

**The Relationship of Grandiose and Vulnerable narcissism with Aggression
and Depression: Self- Esteem and Empathy as Mediators**

Project submitted for partial fulfilment of the degree of

MASTER OF ARTS

IN

PSYCHOLOGY



THAPAR INSTITUTE
OF ENGINEERING & TECHNOLOGY
(Deemed to be University)

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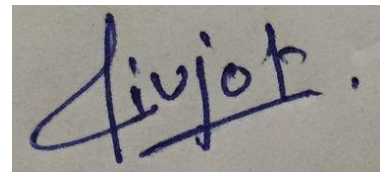
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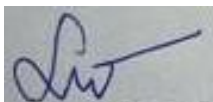
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This is to certify that the thesis entitled, “The Relationship of Grandiose and Vulnerable narcissism with Aggression and Depression: Self- Esteem and Empathy as Mediators” being submitted in partial fulfilment of requirements for the award of degree of Master of Arts in Psychology, submitted in the School of Humanities and Social Sciences, Thapar Institute of Engineering and Technology, Patiala is a bonafide work carried out under the supervision of Dr. Santha Kumari, Professor, School of Liberal Arts, Thapar Institute of Engineering and Technology, Patiala and that no part of this project has been submitted for the award of any other degree.



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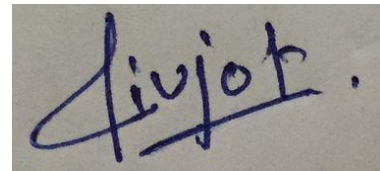
CANDIDATE'S DECLARATION

I hereby declare that the work presented in this thesis entitled, “The Relationship of Grandiose and Vulnerable narcissism with Aggression and Depression: Self- Esteem and Empathy as Mediators” in partial fulfilment of the requirement for the award of the degree of Master of Arts in Psychology, submitted in the School of Humanities and Social Sciences, Thapar Institute of Engineering and Technology, Patiala, is an authentic record of my own work carried out under the supervision and guidance of Dr. Santha Kumari, Professor, School of Humanities and Social Sciences, Thapar Institute of Engineering and Technology, Patiala and refers other researcher's work which are duly listed in the reference section.

The matter embodied in this thesis has not formed the basis for the award of any other degree of this or any other university.

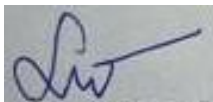
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Last, but not the least, a shout out to all the participants in the study for their painstaking diligence in answering the questionnaires and their conscientiousness in performing the task and a big thanks to those who agreed to be a part of the stimulus formation task.

Abstract: The Relationship of Grandiose and Vulnerable narcissism with Aggression and Depression mediated by Self- Esteem and Empathy was investigated using six scales, The Narcissistic Personality Inventory, Hypersensitive Narcissism Scale, State Self- Esteem Scale, Basic Empathy Scale (BES), Aggression Questionnaire and Beck's Depression Inventory, which designed to study grandiose narcissism, vulnerable narcissism, self- esteem, empathy, aggression and depression of the subjects. The total sample consisted of 170 subjects (96 females and 74 males) in the age range of 18-30. The present study is conducted with the objective of studying if there exists any direct relationship between Grandiose and Vulnerable Narcissism with Aggression and Depression, or if it is mediated by Self- Esteem and Empathy.

Keywords: grandiose, vulnerable narcissism, self- esteem, cognitive and affective empathy, aggression, depression.

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CHAPTER 1

INTRODUCTION

1.1 NARCISSISM

Self-love, exaggerated self-views, self-serving bias, and a demanding display of entitlement are all signs of narcissism (Campbell, Brunell, & Finkel, 2006; Twenge & Campbell, 2009). The definition of narcissism varies depending on how it is defined. Wink (1991), who revealed empirical evidence in favour of the dual character of narcissism, was one of the first personality researchers to clearly identify the disparities in the use of the notion of narcissism. **Grandiosity-exhibitionism** (grandiose or overt narcissism) and **vulnerability-sensitivity** are two elements underlying the narcissistic personality, according to him (vulnerable or covert narcissism). Immodesty, interpersonal dominance, self-absorption, callousness, and manipulateness are all features associated with grandiose narcissism; grandiose narcissism is also positively related to self-esteem and adversely related to psychiatric discomfort. Vulnerable narcissism, on the other hand, is linked to higher levels of psychological distress and unpleasant emotions (such as worry and shame), low self-esteem and feelings of inferiority, as well as egotistical, antagonistic, interpersonal behaviors. Both, however, are thought to contain a core of antagonism (e.g., Miller, Lynam, Hyatt, & Campbell, 2017), although this is weaker in vulnerable narcissism than grandiose. Whereas grandiose narcissism is equated with the social-personality conceptualization of narcissism, vulnerable narcissism resembles the clinical conceptualization (Miller & Campbell, 2008).

Morf and colleagues (2001), developed the self-regulation theory of narcissistic functioning, which proposes that persons with high grandiose narcissism scores have self-regulation issues that are mostly driven by their inflated senses of self (Morf & Rhodewalt, 2001). Individuals with high grandiose narcissism scores are extremely invested in promoting their self-perceived superiority and are hypervigilant in their efforts to detect and defuse any challenges to their grandiose self-perceptions, as Morf and colleagues have demonstrated. When threatened by comparison with a better performing other (e.g., Morf & Rhodewalt, 1993) or negative feedback, grandiose narcissistic individuals enjoy direct competition against others (Morf, Weir, & Davidov, 2000) and often respond with self-protective behaviours such as derogation or devaluation (e.g., Kernis & Sun, 1994). Concerns on self-presentation, status, power, dominance, and physical beauty were found in these people (Hill & McFerren, 1995).

Vulnerably narcissistic people recall a variety of negative experiences as a child, including parental abuse and mistreatment, which is likely to contribute to the attachment issues they report, as well as their general uneasiness and suspicion of others with whom they engage. Understanding vulnerable narcissism through the lens of basic personality traits is consistent with a growing body of research that shows that such traits serve as organising factors for important latent factors of psychopathology, such as disinhibition and antagonism, which are at the root of externalising disorders (e.g., Eisenberg et al., 2009; Krueger et al., 2002; Krueger, McGue, & Iacono, 2001; Pryor, Miller, Hoffman, & Harding, 2009).

Grandiose narcissism is usually accompanied by vulnerable characteristics, according to clinical data (Kernberg, 1975; Pincus and Lukowitsky, 2010; Roberts and Huprich, 2012; Pincus et al., 2014; Gore and Widiger, 2016). Patients with narcissistic personality disorder (NPD), a pathological form of narcissism, exhibit co-occurring or fluctuating phases of grandiosity and vulnerability, according to clinical observations (Pincus and Lukowitsky, 2010). Recent research shows that this is especially true for grandiose narcissists who exhibit episodes of vulnerability (Gore and Widiger, 2016).

1.2 SELF- ESTEEM

Self-esteem is a psychological characteristic that refers to a person's perception of self-worth and self-assurance in all facets of human life (Rosenberg, 1965). Self-esteem refers to how people feel about themselves in general, whether they think they're good or bad. It's also known as global self-worth (Brown, Dutton, and Cook, 2001). The concept of self-esteem has spawned a plethora of theoretical and empirical studies (Baumeister, 1998). The first widely accepted definition of self-esteem was proposed by James 1890 (James, 1890), who defined it as the ratio of success to pretensions in significant life fields. Later symbolic interactionism approaches emphasised the social influences on self-esteem, whereas James focused more on the individual processes that generate self-esteem (Goffman, 1959; Mead, 1934). People with higher self-esteem are happier with their lives, have less relationship problems, achieve at a higher and more consistent level, and are less vulnerable to mental illnesses (e.g., anxiousness and depression) and actual disease (Brown, 1993).

Self-esteem is an individual's subjective evaluation of his or her worth as a person (e.g., Donnellan, Trzesniewski, & Robins, 2011; MacDonald & Leary, 2012). Importantly, self-

esteem does not always reflect a person's objective traits and abilities, nor does it always reflect how others perceive them. Furthermore, because self-esteem is generally defined as "the feeling of being 'good enough,'" people with high self-esteem may not necessarily believe they are superior to others (Rosenberg, 1965). In contrast to narcissistic persons' extreme self-regard and self-aggrandizement, self-esteem includes feelings of self-acceptance and self-respect. (Ackerman et al., 2011).

1.3 AGGRESSION

Human aggression is defined as any behaviour directed towards another person with the immediate purpose to hurt them. Furthermore, the perpetrator must believe that the behaviour will harm the target and that the target is motivated to avoid it. (Bushman & Anderson 2001, Baron & Richardson 1994, Berkowitz 1993, Geen 2001).

Accidental harm is not aggressive because it is not intended. Harm that occurs as a result of beneficial activities is not aggressive because the harm-doer feels the target is not motivated to prevent the action (e.g., pain experienced during a dental procedure). Similarly, in sexual masochism, the pain is not hostile because the victim is not motivated to avoid it— rather, the suffering is deliberately sought in order to achieve a higher purpose. (Baumeister 1989).

Baumeister and his colleagues proposed a hypothesis and conducted research in order to explain the association between personality traits and violence. Their research focused on narcissism, which is defined as feeling unique and exceptional at the healthy end of the spectrum (healthy narcissism) and exploitativeness, entitlement, and a lack of empathy at the pathological end (pathological narcissism) (pathological narcissism; Baumeister, 1998; Baumeister, Smart, & Boden, 1996). According to Baumeister and colleagues' study, optimistic and inflated self-evaluations are linked to violence because such self-evaluations are fragile and reliant on external support for their preservation (Kerberg, 1985). As a result, these individuals are more prone to ego threats, which relate to external feedback that contradicts these people inflated and optimistic self-evaluations (Baumeister & Boden, 1998). Aggression serves as a defense against ego threatening feedback by attacking its source.

1.4 DEPRESSION

Depression is characterised by low mood and reluctance to action. Medically classified as a mental and behavioural disorder (Sartorius N, Henderson AS, Strotzka H, Lipowski Z, Yu-cun S, You-xin X, et al, 2021) the experience of depression affects a person's thoughts, behavior, motivation, feelings, and sense of well-being (de Zwart PL, Jeronimus BF, de Jonge P, 2019). Anhedonia is thought to be the most common symptom of depression, and it refers to a loss of interest or pleasure in activities that normally bring individuals' delight. (Gilbert P, 2007).

Depression is a mental condition characterised by low motivation, appetite, or restless sleep, decreased self-worth, feelings of guilt, decreased energy, unhappiness, and loss of interest. It affects people from all walks of life. Depression affects an estimated 350 million people in the United States today. According to the World Mental Health Survey, nearly one in every twenty persons suffers from depression (World Health Organization (WHO), 2012). The impacts of biological, psychological, and social components have been demonstrated given the genesis of depression. The study looked at the impact of loneliness, which is recognised as one of the social predictors of depression (Cacioppo, Fowler, & Christakis, 2009).

1.5 EMPATHY

Titchener coined the phrase empathy more than a century ago, derived from the German word *Einfühlung* (Wispe, 1986), which means "to project yourself into what you perceive (Titchener, 1909)," although there has been much discussion about it since then (Scotland et al., 1978). Barnett and Mann (2013) use the term "define" to describe what they mean when they say " "A cognitive and emotional comprehension of another's experience, resulting in an emotional response" is defined as "a cognitive and emotional understanding of another's experience, leading to an emotional response." "An emotional response consistent with the belief that others are deserving of compassion and respect, and that they have intrinsic worth." Baren-Cohen and Wheelwright (2004), on the other hand, define it as "The desire or ability to assign mental states to another person/animal, and it requires an understanding of the mental states of the other person/animal." the observer's appropriate affective response to the mental state of the other." Moreover, Decety and Jackson (2004) and de Vignemont & Singer (2006) claim that there are as many as. As many authors as there are meanings of empathy. To address these "areas of uncertainty," we must first distinguish empathy from other notions, the most essential of which

is sympathy (Cuff et al., 2014). Empathy, according to Hein & Singer (2008), is "feeling as" the other person, whereas pity is "feeling for" the other. According to this description, empathy causes melancholy in the spectator, but sympathy causes anxiety when the observer notices sadness in someone (Singer & Lamm, 2009).

The congruency and inconsistency of the sympathetic emotion is another topic that requires clarification. While some authors believe that the observer's emotion must match the observed individual's (Albiero, Matricardi, Speltri & Toso, 2009; Batson 2011), others contend that this isn't always the case (Blair, 2005; Clements, Holtzworth-Munroe, Schweinle & Ickes, 2007). Nonetheless, according to Coplan (2011), congruency may be influenced by elements such as personal experience, imagination, and stimulation, whereas Scotland et al. (1978) believe that the empathic feeling may be similar to, but not identical to, that of the target. Blair (2005) goes on to say that an empathetic emotion can arise even when there is no other person present, in response to "other emotional stimuli," such as when an observer infers emotionality through imagination, perspective taking, or relevant memory retrieval even when the observed individual is minimising emotional cues. Empathy for an absent target can also be triggered by a third person via verbal utterances (Blair, 2005; Polaschek, 2003), or by stimuli regarding a fictional or imagined person (Polaschek, 2003). (Decety & Jackson, 2004; Singer & Lamm, 2009). Emotional scenes in books and animated films, for example, that are devoid of any live organisms, are an example of the latter. Cuff et al. (2014) believe that the focus should be on the observer's perception and understanding rather than the target's emotionality. Researchers describe a variety of emotions that can elicit an empathic reaction, including pain, sadness, anger, fear, anxiety, happiness, disgust, and others, and indicate that each person's aptitude for diverse emotions varies (Eisenberg, 1986). For example, a person may elicit powerful responses to pleasant emotions such as enjoyment (positive empathy), but may limit their response to a negative emotion (negative empathy) to reduce personal discomfort.

It's also worth noting that academics are split on whether people feel a self/other distinction or merging when they have a sympathetic response. While some argue that the observer is aware that his or her emotional experience is being generated externally (de Vignemont & Singer, 2006), others point to fMRI research to argue that self/other merging is conceivable (Jackson et al., 2006). Furthermore, most conceptualizations label empathy as a "capacity," meaning that it is a consistent attribute (e.g., Barnett & Mann, 2013; Brown, Harkins, & Beech, 2012). Others believe that sympathetic responses are situation and context specific, implying the existence of a state concept (e.g., Albiero, Matricardi, Speltri & Toso, 2009; Batson et al., 2007). According

to the first viewpoint, some people are more empathic than others, and this ability is consistent throughout time. This is supported by deficits identified in psychopathic and autistic people, as well as developmental and genetic factors that account for empathic diversity (Eisenberg & Morris, 2001). This viewpoint is supported by deficits identified in psychopathic and autistic people, as well as developmental and genetic variables that explain for empathic heterogeneity (Eisenberg & Morris, 2001). Studies on sex-offenders who are found to lack generalised empathy but can avoid feeling empathetic for specific people (Fernandez et al., 1999) and violent husbands who are found to have decreased empathy towards their spouses when compared to strangers (Clements, Holtzworth-Munroe, Schweinle & Ickes, 2007) support the second position. Furthermore, a variety of situational circumstances influence the sympathetic response, including observer-target similarity (Eklund, Andersson-Strberg & Hansen, 2009), perceived need (Lishner et al., 2012), and so on. As a result, empathy is a result of the interaction between state and trait impacts.

CHAPTER 2

LITERATURE REVIEW

2.1 GRANDIOSE NARCISSISM, SELF- ESTEEM, AGGRESSION

Rosenberg (Rosenberg M, 1965) Self-esteem is described as a global, affective self-evaluation that can range from extremely low to extremely high. Given this definition, the existence of a positive relationship between narcissism and self-esteem seems obvious, as both seem to capture positive self-perceptions. Both narcissism and self-esteem involve positive self-perceptions, yet they are qualitatively distinct. Narcissism and self-esteem are only weakly to moderately associated, in line with their separate phenotypes. (Campbell et al., 2002; Thomaes & Brummelman, 2016). Many narcissists, in fact, have low self-esteem. They believe they are superior to their fellow humans, but they are unhappy with themselves. In contrast, many people with strong self-esteem are not narcissistic. They regard themselves, yet they are hesitant to think of themselves as superior to others.

"An individual's subjective judgement of his or her worth as a person" is how self-esteem is defined (Donnellan, Trzesniewski, & Robins, 2011). Self-esteem does not always represent a person's objective abilities and skills. Furthermore, while the feelings of self-acceptance and self-respect have been used to characterise self-esteem, high self-esteem does not always imply that a person believes he or she is superior to others (Rosenberg, 1965). Statements like "I feel that I am a person of worth, at least on an equal footing with others" and "On the whole, I am content with myself" are common self-esteem indicators (the items are from the Rosenberg Self-Esteem Scale, RSE; Rosenberg, 1965). Narcissism, on the other hand, is defined by traits including a grandiose self-perception, sentiments of superiority, self-centeredness, and a sense of entitlement (Ackerman et al., 2011; Bosson et al., 2008; Morf & Rhodewalt, 2001). Similar to self-esteem, narcissism is typically conceived of as a dimensional construct that captures individual differences on a continuum from low to high (Foster & Campbell, 2007). The most frequently used measure is the Narcissistic Personality Inventory (NPI; Raskin & Hall, 1979), which requires respondents to choose among narcissistic and nonnarcissistic statements; examples of narcissistic statements are "If I ruled the world, it would be a much better place" and "I like to be the center of attention."

Some researchers believe that narcissism and self-esteem have a large conceptual overlap, with people who are high in both traits having a higher opinion of themselves (Bosson, J.K., Lakey,

C. E., Campbell, W.K., Zeigler-Hill, V., Jordan, C.H., and Kernis, M.H., 2008). (Hovrath, S. and Morf, C.C., 2010). Others, on the other hand, have suggested that, whereas self-esteem is an intrapersonal trait, narcissism is largely an interpersonal trait (Zeigler-Hill, V., 2006). Narcissistic people may wear a deceptive mask of high self-esteem, scoring high on explicit self-esteem tests but scoring substantially lower on implicit self-esteem measures (Zeigler-Hill, V., 2006).

Provocation is a leading cause of aggressiveness (Bushman & Anderson, 1998), and researchers have looked into whether some persons are more vulnerable to provoked aggression than others. Many studies have focused on the role of self-evaluation constructs (Baumeister, Bushman, & Campbell, 2000; Donnellan, Trzesniewski, Robins, Moffitt, & Caspi, 2005; Rasmussen, 2016), with scholars distinguishing between two types of self-evaluation constructs: narcissism and self-esteem (Brummelman, Gürel, Thomaes, & Sedikides).

Baumeister, Smart, and Boden (1996) refuted the theory that low self-esteem drives aggressiveness in a comprehensive literature analysis. Instead, they claimed that violence happens most frequently when inflated self-esteem and unstable ideas in personal superiority are threatened. Excessive self-love is linked to narcissism, a term derived from a Greek tale about an attractive young man who falls in love with his own reflection in the water. Narcissism is a personality disorder characterised by grandiose perceptions of oneself, an inflated sense of entitlement, and exploitative attitudes toward others in its most extreme form (American Psychiatric Association, 1994). The majority of current psychology research focuses on "normal narcissism," defined as a feature that differs between people in the general population (Morf & Rhodewalt, 2001; Raskin & Terry, 1988). Although intuition says that narcissism is synonymous with overly high self-esteem, research has revealed that the two are not closely linked (Brown & Zeigler-Hill, 2004). Narcissists are self-absorbed and arrogant, but they differ in feelings of self-assurance and sufficiency (reflecting higher levels of self-esteem) or self-doubt and insufficiency (reflecting lower levels of self-esteem; Cain, Pincus, & Ansell, 2007; Dickinson & Pincus, 2003; Rose, 2002; Wink, 1991).

Narcissistic people have a high opinion of themselves and expect others to have the same opinion. High self-esteem was associated with aggressiveness, according to Bushman et al. (2009), but the combination of high self-esteem and ego threats resulted in higher rates of aggression; low self-esteem showed no association with aggression. According to Baumeister

et al. (2000), narcissistic people do not vary from non-narcissistic people in terms of violence as long as their ego is not insulted. This suggests that narcissism is more of a risk factor that can enhance aggression in response to provocation than a direct causal link (Bushman & Baumeister, 1998).

2.2 GRANDIOSE NARCISSISM, SELF- ESTEEM, DEPRESSION

Several scholars have suggested that certain parenting techniques result in narcissistic characteristics that compensate for unmet narcissistic wants. The 'mask model,' developed by Kernberg (1975), is a theoretical approach to analysing grandiosity in narcissists (Campbell et al., 2007, Gregg and Sedikides, 2010). Individuals have several self-representations, according to Kernberg, which become integrated during empathic encounters with significant others during childhood. Pathological narcissism, according to Kernberg, is caused by invalidating and inconsistent interactions with primary nurturing figures. Inadequate parenting, in particular, leads to strong feelings of inadequacy, as well as attempts to preserve good explicit self-concepts despite a general lack of (implicit) confidence. As a result, narcissists have contradictory self-images. Furthermore, narcissistic grandiosity emerges as a coping mechanism for a disappointed, empty self-concept resulting from parental devaluation (Kernberg, 1975).

Millon (1981) takes a different approach, claiming that narcissists' inflated self-appraisals are the result of parental pampering rather than early childhood devaluation. Parents of narcissists, according to Millon, participate in excessive overvaluation of their child, resulting in the formation of a grandiose self-image. Excessive unconditional praise is also a type of invalidation, as the parent's reactions to the child's actions do not reflect objective reality.

Many research (e.g., Brockner & Guare, 1983; Tennen & Herzberger, 1987) have found a strong negative relationship between self-esteem and depression. In fact, recent research has revealed that the processes that underpin poor self-esteem and depression may have a lot in common (Watson & Clark, 1984). Kernis, Brockner, and Frankel (1989) found that people with poor self-esteem, such as depressed people (Carver & Ganellen, 1983), are more likely to extrapolate the negative consequences of specific failures to other elements of their identity. Other researchers have proposed that depressives' reactions to happy and negative outcomes are mediated by the negative self-evaluative component of depression (Tennen & Herzberger, 1987).

2.3 GRANDIOSE NARCISSISM, EMPATHY, AGGRESSION

Aggression and narcissism have always been related (Kernberg, 1975). Bossy, violent, and harsh are common characteristics of grandiose narcissists (Wink, 1991). Threatened egotism, in which aggressiveness is defined as a protective response when a highly favourable self-view is challenged by less favourable external appraisals, has been connected to grandiose narcissism and reactive violence (Baumeister & Boden, 1998). Studies linking grandiose narcissism to aggressiveness after provocation (e.g., Bushman and Baumeister, 1998, Bushman et al., 2009) backed up this theory, however others were unable to duplicate the findings (Cale and Lilienfeld, 2006, Martinez et al., 2008).

In some situations, the link between narcissism and aggressiveness would be stronger (Barry et al., 2006, Bushman and Baumeister, 1998). Twenge and Campbell (2003) investigated the relationship between narcissism as evaluated by the Narcissistic Personality Inventory (NPI) and aggressiveness in social rejection scenarios in a series of research. The participants' social rejection circumstances were controlled by having them write about a moment when they were socially rejected or by telling them that no one else in their group chose them as a member. In four investigations, narcissism was found to increase aggressiveness or rage in the social rejection circumstances, but not in the control or social acceptance situations, where they were told that all of the other participants chose them as a member. These findings imply that when grandiose narcissism is combined with social rejection, aggressiveness rises.

Although the history of empathy is marked by conceptual and operational disagreements, assumptions regarding its role in aggressive behavior are remarkably congruent. These assumptions extend beyond the realm of popular culture and its ubiquitous cold-blooded criminals. Perpetrators of antisocial behavior, violence, and sexual aggression are regularly described as having insufficient empathy (Hogan, 1973; Kohlberg, 1963; Marshall, Hudson, Jones, & Fernandez, 1995; P. A. Miller & Eisenberg, 1988). Empathy also plays an important role in several externalizing syndromes included in the Diagnostic and Statistical Manual of Mental Disorders (5th ed.; DSM-5; American Psychiatric Association, 2013): Conduct disorder, antisocial personality disorder, and narcissistic personality disorder are all characterized by low empathy. Although not included in the DSM, psychopathy is a personality disorder associated with extreme violence and antisocial behavior; it is also the disorder most associated with empathy deficits (Cleckley, 1941; Hare & Neumann, 2008; Lykken, 1995). Empathy-externalizing research continues to flourish and clinical applications are widespread.

2.4 GRANDIOSE NARCISSISM, EMPATHY, DEPRESSION

Many research (e.g., Krizan and Herlache 2018; Pincus and Lukowitsky 2010; Wink 1991) have highlighted the distinction between two types of narcissism: grandiose (overt) and vulnerable (covert) (covert). Both have a narcissistic core that includes entitlement, self-importance, a lack of need for relationships, a lack of empathy, and self-centeredness (e.g., Brailovskaia and Bierhoff 2018; Campbell 2005; Hepper et al. 2014; Krizan and Herlache 2018; Miller and Campbell 2008; Rohmann et al. 2019). Exhibitionism, hubris, success-orientation, and extraversion characterise grandiose narcissism, whereas defensiveness, insecurity, and resentment characterise vulnerable narcissism (Brailovskaia and Margraf 2016; Dickinson and Pincus 2003; Hanke et al. 2019; Krizan and Herlache 2018; Rogoza et al. 2018; Rohmann et al. 2012; Rose 2002). Individuals with an enhanced level of grandiose narcissism often present themselves as charming interaction partners and initiate many superficial social interactions. In contrast, vulnerable narcissists tend to social anxiety and social avoidance (Brailovskaia and Bierhoff 2016, 2018). Corresponding to its typical characteristic, grandiose narcissism is often considered as the adaptive form of narcissism, while vulnerable narcissism is termed as the maladaptive/pathological form of narcissism that is positively linked to depression and anxiety symptoms (e.g., Brailovskaia and Bierhoff 2016; Miller et al. 2014; Pincus et al. 2009).

Pincus et al. (in press) argue that the NPI measures a limited scope of narcissistic characteristics, assessing only the more grandiose aspects of narcissism, neglecting more vulnerable narcissistic traits. A review of the clinical literature (Cain et al., 2008) reveals two phenotypic expressions narcissistic pathology, confirmed by factor-analytic studies of narcissistic traits (e.g., Rathvon and Holmstrom, 1996; Wink, 1991). The first is narcissistic grandiosity, characterized by arrogance, exploitativeness, and self-absorption. The second is narcissistic vulnerability, characterized by shyness, inhibition, and modesty, punctuated by affective dysregulation when strong needs for admiration and idealized expectations for self and others are not met. Thus, narcissistic vulnerability, rather than narcissistic grandiosity, is likely related depressive risk by evoking a strong awareness of the discrepancies between what is fantasy and reality (Dickinson and Pincus, 2003). Indeed, an association between narcissism and depression has been found when using measures of vulnerable narcissistic traits (Rathvon and Holmstrom, 1996; Wink, 1991).

According to Hoffman (1984) the empathic feature appears at early infancy as an innate ability to respond to others' feelings. An infant's response is a rather noncognitive form of empathy, which develops into more cognitive forms such as sympathy as the child develops cognitive skills. Empathic emotion is often regarded to be the most prevalent and basic basis of altruistic conduct (Batson, 1987; Hoffman, 1984; Karylowski, 1984; Krebs, 1978).

In contrast to grandiosity empathy, Rushton (1984) claimed that a consistently altruistic person is more integrative and mature and has a "strong feeling of personal efficacy and well-being". Because empathy is the important affective component of altruism, people with above-average empathy may be more integrative and mature than others and may cope better with psychosocial distress. If this is the case it may be expected, then, that more empathic persons develop fewer depressive symptoms than less empathic individuals.

2.5 VULNERABLE NARCISSISM, SELF- ESTEEM, AGGRESSION

The threatened egotism model of aggression is presented by Baumeister et al. (2000) to explain how global self-esteem does not always lead to physical and verbal aggression, but the threat to one's self-esteem is what drives aggressiveness. Narcissistic people have a high opinion of themselves and expect others to have the same opinion. High self-esteem was linked with aggression, according to Bushman et al. (2009), but the combination of high self-esteem and ego threats resulted in higher rates of aggression; low self-esteem showed no association with aggression. According to Baumeister et al. (2000), narcissistic people behaved similarly to non-narcissistic people in terms of violence as long as their ego was not insulted. This suggests that narcissism is more of a risk factor that can enhance aggression in response to provocation than a direct cause (Bushman & Baumeister, 1998).

It's still unclear how narcissism and self-esteem interact with different types of aggression. Some theorists believe that narcissism and low self-esteem have additive impacts on aggression, whereas others believe they have an interaction effect. Self-esteem is linked to decreases in aggression, while narcissism is linked to rises in violence, according to proponents of the additivity theory (Barry, Grafeman, Adler, & Pickard, 2007; Donnellan et al., 2005; Hyatt et al., 2018). However, proponents of the interaction theory contend that narcissism has a weaker relationship with violence at high vs. low self-esteem levels (Barry, Frick, & Killian, 2003; Fanti & Frangou, 2018; Fanti & Henrich, 2015; Hart, Richardson, & Tortoriello, 2018). The exact relationship between self-evaluation constructions and types of aggressiveness is at issue in this debate.

In a study (Hart, Richardson, & Tortoriello, 2018), participants imagined receiving rude and highly provoking comments from a provocateur and then indicated whether they would aggress against the provocateur. Findings revealed that narcissism more weakly related to aggression at high vs. low self-esteem levels. Other studies have revealed conceptually-similar findings on antisocial-conduct problems (Barry et al., 2003), bullying (Fanti & Frangou, 2018; Fanti & Henrich, 2015), and general aggression (i.e., a measure that apparently confounds provoked and unprovoked aggression; Witt, Donnellan, & Trzesniewski, 2011).

Bushman et al. (2009) postulated that narcissism at low self-esteem is essentially vulnerable narcissism, which also relates to enhanced aggression under provocation (Rasmussen, 2016). In theory, vulnerable and grandiose narcissism are quite complicated in terms of etiology and symptoms (Akhtar, 2000), and these levels of complexity are unlikely to collapse into vulnerable narcissism when conceptualizing grandiose narcissism at low self-esteem.

2.6 VULNERABLE NARCISSISM, SELF- ESTEEM, DEPRESSION

Narcissistic people, according to Horowitz (2009), become "more and more sensitive to guilt, panic, helplessness, or depression as life unfolds without the support of admiring others." "Narcissistic patients can and frequently do present for psychotherapy in vulnerable states of depression, anxiety, humiliation, and even suicidality," according to Pincus et al. (2014). In reality, although the effect size is small, research reveals that people with narcissistic personality disorder (NPD) have more depression than those without NPD (Klein, 2003; Miller, Campbell, & Pilkonis, 2007).

Milrod (1988) claims that depression is caused by narcissistic injuries, which are caused by disparities between self-representation and the intended self-image. As a result, pathological narcissism can sometimes be effective in distorting and inflating a person's self-view in order to avoid feelings like shame and depression (Morf, Horvath, & Torchetti, 2011; Raskin, Novacek, & Hogan, 1991). It may not be successful at other times. This is in line with research and clinical case studies that show narcissistic patients seek treatment in a vulnerable self-state following a major life setback or disappointment, with depression being a common presenting complaint (Caligor, Levy, & Yeomans, 2015; Cooper & Ronningstam, 1992; Ellison, Levy, Cain, Ansell, & Pincus, 2013; Morey & Stagner, 2012; Pincus, Cain, & Wright, 2014; Pincus et al., 2016; Skodol, Morey, Bender, & Oldham, 2015). As a result, pathological narcissism may be linked not only to the intensity of depressive symptoms, but also to their fluctuation across time.

Low self-esteem is a vulnerability factor implicated in the etiology of depressive illnesses, according to many depression theories (e.g., Abramson, Seligman, & Teasdale, 1978; Beck, 1967). A growing number of longitudinal studies has recently backed up the vulnerability hypothesis of low self-esteem and depression (Orth & Robins, 2013). According to the vulnerability model, poor self-esteem is a risk factor for depression (Beck, 1967; Metalsky, Joiner, Hardin, & Abramson, 1993; Roberts & Monroe, 1992; Zeigler-Hill, 2011). For example, Beck (1967) proposed in his cognitive theory of depression that negative self-perceptions are not only a symptom of depression, but also play a vital causal role in its etiology. The scar model has been presented in addition to the vulnerability model to explain why low self-esteem and depression are linked. Low self-esteem is regarded as a result, rather than a cause, of depression in the scar model, because depressive experiences can result in lasting alterations (i.e., "scars") in an individual's self-concept (Coyne, Gallo, Klinkman, & Calarco, 1998; Shahar & Davidson, 2003). Importantly, the vulnerability and scar models are not mutually incompatible because both processes (poor self-esteem contributing to depression and depression destroying self-esteem) can occur at the same time. Overall, findings from longitudinal studies (Orth, Robins, & Meier, 2009; e.g., Orth, Robins, & Roberts, 2008; Orth et al., 2014; Wouters et al., 2013) and a meta-analysis of the available evidence (Sowislo & Orth, 2013) strongly support the vulnerability model, while the scar model receives only weak support.

2.7 VULNERABLE NARCISSISM, EMPATHY, AGGRESSION

Empathy is important in understanding both adaptive and pathological narcissism. Despite the fact that a lack of empathy is a hallmark of narcissistic personality disorder (American Psychiatric Association, 2013), new research suggests that empathic difficulties are caused by a lack of drive to be empathic rather than an inability to be empathic (Baskin-Sommers, Krusemark & Ronningstam, 2014). However, there are two types of narcissism: grandiose narcissism and vulnerable narcissism. These two types have a lot in common, like the desire for praise, relying on others to build and maintain self-esteem, and dealing with emotional dysregulation (Lamkin, Clifton, Campbell & Miller, 2014). While grandiose narcissism is marked by entitlement, a contempt for others, and inflated self-worth, vulnerable narcissism has been linked to deflated self-worth, despair, anxiety, and concern for others' needs.

From two therapeutically relevant viewpoints, the relationship between vulnerable narcissism and empathy is intriguing and deserving of research. First, because people with vulnerable

narcissism are more likely to use psychotherapy than people with grandiose narcissism (Russ & Shedler, 2013) and are frequently misdiagnosed (Luchner, 2013), learning more about the relationship between vulnerable narcissism and empathy may help with differential diagnosis and appropriate treatment focused on developing accurate and adaptive empathy. Second, because many psychotherapists suffer from vulnerable narcissism (Glickauf-Hughes & Mehlman, 1995), assessing potential empathic deficits may be an important part of training and supervision.

Empathy has been defined as an other-oriented emotional response that is congruent with another person's perceived welfare (Batson, Early, & Salvarani, 1997). Empathy can be elicited via perspective taking by imagining how the other person feels (Batson et al., 1997; Hoffman, 2000). Several theorists have suggested that empathy should inhibit aggression (e.g., Eisenberg, 2000; Feshbach, 1975; Hoffman, 2000). Specifically, when individuals adopt the perspective of others and imagine how others feel (empathy), they are less likely to engage in aggressive behavior that may elicit distress in another person (Eisenberg, 2000). Indeed, empathy has been negatively associated with aggression in numerous cross-sectional studies (e.g., Jolliffe & Farrington, 2004; Miller & Eisenberg, 1988; Vachon, Lynam, & Johnson, 2014) and some experiments (e.g., Phillips & Giancola, 2007).

2.8 VULNERABLE NARCISSISM, EMPATHY, DEPRESSION

Clinical case studies also reveal that narcissistic individuals are more likely to experience a "empty" sadness marked by anhedonia, feelings of worthlessness, nihilism, and dissatisfaction with life than a melancholic melancholy characterised by sad affects (Dawood & Pincus, 2016; Pincus et al., 2014). Anhedonic depression has been linked to self-harm (Brausch & Gutierrez, 2010; Muehlenkamp & Gutierrez, 2007; Winer, Drapeau, Veilleux, & Nadorff, 2016) and suicide risk (Brausch & Gutierrez, 2010; Muehlenkamp & Gutierrez, 2007; Winer, Drapeau, Veilleux, & Nadorff, 2016). (Fawcett et al., 1990; Winer et al., 2016). Similarly, pathological narcissism is linked to self-harm (Dawood, Schroder, Donnellan, & Pincus, in press; Pincus et al., 2009; Thomas et al., 2012), and narcissistic individuals are at a higher risk of suicide (Dawood, Schroder, Donnellan, & Pincus, in press; Pincus et al., 2009; Thomas et al., 2015; Heisel, Links, Conn, van Reekum, & Flett, 2007; Ronningstam, Weinberg, & Maltzberger, 2008).

Twenge, Campbell, and colleagues have suggested that current generations of youth are more narcissistic and have more mental health problems than previous generations (e.g., Twenge &

Campbell, 2010; Twenge & Foster, 2010; Twenge, Konrath, Foster, Campbell, & Bushman, 2008). The rise of narcissism throughout time, according to Twenge and Campbell, supports dubbing today's adolescents "Generation Me" and describing the situation as a "narcissism epidemic" (Twenge, 2006; Twenge & Campbell, 2009). Furthermore, they claim that the rise in narcissism throughout time has linked to increasing incidence of depression (Twenge, 2008; Twenge & Campbell, 2010). Although other researchers have found evidence that contradicts the claimed rise in narcissism (Donnellan, Trzesniewski, & Robins, 2009; Trzesniewski & Donnellan, 2010; Trzesniewski, Donnellan, & Robins, 2008a, 2008b), Twenge and Campbell's perspective suggests that narcissism and depression are linked.

Vulnerable narcissism, as described in the Psychodynamic Diagnostic Manual and in various theoretical and empirical studies as separate from grandiose narcissism (PDM Task Force, 2006), has been linked to special abilities in relatedness and empathy (McWilliams, 2011). Unlike with grandiose narcissism, those with vulnerable narcissism are likely to understand what others are experiencing, described by Miller (1997) as emotional antennae. The keen ability to suspend their own needs for others allows them to feel alive, needed and wanted, and provides them with the admiration that they seek. However, their sense of self then depends on the reactions of others and can change depending on what others may need, leading to feeling slighted, disappointed, and unadmired for their selfless acts and gestures (Zeigler-Hill, Clark & Pickard, 2008). Their need to relate and deny their own interests creates subjective experiences of sadness, emptiness, depression and anxiety that they must hide from others in order to protect themselves as needless helpers and saviors.

CHAPTER 3

MOTIVATION, RESEARCH GAP, CONCEPTUAL FRAMEWORK, OBJECTIVES AND HYPOTHESES

3.1 Motivation for the study

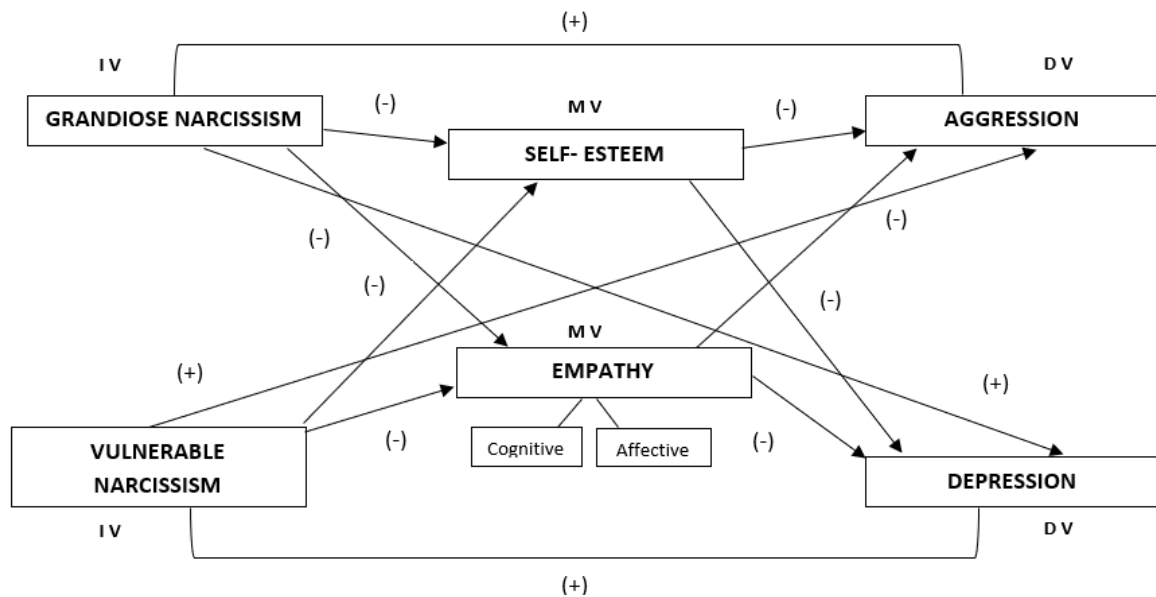
A study conducted by Brookes and Miller et al. (2011) suggests that people with strong grandiose narcissism have better self-esteem, while people with highly vulnerable narcissism have lower self-esteem. Self-esteem, on the other hand, has been linked to emotional well-being or challenges. And empathy also have a vital role in understanding both adaptive and pathological narcissism. Furthermore, vulnerability, relative to grandiosity, is associated more strongly with angry hostility and paranoid personality features (J. D. Miller & Campbell, 2008). Thus, narcissistic vulnerability is more likely to be linked to depression risk by creating a heightened awareness of the differences between fantasy and reality (Dickinson and Pincus, 2003).

3.2 Research Gap

There is no research done to link grandiose and vulnerable narcissism with aggression and depression; mediating role of self- esteem and empathy. So, the present study focused on understanding the relationship of grandiose and vulnerable narcissism with aggression and depression- mediating role of empathy and self- esteem. The study helped to gain a perspective of grandiose and vulnerable narcissists in relation to their aggression and depression with self-esteem and empathy as mediators.

3.3 Conceptual Framework

Figure 1: shows the general proposed pathway between grandiose, vulnerable narcissism, empathy, self- esteem, aggression and depression



In a study of Campbell et al., 2002, it was researched that Narcissism and self-esteem both entail positive views of the self, and they are weakly to moderately correlated. According to Bushman et al. (2009) high self-esteem was associated with aggressiveness in narcissistic people. Many research (e.g., Brockner & Guare, 1983; Tennen & Herzberger, 1987) have found a strong negative relationship between self-esteem and depression. Narcissism is linked to antisocial traits such inadequate empathy (Watson and Morris, 1991), exploitativeness (Campbell, Bush, Brunell, and Shelton, 2005), and aggressive threat reactions (Bushman and Baumeister, 1998).

3.4 Objectives

1. To study the relationship between Grandiose and Vulnerable Narcissism with Aggression, Depression, Self- Esteem and Empathy.

2. To study if there exists any direct relationship between Grandiose and Vulnerable Narcissism with Aggression and Depression, or if it is mediated by Self- Esteem and Empathy.

3.5 Hypotheses

H₁ Grandiose Narcissism will be positively related to Self- Esteem.

H₂ Grandiose Narcissism will be negatively related to Empathy.

H₃ Vulnerable Narcissism will be negatively related to Self- Esteem.

H₄ Vulnerable Narcissism will be negatively related to Empathy.

H₅ Self- Esteem will be negatively related to Aggression.

H₆ Self- Esteem will be negatively related to Depression.

H₇ Empathy will be negatively related to Aggression.

H₈ Empathy will be negatively related to Depression.

H₉ There is a relationship between Grandiose Narcissism and Aggression, mediated by Self- Esteem and Empathy.

H₁₀ There is a relationship between Grandiose Narcissism and Depression, mediated by Self- Esteem and Empathy.

H₁₁ There is a relationship between Vulnerable Narcissism and Aggression, mediated by Self- Esteem and Empathy.

H₁₂ There is a relationship between Vulnerable Narcissism and Depression, mediated by Self- Esteem and Empathy.

CHAPTER 4

METHODOLOGY

4.1 Sample

In this study total of 170 adults comprising 96 females and 74 males in the age range of 18-30 years. The sample was collected from north India population. The method of sampling used in this study was convenient sampling.

4.2 Design

The independent variables (IV) are grandiose and vulnerable narcissism, mediator variables (MD) are self- esteem and empathy and dependent variables (DV) are, aggression and depression.

4.3 Tools used

Narcissistic Personality Inventory (NPI)- The Narcissistic Personality Inventory (NPI; Raskin and Hall 1979; Raskinand Terry1988) is the most widely used measure of grandiose narcissism. It includes 40 items that tap into a variety of narcissistic tendencies, such as sentiments of superiority and a tendency to exploit others. There are forty pairs of statements in the test. The subject chooses the one that best reflects his personality from each combination. Most people should be able to finish it in five to 10 minutes. Raskin and Terry (1988) calculated alpha composite reliability values for the Narcissistic Personality Inventory of .83, .74, .80, and .90.

The Hypersensitive Narcissism Scale (HSNS)- The Hypersensitive Narcissism Scale (HSNS) is a self-report measure of covert narcissism. It was developed by Holly M. Hendin and Jonathan M. Cheek in 1997. It consists of ten items rated on a five-point scale measuring a covert aspect of Narcissism, Likert-type self-report questionnaire explicitly designed to dimensionally assess hyper-sensitive narcissism. The items are simply summed up to obtain the HSNS total score; the higher the HSNS total score, the higher the presence of hypersensitive narcissistic features. Internal consistency reliability estimates, based on alpha coefficients, range from .72.

State Self-Esteem Scale- The State Self-Esteem Scale (Heatherton & Polivy, 1991) is a 20-item questionnaire containing three subscales: academic performance (Cronbach's alpha = .78), social evaluation (alpha = .80), and appearance (alpha = .82). All items are answered using a 5-point scale (1= not at all, 2= a little bit, 3= somewhat, 4= very much, 5= extremely).

The Basic Empathy Scale (BES)- Empathy has been more recently considered to consist of 20 components (i.e., an affective and a cognitive component). The Basic Empathy Scale (BES) is a tool that has been used to assess empathy in young people and adolescents on the basis of this dual-component conception (Jolliffe & Farrington, 2006). This scale features 20-items (appendix available from the authors): 9 for cognitive empathy (items 3, 6, 9, 10, 12, 14, 16, 19, 20), and 11 for affective empathy (items 1, 2, 4, 5, 7, 8, 11, 13, 15, 17, 18). It is a self-report measure with 20 items on which responses are indicated on a 5-point Likert scale ranging from 1 (Strongly Disagree) to 5 (Strongly Agree). Cronbach alpha coefficients were found to be 0.72 for Affective empathy, and 0.69 for Cognitive empathy, (Carre et al., 2013).

Aggression Questionnaire- The Aggression Questionnaire (Buss & Perry, 1992) is a 29-item measure consisting of four subscales: Hostility (alpha = .83), Anger (alpha = .84), Physical Aggression (alpha = .85), and Verbal Aggression (alpha = .82). This scale has proven useful in predicting laboratory and real-world aggression (Bushman & Wells, 1998; Buss & Perry, 1992). The latter two subscales were included as a source of preliminary validity information. All items were rated on bipolar 5-point Likert-type scales ranging from 1 (extremely uncharacteristic of me) to 5 (extremely characteristic of me).

Beck's Depression Inventory- The Beck Depression Inventory (BDI) is a self-report rating inventory with 21 items that assesses depression-related attitudes and symptoms (Beck, et al., 1961). Several computerised versions of the BDI have been produced, as well as a card form (May, Urquhart, Tarran, 1969, Groth-Marnat, 1990). The BDI takes about 10 minutes to complete, but clients must have a reading ability of fifth to sixth grade to grasp the questions (Groth-Marnat, 1990).

The BDI's internal consistency ranges from .73 to .92, with a mean of .86 (Beck, Steer, & Garbin, 1988). The 13-item short form has been found to have similar reliabilities (Groth-Marnat, 1990). With alpha coefficients of .86 and .81 for psychiatric and non-psychiatric populations, the BDI has a high level of internal consistency (Beck et al., 1988).

4.4 Procedure

This research studies the relationship of grandiose and vulnerable narcissism with aggression and depression: empathy and self- esteem as mediators. The study comprises of six questionnaires; Narcissistic Personality Inventory, The Hypersensitive Narcissism Scale, State Self- Esteem Scale, Aggression Questionnaire, The Basic Empathy Scale and Beck's Depression Inventory. Consent was obtained from the participants. The objectives of the study were explained, informed confidentiality and anonymity being assured. The subjects were asked to fill the questionnaire via Google forms.

4.5 Analyses

The data was analysed using Statistical Package for Social Science (SPSS 21.0) where descriptive statistics (mean and standard deviation), t-test and correlation were used. Additionally, Smart PLS 3.3 was used for the mediation analysis.

CHAPTER 5

RESULTS

In order to meet the objectives of the study the obtained data were subjected to a number of statistical analyses. Data was analyzed by using descriptive statistics, correlation and mediation analysis.

Table 1: Mean and Standard Deviation values for grandiose, vulnerable narcissism, self-esteem, cognitive and affective empathy, depression and aggression.

Variable	N	Mean	Std. Deviation
Grandiose Narcissism	170	14.97	6.818
Vulnerable Narcissism	170	30.37	5.622
Self- Esteem	170	70.47	12.780
Cognitive Empathy	170	35.08	3.177
Affective Empathy	170	26.34	3.022
Depression	170	9.66	9.067
Aggression	170	82.75	16.817

The above table shows descriptive statistics for all variables. The mean and S.D. for Grandiose Narcissism came out to be 14.97 and 6.818, while for Vulnerable Narcissism it was 30.37 and 5.62. The mean for Self- Esteem was 70.47 while S.D. was 12.780. In terms of empathy, mean and S.D. for Cognitive empathy were 35.08 and 3.177 while the mean and S.D. values for Affective empathy were 26.34 and 3.02 respectively. Further, results indicate that mean and S.D. for Depression were 9.66 and 9.06 and for Aggression were 82.75 and 16.81.

Table 2: Correlation values between grandiose, vulnerable narcissism, self- esteem, cognitive and affective empathy, depression and aggression.

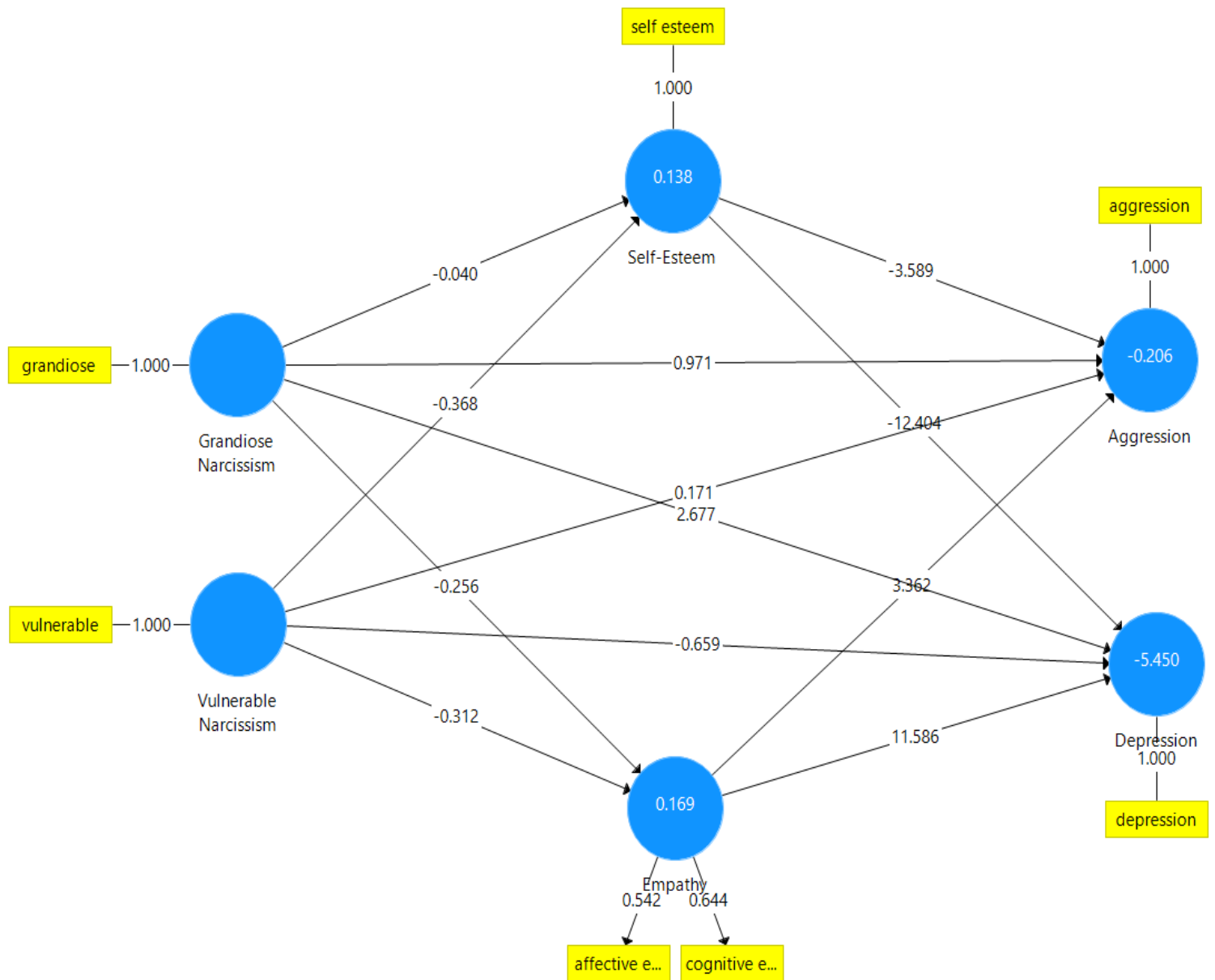
	Grandiose Narcissism	Vulnerable Narcissism	Self- Esteem	Cognitive Empathy	Affective Empathy	Depression	Aggression
Grandiose Narcissism	1						
Vulnerable Narcissism	.035	1					
Self- Esteem	-.053	-.369**	1				
Cognitive Empathy	-.160*	-.212**	.642**	1			
Affective Empathy	-.159*	-.167*	.542**	.349**	1		
Depression	.213**	.295**	-.740**	-.826**	-.712**	1	
Aggression	.268**	.451**	-.349**	-.369**	-.261**	.392**	1

*. Correlation is significant at the 0.05 level (2-tailed).

** . Correlation is significant at the 0.01 level (2-tailed).

As is evident from Table 2, grandiose narcissism was found to have a negative relationship with the mediators, i.e., cognitive and affective empathy ($r = -.160$, $p < 0.05$) and ($r = -.159$, $p < 0.05$), respectively. Further, grandiose narcissism was positively correlated with depression and aggression ($r = .213$, $p < 0.01$) and ($r = .268$, $p < 0.01$), respectively. While, vulnerable narcissism, as expected, was negatively correlated with self- esteem ($r = -.369$, $p < 0.01$) and was also negatively correlated with cognitive and affective empathy ($r = -.212$, $p < 0.01$) and ($r = -.167$, $p < 0.05$), respectively. And with depression and aggression, vulnerable narcissism was found out to be positively correlated, i.e., ($r = .295$, $p < 0.01$) and ($r = .451$, $p < 0.01$), respectively. As a mediator, self- esteem has negative relationship with depression ($r = -.740$, $p < 0.01$) and aggression ($r = -.349$, $p < 0.01$). Cognitive empathy was found out to be negatively correlated with depression ($r = -.826$, $p < 0.01$) and aggression ($r = -.369$, $p < 0.01$). Similarly, affective was also negatively correlated with depression and aggression ($r = -.712$, $p < 0.01$) and ($r = -.261$, $p < 0.01$), respectively.

Figure 1: Path model showing results of Mediation analysis



The above figure shows the standardized regression weights and p values for each path.

Here, multiple mediation analysis has been performed wherein the mediating effects of two variables- Empathy (cognitive and affective empathy) and trait Self- Esteem- are simultaneously observed. The direct as well as indirect path coefficients can be delineated from the figure. The latter are a product of two coefficients – coefficient of (Exogenous variable → Mediation variable) x coefficient of (Mediating variable → Endogenous Variable).

Table 3: Regression weights, direct effects, mean, standard deviation, T values and significance values between the variables

Path	Regression weights	Mean	Standard Deviation	T Statistics	Sig
Empathy -> Aggression	-0.244	-0.241	0.09	2.708	0.007
Empathy -> Depression	-0.842	-0.841	0.029	28.832	0.000
Grandiose Narcissism -> Aggression	0.207	0.21	0.072	2.883	0.004
Grandiose Narcissism -> Depression	0.042	0.042	0.024	1.738	0.082
Grandiose Narcissism -> Empathy	-0.186	-0.185	0.063	2.973	0.003
Grandiose Narcissism -> Self-Esteem	-0.04	-0.035	0.071	0.562	0.574
Self-Esteem -> Aggression	-0.021	-0.024	0.082	0.259	0.795
Self-Esteem -> Depression	-0.106	-0.107	0.035	3.03	0.003
Vulnerable Narcissism -> Aggression	0.379	0.375	0.066	5.721	0.000
Vulnerable Narcissism -> Depression	0.058	0.058	0.02	2.926	0.004
Vulnerable Narcissism -> Empathy	-0.227	-0.228	0.074	3.064	0.002
Vulnerable Narcissism -> Self-Esteem	-0.368	-0.367	0.062	5.893	0.000

It can be inferred from the table above that the direct effect of Grandiose Narcissism on depression (0.042) is not significant at $p= 0.082$, but on the other hand, the direct effect of Grandiose Narcissism on aggression (0.207) is significant at $p= 0.004$. the direct effect of Vulnerable Narcissism on depression (0.058) and aggression (0.379) is significant at $p= 0.004$ and $p= 0.000$, respectively.

Table 4: Mediation Analysis- consistent bootstrap results for indirect effects between Grandiose and Vulnerable narcissism with Depression and Aggression through Empathy, and Self- esteem, separately.

Path	Regression weights	Mean	Standard Deviation	T Statistics	Sig
Grandiose Narcissism -> Empathy -> Depression	0.157	0.156	0.053	2.949	0.003
Grandiose Narcissism -> Self-Esteem -> Depression	0.004	0.003	0.008	0.541	0.589
Vulnerable Narcissism -> Self-Esteem -> Aggression	0.008	0.009	0.031	0.252	0.801
Vulnerable Narcissism -> Self-Esteem -> Depression	0.039	0.039	0.015	2.64	0.008
Grandiose Narcissism -> Self-Esteem -> Aggression	0.001	0.002	0.007	0.116	0.908
Grandiose Narcissism -> Empathy -> Aggression	0.045	0.043	0.021	2.184	0.029
Vulnerable Narcissism -> Empathy -> Aggression	0.055	0.055	0.029	1.893	0.059
Vulnerable Narcissism -> Empathy -> Depression	0.191	0.191	0.062	3.094	0.002

It can be inferred from the table above that the indirect effects of Empathy on Grandiose Narcissism and Depression (0.157) are significant at $p= 0.003$, and its effect on Vulnerable Narcissism and Depression (0.191) are also significant at $p= 0.002$. The indirect effects of Empathy on Grandiose Narcissism and Aggression (0.045) are significant at $p= 0.029$, and its effect on Vulnerable Narcissism and Aggression (0.055) are not significant at $p= 0.059$. Self-Esteem on Grandiose Narcissism and Depression (0.004) are not significant at $p= 0.589$, and its effect on Vulnerable Narcissism and Depression (0.039) are significant at $p= 0.008$. The indirect effects of Self- Esteem on Grandiose Narcissism and Aggression (0.001) are not significant at $p= 0.908$, and its effect on Vulnerable Narcissism and Aggression (0.008) are also not significant at $p= 0.801$.

Table 5: Model Fit

Model Fit	Saturated Model	Estimated Model
SRMR	0.009	13.601
NFI	0.998	-1.155

In table 5 Standardized Root Mean Square Residual (SRMR) came out to be 0.009 which represents the model as a good fit. The Normed Fit Index (NFI) came out to be 0.998, which is closer to 1 and this consider to be a good fit.

CHAPTER 6

DISCUSSION

The study was undertaken with the aim to determine if there exists any direct relationship between Grandiose and Vulnerable Narcissism with Aggression and Depression, or if it is mediated by Self- Esteem and Empathy. In a study of Campbell et al., 2002, it was researched that Narcissism and self-esteem both entail positive views of the self, and they are weakly to moderately correlated, as the first hypothesis states that “Grandiose Narcissism will be positively related to Self- Esteem”, further in the current study no significant relationship was found and it got rejected.

Further, the second hypothesis, “Grandiose Narcissism will be negatively related to Empathy”, which was accepted as the results shows the negative relationship of grandiose narcissism with both cognitive and affective empathy. A study done by Jonason & Krause, (2013), found that narcissism was associated with lower levels of cognitive empathy. And in a study of Urbonaviciute, G., & Hepper, E. G. (2020), indicates that Grandiose narcissism was significantly negatively associated with self-reported cognitive and affective empathy, supporting the current hypothesis.

Next, it was hypothesized that “Vulnerable Narcissism will be negatively related to Self-Esteem”, and further it was accepted. Self-esteem has been linked to narcissism in numerous studies (Bachnio, Przepiorka, & Rudnicka, 2016; Campbell, Rudich, & Sedikides, 2002). According to Baumeister and Vohs (2001), narcissism can be defined as an addiction to self-esteem. People with strong grandiose narcissism have better self-esteem, while people with high vulnerable narcissism have lower self-esteem, according to numerous research (Brookes, 2015; Miller et al., 2011). Self-esteem, on the other hand, has been linked to emotional well-being or challenges (Baumeister, Campbell, Krueger, & Vohs, 2003; Millings, Buck, Montgomery, Spears, & Stallard, 2012). There is ample evidence that low self-esteem could prospectively predict levels of anxiety and depression in both cross-sectional and longitudinal studies (Lakey, Hirsch, Nelson, & Nsamenang, 2014; Lee & Hankin, 2009; Michalak, Teismann, Heidenreich, Strohle, & Vocks, 2011; Sowislo & Orth, 2013). Furthermore, research shows that self-esteem and emotional challenges have an inverse relationship (Fanaj, Melonashi, & Shkemi, 2015; Harter, 2006).

The fourth hypothesis stated, “Vulnerable Narcissism will be negatively related to Empathy”, which was also accepted. In the result vulnerable narcissism show negative relationship with both cognitive and affective empathy. Luchner, A. F., and Tantleff-Dunn, S. (2016) found that vulnerable narcissism is adversely connected to adaptive measures of both cognitive and affective empathy. Vulnerability was negatively associated with the ability to understand others' experiences emotionally (affective empathy) and cognitive empathy.

Further it was hypothesized that, “Self- Esteem will be negatively related to Aggression”, which was accepted. Self-esteem is linked to decreases in aggression, while narcissism is linked to rises in violence, according to proponents of the additivity theory (Barry, Grafeman, Adler, & Pickard, 2007; Donnellan et al., 2005; Hyatt et al., 2018). Bushman et al. (2009) found that high self-esteem was linked with aggression, but the combination of high self-esteem and ego threats produced higher rates of aggression; low self-esteem had no relationship with aggression.

Sixth hypothesis stated, “Self- Esteem will be negatively related to Depression”, which was also accepted. Many research (e.g., Brockner & Guare, 1983; Tennen & Herzberger, 1987) have found a strong negative relationship between self-esteem and depression. In fact, recent research has revealed that the processes that underpin poor self-esteem and depression may have a lot in common (Watson & Clark, 1984). Milrod (1988) claims that depression is caused by narcissistic injuries, which are caused by disparities between self-representation and the intended self-image. As a result, pathological narcissism can sometimes be effective in distorting and inflating a person's self-view in order to avoid feelings like shame and depression (Morf, Horvath, & Torchetti, 2011; Raskin, Novacek, & Hogan, 1991).

“Empathy will be negatively related to Aggression”, was seventh hypothesis which was later accepted. It was shown in the results that both cognitive and affective empathy was negatively related to aggression. Indeed, empathy has been negatively associated with aggression in numerous cross-sectional studies (e.g., Jolliffe & Farrington, 2004; Miller & Eisenberg, 1988; Vachon, Lynam, & Johnson, 2014) and some experiments (e.g., Phillips & Giancola, 2007). Also, study of Eisenberg (2000), states that when individuals adopt the perspective of others and imagine how others feel (empathy), they are less likely to engage in aggressive behavior that may elicit distress in another person

Next hypothesis, i.e., “Empathy will be negatively related to Depression”, it was also accepted. Rushton (1984) claimed that a consistently altruistic person is more integrative and mature and

has a "strong feeling of personal efficacy and well-being". Because empathy is the important affective component of altruism, people with above-average empathy may be more integrative and mature than others and may cope better with psychosocial distress. If this is the case it may be expected, then, that more empathic persons develop fewer depressive symptoms than less empathic individuals.

Mediating effects

The study showed that there was no significant relationship between Grandiose Narcissism and Aggression, mediated by Self- Esteem, hence the ninth hypothesis got partially rejected. On the other hand, the mediation analysis showed that there was a significant relationship between Grandiose narcissism and aggression, mediated by empathy and the hypothesis was partially accepted. Empathy is marked by conceptual and operational disagreements, assumptions regarding its role in aggressive behavior are remarkably congruent. These assumptions extend beyond the realm of popular culture and its ubiquitous cold-blooded criminals. Perpetrators of antisocial behavior, violence, and sexual aggression are regularly described as having insufficient empathy (Hogan, 1973; Kohlberg, 1963; Marshall, Hudson, Jones, & Fernandez, 1995; P. A. Miller & Eisenberg, 1988).

Further study showed that there was no significant relationship between Grandiose narcissism and Depression, mediated by Self- Esteem. While, in the mediation analysis there was a significant relationship between Grandiose narcissism and Depression, mediated by empathy. Hence, the tenth hypothesis got partially accepted. Grandiosity empathy, Rushton (1984) claimed that a consistently altruistic person is more integrative and mature and has a "strong feeling of personal efficacy and well-being". And more empathic persons develop fewer depressive symptoms than less empathic individuals.

The mediation analysis of the current study showed that there was no significant relationship between Vulnerable narcissism and Aggression, mediated by Self- Esteem and Empathy, separately. Hence the hypothesis got rejected.

The mediation analysis of the current study showed that there was a significant relationship between Vulnerable narcissism and Depression, mediated by Self- Esteem and Empathy, separately. Hence the hypothesis got accepted. Low self-esteem is a vulnerability factor implicated in the etiology of depressive illnesses, according to many depression theories (e.g., Abramson, Seligman, & Teasdale, 1978; Beck, 1967). A growing number of longitudinal

studies has recently backed up the vulnerability hypothesis of low self-esteem and depression (Orth & Robins, 2013). According to the vulnerability model, poor self-esteem is a risk factor for depression (Beck, 1967; Metalsky, Joiner, Hardin, & Abramson, 1993; Roberts & Monroe, 1992; Zeigler-Hill, 2011).

CHAPTER 7

CONCLUSION, IMPLICATIONS, LIMITATIONS AND FUTURE SCOPE OF THE STUDY

7.1 Conclusion

The aim of the present study was to examine if there is a relationship between Grandiose and Vulnerable Narcissism with Aggression and Depression, mediated by Self- Esteem and Empathy. The present study is conducted with the objective of studying if there exists any direct relationship between Grandiose and Vulnerable Narcissism with Aggression and Depression, or if it is mediated by Self- Esteem and Empathy. For example, when using mediational analyses, it was found out that there was no indirect effect of self-esteem on grandiose narcissism with both aggression and depression, as there was no significant relationship between them. Similarly, it was also found out that there were no indirect effects of self- esteem and empathy on vulnerable narcissism and aggression. But on the other hand, these variables had direct effects. Although there was indirect effect of self- esteem and empathy on vulnerable narcissism and depression. Similarly, indirect effect of empathy on grandiose narcissism with both aggression and depression.

7.2 Implications

The results of this research have theoretical and methodological implications. The study provides further evidence for distinguishing between grandiose and vulnerable narcissism, and that these two subtypes are differentially related to aggression and depression mediated by self-esteem and empathy. A cognitive core that is unrealistically entitled with exploitative impulses guiding behaviours may be more easily based in a narcissistic personality. This mindset would lead to a pattern of expectation disappointment. However, the two subtypes have different approaches of dealing with the emotional effects of persistent disappointment and self-esteem threat. The grandiose narcissistic persona is frequently quite impressive in its presentation. When grandiosity is overt, as it is with the grandiose narcissistic subtype, assessing narcissism becomes easier. The assessment of vulnerable narcissism, on the other hand, would be far more

difficult. Vulnerable narcissists are hypersensitive and unaware of how their actions affect others' feelings. They are also quite introverted and suffer from anxiety and shame, which results in low self-esteem. It was discovered that those with high levels of vulnerable narcissism have a stronger link between loneliness and depression symptoms, and they also have a higher chance of being aggressive. As a result, it's critical to recognise narcissism's vulnerability so that low self-esteem, high aggression, and depression can be prevented.

7.3 Limitations

Since the experiment was conducted online, random sample was not possible, thus convenient sampling was used, which is a crude method with flaws. The study's significant reliance on technology will almost certainly have problems. Thus, data was collected by online mode which is not so much reliable. The performance of individuals on the tasks as well as their selection of responses for the google forms could have fallen prey to the struggle with technology. In addition, the sample size is insufficient to guarantee generalizability to the Indian population.

7.4 Future Scope

By keeping above limitations in mind there will be some future scope that, increasing the sample size could yield better results. Since due to pandemic the data was collected online, so in future for more accurate and reliable results offline survey will be done. Other future scope is longitudinal study can be conducting by adding observation method in the study.

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APPENDIX A: CONSENT FORM

To study on the relationship of vulnerable narcissism with self-esteem, aggression, and depression a study is being conducted. I confirm that I have read and understand the information sheet for the above study and have had the opportunity to ask questions, I understand that my participation is voluntary and that I am free to withdraw at any time without giving reason and I agree to take part in the study.

Name of Participant

Date

Signature

Name of Researcher

Date

Signature

APPENDIX B: Narcissistic Personality Inventory

This is a personality test that helps to learn more about oneself. Read each pair of statements below and choose the one that comes closest to describing your feelings and beliefs about yourself. You may feel that neither statement describes you well, but pick the one that comes closest.

1.

A. I have a natural talent for influencing people.

B. I am not good at influencing people.

2.

A. Modesty doesn't become me.

B. I am essentially a modest person.

3.

A. I would do almost anything on a dare.

B. I tend to be a fairly cautious person.

4.

A. When people compliment me I sometimes get embarrassed.

B. I know that I am good because everybody keeps telling me so.

5.

A. The thought of ruling the world frightens the hell out of me.

B. If I ruled the world it would be a better place.

6.

A. I can usually talk my way out of anything.

B. I try to accept the consequences of my behavior.

7.

A. I prefer to blend in with the crowd.

B. I like to be the center of attention.

8.

A. I will be a success.

B. I am not too concerned about success.

9.

A. I am no better or worse than most people.

B. I think I am a special person.

10.

A. I am not sure if I would make a good leader.

B. I see myself as a good leader.

11.

A. I am assertive.

B. I wish I were more assertive.

12.

A. I like to have authority over other people.

B. I don't mind following orders.

13.

A. I find it easy to manipulate people.

B. I don't like it when I find myself manipulating people.

14.

A. I insist upon getting the respect that is due me.

B. I usually get the respect that I deserve.

15.

A. I don't particularly like to show off my body.

B. I like to show off my body.

16.

A. I can read people like a book.

B. People are sometimes hard to understand.

17.

A. If I feel competent I am willing to take responsibility for making decisions.

B. I like to take responsibility for making decisions.

18.

A. I just want to be reasonably happy.

B. I want to amount to something in the eyes of the world.

19.

A. My body is nothing special.

B. I like to look at my body.

20.

A. I try not to be a show off.

B. I will usually show off if I get the chance.

21.

A. I always know what I am doing.

B. Sometimes I am not sure of what I am doing.

22.

A. I sometimes depend on people to get things done

B. I rarely depend on anyone else to get things done.

23.

A. Sometimes I tell good stories.

B. Everybody likes to hear my stories.

24.

A. I expect a great deal from other people.

B. I like to do things for other people.

25.

A. I will never be satisfied until I get all that I deserve.

B. I take my satisfactions as they come.

26.

A. Compliments embarrass me.

B. I like to be complimented.

27.

A. I have a strong will to power.

B. Power for its own sake doesn't interest me.

28.

A. I don't care about new fads and fashions.

B. I like to start new fads and fashions.

29.

A. I like to look at myself in the mirror.

B. I am not particularly interested in looking at myself in the mirror.

30.

A. I really like to be the center of attention.

B. It makes me uncomfortable to be the center of attention.

31.

A. I can live my life in any way I want to.

B. People can't always live their lives in terms of what they want.

32.

A. Being an authority doesn't mean that much to me.

B. People always seem to recognize my authority.

33.

A. I would prefer to be a leader.

B. It makes little difference to me whether I am a leader or not.

34.

A. I am going to be a great person.

B. I hope I am going to be successful.

35.

A. People sometimes believe what I tell them.

B. I can make anybody believe anything I want them to.

36.

A. I am a born leader.

B. Leadership is a quality that takes a long time to develop.

37.

A. I wish somebody would someday write my biography.

B. I don't like people to pry into my life for any reason.

38.

A. I get upset when people don't notice how I look when I go out in public.

B. I don't mind blending into the crowd when I go out in public.

39.

A. I am more capable than other people.

B. There is a lot that I can learn from other people.

40.

A. I am much like everybody else.

B. I am an extraordinary person.

APPENDIX C: The Hypersensitive Narcissism Scale (HSNS)

Please answer the following questions by deciding to what extent each item is characteristic of your feelings and behavior. Fill in the blank next to each item by choosing a number from the scale printed below.

1 = very uncharacteristic or untrue, strongly disagree

2= uncharacteristic

3 = neutral

4 = characteristic

5 = very characteristic or true, strongly agree

___ 1. I can become entirely absorbed in thinking about my personal affairs, my health, my cares or my relations to others.

___ 2. My feelings are easily hurt by ridicule or the slighting remarks of others.

___ 3. When I enter a room, I often become self-conscious and feel that the eyes of others are upon me.

___ 4. I dislike sharing the credit of an achievement with others.

___ 5. I feel that I have enough on my hands without worrying about other people's troubles.

___ 6. I feel that I am temperamentally different from most people.

___ 7. I often interpret the remarks of others in a personal way.

___ 8. I easily become wrapped up in my own interests and forget the existence of others.

___ 9. I dislike being with a group unless I know that I am appreciated by at least one of those present.

___ 10. I am secretly "put out" or annoyed when other people come to me with their troubles, asking me for my time and sympathy.

APPENDIX D: STATE SELF-ESTEEM SCALE

This is a questionnaire designed to measure what you are thinking at this moment. There is of course, no right answer for any statement. The best answer is what you feel is true of yourself at the moment. Be sure to answer all of the items, even if you are not certain of the best answer. Again, answer these questions as they are true for you RIGHT NOW.

1. I feel confident about my abilities.

1	2	3	4	5
Not At All	A Little Bit	Somewhat	Very Much	Extremely

2. I am worried about whether I am regarded as a success or failure.

1	2	3	4	5
Not At All	A Little Bit	Somewhat	Very Much	Extremely

3. I feel satisfied with the way my body looks right now.

1	2	3	4	5
Not At All	A Little Bit	Somewhat	Very Much	Extremely

4. I feel frustrated or rattled about my performance.

1	2	3	4	5
Not At All	A Little Bit	Somewhat	Very Much	Extremely

5. I feel that I am having trouble understanding things that I read.

1	2	3	4	5
Not At All	A Little Bit	Somewhat	Very Much	Extremely

6. I feel that others respect and admire me.

1	2	3	4	5
Not At All	A Little Bit	Somewhat	Very Much	Extremely

7. I am dissatisfied with my weight.

1	2	3	4	5
Not At All	A Little Bit	Somewhat	Very Much	Extremely

8. I feel self-conscious.

1	2	3	4	5
Not At All	A Little Bit	Somewhat	Very Much	Extremely

9. I feel as smart as others.

1	2	3	4	5
Not At All	A Little Bit	Somewhat	Very Much	Extremely

10. I feel displeased with myself.

1	2	3	4	5
Not At All	A Little Bit	Somewhat	Very Much	Extremely

11. I feel good about myself.

1	2	3	4	5
Not At All	A Little Bit	Somewhat	Very Much	Extremely

12. I am pleased with my appearance right now.

1	2	3	4	5
Not At All	A Little Bit	Somewhat	Very Much	Extremely

13. I am worried about what other people think of me.

1	2	3	4	5
Not At All	A Little Bit	Somewhat	Very Much	Extremely

14. I feel confident that I understand things.

1	2	3	4	5
Not At All	A Little Bit	Somewhat	Very Much	Extremely

15. I feel inferior to others at this moment.

1	2	3	4	5
Not At All	A Little Bit	Somewhat	Very Much	Extremely

16. I feel unattractive.

1	2	3	4	5
Not At All	A Little Bit	Somewhat	Very Much	Extremely

17. I feel concerned about the impression I am making.

1	2	3	4	5
Not At All	A Little Bit	Somewhat	Very Much	Extremely

18. I feel that I have less scholastic ability right now than others.

1	2	3	4	5
Not At All	A Little Bit	Somewhat	Very Much	Extremely

19. I feel like I'm not doing well.

1	2	3	4	5
Not At All	A Little Bit	Somewhat	Very Much	Extremely

20. I am worried about looking foolish.

1	2	3	4	5
Not At All	A Little Bit	Somewhat	Very Much	Extremely

APPENDIX E: The Basic Empathy Scale (BES)

Using the following scale, please indicate how much you agree or disagree with the following statements:

1 - strongly disagree

2- disagree

3 - neutral

4 - agree

5 - strongly agree

1. My friends' emotions don't affect me much.
2. After being with a friend who is sad about something, I usually feel sad.
3. I can understand my friend's happiness when she/he does well at something.
4. I get frightened when I watch characters in a good scary movie.
5. I get caught up in other people's feelings easily.
6. I find it hard to know when my friends are frightened.
7. I don't become sad when I see other people crying.
8. Other people's feeling doesn't bother me at all.
9. When someone is feeling 'down' I can usually understand how they feel.
10. I can usually work out when my friends are scared.
11. I often become sad when watching sad things on TV or in films.

12. I can often understand how people are feeling even before they tell me.
13. Seeing a person who has been angered has no effect on my feelings.
14. I can usually work out when people are cheerful.
15. I tend to feel scared when I am with friends who are afraid.
16. I can usually realize quickly when a friend is angry.
17. I often get swept up in my friends' feelings.
18. My friend's unhappiness doesn't make me feel anything.
19. I am not usually aware of my friends' feelings.
20. I have trouble figuring out when my friends are happy.

APPENDIX F: Aggression Questionnaire

Using the 5-point scale shown below, indicate how uncharacteristic or characteristic each of the following statements is in describing you. Place your rating in the box to the right of the statement.

1 = extremely uncharacteristic of me

2 = somewhat uncharacteristic of me

3 = neither uncharacteristic nor characteristic of me

4 = somewhat characteristic of me

5 = extremely characteristic of me

1. Some of my friends think I am a hothead A
2. If I have to resort to violence to protect my rights, I will. PA
3. When people are especially nice to me, I wonder what they want. H
4. I tell my friends openly when I disagree with them. VA
5. I have become so mad that I have broken things. PA
6. I can't help getting into arguments when people disagree with me. VA
7. I wonder why sometimes I feel so bitter about things. H
8. Once in a while, I can't control the urge to strike another person. PA
9. I am an even-tempered person. A
10. I am suspicious of overly friendly strangers. H
11. I have threatened people I know. PA
12. I flare up quickly but get over it quickly. A
13. Given enough provocation, I may hit another person. PA
14. When people annoy me, I may tell them what I think of them. VA
15. I am sometimes eaten up with jealousy. H

16. I can think of no-good reason for ever hitting a person. PA
17. At times I feel I have gotten a raw deal out of life. H
18. I have trouble controlling my temper. A
19. When frustrated, I let my irritation show. A
20. I sometimes feel that people are laughing at me behind my back. H
21. I often find myself disagreeing with people. VA
22. If somebody hits me, I hit back. PA
23. I sometimes feel like a powder keg ready to explode. A
24. Other people always seem to get the breaks. H
25. There are people who pushed me so far that we came to blows. PA
26. I know that “friends” talk about me behind my back. H
27. My friends say that I’m somewhat argumentative. VA
28. Sometimes I fly off the handle for no good reason. A
29. I get into fights a little more than the average person. PA

APPENDIX G: Beck's Depression Inventory

This depression inventory can be self-scored. The scoring scale is at the end of the questionnaire.

1.

0 I do not feel sad.

1 I feel sad

2 I am sad all the time and I can't snap out of it.

3 I am so sad and unhappy that I can't stand it.

2.

0 I am not particularly discouraged about the future.

1 I feel discouraged about the future.

2 I feel I have nothing to look forward to.

3 I feel the future is hopeless and that things cannot improve.

3.

0 I do not feel like a failure.

1 I feel I have failed more than the average person.

2 As I look back on my life, all I can see is a lot of failures.

3 I feel I am a complete failure as a person.

4.

0 I get as much satisfaction out of things as I used to.

1 I don't enjoy things the way I used to.

2 I don't get real satisfaction out of anything anymore.

3 I am dissatisfied or bored with everything.

5.

0 I don't feel particularly guilty

1 I feel guilty a good part of the time.

2 I feel quite guilty most of the time.

3 I feel guilty all of the time.

6.

0 I don't feel I am being punished.

1 I feel I may be punished.

2 I expect to be punished.

3 I feel I am being punished.

7.

0 I don't feel disappointed in myself.

1 I am disappointed in myself.

2 I am disgusted with myself.

3 I hate myself.

8.

0 I don't feel I am any worse than anybody else.

1 I am critical of myself for my weaknesses or mistakes.

2 I blame myself all the time for my faults.

3 I blame myself for everything bad that happens.

9.

0 I don't have any thoughts of killing myself.

1 I have thoughts of killing myself, but I would not carry them out.

2 I would like to kill myself.

3 I would kill myself if I had the chance.

10.

0 I don't cry any more than usual.

1 I cry more now than I used to.

2 I cry all the time now.

3 I used to be able to cry, but now I can't cry even though I want to.

11.

0 I am no more irritated by things than I ever was.

1 I am slightly more irritated now than usual.

2 I am quite annoyed or irritated a good deal of the time.

3 I feel irritated all the time.

12.

0 I have not lost interest in other people.

1 I am less interested in other people than I used to be.

2 I have lost most of my interest in other people.

3 I have lost all of my interest in other people.

13.

0 I make decisions about as well as I ever could.

1 I put off making decisions more than I used to.

2 I have greater difficulty in making decisions more than I used to.

3 I can't make decisions at all anymore.

14.

0 I don't feel that I look any worse than I used to.

1 I am worried that I am looking old or unattractive.

2 I feel there are permanent changes in my appearance that make me look unattractive

3 I believe that I look ugly.

15.

0 I can work about as well as before.

1 It takes an extra effort to get started at doing something.

2 I have to push myself very hard to do anything.

3 I can't do any work at all.

16.

0 I can sleep as well as usual.

1 I don't sleep as well as I used to.

2 I wake up 1-2 hours earlier than usual and find it hard to get back to sleep.

3 I wake up several hours earlier than I used to and cannot get back to sleep.

17.

0 I don't get more tired than usual.

1 I get tired more easily than I used to.

2 I get tired from doing almost anything.

3 I am too tired to do anything.

18.

0 My appetite is no worse than usual.

1 My appetite is not as good as it used to be.

2 My appetite is much worse now.

3 I have no appetite at all anymore.

19.

0 I haven't lost much weight, if any, lately.

1 I have lost more than five pounds.

2 I have lost more than ten pounds.

3 I have lost more than fifteen pounds.

20.

0 I am no more worried about my health than usual.

1 I am worried about physical problems like aches, pains, upset stomach, or constipation.

2 I am very worried about physical problems and it's hard to think of much else.

3 I am so worried about my physical problems that I cannot think of anything else.

21.

0 I have not noticed any recent change in my interest in sex.

1 I am less interested in sex than I used to be.

2 I have almost no interest in sex.

3 I have lost interest in sex completely.