



Disagreeable narcissism mediates an effect of BAS on addictive behaviors

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ABSTRACT

Some forms of personality dysfunction that are associated with substance use and other externalizing behaviors, such as Narcissistic Personality Disorder, are characterized by low five-factor Agreeableness. Low Agreeableness and high Extraversion are both associated with the Behavioral Approach System in the revised Reinforcement Sensitivity Theory of Personality (RST; McNaughton & Corr, 2008). Meta-analyses examining personality predictors of Substance Use Disorders (Kotov et al., 2010) and Pathological Gambling (MacLaren et al., 2011) have implicated low Agreeableness but not Extraversion. In the present study, we sampled undergraduate students ($N = 346$) to examine relationships between two aspects of grandiose narcissism measured by the Narcissistic Personality Inventory (NPI), approach motivation measured by the BIS/BAS scales, and self-reported addictive behaviors. Disagreeable and Extraverted subscales of the NPI were examined for possible mediation of associations between BAS and addictive behaviors. The more disagreeable aspect of narcissism mediated the effects of BAS on drug use, gambling, sex, and maladaptive intimate relationships. These results suggest that one mechanism through which the Behavioral Approach System may promote addictive behavior among grandiose Narcissists is through its association with their aggressive and antagonistic interpersonal style.

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1. Introduction

Narcissistic Personality Disorder (NPD) is a psychiatric pathology characterized by grandiose self-importance, fantasies of achievement, and intense desire for admiration despite poor interpersonal functioning, exploitation of others, and lack of empathy. NPD is more prevalent among men than women, and men with NPD are at high risk for alcohol and drug dependence (Stinson et al., 2008). Personality and social psychologists also view narcissism as a continuous trait variable within the healthy population that may be related to more broad personality constructs. Meta-analysis of NPD and the Five Factor Model (Costa & McCrae, 1992) found only low Agreeableness to have a substantial effect size (Samuel & Widiger, 2008), but it has been argued that the apparently modest involvement of Extraversion and Neuroticism may result from the psychometric comingling of distinct *grandiose* and *vulnerable* aspects within trait narcissism (Miller, Widiger, & Campbell, 2010). It is widely believed that trait narcissism has at least these two discrete aspects (Cain, Pincus, & Ansell, 2008), with measures of grandiosity correlating positively with Extraversion and negatively with Agreeableness and Neuroticism, and with measures of vulnerability being associated with introversion, disagreeableness and high Neuroticism (Miller et al., 2011a).

The grandiose aspect and its contribution to externalizing behavior was the focus of the present study, and we considered its extraverted and disagreeable components as trait representations of a motivational tendency in favor of a behavioral approach. We assessed a measure of grandiose narcissism as a correlate of potentially addictive behavior, and tested its unique contribution beyond that of more broad individual differences in approach motivation conceived within the revised Reinforcement Sensitivity Theory of Personality (rRST; McNaughton & Corr, 2008).

1.1. Grandiose narcissism as disagreeable Extraversion

The Narcissistic Personality Inventory (NPI; Raskin & Terry, 1988) has been widely used in research on grandiose narcissism, and it has been found to correlate negatively with Agreeableness and positively with Extraversion (Miller et al., 2009), and also to correlate positively with BAS (Foster & Trimm, 2008). This multidimensional content has complicated efforts to integrate research using the NPI into the wider literature based on the Five Factor Model (Miller, Price, & Campbell, 2012), but examination of its internal structure has identified two distinct groups of items that reflect tendencies toward disagreeableness versus Extraversion (Rosenthal & Hooley, 2010). One such component, called NPI-Nirt, correlated strongly with low Agreeableness but weakly with Extraversion (Miller, Maples, & Campbell, 2011b). Rosenthal, Montoya, Ridings, Rieck, and Hooley (2011) also found this subscale correlated positively with the Aggression Questionnaire (Buss & Perry, 1992). Whereas

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the NPI-Nirt subscale represents a disagreeable and aggressive aspect of grandiose narcissism, Miller, Maples et al. (2011b) found the other subscale, called NPI-Xirt, to have moderate correlations with both disagreeableness and Extraversion. Likewise, Rosenthal et al. (2011) reported a positive correlation between NPI-Xirt and self-esteem. Thus, the NPI-Xirt subscale represents a prosocial and generally adaptive aspect of grandiose narcissism reflected in high Extraversion and self-esteem, but the NPI-Nirt subscale taps a more disagreeable aspect that may promote envious and aggressive seeking of intense reward as one's entitlement.

1.2. Approach motivation and addictive behaviors

The rRST accounts for learning, motivation, and some forms of psychopathology in terms of neurobiological systems that control approach, avoidance, and risk assessment behaviors. Factor analytic (Ibanez et al., 2010) and correlational studies (Keiser & Ross, 2011; Mitchell et al., 2007; Smits & Boeck, 2006) have confirmed the conceptual link between self-report measures of the approach system, and low Agreeableness and high Extraversion (Smillie, Pickering, & Jackson, 2006). Although Extraversion may contribute to substance use and other potentially addictive behaviors in social contexts, meta-analyses have failed to find significant roles in the clinical diagnosis of Substance Use Disorders (Kotov, Gamez, Schmidt, & Wilson, 2010) or Pathological Gambling (MacLaren, Fugelsang, Harrigan, & Dixon, 2011). Instead, the meta-analyses of disordered gambling and Substance Use Disorders implicated traits that cluster with low Agreeableness, low Conscientiousness, and high Neuroticism in a hierarchical structural model of personality (Markon, Krueger, & Watson, 2005).

In the present study, we sought to examine relationships among the two aspects of grandiose narcissism measured within the NPI, approach motivation measured by the BAS scales, and self-reported addictive behavior in a sample of undergraduate students. We used the NPI as a measure of narcissism because we were interested in testing relationships involving grandiose narcissism, BAS, and the tendency toward compulsive behavior and to use potentially addictive drugs, which is a form of externalizing behavior commonly seen in NPD. Furthermore, we explored the possibility that the more aggressive aspect of grandiose narcissism, represented by the NPI-Nirt subscale, could mediate the role played by BAS reward seeking in addictive behavior. We used the Promis Questionnaire (Christo et al., 2003) as a multidimensional indicator of behaviors that all share some aspects of reward seeking and compulsion, including some potentially addictive behaviors and symptoms of eating disorder. A measure of Bulimia symptoms was of particular interest as a test of discriminant validity for our contention that grandiose narcissism mediates BAS. Low BAS has been found in people with eating disorders (Harrison, Treasure, & Smillie, 2011), and Bulimia symptoms correlate positively with Neuroticism and vulnerable narcissism, but not grandiose narcissism (Maples, Collins, Miller, Fischer, & Seibert, 2010).

2. Method

2.1. Participants

The participants were 346 introductory Psychology students who participated anonymously for course credit. The sample contained 240 women, 75 men, and 31 who did not identify their gender. The participants were aged 17–51 years ($M = 20.4$ years, $SD = 5.25$). Questionnaires were completed in supervised group sessions with approximately 20 participants per session.

2.2. Narcissistic Personality Inventory

The Narcissistic Personality Inventory (NPI; Raskin & Terry, 1988) is a measure of grandiose narcissism that consists of 40 pairs of self-descriptive statements. Participants select the statement from each pair that best describes them, and a total narcissism score is calculated as the number of narcissistic alternatives chosen. Following Rosenthal and Hooley (2010), we also calculated scores for the NPI_Nirt and NPI_Xirt subscales. The interitem reliability of the NPI_Nirt, NPI_Xirt, and total NPI scores was Cronbach's $\alpha = .70$, $.73$, and $.83$, respectively. Total NPI scores in this sample ranged from 1 to 35 ($M = 14.1$; $SD = 6.35$), and were significantly higher ($t(313) = 4.55$, $p < .001$) among men ($M = 16.8$, $SD = 6.78$) than women ($M = 13.1$; $SD = 6.04$).

2.3. BIS/BAS scales

The BIS/BAS scales (Carver & White, 1994) measure the sensitivity of behavioral approach and avoidance systems. The BAS items measure Reward Responsiveness (5 items), Drive (4 items), and Funseeking (4 items). In keeping with revised RST (McNaughton & Corr, 2008), the BIS scale was divided into separate subscales measuring Fear (4 items) and Anxiety (3 items) following Heym, Ferguson, and Lawrence (2008). Items were rated on a 4-point Likert scale: (1) strongly disagree, (2) disagree, (3) agree, (4) strongly agree. Total scores were divided by the number of scored items to eliminate missing values. Interitem reliability for Reward, Drive, Funseeking, and total BAS was Cronbach's $\alpha = .55$, $.74$, $.68$, and $.78$ respectively. Interitem reliability for Fear, Anxiety and total BIS was $.65$, $.70$, and $.78$, respectively.

2.4. Shorter Promis Questionnaire

The Shorter Promis Questionnaire (SPQ; Christo et al., 2003) is a self-report assessment of multiple addictive behaviors. Each of the subscales consists of 10 self-referent statements that respondents endorse on a six-point scale from 0 (not like me) to 5 (like me). We included scales measuring abuse of alcohol, illegal drugs, prescription drugs, gambling, as well as sexual compulsivity, shopping, work, exercise, dominant and submissive intimate relationships, and dominant and submissive compulsive helping. Total scores were divided by the number of scored items to eliminate missing values. Interitem reliability for the scales in the present sample ranged from Cronbach's $\alpha = .69$ – $.93$. The SPQ was developed using case data from a clinical population (Stephenson, Maggi, Lefever, & Morojele, 1995), normed on a non-clinical sample (Christo et al., 2003), and its factor structure has been validated in clinical (Haylett, Stephenson, & Lefever, 2004) high school (Pallanti, Bernardi, & Quercioli, 2006) and university (MacLaren & Best, 2010) samples.

2.5. Eating Attitudes Test and Attention to Body Shape scale

The Food Bingeing and Starving scales of the original SPQ contain items that appear to blend dietary restraint and binge/purge symptoms of anorexia and bulimia. Because we wanted a brief measure to isolate bulimia symptoms, we replaced these scales with the Eating Attitudes Test (EAT-26; Garner, Olmstead, Bohr, & Garfinkel, 1982) and the Attention to Body Shape scale (ABS; Beebe, 1995). The EAT-26 is a widely used scale with 26-items that assess atypical attitudes toward food and behaviors that may be symptomatic of eating disorder. The EAT-26 includes three separate scales measuring oral control, dieting, and bulimia. The ABS is a 7-item scale that measures preoccupation with body image. These scales' questions were embedded into the SPQ and were answered using the same 6-point scale as the other questions in the SPQ, and total scores were divided by the number of scored items

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