



Research article

Childhood physical abuse and aggression: Shame and narcissistic vulnerability

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ABSTRACT

This study examined narcissistic vulnerability and shame-proneness as potential mediators between childhood physical abuse (CPA) and adult anger and aggression. Participants were 400 undergraduate students, 134 of whom had a history of CPA. All participants completed self-report questionnaires assessing history of CPA, shame-proneness, narcissistic vulnerability, physical aggression, trait anger, and hostility. Results indicated abused participants were more angry and aggressive and experienced higher levels of shame-proneness and narcissistic vulnerability than nonabused participants. Multiple mediation analyses showed that narcissistic vulnerability, but not shame-proneness, partially mediated the relation between abuse and physical aggression. However, narcissistic vulnerability and shame-proneness both emerged as partial mediators between abuse and the anger and hostility variables. These findings suggest that narcissistic vulnerability and shame-proneness may function as mediators of adjustment following childhood maltreatment. Study limitations and recommendations for future research are discussed.

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Introduction

Childhood physical abuse (CPA) has been identified as a major risk factor for antisocial outcomes in adulthood, including substance abuse, criminal behavior, and aggression (Egeland, Yates, Appleyard, & van Dulmen, 2002; Norman et al., 2012). In particular, a positive relationship between maltreatment and adult aggression has been well-established (Epps, Carlin, & Ward, 1999; Lansford et al., 2007; Maneta, Cohen, Schulz, & Waldinger, 2012; Scarpa, Haden, & Abercromby, 2010). Though definitions vary, the terms “abuse” and “maltreatment” will be used synonymously throughout this article.

Studies have identified many factors that may influence the relationship between CPA and adult anger/aggression, including maltreatment characteristics, environmental factors, and cognitive and emotional processes (Chen, Coccato, Lee, & Jacobson, 2012; Verona & Sachs-Ericsson, 2005). Specifically, poor emotion regulation has been found to underlie aggressive tendencies in adults with a history of CPA (Gratz, Paulson, Jakupcak, & Tull, 2009; Stevens et al., 2013; Teisl & Cicchetti, 2008).

The hostile and invalidating environment under which CPA occurs hinders the development of emotion regulation skills (Briere, 2002). Previous studies have shown that victims of childhood maltreatment are less adept at identifying and regulating their emotions in a constructive manner (Briere, 2002; Chen et al., 2012; Stevens et al., 2013; Teisl & Cicchetti, 2008). Poor emotion regulation is associated with greater emotional intensity, difficulty understanding and recognizing emotions,

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and negative reactivity to certain emotions (Eisenberg, 2000; Lemerise & Arsenio, 2000). As a result, these individuals with a history of maltreatment are particularly prone to experiencing negative emotions, such as shame and anger (Bennett, Sullivan, & Lewis, 2005; Gold, Sullivan, & Lewis, 2011). Over time, repeated experiences of painful emotions, such as shame, can predispose an individual to experiencing shame more readily than other emotions (Lemerise & Arsenio, 2000; Malatesta & Wilson, 1988). Children and adults prone to experiencing shame are more likely to respond with greater anger and aggression toward perceived sources of threat than less shame-prone individuals (Hejdenberg & Andrews, 2011). Furthermore, shame has been identified as an important mediator of adjustment following maltreatment. Bennett et al. (2005) found that physical abuse was related to shame-proneness, which in turn was associated with increased anger in young children. Similarly, Gold et al. (2011) found that among adults, abusive parenting was related to shame-proneness and violent behavior.

The relationship between shame, anger, and aggression is further evident in studies of pathological narcissism (Ritter et al., 2013; Schoenleber & Berenbaum, 2012; Thomaes, Bushman, Stegge, & Olthof, 2008; Thomaes, Stegge, Olthof, Bushman, & Nezlek, 2011). Narcissism has traditionally been described in terms of overt grandiosity; however, recent conceptualizations describe pathological narcissism as a heterogeneous construct consisting of grandiose and vulnerable forms (Cain, Pincus, & Ansell, 2008; Dickinson & Pincus, 2003; Hendin & Cheek, 1997; Miller & Campbell, 2008; Pincus et al., 2009; Pincus & Lukowitsky, 2010; Ronningstam, 2010). While narcissistic grandiosity and narcissistic vulnerability have some correlates in common, they manifest divergent relationships with a variety of constructs. Both forms are associated with feelings of entitlement, mistrust, and neuroticism (Cain et al., 2008; Wright et al., 2013; Zeigler-Hill, Green, Arnau, Sisemore, & Meyers, 2011). However, narcissistic grandiosity mirrors the diagnostic criteria for narcissistic personality disorder in the Diagnostic and Statistical Manual of Mental Disorders (American Psychiatric Association, 2013) and is characterized by a sense of superiority to others, and exploitative and entitled behaviors. Narcissistic vulnerability is marked by proneness to shame, hypersensitivity, anger, and aggression (Cain et al., 2008; Pincus et al., 2009). Additionally, narcissistic vulnerability is strongly associated with reactive aggression whereas narcissistic grandiosity is only weakly associated with instrumental aggression (Malkin, Zeigler-Hill, Barry, & Southard, 2012). Furthermore, limited evidence suggests that narcissistic vulnerability is positively associated with self-reported childhood physical, emotional, and sexual abuse whereas narcissistic grandiosity is unrelated (Miller et al., 2010; Roche, Pincus, Lukowitsky, Ménard, & Conroy, 2013). Narcissistic vulnerability is also associated with other abuse sequelae such as depression, anxiety, paranoia, and hostility (Miller et al., 2011).

Overview and Predictions

The present study aimed to extend previous research on the link between CPA and adult anger and aggression by examining the potential mediating roles of narcissistic vulnerability and shame-proneness. Consistent with previous research, it was expected that adults with a history of CPA would experience more anger and would report more aggression than nonabused adults. It was hypothesized that adults with a history of CPA would be more shame-prone and would exhibit more narcissistic vulnerability, but not narcissistic grandiosity, than nonabused adults. Finally, narcissistic vulnerability and shame-proneness, taken together, were hypothesized to mediate the relationship between history of CPA and aggression and anger.

Methods

Participants

This study recruited 400 undergraduate students (321 female, 79 male; age, $M = 21.39$ years; age range: 18–49 years) attending a large southern university who received credit toward an undergraduate psychology course in return for their participation. Participants were recruited from the psychology department's research participant pool. After providing informed consent electronically, participants completed questionnaires anonymously via an online delivery system. Due to the sensitive nature of some of the questions, all participants were informed that they may decline to answer any questions and that they may withdraw from the study at any time without penalty.

Measures

Demographic Form. The demographic form was used to collect the following information from the participant: age, gender, parents' marital status, and the number of siblings.

Emotional and Physical Abuse Questionnaire. The EPAB (Carlin et al., 1994) consists of 32 items that describe childhood experiences of discipline and abuse. Participants respond on a 6-point Likert-type scale of frequency of occurrence ranging from 0 (*never*) to 5 (*very frequently*). The physical abuse subscale consisted of 14 items. Participants were determined to have a history of physical abuse if they endorsed one of the nine major assault items (e.g., bones broken, teeth knocked out, being purposefully burned) or if one of the five other items was endorsed as having occurred frequently (e.g., pinched,

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