangulation and overvaluation, $B = -.02$, $SE = .02$, $p = .29$. In the second model, there was a main effect for triangulation, $B = -.41$, $SE = .10$, $p < .001$, but there was no main effect for overindulgence, $B = .08$, $SE = .04$, $p = .03$. No significant interaction effect emerged in the second step of the model, $B = .00$, $SE = .01$, $p = .87$. In the third model, a significant main effect resulted for triangulation, $B = -.34$, $SE = .10$, $p = .001$, and parental warmth, $B = .17$, $SE = .05$, $p < .001$, such that higher levels of parental warmth predicted higher levels of self-esteem. No significant interaction emerged, $B = .02$, $SE = .01$, $p = .08$. In the fourth model, a significant main effect was found for

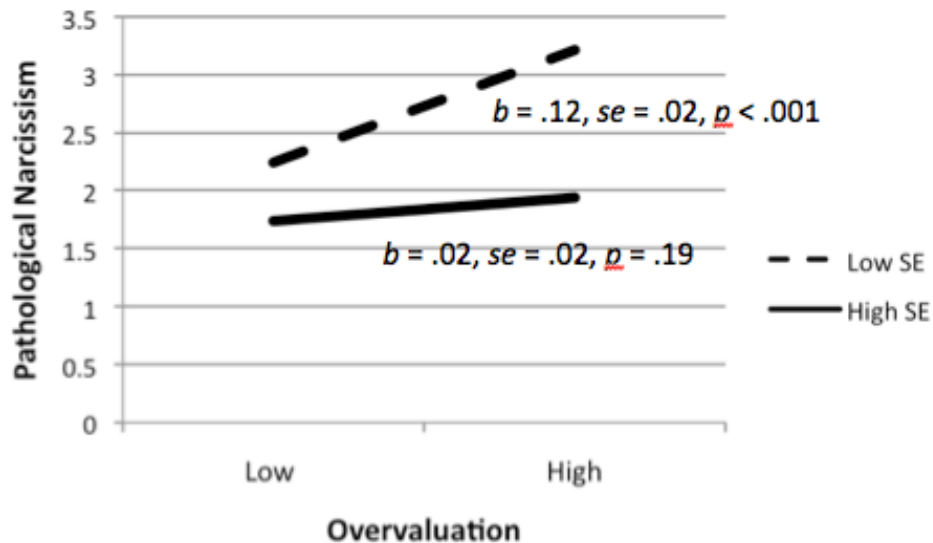
triangulation, $B = -.36$, $SE = .12$, $p = .002$, but there was no main effect for inconsistent discipline, $B = -.14$, $SE = .13$, $p = .26$. There was no significant interaction effect, $B = .04$, $SE = .02$, $p = .05$.

Regression analyses were also conducted to examine the main and interactive effects of triangulation, each of the negative parenting approaches under investigation, and self-esteem on pathological (models 1 to 3) and vulnerable narcissism (model 4), which served as the dependent variables. As in the primary analyses, four models were conducted and a Bonferroni correction (i.e., $\alpha_{pc} = .0125$) was used to control for family-wise error. Triangulation, the negative parenting approach variable (i.e., overvaluation, overindulgence, lack of parental warmth, inconsistent discipline), and self-esteem were entered into the first step of the model. In the second step of the model, 2-way interactions between triangulation, the negative parenting approach, and self-esteem were entered. The 3-way interaction between triangulation, type of negative parenting approach, and self-esteem was entered into the third step of the model. The computational tool, PROCESS (Hayes, 2012), was used in SPSS to analyze the data.

In the first model, a main effect resulted for overvaluation, $B = .06$, $SE = .01$, $p < .001$, and self-esteem, $B = -.06$, $SE = .01$, $p < .001$, such that higher levels of overvaluation predicted higher levels of self-reported pathological narcissism and higher levels of self-reported self-esteem predicted lower levels of self-reported pathological narcissism in adolescents. There was also a main effect for triangulation, $B = .03$, $SE = .01$, $p = .01$. A significant 2-way interaction emerged between overvaluation and self-esteem, $B = -.01$, $SE = .00$, $p = .002$. *Post hoc* examination of this interaction revealed that pathological narcissism levels were highest when both high levels of parental

overvaluation and low levels of self-esteem were endorsed (see Figure 1). The interactions between triangulation and overvaluation, $B = -.00$, $SE = .00$, $p = .54$, and triangulation and self-esteem, $B = .00$, $SE = .00$, $p = .57$, were not significant. No significant three-way interaction effect emerged, $B = .00$, $SE = .00$, $p = .71$.

Figure 1. Interaction between parental overvaluation and adolescent self-esteem in predicting pathological narcissism



In the second model, a main effect resulted for triangulation, $B = .04$, $SE = .01$, $p = .001$, and self-esteem, $B = -.06$, $SE = .01$, $p < .001$, such that higher levels of triangulation predicted higher levels of pathological narcissism and higher levels of self-esteem predicted lower levels of pathological narcissism. There was no main effect for parental overindulgence, $B = .01$, $SE = .00$, $p = .17$. There were also no significant effects for the interactions between triangulation and overindulgence, $B = .00$, $SE = .00$, $p = .51$, triangulation and self-esteem, $B = -.00$, $SE = .00$, $p = .66$, or overindulgence and self-esteem, $B = .00$, $SE = .00$, $p = .83$. There was no significant 3-way interaction between triangulation, overindulgence, and self-esteem, $B = .00$, $SE = .00$, $p = .43$. In the

third model, there were significant main effects for triangulation, $B = .04$, $SE = .01$, $p = .001$, and self-esteem, $B = -.05$, $SE = .01$, $p < .001$. No main effect was evident for parental warmth, $B = .00$, $SE = .01$, $p = .75$. No significant interaction effects emerged between triangulation and parental warmth, $B = .00$, $SE = .00$, $p = .80$, triangulation and self-esteem, $B = -.00$, $SE = .00$, $p = .48$, or warmth and self-esteem, $B = -.00$, $SE = .00$, $p = .38$. Moreover, no significant result emerged from the 3-way interaction between triangulation, parental warmth, and self-esteem, $B = .00$, $SE = .00$, $p = .94$.

In the fourth model, vulnerable narcissism was examined as the dependent variable. Main effects resulted for inconsistent discipline, $B = .04$, $SE = .02$, $p = .01$ and self-esteem, $B = -.08$, $SE = .01$, $p < .001$, such that vulnerable narcissism was associated with higher levels of inconsistent discipline and lower levels of self-esteem predicted higher levels of vulnerable narcissism. There was no main effect for triangulation, $B = .03$, $SE = .02$, $p = .08$. No significant 2-way interactions emerged in the second step. There was also no effect for the 3-way interaction between triangulation, inconsistent discipline, and self-esteem, $B = .00$, $SE = .00$, $p = .60$, in the third step.

CHAPTER IV – DISCUSSION

The primary aim of the present study was to develop a better empirical understanding of the maladaptive parenting approaches that are related to pathological narcissism in adolescents. No known studies have investigated the relation between parent-initiated triangulation and pathological narcissism. The current study indicated that higher levels of perceived parent-initiated triangulation are associated with higher levels of self-reported pathological narcissism in youth. Additionally, there were links between parent-initiated triangulation and some of the other parenting approaches under investigation. More specifically, parent-initiated triangulation was positively related to overvaluation and inconsistent discipline and negatively related to parental warmth. It is important to note that the results of the current study were highly powered, as a *post hoc* power analysis indicated an achieved power level of .997 with an effect size of $f^2 = .25$, and an alpha = .0125. Therefore, the results of the current study can be interpreted with confidence.

Overall, these results suggest that adolescents who report experiencing high levels of triangulation (i.e., being inappropriately involved in the relationship between their primary caregivers) may be at a greater risk of exhibiting high levels of pathological narcissism. Additionally, the presence of parent-initiated triangulation may signal the presence of other maladaptive parenting approaches, such as overvaluation, inconsistent discipline, and low levels of parental warmth. This pattern is intuitive and supported by the literature; as previously mentioned, research has indicated that marital dissatisfaction, which may underlie parent-initiated triangulation, often leads to maladaptive parenting

(Pedro et al., 2012). Regardless of the causal factors involved in triangulation, when a parent-child dynamic includes triangulation, it stands to reason that other negative parenting practices will also be present.

Pathological Narcissism, Triangulation, and Overindulgence

As previously mentioned, there may be several reasons that pathological narcissism and triangulation are related. Experiencing triangulation may potentially inhibit an adolescent from developing an autonomous and individual sense of self, which serves as the basis of narcissistic behavior (e.g., constantly seeking approval from others). Triangulation and pathological narcissism are associated with similar adolescent intrapersonal problems such as internalizing issues and the perception that they have little support from their peer group. Likewise, youth who exhibit high levels of pathological narcissism and who endorse experiencing higher levels of triangulation demonstrate similar, negative interaction styles (e.g., coercion, manipulation). Finally, the overall family dynamics involved in a triangulated family system (i.e., the child gaining an inappropriate amount of authority coupled with lack of parental support and/or parental warmth) may contribute to the tenuous sense of self that is paramount to narcissism (Rhodewalt et al., 1998).

Notably, triangulation was not significantly related to overindulgence. This lack of association may be due to the fact that overindulgence, unlike the other parenting approaches under investigation, is far less predicated on psychological control, which arguably serves as the crux of triangulation. Rather, overindulgence, which involves unconditionally gratifying a child's wants, is arguably more akin to permissive parenting than it is control.

Contrary to what was expected and as with triangulation, pathological narcissism was not correlated with overindulgence. Moreover, none of the individual facets of pathological narcissism were related to overindulgence. It may be that overindulgence is related to the grandiose sense of self that is characteristic of narcissism, but not the unstable and fragile sense of self that is also a component of pathological narcissism. Furthermore, pathological narcissism, as measured by the PNI, captures this underlying insecurity more so than other measures of narcissism (e.g., the NPI, NPIC), which are thought to assess a more grandiose and non-pathological form of narcissism that is predicated on vanity, establishing authority over others, and exploiting others as a means of obtaining said authority (Barry & Kauten, 2014; Barry & Wallace, 2010; Miller & Campbell, 2011). For these reasons, it may be that overindulgence is more relevant for understanding the etiology of non-pathological narcissism as opposed to pathological narcissism. Taken another way, as demonstrated by Cramer (2011), overindulgence may only be related to narcissism when other developmental precursors are also present, such as exhibitionism and impulsivity. In this way, the relation between overindulgence and pathological narcissism may be more nuanced and complex and warrant further investigation.

Triangulation and Other Maladaptive Parenting Approaches

Contrary to hypotheses, the combination of parent-initiated triangulation with the other negative parenting approaches under investigation (i.e., overindulgence, overvaluation, inconsistent discipline, low parental warmth) did not demonstrate any additional predictive utility above and beyond the negative parenting approaches themselves. In other words, adolescents who endorsed experiencing high levels of

triangulation in addition to high levels of other negative parenting approaches, did not appear to be at a greater risk of exhibiting high levels of pathological narcissism. This finding may be due to the fact that some of the maladaptive parenting approaches (i.e., overvaluation, lack of parental warmth, inconsistent discipline) do not have any additional, unique impact on adolescent functioning and self-perception beyond the shared features between these parenting strategies and triangulation.

More specifically, in the current study, triangulation demonstrated significant correlations with overvaluation, low levels of parental warmth, and inconsistent discipline. In terms of overvaluation, it may be that a child receives excessive praise from the parent who initiates a coalition with him/her as a means of coercing the child into forming an alliance. Further, a child may experience low parental warmth from the parent with whom he/she has not formed an alliance; moreover, research has indicated that parents' warmth towards their child is highly dependent on marital quality and the quality of the relationship that the child has with the opposite parent (White, 1999) and that being triangulated decreases perceptions of experiencing warmth (Krishnakumar & Buehler, 2000). Therefore, it stands to reason that children who are triangulated necessarily experience low levels of warmth in some capacity. Finally, inconsistent discipline, which demonstrated a moderate association with triangulation, is also likely to be a necessary component of triangulation. Ato and colleagues (2015) indicated that discord in the marital relationship negatively impacts how efficiently caregivers parent their children, which arguably may lend itself to indiscriminately disciplining a child. Moreover, the parent who elicits an alliance may be wont to use less discipline to garner

favor with the child; thus, a child may experience different forms/degrees of discipline across caregivers as well.

Self-esteem, Pathological Narcissism and Negative Parenting Approaches

Overall, self-esteem and pathological narcissism demonstrated divergent patterns of associations with triangulation, inconsistent discipline, overindulgence, and warmth. However, in general, these associations are consistent with the literature. As previously mentioned, the experience of being triangulated has the potential to cause a child to experience self-blame and develop internalizing problems (Buehler & Welsh, 2009; Fosco & Grych, 2010); in this way, a negative association between triangulation and self-esteem would be expected. Likewise, inconsistent discipline has also been specifically linked to aspects of vulnerable narcissism, such as contingent self-esteem (i.e., a fragile self-esteem; Mechanic & Barry, 2014) and thus fits with the present findings. Also as expected, self-esteem and parental warmth were positively correlated, consistent with research showing that parental warmth is associated with higher functioning in children (see McKinney & Brown, 2017).

Notably, self-esteem was positively related to overindulgence, which in turn, was not related to pathological narcissism or triangulation. Given that overindulgence is thought to give way to the belief that one is entitled to positive regard and favors from others (Capron, 2004) and directly contributes to the development of a grandiose sense of self (Kohut, 1977), as mentioned previously, it may be that overindulgence is more relevant when considering the etiology of non-pathological narcissism, which has consistently demonstrated a positive relation to self-esteem (e.g., Barry & Kauten, 2014; Barry & Wallace, 2010; Capron, 2004), as opposed to pathological narcissism.

While there was no direct association between self-esteem and overvaluation, interestingly, regression and *post hoc* analysis revealed that low self-esteem moderated the relation between overvaluation and pathological narcissism, such that adolescents who endorsed high levels of overvaluation and low levels of self-esteem also endorsed the highest levels of pathological narcissism. This finding indicates that adolescents who experience overvaluation from their caregivers and also experience low self-esteem may be at the highest risk for exhibiting pathological narcissism. This finding is important given the mixed nature of the research regarding the relation of overvaluation to narcissism (see Brummelman et al., 2015; Horton and Tritch, 2014; Otway & Vignoles, 2006) and demonstrates that self-esteem may be a particularly important variable to bear in mind when considering the impact that overvaluation has on the emotional and behavioral functioning of adolescents. In other words, adolescents who experience overvaluation are most vulnerable to exhibiting higher levels of pathological narcissism, if they experience other risk factors that foster low self-esteem. Thus, it may be important to explore and determine what those other risk factors are in order to develop a better understanding of this particular profile.

Limitations

While the results of this study shed light on additional risk factors that should be considered when determining the likelihood that an adolescent will demonstrate high levels of pathological narcissism, it also has several limitations that should be noted. Given the low parental response rate, it was only possible to analyze the results using adolescent report. This single informant design may have caused some of the results to be inflated, due to shared source variance and the possibility that adolescents may be

more apt to over-report negative parenting practices and styles compared to parents/caregivers. Having adolescent report is advantageous in that it provides information about self-perception that is not accessible to others. Nevertheless, having additional, collateral forms of information would help to develop a more comprehensive understanding of how the variables under investigation impact self-perception in adolescents.

The cross-sectional design of the current study limited the ability to draw conclusions regarding the developmental trajectory of pathological narcissism and how triangulation and the other maladaptive parenting approaches under investigation affect later adolescent outcomes. A longitudinal design would allow for investigation of the bidirectional relations between pathological narcissism and maladaptive parenting strategies. Another limitation involved differences that emerged between the two samples in terms of the magnitude of several of the correlations and the difference in mean scores for pathological and vulnerable narcissism (with stronger correlations and higher levels of pathological and vulnerable narcissism endorsed in the Qualtrics sample). However, each of the correlations fell in the same direction, despite being statistically different in magnitude. Similarly, despite the moderate differences in pathological and vulnerable narcissism scores that resulted across the samples, the overall pattern of results did not significantly differ between the two samples. It may be that regional differences between the two samples contributed most to these discrepancies, as explained in Appendix N. Furthermore, the majority of the overall sample was composed of participants from the southern region of the United States. For this reason, the

generalizability of the results may be limited, given both the lack of regional heterogeneity and uneven distribution of regional differences within the overall sample.

Future Research

The current study used several regression analyses to examine the impact that a single maladaptive parenting approach (e.g., overindulgence) has on the relation between triangulation and pathological narcissism. Given that no significant findings emerged, it may be important to use another form of analysis in larger samples to examine the impact that the presence of multiple maladaptive parenting approaches have on this relation. As previously mentioned, some past research has indicated that the combination of certain parenting styles has the most utility in terms of predicting the degree to which adolescents exhibit high levels of narcissism (e.g., Otway & Vignoles, 2006). A longitudinal design would also make it possible to observe the long-term outcomes associated with experiencing triangulation and the other maladaptive parenting practices under investigation as an adolescent and should be considered in future research efforts.

Furthermore, given that overindulgence was the only parenting variable that did not demonstrate any association with pathological narcissism or triangulation but did demonstrate a positive relation with self-esteem, future research should investigate the degree to which overindulgence may be pertinent in understanding the development of non-pathological narcissism rather than pathological narcissism. The degree to which self-esteem impacts the relation between pathological narcissism and overvaluation should also be examined further; more specifically, it may be beneficial to investigate what other risk factors may be present that contribute to a low self-esteem, which appears to put adolescents who also experience triangulation and overvaluation at a higher risk of

experiencing the negative self-perception and maladaptive behavioral and emotional functioning that are characteristic of pathological narcissism. Overall, future research efforts dedicated to understanding the parenting approaches responsible for the development of unhealthy levels of pathological narcissism is highly important, as such efforts would help to offset the negative emotional and behavioral functioning (e.g., internalizing problems, aggression) that so often accompany pathological narcissism and to improve adolescent outcomes overall.

APPENDIX A – Demographic Information

Please answer the following questions about yourself.

1. Relationship to the child
 - A. Biological mother
 - B. Biological father
 - C. Stepmother
 - D. Stepfather
 - E. Other (please specify) _____

2. Current household income
 - A. 0 – 10,000
 - B. 10,001 – 20,000
 - C. 20,001 – 30,000
 - D. 30,001 – 40,000
 - E. 40,001 – 50,000
 - F. 50,000 +

Please answer the following questions about your child.

3. Biological Sex
 - A. Male
 - B. Female

4. Current Age _____

5. Race/Ethnicity (mark only one)
- A. Asian or Pacific Islander
 - B. Black/African American
 - C. Caucasian
 - D. Hispanic
 - E. Native American
 - F. Biracial or Multiracial - Please specify: _____
 - G. Other - Please specify: _____
6. Who is the child's primary FEMALE caregiver (mark only one)?
- A. Biological mother
 - B. Stepmother
 - C. Adoptive mother
 - D. Grandmother
 - E. He/she doesn't have a female caregiver
 - F. Other: _____
7. Who is the child's primary MALE caregiver (mark only one)?
- A. Biological father
 - B. Stepfather
 - C. Adopted father
 - D. Grandfather
 - E. He/she doesn't have a male caregiver
 - F. Other: _____
8. Age of primary FEMALE caregiver _____

9. Age of primary MALE caregiver _____
10. Mother (maternal caregiver) education level
- A. Did not graduate high school
 - B. Received high school diploma/GED
 - C. Attended some college or vocational training (did not complete)
 - D. Obtained degree or certificate from apprenticeship or vocational school
 - E. Obtained two year college degree
 - F. Obtained four year college degree
 - G. Obtained masters or doctorate degree
 - H. Don't know
11. Father (paternal caregiver) education level
- A. Did not graduate high school
 - B. Received high school diploma/GED
 - C. Attended some college or vocational training (did not complete)
 - D. Obtained degree or certificate from apprenticeship or vocational school
 - E. Completed two year college
 - F. Completed four year college
 - G. Obtained masters or doctorate degree
 - H. Don't know
12. Which of the following best describes the relationship between the child's biological parents?
- A. Married to each other
 - B. Divorced from each other (your age when they divorced _____)
 - C. Currently seeking a divorce

- D. Separated, but living together (your age when they separated _____)
- E. Separated, living apart (your age when they separated _____)
- F. Never married, but still together
- G. Never married, not still together
- H. Other: _____

13. Growing up, your child has lived with his/her _____ for most of his/her life.

- A. Biological parents
- B. Biological mother
- C. Biological father
- D. Biological mother and stepfather
- E. Biological father and stepmother
- F. Adoptive mother and father
- G. Adoptive mother
- H. Adoptive father
- I. Grandparents or grandparent
- J. Other: _____

14. How often does your child see the parent that he/she does not live with?

- A. Once a week or more
- B. A few times a month
- C. A few times a year
- D. Less than once a year
- E. Never
- F. Not applicable

15. Overall, if these questions do not apply to your child, please explain who the child’s caregivers are and what role you play in the child’s life (i.e., if you are raising the child with one or more other people, please describe the nature of those relationships).

16. If you are raising your child with one or more other people, please indicate the person’s relationship to your child (i.e., father) and your level of relationship satisfaction with that person on a scale from 1 (Low) to 5 (High)

Person’s relationship to child:

	Low				High
In general, how satisfied are you with your relationship?	1	2	3	4	5

*Adapted from the Relationship Assessment Scale (Hendrick, 1988)

Person’s relationship to child:

	Low				High
In general, how satisfied are you with your relationship?	1	2	3	4	5

*Adapted from the Relationship Assessment Scale (Hendrick, 1988)

APPENDIX B – Pathological Narcissism Inventory

PNI-52

Instructions: Below you will find 52 descriptive statements. Please consider each one and indicate how well that statement describes you. There are no right or wrong answers. On the line beside the question, fill in only one answer. Simply indicate how well each statement describes you as a person on the following scale:

0	1	2	3	4	5
Not at all Like me	Moderately Unlike me	A little Unlike me	A little Like me	Moderately Like me	Very much Like me

___ 1. I often fantasize about being admired and respected.

___ 2. My self-esteem fluctuates a lot.

___ 3. I sometimes feel ashamed about my expectations of others when they disappoint me.

___ 4. I can usually talk my way out of anything.

___ 5. It's hard for me to feel good about myself when I'm alone.

___ 6. I can make myself feel good by caring for others.

___ 7. I hate asking for help.

___ 8. When people don't notice me, I start to feel bad about myself.

- ___ 9. I often hide my needs for fear that others will see me as needy and dependent.
- ___ 10. I can make anyone believe anything I want them to.
- ___ 11. I get mad when people don't notice all that I do for them.
- ___ 12. I get annoyed by people who are not interested in what I say or do.
- ___ 13. I wouldn't disclose all my intimate thoughts and feelings to someone I didn't
admire.
- ___ 14. I often fantasize about having a huge impact on the world around me.
- ___ 15. I find it easy to manipulate people.
- ___ 16. When others don't notice me, I start to feel worthless.
- ___ 17. Sometimes I avoid people because I'm concerned that they'll disappoint me.
- ___ 18. I typically get very angry when I'm unable to get what I want from others.
- ___ 19. I sometimes need important others in my life to reassure me of my self-worth.

- ___ 20. When I do things for other people, I expect them to do things for me.
- ___ 21. When others don't meet my expectations, I often feel ashamed about what I wanted.
- ___ 22. I feel important when others rely on me.
- ___ 23. I can read people like a book.
- ___ 24. When others disappoint me, I often get angry at myself.
- ___ 25. Sacrificing for others makes me the better person.
- ___ 26. I often fantasize about accomplishing things that are probably beyond my means.
- ___ 27. Sometimes I avoid people because I'm afraid they won't do what I want them to do.
- ___ 28. It's hard to show others the weaknesses I feel inside.
- ___ 29. I get angry when criticized.

- ___ 30. It's hard to feel good about myself unless I know other people admire me.
- ___ 31. I often fantasize about being rewarded for my efforts.
- ___ 32. I am preoccupied with thoughts and concerns that most people are not interested
in me.
- ___ 33. I like to have friends who rely on me because it makes me feel important.
- ___ 34. Sometimes I avoid people because I'm concerned they won't acknowledge what
I do for them.
- ___ 35. Everybody likes to hear my stories.
- ___ 36. It's hard for me to feel good about myself unless I know other people like me.
- ___ 37. It irritates me when people don't notice how good a person I am.
- ___ 38. I will never be satisfied until I get all that I deserve.
- ___ 39. I try to show what a good person I am through my sacrifices.
- ___ 40. I am disappointed when people don't notice me.

- ___ 41. I often find myself envying others' accomplishments.
- ___ 42. I often fantasize about performing heroic deeds.
- ___ 43. I help others in order to prove I'm a good person.
- ___ 44. It's important to show people I can do it on my own even if I have some doubts
inside.
- ___ 45. I often fantasize about being recognized for my accomplishments.
- ___ 46. I can't stand relying on other people because it makes me feel weak.
- ___ 47. When others don't respond to me the way that I would like them to, it is hard for
me to still feel ok with myself.
- ___ 48. I need others to acknowledge me.
- ___ 49. I want to amount to something in the eyes of the world.
- ___ 50. When others get a glimpse of my needs, I feel anxious and ashamed.

___ 51. Sometimes it's easier to be alone than to face not getting everything I want from other people.

___ 52. I can get pretty angry when others disagree with me.

APPENDIX C – Triangulation-Youth Report Measure

When your mom and dad disagree, how often do they ...

	Never	Once in Awhile	Fairly Often	Very Often
1. Send a message to the other one through you because they don't want to talk to the other parent?	1	2	3	4
2. Insult (show disrespect for) the other one when they are not there?	1	2	3	4
3. Ask you what the other one is thinking, feeling, or doing because they don't want to ask the other parent?	1	2	3	4
4. Try to get you to side with one of them?	1	2	3	4

How often do you...

	Never	Once in Awhile	Fairly Often	Very Often
5. Feel caught in the middle when your parents fight?	1	2	3	4
6. Feel torn between your parents?	1	2	3	4
7. Feel like you have to take sides when your parents fight?	1	2	3	4

*Higher scores indicate more triangulation.

APPENDIX D – Triangulation-Parent Report Measure

How often does your spouse/partner do the following?

	Never	Rarely	Sometimes	Usually	Always
1. Send a message to you through this child because your spouse doesn't want to talk to you.	1	2	3	4	5
2. Insult you in front of this child when you're not there.	1	2	3	4	5
3. Ask this child about your thoughts, feelings, or behavior because they don't want to ask you.	1	2	3	4	5
4. Try to get this child to side with him/her during family or marital disagreements.	1	2	3	4	5
5. Blame this child when your spouse is really upset with you.	1	2	3	4	5
6. Keep this child out of the middle of disagreements between you and your spouse.	1	2	3	4	5
7. Undermine your parenting.	1	2	3	4	5
8. Talk with this child about conflicts with you.	1	2	3	4	5
9. Become angry with this child when angry with you.	1	2	3	4	5
10. Involve the child in disagreements between you and your spouse.	1	2	3	4	5
11. Say cruel or hurtful things about you in front of the child.	1	2	3	4	5
12. Use this child to get back at you.	1	2	3	4	5
13. Deliver messages to you through this child rather than say them to you.	1	2	3	4	5

*Higher scores indicate more triangulation.

APPENDIX E – Parental Acceptance-Rejection Questionnaire-Parent Form

Parent PARQ

The following pages contain a number of statements describing the way different parents act toward their children. Read each statement carefully and think how well it describes the way you treat your child. Work quickly; give your first impression and move on to the next item. Do not dwell on any item.

Four boxes are drawn after each sentence. If the statement is basically true about the way you treat your child, then ask yourself, “Is it almost always true?” or “Is it only sometimes true?” If you think you almost always treat your child that way, put an X in the box labeled ALMOST ALWAYS TRUE; if the statement is sometimes true about the way you treat your child, then mark SOMETIMES TRUE. If you feel the statement is basically untrue about the way you treat your child then ask yourself, “Is it rarely true?” or “Is it almost never true?” If it is rarely true about the way you treat your child put an X in the box labeled RARELY TRUE; if you feel the statement is almost never true then mark ALMOST NEVER TRUE.

Remember, there is no right or wrong answer to any statement, so be as honest as you can. Respond to each statement the way you feel you really are, rather than the way you might like to be.

	TRUE OF ME		NOT TRUE OF ME	
	Almost Always True	Sometimes True	Rarely True	Almost Never True
1. I say nice things about my child.				
2. I nag or scold my child when he/she is bad.				
3. I ignore my child.				
4. I wonder if I really love my child.				
5. I discuss general daily routines with my child and listen to what he/she has to say.				
6. I complain about my child to others when he/she does not listen to me.				
7. I take an active interest in my child.				
8. I encourage my child to bring friends home, and I try to make things pleasant for them.				
9. I make fun of my child.				
10. I ignore my child as long as he/she does not do anything to disturb me.				
11. I yell at my child when I am angry.				
12. I make it easy for my child to confide in me.				
13. I am harsh with my child.				
14. I enjoy having my child around me.				
15. I make my child feel proud when he/she does well.				

16. I hit my child even when he/she may not deserve it.				
17. I forget things I am supposed to do for my child.				
18. My child is a burden for me.				
19. I praise my child to others.				
20. I punish my child when I am angry.				
21. I make sure my child has the right kind of food to eat.				
22. I talk to my child in a warm and affectionate way.				
23. I am impatient with my child.				
24. I am too busy to answer my child's questions.				
25. I resent my child.				
26. I praise my child when he/she deserves it.				
27. I am irritable with my child.				
28. I am concerned who my child's friends are.				
29. I take real interest in my child's affairs.				
30. I say unkind things to my child.				
31. I ignore my child when he/she asks for help.				
32. I am unsympathetic to my child when he/she is having trouble.				
33. I make my child feel wanted and needed.				
34. I tell my child that he/she gets on my nerves.				

35. I pay a lot of attention to my child.				
36. I tell my child how proud I am of him/her when he/she is good.				
37. I hurt my child's feelings.				
38. I forget events that my child thinks I should remember.				
39. When my child misbehaves, I make him/her feel I don't love him/her anymore.				
40. I make my child feel what he/she does is important.				
41. When my child does something wrong, I threaten or frighten him/her.				
42. I like to spend time with my child.				
43. I try to help my child when he/she is scared or upset.				
44. When my child misbehaves, I shame him/her in front of his/her playmates.				
45. I avoid my child's company.				
46. I complain about my child.				
47. I respect my child's point of view and encourage him/her to express it.				
48. I compare my child unfavorably with other children.				
49. When I make plans, I take my child into consideration.				

50. I let my child do things he/she thinks are important, even if it is inconvenient for me.				
51. When my child misbehaves, I compare him/her unfavorably with other children.				
52. I leave my child to someone else's care (e.g. a neighbor or relative).				
53. I let my child know he/she is not wanted.				
54. I am interested in the things my child does.				
55. I try to make my child feel better when he/she is hurt or sick.				
56. I tell my child I am ashamed of him/her when he/she misbehaves.				
57. I let my child know I love him/her.				
58. I treat my child gently and kindly.				
59. When my child misbehaves, I make him/her feel ashamed or guilty.				
60. I try to make my child happy.				

APPENDIX F – Parental Acceptance-Rejection Questionnaire-Child Form

Here are some statements about the way parents act toward their children. Please think about how each of these fits the way the parent with whom you spend the most time treats you.

Four boxes are drawn after each sentence. If the statement is basically true about the way your parent treats you, then ask yourself, “Is it almost always true?” or “Is it only sometimes true?” If you think your parent almost always treats you that way, put an X in the box labeled ALMOST ALWAYS TRUE; if the statement is sometimes true about the way your parent treats you then mark SOMETIMES TRUE. If you feel the statement is basically untrue about the way your parent treats you, then ask yourself, “Is it rarely true?” or “Is it almost never true?” If it is rarely true about the way your parent treats you put an X in the box labeled RARELY TRUE; if you feel the statement is almost never true then mark ALMOST NEVER TRUE.

Remember, there is no right or wrong answer to any statement, so be as honest as you can. Answer each statement the way you feel your parent really is, rather than the way you might like him/her to be.

Please complete this form according to the parent with whom you spend the most time. Circle which parent you are answering the questions about below.

MOTHER

FATHER

OTHER: _____

	TRUE OF ME		NOT TRUE OF ME	
	Almost Always True	Sometimes True	Rarely True	Almost Never True
My mother/father...				
1. Says nice things about me.				
2. Nags or scolds me when I am bad.				
3. Totally ignores me.				
4. Does not really love me.				
5. Talks to me about our plans and listens to what I have to say.				
6. Complains about me to others when I do not listen to me.				
7. Takes an active interest in me.				
8. Encourages me to bring my friends home, and I try to make things pleasant for them.				
9. Ridicules and makes fun of me.				
10. Ignores me as long as I do not do anything to bother her.				
11. Yells at me when she is angry.				
12. Makes it easy for me to tell her things that are important to me.				
13. Treats me harshly.				
14. Enjoys having me around her.				
15. Makes me feel proud when I do well.				
16. Hits me even when I do not deserve it.				
17. Forgets things she is supposed to do for me.				

18. Sees me as a big bother.				
19. Praises me to others.				
20. Punishes me severely when he is angry.				
21. Makes sure I have the right kind of food to eat.				
22. Talks to me in a warm and loving way.				
23. Gets angry at me easily.				
24. Is too busy to answer my questions.				
25. Seems to dislike me.				
26. Says nice things to me when I deserve it.				
27. Gets mad quickly and picks on me.				
28. Is concerned who my friends are.				
29. Is really interested in what I do.				
30. Says many unkind things to me.				
31. Ignores me when I ask her for help.				
32. Thinks it is my own fault when I am having trouble.				
33. Makes me feel wanted and needed.				
34. Tells me that I get on her nerves.				
35. Pays a lot of attention to me.				
36. Tells me how proud she is of me when I am good.				
37. Goes out of her way to hurt my feelings.				
38. Forgets important things I think she should remember.				

39. Makes me feel I am not loved any more if I misbehave.				
40. Makes me feel what I do is important.				
41. Frightens or threatens me when I do something wrong.				
42. Likes to spend time with me.				
43. Tries to help me when I am scared or upset.				
44. Shames me in front of my playmates when I misbehave.				
45. Tries to stay away from me.				
46. Complains about me.				
47. Cares about what I think and likes me to talk about it.				
48. Feels other children are better than I am no matter what I do.				
49. Cares about what I would like when she makes plans.				
50. Lets me do things I think are important, even if it is inconvenient for her.				
51. Thinks other children behave better than I do.				
52. Makes other people take care of me (for example, a neighbor or relative).				
53. Lets me know I am not wanted.				
54. Is interested in the things I do.				
55. Tries to make me feel better when I am hurt or sick.				

56. Tells me how ashamed she is when I misbehave.				
57. Lets me know she loves me.				
58. Treats me gently and with kindness.				
59. Makes me feel ashamed or guilty when I misbehave.				
60. Tries to make me happy.				

APPENDIX G – Alabama Parenting Questionnaire-Parent Form

Parent Completing Form (Circle one): Mother Father Other: _____

Instructions: The following are a number of statements about your family. Please rate each item as to how often it TYPICALLY occurs in your home. The possible answers are Never (1), Almost Never (2), Sometimes (3), Often (4), Always (5). PLEASE ANSWER ALL ITEMS.

	Never	Almost Never	Sometimes	Often	Always
1. You have a friendly talk with your child.	1	2	3	4	5
2. You let your child know when he/she is doing a good job with something.	1	2	3	4	5
3. You threaten to punish your child and then do not actually punish them.	1	2	3	4	5
4. You volunteer to help with special activities that your child is involved in (such as sports, boy/girl scouts, church youth groups).	1	2	3	4	5
5. You reward or give something extra to your child for obeying you or behaving well.	1	2	3	4	5
6. Your child fails to leave a note or to let you know where he/she is going.	1	2	3	4	5
7. You play games or do other fun things with your child.	1	2	3	4	5
8. Your child talks you out of being punished after he/she has done something wrong.	1	2	3	4	5
9. You ask your child about his/her day in school.	1	2	3	4	5
10. Your child stays out in the evening past the time he/she is supposed to be home.	1	2	3	4	5
11. You help your child with his/her homework.	1	2	3	4	5
12. You feel that getting your child to obey you is more trouble than it's	1	2	3	4	5

worth.

13. You compliment your child when he/she does something well.	1	2	3	4	5
14. You ask your child what his/her plans are for the coming day.	1	2	3	4	5
15. You drive your child to a special activity.	1	2	3	4	5
16. You praise your child if he/she behaves well.	1	2	3	4	5
17. Your child is out with friends you don't know.	1	2	3	4	5
18. You hug or kiss your child when he/she has something well.	1	2	3	4	5
19. Your child goes out without a set time to be home.	1	2	3	4	5
20. You talk to your child about his/her friends.	1	2	3	4	5
21. Your child is out after dark without an adult with him/her.	1	2	3	4	5
22. You let your child out of a punishment early (like lift restrictions earlier than you originally said).	1	2	3	4	5
23. Your child helps plan family activities.	1	2	3	4	5
24. You get so busy that you forget where your child is and what he/she is doing.	1	2	3	4	5
25. Your child is not punished when he/she has done something wrong.	1	2	3	4	5
26. You attend PTA meetings, parent/teacher conferences, or other meetings at your child's school.	1	2	3	4	5
27. You tell your child that you like it when he/she helps out around the house.	1	2	3	4	5
28. You don't check that your child comes home at the time she/he was supposed to.	1	2	3	4	5
29. You don't tell your child where you are going.	1	2	3	4	5
30. Your child comes home from school more than an hour past the time you expect him/her.	1	2	3	4	5
31. The punishment you give your	1	2	3	4	5

child depends on your mood.					
32. Your child is at home without adult supervision.	1	2	3	4	5
33. You spank your child with your hand when he/she has something wrong.	1	2	3	4	5
34. You ignore your child when he/she is misbehaving.	1	2	3	4	5
35. You slap your child when he/she has done something wrong.	1	2	3	4	5
36. You take away privileges or money from your child as a punishment.	1	2	3	4	5
37. You send your child to his/her room as punishment.	1	2	3	4	5
38. You hit your child with a belt, switch, or other object when he/she has something wrong.	1	2	3	4	5
39. You yell or scream at your child when he/she has done something wrong.	1	2	3	4	5
40. You calmly explain to your child why his/her behavior was wrong when he/she misbehaves.	1	2	3	4	5
41. You use time out (make him/her sit or stand in a corner) as a punishment.	1	2	3	4	5
42. You give your child extra chores as a punishment.	1	2	3	4	5

APPENDIX H – Alabama Parenting Questionnaire-Child Form

Instructions: The following are a number of statements about your family. Please rate each item as to how often it TYPICALLY occurs in your home. The possible answers are Never (1), Almost Never (2), Sometimes (3), Often (4), Always (5). If your dad or mom is not currently living at home with you, then skip the questions that ask about that person.

	Never	Almost Never	Sometimes	Often	Always
1. You have a friendly talk with your mom	1	2	3	4	5
A. How about your dad?	1	2	3	4	5
2. Your parents tell you that you are doing a good job	1	2	3	4	5
3. Your parents threaten to punish you and then do not do it	1	2	3	4	5
4. Your mom helps with some of your special activities (such as sports, boy/girl scouts, church youth groups)	1	2	3	4	5
A. How about your dad?	1	2	3	4	5
5. Your parents reward or give something extra to you for behaving well.	1	2	3	4	5
6. You fail to leave a note or let your parents know where you are going.	1	2	3	4	5
7. You play games or do other fun things with your mom.	1	2	3	4	5
A. How about your dad?	1	2	3	4	5
8. You talk your parents out of punishing you after you have done something wrong.	1	2	3	4	5
9. Your mom asks you about your day in school.	1	2	3	4	5
A. How about your dad?	1	2	3	4	5
10. You stay out in the evening past the time you are supposed to be home.	1	2	3	4	5
11. Your mom helps you with your homework.	1	2	3	4	5
A. How about your dad?	1	2	3	4	5
12. Your parents give up trying to	1	2	3	4	5

get you to obey them because it's too much trouble.

13. Your parents compliment you when you have done something well. 1 2 3 4 5

14. Your mom asks you what your plans are for the coming day. 1 2 3 4 5

A. How about your dad? 1 2 3 4 5

15. Your mom drives you to a special activity. 1 2 3 4 5

A. How about your dad? 1 2 3 4 5

16. Your parents praise you for behaving well. 1 2 3 4 5

17. Your parents do not know the friends you are with. 1 2 3 4 5

18. Your parents hug or kiss you when you have done something well. 1 2 3 4 5

19. You go out without a set time to be home. 1 2 3 4 5

20. Your mom talks to you about your friends. 1 2 3 4 5

A. How about your dad? 1 2 3 4 5

21. You go out after dark without an adult with you. 1 2 3 4 5

22. Your parents let you out of a punishment early (like lift restrictions earlier than they originally said). 1 2 3 4 5

23. You help plan family activities. 1 2 3 4 5

24. Your parents get so busy that they forget where you are and what you are doing. 1 2 3 4 5

25. Your parents do not punish you when you have done something wrong. 1 2 3 4 5

26. Your mom goes to a meeting at school, like a PTA meeting or parent/teacher conference. 1 2 3 4 5

A. How about your dad? 1 2 3 4 5

27. Your parents tell you that they like it when you help out around the house. 1 2 3 4 5

28. You stay out later than you are supposed to and your parents don't 1 2 3 4 5

know it.					
29. Your parents leave the house and don't tell you where they are going.	1	2	3	4	5
30. You come home from school more than an hour past the time your parents expect you to be home.	1	2	3	4	5
31. The punishment your parents give depends on their mood.	1	2	3	4	5
32. You are at home without an adult being with you.	1	2	3	4	5
33. Your parents spank you with their hand when you have done something wrong.	1	2	3	4	5
34. Your parents ignore you when you are misbehaving.	1	2	3	4	5
35. Your parents slap you when you have done something wrong.	1	2	3	4	5
36. Your parents take away a privilege or money from you as a punishment.	1	2	3	4	5
37. Your parents send you to your room as a punishment.	1	2	3	4	5
38. Your parents hit you with a belt, switch, or other object when you have done something wrong.	1	2	3	4	5
39. Your parents yell or scream at you when you have done something wrong.	1	2	3	4	5
40. Your parents calmly explain to you why your behavior was wrong when you misbehave.	1	2	3	4	5
41. Your parents use time out (makes you sit or stand in a corner) as a punishment.	1	2	3	4	5
42. Your parents give you extra chores as a punishment.	1	2	3	4	5

APPENDIX I – Parental Overindulgence-Parent Report

OVERINDULGENCE¹

BY DAVID J. BREDEHOFT, PH. D., & MICHAEL J. WALCHESKI, PH.D.

DIRECTIONS: The following items contain a list of behaviors that parents may exhibit when interacting with their children. The questions are designed to measure how often you exhibit certain behaviors toward your child(ren). Rate how often you exhibit each behavior with your child(ren). Be sure not to omit any items. Please use the following scale in answering each of the questions.

RESPONSE SCALE:

- Never or almost never.....1
- Seldom.....2
- Sometimes, sometimes not.....3
- Frequently.....4
- Always or almost always.....5

The *majority* of the time...

- ___ I give my child all the clothes she/he wants.
- ___ I give my child all the toys he/she wants.
- ___ I allow my child lots of privileges.
- ___ I give my child things that she/he has not asked for.
- ___ I make sure my child is entertained.
- ___ I schedule my child for lots of activities, lessons, and sports.

- ___ I give my child more than he/she asks for.
- ___ I seek out activities for my child to participate in.
- ___ My child has more privileges than other children his/her age.
- ___ My child has toys she/he has never played with.
- ___ My child has clothes he/she has never worn.
- ___ I make rules for my child.
- ___ I enforce the rules I make for my child.
- ___ I have my child do chores.
- ___ I give my child lots of freedom.
- ___ I let my child take the lead and dominate family matters.
- ___ I hold my child to consistent standards.
- ___ My child interrupts my conversations with other adults.
- ___ I tell my child no.
- ___ I am involved in everything my child does.
- ___ I give my child a great deal of attention.
- ___ I do things for my child that he/she should be doing for him/herself.
- ___ I do things for my child rather than see her/him in distress.
- ___ I do things to make my child love me.
- ___ I hate to see my child be frustrated.
- ___ I anticipate what my child needs and provide it.
- ___ I find something for my child to do when he/she is bored.
- ___ When it is difficult, I do my child's homework for her/him.
- ___ My child usually gets what she/he wants.

____ My child's activities should be fun.

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authors.

APPENDIX J – Parental Overindulgence-Child Report*

DIRECTIONS: The following items contain a list of behaviors that your parent/guardian may exhibit when interacting with you. Rate how often your parent/guardian exhibits each behavior with you. Please use the following scale.

RESPONSE SCALE:

- Never or almost never.....1
- Seldom.....2
- Sometimes, sometimes not.....3
- Frequently.....4
- Always or almost always.....5

BEFORE STARTING:

Please circle which parent you will be answering the questions about: **MOM DAD**
OTHER: _____

The *majority* of the time...

- ___ My mom/dad gives me all the clothes I want.
- ___ My mom/dad gives me all the toys I want.
- ___ My mom/dad gives me a lot of privileges.
- ___ My mom/dad gives me things I have not asked for.
- ___ My mom/dad makes sure I am entertained.
- ___ My mom/dad puts me in a lot of activities, lessons, and sports.
- ___ My mom/dad gives me more than I ask for.
- ___ My mom/dad looks for activities for me to participate in.
- ___ I have more privileges than other children my age.

- ___ I have toys I have never played with.
- ___ I have clothes I have never worn.
- ___ My mom/dad makes rules for me.
- ___ My mom/dad enforces the rules he/she makes for me.
- ___ My mom/dad has me do chores.
- ___ My mom/dad gives me a lot of freedom.
- ___ My mom/dad lets me take the lead and dominate family matters.
- ___ My mom/dad holds me to consistent standards.
- ___ I interrupt conversations with other adults.
- ___ My mom/dad tells me no.
- ___ My mom/dad is involved in everything I do.
- ___ My mom/dad gives me a great deal of attention.
- ___ My mom/dad does things for me that I should be doing for myself.
- ___ My mom/dad does things for me rather than seeing me in distress.
- ___ My mom/dad does things to make me love him/her.
- ___ My mom/dad hate seeing me be frustrated.
- ___ My mom/dad anticipates what I need and provides it.
- ___ My mom/dad finds something for me to do when I am bored.
- ___ When it is difficult, my mom/dad does my homework for me.
- ___ I usually get what I want.
- ___ My mom/dad thinks my activities should be fun.

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APPENDIX K – Parental Overvaluation Scale-Parent Report

Here are a number of statements describing ways in which parents can think about their child. Please indicate for each statement how well it describes the way you think about your child.

	Not at All True	Not Really True	Sort of True	Completely True
1. Without my child, his/her class would be much less fun.	0	1	2	3
2. My child deserves special treatment.	0	1	2	3
3. I would not be surprised to learn that my child has extraordinary talents and abilities.	0	1	2	3
4. I would find it disappointing if my child was just a “regular” child.	0	1	2	3
5. My child is more special than other children.	0	1	2	3
6. My child deserves something extra in life.	0	1	2	3
7. My child is a great example for other children to follow.	0	1	2	3

APPENDIX L – Parental Overvaluation Scale-Child Report

Here are a number of statements describing ways in which your parents/guardians can think about you. Please indicate for each statement how well it describes the way your parent/guardian thinks about you.

BEFORE STARTING:

Please circle who you will be answering these questions about: **MOM** **DAD**
OTHER: _____

	Not at All True	Not Really True	Sort of True	Completely True
1. My mom/dad thinks that my class would be much less fun without me in it.	0	1	2	3
2. My mom/dad thinks that I deserve special treatment.	0	1	2	3
3. My mom/dad would not be surprised to learn that I have extraordinary talents and abilities.	0	1	2	3
4. My mom/dad would find it disappointing if they found out I was just a “regular” child.	0	1	2	3
5. My mom/dad thinks I am more special than other children.	0	1	2	3
6. My mom/dad thinks I deserve something extra in life.	0	1	2	3
7. My mom/dad thinks that I am a great example for other children to follow.	0	1	2	3

APPENDIX M – Rosenberg Self-Esteem Scale

Instructions: Below is a list of statements dealing with your general feelings about yourself. Please indicate how strongly you agree or disagree with each statement.

Strongly Agree Agree Disagree Strongly Disagree

1. On the whole, I am satisfied with myself.
2. At times I think I am no good at all.
3. I feel that I have a number of good qualities.
4. I am able to do things as well as most other people.
5. I feel I do not have much to be proud of.
6. I certainly feel useless at times.
7. I feel that I'm a person of worth, at least on an equal plane with others.
8. I wish I could have more respect for myself.
9. All in all, I am inclined to feel that I am a failure.
10. I take a positive attitude toward myself.

APPENDIX N – Equivalence Testing

Preliminary Analyses

Descriptive statistics for the primary child-reported variables of interest for the middle school and Qualtrics samples are displayed in Tables 8 and 9, respectively.

Table 8

Descriptive Statistics for Primary Variables of Interest in Middle School Sample

Variable (Possible Range)	<i>N</i>	Min.	Max.	<i>M</i>	<i>SD</i>	<i>Skewness</i> (<i>Std</i> <i>Error</i>)	<i>Kurtosis</i> (<i>Std</i> <i>Error</i>)
Pathological Narcissism (0 to 5)	94	.71	4.31	2.13	.80	.67 (.25)	-.09 (.50)
Vulnerable Narcissism (0 to 5)	94	.18	4.79	1.86	.96	.81 (.25)	.13 (.50)
Triangulation (7 to 28)	94	7	25	10.90	4.44	1.43 (.25)	1.40 (.50)
Overindulgence (30 to 150)	94	51	124	88.71	13.13	.00 (.25)	.47 (.50)
Overvaluation (0 to 21)	94	7	26	16.17	4.28	.02 (.25)	-.34 (.50)
Warmth (20 to 80)	94	40	80	68.95	10.78	-1.20 (.25)	.37 (.50)
Inconsistent Discipline (6 to 30)	94	6	24	14.23	4.15	.23 (.25)	-.47 (.50)

Table 9

Descriptive Statistics for Primary Variables of Interest in Qualtrics Sample

Variable (Possible Range)	<i>N</i>	Min.	Max.	<i>M</i>	<i>SD</i>	<i>Skewness</i> (<i>Std</i> <i>Error</i>)	<i>Kurtosis</i> (<i>Std</i> <i>Error</i>)
Pathological Narcissism (0 to 5)	54	.65	4.35	2.52	.84	.10 (.33)	-.31 (.64)

Table 9 (continued)

Vulnerable Narcissism (0 to 5)	54	.47	4.29	2.36	.99	.00 (.33)	-.69 (.64)
Triangulation (7 to 28)	54	7	27	11.57	5.40	1.28 (.33)	.84 (.64)
Overindulgence (30 to 150)	54	54	134	90.22	15.83	.42 (.33)	1.55 (.64)
Overvaluation (0 to 21)	54	10	28	17.46	4.67	.71 (.33)	-.05 (.64)
Warmth (20 to 80)	54	40	80	71.32	9.17	-1.26 (.33)	1.36 (.64)
Inconsistent Discipline (6 to 30)	54	6	29	13.78	4.80	.72 (.33)	1.20 (.64)

Correlational analyses were conducted to determine whether gender (coded as 1 = male, 2 = female) and/or ethnicity (coded as White = 1, Non-White = 2) were related to either measure of adolescent narcissism (i.e., pathological or vulnerable narcissism) in each sample. A significant positive correlation resulted between gender and vulnerable narcissism, $r = .22$, $p = .03$ within the middle school sample; thus, gender was controlled for in subsequent analyses for this sample. No significant associations resulted among these variables within the Qualtrics sample. As a result, neither gender nor ethnicity were controlled for in the analyses for that sample.

Correlational Analyses

Correlations among the primary variables of interest in the middle school sample and Qualtrics sample are listed in Table 10. In order to determine if the differences between the correlation coefficients across the two samples were significant, a *Fisher z* transformation was used and r values were transformed into standardized z scores (Lenhard & Lenhard, 2014). The difference in the correlations between pathological

narcissism and triangulation (*Fisher z* = -2.5, *p* = .05) and pathological narcissism and inconsistent discipline (*Fisher z* = -1.7, *p* = .05) across the samples were both statistically significant. The correlations between vulnerable narcissism and triangulation (*Fisher z* = -2.4, *p* = .05) and vulnerable narcissism and inconsistent discipline (*Fisher z* = -1.7, *p* = .05), were also significantly different from each other across samples. Similarly, the correlation between grandiose narcissism and inconsistent discipline was significantly different between the two samples (*Fisher z* = -1.2, *p* = .05); the correlation between triangulation and inconsistent discipline was significantly different across the samples (*Fisher z* = -1.4, *p* = .05).

In addition, some correlations were significant, while others were not across the samples—some of these correlations, were also found to be significantly different from one another. The correlations between pathological narcissism and parental warmth (*Fisher z* = -.91, *p* = .05), vulnerable narcissism and parental warmth (*Fisher z* = -1.1, *p* = .05), and triangulation and parental warmth (*Fisher z* = -1.1, *p* = .05) were significantly different across samples. The correlation between grandiose narcissism and triangulation (*Fisher z* = -1.7, *p* = .05) was also significantly different across samples.

While there were a relatively large number of significant differences between the correlation coefficients in each of the samples, it is important to note, that each of the correlations fell in the same direction, despite being statistically different in magnitude. Taken as a whole, triangulation, inconsistent discipline, and parental warmth had a stronger relation with the other primary variables of interest (e.g., pathological narcissism, vulnerable narcissism, grandiose narcissism) in the Qualtrics sample compared to the middle school sample. More specifically, triangulation demonstrated

stronger, positive correlations with each domain of narcissism assessed; inconsistent discipline demonstrated the same pattern and was also more strongly and positively correlated with triangulation. Parental warmth was more strongly negatively correlated with pathological narcissism, vulnerable narcissism and triangulation in the Qualtrics sample.

These discrepancies may be related to differences in the demographic characteristics of the samples. Arguably, the most salient differences between the samples was the amount of participants who identified as Caucasian (47.9% in the middle school sample, 77.8% in the Qualtrics sample) and regional differences, as the middle school sample was collected in a southern region of the United States, whereas the Qualtrics sample was collected from participants throughout the United States. Prior research has demonstrated that parenting in the southern region of the United States (i.e., the South) is characterized by harsher discipline strategies and higher demands compared to other regions in the United States (see McKinney & Brown, 2017). However, findings from a study conducted by McKinney and Brown (2017) indicated that emerging adults (ages 18 to 25) from Northeast Mississippi viewed harsh, Southern parenting as a “reasonable, normative, and supportive practice” (McKinney & Brown, 2017, p. 3162). Additionally, emerging adults from a region of the United States where authoritative parenting (i.e., providing high and equal levels of demands and warmth/responsiveness to a child’s needs; Rothrauff, Cooney, & An, 2009) and permissive parenting (i.e., being highly responsive to a child/adolescent, while placing him/her with very few demands; McKinney & Brown, 2017) are commonplace, indicated experiencing higher levels of psychological aggression (e.g., yelling, verbally threatening, shaming, name-calling)

from their parents compared to participants in the Northeastern Mississippi sample (McKinney & Brown, 2017). Taken as a whole, it may be that lack of parental warmth, inconsistent discipline, and triangulation were found to be more closely tied to self-reported narcissism in the Qualtrics sample, which was more regionally diverse, due to the fact that participants were more susceptible to developing a tenuous self-perception, as a result of experiencing negative methods of parenting that are not generally commonplace within their respective regions. In comparison, adolescents in the middle school sample, who were from the South and were presumably acclimated to harsh forms of parenting, may have been somewhat less susceptible to developing the poor self-perception and tenuous self-esteem that is characteristic of pathological narcissism. In this way, living in a region in which it is culturally normative to engage in harsher, and arguably, more maladaptive parenting practices may serve as a type of protective factor against developing higher levels of pathological narcissism and the poor self-perception and other emotional and behavior difficulties associated with pathological narcissism.

In a similar vein, prior research has indicated that parenting style may vary as a function of a child/adolescent's race/ethnicity. More specifically, an authoritative parenting style has been found to be more prevalent among Caucasians, while an authoritarian parenting style (i.e., placing high demands on the child and providing a low level of warmth) is more common among the African American and Hispanic populations (Rothrauff et al., 2009; Radziszewska, Richardson, Dent, & Flay, 1996). It may be that lack of parental warmth was found to be more closely tied to self-reported narcissism and parent-initiated triangulation in the Qualtrics sample, in which participants were

predominantly Caucasian, given that this parenting approach is less common within the Caucasian population, and thus, perhaps more detrimental psychologically.

Table 10

Correlations among primary variables of interest in Middle School and Qualtrics

Samples

	1	2	3	4	5	6	7	8
1. Pathological Narcissism								
<i>Mid Sch</i>	1	.96***	.75***	.23*	-.12	.32**	-.15	.33**
<i>Qualtrics</i>	1	.97***	.80***	.58***	.14	.29*	-.30*	.57***
2. Vulnerable Narcissism								
<i>Mid Sch</i>		1	.55***	.23*	-.15	.23*	-.18	.28**
<i>Qualtrics</i>		1	.61***	.57***	.10	.23	-.35**	.53***
3. Grandiose Narcissism								
<i>Mid Sch</i>			1	.17	.01	.43***	-.03	.33**
<i>Qualtrics</i>			1	.44**	.19	.34*	-.11	.50***
4. Triangulation								
<i>Mid Sch</i>				1	-.05	.13	-.16	.36***
<i>Qualtrics</i>				1	-.09	.24	-.34*	.55***
5. Overindulgence								
<i>Mid Sch</i>					1	.22*	.28**	.08
<i>Qualtrics</i>					1	.47***	.41**	.11
6. Overvaluation								
<i>Mid Sch</i>						1	.21*	.27**
<i>Qualtrics</i>						1	.14	.33*
7. Warmth								
<i>Mid Sch</i>							1	-.38***
<i>Qualtrics</i>							1	-.23
8. Inconsistent Discipline								
<i>Mid Sch</i>								1
<i>Qualtrics</i>								1

Note. Middle School: $N = 94$; Qualtrics: $N = 54$; * $p < .05$; ** $p < .01$; *** $p < .001$

Regression Analyses

As in the primary analyses, three linear regression models were conducted to examine the degree to which child-reported parental warmth, overvaluation and overindulgence moderate the relation between triangulation and pathological narcissism in each of the samples. One linear regression was conducted to determine the degree to which child-reported inconsistent discipline moderates the relation between triangulation and vulnerable narcissism. For the middle school sample, gender was entered into the first step of the model, triangulation, type of parenting approach, and narcissism was entered into the second step of the model, and the interaction term was entered into the third step of the model. Analyses for the Qualtrics sample mirrored the primary analyses. A Bonferroni correction (i.e., $\alpha_{pc} = .0125$) was used to control for family-wise error, for each of the samples. A hierarchical regression analyses was used in SPSS to analyze the middle school sample data and the computational tool, PROCESS (Hayes, 2012) was used in SPSS to analyze the Qualtrics data.

Middle School Sample. The model for overindulgence did not yield a main effect for gender, $\beta = .16, p = .12$, overindulgence, $\beta = -.10, p = .34$, triangulation, $\beta = .20, p = .06$, or for the interaction term, $\beta = .14, p = .18$. The model for overvaluation did not yield a main effect for gender, $\beta = .16, p = .12$, or triangulation, $\beta = .17, p = .11$, but did for overvaluation, $\beta = .29, p = .004$. No significant main effect was found for the interaction term, $\beta = .09, p = .34$. For the parental warmth model, there was no main effect found for gender, $\beta = .16, p = .12$, triangulation, $\beta = .18, p = .09$, or parental warmth, $\beta = -.12, p = .25$, nor was there a significant effect found for the interaction term,

$\beta = -.06, p = .57$. For the inconsistent discipline model, there was a significant main effect for gender, $\beta = .22, p = .03$ and inconsistent discipline, $\beta = .25, p = .02$, but not for triangulation, $\beta = .08, p = .48$, or the interaction term, $\beta = -.07, p = .46$.

Qualtrics Sample. The model for overindulgence yielded a main effect for triangulation, $B = .09, SE = .02, p < .001$, however, there was no main effect for overindulgence, $B = .01, SE = .01, p = .10$ or the interaction term, $B = -.00, SE = .00, p = .51$. In the model examining overvaluation, a main effect was found for triangulation, $B = .08, SE = .02, p < .001$, but there was no main effect for overvaluation, $B = .03, SE = .02, p = .17$, or the interaction term, $B = -.00, SE = .00, p = .77$. The same pattern emerged in the parental warmth model, with a main effect for triangulation, $B = .08, SE = .02, p < .001$, but not for parental warmth, $B = -.01, SE = .01, p = .32$, or for the interaction term, $B = .00, SE = .00, p = .32$. In the model examining inconsistent discipline, there was a significant main effect for triangulation, $B = .07, SE = .02, p = .004$, but not for inconsistent discipline, $B = .07, SE = .03, p = .02$. The interaction term, $B = -.01, SE = .00, p = .15$, was also nonsignificant.

Taken as a whole, when analyzed separately, the two samples differed slightly in terms of the main effects for some of the variables; however, no significant interactions emerged in either of the samples.

APPENDIX O – Parent Reported Data

A total of 15 parents with corresponding child data (5 male youth, 10 female youth) participated in the study. Caregivers ranged in age from 36 to 50 years (M age = 42.3 years, $SD = 4.96$). Of the 15 parents who participated, 13 identified as the child’s biological mother, and 2 identified as the child’s stepmother. Regarding household income, 80% of the sample reported an income of more than \$50,000, 6.7% indicated an income of \$40,001 to \$50,000, and 13.3% indicated an income of \$30,001 to \$40,000. In terms of parent education level, 6.7% of the sample obtained their high school diploma/GED, 20% attended some college or vocational training, 6.7% obtained a degree/certificate from a vocational school, 6.7% obtained a 2-year college degree, 33.3% obtained a 4-year college degree, and 26.7% obtained a masters or doctorate degree.

Descriptive statistics for the primary parent-reported variables of interest are displayed in Table 11. As aforementioned, only the parent-reported variables with corresponding child reported data were used in the analyses ($N = 15$). The majority of variables were normally distributed, with the exception of child-reported triangulation, which was somewhat positively skewed. As a result, one data point was truncated.

Table 11

Descriptive Statistics for Primary Parent-Reported Variables of Interest

Variable (Possible Range)	N	Min.	Max.	M	SD	<i>Skewness</i> (<i>Std</i> <i>Error</i>)	<i>Kurtosis</i> (<i>Std</i> <i>Error</i>)
Triangulation (7 to 28)	15	13.00	26.00	18.73	3.56	.66(.58)	.42(1.12)
Overindulgence (30 to 150)	15	63.00	110.00	80.73	13.05	.90(.58)	.64(1.12)

Table 11 (continued)

Overvaluation (0 to 21)	15	11.00	23.00	15.40	3.60	.67(.58)	-.08(1.12)
Warmth (20 to 80)	15	93.00	100.00	97.20	2.31	-.44(.58)	-.91(1.12)
Inconsistent Discipline (6 to 30)	15	6.00	17.00	11.87	3.36	-.47(.58)	-.53(1.12)

Correlational analyses were conducted to determine whether gender (coded as 1 = male, 2 = female) and/or ethnicity (coded as White = 1, Non-White = 2) were related to either measure of self-reported adolescent narcissism (i.e., pathological or vulnerable narcissism). No significant associations resulted among these variables; as a result, gender and ethnicity were not controlled for in the remaining exploratory analyses.

Correlations among the primary parent-reported variables of interest and demographic variables were examined. A significant positive correlation emerged between income level and parent education level, $r = .63, p = .04$, and parent age and parent education level, $r = .61, p = .05$. None of the Hypotheses were supported; however a significant positive correlation emerged between parent-reported overvaluation and overindulgence, $r = .70, p = .004$.

Consistent with the primary analyses, three regression analyses were conducted to examine the impact that parent-reported overindulgence, overvaluation and lack of parental warmth have on the relation between triangulation and adolescent-reported pathological narcissism and one model was run to examine the impact that inconsistent discipline has on the relation between parent-reported triangulation and adolescent-

reported vulnerable narcissism. A Bonferroni correction (i.e., $\alpha_{pc} = .0125$) was used to control for family-wise error, given that four moderation models were conducted. The computational tool, PROCESS (Hayes, 2012), was used in SPSS to analyze the data.

The model for overindulgence did not yield a main effect for triangulation, $B = -.04$, $SE = .07$, $p = .52$, or overindulgence, $B = -.01$, $SE = .02$, $p = .73$ and there was no significant effect for the interaction term, $B = .02$, $SE = .01$, $p = .08$; thus, Hypothesis 5 was not supported by parent-reported data. In the model examining the predictive utility of overvaluation and triangulation, there was no main effect for either overvaluation, $B = -.04$, $SE = .06$, $p = .55$, or triangulation, $B = -.04$, $SE = .07$, $p = .52$, nor did a significant interaction emerge, $B = -.01$, $SE = .04$, $p = .73$. As a result, Hypothesis 6 was not supported by parent-reported data. Finally, in the model examining parental warmth, there were no main effects evident for triangulation, $B = -.04$, $SE = .07$, $p = .54$, or parental warmth, $B = .06$, $SE = .10$, $p = .58$, nor was there a significant interaction effect present, $B = .02$, $SE = .02$, $p = .45$. In this way, Hypothesis 7 was not supported by parent-reported data.

In the fourth model, there were no main effects found for either triangulation, $B = -.04$, $SE = .08$, $p = .59$ or inconsistent discipline, $B = -.03$, $SE = .08$, $p = .76$ in the first step of the model. The interaction term approached significance, $B = -.06$, $SE = .03$, $p = .05$, but was not interpreted based on the Bonferroni correction. Thus, there was no support for Hypothesis 8 using parent-reported data.

APPENDIX P – IRB Approval Letters



INSTITUTIONAL REVIEW BOARD

118 College Drive #5147 | Hattiesburg, MS 39406-0001

Phone: 601.266.5997 | Fax: 601.266.4377 | www.usm.edu/research/institutional.review.board

NOTICE OF COMMITTEE ACTION

The project has been reviewed by The University of Southern Mississippi Institutional Review Board in accordance with Federal Drug Administration regulations (21 CFR 26, 111), Department of Health and Human Services (45 CFR Part 46), and university guidelines to ensure adherence to the following criteria:

- The risks to subjects are minimized.
- The risks to subjects are reasonable in relation to the anticipated benefits.
- The selection of subjects is equitable.
- Informed consent is adequate and appropriately documented.
- Where appropriate, the research plan makes adequate provisions for monitoring the data collected to ensure the safety of the subjects.
- Where appropriate, there are adequate provisions to protect the privacy of subjects and to maintain the confidentiality of all data.
- Appropriate additional safeguards have been included to protect vulnerable subjects.
- Any unanticipated, serious, or continuing problems encountered regarding risks to subjects must be reported immediately, but not later than 10 days following the event. This should be reported to the IRB Office via the "Adverse Effect Report Form".
- If approved, the maximum period of approval is limited to twelve months.
Projects that exceed this period must submit an application for renewal or continuation.

PROTOCOL NUMBER: 17041204

PROJECT TITLE: Is Parent-Initiated Triangulation Associated with Pathological Narcissism in Youth?

PROJECT TYPE: New Project

RESEARCHER(S): Lauren Lee-Rowland

COLLEGE/DIVISION: College of Education and Psychology

DEPARTMENT: Psychology

FUNDING AGENCY/SPONSOR: N/A

IRB COMMITTEE ACTION: Expedited Review Approval

PERIOD OF APPROVAL: 04/19/2017 to 04/18/2018

Lawrence A. Hosman, Ph.D.

Institutional Review Board

INSTITUTIONAL REVIEW BOARD

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Phone: 601.266.5997 | Fax: 601.266.4377 | www.usm.edu/research/institutional.review.board

NOTICE OF COMMITTEE ACTION

The project has been reviewed by The University of Southern Mississippi Institutional Review Board in accordance with Federal Drug Administration regulations (21 CFR 26, 111), Department of Health and Human Services (45 CFR Part 46), and university guidelines to ensure adherence to the following criteria:

- The risks to subjects are minimized.
- The risks to subjects are reasonable in relation to the anticipated benefits.
- The selection of subjects is equitable.
- Informed consent is adequate and appropriately documented.
- Where appropriate, the research plan makes adequate provisions for monitoring the data collected to ensure the safety of the subjects.
- Where appropriate, there are adequate provisions to protect the privacy of subjects and to maintain the confidentiality of all data.
- Appropriate additional safeguards have been included to protect vulnerable subjects.
- Any unanticipated, serious, or continuing problems encountered regarding risks to subjects must be reported immediately, but not later than 10 days following the event. This should be reported to the IRB Office via the "Adverse Effect Report Form".
- If approved, the maximum period of approval is limited to twelve months.
Projects that exceed this period must submit an application for renewal or continuation.

PROTOCOL NUMBER: CH17041204

PROJECT TITLE: Is Parent-Initiated Triangulation Associated with Pathological Narcissism in Youth?

PROJECT TYPE: Change to a Previously Approved Project

RESEARCHER(S): Lauren Lee-Rowland

COLLEGE/DIVISION: College of Education and Psychology

DEPARTMENT: Psychology

FUNDING AGENCY/SPONSOR: N/A

IRB COMMITTEE ACTION: Expedited Review Approval

PERIOD OF APPROVAL: 04/19/2018 to 04/18/2019

Lawrence A. Hosman, Ph.D.

Institutional Review Board

APPENDIX Q – School Approval Letter



P.O. Box 609
424 Martin Luther King Drive
Purvis, MS 39475
Phone: 601-794-1030 Fax: 601-794-1012
www.lamarcountyschools.org

Approval Letter

Dear Ms. Lee-Rowland:

I am pleased to approve recruitment and data collection for your research project "Is Parent-Initiated Triangulation Associated with Pathological Narcissism in Youth?" from the Psychology Department at The University of Southern Mississippi, to be conducted with approved 7th grade classes at Oak Grove Middle School in Hattiesburg, MS during the 2016-17 school year.

Students may only participate in the study if they receive permission from their parents or legal guardians. I understand that the procedure will involve completing a series of self-report questionnaires through a secure on-line link constructed by the researcher. Questionnaires will ask students questions regarding their self-perception and perceptions of their families. The questions will pose no risks greater than those experienced in daily life or activities.

Participation is strictly voluntary, and students will be free to withdraw from the study at any time or to refuse to answer any question. The students' primary caregivers will also be asked to complete a series of self-report questionnaires that ask similar questions. They will do so at their own homes or at a location of their choosing. Responses provided by students and their caregivers will remain confidential. That is, specific student responses will not be shared with school personnel. I understand that you will provide my office with a summary of the results upon the completion of the study.



Tess Smith
Superintendent
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