Narcissism, Shame, Masochism, and Object Relations: An Exploratory Correlational Study

Stephen Hibbard, PhD University of Tennessee, Knoxville

A correlational study (N=701) examined three measures of narcissism, a measure of shame, two measures of masochism, a measure of object relations, and a measure of social desirability. Moderate correlations were found for a core of constructs which have been described in the clinical and theoretical literature. These are narcissism, shame, object relations, and masochism. Narcissism seemed to divide into two different styles, a "phallic," grandiose style and a narcissistically vulnerable style. Shame primarily accounted for the differences in these styles, correlating negatively with the grandiose style, positively with the more vulnerable style. The narcissistically vulnerable style correlated more with the core pathology measures; that is, object relations and masochism. Social desirability did not mediate the relationship between grandiose narcissism and shame. Only small univariate gender differences were found, but masochism was a better predictor of shame in women than was narcissism whereas there was little difference between masochism and narcissism for predicting shame in men.

Psychoanalytically oriented clinicians and the theorists informing their work have come to conceptualize a great deal of character pathology in terms of the concepts which comprise the title of this study. A huge body of clinical and theoretical literature has grown up explicating one or more of these notions in terms of the others. Moreover, empirical research has emerged around some of these concepts individually. This exploratory study reports on empirical research investigating the interrelations of these concepts.

The psychoanalytic empirical studies of shame to date have proceeded along two tracks, both stemming from Helen Block Lewis's seminal work (1971) in this area. One track has centered around the explication and microscopic examination of shame in transcripts, videotapes, and audio recordings

Requests for reprints should be sent to Stephen Hibbard, PhD, Department of Psychology, Austin Peay Building, University of Tennessee, Knoxville, TN 37996-0900.

of clinical sessions (Retzinger, 1985, 1987, 1989). The other track has been largely aimed at distinguishing shame from guilt, clarifying their interrelations, and discussing possible gender differences (Harder, 1979, 1984, 1990; Harder & S. Lewis, 1987; Harder & Zalma, 1990; Wright, O'Leary, & Balkin, 1989). Object relations have been studied by a number of researchers, primarily using projective instruments. (For a good review of much of this research, see Stricker & Healy, 1990.) Empirical research on narcissism has been conducted primarily with the three measures used in this study. (See the Measures section of this article.) There has been less empirical study of masochism. The theoretical complexity of this construct, just within psychoanalytic theory, can be gauged by consulting Gedo (1988) or Kernberg (1988).

The purpose of this study was to begin to map out empirically the interrelations among these very complex constructs—narcissism, masochism, shame, and object relations. Four general hypotheses, consonant with broad theoretical issues, and one specific hypothesis, were tested.

First, some authors have suggested that masochism has a narcissistic function (Bernstein, 1957; Cooper, 1988; Lampl-de Groot, 1937/1965; Stolorow, 1975), and so it was hypothesized that measures of masochism would correlate positively with measures of narcissism. Second, it is widely believed that impaired "object relations" is a form of narcissistic impairment (Freud, 1914; Kernberg, 1975; Masterson, 1981). Empirical studies have not previously tested this hypothesis. Third, since Berliner (1940, 1942, 1947, 1958), many theoreticians (Bach, 1991; Benjamin, 1988) believe that masochism is basically an object-relational disturbance. If this is so, measures of masochism should correlate strongly with measures of object-relations disturbance. Fourth, there are questions of gender differences in narcissism (Haaken, 1983; Harnik, 1924; Jones, 1913/1951; Reich, 1953; Richman & Flaherty, 1988), masochism (Bonaparte, 1966; Deutsch, 1944; Horney, 1935; Thomson, 1942), and shame (Morrison, 1989). This study looks into these differences.

Fifth, a more specific hypothesis of this study concerned the relationship between shame and narcissism. Wright et al. (1989) reported a negative correlation between a measure of narcissism and one of shame, treating it as evidence that there are two patterns of relationship between narcissism and shame. (Harder and S. Lewis, 1987, had already reported this negative correlation.) But such an argument would see evidence of dual processes in any negative correlation between two variables. What is needed is to identify diverse measures of narcissism, and establish reversed correlations between these and a reliable measure of shame. The measures of narcissism could then be thought of as tapping two different styles or types of narcissism with different roles for shame.

Some theorists have suggested that one type of narcissism, characterized by an aggressive, grandiose, "phallic" style, would not be accompanied by shame (at least conscious shame), and in fact might be characterized by denial of shame; whereas another type of narcissism, characterized by intensely idealized self and object representations, would be more likely to be accompanied by consciously experienced shame (Broucek, 1991; Bursten, 1973; Harder, 1984, 1990; Kernberg, 1975, pp. 228–229; Kohut, 1966, 1971, pp. 177–178; Miller, 1979; Morrison, 1989; Nathanson, 1987). This study hypothesized that styles of narcissism would be identified which were and were not accompanied by conscious shame, as operationalized by different correlations of shame with different narcissism measures. If a grandiose-ambitious style characterized by absence of shame could be identified, it was desired to see if measures of denial mediated the relation between shame and this grandiose narcissism. Perhaps such narcissists harbor unconscious shame and use denial to ward it off.

METHOD

Subjects and Procedures

The subjects were 701 students (434 women, 247 men, 20 unknown due to unscannable gender responses) enrolled in various psychology classes at the University of Tennessee, Knoxville, in the Spring, Summer, and Fall of 1990. Most subjects received course credit for participating. The ethnic composition was: 6.4% Black, 85.2% White, 2.1% Asian, and 6.3% unknown. The mean age was 21.07 years, with a range from 18 to 66. The majority came from middle-class Tennessee homes. Subjects were to take the test questionnaire and scantrons home and do the questionnaire at their leisure, working no more than an hour at a time.

Measures

Shame Rating Scale (SRS). Eleven items were assembled. Seven of these were culled from Hoblitzelle's (1987) Adapted Shame Scale, namely the items which she reported as having loadings above .50 on a shame factor and which she and H. Lewis agreed had face validity as shame items. Five other items, added from the 10-item Harder Personal Feelings Questionnaire (Harder & S. Lewis, 1987), had been identified by Harder as shame items. One of these, "ridiculous, laughable," had a markedly lower item-total correlation (.27) than the other 11 in our study. Because item selection was based on a desire to assemble homogeneous item clusters (see, e.g., Wainer & Kiely, 1987), this item was dropped from the analysis. Harder and Zalma (1990) recently supplied extensive criterion validation for both of the full scales from which this item cluster was assembled. Subjects were asked to rate, on a scale ranging from rarely, not much like this (1) to often, very much like this (5), how frequently or to what extent each of the 11 adjectives characterized them. This

yielded the following list: (a) embarrassed, (b) humiliated, (c) helpless or paralyzed, (d) blushing or near blushing, (e) bashful, (f) mortified, (g) abashed, (h) disgraced, (i) shy, (j) depressed, and (k) ashamed.

Crowne-Marlowe Social Desirability Scale (SDS). This is a 32-item scale derived from the Minnesota Multiphasic Personality Inventory (MMPI) by Crowne and Marlowe (1960) to measure social desirability in a manner independent of pathology. Harder and S. Lewis (1987) and Lillibridge (Rebinson & Shaver, 1973, p. 729) suggested that it measures denial more than need for approval.

The Narcissistic Personality Inventory (NPI). The NPI is a 40-item, seven-factor scale (Raskin & Terry, 1988), revised from an original 53-tem scale (Raskin & Hall, 1979, 1981), which was developed to assess narcissism as a construct in normal populations. The seven NPI factors are: Factor 1 =Authority ("I see myself as a good leader"); Factor 2 = Self-Sufficiency ("I am more capable than other people," "I rarely depend on others to get things done"); Factor 3 = Superiority ("I am an extraordinary person"); Factor 4 = Exhibitionism ("I like to be the center of attention"); Factor 5 = Exploitativeness ("I find it easy to manipulate people"); Factor 6 = Vanity ("I like to look at myself in the mirror"); Factor 7 = Entitlement ("I will never be satisfied until I get all that I deserve"). The original 53-item scale was validated and factor analyzed by Emmons (1984), and these results were replicated by him (1987). The NPI in this form was further validated by Watson, Grisham, Trotter, and Biderman (1984) and by Watson, McKinney, Hawkins, and Morris (1988). Raskin's (Raskin & Terry, 1988) extensive studies using known groups with the current 40-item inventory indicated that highly narcissistic people have an aggressivized and somewhat sadistic self-concept which is congruent with their ideal selves, a finding which in Raskin's opinion is consistent with Kernberg's view of pathological narcissism. Hence, the NPI would be expected to correlate negatively with shame, and this was the finding of Harder and S. Lewis (1987) and Wright et al. (1989). Raskin's recent statements (Raskin & Terry, 1988) suggest that the revised instrument assesses a continuous construct, ranging from deficient narcissism through healthy narcissism to the upper end which presents clinically as narcissistic personality disorder. These findings suggest, in accord with Harder's view (1990), that the NPI operationalizes a more assertive, more phallic, and less dependent form of narcissism than the other narcissism measures used in this study.

The O'Brien Multiphasic Narcissism Inventory (OMNI). O'Brien (1987, 1988) attempted to operationalize Miller's (1981, 1984, 1985) concept of parcissism. In this view, narcissism includes both a vulnerable component and an abusive component, corresponding to the abuse received from narcissistic

parenting and to incorporation of that narcissistic parental imago. The OMNI is a three-factor, 41-item inventory. The OMNI is not premised on the notion that pathological narcissism is continuous with a "normal, healthy" narcissism, as is the case for the NPI. Unlike the NPI, all three subscales of the OMNI correlated strongly (.68, .77, .82, respectively) with the Eysenck neuroticism measure. Coefficient alpha in this study was .75.

O'Brien described the OMNI's first factor (OMNI 1, Narcissistic Personality Dimension) as tapping the *Diagnostic and Statistical Manual of Mental Disorders* (3rd ed., rev.; American Psychiatric Association, 1987) criteria for narcissistic personality disorder and as describing Kernberg's (1975) narcissistic personality type. The second factor (OMNI 2, Poisonous Pedagogy) taps a dimension of narcissism found in individuals who use their role as parents or authorities to gratify their narcissistic pathology ("Will your experiences greatly guide others?"; "Do you know how to solve others' problems?"). He suggested that the third factor (OMNI 3, Narcissistically Abused Personality) described someone who puts others' needs first to the point of self-deprecation and martyrdom ("Do you have problems that no one else seems to understand?"; "Would you rather try to please others than to have your own way?"). OMNI 1 correlated positively, OMNI 3 negatively, with the Eysenck extraversion scale. Correlations with the NPI (n = 64) were OMNI 1 = .38, OMNI 2 = .18, OMNI 3 = -.02.

The factor structure of the inventory was first defined in a student population. Subsequent known-groups replication was conducted in a sample of 256 outpatients whose primary or secondary diagnosis was narcissistic personality disorder. Strong differences were found on all three factors comparing known groups and normals.

The Narcissistic Personality Disorder Scale (NPDS). This is a unidimensional, 19-item scale derived from the MMPI by Ashby, Lee, and Duke (1979), and further validated by Solomon (1982). In the original study, the 19 items produced 13% false negatives and 14% false positives in classifying 41 clinically diagnosed narcissistic personality disorders and 35 patients with other personality disorders. Thus, 86% of those classified as narcissists were in fact narcissists, while 87% of those classified as other personality disorders were in fact other. Solomon administered the scale along with the Tennessee Self Concept to 100 undergraduates and found a substantial negative correlation (r=-.61) with a measure of self-esteem ("healthy narcissism"). Both Watson et al. (1984) and Emmons (1987) failed to find a significant correlation between the NPI and the NPDS.

The Hecht Feminine Masochism Scale (Hecht). This is a 38-item scale which includes 10 suppressor items derived from the MMPI by Hecht (1950). (The scale and its title were devised in an era before such constructs as

"feminine masochism" might be thought sexist.) She derived the scale by comparing MMPI scores of multiple groups of clinically diagnosed (multiple clinician ratings) feminine masochists with those of multiple control groups, mostly clinical controls, all of whom were young female college students applying for services at the University of California, Berkeley, Psychological Clinic. Item derivation followed careful procedures, including the derivation of the suppressor items. Hypothetical characteristics (e.g., adapting a sweet, helpless role; harboring an unconscious design for rejection; receiving gratification from punishment; projecting the ego ideal onto a partner; and depending on the love object) were translated into clinically observable behaviors on the basis of which the scale was constructed.

The Finney Dependent Masochism Scale (Finney). This is a 30-item scale derived with numerous other content scales from the MMPI by Finney (1965). Finney tabulated MMPI endorsements against single clinician ratings of the degree of "dependent masochism" displayed by 385 patients. Some items overlap with the Hecht. None of them has to do with explicitly (consciously) sexual masochistic content.

The Bell Object Relations Inventory (BORI). This is a 45-item, fourfactor scale devised theoretically from an ego psychological perspective (Bellak, Hurvich, & Gediman, 1973). Items were generated from clinical interviews with patients describing their experiences of relationships. The current instrument came from factor analysis of an original 55-item questionnaire administered to assorted nonclinical groups. The emerging factor structure was replicated in a large (N=613) clinical sample (Bell, Billington, & Becker, 1986). This study reported excellent criterion validity and divergent validity on clinical groups and different groups of normals. A second study replicated these findings (Bell, Billington, Cicchetti, & Gibbons, 1988). Other studies have provided further validation with specific groups (Becker, Bell, & Billington, 1987; Randolph & Winstead, 1988). The factor names are, respectively, Alienation ("I have at least one stable and satisfying relationship" [False]), Insecure Attachment ("I usually end up hurting those closest to me"), Egocentricity ("I usually end up sorry that I trusted someone"), and Social Isolation ("It is hard for me to get close to anyone").

RESULTS

Shame and Narcissism

The 11 items of the SRS had item-total correlations ranging from .45 to .61, with a mean interitem correlation of .34, coefficient $\alpha = .84$. A principal-components factor analysis was run on the SRS items. They loaded between

.52 and .70 on the first unrotated common factor. This factor accounted for 40.6% of the variance, and had an eigenvalue nearly three times that of the second. This provides good evidence of a common underlying construct and a tight cluster of homogenous items.

I suggested earlier that it was desirable to find narcissism measures that tapped more aggressive and, differentially, more vulnerable styles of narcissism and that the NPI would fall in the first category, whereas the OMNI and NPDS would fall in the second category, given previous research with those measures. A principal-components factor analysis with varimax rotation was run on all the major scales used in this study, and this produced a two-factor solution. The scales and their varimax-rotated solution and loadings are presented in Table 1.

It is not clear precisely what the two major factors represent (perhaps a general pathology factor and an extroversion/introversion factor). However, it seems clear that the NPDS and the NPI do not load on a common factor, and that the OMNI and the NPI have substantially different loadings on the two factors. This suggests that the NPI measures a style of narcissism different from that measured by the other two narcissism scales, consistent with review of previous studies. The following considerations also suggest this.

Table 2 is a correlation matrix of the scales and subscales used in the study. The size and pattern of the correlations of the OMNI and NPDS with the BORI, Hecht, and Finney, on the one hand, and of the NPI with these same scales on the other hand, suggest that the NPDS and OMNI are more sensitive to the forms of psychopathology gauged by these other measures than is the NPI.

The differences between these correlations were all significant by the Fisher Z test (p < .01). This seems to indicate that the OMNI and NPDS are measuring an entity somewhat different from the NPI. Hence, it would appear that certain clinically described relations between pathological narcissism and other pathological entities are better represented in the OMNI and the NPDS than in the NPI. For one, some authors have suggested that masochism has

TABLE 1
Varimax Rotated Factor Loadings for all Scales

Scale	Factor 1	Factor 2
Finney	.91	07
BORI	.87	.13
Hecht	.80	05
NPDS	.79	03
OMNI	.73	.46
SRS	.64	39
NPI	02	.93
% Variance accounted:	48.0	14.0

Note. N = 701.

TABLE 2 Intercorrelations of All Scales

				Intercorr	Intercorrelations of All Scales and Subscales	f All Scale	s and Sub	scales					
Scale	J	2	8	4	s	9	7	8	6	01	11	12	13
l. NPI													
2. OMNI	.28	į											
3. Finney	10	.59	I										
4. Hecht	05	4.	.73										
5. BORI	90:	.63	.75	.63									
e. SDS	08	36	34	16	33	1							
7. NPDS	01	.48	.64	.51	09:	36	1						
8. OMNI 1	.25	8.	.51	.45	.58	36	.42						
9. OMNI 2	.41	.81	.34	.24	.38	7.7	.30	.54	1				
10. OMNI 3	04	.70	.59	.48	.57	20	44.	.46	.37	1			
11. BORI Aln	01	.46	.63	54	06:	28	.59	.42	.23	.47	1		
12. BORI IA	.07	99.	.73	.58	68.	36	.53	.58	44.	.57	89:	I	
BORI Egc	.16	.57	09:	.51	.81	25	.49	49	.40	.48	.70	99.	
14. BORI SI	14	.38	.59	.45	.74	23	.43	.34	.15	.46	.75	.57	4.
	.73	.17	14	14	04	05	90. –	.12	.31	08	08	01	.01
16. NPI 2	.57	10	24	16	80.—	117	14	05	1.17	1.17	05	13	01
17. NPI 3	19.	90.	21	09	08	60:	10	.03	.18	10	08	07	07
	.55	.37	.23	.20	.23	29	.21	39	.30	.15	.12	.27	.24
19. NPI 5	.58	.31	60	90.	17	14	60:	.26	.32	.13	90.	.20	.22
20. NPI 6	.53	.11	07	02	04	07	03	.14	.16	90	08	02	.01
21. NPI 7	.61	36	.17	.17	30	19	61.	.36	.35	.11	.24	.26	.28
22. SRS	21	.29	.52	.40	44.	19	.45	.29	14	.30	.40	.40	.32

TABLE 2 (Continued)

					TABLE	TABLE 2 (Continued)	(pənı			
Scale	14	15	91	17	18	61	20	21	22	
15. NPI 1	17									
16. NPI 2	09	.32								
17. NPI 3	14	.33	.32	I						
18. NPI 4	.03	.22	80.	.21	1					
19. NPI 5	00.	.33	.23	.16	.36					
20. NPI 6	12	.24	.21	.34	.30	91.	ì			
21. NPI 7	.10	0 +.	.23	.21	.31	.36	.21	1		
22. SRS	.42	21	18	21	9.	.01	13	.03		

Note. N = 701. OMNI 1 to OMNI 3 = O'Brica Narcissistic Personality Dimension, Poisonous Pedagogy, and Narcissistically Abused Personality subscales; BORI Ali, IA, Egc, and SI = Bell Alienation, Insecure Attachment, Egocentricity, and Social Isolation subscales; and NPI 1 to NPI 7 = NPI Authority, Self-Sufficiency, Superiority, Exhibitionism, Exploitativeness, Vanity, and Entitlement subscales.

a narcissistic function. But the NPI failed to correlate with the Hecht and the Finney, while the NPDS and OMNI had appreciable correlations with them. Moreover, clinical accounts suggest that people with a disturbance which would lead them to become socially isolated would also be vulnerable to serious narcissistic disturbance. The NPI correlated positively with the BORI Egocentricity but negatively with the BORI Social Isolation, however, whereas the OMNI and NPDS correlated positively with both BORI subscales.

These findings suggest that the NPI is more a measure of phallic narcissism while the OMNI and the NPDS tap a more vulnerable, idealizing type of narcissism. These narcissism measures appear to differ in the sorts of respects for which we were looking originally in order to test the hypothesis that one sort of narcissism, but not another, is characterized by consciousness of shame. This seemed to be further confirmed by treating the OMNI 3 (Narcissistically Abused Personality) as a suppressor variable. This treatment would suppress elements of variance due to consciousness and expression of narcissistic abuse. Thus, scores on OMNI 3 were counted as negative on the overall OMNI score, and the Pearson correlation was computed between this revised OMNI and the NPI, r(700) = .44, a substantial increase.

The correlations of the SRS with the NPI, OMNI, and NPDS were examined. As Table 2 indicates, the NPI was negatively correlated, r(697) = -.21, while the OMNI and the NPDS were positively correlated, r(697) = .29 and r(697) = .45, respectively, with the SRS. Moreover, the OMNI and NPDS were only weakly or not at all correlated with the NPI (rs = .28 and r = -.01, respectively), but moderately correlated with each other (r = .48). The same pattern of results vis-à-vis shame and the NPI obtained also for the BORI Egocentricity; that is, a small correlation with the NPI, but somewhat larger with shame, and quite strong with the OMNI and NPDS. It seems that shame has a strong influence on the type of narcissistic disturbance as measured by the NPI versus the other narcissism scales.

To provide further confirmation, partial correlations were run on the NPI with both the OMNI and NPDS. Partialling out the SRS, NPI correlations improved (with OMNI, r = .37, p < .001; with NPDS, r = .09, p < .01). Although these are still not strong correlations, the difference realized in partialling out shame clearly demonstrated that shame mediates to some extent the relation between NPI "narcissism" and the OMNI-NPDS "narcissism."

This suggested dividing the sample into groups based on median splits on the NPI, OMNI, and NPDS, letting NPI scores alone define one parameter and letting the OMNI-NPDS combination define the other. Four groups were formed: 1 = above median NPI and above median OMNI and NPDS, 2 = above median NPI and below median OMNI and NPDS, 3 = below median NPI and above median OMNI and NPDS, and 4 = below median NPI and below median OMNI and NPDS. Whereas Groups 1 and 4 were conceptualized as high and low narcissism groups respectively, Groups 2 and 3 were

thought of as more clearly operationalizing the less and more shame-vulnerable styles of narcissism. The four groups represented 69% of the cases, leaving 217 out of the analysis. A significant multivariate analysis of variance result was found, testing the differences between the four groups on the combination of shame (SRS), object relations (BORI), and masochism (Hecht and Finney): Wilks's lambda = .37, F(12, 1225) = 45.91, p < .001. Univariate analyses of variance were run on all the variables, and each was significant, p < .0001. Table 3 displays the group means and notes significant differences between groups on all these variables.

Next, discriminant analysis was performed to see whether the measures could be used to classify subjects into these groups; 50% of the cases in the four groups were correctly classified. When only Groups 2 and 3 were selected, this improved to 91.1%. Each variable alone correctly classified between 81.1% and 88.7% of the cases in these two groups.

These considerations were consistent with the hypotheses that conscious shame is experienced in some forms or styles of narcissism but not in others, and that these differences in narcissism in some way covary with differences in object relations and masochism. It is not possible from this correlational analysis to arrive at causal conclusions, and path analytic model testing was deemed premature.

Shame, Masochism, Narcissism, and Gender Differences

T tests for gender differences were run on every scale and subscale. Significant two-tailed differences were found on a few variables, but none had an effect size of more than 4% of the variance. Likewise, significant differences between genders in the sizes of intercorrelations of scales and subscales were examined, but the largest gender difference in percentage of variance accounted was a minuscule 3%. Next, we looked to replicate gender differences previously reported.

Wright et al. (1989) found a nominally significant negative correlation

TABLE 3
Mean Pathology Scores for Four Groups Defined by Median Splits on Narcissism Scales

Group	NPI	OMNI	NPDS	n	% of Total Sample	SRS	BORI	Hecht	Finney
1	high	high	high	164	23.4	23.79	14.08	5.72,	15.06
2	high	low	low	101	14.4	17.95	4.94	.44 _b	5.78
3	low	high	high	85	12.1	27.35	14.88	6.85	17.59"
4	low	low	low	134	19.1	19.62 _a	4.87 _b	1.25 _b	6.93 _a

Note. Means within columns that do not have the same subscript are significantly different from each other using the least significant difference test, $\alpha < .01$.

between shame and NPI Exploitativeness among men (as did Harder & S. Lewis, 1987), and a gender difference in the size and direction of this correlation. Our study failed to replicate either finding. Harder and S. Lewis (1987) suggested that the gender difference they found in correlations between the NPI and the Crowne–Marlowe SDS could have been indicative of male denial of shame in endorsing NPI items. Again, this study failed to replicate. Hence, none of the univariate or bivariate gender differences seemed meaningful. However, it was thought that substantive differences might be found by looking at the predictive power of aggregated measures.

It was noticed that the correlation sizes for shame (SRS) with the more pathological narcissism measures (the NPDS and the OMNI), on the one hand, and with the masochism measures (the Finney and the Hecht), on the other, were reversed for men and women. These results are shown in Table 4.

Shame correlated more highly with masochism in women, and somewhat more highly with narcissism in men. A series of regression analyses were thus conducted to see whether masochism or narcissism predicted shame better for one gender than the other. These results are presented in Table 5.

Comparison of the multiple R^2 for women (.31) and men (.22) when aggre-

TABLE 4
Pearson Correlations of Shame (SRS) With Narcissism Scales (OMNI and NPDS) and
Masochism Scales (Hecht and Finney) by Gender

<u> </u>	Narc	issism	Masc	ochism
SRS	NPDS	OMNI	Hecht	Finney
Males	.48	.26	.31	.47
Females	.43	.32	.47	.56

TABLE 5
Stepwise Multiple Regressions of Shame (SRS) on Narcissism (OMNI and NPDS) and Masochism (Finney and Hecht) by Gender

Block	Variables Entered	R ² Change	F Change	<i>p</i> <
Males				
1	OMNI & NPDS	.24	35.75	.0001
2	Finney & Hecht	.03	4.17	.02
1	Finney & Hecht	.22	32.48	.0001
2	OMNI & NPDS	.04	6.79	.005
Females				
1	OMNI & NPDS	.20	55.71	.0001
2	Finney & Hecht	.12	37.68	.0001
1	Finney & Hecht	.31	95.93	.0001
2	OMNI & NPDS	.02	5.09	.01

gating the masochism measures in predicting shame indicates a difference of about 9% in variance accounted. Unlike the minor univariate and bivariate gender differences, given the sample size, the size of this effect is large enough to warrant attention. Dependent (feminine) masochism explains more shame in women than it does in men, for whom there is a slight edge (4%; .24 vs. .20) for the narcissism measures. This pattern of results indicates that though either masochism or narcissism will explain shame for either men or women, masochism does this somewhat better for women, there being negligible difference between the two in the case of men. For women, masochism alone explains almost all the shame which narcissism explains, the two explaining 19% of the variance in the SRS in common, while masochism uniquely explains another 12% of the variance, narcissism uniquely a mere 2%. In men, on the other hand, the narcissism measures explain only slightly more variance in shame than do the masochism measures, but neither narcissism nor masochism has much of an edge in providing unique explanatory power.

Denial as a Mediator Between Shame and Grandiose Narcissism

Harder and S. Lewis (1987) suggested that high scorers on the NPI might have unconscious shame, but be led to unconsciously deny it. They suggested (see also Lillibridge in Robinson & Shaver, 1973) as a test of this hypothesis using the Crowne–Marlowe as a measure of denial, and partialling out denial from the NPI and shame measures to see if this improved the correlation between NPI and shame. Such an analysis was conducted, both for the entire sample (N=701) and for each subgroup listed in Table 3. In no case did the correlation change more than .02. Hence, this study provides no evidence that denial plays a role in mediating the relation between shame and grandiose narcissism.

DISCUSSION

Gender Differences

It has often been suggested that two basic "narcissistic orientations" might divide along gender lines (Haaken, 1983; Harnik, 1924; Jones, 1913/1951; O'Leary & Wright, 1986; Reich, 1953; Richman & Flaherty, 1988; Sachs, 1929). It is difficult to conceive of circumstances in which a gender difference of less than 8% to 10% of the variance accounted would be useful information by itself. These findings suggest that looking at univariate or bivariate gender differences is not satisfactory. On the other hand, aggregating measures has suggested interesting differences between the genders in the degree to which

narcissism and masochism differentially explain shame, masochism being a much better predictor in women. This may be related to the modest gender differences Blatt and his colleagues have found in regard to anaclitic and introjective personality dimensions (Blatt, 1974; Blatt & Shichman, 1983; Chevron, Quinlan, & Blatt, 1978). Possibly, the greater shame associated with narcissism for men is an introjective matter, while the greater shame associated with masochism for women is an anaclitic matter. This introjective/anaclitic distinction would also be consonant with the small gender differences found here on the NPI (a presumably more "introjective" measure) and the BOR1 Insecure Attachment (a presumably "anaclitic" measure). This, of course, is somewhat speculative, and more sophisticated designs are currently being implemented to test these gender differences on the anaclitic and introjective dimensions.

Masochism, Narcissism, and Object Relations

The study provides support for the hypothesis that masochism has a narcissistic function. Correlations between the masochism measures and shame-accompanied narcissism (OMNI, NPDS, and BORI Egocentricity) ran from .48 to .64. In particular, of the three OMNI subscales, the masochism measures correlated most strongly with OMNI 3 (Narcissistically Abused Personality).

Support was also found for the view, first put forward by Berliner (1940, 1942, 1947, 1958), that masochism is closely associated with object relations disturbances. It is noteworthy that among the masochism measures' correlations with the BORI subscales, the correlations with BORI Insecure Attachment were the highest. This supports Berliner's specific hypothesis that masochism stems from a bid for the love of a more powerful, idealized love object.

Shame and Narcissism

This study found empirical support for the main hypothesis that two different styles of narcissism have quite different patterns of relationship to shame. For some people these different styles are very clear cut, as represented by Groups 2 and 3 of Table 3, composed of people who frequently feel conscious shame and those who infrequently do. However, these groups comprised only 26.5% of the whole sample. The majority of subjects were somewhere between these extremes. How might we think of their experience of shame?

It may be helpful to speak of the "vicissitudes" of narcissism, or a "dialectic" of shame and narcissism, as Morrison (1989) put it. If we think of the groups partitioned in Table 3, we might begin to speak fruitfully of a narcissistic balance, defined in terms of the extent to which the ambitious-phallic (Harder, 1979) style of the NPI determines the narcissism, and the extent to which the narcissistic vulnerability of the OMNI and NPDS does so. These

findings strongly suggest that this will co-vary with the degree to which shame is part of the narcissistic experience.

Self-Esteem Regulation, Unconscious Shame, and Idealization

This series of findings offers a measure of empirical anchoring for theories of interrelations among narcissism, shame, masochism, and object relations which are based in self-esteem regulation. Reich (1940, 1953, 1960), building upon the work of Brunswick (1940/1948), Harnik (1924), Horney (1934, 1937/1967), Olden (1941), and Sachs (1929), described how submissiveness, dependency, and idealization processes can serve as a means of self-esteem regulation, operating through narcissistic object choice. Theories about these processes explicitly informed the construction of the masochism scales in this study. Hence, while the positive correlation between certain narcissism scales (OMNI and NPDS) and shame suggests a connection between shame and narcissistic vulnerability, the further connection of these constructs, plus BORI Insecure Attachment, with masochism suggests that pathological submission and idealization processes operate through masochism in an attempt at narcissistic repair.

These processes occur in what Broucek (1991) called the "dissociative type" of narcissist. They are far less likely to occur in what he called the "unconflicted egotistical type," which corresponds more to the phallic, sadistic narcissism characteristic of those with a pathological grandiose self (Kernberg, 1975; Kohut, 1971). In this regard, Group 2 of Table 3 most resembles those who would locate toward the grandiose end of the spectrum. These individuals have diminished capacity to feel shame. Raskin and Terry (1988) established empirically that high scorers on the NPI were likely, in accord with Kernberg's view (1975), to show little discrepancy between real and ideal self. If such individuals harbored "unconscious shame," but merely denied it, then the difference between Broucek's egotistical and dissociative types would not be that the former had no shame, whereas the latter did, but rather that the former had unconscious shame, the latter conscious. Such denial might be part of a pathological form of self-esteem regulation different from the pathological self-esteem regulation seen in faulty idealization and submission mechanisms.

However, our test of the hypothesis that denial mediates the relation between grandiose narcissism and shame had null results: Grandiose narcissism (the NPI) correlated negatively with shame whether or not denial (Crowne–Marlowe) was co-varied out. Hence, such unconflicted egotistical narcissists appear to be simply grandiose and shameless, rather than unconsciously shamed but defending against this by higher levels of grandiosity. They seem to avoid failure and seek praise to preserve their grandiosity rather than to avoid shame. They seem neither shame-prone nor obviously motivated to be grandiose by underlying shame.

This interpretation is consistent with Raskin's finding that high scorers on

the NPI embody Kernberg's (1975) view of the narcissist's grandiose self as arising from an identification of the self-concept and the ideal self, and to this extent seems to vindicate Kernberg's remark vis-à-vis Kohut that the grandiose self is a pathological, non-normal structure. These findings also appear to contradict Kohut's early (1966, p. 441) contention that shame arises most prominently in people with powerful ambition for success.

On the other hand, Morrison's (1989) late-Kohutian (1977) account of narcissism's relation to shame fits well with the findings of this study. Morrison argued in Kohutian terms that "shame is a secondary reaction of the self in response to the failure of a compensatory self-structure" (p. 78), by which he meant a failure of the idealizing pole of the bipolar self in an attempt to compensate for earlier failure of the grandiose pole. On this reading, it is not grandiose ambition per se which is shameful; rather, the failure to live up to idealized internal selfobjects is the root of shame. Such compensatory efforts are to be distinguished from defensive efforts to cover up a lack of earlier realistic integration of grandiose strivings. The view that shame is a derivative of failure at the idealizing pole of the Kohutian bipolar self has clear similarity to Reich's previously mentioned considerations regarding pathological attempts at self-esteem regulation through faulty idealization and submission in narcissistic object choice; it also is similar to the connection of shame and idealization efforts within Broucek's dissociative type. Although Kernberg refused to include these faulty idealization processes within narcissistic personality disorder proper, assimilating them instead into "narcissistic character defenses," he identified the difference between these two in the functioning of idealization. Hence, there seems to be a consensus among theoreticians that the connection between shame and narcissism is through failure of the idealizing aspects of narcissism in faulty attempts at self-esteem regulation.

This construction is consistent with the present data set. Those subjects with a more pathological grandiose self (Group 2 of Table 3) experience minimal shame, there being no reason to suspect they harbor unconscious shame. Such "shamelessness" (Lowenfeld, 1976) limits idealization capacity and increases psychopathy. Although this study did not include direct indices of idealization or of aggressiveness, paranoia, or psychopathy, Raskin and Terry's study (1988) as well as Biscardi and Schill's (1985) findings suggest that the NPI would correlate more strongly than the NPDS or OMNI with the latter measures, and that such grandiose types would have diminished capacity for idealization.

Caveats and Limitations

This is a large sample study, and the failure to replicate previous findings of minor gender differences is probably due to chance findings in earlier studies with much smaller sample sizes and no corrections for Type I error. Although

no ready explanation for these differences based on merely regional sampling differences comes to mind, such differences cannot be ruled out until larger sample replications are done in other regions.

This study has selected the best validated available measures; still, these have their limitations within the current sample. The use in this study of an objective measure of unconscious denial (the Crowne-Marlowe) is embedded in the larger controversy of whether unconscious processes and motivation can be validly assessed by such techniques. The items in the derived SRS have been used in a number of studies, but none with behavioral criteria. Though the NPI has received extensive behavioral and criterial validation, it was not developed from a clinical base of known groups, which, on the other hand, has been the criterion group for the other two measures. Again, although developed from known groups, the masochism measures have no substantial validation prior to this study beyond their initial development. Speaking of two different styles of narcissism which have different patterns of relationship to shame is predicated on these two types being unitary on an underlying level. This unity has been supported somewhat by the statistical manipulations reported (using OMNI 3 as a suppressor variable; co-varying out the shame measure), but the exact nature of this relationship has not yet been established.

The study suffers from the restrictions of range typical of university samples. Scores on the pathology measures have the expectable skewed ranges due to the narrow college student-based sample. Strictly speaking, conclusions cannot be generalized from this college population to a more general population or to a clinical population without sampling from those populations. Further sampling with measurement of paranoid thinking, aggression, and psychopathy is now underway; this will provide a test of convergent validity for the present exploratory findings. Future research needs to be directed to community-active and clinical adults.

ACKNOWLEDGMENT

I gratefully acknowledge the helpful comments of Charles P. Cohen on previous drafts of this article.

REFERENCES

American Psychiatric Association. (1987). Diagnostic and statistical manual of mental disorders (3rd ed., rev.). Washington, DC: Author.

Ashby, H. U., Lee, R. R., & Duke, E. H. (1979, September). A narcissistic personality disorder MMPI scale. Paper presented at the meeting of the American Psychological Association, New York.

- Bach, S. (1991). On sadomasochistic object relations. In G. I. Fogel & W. A. Myers (Eds.), *Perversions and near perversions* (pp. 75-92). New Haven, CT: Yale University Press.
- Becker, B., Bell, M., & Billington, R. (1987). Object relations ego deficits in bulimic col ege women. *Journal of Clinical Psychology*, 43, 92-95.
- Bell, M., Billington, R., & Becker, B. (1986). A scale for the assessment of object relations: Reliability, validity, and factorial invariance. *Journal of Clinical Psychology*, 42, 733-741.
- Bell, M., Billington, R., Cicchetti, D., & Gibbons, J. (1988). Do object relations deficits distinguish BPD from other diagnostic groups? *Journal of Clinical Psychology*. 44, 511-516.
- Bellak, L., Hurvich, M., & Gediman, H. (1973). Ego functions in schizophrenics, neurotics, and normals. New York: Wiley.
- Benjamin, J. (1988). The bonds of love. New York: Pantheon.
- Berliner, B. (1940). Libido and reality in masochism. Psychoanalytic Quarterly, 9, 322-333
- Berliner, B. (1942). The concept of masochism. Psychoanalytic Review, 19, 386-400.
- Berliner, B. (1947). On some psychodynamics of masochism. *Psychoanalytic Quarterly*, 16, 359–471.
- Berliner, B. (1958). The role of object relations in moral masochism. *Psychoanalytic Quarterly*, 27, 38-56.
- Bernstein, I. (1957). The role of narcissism in moral masochism. *Psychoanalytic Quarterly*, 26, 358-377.
- Biscardi, D., & Schill, T. (1985). Correlations of narcissistic traits with defensive style, Machiavellianism, and empathy. *Psychological Reports*, 57, 354.
- Blatt, S. J. (1974). Levels of object representation in anaclitic and introjective depression. The Psychoanalytic Study of the Child, 29, 107-157.
- Blatt, S. J., & Shichman, S. (1983). Two primary configurations of psychopathology. *Psychoanally-sis and Contemporary Thought*, 6, 187-254.
- Bonaparte, M. (1966). Passivity, masochism, and femininity. In H. M. Ruitenbeek (Ed.), *Psycho-analysis and female sexuality* (pp. 130–139). New Haven, CT: College and University Publishers.
- Broucek, F. (1991). Shame and the self. New York: Guilford.
- Brunswick, R. (1948). The precedipal phase of the libido development. In R. Fliess (Ed.), *The psychoanalytic reader* (Vol. 1, pp. 261–283). New York: International Universities Press. (Original work published 1940)
- Bursten, B. (1973). Some narcissistic personality types. *International Journal of Psychoanalysis*, 54, 287-300.
- Chevron, E. S., Quinlan, D. M., & Blatt, S. J. (1978). Sex roles and gender differences in depression. *Journal of Abnormal Psychology*, 87, 680-683.
- Cooper, A. (1988). The narcissistic-masochistic character. In R. Glick & D. Meyers (Eds.), Masochism: Current psychoanalytic perspectives (pp. 117-138). Hillsdale, NJ: The Analytic Proces
- Crowne, D., & Marlowe, D. (1960). A new scale of social desirability independent of psychopathology. *Journal of Consulting Psychology*, 24, 349-354.
- Deutsch, H. (1944). The psychology of women (Vol. 1). New York: Grune & Stratton.
- Emmons, R. (1984). Factor analysis and construct validity of the Narcissistic Personality Inventory. Journal of Personality Assessment, 48, 291-300.
- Emmons, R. (1987). Narcissism: Theory and measurement. *Journal of Personality and Social Psychology*, 52, 11-17.
- Finney, J. (1965). Development of a new set of MMPI scales. *Psychological Reports*, 17, 707–713. Freud, S. (1914). On narcissism. S.E., 14, 73–102.
- Gedo, J. E. (1988). The mind in disorder. Hillsdale, NJ: The Analytic Press.
- Haaken, J. (1983). Sex differences and narcissistic disorders. The American Journal of Psychoanalysis, 43, 315-324.

- Harder, D. (1979). The assessment of ambitious-narcissistic character style with three projective tests: The Early Memories, TAT, and Rorschach. *Journal of Personality Assessment*, 43, 23-32
- Harder, D. (1984). Character style of the defensively high self-esteem man. Journal of Clinical Psychology, 40, 26-35.
- Harder, D. (1990). Comment on Wright, O'Leary, and Balkin's "Shame, guilt, narcissism, and depression: Correlates and sex differences." *Psychoanalytic Psychology*, 7, 285–289.
- Harder, D., & Lewis, S. (1987). The assessment of shame and guilt. In J. Butcher & C. Spielberger (Eds.), *Advances in personality assessment* (Vol. 6, pp. 89–114). Hillsdale, NJ: Lawrence Erlbaum Associates, Inc.
- Harder, D., & Zalma, A. (1990). Two promising shame and guilt scales: A construct validity comparison. *Journal of Personality Assessment*, 55, 729-745.
- Harnik, J. (1924). The various developments undergone by narcissism in men and in women. International Journal of Psycho-Analysis, 5, 66-83.
- Hecht, S. (1950). An investigation into the dynamics of female masochistic character structure. Unpublished doctoral dissertation, University of California, Berkeley.
- Hoblitzelle, W. (1987). Differentiating and measuring shame and guilt: The relation between shame and depression. In H. B. Lewis (Ed.), *The role of shame in symptom formation* (pp. 207-235). Hillsdale, NJ: Lawrence Erlbaum Associates, Inc.
- Horney, K. (1934). The overvaluation of love: A study of a common present day feminine type. *Psychoanalytic Quarterly*, 3, 605-638.
- Horney, K. (1935). The problem of feminine masochism. Psychoanalytic Review, 22, 241-257.
- Horney, K. (1967). The neurotic need for love. In H. Kelman (Ed.), Feminine psychology (pp. 245–258). New York: Norton. (Original work published 1937)
- Jones, E. (1951). The God complex. In Essays in applied psychoanalysis (Vol. 2, pp. 244–265). London: Hogarth. (Original work published 1913)
- Kernberg, O. (1975). Borderline conditions and pathological narcissism. New York: Aronson.
- Kernberg, O. (1988). Clinical dimensions of masochism. In R. A. Glick & E. I. Meyers (Eds.), Masochism (pp. 61-80). Hillsdale, NJ: The Analytic Press.
- Kohut, H. (1966). Forms and transformations of narcissism. Journal of the American Psychoanalytic Association, 14, 243-272.
- Kohut, H. (1971). The analysis of the self. New York: International Universities Press.
- Kohut, H. (1977). The restoration of the self. New York: International Universities Press.
- Lampl-de Groot, J. (1965). Masochism and narcissism. In *The development of the mind* (pp. 82-92). New York: International Universities Press. (Original work published 1937)
- Lewis, H. (1971). Shame and guilt in neurosis. New York: International Universities Press.
- Lowenfeld, H. (1976). Notes on shamelessness. Psychoanalytic Quarterly, 45, 62-72.
- Masterson, J. (1981). Narcissistic and borderline disorders. New York: Brunner/Mazel.
- Miller, A. (1979). Depression and grandiosity as related forms of narcissistic disturbances. *International Review of Psycho-Analysis*, 6, 62–76.
- Miller, A. (1981). The drama of the gifted child. New York: Basic Books.
- Miller, A. (1984). Thou shalt not be aware. New York: Farrar, Straus, & Giroux.
- Miller, A. (1985). For your own good. New York: Farrar, Straus, & Giroux.
- Morrison, A. (1989). Shame: The underside of narcissism. Hillsdale, NJ: The Analytic Press.
- Nathanson, D. (1987). The shame/pride axis. In H. B. Lewis (Ed.), The role of shame in symptom formation (pp. 183-205). Hillsdale, NJ: Lawrence Erlbaum Associates, Inc.
- O'Brien, M. L. (1987). Examining the dimensionality of pathological narcissism: Factor analysis and construct validity of the O'Brien Multiphasic Narcissism Inventory. *Psychological Reports*, 61, 499-510.
- O'Brien, M. L. (1988). Further evidence of the validity of the O'Brien Multiphasic Narcissism Inventory. *Psychological Reports*, 62, 879-882.

- Olden, C. (1941). About the fascinating effect of the narcissistic personality. *American Imago*, 2, 347–355.
- O'Leary, J., & Wright, F. (1986). Shame and gender issues in pathological narcissism. Psychoanalytic Psychology, 3, 327-339.
- Randolph, B. J., & Winstead, B. (1988). Sexual decision making and object relations theory. Archives of Sexual Behavior, 17, 389-409.
- Raskin, R., & Hall, C. (1979). A narcissistic personality inventory. Psychological Reports, 45, 590.
 Raskin, R., & Hall, C. (1981). The Narcissistic Personality Inventory. Alternate form reliability and further evidence of construct validity. Journal of Personality Assessment, 45, 159-162.
- Raskin, R., & Terry, H. (1988). A principal-components analysis of the Narcissistic Personality Inventory and further evidence of its construct validity. *Journal of Personality and Social Psychology*, 54, 890–902.
- Reich, A. (1940). A contribution to the psychoanalysis of extreme submissiveness in women. *Psychoanalytic Quarterly*, *9*, 470–480.
- Reich, A. (1953). Narcissistic object choice in women. Journal of the American Psychoanalytic Association, 1, 22-44.
- Reich, A. (1960). Pathologic forms of self-esteem regulation. The Psychoanalytic Study of the Child, 15, 215-232.
- Retzinger, S. (1985). The resentment process: Videotape studies. *Psychoanalytic Psychology*, 2, 129-151.
- Retzinger, S. (1987). Resentment and laughter: Video studies of the shame-rage spiral. In H B. Lewis (Ed.), *The role of shame in symptom formation* (pp. 151–181). Hillsdale, NJ: Lawrence Erlbaum Associates, Inc.
- Retzinger, S. (1989). A theory of mental illness: Integrating social and emotional aspects. *Psycniatry*, 52, 325–335.
- Richman, J., & Flaherty, J. (1988). "Tragic Man" and "Tragic Woman": Gender differences in narcissistic styles. *Psychiatry*, 51, 368-377.
- Robinson, J., & Shaver, P. (1973). Measures of social psychological attitudes (rev. ed.). Ann Arbor, MI: Survey Research Center. Institute for Social Research
- Sachs, H. (1929). One of the motive factors in the formation of the super-ego in women. *International Journal of Psycho-Analysis*, 10, 39-50.
- Solomon, R. (1982). Validity of the MMPI Narcissistic Personality Disorder Scale. Psychological Reports, 50, 463–466.
- Stolorow, R. (1975). The narcissistic function of masochism (and sadism). *International Journal of Psycho-Analysis*, 56, 441-448.
- Stricker, G., & Healy, B. J. (1990). Projective assessment of object relations: A review of the empirical literature. *Psychological Assessment*, 2, 219-230.
- Thomson, C. (1942). Cultural pressures in the psychology of women. Psychiatry, 5, 331-339.
- Wainer, H., & Kiely, G. L. (1987). Item clusters and computerized adaptive testing: A case for testlets. *Journal of Educational Measurement*, 24, 185-201.
- Watson, P., Grisham, S., Trotter, M., & Biderman, M. (1984). Narcissism and empathy: Valicity evidence for the Narcissistic Personality Inventory. *Journal of Personality Assessment*, 48, 301–305.
- Watson, P., McKinney, J., Hawkins, C., & Morris, R. (1988). Assertiveness and narcissism. *Psychotherapy: Theory, Research, Practice, 25,* 125-131.
- Wright, F., O'Leary, J., & Balkin, J. (1989). Shame, guilt, narcissism, and depression: Correlates and sex differences. *Psychoanalytic Psychology*, 6, 217-230.