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A study on narcissism: A comparison between the overt and covert typologies using the Thematic Apperception Test

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Title: A study on Narcissism: a comparison between the overt and covert typologies using the Thematic Apperception Test

Short title: A study on Narcissism using the Thematic Apperception Test

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Abstract

Background The purpose of this work is to help better understand Narcissistic Personality Disorder by focusing on the differentiation between the overt and covert typologies in order to provide further empirical evidence of their actual existence. We aim to demonstrate that the Thematic Apperception Test (T.A.T.) is proving to be an effective instrument for identifying the thought processes of individuals with Narcissistic Personality Disorder and can be extremely useful for differentiating between the two typologies mentioned above.

Method This is a pilot study. It is based on the analysis of the stories produced in the T.A.T. by 10 patients diagnosed with Narcissistic Personality Disorder. The tests were administered and interpreted according to the French School model, especially as regards the score sheet proposed by Vica Shentoub. This approach investigates the main psychological processes and defence mechanisms in order to provide specific information about how

subjects address reality and access their inner world.

Results The data collected showed a clear prevalence of narcissistic personality functioning (series C/N processes) in the analysed sample. Such processes were primarily associated, in overt subjects, with lability traits (series B processes) and mechanisms to fight depression (series C/M processes), and in covert subjects with rigid, controlling (series A processes) and inhibitor (series C/I processes) traits. Thus, the study confirmed the hypothesis that the T.A.T. constitutes a precise diagnostic instrument, capable of detecting the characteristics of both of the narcissism typologies highlighted in the literature.

Keywords: Narcissistic Personality Disorder, overt narcissism, covert narcissism, Thematic Apperception Test (T.A.T.).

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INTRODUCTION

The concept of narcissism in the psychoanalytical field has developed through the consistent number of theories produced over the years. First and foremost the Freudian instinct theory which marked the psychoanalytical origin of the term itself and established two typologies of narcissism, primary and secondary. During the subject's libidinal development, primary narcissism comes between autoerotism and object-oriented love and is referred to by Freud¹ as libidinal investment in the self. The secondary type, instead, which follows on from the object-oriented love stage, coincides with the withdrawal of that investment in objects and its replacement with self-libido.

Later, object relations theorists – such as Klein^{2 3}; Fairbairn⁴; Winnicott^{5 6}; Rosenfeld^{7 8} – criticised the notion of primary narcissism and supported the concept of relations as fundamental in psychical development, describing how the narcissistic component derives from and evolves within an interpersonal context.

The French psychoanalytic approach^{9 10} addressed the Freudian dichotomy between life and death instincts and defined two types of narcissism, life narcissism which leads to identity formation and the self-entity, and death narcissism, which results in both the cancellation of individuality and a reduction in libidinal investment.

Whereas the early theories, starting from Freud, made a clear distinction between normative, functional narcissism and that of an evil, pathological nature, Kohut^{11 12 13} and Kernberg^{14 15 16} placed narcissism along a continuum, running from normality to pathology. The theories proposed by these two authors, derived from their clinical observations, led to the postulation of the first differentiation between the two types of narcissism, later

referred to as covert and overt^{17 18 19}. The two theories about Narcissistic Personality Disorder developed by these authors may be related to the different patient populations they studied which embodied the two narcissistic profiles. The patients described by Kohut showed relatively good functioning and were described as introverted, shy and hypervigilant, so could be classified within the covert typology. The profile presented by Kernberg, similar to the libidinal type defined by Freud, described patients with a more severe disorder, characterised by significant aggressive instincts and manifest grandiosity consistent with the overt type^{19 20 21}.

The two typologies share a common sense of inadequacy, inferiority, weakness and shame, as well as self-centredness and a tendency to use and exploit the other. However, they also differ in various ways^{18 22 23 24}. The overt typology is composed of individuals who are exhibitionists, vain, arrogant, short-tempered, eager to take centre stage, manipulative, seductive and insensitive to other people's moods. The main forms of defence used by such individuals are omnipotence, self-idealisation and the consequent devaluation of the object^{18 25 26 27}. This kind of narcissism is characterised by a marked dysregulation of self-esteem which the individual deals with by creating an exaggerated sense of superiority^{22 28 20 29}.

The covert narcissistic personality, instead, is inhibited, coy and shirks being the centre of attention to avoid the possibility of rejection or denigration and is thus associated with evident relational difficulties. These individuals are particularly sensitive to other people's attitudes by which they are easily hurt, although this façade of extreme sensitivity conceals elaborate and grandiose fantasies. Owing to the divergence between their grandiose fantasies and the negative idea of the self, such individuals experience shame, humiliation, and could likely develop anxiety-depressive symptomatology^{18 23 20 26}. There also appears to be an important link between grandiose narcissism and Histrionic personality disorder,

and between hidden narcissism and Avoidant and obsessive personality disorder as highlighted by Dickinson and Pincus²³.

Could the T.A.T., one of the most widely used projection tests in the clinical field and a valid instrument for diagnosing personality functioning, be useful in the differential diagnosis of covert and overt narcissism?

In the literature there is evidence of how, in this test, the narrative style of narcissistic individuals tends to be descriptive and avoid conflict. Representations of the self can be idealised both negatively and positively or in some cases, when they have hyper-adaptive traits, indicate the existence of a “false self” which emerges in the test in the form of trivial statements describing the scene that block out emotions and relational scenarios^{30 31 32 33 34 35}.

The present paper, which is part of a wider study addressing other theoretical frameworks and other personality disorders, seeks to study a larger sample. It intends to investigate the ability of the T.A.T to identify and differentiate between the thought processes unique to the overt and covert typologies, thus contributing to make a differential clinical diagnosis. Specifically, we hypothesised that both overt and covert narcissists would use common mechanisms in the T.A.T., consisting in narrative styles characterised by avoidance of conflict and investment in the self rather than adopting an object-oriented attitude. We also hypothesised that the two typologies would differ in terms of the defence mechanisms used to deal with depressive nuclei related to abandonment and feelings of inadequacy linked to the self-image.

We also expected a more mental and intrapsychic narrative style with controlling traits in the covert typology and, in the overt typology, a story providing some indication of protection against depressive feelings through an excessive investment in self-representation and a tendency to dramatise emotional and relational scenarios^{30 32}.

METHOD

Subjects

The T.A.T. was administered to 10 people, seven men and three women, ranging from 25 to 50 years of age, with a medium cultural level and living in the north-west of Italy. The characteristics of the sample are shown in Table n#1.

<i>Total (N = 10)</i>			
<i>Gender</i>	<i>M</i>	<i>F</i>	
	7	3	
<i>Age</i>	<i>Range</i>	<i>M</i>	<i>SD</i>
	20-50	35,6	9.2
<i>Education</i>	<i>N</i>	<i>%</i>	
Primary school	/	/	
Secondary school	2		
Diploma	7		
Degree	1		

Table 1 – socio- demographic characteristics of the sample

Prior to the study, each subject underwent a diagnostic procedure with a view to planning a subsequent course of clinical therapy. The diagnosis was made based on a procedure that included, in accordance with the clinician's psychoanalytical training, a number of interviews and the administration of both the Rorschach and T.A.T. tests. All the subjects involved were diagnosed with Narcissistic Personality Disorder in accordance with DSM-V criteria. More specifically, five patients were diagnosed with overt narcissism and the other five with covert narcissism, in line with the theories of Akhtar¹⁷, Wink¹⁸ and

Cooper¹⁹.

The author who administered the diagnostic tests asked the participants to consent to the use of the test results for research purposes. To ensure privacy, the author declared that all anamnestic information would be deleted, that the test results would only be used in aggregate form and that it would be impossible to identify the participants. All participants gave their consent. The T.A.T. stories used for this study were renamed using an alphanumeric code and any details about the participants were removed, with the exception of their age, gender, geographical provenance, educational level and diagnosis.

Instruments

The T.A.T. was administered, rated and interpreted using the psychoanalytical model developed by the French School, starting from Vica Shentoub³³. According to this model, the T.A.T. is administered in three steps: the actual administration of the test, card-by-card analysis and synthesis^{33 32}.

The first step envisages the diversified presentation of the test cards based on the gender of the participants. Male participants were presented with cards 1, 2, 3BM, 4, 5, 6BM, 7BM, 8BM, 10, 11, 12BG, 13B, 13MF, 19, 16, while female participants were shown cards 1, 2, 3BM, 4, 5, 6GF, 7GF, 8BM, 9GF, 10, 11, 12BG, 13B, 13MF, 19, 16. The test was administered by an author who did not then take part in rating the stories. The clinical administration and research work were thus performed by different authors.

The second step consists in the analysis, on a card-by-card basis, of the difficulties encountered by the subjects in relation to the latent content of each picture. This step was performed by the author who administered the tests exclusively for clinical purposes^{33 34 36}³⁷, since it was considered not relevant for the purposes of the study. Therefore, this step has not been taken into consideration in the present study.

The third step consists in identifying the thought processes used by the subject based on the speech processing mechanisms used to make up the story. This analysis can be used to make assumptions about the individual's psychical functioning throughout the test and thus, we assume, in real life.

From a methodological perspective, to highlight the thought processes, all the stories were rated using the score sheet proposed by Brelet and Chabert³². The score sheet is divided into four categories, each of which is in turn divided into sub-categories, the sequence of which represents an increasing level of difficulty.

In detail, "Series A processes" refer to speech elaboration processes subtended by neurotic defence mechanisms, such as rigidity/control, indicating the existence of a conflict that emerges in the thought process. "Series B processes" refer to speech elaboration processes subtended by neurotic defence mechanisms, which are an expression of lability, indicating the existence of a conflict that emerges in the staging of interpersonal relationships. "Series C processes" make it possible to detect speech processes that indicate pathologies or problems linked to the avoidance of intrapsychic conflict. "Series E processes" highlight the emergence of the primary process; this series is not an indication of psychotic functioning per se, since it is the quantitative and qualitative dimension of the processes that make it up and their association that determine the type of personality organisation³³

^{34 32}.

The categories and sub-categories are listed in Table 2, together with the relative acronyms and a short description.

Series A processes (rigidity/control)

A1 - Reference to external reality

A2 - Investment in external reality

A3 - Obsessive-type processes

Series B processes (lability)

B1- Investment in the relationship

B2 - Dramatisation

B3 - Hysterical-type processes

Series C processes (conflict avoidance)

C/F - Excessive investment in external reality

C/I - Inhibition

C/N- Narcissistic investment

C/L - Investment in limits

C/M - Fight against depression

Series E processes (emergence of primary process)

E1 -Altered perception.

E2 – Massive use of projection.

E3 – Disorganisation of identity and object references.

E4 - Altered discourse

Table 2 – Categories, sub-categories and acronyms in the score sheet (Brelet, Chabert, 2003).

Procedures

The 153 stories told by the 10 subjects based on the pictures they were shown were evaluated independently by three judges. In order to be able to use the score sheet, each subject's story was broken down into small narrative units. Within each unit, the judges rated the presence of thought processes. Then, they measured the average presence of thought processes across the entire sample and within the overt and covert sub-groups. Data analysis was performed using the Statistical Package for Social Science (SPSS, version 25). The Mann-Whitney test was used to calculate differences between the two

groups.

RESULTS

No significant differences based on gender, age or education were observed in the sample. Within the analysed sample, there was a predominance of series C/N processes ($M=3.58$; $s.d.=0.95$) which indicate narcissistic psychical functioning as an expression of excessive investment in self-representation, as well as libidinal-narcissistic withdrawal as a means of avoiding impulsive conflict.

Next, in order of importance, were series B processes ($M=3.37$; $s.d.=2.39$), indicating the tendency to dramatise emotional and relational scenarios and thus the presence of lability characteristics in the management of impulsive conflict. These were followed by series A processes ($M=3.37$; $s.d.=0.79$), which indicate an investment in thought, as well as rigid and controlling traits.

Furthermore, C/I ($M=2.27$; $s.d.=1.26$) and C/M processes ($M=2.1$; $s.d.=1.24$) were observed in category C. While the former express the avoidance of impulsive conflict based on inhibition, the latter are associated with avoidance through the deployment of maniacal defence mechanisms.

Few responses contained series C/L ($M=0.15$; $s.d.=0.27$) or E ($M=0.68$; $s.d.=0.47$) processes. This result excludes any alteration in perception or disorganisation of thought or identity, typical of psychotic functioning.

In the overt and covert sub-samples the predominance of the C/N category appears to have been maintained (overt: $M=4.24$; $s.d.=0.73$ – covert: $M=2.92$; $s.d.=0.63$). There were very few series E processes in both typologies. There were also notable differences between the sub-samples.

In the overt sub-sample, series C/N processes were more frequently accompanied by series B (M=5.13; s.d.=1.91) than by series A processes (M=3.13; s.d.=0.77). Within series C, C/M processes were observed alongside the narcissistic C/N processes (M=2.59; s.d.1.15). In the covert sub-category, on the other hand, the main series C/N processes were accompanied by series A (M=3.6; s.d.=0.83) rather than by series B processes (M=1.6; s.d.=1.19). A significant presence of narcissistic series C/N processes was also observed (M=2.8; s.d.=0.9).

The comparison between the two sub-samples, performed using the non-parametric Mann-Whitney test, revealed significant differences in terms of series B (U=2, $p < .05$), C/M (U=1, $p < .05$) and C/N (U=2.5, $p < .05$). In all three series there was a prevalence in the overt sub-category.

Lastly, for series C/N there was a significant difference in favour of overt subjects as regards groups C/N1, C/N2, C/N4, whereas a higher presence of C/N3 and C/N5 was observed in covert subjects.

DISCUSSION OF THE RESULTS

Data analysis confirmed the presence of Narcissistic Personality Disorder within the general sample and this provides the starting-point for any further considerations. The T.A.T. proved to be a suitable instrument for distinguishing between the overt and covert sub-typologies of this disorder on the basis of the thought processes that characterise them. As regards subjects with the first typology, the study highlighted the link between the processes of self-investment (C/N) and those in the series referring to labile thought defence mechanisms (B), thus confirming the theories described in the literature, especially by Freud³⁸ and Kernberg^{14 15}.

Freud³⁸ described a libidinal-narcissistic type³⁸ very similar to the overt typology in that it

refers to a person who, following the withdrawal of libido invested in the self, opts for self-preservation (C/N1 and C/N2 significantly higher in overt subjects), so as not to depend on the love of others, and has a tendency to become very aggressive but continuously tries to move away from such behaviour by deploying conflict avoidance mechanisms.

Kernberg^{14,15}, instead, described the characteristics of the narcissist, namely exhibitionism, extroversion (C/N significantly higher in overt subjects), vanity, seductiveness and a strong need to be the centre of attention, which emerged from the stories of the overt subjects studied using the T.A.T.

This study thus confirms the hypothesis formulated first by Dickinson and Pincus²³, and then by Levy²⁷ according to whom the narcissist's grandiose style is significantly linked to many characteristics of histrionic personality disorder.

In addition, the present work reveals the importance for overt subjects of processes indicating a fight against depression (C/M) as functional to upholding a perfect and grandiose image of the self and a vision of others aimed at positively reinforcing the self-image. The latter mechanisms confirm the existence of the narcissistic type defined by Bergeret³⁹ as hypomaniacal and the construction of a *pathological grandiose self*, a concept coined by Kohut¹¹ and reinterpreted by Kernberg¹⁴, which allows individuals to fool themselves to escape sufferance and shame.

Thus, the stories examined reveal that, although overt subjects appear to be more immune to depressive feelings, this must be attributable to their tendency to deny and project the negative aspects of themselves⁴⁰. The fact that narcissists tend to separate the negative aspects of themselves and project them onto others, while welcoming positive ones and so maintaining an unrealistic and idealised view of themselves, confirms the use of the primitive defence mechanisms described by Klein^{2,3}.

As regards the subjects diagnosed with covert narcissism, the predominant presence of

rigid and controlling thoughts (A), associated with actual narcissistic ones (C/N), indicates a more rigid functioning, characterised by inhibition, doubt, difficulty in building stories³¹
32 33 34 .

This study supports the theory of Dickinson and Pincus²³, and of Levy²⁷, for whom this type of narcissism shares many of the characteristics of obsessive personality disorder, especially regarding the tendency to ruminate, perfectionism and the need to control (C/N3 significantly higher in overt subjects).

Indeed, the stories made up by covert subjects indicated the presence, in these personalities, of marked traits of perfectionism, not only in terms of attention to details, but especially, as highlighted by Ronningstam⁴¹, referring to their fantasies. As shown by the results, the latter, though concealed behind inhibited behaviour, are alive in the stories, as borne out by the use of narcissistic investment mechanisms, especially idealisation (C/N).

In covert personalities, another interesting finding regarded the presence of a marked tendency to control. This was manifested through investment in the intellectual sphere, confirming the presence of an intellectual narcissism¹⁰, i.e., a narcissism that sacrifices the more emotional aspects and freezes impulsive ones.

Lastly, the tendency of covert subjects to show traits of introversion, secrecy, inhibition and control, as first reported by Kohut^{11 12 13}, and later classified as “thin-skinned narcissism” by Rosenfeld⁷, was revealed in the test by the use of mechanisms to achieve control-rigidity as well as those indicating inhibition (C/I). In addition, the results highlight the presence of the traits typical of a more depressive functioning characterised by feelings of worthlessness and shame, and of a particularly coerced nature, shared by the covert and depressive forms and which led the subjects to get the assigned task out of the way as quickly as possible^{30 27 24}.

Inhibition and refusal are signs of a strong feeling of impotence, against which subjects

protect themselves by creating a grandiose vision of the self, which tends also to be reflected in others. This tendency is borne out by the significant presence of specular relationships observed in the stories (C/N significantly higher in covert subjects): by relating the other to the self, they confirm the need for mirroring experienced by narcissists of this type. The study thus corroborates the theories of Kohut^{11 12 13} according to which the lack of satisfaction of the need to be appreciated and admired during childhood explains the archaic narcissistic investment in the grandiose sense of self and the consequent developmental block.

CONCLUSIONS

In the light of the findings of this study, the T.A.T. has proved to be an important instrument in the diagnosis of Narcissistic Personality Disorder, confirming the existence of the two different forms, overt and covert and so enabling a differential diagnosis which is essential in order to define the course of treatment, and focus on the specificity and characteristics of each patient.

The confirmation of the actual existence of the two typologies of Narcissistic Personality Disorder must necessarily lead to the development of therapies that take this duality into account. While the majority of authors and clinicians agree on the need for a therapeutic approach which integrates the conventional interpretative analysis, as strongly supported by Kernberg^{14 15 16}, with the empathic containment function of the analyst, mainly supported by the Self Psychology of Kohut^{11 12 13}, based on the results of this study it seems reasonable to imagine two different treatment procedures for the two types of narcissism. Thus, in the case of overt subjects, we would expect a course of therapy based on interpretation to be more effective, in that it could help to unmask resistances and draw attention to the defence mechanisms (such as idealisation and envy) which prevent

individuals from receiving help. This would make it easier for patients to address their inner rage and envy instead of avoiding them, and at the same time, recognize their own role in their relational difficulties.

On the contrary, owing to their greater vulnerability, covert subjects would probably respond better to a course of treatment that provides them with a containment, or holding environment, focused on their need for Kohutian experiences of self-object which, by justifying their narcissistic needs, can help them overcome the feeling of emptiness that arises from the absence of basic developmental experiences and allow them to resume that development of the self that was suddenly interrupted²⁶.

Our study has some limits and paves the way for further developments. First, considering the limited number of subjects analysed, it would be interesting to expand the study to include a larger sample in order to confirm these results. Furthermore, considering previous studies investigating gender differences in narcissism, it would be interesting to use the T.A.T. to analyse the diffusion of the distinctive characteristics of the two types of narcissism in subjects of each gender, male and female. Following on from the work by Grijalva and colleagues⁴², which highlighted how the behaviour of men and women is influenced by the gender stereotypes created by society, it would be worthwhile verifying whether covert characteristics are more prevalent in females and overt ones in males.

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