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**Becoming a Narcissist Whisperer**  
Narrative Concepts and Techniques for  
Working with Narcissistic Personalities

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# Introduction



Amy Treasure-Unsplash

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## What is Narcissism?

- History in the psychoanalytic tradition
- Continuum with personality “styles” leading up to “disorders”
- Its importance is in its pervasiveness in how the traits affect people and their relationships

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## Defining Narcissism

- Narcissistic Personality Disorder (DSM-5)
  - A pervasive pattern of grandiosity (in fantasy or behavior), need for admiration, and lack of empathy, beginning by early adulthood and present in a variety of contexts

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## Defining Narcissism

- To be diagnosed, at least five of the following must be present:
  1. Has a grandiose sense of self-importance.
  2. Is preoccupied with fantasies of unlimited success, power, brilliance, beauty, or ideal love.
  3. Believes that he/she is “special” or unique and can only be understood by, or associates with, other special or high-status people (or institutions).
  4. Requires excessive admiration.

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## Defining Narcissism

- To be diagnosed, at least five of the following must be present (continued):
  5. Has a sense of entitlement (i.e., unreasonable expectations of especially favorable treatment or automatic compliance with his or her expectations).
  6. Is interpersonally exploitative (i.e., takes advantage of others to achieve his or her own ends).
  7. Lacks empathy: is unwilling to recognize or identify with the feelings and needs of others.
  8. Is often envious of others or believes that others are envious of him or her.
  9. Shows arrogant, haughty behaviors or attitudes.

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## Seeing Narcissism in “Spectrum”

- Mental healthy professionals such and Len Sperry, M.D., Ph.D. have pushed for an understanding of disorders of the personality to be seen more in a “spectrum.” With a small percentage of individuals falling into the category of diagnosable Narcissistic Personality Disorder, but with many other individuals showing fewer, or less severe, traits.

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## Narcissism in Action

### **Presentation:**

- Will often enter treatment for reasons they see as external to themselves (e.g., conflict with children, spouse, work, church, legal).
- Will not easily see themselves as part of the “real” problem, but will sometimes give lip service to superficial points (“We don’t communicate well”).

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## Narcissism in Action

### **Typical Family of Origin:**

- Can have been overindulged, over-praised, and over valued by family; but the attention is shallow in nature and deeper and healthy affirmation is withheld
- Examples can include affirmation of performance over personhood, or rewards of money versus engagement.

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## Narcissism in Action

### Defense Mechanisms

- Idealization
  - A person or object is all **good**
- Devaluation
  - A person or object is all **bad**
- Denial
  - Insisting on a point of view that maintains their grandiose view of themselves, actions, and/or achievements; even when logic and evidence clearly show otherwise.

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## Narcissism in Action

- Often times individuals with narcissistic leanings present as charming, powerful, and loyal in relationships.
- They will maintain this as long as the relationship is meeting what they see their needs to be, and will turn to devaluing when it does not.

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## Narcissism in Action

### **Archetype of the Narcissist**

- *The Hero*- The benevolent center of the story who will do good, and should be admired and adored.



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## Narcissism in Women

- Only about 25% of individuals diagnosed with narcissistic personality disorder are women.
- Current studies have focused on traits of willfulness and conflict-driven autonomy as hallmarks of narcissism in females.
- Some theorists suggest that Borderline Personality Disorder can be seen as a feminine version of Narcissism.

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## Other “Cluster B” Personality Disorders

### **Borderline Personality Disorder (DSM-5)**

- A pattern of instability in interpersonal relationships, self-image, and affect, and marked by impulsivity.
- Narcissism is differentiated from Borderline by the relative stability of self-image and lack of self-destructive, impulsivity, and abandonment concerns.

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## Other “Cluster B” Personality Disorders

### **Antisocial Personality Disorder (DSM-5)**

- A pattern of disregard for, and violation of, the rights of others.
- Narcissism lacks the same impulsivity, aggression, and sometimes deceit. Antisocial personalities have less of a need for admiration, and narcissism does not have the same conduct issues.
- It is worth noting that 25% of men who meet the criteria for Narcissist Personality Disorder also meet the criteria for Antisocial Personality Disorder.

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## Other “Cluster B” Personality Disorders

### **Histrionic Personality Disorder (DSM-5)**

- A pattern of excessive emotionality and attention seeking.
- Histrionic tendencies have less excessive pride in achievements, typically more display of emotions, and are not disdainful or dismissive regarding the sensitivities of others.

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## Narrative Therapy Considerations



Aaron Burden-Unsplash

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## Narrative Therapy Overview

### Philosophically built on Post-Structuralism and Existentialism

- **Post-Structuralism** is a philosophical approach which sees no experienced structure as constant, independent of its means of interpretation
- **Existentialism** sees the beginning of all knowledge as stemming from the personal experience of the individual.

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## Working with “Clint”

- High level business executive
- Is coming into therapy with his wife, who is showing signs of depression
- Is stuck on the idea of how wife needs to be “fixed”



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## Working with “Amber”

- New college graduate
- Was recently fired from her job after being caught plagiarizing
- Is coming into therapy at the insistence of her parents



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## The Therapeutic Process

- It has been shown that narcissistic personality styled people see the therapist as less competent, and therapy as less effective, when they are receiving negative feedback.
- Typically narcissists are shown to have highly impaired emotional empathy, but fairly intact (or even enhanced) cognitive empathy.

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## The Therapeutic Process

- One of the wonderful things about Narrative Therapy is that it is focused on helping the client “develop” their story without invalidating it.
- The client is left as the expert on their own story, this place of power in therapy can help narcissistic men feel less defensive and be more open to more permissive for therapeutic guidance.

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## Narrative Therapy Suggested Techniques

- **Thickening a Thin Story**
- **Externalization**
- **Finding Unique Outcomes**
- **Therapeutic Audiencing**

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## Thickening a Thin Story

- Where a **thin story** is rigid and simple (e.g., “My wife is stubborn”), a **thick story** is a layered multistory that allows for different directions to be taken and can incorporate important subplots.

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## Externalization

- Narrative therapy challenges the ways clients make a difficulty a part of their identity. In telling their story, a client might talk about how they felt particularly anxious; like when they started a new job. A narrative therapy approach might ask the client to give a name to this anxious feeling and they may start calling it, “Pressure.”
- The dysfunction then ceases to be part of the identity and therefore will activate fewer defenses.

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## Unique Outcomes

- “Can you remember a time when Pressure didn’t have such a strong voice in your life? When to you think Pressure has been at his weakest in your story?”
- By finding a point when the outside problem was weak or not present, the client can then explore the reasons for this and use the learned strategies to disempower the problem as they are experiencing it presently

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## Therapeutic Audiencing

- As therapy progresses, the client should ideally be in a place where they own and are retelling the positive narrative changes that have taken place during therapy. In response to these new retellings, the therapist engages in a technique called **therapeutic audiencing**, which involves the therapist expressing encouragement and affirmation to the new ways the client is expressing their narrative.

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## Considerations for the Therapist

- Transference/Countertransference
- You know you are sucked in when you “buy into” and react to the caricatures presented
- Length of treatment
- How many Narcissists at a time (self-care)

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## Considerations for the Therapist

- Boundaries
- Comfort with conflict
- Contract at beginning to avoid abrupt/premature termination
- External Support Systems

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