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Overparenting and Young Adult Narcissism: Psychological Control and Interpersonal Dependency as Mediators

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OVERPARENTING AND YOUNG ADULT NARCISSISM:
PSYCHOLOGICAL CONTROL AND INTERPERSONAL
DEPENDENCY AS MEDIATORS

by

Nathan Alexander Winner

A Dissertation
Submitted to the Graduate School,
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August 2019

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PSYCHOLOGICAL CONTROL AND INTERPERSONAL
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by Nathan Alexander Winner

August 2019

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ABSTRACT

OVERPARENTING AND YOUNG ADULT NARCISSISM: PSYCHOLOGICAL CONTROL AND INTERPERSONAL DEPENDENCY AS MEDIATORS

by Nathan Alexander Winner

August 2019

Overparenting, or “helicopter parenting,” is a unique style of parenting characterized by parents’ well-intentioned but age-inappropriate over-involvement and intrusiveness in their children’s lives. Recent research has linked overparenting to the development of narcissistic traits in young adults, although the mechanisms of this relationship remain unclear. Two plausible mechanisms include the parenting behavior of psychological control and the increased interpersonal dependency of the child. Psychological control is a construct that overlaps with overparenting and has been linked to both dependent and narcissistic traits. Similarly, interpersonal dependency is a key predictor of narcissistic traits. Therefore, the present study sought to examine psychological control and interpersonal dependency as sequential mediators in the relationship between overparenting and young adult narcissistic traits. It was hypothesized that greater levels of overparenting would be mediated by both greater levels of parental psychological control and greater levels of interpersonal dependency among young adult children in predicting narcissistic traits. Additionally, it was predicted that these mediating relationships would be more pronounced when examining vulnerable narcissistic traits compared to grandiose narcissistic traits. Results supported these hypotheses. These findings highlight the mechanisms by which overparenting predicts narcissistic traits, as well as shed light on the multifaceted nature of narcissism.

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DEDICATION

This dissertation is dedicated to my parents, for their unwavering love, encouragement, and support.

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CHAPTER I - INTRODUCTION

Narcissism, broadly defined as an interpersonal pattern characterized by a sense of entitlement, an unhealthy need for admiration, and a general lack of empathy (Miller & Campbell, 2008; Pincus, 2013), has undergone conceptual scrutiny in recent years (Cain, Pincus, & Ansell, 2008), including researchers arguing for the existence of different narcissistic phenotypes (Miller et al., 2011; Pincus, 2013). More specifically, grandiose narcissism is regarded as narcissism manifesting as more overt, domineering, and arrogant behavior in interactions with others (Miller et al., 2011; Ronningstam, 2009), while vulnerable narcissism appears to characterize individuals who exhibit more shame, defensiveness, oversensitivity, and low self-esteem (Dickinson & Pincus, 2003; Miller et al., 2011). Additionally, a number of etiological theories on the development of narcissism have been posited over the last several decades, and these theories suggest different pathways in regards to the development of predominantly grandiose (Capron, 2004; Imbesi, 1999) and vulnerable (Horton, Bleau, & Drwecki, 2006; Rothstein, 1979) narcissistic traits.

Overparenting, or “helicopter parenting,” is a construct which has garnered a great deal of recent media attention (e.g., Kantrowitz & Tyre, 2006), and is regarded as parenting which is over-involved (i.e., “hovering”), albeit well-intentioned, in the lives of young adult children (Padilla-Walker & Nelson, 2012; Schiffrin et al., 2014). Recent research has also noted a number of problematic outcomes related to overparenting (Bradley-Geist & Olson-Buchanan, 2014; LeMoyne & Buchanan, 2011; Schiffrin et al., 2014), including the development of narcissistic traits (Segrin, Woszidlo, Givertz, Bauer, & Murphy, 2012; Segrin, Woszildo, Givertz, & Montgomery, 2013). There are a number

of plausible mechanisms by which overparenting may predict narcissistic traits, including the mediating roles of psychological control and interpersonal dependency. Psychological control, a category of parenting behaviors related to overparenting (Padilla-Walker & Nelson, 2012), is indicative of parenting which is over-involved, intrusive, and fostering of dependence (Barber, 1996). Relatedly, interpersonal dependency among young adult children, which has recently been linked to both overparenting (Odenweller, Booth-Butterfield, & Weber, 2014) and narcissism (Sonnenberg, 2013), is a pattern of interpersonal behavior characterized by overreliance on others (Bornstein, 2012), which is a trait related to an external locus of self, typical of narcissism (Pincus, 2013).

Therefore, the purpose of the present study was to examine the mediating roles of psychological control and interpersonal dependency in the relationship between overparenting and narcissistic traits. It was hypothesized that greater levels of both parental psychological control and young adult child interpersonal dependency would mediate the relationship between overparenting and pathological narcissism among young adults. Additionally, given the mechanism by which overparenting was hypothesized to predict narcissism (i.e., over-involvement rather than permissiveness; Horton, Bleau, & Drwecki, 2006), it was also hypothesized that these mediating relationships would be more pronounced among vulnerable (rather than grandiose) narcissism. This study helps clarify the manner in which overparenting may lead to narcissistic traits in young adults (Segrin, Woszildo et al., 2013), as well as cast light on the societal implications of this emerging style of parenting.

Narcissism

While the clinical definition of narcissism has been subject to a great deal of scrutiny and evolution (Cain, Pincus, & Ansell, 2008), researchers broadly characterize narcissism as consisting of a pattern of entitlement, a strong desire for admiration from others, and a dearth of empathy resulting in a generally dysfunctional interpersonal pattern (Cain, Pincus, & Ansell, 2008; Miller et al., 2011; Miller & Campbell, 2008; Pincus, 2013; American Psychiatric Association, 2013). Similarly, while the Diagnostic and Statistical Manual of Mental Disorders has undergone a number of changes over the decades (Cain et al., 2008), Narcissistic Personality Disorder is currently defined as “a pattern of grandiosity, need for admiration, and lack of empathy,” with an estimated prevalence rate ranging 0% to 6.2% in non-clinical populations (American Psychiatric Association, 2013, p. 645). However, given that everyone possesses some degree of narcissistic traits (Cain et al., 2008; Raskin & Hall, 1979), research examining narcissism typically conceptualizes this personality pattern as occurring along a continuum, where it is unnecessary to meet formal criteria for a personality disorder.

Recently, research has begun to explore different subtypes of narcissism (i.e., grandiose narcissism and vulnerable narcissism; Miller et al., 2011; Pincus, 2013). Grandiose narcissism is characterized by a greater degree of interpersonal domination and aggression (Miller et al., 2011), with these individuals often perceived as more brash, arrogant, and overt in their domineering patterns with others (Ronningstam, 2009). Grandiose narcissistic individuals have even been regarded as “oblivious” (Gabbard, 1989), given their propensity for denying their own weaknesses and shortcomings, in order to sustain their exaggerated, yet fragile sense of self (Gabbard, 1989; Kernberg,

1974; Kernberg, 1998). This conceptualization is consistent with research demonstrating grandiose narcissistic individuals as less likely to report distress related to their relational patterns, despite acknowledging interpersonal difficulties related to their domineering behavior (Dickinson & Pincus, 2003). Furthermore, some researchers have noted that aspects of this type of narcissism may be perceived as adaptive given the positive association between grandiose narcissism, trait self-esteem (Horton et al., 2006) and subjective well-being (Sedikides, Rudich, Gregg, Kumashiro, & Rusbult, 2004). Of course, these seemingly adaptive traits serve to belie an underlying instability in the self-image of grandiose narcissistic individuals (Ronningstam, 2009).

Conversely, vulnerable narcissism manifests in a socially avoidant manner (Dickinson & Pincus, 2003), with these individuals better characterized as “shame-ridden and hypersensitive” (Ronningstam, 2009; p. 113). These individuals often exhibit an exaggerated defensiveness, which serves to obfuscate a low self-esteem and feelings of insecurity (Miller et al., 2011). Whereas grandiose narcissistic individuals are able to compensate for their insecurity through their own overt and domineering behavior, vulnerable narcissistic individuals are more dependent on the explicit validation of others (Dickinson & Pincus, 2003). Given this distinction, vulnerable narcissists have been shown to be more likely than grandiose narcissists to acknowledge distress related to their interpersonal difficulties (Dickinson & Pincus, 2003). This chronic pattern of distress in interpersonal relationships leads to a larger pattern of hypersensitivity, and even anxious-avoidant tendencies (Miller et al., 2011; Dickinson & Pincus, 2003). Furthermore, while grandiose and vulnerable narcissism differ in their expressions of self-esteem, both of these constructs can be characterized by self-esteem that is unstable

and oversensitive, and dependent on external sources of validation (Pincus 2013; Ronningstam, 2009).

The presence of narcissistic traits varies along a continuum (Raskin & Hall, 1979), and some narcissistic characteristics may even be viewed as adaptive in certain circumstances (e.g., when paired with trait self-esteem; Horton et al., 2006). This has created some inconsistencies in the conceptualization of this construct, which is further compounded by variability in the method of assessment used by researchers (e.g., Miller et al., 2011; Pincus, 2013; Raskin & Hall, 1979). However, generally speaking, narcissistic traits are considered pathological. In fact, Pincus (2013) has distinguished pathological narcissism from more normative narcissistic traits by an emphasis on “intense needs for validation and admiration” which are “extreme and coupled with impaired regulatory capacities,” and “that energize the person to seek out self-enhancement experiences” (Pincus, 2013, p. 95). This understanding of pathological narcissism has been associated with a range of negative outcomes (Cain et al., 2008), including alcohol and substance abuse (Ronningstam, 1996; Vaglum, 1999), delinquency among adolescents (Barry, Grafeman, Adler, & Pickard, 2007; Barry & Wallace, 2010), and maladaptive relational styles among adolescents and young adults (Campbell, Foster, & Finkel, 2002; Dickinson & Pincus, 2003; Grafeman, Barry, Marcus, & Leachman, 2015; Lamkin, Clifton, Campbell, & Miller, 2014). Pathological narcissism has also been linked to antisocial traits and behaviors in adults more broadly (Book, Visser, & Volk, 2015; Paulhus & Williams, 2002), including sexual coercion and violence specifically (Baumeister, Catanese, & Wallace, 2002; Bushman, Bonacci, van Dijk, & Baumeister, 2003). Psychiatric patients exhibiting pathological narcissism have even demonstrated

unpredictable suicidal behavior, including suicidal behavior without the presence of depressive symptoms (Links, Gould, & Ratnayake, 2003; Ronningstam & Maltzberger, 1998). The overlap between narcissistic traits and other problematic personality patterns, including antisocial, histrionic, and borderline traits, has also been well-documented (American Psychiatric Association, 2013).

A number of studies have also examined outcomes associated with narcissism among young adults specifically. In assessing college students, Campbell, Foster, and Finkel (2002) found individuals endorsing greater narcissistic traits to be more likely to view romantic relationships as a “game,” and display less commitment. Finzi-Dottan and Cohen (2011) demonstrated that narcissism among young adults is predictive of greater conflict among siblings, with this conflict most profound when combined with disfavorable treatment from fathers. In examining differences between vulnerable and grandiose narcissistic subtypes, Ksinan and Vazsonyi (2016) found a preference for online social interactions to mediate the relationships between vulnerable narcissism and social anxiety and inefficacy. Similar mediations were not found for grandiose narcissism. Studies have also linked narcissistic traits among young adults with a childhood history of abuse and neglect (Bachar et al., 2015; Van Buren & Meehan, 2015), as well as aggressive driving behavior (Edwards, Warren, Tubré, Zyphur, & Hoffner-Prillaman, 2013) and aggressive retaliation (Bushman & Baumeister, 1998).

However, while emerging research has begun to distinguish between grandiose and vulnerable narcissistic subtypes in exploring correlates (e.g., Ksinan & Vazsonyi, 2016; Lamkin et al., 2014; Van Buren & Meehan, 2015), due in large part to recent advances in assessment of these traits (Pincus, 2013), progress in examining this

distinction is still lacking. Further exploration of this distinction is likely warranted, due to the phenotypic variation and hypothesized differences in associated outcomes between these two subtypes (Miller et al., 2011). Furthermore, while researchers differ in their understanding of the etiology of narcissism (e.g., the role of multiple interacting social systems; Washburn & Paskar, 2011), several studies have implicated specific parenting practices in the development of narcissistic traits, including parenting practices which may differ relative to narcissistic phenotypes (Horton et al., 2006).

Parenting and Narcissism

A great deal of research has examined the impact of parenting and childhood experiences on the development of narcissism (Norton, 2011). In fact, Horton et al. (2006) outlined a number of views of parenting on the etiology of narcissism, two of which are particularly relevant for the present study. Both of these theories have their foundation in Kohut's (1977) self-psychology. Kohut (1977) theorized that a child's development of self-identity is dependent upon: 1) parental responsiveness to the child's desires, emotions, and behaviors, as well as 2) the child's idealizing of their parents as a model of interpersonal behavior to be emulated. So long as parents respond appropriately and empathically to their children, and children idealize this pattern of interaction, a healthy sense of self, including a sense of self distinct from their parents' self, may be developed. Kohut (1977) also emphasized the role of "optimal frustrations" (i.e., occasions where the child is forced to confront challenges independently from their parents), which he theorized were necessary for the child to limit his/her sense of grandiosity to an appropriate level. Therefore, the failure to appropriately experience

“optimal frustrations” can lead to the expression of narcissistic traits; however, this failure can be achieved in multiple ways, and with different results.

One view of the etiology of narcissism, posited by Imbesi (1999), emphasizes the role of parental permissiveness, which is a style of parenting characterized by a low level of parental control, involvement, and discipline (Baumrind, 1966; 1967; 1971). Imbesi (1999) theorized that permissive parents fail to ensure sufficient opportunities for “optimal frustrations” for their children, due to their relative lack of discipline and control. This failure to ensure “optimal frustrations” results in an unrealistically elevated grandiose self by the child, as the child is not given appropriate feedback as to their own limits and responsibilities. The resulting exaggerated grandiosity is a key component of pathological narcissism, and specifically of grandiose narcissism (Miller et al., 2011; Pincus, 2013). Additionally, this theoretical understanding of the etiology of narcissism converges with other theories, including social learning theory, which argues that children learn from permissive parenting that they are superior and deserving of preferential treatment (Horton, 2011; Millon & Everly, 1985), and Young’s (1990) Schema-Focused Cognitive Approach, which emphasizes the need for children to internalize their own “limits,” which can only result from appropriate parental discipline. Therefore, while theories on the development of narcissism may differ as to the specific mechanism of action, there appears to be convergence in implicating permissive parenting as an important mechanism in the development of these grandiose traits (Horton et al., 2006). In fact, research has supported this perspective, including linking permissive parenting (Baumrind, 1967) and “pampering” to the development of grandiose narcissistic traits in adolescents (Mechanic & Berry, 2015) and young adults

(Capron, 2004; Ramsey, Watson, Biderman, & Reeves, 1996; Watson, Little, & Biderman, 1992). However, the present study will more closely examine a second theoretical understanding of the development of narcissism, which focuses on excessive parental control, rather than permissiveness.

Whereas Imbesi (1999) emphasized parenting so permissive that it leads to uninhibited grandiosity, a second perspective emphasizes parenting so restrictive that it inhibits the development of an independent sense of self. In keeping with Kohut's (1977) self-psychology theory, these parents also fail to provide "optimal frustrations" for their children; however, this failure is instead due to inappropriate and intrusive over-involvement, rather than permissiveness, on the part of the parent. This style of "overinvolved enmeshment" (Horton et al., 2006; p. 350), rather than leading to unimpeded grandiosity, leads to children who are dependent on external sources for their sense of identity and worth, which is a pattern also consistent with pathological narcissism, and especially vulnerable narcissism (Miller et al., 2011; Pincus, 2013).

This theoretical approach also converges with additional theoretical perspectives (e.g., Millon & Everly, 1985; Rothstein, 1979), and research examining excessive parental control practices (e.g., authoritarian parenting; Baumrind, 1966; 1967; 1971), have demonstrated a link with narcissistic traits (Watson et al., 1992), including vulnerable narcissistic traits specifically (Cramer, 2015). Additionally, parenting practices related to psychological control (e.g., withholding love and approval in order to influence and manipulate children), have been empirically linked in several studies to unhealthy narcissism in adolescents and young adults (Givertz & Segrin, 2014; Horton, et al., 2006; Horton & Tritch, 2014).

Where these two theories appear to diverge is in their explanation of narcissism as it relates to either the grandiose or vulnerable type. While parental permissiveness appears to predict children's unimpeded grandiosity (Capron, 2004; Imbesi, 1999), parental over-control and intrusiveness appears more closely linked to individuals' narcissistic dependency and insecurity (Horton et al., 2006; Rothstein, 1979), which are traits more closely associated with narcissistic vulnerability (Miller et al., 2011; Dickinson & Pincus, 2003). Given the degree to which these phenotypes of narcissism may differ in their presentation and related outcomes, future research should distinguish between these related, but distinct constructs (Miller et al., 2011). Additionally, more contemporary patterns of parenting behavior should be examined, including overparenting (i.e., "helicopter parenting"), which is a style of parenting that exhibits well-intentioned over-control and intrusiveness (Padilla-Walker & Nelson, 2012), and which has recently been linked to pathological narcissism among young adults (Segrin et al., 2012; Segrin, Woszildo et al., 2013). Therefore, the present study will seek to build on the research exploring parenting and narcissism, by examining the emerging body of research on overparenting, including its relationship to both grandiose and vulnerable narcissistic phenotypes.

Overparenting

Overparenting, often referred by media as "helicopter parenting" (e.g., Kantrowitz & Tyre, 2006), is a distinct style of parenting characterized by parental over-involvement (i.e., "hovering") in young adult children's lives (Schiffirin et al., 2014). This includes parents' withholding of autonomy and excessive doling of support (Padilla-Walker & Nelson, 2012; Segrin, Givertz, Swaitkowski, & Montgomery, 2013). Researchers have

argued that this style of parental intrusiveness may stem from parents' excessive fears and anxiety that, while well-intentioned, may ultimately impede appropriate child development (Nelson, 2010; Segrin, Givertz et al., 2013). While parental involvement has traditionally been conceptualized as positive (Combs-Orme, Wilson, Cain, Page, & Kirby, 2003; Lamborn, Mounts, Steinberg, & Dornbusch, 1991), recent research has highlighted the risks of developmentally inappropriate parental over-involvement on individuals' emotional health (Gar & Hudson, 2008; Marano, 2008) and adjustment upon entering adolescence (Grolnick, Kurowski, Dunlap, & Hevey, 2000). In fact, researchers have noted the similarity of overparenting among young adults to overprotective, or over-solicitous parenting, in young children (Padilla-Walker & Nelson, 2012). For example, over-solicitous parents often intrude in their children's play activities, and exhibit an excess of affection incongruent with the situational context (Rubin, Hastings, Stewart, Henderson, & Chen, 1997). Similar research has also linked over-solicitous parenting practices with anxiety and depressive symptoms among young children (Bayer, Sanson, & Hemphill, 2006; McShane & Hastings, 2009) and social inhibition among toddlers (Rubin, Burgess, & Hastings, 2002). Taken together, these studies suggest that parental over-involvement, despite being well-intentioned, may prove detrimental at any stage of development (Padilla-Walker & Nelson, 2012).

However, in some ways parental over-involvement may be uniquely problematic during young adulthood, given the growing independence and maturity expected of individuals as they enter adulthood (Arnett, 2004; Nelson & Barry, 2005; Padilla-Walker & Nelson, 2012). For example, many experts argue that the difficulties associated with overparenting manifest in an occupational setting, as young adults leave college and enter

the workforce (Ludden, 2012; Tyler, 2007). It should be noted that, similar to oversolicitous parenting of young children, the risks associated with overparenting young adults pertain to the nature of parental involvement (Schiffrin et al., 2014), with involvement that inhibits the development of autonomy in young adults being especially problematic (Padilla-Walker & Nelson, 2012). Additionally, while overparenting shares aspects of various other forms of parental control, including behavioral control (e.g., monitoring and behavior regulation) and an authoritarian parenting style (Odenweller et al., 2014), overparenting tends to be uniquely characterized by a high level of parental warmth and age-inappropriate, albeit well-intentioned, parental intrusiveness (Padilla-Walker & Nelson, 2012; Schiffrin et al., 2014).

While research is yet emerging, overparenting has been linked to a variety of negative outcomes among young adults, including poorer psychological and emotional health (Segrin, Woszildo et al., 2013; Schiffrin et al., 2014), and potentially even the abuse of prescription medication for depression and anxiety (LeMoyne & Buchanan, 2011). Various other studies have drawn links between overparenting and young adult neuroticism, maladaptive coping (Odenweller et al., 2014; Segrin, Woszildo et al., 2013), lower levels of self-efficacy (Bradley-Geist & Olson-Buchanan, 2014; van Ingen et al., 2015), and interpersonal difficulties (Segrin, Givertz et al., 2013). Additionally, while classical theoretical formulations of the etiology of narcissism (e.g., Kohut, 1977) did not address overparenting explicitly, researchers have recently linked overparenting with narcissistic traits, including entitlement specifically (Segrin et al., 2012) and pathological narcissism broadly (Segrin, Woszildo et al., 2013) among young adults. However, neither of these studies measured overparenting using well-established measures, nor did either

of these studies make a distinction between grandiose and vulnerable narcissism when examining the predictive ability of overparenting. Given the mechanism by which overparenting may plausibly lead to pathological narcissism (i.e., parental over-involvement leading to dependence in young adults), which is broadly consistent with Kohut's (1977) etiological formulation and has been suggested by overparenting researchers (Locke, Campbell, & Kavanagh, 2012), the distinction between narcissistic phenotypes may be warranted. Additionally, research has yet to account for mediators in the relationship between overparenting and narcissistic traits, which is an important next step for researchers to consider. An exploration of mediators between overparenting and narcissism ought to lend further support to a causal link between the two constructs, as well as help clarify the manner by which overparenting leads to narcissistic traits.

Psychological Control

One potential mediator in the relationship between overparenting and young adult narcissism is parental psychological control, defined by Barber (1996, p. 3296) as "control attempts that intrude into the psychological and emotional development of the child." Research has conceptualized psychological control as the parents' exploitation of the child's emotional bond with the parent (Barber, 1996; Becker, 1964), and parenting practices associated with psychological control, including forms of emotional manipulation such as the withholding of love and the use of guilt tactics (Horton et al., 2006), are generally considered to be malevolent and invasive in nature (Baumrind, 1991), dissimilar to overparenting. However, overparenting and psychological control share key similarities, including the withholding of appropriate autonomy and an unhealthy over-involvement in young adult children's lives, although these constructs

nevertheless remain theoretically distinct (Padilla-Walker & Nelson, 2012).

Psychological control also differs from *behavioral* control (i.e., parents' monitoring activity and use of rules in regulating children's behavior), although these constructs also appear related (Li, Li, & Newman, 2013; Padilla-Walker & Nelson, 2012). Overall, established parenting research suggests that a promotion of independence and autonomy is an important component of development across childhood (Grolnick, 2003; Peterson, 2005), and that parental involvement which does not ultimately aim to foster independence may prove to be counterproductive (Padilla-Walker & Nelson, 2012; Steinberg, 1990; Steinberg, Lamborn, Dornbusch, & Darling, 1992).

In regards to outcomes, failure for parents to foster appropriate autonomy, including the utilization of psychological control practices, has been shown to be predictive of emotional difficulties in children (Barber, 1996; Barber, Olsen, & Shagle, 1994; Allen et al., 2015), preadolescents (Kunz & Grych, 2013), and adolescents (Murray, Dwyer, Rubin, Knighton-Wisor, & Booth-LaForce, 2014; Herman, Dornbusch, Herron, & Harting, 1997). The risks associated with psychological control may also persist into young adulthood, with studies linking psychological control to outcomes associated with relational aggression (Wagner & Abaied, 2016), emotion dysregulation (Manzeske & Stright, 2009), and impaired identity development (Luyckx, Soenens, Vansteenkiste, Goossens, & Berzonsky, 2007). Researchers have also linked psychological control practices to dependent traits among adolescents (Steinberg, 1990) and young adults (Kins et al., 2012; Kins, Soenens, & Beyers, 2011), although research in examining these specific outcomes is still lacking.

Furthermore, psychological control has been linked to the development of unhealthy narcissistic traits in young adults (Givertz & Segrin, 2014; Horton et al., 2006), consistent with Kohut's (1977) theoretical formulation of the etiology of narcissism. Specifically, Givertz and Segrin (2014) found young adults' reports of their parents' psychological control practices were associated with scores on the Psychological Entitlement Scale (Campbell, Bonacci, Shelton, Exline, & Bushman, 2004). Similarly, studies have shown young adults' reports of their parents' psychological control practices to be linked with scores on the Narcissistic Personality Inventory (Horton & Tritch, 2014), including when extracting variance associated with trait self-esteem from these scores (Horton et al., 2006), which suggests that psychological control may be predictive of both grandiose and vulnerable narcissistic subtypes. However, a direct comparison of the predictive value of psychological control on these narcissistic subtypes has yet to be explored.

While overparenting and psychological control appear related, they nevertheless remain distinct constructs (Padilla-Walker & Nelson, 2012). Additionally, both overparenting and psychological control have been linked to narcissistic traits among young adults (Segrin et al., 2012; Segrin, Woszildo et al., 2013; Sonnenberg, 2013). Therefore, examining psychological control as a mediator between overparenting and narcissism appears theoretically consistent.

Interpersonal Dependency

Another mechanism by which overparenting may plausibly predict narcissism is through the facilitation of interpersonal dependency. Given that overparenting is characterized by parental over-involvement (Schiffrin et al., 2014) which may predict

children's reliance on external validation and direction (Kohut, 1977; Rothstein, 1979) and failure to obtain age-appropriate independence (Padilla-Walker & Nelson, 2012), young adult dependency may serve a pivotal role in the relationship between overparenting and narcissism.

Interpersonal dependency has been defined as a pattern of “thoughts, beliefs, feelings, and behaviors which revolve around the need to associate closely with, interact with, and rely upon valued other people” (Hirschfeld et al., 1977, p. 610). While subsequent research and theoretical frameworks have differed subtly in the conceptualization of interpersonal dependency (e.g., Bornstein & Languirand, 2003; Pincus & Gurtman, 1995), these approaches converge on their distinction of unhealthy interpersonal dependency from more adaptive interpersonal patterns by an unhealthy *overreliance* on valued others, with dependent individuals perceiving themselves as incapable or powerless (Bornstein, 2012; McClintock, Anderson, & Cranston, 2015), and possessing maladaptive self-perceptions rooted in the perceived need for others' support and affirmation (Bornstein, 2016). Moreover, unhealthy dependency is thought to manifest broadly across contexts, rather than remaining specific to certain appropriate situations (e.g., in sickness; Bornstein, 2005).

A dependent interpersonal pattern has been linked to greater levels of adult depression across gender (Dinger et al., 2015; Brewer & Olive, 2014; Nuns & Loas, 2005), and social anxiety in romantic relationships among young adults (Darcy, Davila, & Beck, 2005). Furthermore, interpersonal dependency has been shown to be predictive of elevated fears of abandonment, due to dependent individuals' overemphasis on external sources of support, rather than an intrinsic sense of self and security (Blatt,

2004). In fact, interpersonal dependency is a trait related to various cluster B personality disorders, including borderline (Bornstein, Becker-Maturo, Winarick, & Reichman, 2010; Bornstein, Hilsenroth, Padawer, & Fowler, 2000), histrionic (Bornstein, 1998), and narcissistic traits (Barber & Morse, 1994; Ekselius, Lindstrom, Knorrning, Bodlund, & Kullgren, 1994), although the link between dependent and narcissistic traits has demonstrated mixed results (Meyer, Pilkonis, Proietti, Heape, & Egan, 2001; Sinha & Watson, 2001). For example, while Bornstein et al. (2000) failed to find a link between dependency and narcissism when utilizing projective measures, Sonnenberg's (2013) utilization of the objective Interpersonal Dependency Inventory (Hirshfeld et al., 1977) demonstrated a positive relationship with narcissistic traits among young adults. These findings are consistent with research which has linked dependent and narcissistic traits among young adults using objective measures (Tomoko, 2013). Therefore, these somewhat inconsistent results may be attributable to the varied means by which researchers assess these traits, including the assessment or non-assessment of subclinical levels of dependency (Bornstein, 2005).

Additionally, dependent traits may manifest differently across grandiose and vulnerable narcissism, given grandiose narcissists' failure to recognize their own dependent interpersonal patterns (Bornstein, 1998a). In fact, a recent study by Luyten, Crowley, Janssen, and Mayes (2014) offered support for this hypothesis, as these researchers found vulnerable narcissism, but not grandiose narcissism, to mediate the relationship between dependency and sensitivity to social exclusion among adolescents. Alternately, Sonnenberg (2013) found interpersonal dependency to be predictive of both grandiose and vulnerable narcissism. Therefore, additional research appears necessary,

and particularly among young adults, who experience shifting social roles and responsibilities in young adulthood (Bornstein, 2005; Tanner, 2006). In fact, researchers have noted the unique risks of interpersonal dependency upon entering adulthood, including its relationship to loneliness and maladaptive social functioning (Mahon, 1982; Pritchard & Yalch, 2009). Given these concerns, it is imperative to better understand the role of parenting in predicting interpersonal dependency, in order to attenuate the risks associated with this problematic interpersonal pattern.

Consistent with Kohut (1977) and Rothstein's (1979) view on the implication of parental over-involvement in the etiology of narcissism, researchers have linked parental psychological control to the emergence of dependent traits in adolescence and young adulthood (Kins, Soenens, & Beyers, 2012; Soenens, Vansteenkiste, & Luyten, 2010). Various other forms of excessive control, including parenting practices associated with parental overprotection and an authoritarian parenting style, have also traditionally been linked to the emergence of dependent personality characteristics (Bornstein, 1992), which may even put individuals at risk for negative mental health outcomes, including social anxiety (Spokas & Heimberg, 2009) and depression among young adults (McCranie & Bass, 1984). Given the noted overlap between overparenting and various forms of parental over-control, including psychological and behavioral control (Padilla-Walker & Nelson, 2012), as well as the emphasis of overparenting on parental intrusiveness and decreased child perceptions of autonomy (Schiffrin et al., 2014), the link between overparenting and interpersonal dependency appears theoretically consistent.

In fact, Odenweller et al. (2014) recently implicated overparenting in the development of interpersonal dependency among young adults. Given this finding, as

well as the noted link between interpersonal dependency and pathological narcissism (Barber & Morse, 1994; Ekselius et al., 1994; Sonnenberg, 2013; Tomoko, 2013), interpersonal dependency appears to be a plausible mediator between overparenting and narcissism. Therefore, the current study sought to test the mediating effect of interpersonal dependency between overparenting and young adult narcissism.

Statement of Purpose

Emerging research has linked overparenting with narcissistic traits among young adults (Segrin et al., 2012; Segrin, Woszildo et al., 2013), although mediating variables in this relationship have remained largely unexplored. While research has also linked interpersonal dependency with both overparenting (Odenweller et al., 2014) and narcissism (Sonnenberg, 2013; Tomoko, 2013) in college students, no study has yet examined interpersonal dependency as a mediator between the two. Previous research has found that dependent traits may mediate the relationship between parental over-control and problematic mental health outcomes within these populations (McCranie & Bass, 1984; Spokas & Heimberg, 2009).

Parental psychological control has also remained unexplored as a mediator, despite research linking this construct to overparenting (Padilla-Walker & Nelson, 2012) and pathological narcissism (Givertz & Segrin, 2014; Horton et al., 2006), as well as interpersonal dependency among young adults (Kins et al., 2012; Kins et al., 2011). Therefore, the present study sought to examine parental psychological control and interpersonal dependency as mediators between overparenting and narcissistic traits in young adults. Given the growing concern within research and the media regarding the consequences of overparenting, or “helicopter parenting” (Kantrowitz & Tyre, 2006;

LeMoyne & Buchanan, 2011; Ludden, 2012; Padilla-Walker & Nelson, 2012; Schiffrin et al., 2014; Tyler, 2007), this study sought to further clarify the risks associated with this parenting style to the mental health outcomes of young adults. Additionally, differences between grandiose and vulnerable narcissism were explored, with the mediating effects of psychological control and interpersonal dependency predicted to be more robust between overparenting and vulnerable narcissism. This hypothesis was appropriate, given emerging research suggestive of the role of excessive parental control and over-involvement in the development of vulnerable narcissistic traits (Cramer, 2015; Horton et al., 2006; Rothstein, 1979). This research should therefore help clarify the various phenotypical variations of narcissism and their respective etiologies (Horton et al., 2006; Miller et al., 2011; Pincus, 2013).

Research Questions and Hypotheses

Question 1: Will parental psychological control mediate the relationship between overparenting and pathological narcissism among college students?

Hypothesis 1: Parental psychological control will mediate the relationship between overparenting and pathological narcissism among college students.

Question 2: Will the mediation of psychological control between overparenting and pathological narcissism differ across vulnerable narcissism and grandiose narcissism?

Hypothesis 2: The mediation of psychological control between overparenting and pathological narcissism will be more robust across vulnerable narcissism compared to grandiose narcissism.

Question 3: Will interpersonal dependency mediate the relationship between overparenting and pathological narcissism among college students?

Hypothesis 3: Interpersonal dependency will mediate the relationship between overparenting and pathological narcissism among college students.

Question 4: Will the mediation of interpersonal dependency between overparenting and pathological narcissism differ across vulnerable narcissism and grandiose narcissism?

Hypothesis 4: The mediation of interpersonal dependency between overparenting and pathological narcissism will be more robust across vulnerable narcissism compared to grandiose narcissism.

Question 5: Will both parental psychological control and interpersonal dependency sequentially mediate the relationship between overparenting and pathological narcissism among college students?

Hypothesis 5: Both parental psychological control and interpersonal dependency will sequentially mediate the relationship between overparenting and pathological narcissism among college students, such that greater levels of overparenting will predict greater levels of parental psychological control, which will predict greater interpersonal dependency, which in turn will predict greater pathological narcissism.

Question 6: Will the sequential mediation between overparenting and pathological narcissism differ across vulnerable narcissism and grandiose narcissism?

Hypothesis 6: The sequential mediation between overparenting and pathological narcissism will be more robust across vulnerable narcissism compared to grandiose narcissism.

CHAPTER II - METHODOLOGY

Participants and Procedure

This study was approved by The University of Southern Mississippi's Institutional Review Board Human Subjects Protection Review Committee (see Appendix A). All participants were recruited through the Department of Psychology's research participation program (<http://usm/sona-systems.com/>). Participants acknowledged their informed consent (see Appendix B), before completing the remaining questionnaire measures through Qualtrics, a secure online survey system. Following completion of the informed consent, participants completed a brief demographic questionnaire followed by randomly ordered measures of parenting behaviors, interpersonal dependency, and narcissistic traits. Completion of the study lasted approximately 15-20 minutes.

Quality assurance checks included two directed response items, which instructed participants to answer in a specific way (e.g., Answer "agree" to this question). Participants who answered incorrectly to either item were removed from further analyses ($N = 44$). Additionally, participants who completed study measures within a predetermined amount of time (i.e., 80 seconds for PNI, 60 seconds for IDI, 30 seconds for HPI, and 30 seconds for PCS), suggesting inattentiveness to item content, were also removed from further analyses ($N = 48$; Huang, Curran, Keeney, Poposki, & DeShon, 2012).

Four hundred thirty-one participants initially responded to the online survey. A total of 92 failed at least one validity check, an additional 20 participants did not complete each study measure, and 18 participants fell outside the age range of 18 to 26.

Therefore, a total of 301 participants were retained for further analyses. None of the remaining participants missed more than 75% of any measure items, and therefore all missing values were replaced with linear trend-at-point imputation, which predicts a value based on the trend for that specific item (Field, 2013).

Participants for the present study included 258 female (85.7%), 41 male (13.6%), and 2 other (i.e., “agender” and “Transgender FTM”; 0.7%) young adult college students. The average age for participants was 19.80 years ($SD = 1.904$), and included mostly Freshmen ($N = 120$; 39.9%), followed by Sophomores ($N = 73$; 24.3%), Juniors ($N = 53$; 17.6%), Seniors ($N = 54$; 17.9%), and one “other” ($N = 1$; 0.3%). The racial breakdown of the sample consisted of 191 White/non-Hispanic (63.5%), 98 Black/African-American (32.6%), 5 Asian-American (1.7%), 1 Native American (0.3%) and 6 “other” (2%) students. The majority of participants identified their mother as their primary caregiver ($N = 257$; 85.4%), followed by fathers ($N = 31$; 10.3%), grandmothers ($N = 9$; 3%), aunts ($N = 2$; 0.7%), and “other” ($N = 2$; 0.7%). Socioeconomic status (SES) was assessed by having participants rank themselves based on their perceived social standing on a 9-point scale (Adler et al., 1994). Results of this item approximated a normal distribution ($M = 4.98$, $SD = 1.39$).

Measures

Demographic Questionnaire

In addition to completion of study measures, a demographic questionnaire was used for participants to self-report basic demographic information. Participants also

identified a “primary caregiver,” and were asked to refer to this primary caregiver when answering subsequent questionnaires related to parenting.

Helicopter Parenting Instrument (HPI)

The Helicopter Parenting Instrument (HPI; Odenweller et al., 2014) is a 15-item measure used to assess participants’ reports of their parents’ use of overparenting behaviors. In response to inadequate development of previous overparenting measures, Odenweller (2014) created the HPI items using verbiage from previous research and popular media. Each item is rated on a 7-point Likert, with a score of 1 indicating “Very strongly disagree” and a score of 7 indicating “Very strongly agree.” Items are summed (with items 2 and 14 reverse-coded) to form a total score ranging from 15 to 105, with higher scores indicative of greater perceived overparenting behaviors. Example items include, “My parents tried to make all of my major decisions,” and “My parent overreacts when I encounter a negative experience;” however, the term “parent” in this study was replaced with “primary caregiver” for each item. The HPI has demonstrated adequate reliability among a sample of college students ($\alpha = .78$), and evidence of concurrent validity with LeMoyne and Buchanan’s (2011) Helicopter Parenting Scale (Odenweller et al., 2014). The HPI demonstrated a coefficient alpha of .77 for the present study.

Pathological Narcissism Inventory (PNI)

The Pathological Narcissism Inventory (PNI; Pincus et al., 2009) is a 52-item measure used to assess participants’ self-reported narcissistic characteristics. Each item is rated on a 6-point Likert scale, with a score of 0 indicating “Not at all like me” and a score of 5 indicating “Very much like me.” The PNI includes two higher-order scales of Narcissistic Grandiosity and Narcissistic Vulnerability, which represent the two primary

phenotypical manifestations of pathological narcissism (Pincus, 2013; Pincus et al., 2009). Narcissistic Grandiosity is further comprised of three subscales (i.e., Grandiose Fantasy, Exploitativeness, and Self-Sacrificing Self-Enhancement), and Narcissistic Vulnerability is comprised of four subscales (i.e., Contingent Self-Esteem, Hiding the Self, Devaluing, and Entitlement Rage). Narcissistic Grandiosity has a range of 0 to 90, and Narcissistic Vulnerability has a range of 0 to 170, with higher scores on each scale indicative of greater levels of their respective phenotypical variations of pathological narcissism. Example items for Narcissistic Grandiosity include, “I often fantasize about being admired and respected,” and “Everybody likes to hear my stories.” Example items for Narcissistic Vulnerability include, “It’s hard to show others the weaknesses I feel inside,” and “I can get pretty angry when others disagree with me.”

The PNI has demonstrated evidence of internal consistency, with coefficients ranging from .84 to .93 in a sample of young adult college students (Wright, Lukowitsky, Pincus, & Conroy, 2010). Pincus et al. (2009) also displayed evidence of concurrent validity for the PNI, with correlations between the PNI and the Narcissism-Hypersensitivity Scale (NHS; Serkownek, 1975) and the Hypersensitivity Narcissism Scale (HSNS; Hendin & Cheek, 1997) ranging from .51 to .62, respectively, despite modest coefficient alphas for the NHS ($\alpha = .65$) and the HSNS ($\alpha = .75$). Furthermore, Thomas, Wright, Lukowitsky, and Donnellan (2012) have provided evidence of criterion validity of the PNI among college students, while Wright et al. (2010) demonstrated a similar factor structure for the PNI across gender among college students, suggesting that PNI scores do not significantly vary across male and female young adults. For the present study, reliability coefficients for the total PNI total score, Narcissistic Grandiosity

subscale score, and Narcissistic Vulnerability subscale score were .96, .89, and .95, respectively.

Psychological Control Scale- Youth Self-Report (PCS-YSR)

The Psychological Control Scale- Youth Self-Report (PCS-YSR; Barber, 1996) is a 16-item measure used to assess participants' reports of their parents' use of parenting practices related to psychological control. The PCS-YSR was developed to build upon the utility of previous measures of psychological control (Schaefer, 1965), and was also found to be compatible with observational measures (Barber, 1996). Each item of the PCS-YSR is rated on a 3-point Likert scale (i.e., 1 = not like him/her; 3 = a lot like him/her) with items summed to create a total score ranging from 16 to 48. Higher scores are indicative of greater parental usage of psychological control tactics. Example items for the PCS-YSR include, "my mother/father changes the subject, whenever I have something to say," and "my mother/father acts like he/she knows what I am thinking or feeling;" however, the term "parent" was replaced with "primary caregiver" for each item.

Originally constructed among a sample of adolescents (Barber, 1996), the PCS-YSR has also demonstrated adequate reliability among a sample of young adult college students ($\alpha = .91$; Givertz & Segrin, 2014). Additionally, the PCS-YSR has shown evidence of discriminant validity when compared to a measure of behavioral control (Barber, 1996; Brown, Mounts, Lamborn, & Steinberg, 1993), and has been shown to demonstrate superior predictive validity compared to other measures of psychological control (Barber, 1996; Schaefer, 1965). An internal consistency coefficient of .91 was found for the present study.

Interpersonal Dependency Inventory (IDI)

The Interpersonal Dependency Inventory (IDI; Hirshfeld et al., 1977) is a 48-item measure used to assess participants' self-reported interpersonal dependency. Preliminary scale development began by examining 98 items, either uniquely created or revised from previous measures, among both a sample of college students and psychiatric patients. Factor analysis led to the retention of three main subscales, composed of 48 items total. Each item is rated on a 4-point Likert scale, with a score of 1 indicating "Not characteristic of me" and a score of 4 indicating "Very characteristic of me." The IDI is composed of three subscales (i.e., Emotional Reliance on Another Person, 18 items; Lack of Social Self-Confidence, 16 items; Assertion of Autonomy, 14 items), which are summed (with the Assertion of Autonomy subscale reverse-scored) to form a total score ranging from 48 to 192, with higher scores indicating a greater degree of interpersonal dependency. Example items include, "I would be completely lost if I didn't have someone special" for Emotional Reliance on Another Person, "When I have a decision to make, I always ask for advice" for Lack of Social Self-Confidence," and "I don't need other people to make me feel good" for Assertion of Autonomy. This total IDI score was utilized for the present study.

The IDI has demonstrated adequate reliability among a diverse sample of college students, with coefficient alphas ranging from .72 to .91 on each subscale (Cogswell, Alloy, Karpinski, & Grant, 2010), comparable to additional studies which have examined this measure among college students (e.g., Shahar, 2008; Wigman, Graham-Kevan, & Archer, 2008). Bornstein (1997) also demonstrated adequate test-retest reliability ($r = .71$) for the IDI over an 84-week period. Additionally, the IDI has demonstrated evidence

of convergent validity when compared to the Dependency subscale of the Depressive Experiences Questionnaire (Cogswell et al., 2010), and has been shown to be predictive of dependent behaviors and symptoms of Dependent Personality Disorder (Bornstein, 2005; Loas et al., 2002). A coefficient alpha of .79 was obtained for the total IDI score in the present study.

CHAPTER III - RESULTS

Means, standard deviations, and bivariate correlations for all study measures can be seen in Table 1. As noted, all variables were correlated at the $p < .01$ level, with the exception of parental psychological control and young adult interpersonal dependency, which were not significantly correlated. There were no significant differences for male and female primary caregivers for either overparenting ($F(1, 297) = 1.17, p = .51$) or psychological control ($F(1, 297) = 0.25, p = .76$). Additionally, there were no significant gender differences for PNI total scores ($F(1, 297) = 1.11, p = .40$), Narcissistic Grandiosity scores ($F(1, 297) = 0.24, p = .93$), or Narcissistic Vulnerability scores ($F(1, 297) = 1.16, p = .23$); however, there were significant gender differences for interpersonal dependency ($F(1, 297) = 3.5, p = .014$), with females ($M = 116.34, SD = 14.67$) demonstrating higher mean scores than males ($M = 110.38, SD = 11.38$).

Table 1

Means, Standard Deviations, and Bivariate Correlations for Study Measures

Measure	<i>M</i>	<i>SD</i>	1	2	3	4	5	6
1. HPI	53.66	13.19	-	.35**	.23**	.27**	.25**	.23**
2. PCS	23.66	6.98		-	.11	.27**	.27**	.22**
3. IDI	115.46	14.40			-	.46**	.52**	.21**
4. PNI	120.83	42.87				-	.96**	.81**
5. VN	71.04	31.64					-	.62**
6. GN	49.79	15.39						-

Note: HPI = Helicopter Parenting Inventory; PCS = Psychological Control Scale- Youth Self-Report; IDI = Interpersonal Dependency Inventory; PNI = Pathological Narcissism Inventory (total score); VN = Narcissistic Vulnerability subscale of PNI; GN = Narcissistic Grandiosity subscale of PNI; ** $p < .01$

Structural equation modeling using MPlus software (Muthén & Muthén, 2012) was utilized to examine the mediating roles of parental psychological control and interpersonal dependency between overparenting and pathological narcissism. Bootstrapping was utilized to assess indirect effects, which included 10,000 resamples of

the data set (Preacher & Hayes, 2008). This process was intended to provide an estimate of indirect effects which was not constrained by a non-normal distribution, and statistical significance was indicated by confidence intervals which did not cross zero. Model fit was examined by the comparative fit index (CFI), the Tucker-Lewis index (TLI), and the root mean square of error approximate (RMSEA). Adequate CFI and TLI are regarded as values $>.90$, and adequate RMSEA is considered values $<.05$ (Cheung & Rensvold, 2002).

A preliminary analysis was conducted to examine whether the effect of overparenting differed between vulnerable and grandiose narcissism. A chi-square difference test was utilized for this analysis (see Figure 1). Results indicated that the chi-square value of the model when constraining the paths between overparenting and narcissistic phenotypes ($\chi^2(1, 1) = 10.01, p = .002$) was significantly greater than the chi-square value of the unconstrained model ($\chi^2(1, 0) = 0.00, p < .001$), indicating that these paths were significantly different ($\Delta\chi^2_1 = 10.01, p < .005$). As predicted, the R^2 value of vulnerable narcissism ($R^2 = .066, p = .035$) was found to be greater than the value for grandiose narcissism ($R^2 = .052, p = .036$), although both values were significant.

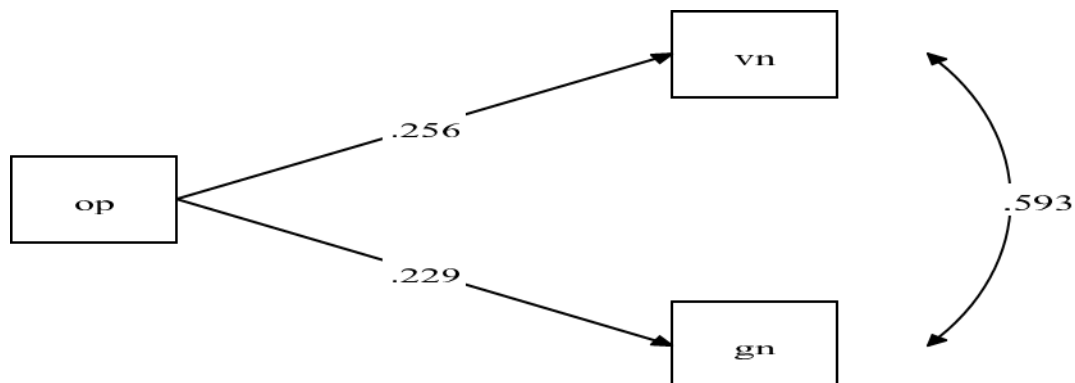
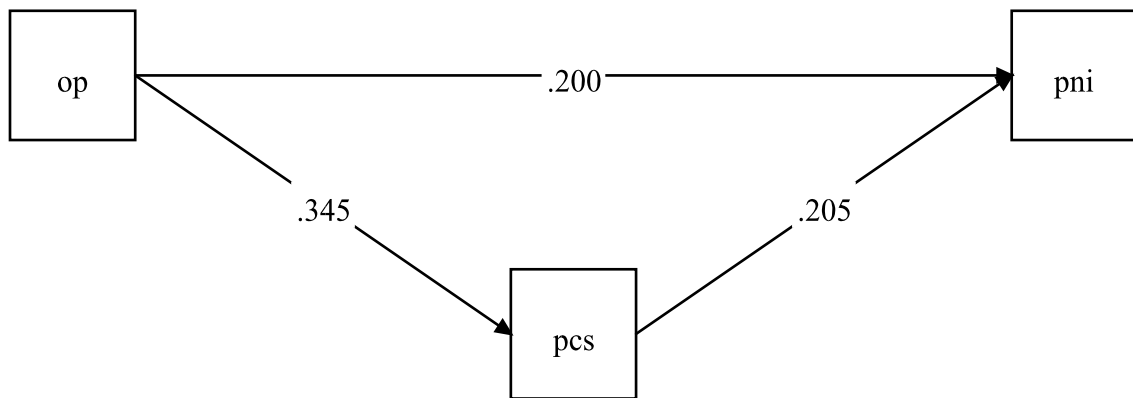


Figure 1. Differences in Effect of Overparenting on Narcissistic Phenotypes.

op = Overparenting; vn = Vulnerable Narcissism; gn = Grandiose Narcissism.

Hypotheses 1 stated that parental psychological control would mediate the relationship between overparenting and pathological narcissism. Results supported this hypothesis (see Figure 2). Specifically, the total effect ($\beta = .271, p < .001$) of overparenting on narcissistic traits was found to be significant. When examining the mediating role of psychological control, both the relationships between overparenting and psychological control ($\beta = .345, p < .001$), and psychological control and narcissistic traits ($\beta = .205, p < .001$) were significant, as well as the direct effect of overparenting ($\beta = .200, p = .001$) and the indirect effect of psychological control ($\beta = .071, 95\% \text{ CI} [.033-.119]$). Therefore, the results supported the present hypotheses that psychological control would partially mediate the relationship between overparenting and pathological narcissism, with this mediation accounting for approximately 26.2% of this relationship.

Mediation of Parental Psychological Control between Overparenting and Narcissistic Traits.



op = Overparenting; pcs = Parental Psychological Control; pni = Pathological Narcissism.

Next, to examine Hypothesis 2, the mediating role of psychological control was examined separately across vulnerable and grandiose narcissism (see Figure 3). The indirect effects of psychological control between overparenting and vulnerable narcissism

and between overparenting and grandiose narcissism were then compared across constrained versus unconstrained versions. A chi-square difference test determined that the constrained version ($\chi^2 (1, 1) = 6.78, p = .009$) was significantly greater than the unconstrained version ($\chi^2 (1, 0) = 0.00, p < .001$) of this model, which indicates that the indirect paths were significantly different ($\Delta\chi^2_1 = 6.78, p < .01$). More specifically, the indirect effect of psychological control on vulnerable narcissism (indirect effect = .069, 95% CI [.032-.119]) was greater than the indirect effect of psychological control on grandiose narcissism (indirect effect = .054, 95% CI [.015-.100]). As the total effect of overparenting differed between vulnerable narcissism (total effect = .256) and grandiose narcissism (total effect = .229), psychological control accounted for 27% (% mediated = .069/.256) of the mediation between overparenting and vulnerable narcissism, and 23.6% (% mediated = .054/.229) of the mediation between overparenting and grandiose narcissism.

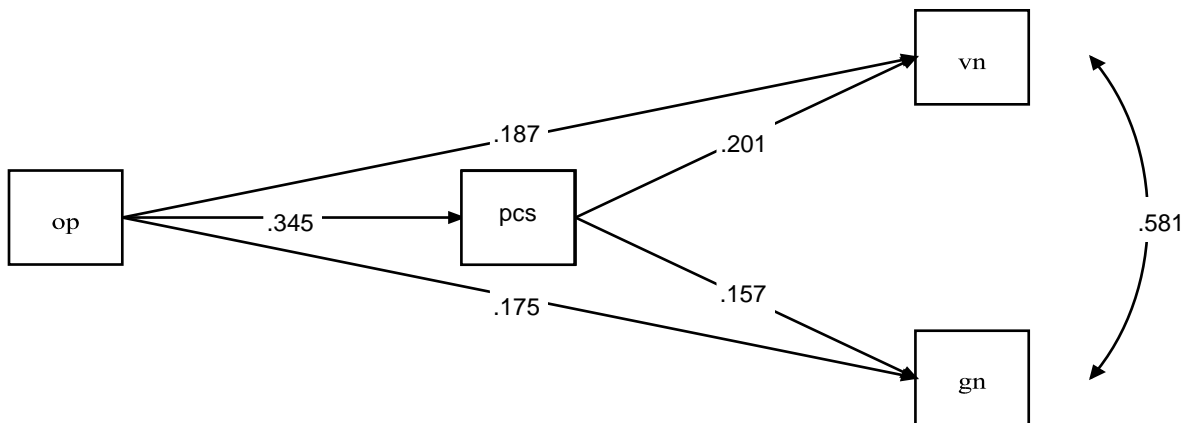


Figure 2. Mediation of Parental Psychological Control between Overparenting and Narcissistic Phenotypes.

op = Overparenting; pcs = Parental Psychological Control; vn = Vulnerable Narcissism; gn = Grandiose Narcissism.

Hypothesis 3 predicted that interpersonal dependency would also mediate the relationship between overparenting and narcissistic traits. Similarly to Hypothesis 1, both the relationships between overparenting and interpersonal dependency ($\beta = .234, p < .001$) and between interpersonal dependency and pathological narcissism ($\beta = .420, p < .001$) were significant (see Figure 4). The indirect effect of interpersonal dependency ($\beta = .098, 95\% \text{ CI } [.048-.157]$), and the direct effect of overparenting were also both statistically significant ($\beta = .173, p = .001$), with interpersonal dependency mediating approximately 36.2% of this relationship.

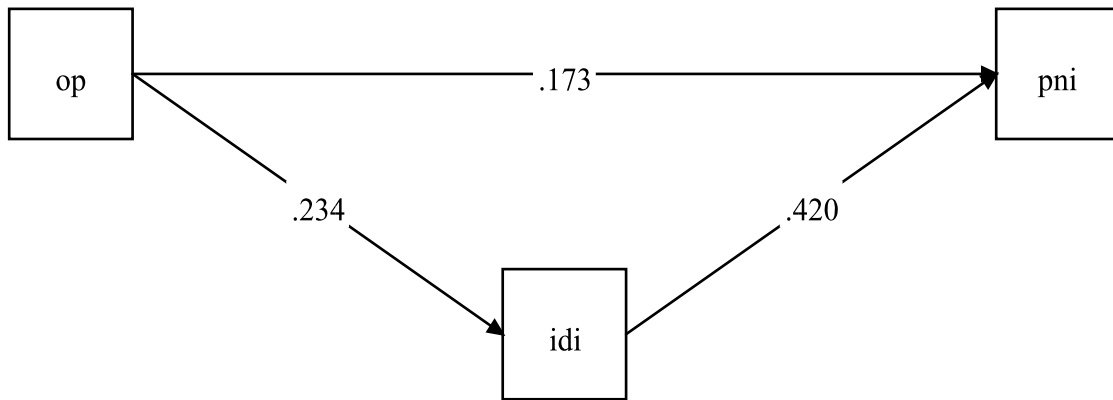


Figure 3. Mediation of Young Adult Interpersonal Dependency between Overparenting and Narcissistic Traits.

op = Overparenting; idi = Young Adult Interpersonal Dependency; pni = Pathological Narcissism.

The next phase of analyses examined Hypothesis 4, which predicted that interpersonal dependency would mediate vulnerable narcissism more robustly than grandiose narcissism (see Figure 5). Similar to analyses for Hypothesis 2, a chi-square difference test determined that the chi-square value when constraining the indirect paths ($\chi^2 (1, 1) = 89.12, p < .001$) was significantly greater than the value when leaving the paths unconstrained ($\chi^2 (1, 0) = 0.00, p < .001$). Therefore, these indirect paths differ significantly ($\Delta\chi^2_1 = 89.12, p < .005$). In examining these paths, the indirect effect of

interpersonal dependency for vulnerable narcissism (indirect effect = .114, 95% CI [.056-.180]) was greater than for grandiose narcissism (indirect effect = .038, 95% CI [.013-.078]). Furthermore, interpersonal dependency accounted for a greater proportion of the mediation between overparenting and vulnerable narcissism (% mediated = indirect effect / total effect = .114/.256 = 44.5%) compared to overparenting and grandiose narcissism (% mediated = .038/.229 = 16.6%).

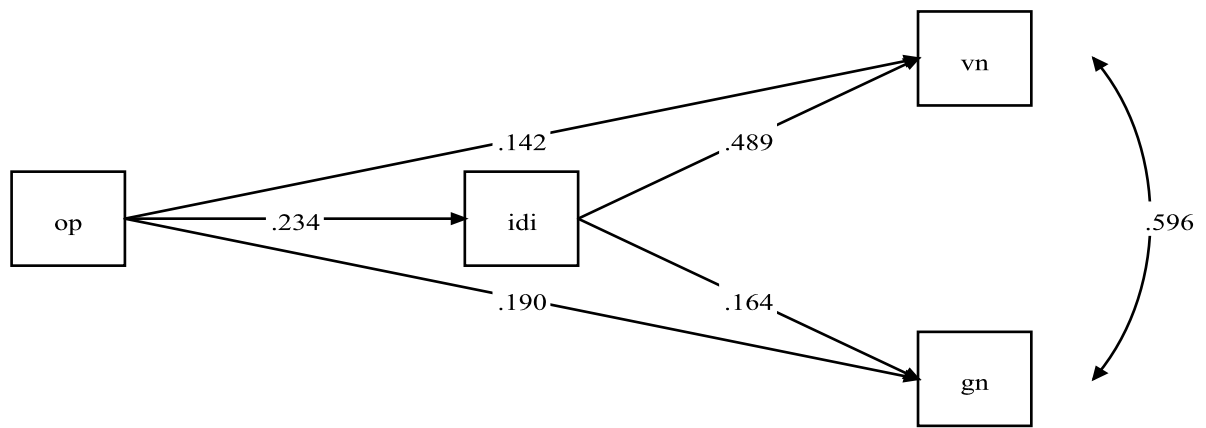


Figure 4. Mediation of Young Adult Interpersonal Dependency between Overparenting and Narcissistic Phenotypes.

op = Overparenting; idi = Young Adult Interpersonal Dependency; vn = Vulnerable Narcissism; gn = Grandiose Narcissism.

The next step in the present study was to assess both psychological control and interpersonal dependency together as parallel mediators (Hypothesis 5; see Figure 6). In this model, both the indirect effects of psychological control ($\beta = .066$, 95% CI [.030-.112]) and interpersonal dependency ($\beta = .097$, 95% CI [.047-.154]) were significant, and together these variables accounted for 59.9% of the total effect of overparenting on pathological narcissism. Additionally, the direct effect of overparenting on narcissism was no longer significant once these mediators were included in the model ($\beta = .109$, $p = .051$), indicating that psychological control and interpersonal dependency fully mediated

the relationship between overparenting and narcissistic traits. Fit indices included a CFI and TLI of 1.00, and an RSMEA of 0.00 (90% CI [.000-.127]), indicating an excellent fit.

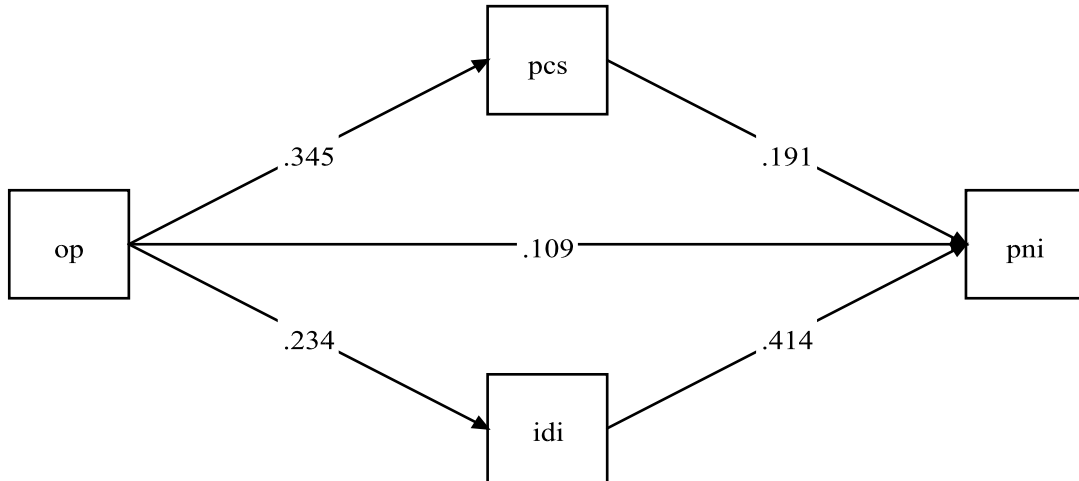


Figure 5. Parallel Mediation of Parental Psychological Control and Young Adult Interpersonal Dependency between Overparenting and Narcissistic Traits.

op = Overparenting; pcs = Parental Psychological Control; idi = Young Adult Interpersonal Dependency; pni = Pathological Narcissism.

Finally, Hypothesis 6 aimed to examine differences in the parallel mediation of psychological control and interpersonal dependency between overparenting and vulnerable narcissism and between overparenting and grandiose narcissism (see Figure 7 in Appendix I). A chi-square difference test determined that the parallel mediation paths between overparenting and grandiose narcissism and overparenting and vulnerable narcissism differed significantly between constrained ($\chi^2 (1, 2) = 38.44, p < .001$) and unconstrained ($\chi^2 (1, 1) = 0.34, p < .001$) versions of the model, which demonstrates that these mediation paths differ significantly ($\Delta\chi^2_1 = 38.10, p < .005$). Fit indices for the unconstrained version of the model also indicate an excellent fit (i.e., CFI = 1.00, TLI = 1.00, and RMSEA = 0.00 (90% CI [.000-.127])). While both parallel mediations

remained statistically significant, the mediation for vulnerable narcissism (% mediated = $.177/.257 = 68.9\%$) was found to be more robust than the mediation for both grandiose narcissism (% mediated = $.090/.229 = 39.3\%$). In fact, the mediation for vulnerable narcissism was found to be a full mediation, as the direct effect of overparenting was no longer significant ($\beta = .080, p = .170$), while a partial mediation was found for grandiose narcissism ($\beta = .139, p = .018$). Moreover, each specific indirect effect of psychological control on grandiose ($\beta = .052, 95\% \text{ CI } [.014-.098], 22.7\%$ mediated) and vulnerable narcissism ($\beta = .064, 95\% \text{ CI } [.028-.111], 24.9\%$ mediated), as well as each specific indirect effect of interpersonal dependency on grandiose ($\beta = .037, 95\% \text{ CI } [.012-.076], 16.2\%$ mediated) and vulnerable narcissism ($\beta = .113, 95\% \text{ CI } [.056-.178], 44.0\%$ mediated) were found to be significant.

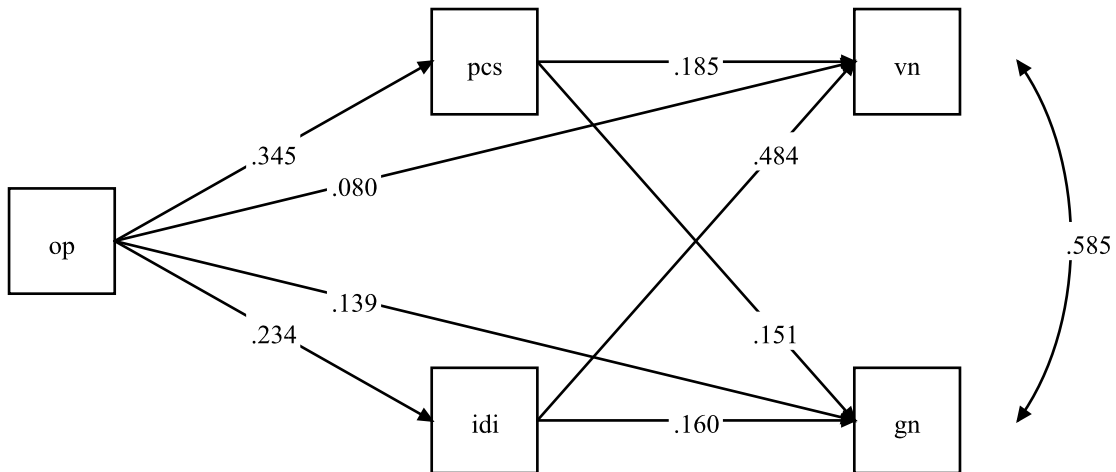


Figure 6. Parallel Mediation of Parental Psychological Control and Young Adult Interpersonal Dependency between Overparenting and Narcissistic Phenotypes.

op = Overparenting; pcs = Parental Psychological Control; idi = Young Adult Interpersonal Dependency; vn = Vulnerable Narcissism; gn = Grandiose Narcissism.

CHAPTER IV – DISCUSSION

The findings of the present study demonstrated that parental psychological control and young adult interpersonal dependency both mediate the relationship between overparenting and narcissistic traits among young adults. Additionally, these two mediators accounted for a full parallel mediation when examined together, which offers further support for psychological control and interpersonal dependency as key mechanisms in the relationship between overparenting and narcissistic personality traits.

In addition to a parallel mediation, the present study also found differences in the relationships between overparenting and vulnerable-, and overparenting and grandiose-narcissistic phenotypes. Specifically, while overparenting predicted both grandiose and vulnerable narcissism, this relationship appeared to be more robust for vulnerable narcissism. Moreover, the mediating roles of both psychological control and interpersonal dependency were more robust between overparenting and vulnerable narcissism (and particularly for interpersonal dependency), as compared to the relationship between overparenting and grandiose narcissism. In fact, when examining the parallel mediation separately between vulnerable and grandiose narcissistic phenotypes, only the mediation for vulnerable narcissism indicated a full mediation, while the mediation for grandiose narcissism remained partial.

Findings from the present study are consistent with past research which has linked overparenting to narcissistic traits (Segrin et al., 2012; Segrin, Woszildo et al., 2013), although this is the first study to examine mediators of this relationship. While both psychological control and interpersonal dependency have been linked to the development of narcissistic traits (Givertz & Segrin, 2014; Horton et al., 2006; Sonnenberg, 2013),

results from the present study suggest that these variables also play a mediating role between overparenting and narcissism. Thus, the present findings suggest overparenting, and particularly aspects of overparenting associated with intrusive control and the withholding of appropriate independence and autonomy (LeMoyne & Buchanan, 2011; Padilla-Walker & Nelson, 2012), lead to greater dependency among young adult children. This characterization of the effects of overparenting on young adult children appears consistent with critics of this parenting style, who have lamented an apparent increase in dependent traits among millennials, including in the classroom and work settings (Ludden, 2012; Tyler, 2007). In turn, the present findings suggest that the dependent traits resulting from overparenting appear to be a key mechanism in the development of narcissism. Given the conceptualization of narcissism as resulting from an unhealthy need for external validation (i.e., dependency; Pincus, 2013), this interpretation appears theoretically consistent. However, given the cross-sectional nature of the study, speculation regarding causality should obviously remain tentative.

Additionally, results from the current study suggest that overparenting may be more predictive of vulnerable narcissistic traits, as opposed to grandiose narcissistic traits. While this study is the first to examine the differential predictive ability of overparenting on separate narcissistic phenotypes, these results are nonetheless consistent with historical conceptualizations of narcissism, which emphasize the manner in which over-controlling and intrusive parenting behaviors may lead to young adult children becoming overly dependent on the validation of others (Kohut, 1977). This pattern of overdependence and insecurity is more consistent with vulnerable narcissism, compared to grandiose narcissism (Miller et al., 2011; Dickinson & Pincus, 2003). Nonetheless,

overparenting appears to also be predictive of grandiose narcissistic traits (Horton & Tritch, 2014), albeit to a lesser degree. Moreover, results indicate that both psychological control and interpersonal dependency play a mediating role in the relationships between overparenting and both narcissistic phenotypes. Therefore, these findings likely speak to the related and overlapping nature of both grandiose and vulnerable narcissistic phenotypes (Pincus, 2013; Ronningstam, 2009), as well as the complex manner in which parenting may lead to the development of narcissistic traits (Horton et al., 2006).

Limitations

The present study includes a number of pertinent limitations. First, the sample was limited to young adult college students (mostly freshmen and sophomores) residing in the southeastern United States, which may not be generalizable to broader populations. Additionally, the sample of the present study was predominantly female. Given that significant gender differences were observed in examining dependent traits, this limitation appears noteworthy. A majority of participants also identified their “primary caregivers” as their mothers, which further limits the generalizability of the results to other childrearing figures.

Another limitation of the study pertains to the cross-sectional, correlational nature of the data. As previously noted, while causal relationships may be implied in a mediation analysis, no conclusive statements regarding causality can be made. Relatedly, the causal role of overparenting on personality characteristics appears somewhat unclear. While overparenting is considered to be a unique type of parenting style seen in late adolescence and young adulthood (Padilla-Walker & Nelson, 2012), personality characteristics (e.g., dependency, narcissistic traits) are generally considered to have their

origin earlier in childhood (Kohut, 1977). Therefore, parenting practices involving over-control may be more pertinent earlier in childhood, rather than later. In this way, overparenting may be conceptualized as a later manifestation of parental overcontrol, which is assumed to have appeared earlier in childhood. However, this hypothesis should clearly remain tentative.

Additionally, it should be noted that all study measures were self-report measures, including participants' reports of their parents' parenting behaviors. Limitations regarding the validity of the study are therefore relevant, given the indirect assessment of parenting. It should also be noted that self-report measures which pertain to potentially undesirable behaviors and traits (e.g., narcissism) may be somewhat underreported.

Finally, assumptions regarding the direction of the relationships between variables is limited. While parenting practices plausibly predict outcomes in young adults, these relationships may be bidirectional, in that particular parenting practices may develop in response to certain personality traits among young adult children (Van den Akker, Deković, Asscher, & Prinzie, 2014). This possibility cannot be ruled out given the cross-sectional design of the present study.

Areas for Future Research

While psychological control and interpersonal dependency were found to fully mediate the relationship between overparenting and narcissistic traits, additional mediators should also be explored. More specifically, given potential links between authoritarian parenting and narcissism (Cramer, 2015; Watson et al., 1992), parenting practices which are shared by both overparenting and authoritarian parenting (e.g., over-involvement, withholding of autonomy; Baumrind, 1971; Padilla-Walker & Nelson,

2012) should be examined as potential mediators between overparenting and narcissistic traits. Additionally, moderators in the relationship between overparenting and narcissism should also be explored. For example, sex may be a potential moderator in the relationship of interpersonal dependency between overparenting and narcissistic traits. Given the composition of the current sample as primarily female, this possibility could not be explored within the present study. Race may also be explored as a potential moderator, and it should be noted that research has yet to explore racial differences in overparenting. Therefore, future studies should account for greater cultural variability in examining overparenting as a predictor of narcissistic traits. Additionally, alternate personality constructs which may also be associated with interpersonal dependency (e.g., borderline features) should be examined in relation to overparenting. Finally, future research should include procedures which attempt to measure overparenting directly, and the development of parental over-control across childhood development more broadly, in order to provide greater evidence for a causal link between overparenting and the development of narcissism.

Conclusion

The results of the present study suggest that an over-controlling and intrusive parenting approach, particularly when combined with dependent traits among young adults, appears to explain the manner in which “helicopter parenting” predicts narcissistic traits, and particularly traits more commonly associated with vulnerable narcissism (e.g., insecurity, anxious-avoidant tendencies). These findings speak to the importance of accounting for parenting when assessing the etiology of narcissistic traits among college students, and interventions focused on parenting young adult children (e.g., orientations

upon transitioning to college) should look to incorporate the results of these findings. The findings of the present study build on a growing body of research implicating overparenting in the development of narcissistic traits, and future research should look to confirm and expand on these findings.

APPENDIX A – IRB Approval Letter



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: 16102006
PROJECT TITLE: Overparenting and Young Adult Narcissism: Psychological Control and Interpersonal Dependency as Mediators
PROJECT TYPE: New Project
RESEARCHER(S): Nathan Winner
COLLEGE/DIVISION: College of Education and Psychology
DEPARTMENT: Psychology
FUNDING AGENCY/SPONSOR: N/A
IRB COMMITTEE ACTION: Expedited Review Approval
PERIOD OF APPROVAL: 11/07/2016 to 11/06/2017
Lawrence A. Hosman, Ph.D.
Institutional Review Board

APPENDIX B – Electronic Informed Consent

PURPOSE: The present study seeks to better understand the relationship between parenting and personality functioning among college students.

DESCRIPTION OF STUDY: The present study will consist of completing several brief questionnaires on the internet. Completion of the study should take approximately 20-30 minutes, and participants will receive .5 points of SONA credit. Questions will be asked regarding your thoughts, feelings, and experiences. Quality assurance checks are being used in this study to make sure that participants read each question before answering. Participants who do not pass these quality assurance checks will not receive research credit.

BENEFITS: Participants are not expected to directly benefit from this research. However, the researchers hope this study will lead to a greater understanding of families, race, and parenting.

RISKS: There are no foreseeable risks, beyond those already present in routine daily life, involved in the present study. If a participant at any time feels distressed while answering any of the study's questions, they should contact the researcher immediately.

CONFIDENTIALITY: All data collected from the study will be stored in aggregate form with no identifying information to ensure confidentiality. Data will be stored in a secure location for six (6) years, after which time it will be destroyed.

PARTICIPANT'S ASSURANCE: This project has been reviewed by the Institutional Review Board, which ensures that research projects involving human subjects follow federal regulations. Any questions or concerns about rights as a research participant should be directed to the Chair of the Institutional Review Board, The University of

Southern Mississippi, Box 5147, Hattiesburg, MS 39406, (601) 266-6820. Participation in this project is completely voluntary, and participants may withdraw from this study at any time without penalty, prejudice, or loss of benefits. Questions concerning the research should be directed to the primary researcher Nathan Winner (nathan.a.winner@usm.edu) or the research supervisor, Dr. Bonnie Nicholson (bonnie.nicholson@usm.edu).

If you experience distress as a result of your participation in this study, please notify the primary researcher Nathan Winner (nathan.a.winner@usm.edu) or the research supervisor, Dr. Bonnie Nicholson (bonnie.nicholson@usm.edu). A list of available agencies that may be able to provide services for you are provided below:

Community Counseling and Assessment Clinic (601) 266-4601

Student Counseling Services (601) 266-4829

Pine Belt Mental Healthcare (601) 544-4641

Forrest General Psychology Service Incorporated (601) 268-3159

Consent is hereby given to participate in this study

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