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# INTERGENERATIONAL TRANSMISSION OF NARCISSISTIC SYMPTOMS THROUGH PARENTAL CONTROL: THE PROTECTIVE ROLE OF FATHER INVOLVEMENT

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MASTER OF SCIENCE



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I hereby declare that all information in this document has been obtained and presented in accordance with academic rules and ethical conduct. I also declare that, as required by these rules and conduct, I have fully cited and referenced all material and results that are not original to this work.

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### **ABSTRACT**

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Although several studies have investigated the transmission of mental disorders from parents to their children, how parental narcissism impacts on children psychological health has received limited attention. Existing studies either did not collect data from multiple informants or stayed at the theoretical level. Thereof, the main aim of the current thesis was to investigate intergenerational transmission of narcissistic features from mothers to late adolescents through maternal psychological control; and to examine how paternal involvement moderated the proposed relationship. Accordingly, data was obtained from 200 mother-late adolescent dyads to test five different moderated mediation models depending on the types of narcissism. Results indicated positive significant main effects of maternal narcissism on the late adolescents' narcissism scores only when the same narcissism subtypes were shared by the motheroffspring dyad. By contrast, when mothers and late adolescents had different narcissism subtypes, the obtained relationships between mother and child narcissism scores emerged as negatively significant. In contrast to our expectations, psychological control and father involvement did not indicate any significant effect in none of the moderated mediation models. Findings and limitations of the study were discussed in line with the relevant literature.

Key words: Narcissism, Parental Narcissism, Psychological Control, Father Involvement, Adolescent Narcissism

### ÖZET

### Arpacıoğlu, Bilal

### Yüksek Lisans, Psikoloji Bölümü

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Ruhsal bozuklukların ebeveynden çocuğa aktarımını araştıran çalışmalar olmasına rağmen, ebeveyn narsisizminin çocuk psikolojik sağlığı üzerindeki etkisi sınırlı sayıda araştırmacı tarafından incelenmiştir. Mevcut çalışmaların birden fazla bilgi kaynağından veri toplamamış olması ya da çoğunlukla teorik düzey kalması dikkat çekicidir. Bu nedenle, bu tezin temel amacı, narsistik özelliklerin annelerden geç ergenlere geçişinde ebeveyn psikolojik kontrolünün aracı etkisini araştırmak ve baba katılımının bu ilişkideki düzenleyici rolünü incelemektir. Bu amaçla, narsisizm türlerine bağlı olarak beş farklı düzenleyici aracılı modeli test etmek için 200 anne-geç ergen ikilisinden veri elde toplanmıştır. Sonuçlar, anne-çocuk ikilisi tarafından aynı narsisizm alt tipleri paylaşıldığında, anne narsisizminin geç ergenlerin narsisizm puanları üzerinde anlamlı ve pozitif ana etkisi olduğunu göstermiştir. Buna karşılık, anneler ve geç ergenler farklı narsisizm alt tiplerine sahip olduklarında ise, anne ve çocuk narsisizmi puanları arasında elde edilen ilişkiler negatif anlamlı olarak ortaya çıkmıştır. Öte yandan, psikolojik kontrol ve baba katılımı, düzenleyici aracılı modellerinin hiçbirinde anlamlı bir etki göstermemiştir. Araştırmanın bulguları ve sınırlılıkları ilgili literatür doğrultusunda tartışılmıştır.

Anahtar Kelimeler: Narsisizm, Ebeveyn Narsisizmi, Psikolojik Kontrol, Baba Katılımı, Genç Narsisizmi.



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### **CHAPTER 1**

### INTRODUCTION

Beginning from the prenatal stages, parents' involvement to child-rearing processes has important implications on the emotional, cognitive, and behavioral development of the offspring (Flouri & Buchanan, 2004; Flouri & Buchanan; Dex & Ward, 2007). As the developmental tasks become more complex and relatively abstract (e.g., evaluation of self, identity formation, romantic relationships), adolescents' demands from their parents change its form, necessitating more subtle yet important parental contribution. Nevertheless, parental psychopathologies might stand as barriers in such demand-supply chain between parents and adolescents leading parents to become physically or psychologically unavailable (Beidel & Turner 1997; Dutton et al., 2011; Last et al., 1991). Consequently, parental psychological problems might create vulnerability for the affected offspring through parenting styles, dysfunctional interpersonal relationships, and emotion dysregulation problems (Connell & Goodman 2002; Hicks et al., 2004; Weijers et al., 2018; Xerxa et al., 2021).

As a pervasive and impairing personality disorder, parental narcissism has been theoretically proposed to create a psychologically dangerous family climate for the offspring (e.g., Klein, 1952; Kohut, 1966). Even though studies in recent years focused on rise of the prevalence of narcissism (Andreassen et al., 2017; Twenge, 2006;), psychosocial factors associated with the intergenerational transmission of narcissism within family did not grab sufficient attention. Existing studies usually stay at the theoretical level, lacking empirical evidence to establish a familial framework for the transmission of narcissistic features from parent to offspring. One reason explaining the paucity of research in this area might be related with narcissist individuals' reluctance to take part in research or psychotherapy practices (Campbell & Miller, 2011). Another reason might be related with the difficulties surrounding around the assessment and identification of narcissism (Campbell & Miller, 2011). Thereof, the current study aimed to fulfill the mentioned gap in the literature by investigating psychosocial factors associated with transmission of maternal narcissism to offspring via parental control and father involvement. Accordingly, definition and types of narcissism were presented with a particular focus on the etiology of narcissism and psychosocial impacts parental narcissism has on the offspring. Later, parental psychological control and father involvement were introduced as possible factors that might have an impact on the familial transition of narcissistic features. Finally, aims of the current thesis were highlighted with the proposed models.

### 1.1. Narcissism

### 1.1.1 Development of Narcissism Within Family

Conceptualization of narcissism had been commonly performed through the works of famous psychanalysts, building on the initial conceptualization of Freud. In his early work, Freud (1914) defines narcissism as a relatively non-pathological tendency in which self-preservation instinct reveals itself as a libidinal complement. Accordingly, he conceptualized two stages which he titled as "primary and secondary narcissism". Primary narcissism is considered as a healthy stage in which infant's selflove is expected to build towards itself, rather than the environment, to establish a secure base. Yet, over time, the infant is expected to direct his/her attention and love towards the other objects in the environment through healthy relationships with the primary caregivers. Secondary narcissism, on the other hand, takes place when the infant fails at the mentioned transition and continue to reinvest love only to oneself, living in the fantasy of an omnipotent self. As opposed to Freud's infantile love based approach, Kernberg underlines the libidinal investment that is directed to the grandiose self. According to him, people who carry narcissistic tendencies have a constant need to be loved and admired by others to feel appreciated (Kernberg, 2004). Thereof, selflove, pathological object love, and pathological superego were defined as the main characteristics of narcissistic operation (Kernberg, 2004). Different than the other theoreticians, Kernberg also added the feelings of emptiness and boredom as the underlying feelings in the development of narcissism (Kernberg, 1967).

Kohut (1966) relates narcissism to the self-objects that are considered as parts of the self. According to this approach, infants may face rejection in early stages of their life that, in turn, becomes a fixation in narcissistic stage resulting in repression of the grandiose self. In another words, those rejections or lack of care that is directed from the self-object to the child, is perceived as an object loss by the infant who supposedly should go through affirmation process (Kohut, 1966). Furthermore, Kohut (1971) promotes three forms of self-object experiences that are *mirroring*, *idealizing*,

and *twinship*. Such self-object experiences were thought to be the ways of creating self-representations in which mirroring meant baby's trying outs to find an object that could mirror his affection; idealization referred to the sense of belief that there is a greater being than the self and self is united with it, and twinship meant need of experiencing self as others. Having introduced these three concepts, Kohut aims to elaborate how self-object frustrations may take place within individuals and came the the conclusion that as frustrations create conflict in the self, sense of grandiosity or inferiority takes place within the psyche of the child.

Klein (1952) draws attention to the object relations in the development of narcissistic dispositions. To elaborate, Klein suggests that secure development takes place based on the child's first object relations including his mother and her breast. This self-defining relation, however, is destined to frustrations because of the constant need of rearrangements that in turn build up narcissistic withdrawal. To clarify, as internal representations that define the ego vary, only way to control self means controlling the others. Thus, frustrations become inevitable and narcissistic withdrawal helps person to re-built internal representations of object-self relationship. Consequently, in time, narcissism becomes a key component of keeping objects' internal representations intact (Klein, 1952).

Later theorists have started to approach from a social learning perspective to conceptualize formation and etiology of narcissism. Yet, even in their socio-learning perspective, it is possible to see sparkles of psychodynamic explanations. Millon (1969), for example, asserts that narcissistic tendencies develop in early stages of life due to excessive parental indulgence and protection. In this operation, constant parental approval and overvaluation are thought to result in development of narcissistic cognitions and behaviors of the child. According to Millon (1969), parents contribute the formation of child narcissism via three routes (1) perceiving the child overly special and always right, (2) considering the child as God's gift in the form of overvaluation and (3) holding the child responsible for every perfectionist attempt.

As observed above, many theoreticians and scientists had differential yet still similar propositions about either the development or maintenance of narcissism for the offspring. Nevertheless, due to psychoanalytic conceptualizations highlighting the dynamic relations among frustrations, rejections and development of a self-absorbed

infant, DSM's over-emphasis on the grandiosity and entitlement aspects of narcissism has been started to be criticized over the years (Pincus & Roche, 2012; Ronningstam, 2011). Presence of personal and interpersonal fragility among narcicistic patients encouraged scientists to categorize the concept by a division. As a result, the umbrella term narcissism, has been divided into two main categories as "covert" and "overt" (Akthar, 2000; Ra, 2013; Besser & Priel, 2009), "thin-skinned" and "thick-skinned" (Bernardi & Eidlin, 2018), "hypervigilant" and "oblivious" (Gabbard, 1989), and grandiose and vulnerable narcissism (Miller et al., 2011; Rohmann et al., 2012). Thereof, current research focuses on both grandiose and vulnerable aspects of narcissism due to theoretical and empirical reasons. Conceptualization and related empirical evidence of grandiose and vulnerable narcissism dimensions were presented in the following section.

### 1.1.2. Grandiose and Vulnerable Narcissism Subtypes

Even though most research focus on the differences between grandiose and vulnerable narcissism, two subtypes are, in fact, closely related to each other. Indeed, individuals in either subtype allegedly share a vulnerable self (Cooper, 1998) and an over compensatory effort to defend themselves against the feelings of worthlessness and insufficiency (Akhtar & Thomson, 1982). Additionally, both types carry unrealistic expectations from themselves while focusing on the satisfaction of selfrelated needs (Akhtar, 2003; Cooper, 1998; Dickinson & Pincus, 2003; Masterson, 1993). Vulnerable subtype is considered as extremely sensitive to the external stimuli especially in the interpersonal relations, and therefore individuals with greater vulnerable narcissism are more prone to be hurt by others in their self-regard and selfesteem evaluations (Kohut, 1971, 1977; Rosenfeld, 1987). In parallel, vulnerable narcissists carry greater tendency to show shame and feelings of inferiority when compared to grandiose narcissist, while at the same time being more susceptible to the self-fragmentation (Kohut, 1970; Rosenfeld, 1987). Even though vulnerable narcissists also have feelings of entitlement, being special, and superiority, they are less likely to demonstrate these self-aggrandizing attitudes in interpersonal relations as they are well aware of the discrepancies between their fantasies and reality unlike grandiose narcissists (Akhtar, 2003). As they keep on fantasizing about grandiosity at one hand, deep rooted feelings of weakness and helplessness result in shame and anxiety (Akhtar, 2003).

Vulnerable narcissists are not skilled enough to regulate and enhance their self-esteem, as well. They mostly rely on others' feedbacks, and therefore experience higher levels of anxiety in interpersonal domains due to their hypersensitivity to separation (Besser & Priel, 2009; Dickinson & Pincus, 2003). Consequently, individuals with vulnerable narcissism might be observed as humble, sensitive to the others' evaluations and socially insecure, while still sharing a similar grandiose core that can be seen in grandiose narcissism (Akhtar, 2003; Cooper, 1998; Dickinson & Pincus, 2003; Masterson, 1993).

Grandiose subtype, on the other hand, is characterized more with the exhibitionist tendencies. They overtly demonstrate hubris, jealousy, and lack of empathy, while requiring excessive demands from others in need of being the center of attention (Akhtar & Thomson, 1982; Wink, 1991). Individuals with grandiose narcissism also tend to deny having vulnerabilities or weaknesses, thereof engaging in excessive demands due to the feelings of entitlement. They might also show anger and hostility when their wishes or desires are unmet. Moreover, they also devalue the people who threatens their self-regard and self-esteem (Dickinson & Pincus, 2003). In that respect, aggression, difficulties in empathy and arrogance are thought to be the central aspects of grandiose narcissism by early theoreticians (Gabbard, 1989). Individuals with grandiose narcissism could also be labeled as greedy and are more likely to exploit others for their needs and desires (Kernberg, 2004).

Recent empirical findings also have started to support the theoretical differentiation of the vulnerable and grandiose narcissism. Having questioned the allegedly intertwined nature of both types, Miller, Widiger and Campbell (2014) found evidence suggesting that there is a significant relation between the two types. Their work also suggests two different nomological paths for two different subtypes, as well (Miller et al., 2014). In a similar vein, investigating guilt and shame experiences, Czarna and her colleagues (2014) reported that grandiose narcissism had negative relations with the aspects of shame and guilt, while the same relation was positive for the vulnerable narcissism (Freis et al., 2015; Malkin et al., 2011). Not surprisingly, two narcissism subtypes also differ in the operation of self-esteem and self-construal. Accordingly, individuals with grandiose narcissism received greater scores in self-esteem and independent self-construal, whereas those with vulnerable narcissism had scored poorer in self-esteem and interdependent self-construal (Rohmann et al., 2012).

In parallel, grandiose narcissism is linked with with higher self-esteem scores whereas, vulnerable narcissism linked to lower self-esteem scores (Brown & Zeigler-Hill, 2004; Zeigler-Hill et al., 2008). Vulnerable narcissists also has also found to get angrier when faced with entitlement frustration (Okada, 2010; Rasmussen, 2016; Schoenleber et al., 2011; Zeigler-Hill et al., 2011) as they focus on more the consequences (Freis et al., 2015).

### 1.1.3 Parenting Behaviors and Development of Narcissism

Although there is an abundance of theoretical explanation regarding the distinct parenting practices contributing to the development of narcissism in adolescents, once again the empirical evidence is relatively limited. In explaining the relationship between parenting and development of narcissism in offspring, Kernberg (1975) points out coldness and strictness of parents the root causes of offspring narcicism. Kernberg asserted that high expectations and harsh demands of parents lead child to develop a narcissistic self, particularly combined with parental coldness. Thus, narcissistic tendencies in early ages act as a defensive reaction stemming from the controversy between the self, ideal self, and ideal object. Similarly, Kohut (1977) focused on the different aspects of parenting by emphasizing both overparenting and under-parenting. In fact, each subtype of parenting is expected to lead children to seek other's validation. As parents display overparenting (e.g., attentiveness and extreme sensitivity) or under-parenting behaviours (e.g., rejection and unresponsiveness), narcissistic disturbances are more likely to occur in children. Millon also (1981) underlined excessive nurturance, lavish affection, and lack of healthy boundaries that are directed from parents to offspring as the main causes of the development of narcissistic tendencies. In fact, Millon suggested that such parenting styles encourages children to feel superior and entitled which, in turn, end up formation of narcissistic characteristics.

Not only theoreticians but also researchers have tried to illuminate the relationship between parenting behaviors and adolescent narcissism. Accordingly, parental overvaluation, coldness and invalidation are associated positively with greater narcissism scores among adolescents (Brummelman et al., 2015; Huxley, & Bizunic, 2016; Otway & Vignoles, 2006). Moreover, parental conditional regard (Curran et al., 2017) predicted narcissistic perfectionism in offspring, that is characterized by the

projection of the perfection using grandiosity, entitlement and expecting others' service (Nealis et al., 2015). Eberly-Lewis et al. (2018) also found that adolescent narcissism was positively correlated with positive parenting while having a negative correlation with the discipline of parents. The very same research also suggests that need for positive approval mediated the relationship between parenting and grandiose narcissism, while independent self-construal partially mediated relationship between paternal positive parenting and grandiose narcissism.

Parental monitoring, which is a form of parental control, indicated negative associations with exploitativeness facet of narcissism (Wetzel, & Robins, 2016) and healthy narcissism (Horton et al., 2006). Unfortunately, only few studies focus on the relationship between parental psychological control and adolescent narcissism. Accordingly, study of Horton and Tritch (2014) indicated negative associations between parental psychological control and adolescent total narcissism, whereas Winner and Nicholson (2018) found a significant mediating effect of parental psychological control on the relationship between overparenting and narcissism subtypes.

### 1.1.4. Impacts of Parental Narcissism on Upbringing

Narcissistic parents held responsible for creating a psychologically demanding environment for the offspring, yet once again few empirical studies focused on this proposition. Narcissistic parents are mainly criticized due to their lack of ability regarding separation from the offspring. To illustrate, Pozzi (1993, 1995) explains that particularly narcissistic mothers have limited skills to handle infants' individuation and separation needs not allowing the offspring replace them with new objects. Misplacement of the object investment occurs due to narcissistic mothers' desire to main a symbiotic relationship. Consequently, instead of encouraging the child to become an autonomous individual, narcissistic mother identifies with the infant and considers him/her as a previous lost object (Pozzi; 1993, 1995). Cooper and Maxwell (1995) added another important dimension to the narcissistic parenting. Accordingly, narcissistic parents consider their children as an extension of themselves that, in turn, hinders infant's separate development. In parallel, Rinsley (1989) noted that narcissistic parents may encourage offspring in individuation process only when offspring brings achievements that would contribute parents' brilliance. On the other

hand, this kind of achievement-focused behavior aims to fulfill parents' wishes, rather than helping to raise an autonomous child. Although theoretical descriptions provided thick descriptions of narcissistic parenting, only a handful of studies focus on how parental narcissism contributes to distinct upbringing styles. Existing findings associated parental narcissism with affectionless control, over-valuation, and lack of empathy (Dentale et al., 2015; Hart et al., 2017), yet more studies need to be conducted to delineate parenting strategies adopted by parents with narcissistic traits.

### 1.2. Parental Control

Based on the literature presented above, it would not be wrong to infer those parents with narcissistic features tend to display more parental control, since they lack ability to regard their children as autonomous individuals. Thereof, the current study aimed to approach the issue of intergenerational transmission of narcissism from a psychological control perspective. Existing literature divided parental control into two main domains (Bates et al., 2012; Kiff et al., 2011). In the following part, these subdomains, relevant classifications and empirical findings were presented in detail.

Behavioral Control: Early studies and theories explain behavioral control as parents' regulatory attempts of adolescents' actions (Barber, 1996; Barber et al., 2005). Parents may set rules on, punish, or supervise their children to obtain desired and culturally appropriate results. Yet, conceptional confusions and different cultural dynamics led scientists to add three more subdomains under the broad concept of behavioral control, that are (a) Proactive Control, (b) Punitive Control, and (c) Harsh Punitive Control (Barber et al., 2005; Grolnick & Pomerantz, 2009; Janssens et al., 2015).

- a. Proactive Control. Introduced as a preventive mechanism, proactive control refers parents' efforts to modify offspring behavior to get desirable outcomes in the form of prosocial behavior, academic competence, and empathy (e.g., Gray & Steinberg, 1999; Wang et al., 2007). In this respect, this kind of control was found to decrease the risk of antisocial behavior, delinquency, and other externalizing disturbances in adolescence (Galambos et al., 2003; Pettit et al., 2001)
- b. Punitive Control. As a nonphysical punishment method, punitive punishment mainly included verbal punishment, behavioral restrictions and/or withdrawal of the privileges (Janssens et al., 2015). Even though it

increased child's compliance to parental rules, this way of parenting was found more likely to end up with disruptive and externalizing problems in the long run (Stormshak et al., 2000).

c. Harsh Punitive Control. Ending up with more severe cognitive and behavioral problems in children and adolescents, harsh punitive punishment in general refers to the physical force exerted by parents which creates pain or discomfort for the offspring (Bender et al., 2007; Chang et al., 2003; Gershoff, 2008). Mainly, this type of control attempts to correct or punish the undesired behavior through means of physical violence.

Psychological Control. Psychological control is defined as parents' attempts of controlling or regulating children's thoughts, behaviors and feelings through more implicit ways such as love-withdrawal, shaming and guilt induction (Barber, 1996; Barber et al., 2012). Because of its intrusive nature, psychologically controlling parenting was consistently found to be related with adolescents' internalizing and externalizing behavior problems (Rogers, Buchanan & Winchell, 2003). More specifically, existing findings indicated positive associations between psychologically controlling parenting and adolescent anxiety (Barber, 1996; Barber et al., 1994; Loukas et al., 2005; Pettit et al., 2001), depression (Finkenauer et al., 2005; Soenens, Park, Vansteenkiste, & Mouratidis, 2012; Tu, Lee, & Chan, 2012) and low self-esteem (Bleys et al., 2018; Ojanen & Perry, 2007). Additionally, children with greater parental control have been reported to have more delinquency (Hoeve et al., 2009; Pettit et al., 2001), aggression (Janssens et al., 2017; Keijsers et al., 2012; Soenens, B., Vansteenkiste, M., Goossens et al., 2008), and antisocial behavior (Barber, Stolz, & Olsen, 2005; Tu et al., 2014).

According to Self-Determination Theory (SDT), parental psychological control also impairs adolescents' need for autonomy (Soenens & Vansteenkiste, 2010). To clarify, SDT asserted that negative effect of parents take place on adolescents because psychologically controlling parenting disrupts adolescent's autonomy development that, in turn, creates feelings of compulsion, pressure and inner conflict (Grolnick et al., 1997). Furthermore, empirical evidence also indicated that this kind of autonomy frustration related with distress (Costa et al., 2016; Costa et al., 2019;

Mabbe et al., 2016; Weinstein & Ryan, 2011) and externalizing problems in adolescents (Mabbe et al., 2016).

One important factor shaping the effects of parental psychological control on adolescents' well-being is the gender of parents and offspring. When exposed to parental psychological control, adolescents showed higher levels of internalizing and externalizing disturbances regardless of their gender (Barber et al., 1996; Conger et al., 1997; Garber et al., 1997). Yet, a more recent longitudinal study challenged this trend indicating that girls are more prone to develop internalizing and externalizing symptoms than boys when encountered with parental psychological control (Pettit et al., 2001).

Parents also differ in their way of parental control behavior depending on their own gender. Related literature suggested that mothers are more inclined to use psychological control than fathers (Armentrout & Burger, 1972; Barber, 1996; Barber & Harmon, 2002; Dobkin, Tremblay, & Sacchitelle, 1997) and their use of psychological control create worse disturbances in the form of antisocial behavior (Roman, Human, & Hiss, 2012) and depression (Bendikas, 2010) when compared with paternal psychological control.

As can been seen from the literature stated above, psychological control is associated with several mental problems among adolescents, ranging from relatively minor adaptation problems to severe psychopathologies. In this study, we particularly decided to examine role of maternal control on the transmission of narcissistic symptoms, as it is stated to be more influential in the formation of offspring related psychological problems. Besides, psychoanalytic literature also highlighted the importance of the symbiotic relationship formed between the mother and the child while explaining children's perverse psychological structures (Fink, 1997, 1999).

### 1.3. Father Involvement

Expanding on the findings on parental psychopathology and its impacts, recent literature has started to draw attention to a protective factor which is father involvement (Hammen, Hazel, Brennan, & Najman, 2012; Hammen, Shih, & Brennan, 2004; Rasic et al., 2014). Empirical evidence consistently demonstrates that father involvement could become a protective factor within the family against transmission of mental problems from mother to children (Osofsky & Thompson, 2000; Rothenberg

et al., 2020). By contrast, its absence also might magnify impacts of maternal psychopathology on offspring (Bögels & Phares 2008; Hou et al., 2020; Kopala-Sibley et al., 2017). Accordingly, current section provided related findings in the paternal involvement literature.

Lamb, Pleck, Charnov, and Levine (1985) originally introduced the concept of father involvement, consisting of three main components that are (1) engagement (e.g., reading or playing with the child), (2) availability (e.g., physical presence of the father) and (3) responsibility (e.g., caring for the material needs). For many years father involvement was measured via these three components and found to be a valid construct (e.g., Roubinov, et al., 2015). Three components carried unique and critical traits in measuring the effect of father involvement, yet still fall short on covering more affective and qualitative aspects such as warmth-responsiveness and closeness (Baker, 2017; Etkin et al., 2014; O'Gara et al., 2019). To eliminate existing limitations regarding the measurement of father involvement, Pleck (2010) proposed three main and two auxiliary components that are (1) positive engagement activities (e.g., intensive interaction with the children promoting psychosocial development), (2) warmth and responsiveness, (3) control (i.e., monitoring and decision making), (4) indirect care (i.e., provision of tangible and social needs of the offspring) and (5) process responsibility (i.e., father's monitoring of the child's needs emerging from the first four components and responsibility of providing resolution).

Existing literature consistently asserted that father involvement positively affects children's academic and cognitive development, peer and partner relationships, educational success, and psychological adjustment (Flouri & Buchanan, 2002; Flouri & Buchanan, 2004; Pruett, 1997; Rodríguez et al., 2016). Moreover, it decreases the prevalence of behavioral problems including but not limited to teenage smoking and delinquency (Carlson, 2006; Dex & Ward, 2007; Menning, 2006). Additionally, greater levels of father involvement served as a protective mechanism against attention problems, low self-esteem, psychological maladjustment and internalizing problems (Flouri & Buchanan, 2003; Murray et al., 2012; Sandler et al., 2008). Lack of father involvement, on the other hand, also ends up with psychological and social difficulties in children and adolescents. Namely, aggression, poor social relationship and lack of functional coping behavior were found to be related with lower levels of father involvement (Choi & Jackson, 2011; Geller et al., 2012). Related literature also

reported that higher levels of externalizing and internalizing problem behaviors of offspring were more evident when fathers do not involve with children's lives sufficiently (Gryczkowski et al., 2010; Harper, 2010; Herbert, Harvey, Lugo-Candelas, & Breaux, 2013; Khaleque & Rohner, 2012; Keown, 2012; Sarkadi, et al., 2008).

Grounded on the psychanalytic explanations of etiology of narcissism, we purposefully included father involvement as a moderator variable to our model (Fink, 1997, 1999). Accordingly, we aimed to examine how paternal involvement interfere with the transmission process of narcissistic features from mothers to offspring.

### 1.4. The Aims and Hypothesis of The Current Study

Although clinical work has offered valuable insights into the origins of narcissism, there has been no detailed investigation of psychological factors associated with intergenerational transmission of narcissistic features. We purposefully had chosen maternal psychological control as a mediating variable grounding on the psychanalytic explanations of narcissistic formations. Accordingly, the overly affectionate yet still intrusive bond between the mother and the child is held responsible for offspring developing entitlement, grandiosity, and disregard for the others. To be more precise, the offspring does deny the fact that the perverse mother also has some limitations, believing that she is the only person who can fulfill the desires of the omnipotent mother (Fink, 1997). Yet, satisfying the demands of the mother comes with a price as the mother wants full obedience for her demands (Andre, 2006; Bernstein, 2015). At this point, how the father is positioned gains profound importance affecting whether the offspring would also develop narcissistic tendencies (Bernstein, 2015; Fink, 1997). Accordingly, the overly symbiotic relation has not been impaired when the father is passive, disinterested, uninvolved or challenged by the narcissistic mother (Fink, 1997). Thereof, we purposefully included paternal involvement as a moderator variable to our model to inspect how paternal position would shape the maternal transmission of narcissistic formation via maternal psychological control. Accordingly, the following hypotheses were formed within the scope of this research:

(1) Total mother narcissism would increase the likelihood of late adolescent narcissism in which father involvement would moderate the mediating effect of maternal psychological control after controlling for the effects of gender (See Figure 1)

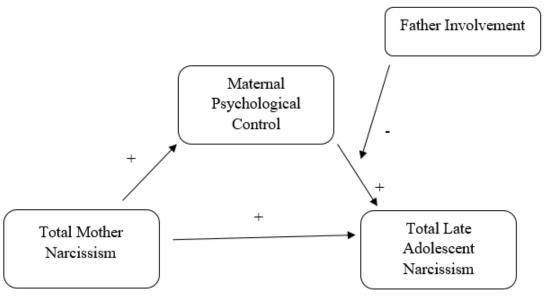


Figure 1: Model of the Hypothesis 1

(2) Mother vulnerable narcissism would increase the likelihood of late adolescent vulnerable narcissism in which father involvement would moderate the mediating effect of maternal psychological control after controlling for the effects of gender (See Figure 2).

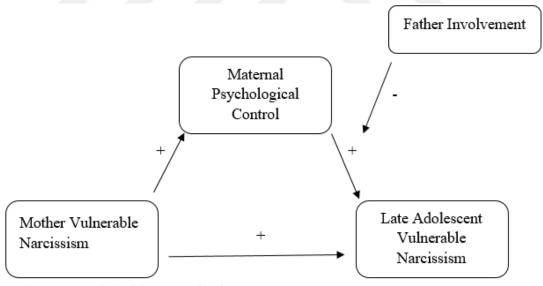


Figure 2: Model of the Hypothesis 2

(3) Mother vulnerable narcissism would decrease the likelihood of late adolescent grandiose narcissism in which father involvement would moderate the mediating effect of maternal psychological control after controlling for the effects of gender (See Figure 3).

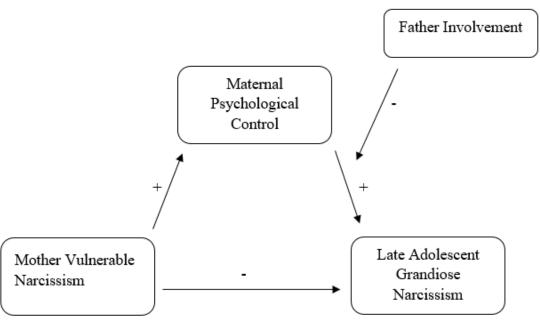


Figure 3: Model of the Hypothesis 3

(4) Mother grandiose narcissism would increase the likelihood of late adolescent grandiose narcissism in which father involvement would moderate the mediating effect of maternal psychological control after controlling for the effects of gender (See Figure 4).

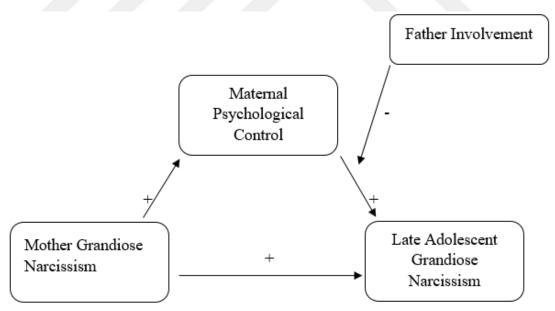


Figure 4: Model of the Hypothesis 4

(5) Mother grandiose narcissism would decrease the likelihood of late adolescent vulnerable narcissism in which father involvement would moderate the mediating effect of maternal psychological control after controlling for the effects of gender (See Figure 5).

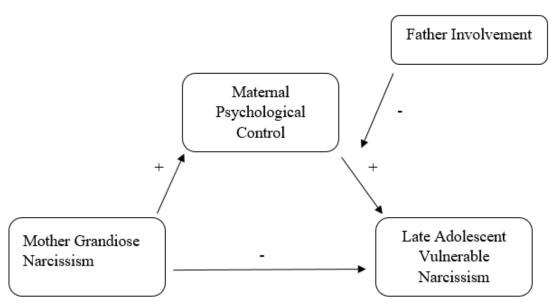


Figure 5: Model of the Hypothesis 5

### **CHAPTER 2**

### **METHOD**

### 2.1 Participants

Two hundred mother-late adolescent pairs consisted of the sample of the current study. Mean age of mothers was 49.58 (SD = 5.46) while it was 20.65 (SD = 1.35) for the late adolescent sample. Of 200 late adolescents, 123 (61,5%) were female and 77 (38.5%) were male. Inclusion criteria were (1) being a university student aged between 18 and 23, (2) parents still being married or together and (3) both late adolescents and mothers currently not receiving any professional help for a psychological problem. Initially, 232 late adolescents and 218 mothers had been reached out. Yet, 18 mothers and 32 late adolescents were excluded from the data set for the subsequent analysis since they did not meet the inclusion criteria (e.g., being a single mother, currently receiving psychological or psychiatric treatment, having a deceased spouse) or because of outliers. Demographic information of the late adolescent and mother dyads was presented in Table 1.

**Table 1.** Socio-demographic characteristics of participants

	La		Mothers						
Variable	$\overline{\mathbf{F}}$	%	M	SD	_	F	%	M	SD
Age	200		20,65	1,35		200		49,58	5,46
18	17	8,5							
19	25	12,5							
20	44	22,0							
21	47	23,5							
22	60	30,0							
23	7	3,5							
36-46						61	30,5		
47-57						124	62		
58-67						15	7,5		

	La	ate Ad	olesce	ents	Mothers				
Variable	$\overline{\mathbf{F}}$	%	M	SD	$\overline{\mathbf{F}}$	%	M	SD	
Gender	200				200				
Male	77	38,5							
Female	123	61,5			200	100			
Perceived SES									
Below Poverty Threshold					38	19,0			
Very Low					17	8,5			
Low					27	13,5			
Medium					40	20,0			
High					36	18,0			
Very High					42	21,0			
<b>Education Level</b>	200				200				
Primary School					70	35,0			
Secondary School					32	16,0			
High School					50	25,0			
University	200	100			45	22,5			
Postgraduate					3	1,5			
Current Psychological Support									
Yes									
No	200	100			200	100			
Psychological Support History	200				200				
Yes									
No	200	100			200	100			

### 2.2 Procedure

University classroom announcements were performed by the researcher and only volunteered participants received two sealed envelopes. In this process, young participants were instructed to keep 'adolescent' envelope for themselves and deliver 'mother' envelope to their mother. Adolescent envelops consisted of Informed Consent Form, Demographic Information Form, Pathological Narcissism Inventory, Parental Psychological Control and Father Involvement (see Appendix B, D, E, F, and G). Mother envelops consisted of Informed Consent Form, Demographic Information Form and Pathological Narcissism Inventory(see Appendix A and C). Distributed envelops were collected in next week's same class hours by the researcher.

### 2.3 Materials

### 2.3.1 Demographic Information Form

Participants were asked to provide information about age, gender, socioeconomic status, marital status, current psychological support, psychological support history and educational status. Questions about socioeconomic and marital status were asked only to mothers, and information regarding gender demanded only from late adolescent participants.

### 2.3.2 Pathological Narcissism Inventory (PNI)

Developed by Pincus et al. (2009), Pathological Narcissism Inventory (PNI) aimed to evaluate narcissistic symptoms through two main factors, namely (1) grandiose narcissism and (2) vulnerable narcissism. The inventory consisted of 52 items and each item is rated on a 6-point Likert type scale ranging from 0 (*does not describe me at all*) to 5 (*describes me perfectly*). The inventory provides 7 subdomains under 2 main factors (i.e., grandiose narcissism and vulnerable narcissism) that are Contingent Self Esteem (CSE), Exploitative (EXP), Self-Sacrificing/Self Enhancement (SSSE), Hiding Self (HS), Grandiose Fantasy (GF), Devaluing (DEV), Entitlement Rage (ER). Vulnerable Narcissism is evaluated by scores in 3 subdomains (CSE, HS, and DEV) and Grandiose Narcissism is evaluated by scores in 4 subdomains (EXP, SSSE, GF and ER). Cronbach alpha values for the subdomains range from .78 to 93. Cronbach alpha value of the total narcissism scale was .95. PNI was adapted to Turkish by Şen and Barışkın (2019). Internal consistency coefficient

for the total scale was .93, while test- retest reliability was .90. Internal consistency coefficients of subdomains ranged from .74 to .92 (Şen & Barışkın, 2019). PNI was filled out by both late adolescents and mothers in the present study. The Cronbach alpha value of the total scale was .90, while it was .87 and .84 for vulnerable and grandiose domains for the late adolescent sample. The respective values were .94, 92 and 83 for the mothers.

### 2.3.3 Father Involvement Scale (FIS)

Finley (1998) developed Father Involvement Scale (FIS) to evaluate perceived emotional support of fathers. The scale consists of 9 items and each item is rated on a 5-point Likert type scale, ranging from 1 (*never*) to 5 (*always*). The internal consistency coefficients of the scale ranged between .88 and .90. Turkish adaptation of the scale was performed by Kuzucu and Özdemir (2013). In the adaptation study, Cronbach alpha value was .88, and test-retest reliability was .92. Higher scores in the scale indicated greater levels of father involvement. Only late adolescents filled out FIS to retrospectively evaluate the quality of the relation they had with their fathers. Cronbach alpha value of the total scale was .90 for the present study.

### 2.3.4 Psychological Control Scale—Youth Self-Report (PCS-YSR)

Developed by Barber (1996) as an 8-item measurement tool, PCS-YSR later expanded by adding 8 more items to cover cross-cultural values (Barber, Olsen, Hunter, McNeely, & Bose 2007). Measuring two main subdomains as (1) Psychological Control (PC) and (2) Parental Disrespect (PD), the scale provides evaluation for perceived father and mother parental psychological control separately. All items are scored on a 4-point Likert type scale ranging from 1 (*my father/mother never does*) to 4 (*my father/mother always do*). Internal consistency coefficients in original study were .83 for mother-child pairs, while it was .80 for father-son and .83 for father daughter pairs. Scale's Turkish adaptation study was performed by Sayıl and Kındap (2010), and obtained results indicated that internal consistency coefficients were .85 and .89 for mother and father domains respectively in parental disrespect subdomain. Parental psychological control subdomain's internal consistency coefficients were .77 for mothers and .79 for fathers. Higher scores in the scale refer to higher levels of parental psychological control. PCS-YSR was only fulfilled by late adolescents and only mother psychological control subfactor was used within the

scope of the current study. The Cronbach alpha value was .84 for mother related PCS-YSR.

### **CHAPTER 3**

### RESULTS

### 3.1 Statistical Analysis

Prior to conducting all analysis, assumptions of normality had been checked for the obtained data. Accordingly, 3 participant dyads were excluded from the subsequent analysis because participants' scores were either above or below 3 SD of the mean. Distribution of the data did not indicate skewness in any direction and VIF scores of the variables did not exceed +3.

Descriptive statistics of all study variables were presented in Table (2). To compare the mean scores of Pathological Narcissism Inventory between mothers and late adolescents, independent sample T-test analysis was performed via SPSS. Results of the comparison also provided in descriptive statistics subsection. Correlations among study variables were also measured and provided in Table (3).

Collected data was also analysed via Process Macro v. 3.5.3 (Hayes, 2013). Model 14 was used to determine the effect of maternal psychological control and father involvement on the relationship between mother narcissism and adolescent narcissism. To elaborate, it was tested whether 1) Mother Narcissism (X) predicted Adolescent Narcissism (Y), 2) Maternal Psychological Control (M) mediated the relationship between Mother Narcissism (X) and Adolescent Narcissism (Y), 3) Father Involvement (W) had any effect on relationship between Maternal Psychological Control (M) and Adolescent Narcissism (Y) and, 4) Gender (covariate) had any significant effect on moderated mediation model. Bias-corrected bootstrap confidence interval (10.000 bootstrap resamples) was used to evaluate significance values of moderated mediation. If difference between lower and upper levels of confidence intervals did not include zero, then moderated mediation index considered to be an indicator of significant relationships among variables.

### 3.2 Descriptive Statistics among Study Variables

Descriptive statistics of study variables were performed to calculate standard deviations, means, and maximum -minimum scores respectively. Please see Table 2 for detailed information. Additionally, results of the independent sample T-test analysis yielded that late adolescents' Pathological Narcissism Inventory scores were

higher than (M = 2.37, SD = .61) those of mothers  $(M = 2.11 \ SD = .79)$  indicating a significant difference (t(398): -3.69, p < .001).

**Table 2.** Descriptive Statistics of Study Variables

	N	M	SD	Minimum	Maximum
Variables of Mothers					
PNI	200	109.73	40.90	24	220
PNI- Vulnerable	200	78.35	31.35	17	152
PNI- Grandiose	200	33.58	6.74	16	52
Variables of Late Adolescents					
PNI	200	123.19	31.50	33	211
PNI- Vulnerable	200	83.72	24.98	22	153
PNI- Grandiose	200	30.73	6.18	11	49
PCS-YSR	200	25.68	6.77	16	48
FIS	200	34.81	7.93	10	45

Note. PNI: Pathological Narcissism Inventory; PNI-Vulnerable: Vulnerable Narcissism subdomain; PNI-Grandiose: Grandiose Narcissism subdomain; FIS: Father Involvement Scale; PCS-YSR: Psychological Control Scale- Youth Self-Report.

### 3.3 Bivariate Correlations of Study Variables

To calculate bivariate correlations among study variables, Pearson correlation analyses was performed (see Table 3). Total adolescent narcissism scores had a significant positive relationship with the total mother narcissism scores (r = .25, p < .01). Similarly, a positive significant correlation was also obtained between adolescent vulnerable narcissism and mother vulnerable narcissism scores (r = .22, p < .01). By contrast, adolescent vulnerable narcissism had a significant yet negative association with mother grandiose narcissism scores (r = -.23, p < .01). Adolescent grandiose narcissism scores had a significant negative relationship with mother vulnerable narcissism (r = -.18, p < .05) and a significant positive relationship with mother grandiose narcissism (r = .27, p < .01).

**Table 3.** Correlations among Study Variables

Inventories for Mothers	1	2	3	4	5	6	7	8
1. PNI	1	.97*	58*	.24*	.25*	24*	.00	05
2. PNI-Vulnerable		1	50*	.19*	.22*	18*	01	07
3. PNI-Grandiose			1	26*	23*	.27*	03	.03
Inventories for Late Adolescents 4. PNI				1	.97*	44*	17*	.29*
5. PNI-Vulnerable					1	38*	17*	.24*
6. PNI-Grandiose						1	.13	10
7. FIS							1	25*
8. PCS-YSR								1

Note. \* p < .05,

PNI: Pathological Narcissism Inventory; PNI-Vulnerable: Vulnerable Narcissism subdomain; PNI-Grandiose: Grandiose Narcissism subdomain; FIS: Father Involvement Scale; PCS-YSR: Psychological Control Scale- Youth Self-Report; Gender: Gender of Late Adolescents.

### 3.4 Tests of the Moderated Mediation Models

### 3.4.1 Moderating Role of Father Involvement on the Relationship between Total Mother Narcissism, Maternal Psychological Control and Total Late Adolescent Narcissism

Results showed that the moderated mediation model (Fig. 2) explained 16% of the total variance in late adolescent total narcissism scores (F (5, 194) = 7.42, p < .05). Regarding direct effect, results indicated that there was a positive significant relationship between mother total and late adolescent total narcissism scores ( $\beta$  = .20, SE = .05, t = 3.81, p < .05; 95% CI [.09, .30]). The relationship between mother psychological control and late adolescent narcissism was not significant ( $\beta$  = .42, SE = 1.17, t = .36, p > .05; 95% CI [-1.89, 2.73]). Mother total narcissism did not have any significant impact on maternal psychological control ( $\beta$  = -.01, SE = .01, t = -.40, p > .05; 95% CI [-.03, .02]).

Father involvement did not have any significant main effect on relationship between maternal psychological control and late adolescent total narcissism ( $\beta$  = .03, SE = .03, t = .77, p > .05; 95% CI [-.04, .09]). Index of the moderated mediation did not show any significant results either ( $\beta$  = -.0001, SE = .0005, 95% CI [-.0014, .0009]).

As covariate, gender did not have a significant relationship with adolescent total narcissism scores ( $\beta = -1.28$ , SE = 4.37, t = -.29, p > .05; 95% CI [-9.90, 7.34]) yet had a significant negative relationship with maternal psychological control ( $\beta = -2.22$ , SE = .98, t = -2.25, p < .05; 95% CI [-4.16, -.28]).

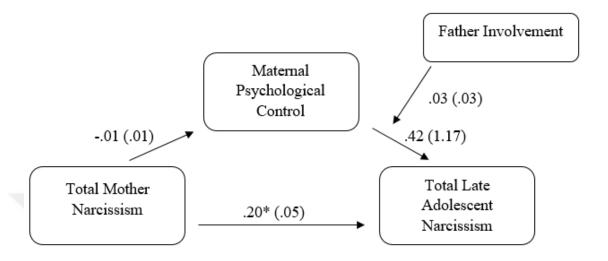


Figure 6: Moderated Mediation Model of the Relationship between Mother Narcissism and Late Adolescent Narcissism.

Note. Covariate (Gender of Late Adolescent) was controlled during the analysis.

# 3.4.2 Moderating Role of Father Involvement on the Relationship between Mother Vulnerable Narcissism, Maternal Psychological Control and Adolescent Vulnerable Narcissism

As direct effects, results indicated that there was a positive significant relationship between mother vulnerable narcissism and late adolescent vulnerable narcissism scores ( $\beta = .18$ , SE = .05, t = 3.41, p < .05; 95% CI [.08, .29]). Maternal psychological control did not have any significant effect on late adolescent vulnerable narcissism ( $\beta = .33$ , SE = .95, t = .35, p > .05; 95% CI [-1.53, 2.20]). Mother vulnerable narcissism did not have any significant effect on maternal psychological control either ( $\beta = -.01$ , SE = .02, t = -.62, p > .05; 95% CI [-.04, .02]).

In the model, father involvement did not indicate any significant main effect on the relationship between maternal psychological control and late adolescent vulnerable narcissism ( $\beta = .02$ , SE = .03, t = .60, p > .05; 95% CI [-.04, .07]). Index of the moderated mediation did not show any significant results either ( $\beta$ = -.0002, SE =.0006, 95% CI [-.0014,.0010]). Gender, as the control variable, did not have significant associations with adolescent vulnerable narcissism ( $\beta$  = 1.54, SE = 3.53, t

= .43, p > .05; 95% *CI* [-5.43, 8.50]), by contrast it had a significant negative relationship with maternal psychological control ( $\beta = -2.19$ , SE = .98, t = -2.22, p < .05; 95% *CI* [-4.13, -.25]).

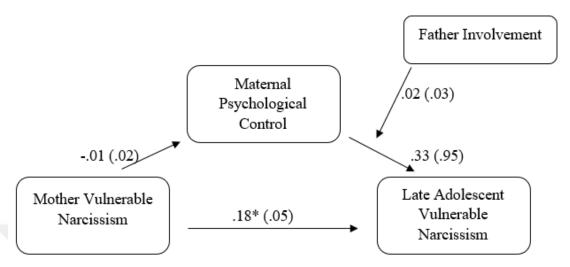


Figure 7: Moderated Mediation Model of the Relationship between Mother Vulnerable Narcissism and Late Adolescent Vulnerable Narcissism.

Note. Covariate (Gender of Late Adolescent) was controlled during this analysis.

# 3.4.3 Moderating Role of Father Involvement on the Relationship between Mother Vulnerable Narcissism, Maternal Psychological Control and Adolescent Grandiose Narcissism

Results indicated a negative significant relationship between mother vulnerable narcissism and late adolescent grandiose narcissism scores ( $\beta$  = -.04, SE = .01, t = -2.53, p < .05; 95% CI [-.06, -.01]). Maternal psychological control did not have any significant effect on late adolescent grandiose narcissism ( $\beta$  = .21, SE = .24, t =.88, p > .05; 95% CI [-.27, .69]). Mother vulnerable narcissism did not have any significant effect on maternal psychological control either ( $\beta$  = -.01, SE = .02, t = -.62, p > .05; 95% CI [-.04, .02]).

Father involvement did not have any significant main effect on the relationship between maternal psychological control and late adolescent grandiose narcissism ( $\beta$  = -.01, SE = .01, t = -1.29, p > .05; 95% CI [-.02, .005]). Also index of the moderated mediation did not show any significant results ( $\beta$  = .0001, SE =.0002, 95% CI [-.0003, .0005]).

As the model's covariate, gender did not indicate any significant relationship with adolescent grandiose narcissism ( $\beta = -.60$ , SE = .91, t = -.67, p > .05; 95% CI [-

2.39, 1.18]), however, it had a significant negative relationship with maternal psychological control ( $\beta = -2.19$ , SE = .98, t = -2.22, p < .05; 95% CI [-4.13, -.25]).

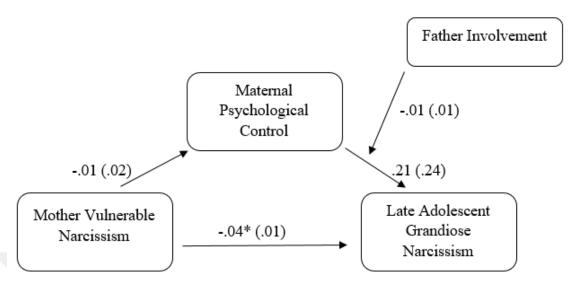


Figure 8: Moderated Mediation Model of the Relationship between Mother Vulnerable Narcissism and Late Adolescent Grandiose Narcissism.

Note. Covariate (Gender of Late Adolescent) was controlled during this analysis.

# 3.4.4 Moderating Role of Father Involvement on the Relationship between Mother Grandiose Narcissism, Maternal Psychological Control and Adolescent Vulnerable Narcissism

Relationship between mother grandiose narcissism and late adolescent vulnerable narcissism was negatively significant ( $\beta$  = -.86, SE = .25, t = -3.45, p < .05; 95% CI [-1.36, -.37]). Maternal psychological control did not have any significant effect on late adolescent vulnerable narcissism scores ( $\beta$  = .44, SE = .95, t = .46, p > .05; 95% CI [-1.43, 2.30]). Mother grandiose narcissism did not have any significant effect on maternal psychological control scores either ( $\beta$  = .01, SE = .98, t = .07, p > .05; 95% CI [-.14, .15]).

Father involvement did not have any significant main effect on relationship between maternal psychological control and late adolescent vulnerable narcissism ( $\beta$  = .01, SE = .03, t = .43, p > .05; 95% CI [-.04, .07]). Index of the moderated mediation did not show any significant results ( $\beta$  = .0001, SE = .0020, 95% CI [-.0039, .0047]).

Gender, as the control variable, did not have any significant relationship with adolescent vulnerable narcissism ( $\beta = 1.76$ , SE = 3.52, t = .50, p > .05; 95% CI [-5.18,

8.70]) but had a significant negative effect on maternal psychological control ( $\beta$  = -2.26, SE = .98, t = -2.30, p < .05; 95% CI [-4.20, -.33]).

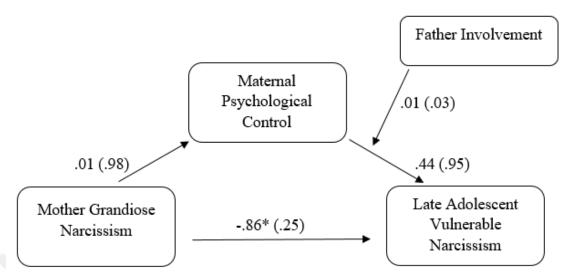


Figure 9: Moderated Mediation Model of the Relationship between Mother Grandiose Narcissism and Late Adolescent Vulnerable Narcissism.

Note. Covariate (Gender of Late Adolescent) was controlled during this analysis.

# 3.4.5 Moderating Role of Father Involvement on the Relationship between Mother Grandiose Narcissism, Maternal Psychological Control and Adolescent Grandiose Narcissism

Regarding direct effect, results indicated that there was a significant positive relationship between mother grandiose narcissism and late adolescent grandiose narcissism scores ( $\beta = .25$ , SE = .06, t = 3.91, p < .05; 95% CI [.12, .37]). Maternal psychological control did not have any significant effect on late adolescent grandiose narcissism ( $\beta = .18$ , SE = .24, t = .75, p > .05; 95% CI [-.29, .65]). Mother grandiose narcissism did not have any significant effect on maternal psychological control either ( $\beta = .01$ , SE = .07, t = .07, p > .05; 95% CI [-.14, .15]).

Father involvement did not show any significant main effect on relationship between maternal psychological control and late adolescent grandiose narcissism ( $\beta$  = -.01, SE = .01, t = .-1.13, p > .05; 95% CI [-.02, .01]). Moreover, index of the moderated mediation did not show any significant results ( $\beta$  = -.0000, SE =.0008, 95% CI [-.0018, .0014]).

Gender, as the control variable in the model, did not have significant associations with adolescent grandiose narcissism ( $\beta = -.51$ , SE = .88, t = -.58, p > .05;

95% CI [-2.25, 1.23]), whereas it had a significant negative relationship with maternal psychological control ( $\beta$  = -2.26, SE = .98, t = -2.30, p < .05; 95% CI [-4.20, -.33]).

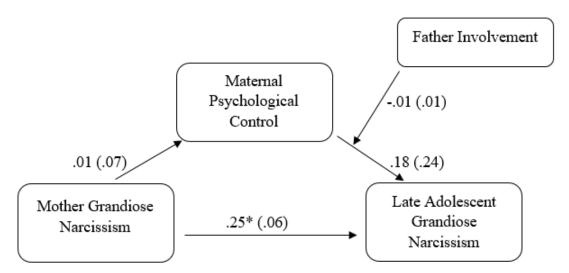


Figure 10: Moderated Mediation Model of the Relationship between Mother Grandiose Narcissism and Late Adolescent Vulnerable Narcissism.

Note. Covariate (Gender of Late Adolescent) was controlled during this analysis.

#### **CHAPTER 4**

#### DISCUSSION

The current thesis mainly aimed to investigate the relationship between mother narcissism, maternal psychological control, father involvement and late adolescent narcissism. Even though there are many studies pointing out to the links between parental and offspring psychopathology including depression, bipolar disorder, substance misuse and borderline personality disorders (e.g., Barlett, 2000; Dutton et al., 2011; Goodman & Gotlib, 1999; Ramchandani & Psychogiou, 2009; Stapp et al., 2020; Weijers et al., 2018; Xerxa et al., 2021), intergenerational transmission of narcissistic disturbances received limited attention. Furthermore, previous studies that attempted to explain this relation either stay at the theoretical level or lack data obtained from multiple perspectives based on a solid theory (Dentale et al., 2015; Hart et al., 2017; Horton et al., 2006; Miller & Campbell, 2008). To address this this gap in the literature, the present study examined the relationship between mother narcissism (X) and adolescent narcissism (Y) while attempting to identify the mediating effect of maternal psychological control (M) and moderating effect of father involvement (W). Specifically, mother narcissism was expected to exacerbate narcissistic tendencies of adolescent offspring. Moreover, it was also hypothesized that mothers with greater narcissistic characteristics were more likely to employ psychologically controlling parenting, which was associated with higher narcissistic scores among offspring. Lastly, father involvement was expected to buffer negative effects of maternal narcissism through mediating role of maternal psychological control.

Accordingly, in the following subsections, (1) the main effect of mother narcissism on late adolescent narcissism, (2) mediating role of maternal psychological control, and (3) overall moderated mediation model were discussed in relation to the relevant literature findings. Then, clinical implications, limitations, and future directions for researchers were addressed.

#### 4.1 Main Effect of Mother Narcissism on Adolescent Narcissism

Results for the main effects of maternal narcissism on offspring narcissistic features indicated interesting yet still parallel outcomes. When mothers and late adolescents shared the same narcissism subtype (i.e., either grandiose or vulnerable), the relationship between maternal and adolescent narcissism were positively

significant. Interestingly, if mothers and late adolescents did not share the same narcissism subtype, the relationship between maternal and adolescent narcissism were negatively associated. Besides, not only subtypes but also total narcissism scores indicated positive significant relationship between mothers and late adolescents scores. In that sense, the current study was among the first to provide empirical links between mother narcissism and adolescent narcissism. Moreover, we believe that obtaining data from both mothers and offspring for the first time is another strength of the present study while addressing the proposed relation.

The obtained positive relationship between the same mother and late adolescent narcissism subtypes, in fact, provided partial support for the psychanalytic explanations for the etiology of narcissism. Although differed in their terminologies, psychanalytic theorists usually attributed offspring narcissism to the symbiotic or undifferentiated relation between the primary caregiver and the child. Expanding on the concepts of Freud, Lacan proposed that pervert structures like narcissism develops as the child becomes mother's object of desire, failing to acknowledge paternal law. The pervert mother invests profound love to the child, making the child feel that s/he is the phallus gratifying all the desires of the mother. Later, the child rejects to sacrifice this jouissance, like the mother, failing to achieve separation from mother (Fink, 1997, 1999). Object Relations theory, indeed, provided a similar explanation. Accordingly, narcissistic mothers refuse to abandon self-centered gratifications making the child an object of libidinal investment (Robbins, 1992). Those mothers, unable to provide a holding and nurturing environment, make their children their own self-objects, preventing the offspring to invest in other relations (Kohut, 1971; Robbins, 1992). Consequently, these children become adults who are always in need of gratification of pleasure not acknowledging the needs of others. Kernberg (1975) also believed that narcissistic parents are likely to attribute divine meanings to their children and believe that they are 'the gifts from heavens' (Kernberg, 1975). Hence, we believe that our findings provided support to those psychanalytic works of narcissism highlighting the very same narcissistic features shared by the mother and child through unlavish love, over-dependence, and lack of necessary boundaries.

One surprising yet plausible finding we obtained was the negative relations between mother's grandiose narcissism and adolescent's vulnerable narcissism, and mother's vulnerable narcissism and offspring grandiose narcissism scores.

Particularly, the strongest negative relation was found between mothers' grandiose narcissism scores and children's vulnerable narcissistic tendencies. That is, higher scores of maternal grandiose narcissism were associated with lower levels of offspring vulnerable narcissism. Although both grandiose and vulnerable types of narcissism share the same self-centered attitudes, individuals with vulnerable narcissism are more likely to show insecurity, defensiveness, and hypersensitivity in their social relations (Hart, Adams, Burton, & Tortoriello, 2017; Jauk et al., 2017). By contrast, being socially bold is more central to non-clinical levels of grandiose narcissism (Back, Schmukle, & Egloff, 2010) although they might also suffer from the implications of vulnerable self-states from time to time (Jauk et al., 2017). Thereof, it can be inferred that more entitled and extravagant mothers discourage insecure attitudes of their offspring, since such an insecurity would eventually shadow their self-glory, as well (Soenens & Vansteenkiste, 2010). As for the negative relation between maternal vulnerable narcissism and adolescents' grandiose narcissism, a similar conceptualization might be established based on related yet still different features of grandiose and vulnerable narcissism (Jauk et al., 2017). Accordingly, the more insecure attitudes of mothers with vulnerable narcissism might inevitably prevent their children from developing more flamboyant and overly confident attributes in their interpersonal relations. In fact, this interpretation might be partially supported by the research suggesting that maternal insecurity is associated with lower self-esteem among children (Baker & Ben-Ami, 2011; Bean & Northrup, 2009 Bulanda & Majumdar, 2009).

## 4.2. Mediating Role of Maternal Psychological Control on the Relationship between Mother and Adolescent Narcissism

In contrast to our expectations, maternal psychological control did not mediate the relationship between maternal and late adolescent narcissism for none of the proposed models. Accordingly, mothers with narcissistic tendencies did not employ psychological control more and psychological control did not exacerbate the narcissistic features of their offspring. This finding is contrary to previous studies which have suggested that mothers with greater narcissistic scores are prone to be over-controlling towards their children as they do not perceive the child as an autonomous individual (Dentale et al., 2015; Hart et al., 2017; Pozzi 1993, 1995;). Yet,

it is important to note that empirical evidence supporting the relation between maternal control and child narcissism is also grounded on limited number of studies.

Late adolescence is a developmental period that is likely to create the greatest turmoil for narcissistic parents because of its autonomy and separation related tasks. During this period, youngsters are expected to invest in other relations beyond their family to crystallize their identity and to achieve healthy separation. This separation though might fail to solidify narcissistic parents' sense of superiority since they perceive their child as a self-extension rather than an autonomous being. Thereof, narcissistic parents might feel threatened because of adolescents' individuation related attempts (Banai et al., 2005; Lapsley & Aalsma, 2006; Lapsley et al., 1989). Such a threat might lead to two pathways on the behalf of the parents, that are either fighting or flighting (Kohut, 1972). That is, narcissistic parents might adopt over-controlling strategies in the form of emotional outbursts (Rosenfeld, 1987) or might be dismissing towards the child in the form of rejection (Pincus et al., 2009). Hence, parental avoidance or dismissal might better capture the relation between maternal and late adolescent narcissism, overriding the impact of parental control. In fact, this inference is also supported by some evidence in the literature suggesting that children with greater narcissism scores are more likely to report their parents as cold, distant, and dismissing(Horton & Tritch, 2014; Ramsey et al., 1996).

In fact, narcissistic individuals are proposed to be more explicit in their demanding attitudes especially in parenting when compared with other interpersonal relations (Hendin & Creek, 1997; Russ et al., 2008; Wink, 1991). Especially grandiose narcissism is strongly related with exhibitionist behaviors in parenthood (Pincus & Lukowitsky, 2010). In such circumstances, mothers with more grandiose characteristics might be hypersensitive regarding their children's failure to satisfy narcissistic needs, which might result in a sense of incompetence and shame (Gramzow & Tangney, 1992; Jacobson, 1964). Thus, the narcissistic extension that creates constant emotional disturbance for the mother might be totally dismissed or rejected to preserve self-esteem.

Finally, another explanation for the non-significant effect of maternal psychological control on the transmission of narcissistic features might be related with narcissistic individuals' lack of ability to acknowledge their dysfunctional behaviors

(Ames & Kammrath, 2004; Bleske- Rechek et al., 2008; Paulhus et al., 2003) In that regard, our participants with higher narcissism scores might not perceive their intrusive parenting behaviors as psychologically controlling, thereby answered the items of Psychological Control Scale (PCS-YSR) in a biased manner.

## 4.3. Moderating Role of Father Involvement on the Relationship between Maternal and Late Adolescent Narcissism through Maternal Control

Indexes of all five moderated mediation models did not indicate significant results for the moderating effects of paternal involvement, meaning that father involvement did not provide enough protective support for late adolescents' narcissistic tendencies to decrease negative impacts of maternal narcissism via psychological control.

Like other personality disorders, narcissistic personality tendencies may present with pervasive and persistent maladaptive relational patterns that might not be compensated easily by the other filial factors (Miller & Campbell, 2008). That is, considering the significant relationships between maternal and late adolescents' narcissism scores, maternal narcissism might be a more over-riding factor ruling out fathers' protective influences on offspring. Moreover, as mentioned, narcissistic mothers might not adopt relatively subtle controlling techniques such as psychological control(Akhtar & Thomson, 1982; Wink, 1991; Rasmussen, 2016; Zeigler-Hill et al., 2011). Instead, they might display more explicit rejecting, punishing, or dismissing attitudes (Horton & Tritch, 2014; Pincus et al., 2009; Ramsey et al., 1996) explaining the lack of significant relationship between maternal control and paternal involvement. Besides, psychanalytic conceptualizations of narcissism usually focus on the undifferentiated mother-child relationship while not much has been said regarding father's position. There is only one theoretical explanation, to the authors knowledge, explicitly highlighting the inadequacy of paternal function in the formation of narcissistic structure. Accordingly, the father's involvement should be strong enough to interfere with the symbiotic relation the mother has with the offspring, making the child acknowledge the laws beyond his/her mother(Fink, 1997, 1999). In that respect, the scale that we used in our model (Father Involvement Scale) might not have captured father's proposed position as the symbolic law, bringing an explanation to the non-significant effect of father involvement on the transmission of narcissistic symptoms.

#### 4.4. Clinical Implications

Although some of our results emerged as non-significant, we still believe, the current study shed valuable light into the clinical practice. Although familial transmission of borderline personality disorder and anti-social traits have been relatively more studied (Barlett, 2000; Goodman & Gotlib, 1999; Ramchandani & Psychogiou, 2009; Stapp et al., 2020), our study is amongst the few providing partial evidence for the maternal transmission of narcissistic features. Our results indicated that offspring having mothers with narcissistic traits might be particularly vulnerable to developing a psychological structure oscillating between grandiosity, entitlement, low frustration tolerance and social insecurity. Thereof, it might be crucial to investigate and process relational dynamics between late adolescents and their mothers while providing psychotherapy to patients with narcissistic features. Considering the importance of separation during late adolescent, addressing, and working on the possible symbiotic relation with the maternal figure might be particularly helpful employing a psychodynamic perspective.

#### 4.5. Limitations and Directions for Future Studies

The current study is not without limitations. First and foremost, data collection procedures took place during the global pandemic in which people were mostly obligated to stay in home. Social precautions such as curfew and limits in domestic travel forced most late adolescents to move into their parents' houses. Considering the developmental key tasks of late adolescents' (e.g., separation from family and gaining sense of autonomy), spending more time with family members might affect young participants' retrospective evaluations about their parents and parenting practices. Even though mentioned retrospective judgement does not necessarily have to be negative, time that was spent with family members and its quality should be controlled in future studies. Since it is essential to know late adolescents' residency status (whether they live with their parents or not), future studies should ask information about where and with whom late adolescents live.

Our research's cross-sectional analysis design stands as another limitation. As mentioned before narcissistic personality disorder is not a temporary mood of a person but it refers to a long-lasting behavioral pattern. Especially working with families becomes tricky at this point because to detect valid cause-effect relationships, researchers should keep track of the familial dynamic longitudinally.

Another theoretical limitation of the study might be related with the content of the maternal control scale that we had used. Considering the emphasis on the symbiotic and affectionate relation between mother and child in the formation of narcissistic tendencies, future studies are better to use scales particularly measuring closeness and separation frustration aspects of the maternal relationship.

Finally, our sample included a non-clinical population which could also explain the non-significant relations that we obtained. Accordingly, our hypotheses could be once again tested with a clinical population adding the scales measuring different aspects of parenting, in addition to maternal psychological control. It is not surprising that research on the familial transition of narcissism is relatively rare considering the hardships to collect data from individuals with clinical narcissism. We very well know from the literature that narcissistic individuals are reluctant to take part in psychotherapy or give distorted responses in research because of their inability to acknowledge maladaptive patterns of themselves. Thereof, it might be particularly of value measuring narcissistic traits through more implicit measures including but not limited to vignettes and scenarios.

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#### **APPENDICES**

#### APPENDIX A: MOTHER INFORMED CONSENT FORM



### Ebeveyn Gönüllü Katılım Formu

#### Sayın ebeveyn,

Bu araştırma, TED Üniversitesi Psikoloji Bölümü'nde Gelişim Odaklı Klinik Çocuk ve Ergen Psikolojisi Yüksek Lisans programında öğrenci olan Bilal Arpacıoğlu tarafından, Dr. Öğr. Üyesi Yağmur Ar-Karcı danışmanlığında yürütülmektedir. Araştırmanın amacı ebeveyn davranışlarının gençlerin psikolojik sağlığı üzerindeki etkilerini incelemektir. Söz konusu araştırma kapsamında hem sizlerden hem de çocuklarınızdan bazı anket sorularını yanıtlamanız beklenmektedir.

Bu araştırmaya katılımınızı onayladığınız taktirde, projenin katılımcısı olacaksınız. Çalışma kapsamında sizden yaklaşık 10 dk. sürecek bazı anket sorularına yanıt vermeniz beklenecektir. Doldurmanız beklenen anketlerin size kapalı bir zarfta ulaşmış olması gerekmektedir. Cevaplamanız bittikten sonra zarfı yeniden kapatarak kapanma yerini net bir kimlik bilgisi içermeyecek şekilde paraflamanız bilgi güvenliği açısından önem taşımaktadır. Araştırmanın sağlıklı ilerleyebilmesi için soruları sakin ve yalnız bir ortamda doldurmanız önemli olacaktır.

Araştırmada size yöneltilen soruların **DOĞRU ya da YANLIŞ** cevapları yoktur, bu nedenle soruları içtenlikle cevaplamanız araştırmanın sonuçları açısından önemlidir. Çalışma süresince sağladığınız bilgiler araştırma ekibi dışındaki hiç kimseyle izniniz dışında paylaşılmayacaktır. Bu çalışma kapsamında elde edilecek olan bilimsel bilgiler sadece araştırmacılar tarafından yapılan bilimsel yayınlarda, sunumlarda ve eğitim amaçlı çevrimiçi bir ortamda paylaşılacaktır. Toplanan veriler kimlik bilgileriniz silinerek, bilgisayarda şifreli bir dosyada tutulacaktır. İşlemler sizin uygun gördüğünüz ve gizliliğin korunabileceği bir ortamda gerçekleştirilecektir.

Bu çalışmaya katılım gönüllük esasına dayalıdır. Araştırmada yer alan sorular kişisel rahatsızlık verecek nitelikte değildir. Ancak herhangi bir nedenden ötürü kendinizi rahatsız hissederseniz, nedenini açıklamaksızın araştırmadan ayrılabilirsiniz. Böyle bir durumda vermiş olduğunuz bilgilerin araştırmacı tarafından kullanılması ancak sizin onayınızla mümkün olacaktır. Bu çalışmaya katıldığınız için şimdiden teşekkür ederiz.

Çalışma hakkında daha fazla bilgi almak ve yanıtlanmasını istediğiniz sorularınız için araştırmayı yürüten Bilal Arpacıoğlu (E-posta: bilal.arpacioglu@tedu.edu.tr, telefon 0546 402 72 19 ve Dr. Öğr. Üyesi Yağmur Ar-Karcı (E- posta: yağmur.ar@tedu.edu.tr) ile iletişim kurabilirsiniz.

Araştırmacı tarafından bu araştırma ile ilgili yeteri kadar bilgilendirildim. Yapılan görüşmelerin kayıt altına alınmasını ve eğitim amaçlı kullanılmasını kabul ediyorum. Bu çalışmaya tamamen gönüllü olarak katılıyorum ve istediğim zaman sebep göstermeksizin araştırmadan ayrılabileceğimi biliyorum.

Araştırmaya katılmak istiyorum	Evet / Hayır
Araştırma verileri aşağıdaki şekilde kullanılabilecektir:	
Çevrimiçi Eğitim ortamda	Evet / Hayır
Raporlar, makaleler, ilgili haberler gibi görsel ve yazılı materyallerden	Evet / Hayır
Ad /Soyad:	
Katılımcının İmzası:	
Tarih	
Teşekkürler, Araştırmacının adı, soyadı ve imzası: Bilal Arpacıoğlu	
Ziya Gökalp Cad. No:48 Kolej/ Çankaya ANKARA	

#### APPENDIX B: LATE ADOLESCENT INFORMED CONSENT FORM



#### Gönüllü Katılım Formu

#### Sayın katılımcı,

Bu araştırma, TED Üniversitesi Psikoloji Bölümü'nde Gelişim Odaklı Klinik Çocuk ve Ergen Psikolojisi Yüksek Lisans programında öğrenci olan Bilal Arpacıoğlu tarafından, Dr. Öğr. Üyesi Yağmur Ar-Karcı danışmanlığında yürütülmektedir. Araştırmanın amacı ebeveyn davranışlarının gençlerin psikolojik sağlığı üzerindeki etkilerini incelemektir. Söz konusu araştırma kapsamında hem sizlerden hem de annelerinizden bazı anket sorularını yanıtlamanız beklenmektedir.

Bu araştırmaya katılımınızı onayladığınız ve annenizin de katılım onayını sağladığınız taktirde, projenin katılımcısı olacaksınız. Çalışma kapsamında sizden yaklaşık 30 dk. sürecek, annenizden ise yaklaşık 10 dk. sürecek bazı anket sorularına yanıt vermeniz beklenecektir. Annelerinizin doldurması beklenen sorular size kapalı bir zarf içinde verilecektir. Ayrıca anneniz kendine ait soruları yanıtladıktan sonra ilgili ölçekleri size ulaştırılan zarflara koyarak kapatacak ve zarfın kapanma noktasına kimlik bilgisini net bir şekilde içermeyen bir paraf atacaktır. Araştırmanın sağlıklı ilerleyebilmesi için annenizin soruları sakin ve yalnız bir ortamda doldurması önemli olacaktır. Son olarak, zarfların size tesliminden bir hafta sonra söz konusu zarfı kapalı bir şekilde dersin ilk saatine getirmeniz beklenecektir.

Araştırmada size yöneltilen soruların **DOĞRU ya da YANLIŞ** cevapları yoktur, bu nedenle soruları içtenlikle cevaplamanız araştırmanın sonuçları açısından önemlidir. Çalışma süresince sağladığınız bilgiler araştırma ekibi dışındaki hiç kimseyle izniniz dışında paylaşılmayacaktır. Bu çalışma kapsamında elde edilecek olan bilimsel bilgiler sadece araştırmacılar tarafından yapılan bilimsel yayınlarda, sunumlarda ve eğitim amaçlı çevrimiçi bir ortamda paylaşılacaktır. Toplanan veriler kimlik bilgileriniz silinerek, bilgisayarda şifreli bir dosyada tutulacaktır. İşlemler sizin uygun gördüğünüz ve gizliliğin korunabileceği bir ortamda gerçekleştirilecektir.

Bu çalışmaya katılım gönüllük esasına dayalıdır. Araştırmada yer alan sorular kişisel rahatsızlık verecek nitelikte değildir. Ancak herhangi bir nedenden ötürü kendinizi rahatsız hissederseniz, nedenini açıklamaksızın araştırmadan ayrılabilirsiniz. Böyle bir durumda vermiş olduğunuz bilgilerin araştırmacı tarafından kullanılması ancak sizin onayınızla mümkün olacaktır. Bu çalışmaya katıldığınız için şimdiden teşekkür ederiz.

Çalışma hakkında daha fazla bilgi almak ve yanıtlanmasını istediğiniz sorularınız için araştırmayı yürüten Bilal Arpacıoğlu (E-posta: bilal.arpacioglu@tedu.edu.tr, telefon 0546 402 72 19 ve Dr. Öğr. Üyesi Yağmur Ar-Karcı (E- posta: yağmur.ar@tedu.edu.tr) ile iletişim kurabilirsiniz.

Araştırmacı tarafından bu araştırma ile ilgili yeteri kadar bilgilendirildim. Yapılan görüşmelerin kayıt altına alınmasını ve eğitim amaçlı kullanılmasını kabul ediyorum. Bu çalışmaya tamamen gönüllü olarak katılıyorum ve istediğim zaman sebep göstermeksizin araştırmadan ayrılabileceğimi biliyorum.

Araştırmaya katılmak istiyorum	Evet / Hayır
Araştırma verileri aşağıdaki şekilde kullanılabilecektir:	
Çevrimiçi Eğitim ortamda	Evet / Hayır
Raporlar, makaleler, ilgili haberler gibi görsel ve yazılı materyallerde	Evet / Hayır
Ad /Soyad:	
Katılımcının İmzası:	
Tarih	
Teşekkürler, Araştırmacının adı, soyadı ve imzası: Bilal Arpacıoğlu	

Ziya Gökalp Cad. No:48 Kolej/ Çankaya ANKARA

### APPENDIX C: MOTHER DEMOGRAPHIC INFORMATION FORM

1)	Yaşınız:
2)	Cinsiyetiniz: □ Erkek □ Kadın
3)	Eğitim durumunuz (Son aldığınız diplomaya göre):
□ İll mezı	kokul mezunu 🗆 Ortaokul mezunu 🗆 Lise mezunu 🗀 Üniversunu
	üksek Lisans mezunu □ Doktora mezunu
	Aylık geliriniz:         500 TL veya daha az       □ 2300 TL-3500 TL arası         500 TL − 1800 TL arası       □ 3500 TL- 5000 TL arası
□ 18	800 TL-2300 TL arası $\Box$ 5000 TL ve üstü
5)	Medeni durumunuz:
□ Ev	vli
□В	ekar (Hiç evlenmemiş)
□В	oşanmış
□ Eş	şini kaybetmiş
	riğer (Lütfen belirtiniz:)
6) aldın	Bu zamana kadar siz veya eşiniz herhangi bir psikiyatrik/psikolojik yanız mı?
□ Ev	vet
□ На	ayır
Evet	t ise lütfen ne tür bir yardım (psikoterapi, ilaç gibi) aldığınızı yazınız:
7) musi	Şu anda siz veya eşiniz herhangi bir psikiyatrik/psikolojik yardım alıyo unuz?
□ Ev	vet
□ На	ayır
Su aı	ında bir şu anda bir yardım alıyorsanız hangi sebepten olduğunu kısaca ya

## APPENDIX D: LATE ADOLESCENT DEMOGRAPHIC INFORMATION FORM

Katılımcı Demografik Bilgi Formu

1) Yaşınız:
2) Cinsiyetiniz: □ Erkek □ Kadın
3) Eğitim durumunuz (Son aldığınız diplomaya göre):
$\Box$ Ortaokul $\Box$ Lise $\Box$ Yüksek lisans
☐ Üniversite (lütfen üniversite ismi ve sınıf belirtiniz:)
4) Bu zamana kadar herhangi bir psikiyatrik/psikolojik yardım aldınız mı?
□ Evet
□ Hayır
Evet ise lütfen ne tür bir yardım (psikoterapi, ilaç gibi) aldığınızı yazınız:
5) Şu anda herhangi bir psikiyatrik/psikolojik yardım alıyor musunuz?
□ Evet
□ Hayır
Şu anda bir şu anda bir yardım alıyorsanız hangi sebepten olduğunu kısaca yazınız

## APPENDIX E: PATHOLOGICAL NARCISSISM INVENTORY SAMPLE ITEMS

Aşağıda bazı tanımlayıcı ifadeler bulacaksınız. Lütfen her birini düşünün ve sizi ne derece iyi tanımladığını belirtin. Doğru ya da yanlış cevap yoktur. Basitçe her bir ifadenin sizi ne kadar iyi tanımladığını 6 dereceli ölçek üzerinde tek bir maddeyi işaretleyerek gösterin.

03		4				5	
Beni Beni Beni Beni		Ben	ıi		В	en	
hiç büyük ölçüde pek çok az	büyük ölçüde			tam olarak			
tanımlamıyor tanımlamıyor tanımlamıyor tanımlıyor		tanım		tanımlıyor			
1.Sıklıkla bana hayranlık ve saygı duyulduğunu düşlerim.	0	1	2	3	4	5	
2. Öz güvenimde çok fazla iniş çıkış olur.	0	1	2	3	4	5	
3.Beni hayal kırıklığına uğrattıklarında, bazen başkaları ile ilgili beklentilerimden mahcubiyet duyarım.	0	1	2	3	4	5	
4.Genellikle herhangi bir konuda ikna edici olabilirim.	0	1	2	3	4	5	
5. Yalnız olduğumda iyi hissetmekte zorlanırım.	0	1	2	3	4	5	
20.Diğer insanlar için bir şeyler yaptığımda, onların da benim için bir şeyler yapmalarını beklerim.	0	1	2	3	4	5	
21. Başkaları beklentilerimi karşılamadıklarında, genellikle istediklerimle ilgili mahcubiyet duyarım.	0	1	2	3	4	5	
22. Başkaları bana güvendiğinde kendimi önemli hissederim.	0	1	2	3	4	5	
23. İnsanları kitap gibi okuyabilirim.	0	1	2	3	4	5	
24. Birileri beni hayal kırıklığına uğrattığında sıklıkla kendime kızarım.	0	1	2	3	4	5	
25. Başkaları için kendimi feda etmek beni daha iyi bir insan yapar.	0	1	2	3	4	5	
45. Sık sık başarılarımla tanındığımı hayal ederim.	0	1	2	3	4	5	
46. Sırtımı başkalarına dayamaya katlanamam çünkü bana kendimi güçsüz hissettirir.	0	1	2	3	4	5	
47. Başkaları bana onlardan beklediğim şekilde davranmadıklarında, kendimi iyi hissetmeye devam etmem çok zordur.		1	2	3	4	5	
48. Diğerlerinin beni kabul etmesine ihtiyaç duyarım.	0	1	2	3	4	5	
49. Dünya çapında tanınmak isterim.	0	1	2	3	4	5	

### APPENDIX F: FATHER INVOLVEMENT SCALE SAMPLE ITEMS

Aşağıda babanızla ilişkileriniz hakkında cümleler verilmiştir. Sizden istediğimiz **cocukluk/ergenlik döneminizde babanızla yaşadığınız ilişkinizi** düşünerek, aşağıdaki cümlelerin size ne kadar uyduğunu <u>cümlenin yan tarafında verilen en uygun olan dereceyi</u> **(1, 2, 3, 4, 5) işaretleyerek belirtmenizdir.** 

Çocukluk ve ergenlik döneminizi	Hiçbir				Her
düşündüğünüzde;	Zaman				Zaman
Desteğine gereksinim duyduğunuzda babanız size bu desteği sağlar mıydı?	1	2	3	4	5
Gün içinde düşünce ve duygularınızın üzerinde babanızın varlığını ve etkisini ne kadar hissederdiniz?	1	2	3	4	5
Babanız sizinle birlikte etkinliklere katılır mıydı?	1	2	3	4	5

Çocukluk ve ergenlik döneminizi düşündüğünüzde;	İyi Değil				Mükemmel
Genel olarak babanızı nasıl değerlendirirsiniz?	1	2	3	4	5

### APPENDIX G: PSYCHOLOGICAL CONTROL SCALE—YOUTH SELF-REPORT (PCS-YSR) SAMPLE ITEMS

Aşağıda, anne ve babanızın sizinle olan ilişkisinde söz konusu olabilecek bazı davranışları yer almaktadır. Lütfen, çocukluğunuzu ve ergenliğinizi düşünerek bu davranışların anne ve babanız için ne oranda geçerli olduğunu size uyan ilgili yeri işaretleyerek belirtiniz. Bunu anne ve babanız için ayrı yapmanızı istemekteyiz. Hiçbir maddenin doğru veya yanlış cevabı yoktur. Önemli olan her cümle ile ilgili olarak kendi durumunuzu doğru bir şekilde yansıtmanızdır.

	ANNEM			BABAM				
Çocukluğunuzu ve ergenliğinizi düşündüğünüzde;	Hiç yapmaz	Bazen yapar	Sıklıkla yapar	Her zaman yapar	Hiç yapmaz	Bazen yapar	Sıklıkla yapar	Her zaman yapar
Eğer onu utandıracak bir şey yaparsam, beni görmezden gelmeye çalıştığı olurdu	(1)	(2)	(3)	(4)	(1)	(2)	(3)	(4)
2.Bazı şeyleri onun gibi düşünmediğimde bana soğuk davrandığı olurdu								
3. Yapmamam gerektiğini düşündüğü bir şeyi yaptığımda bana kendimi suçlu hissettirdiği olurdu								
4. Beni başkalarının (arkadaşlarının) önünde utandırdığı olurdu								
5. Ailedeki problemler yüzünden beni suçladığı olurdu								

