



## The associations of covert narcissism, self-compassion, and shame-focused coping strategies with depression

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We investigated how covert narcissism influences depression through shame-focused coping strategies, and tested the moderating effect of self-compassion in this mediating link. Participants were 316 Chinese international students living in South Korea who completed a battery of measures, including the Hypersensitive Narcissism Scale, the Compass of Shame Scale, the depression items of the Symptom Checklist-90-Revised, and the Chinese Self-Compassion Scale. We found an association between covert narcissism and depression, and this link was mediated by the shame-focused coping strategies of attack self and withdrawal. Further, self-compassion had a significant moderating effect in the relationship between covert narcissism and the coping strategies of attack self or withdrawal. These findings support a moderated mediation model in which self-compassion buffered the relationship between covert narcissism and depression by mediating the link between covert narcissism and the attack self and withdrawal coping strategies. Our findings may be useful for understanding and helping individuals who have a high level of covert narcissism.

### Keywords

covert narcissism;  
depression; self-compassion; shame-focused coping strategies;  
attack self coping style;  
withdrawal coping style

*Narcissism*, as a personality trait, is defined as having a strong focus on the self, accompanied by a lack of empathy, need for admiration, and pervasive pattern of grandiosity (American Psychiatric Association, 2013). Narcissism has been conceptually associated with depression since its inception as a clinical construct (Kealy et al., 2012). Psychodynamic formulations have linked depression to narcissistic identification and self-reproach (Freud, 1917), compensatory grandiosity (A. Miller, 1979), and feelings of emptiness and shame (Kohut & Wolf, 1978). Studies of narcissism as a personality construct suggest that there are two varieties: overt and covert (J. D. Miller et al., 2017; Wink, 1991). The *overt* form, described as grandiosity–exhibitionism, consists of an exaggerated sense of self-importance and a desire for attention (Wink, 1991). Conversely, the characteristics of *covert* or vulnerability–sensitivity narcissism include hypersensitivity to criticism, a lack of self-confidence, and being socially withdrawn; covert narcissism also includes grandiosity, as in the overt form (Wink, 1991).

It has been reported that covert narcissism is a more maladaptive construct for an individual's self-concept than is overt narcissism (Brookes, 2015; Cain et al., 2008), and that it is positively associated with depressive tendencies toward self-criticism (Kealy et al., 2012) and a depressive temperament (Tritt et al., 2010) in nonclinical samples. As a more clinical construct of narcissism compared to overt narcissism (Cain et al., 2008), covert narcissism represents pathological psychological distress and fragility (J. D. Miller et al., 2017). According to previous research, covert narcissism is clinical in nature because of its intrapersonally and interpersonally malevolent correlations, such as with hypersensitivity to criticism,

introversion, shame, vulnerability to depression, incompetence, anxiety, defensiveness, socially avoidant behavior, hostility, vindictiveness, interpersonal distress, low self-esteem, and poor well-being (Brown et al., 2016; Dickinson & Pincus, 2003; Hendin & Cheek, 1997; J. D. Miller et al., 2011; Rose, 2002; Wink, 1991).

According to the Korean Ministry of Education (2019), in 2019 there were 71,067 Chinese students in South Korea, accounting for the largest proportion (44.4%) of international students. However, reports indicate that many Chinese international students in Korea experience cultural maladjustment and acculturative distress in their academic and daily lives (Gu et al., 2017; Lim & Ham, 2009), and are also at high risk for depression (Jeong, 2016; Lee, 2011). Therefore, addressing the psychological health of Chinese international students in Korea is essential.

Most Chinese international students were born after the one-child-per-family policy was introduced in 1978, and government permission for studying abroad was instituted in the same year. Since then, China's radical social changes have facilitated high agency and low communion, which are factors that boost narcissism (Cai et al., 2012). In the limited research on Chinese university students, the findings indicate that those in Beijing and Shanghai engage in more individuating behaviors than do students in Hong Kong and Vancouver (Chen, 2009). Similarly, Chinese students at Beijing Normal University have been found to be more narcissistic than are their Western counterparts at Ivy League universities (Kwan et al., 2009). The evidence indicates elevated levels of narcissism among Chinese youth.

Using clinical observation, Affsprung (1998) found that college students with high covert narcissism frequently presented at college counseling centers with academic and interpersonal problems. Rathvon and Holmstrom (1996) also reported a strong correlation between covert narcissism and scores on the college maladjustment subscale of the Minnesota Multiphasic Personality Inventory-2 (Butcher et al., 1989) among a sample of college students. A similar phenomenon was found to occur in Chinese international students living in Korea: Gu et al. (2017) found that Chinese students in Korea who reported more internalized shame experienced greater maladjustment.

*Shame* is a painful, self-focused affect (Parker, 1998) that has a close association with narcissism in psychodynamic theories developed from clinical case studies (Lewis, 1987; Morrison, 1989). Covert narcissism has been found to be more highly correlated with shame than is overt narcissism (Hendin & Cheek, 1997; Schurman, 2001). Covert narcissists are particularly sensitive to ego threats (e.g., negative feedback, rejection) and usually cannot regulate their shame or shame-related negative emotions (Pincus et al., 2014). Thus, shame seems to be an important emotion in understanding covert narcissism (Hendin & Cheek, 1997; Morrison, 1989) and could be a window for intervention for individuals with high narcissism (Park, 2011). Park (2011) suggested that when covert narcissists face an ego threat, the shame or shame-related negative feelings that arise make them suffer. Thus, they may use shame-related coping strategies to protect themselves.

Nathanson (1992) proposed a shame-focused coping style model, named the *compass of shame*, which includes four coping styles: attack self, withdrawal, attack others, and avoidance. *Withdrawal* refers to attempts to withdraw from shameful situations, in which the individual recognizes and accepts the shame message. *Attack self* is the situation where the shame message is recognized, accepted, and magnified by internalization. In *avoidance*, the shame message is typically not recognized, and the individual attempts to change the situation to become either neutral or positive. *Attack others* means that there is a lack of shame message recognition and the shame is typically not accepted, with attempts made to make others feel worse. Nathanson also hypothesized that the withdrawal and attack self styles share important aspects in recognizing negative experiences and conscious acceptance (internalization) of the message of shame (e.g., the self is found lacking). The degree to which the four styles involve conscious acceptance of shame and shame internalization is as follows: withdraw and attack self are equal in their involvement, and both have a greater degree of involvement than attack others, which, in turn, has a greater degree of involvement than

does avoidance (Elison, Pulos, et al., 2006). Moreover, covert narcissism has been found to be correlated with avoidance or withdrawal (Dickinson & Pincus, 2003; Given-Wilson et al., 2011; Sturman, 2000), self-criticism, and criticism of others (Moon & Rhee, 2018). In particular, self-criticism is congruent with theoretical accounts of shame as a cause of depression (Cain et al., 2008; Jauk & Kaufman, 2018; Kohut & Wolf, 1978).

Studies have provided evidence of the effectiveness of self-compassion in psychotherapeutic interventions (Gilbert, 2010, 2015; Leaviss & Uttley, 2015; Neff & Germer, 2013). *Self-compassion* involves treating oneself warmly during times of hardship and having a positive relationship with oneself (Neff, 2003; Neff et al., 2007). Neff (2003) suggested that self-compassion involves being touched by and open to one's pain, inadequacies, and failures; not avoiding or disconnecting from these; generating the desire to alleviate one's suffering; and healing oneself with kindness. Neff considered that a self-compassionate frame of mind helps people cope with difficult circumstances, particularly self-criticism. For people with high levels of shame and self-criticism, taking part in self-compassion programs has been found to have significant positive effects on depression, self-criticism, and shame (Gilbert & Procter, 2006; Neff & Germer, 2013). It has also been reported that self-compassion tends to decrease symptoms of depression in nonclinical samples studied in both cross-sectional and longitudinal research (Ehret et al., 2015; Kaurin et al., 2018; Krieger et al., 2016; MacBeth & Gumley, 2012; Neff et al., 2007).

Covert narcissists might use more shame-focused coping strategies than do overt narcissists, leading to a greater incidence of depression (Kealy et al., 2012). To the best of our knowledge, only one previous study has been focused on the roles of shame and self-compassion in psychotherapy for narcissistic personality disorder (Kramer et al., 2018). Kramer et al. (2018) suggested that the role of shame may be central in the therapeutic process of treating patients with narcissistic personality disorder, and that one way of resolving their shame is to access underlying self-compassion. Moreover, self-compassion has been found to have a significant mediating effect in the relationship between narcissism and school burnout (Barnett & Flores, 2016). However, neither Kramer et al. nor Barnett and Flores (2016) distinguished between overt and covert narcissism. Therefore, to provide a useful psychological service for Chinese international students living in South Korea, it is necessary to determine (a) whether covert narcissism-related issues (depression) are present, and (b) if so, what is the path between covert narcissism and depression. Our work represents a significant attempt to determine how self-compassion affects the relationship between covert narcissism and depression in connection with shame-focused coping strategies. The hypotheses were as follows:

**Hypothesis 1:** Chinese international students living in Korea who have high (vs. low) levels of covert narcissism will use more shame-focused coping strategies and will show more symptoms of depression.

**Hypothesis 2:** Self-compassion will buffer the impact of the relationship between covert narcissism and depression among Chinese international students living in Korea, through their use of shame-focused coping strategies.

## Method

### Participants

We recruited 358 Chinese international students living in South Korea in March 2019 through a dedicated online communication network for Chinese international students. Among the applicants, 42 failed to answer all three reliability items ("Please check this item with the answer, 1 = never"). If responses were not "1," the respondents had shown that their answers were unreliable and their data were removed from the study. After this elimination process, we had responses from 316 participants for data analysis. The average age of the students was 23.82 years ( $SD = 3.20$ , range = 18–36), and there were 268 (84.8%) women and 48 (15.2%) men. The distribution of proficiency on the Korean language test for foreigners (in which a higher level indicates greater proficiency) was as follows: Level 1 = 3.1%, Level 2 = 1.6%, Level 3 = 6.6%, Level 4 = 33.9%, Level 5 = 19.9%, Level 6 = 34.8%.

## Procedure

We followed the standard ethical processes required by our university's institutional review board, conducted a briefing about the study with the students before they took part, then provided a link to the online survey. When participants clicked on the link, they accessed a more detailed explanatory statement, comprising an informed consent declaration including the study's aim, information about measures, a guarantee of anonymity, participants' rights, the data retention period, and the researchers' contact information. At the bottom of this screen, participants clicked on "Yes" to indicate their consent to take part in the research. Those who finished the survey received a digital coffee coupon (valued at approximately USD 2.50) as a reward for their participation.

## Measures

Detailed results of factor analysis for all measures in our study are provided in the supplementary data.

### **Covert Narcissism**

We used the Chinese version (X. Y. Wang, 2008) of the Hypersensitive Narcissism Scale (HSNS; Hendin & Cheek, 1997) to assess covert narcissism. The HSNS is a unidimensional self-report scale consisting of 10 items. Responses are rated on a 5-point Likert scale ranging from 1 (*very uncharacteristic or untrue, strongly disagree*) to 5 (*very characteristic or true, strongly agree*), where higher scores suggest higher levels of covert narcissism. Hendin and Cheek (1997) determined that the HSNS has a Cronbach's alpha internal consistency range of .62–.75. The Chinese version of the HSNS (X. Y. Wang, 2008) has a previously reported Cronbach's alpha of .73, and in this study it was .69.

### **Shame-Focused Coping Strategies**

We measured shame-focused coping strategies using the Compass of Shame Scale (CoSS; Elison, Pulos, et al., 2006), which is a self-report scale with 48 items based on the theory of shame-focused coping strategies proposed by Nathanson (1992). There are 12 shame-inducing situations, with alternative reactions representing the four characteristic coping strategies: attack self (AS), withdrawal (WD), attack others (AO), and avoidance (AV). Items are rated on a 5-point Likert scale ranging from 1 (*never*) to 5 (*almost always*). A sample item of a shame-inducing situation is as follows: "When I feel rejected by someone..." with possible responses comprising "I soothe myself with distractions" (AV), "I repeatedly think about my imperfections" (AS), "I withdraw from the situation" (WD), or "I get angry with them" (AO). Elison, Pulos, et al. (2006) reported a Cronbach's alpha internal consistency range for the four factors of .74–.91.

Before we conducted our study we secured permission from Elison, Lennon, et al. (2006) to translate the CoSS into Chinese and to use it in our research. With the help of two Chinese-American colleagues working in our field of research, we conducted a back-translation of the scale. Cronbach's alpha internal consistency values of the four factors in this study ranged from .78–.94.

### **Depressive Symptoms**

We assessed depressive symptoms using the Symptom Checklist-90-Revised (Derogatis, 1983), which was translated into Chinese by Z. Y. Wang (1984). It is a 90-item self-report symptom inventory designed to assess patterns of psychological symptoms. In our study we included only the 13 items on depression symptoms, which are rated on a 5-point Likert-type scale ranging from 1 (*not at all*) to 5 (*very much*). Cronbach's alpha internal consistency in this study was .94.

### **Self-Compassion**

The Self-Compassion Scale (SCS; Neff, 2003) is a self-report scale consisting of 26 items designed to measure six dimensions: self-kindness, self-judgment, common humanity, isolation, mindfulness, and overidentification. We used the Chinese SCS (Gong et al., 2014), which consists of 12 items divided across three dimensions: self-kindness (five items), common humanity (four items), and mindfulness (three

items). Items are rated on a 5-point Likert scale ranging from 1 (*almost never*) to 5 (*almost always*). The Cronbach's alpha internal consistency for the three factors in the study by Gong et al. was .77 (range = .56-.74). In our study Cronbach's alpha was .69 for the full scale, .77 for common humanity, .87 for mindfulness, and .54 for self-kindness.

### Data Analysis

First, we tested the reliability and validity of all scales with factor analysis using Mplus 7.0. Next, we analyzed the multiple mediation model and moderated mediation model with the PROCESS macro in SPSS 24.0.

## Results

### Preliminary Analysis

Table 1 displays the descriptive statistics and bivariate correlations for the variables of interest. As expected, covert narcissism had a significant positive correlation with depressive symptoms and with all shame-focused coping strategies, and a significant negative correlation with self-compassion. There were positive correlations between all shame-focused coping strategies and depressive symptoms, and negative correlations between all shame-focused coping strategies and self-compassion, except for the AV coping strategy ( $r = .007, p = .89$ ).

Table 1. Means, Standard Deviations, and Bivariate Correlations for Study Variables

	Korean proficiency level	1	2	3	4	5	6	7	8
1. Covert narcissism	.052								
2. Depressive symptoms	.041	.409***							
3. Self-Compassion Scale	.221***	-.231***	-.444***						
4. Compass of Shame Scale	.012	.514***	.621***	-.391***					
5. Avoidance	.061	.325***	.332***	.007	.724***				
6. Attack self	.010	.475***	.666***	-.499***	.882***	.466***			
7. Attack others	-.019	.367***	.408***	-.320***	.778***	.428***	.555***		
8. Withdrawal	-.007	.512***	.553***	-.364**	.855***	.587***	.704***	.566***	
<i>M</i>	4.70	24.77	27.94	38.84	96.24	26.18	30.86	26.12	17.41
<i>SD</i>	1.23	5.30	10.33	6.60	24.57	6.64	11.23	8.15	15.60

Note. \*\*  $p < .01$ . \*\*\*  $p < .001$ .

### Multiple Mediation Model Analysis: Shame-Focused Coping Strategies as a Mediator

Table 2 and Figure 1 show the results of the mediation model analysis. After controlling for gender, age, and Korean proficiency level, only the paths mediated by AS ( $a_2b_2: \beta = .25, p < .001$ ) and WD ( $a_4b_4: \beta = .08, p < .05$ ) were significant. Thus, we used AS and WD as mediators in the subsequent moderated mediation model analysis. The direct effect of covert narcissism on depressive symptoms was nonsignificant ( $\beta = .18, t = 1.78, p = .076$ ), which indicates that the indirect effect of covert narcissism on depressive symptoms through AS or WD was stronger than was the direct effect (Hayes & Rockwood, 2017). Figure 1 shows that the indirect effect was significant only through AS and WD, which means that these two shame-focused coping strategies strengthened the relationship between covert narcissism and depressive symptoms.

**Table 2. Analysis of the Multiple Mediation Model of Overt Narcissism, Shame-Focused Coping Strategies, and Depressive Symptoms, Adjusting for Gender, Age, and Korean Proficiency Level**

Path 1: Direct effect of CN on DEP ( $c'$ )		$\beta$	<i>SE</i>	<i>t</i> ( <i>p</i> )	95% CI	
					<i>LL</i>	<i>UL</i>
		.18	0.10	1.78 (.076)	-0.02	0.37
Path 2: CN on CoSS		<i>b</i>	<i>SE</i>	<i>t</i> ( <i>p</i> )	<i>LL</i>	<i>UL</i>
AV ( $a_1$ )	Constant	14.40	3.92	3.68 (< .001)	6.69	22.11
		0.42	0.07	6.09 (< .001)	0.28	0.55
AS ( $a_2$ )	Constant	7.46	6.15	1.21 (.226)	-4.63	19.55
		1.03	0.11	9.61 (< .001)	0.82	1.25
AO ( $a_3$ )	Constant	14.69	4.72	3.11 (.002)	5.40	23.97
		0.54	0.08	6.58 (< .001)	0.38	0.71
WD ( $a_4$ )	Constant	-0.61	2.99	-0.20 (.839)	-6.49	5.27
		0.56	0.05	10.76 (< .001)	0.46	0.67
Path 3: CN and CoSS on DEP		<i>b</i>	<i>SE</i>	<i>t</i> ( <i>p</i> )	<i>LL</i>	<i>UL</i>
Constant		2.89	4.97	0.58 (.562)	-6.89	12.68
AV ( $b_1$ )		-0.06	0.08	-0.78 (.437)	-0.22	0.10
AS ( $b_2$ )		0.48	0.06	8.35 (< .001)	0.37	0.59
AO ( $b_3$ )		0.03	0.07	0.38 (.708)	-0.11	0.16
WD ( $b_4$ )		0.28	0.13	2.18 (.030)	0.03	0.53
Indirect effect ( $a \times b$ )		$\beta$	Boot <i>SE</i> ( <i>p</i> )	Boot <i>LL</i>	Boot <i>UL</i>	
AV ( $a_1b_1$ )		-.01	0.02 (.446)	-0.05	0.02	
AS ( $a_2b_2$ )		.25	0.04 (< .001)	0.18	0.33	
AO ( $a_3b_3$ )		.01	0.02 (.711)	-0.03	0.05	
WD ( $a_4b_4$ )		.08	0.04 (< .05)	0.01	0.16	

*Note.*  $N = 316$ . CN = covert narcissism; DEP = depressive symptoms; CoSS = Compass of Shame Scale; AV = avoidance; AS = attack self; AO = attack others; WD = withdrawal; CI = confidence interval; *LL* = lower limit; *UL* = upper limit.

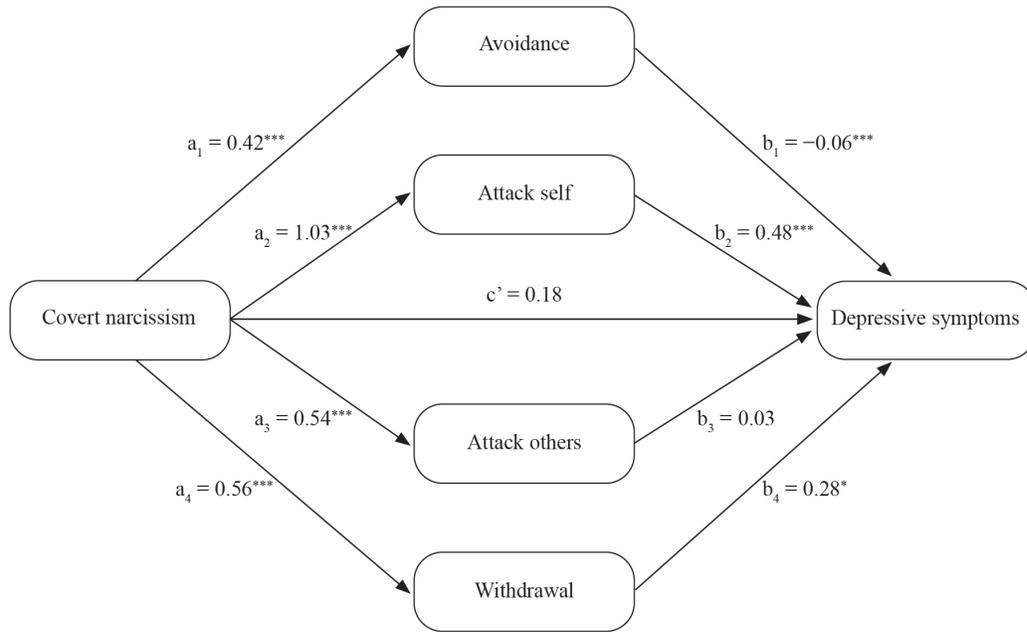


Figure 1. Results of Multiple Mediation Model Analysis

Note. \*  $p < .05$ . \*\*\*  $p < .001$ .

### Moderated Mediation Analysis: Self-Compassion as a Moderator of the Link Between Covert Narcissism and Shame-Focused Coping Strategies

Table 3 shows the moderated mediation model results after controlling for gender, age, and Korean proficiency level. The moderated mediation effects of both AS,  $-0.017$ , boot 95% confidence interval (CI)  $[-0.032, -0.003]$ , and WD,  $-0.005$ , boot 95% CI  $[-0.013, -0.0002]$ , were significant. Table 3 also presents the details of the conditional indirect effects of covert narcissism on depressive symptoms at different values of the SCS.

Table 3. Moderated Mediation Model Results After Adjusting for Gender, Age, and Korean Proficiency Level

Path 1: SCS on AS (M <sub>1</sub> )		<i>b</i>	<i>SE</i>	<i>t</i> ( <i>p</i> )	95% CI		
					<i>LL</i>	<i>UL</i>	
	Constant	23.61	4.74	4.97 (< .001)	14.27	32.95	
	CN (a <sub>11</sub> )	0.81	0.09	8.29 (< .001)	0.62	1.00	
	SCS (a <sub>21</sub> )	-0.76	0.08	-9.47 (< .001)	-0.92	-0.60	
	CN × SCS (a <sub>31</sub> )	-0.03	0.01	-2.51 (< .05)	-0.06	-0.01	
	Model	<i>R</i> <sup>2</sup>	<i>MSE</i>	<i>F</i>	<i>df</i> <sub>1</sub>	<i>df</i> <sub>2</sub>	
		.41	75.79	35.89	6	309	
		<i>p</i>				< .001	
SCS on WD (M <sub>2</sub> )		<i>b</i>	<i>SE</i>	<i>t</i> ( <i>p</i> )	<i>LL</i>	<i>UL</i>	
	Constant	10.34	2.47	4.19 (< .001)	5.48	15.20	
	CN (a <sub>12</sub> )	0.49	0.05	9.60 (< .001)	0.39	0.59	
	SCS (a <sub>22</sub> )	-0.26	0.04	-6.13 (< .001)	0.34	-0.17	
	CN × SCS (a <sub>32</sub> )	-0.02	0.01	-2.61 (< .01)	-0.03	-0.004	
	Model	<i>R</i> <sup>2</sup>	<i>MSE</i>	<i>F</i>	<i>df</i> <sub>1</sub>	<i>df</i> <sub>2</sub>	
		.36	20.51	28.90	6	309	
		<i>p</i>				< .001	
Path 2 AS, WD, and CN on DEP		<i>β</i>	<i>SE</i>	<i>t</i> ( <i>p</i> )	<i>LL</i>	<i>UL</i>	
	Constant	6.69	4.31	1.55 (.122)	-1.79	15.17	
	AS (b <sub>1</sub> )	0.48	0.05	8.72 (< .001)	0.37	0.59	
	WD (b <sub>2</sub> )	0.25	0.11	2.19 (< .05)	0.02	0.48	
	CN (c')	0.17	0.10	1.78 (.075)	-0.02	0.37	
	Model	<i>R</i> <sup>2</sup>	<i>MSE</i>	<i>F</i>	<i>df</i> <sub>1</sub>	<i>df</i> <sub>2</sub>	
		.46	58.21	44.74	6	309	
		<i>p</i>				< .001	
Conditional indirect effect at values of the moderators: SCS		SCS	Index	Boot <i>SE</i>	Boot <i>LL</i>	Boot <i>UL</i>	
	AS	-1 <i>SD</i>	.50	.09	0.34	0.70	
		<i>M</i>	.39	.06	0.28	0.54	
		+1 <i>SD</i>	.28	.07	0.16	0.42	
	WD	-1 <i>SD</i>	.15	.08	0.01	0.31	
		<i>M</i>	.12	.06	0.01	0.24	
		+1 <i>SD</i>	.09	.05	0.01	0.20	
Total moderated mediation effect		Moderator	Mediator	Index	Boot <i>SE</i>	Boot <i>LL</i>	Boot <i>UL</i>
	Index = (a <sub>1i</sub> + a <sub>3i</sub> W) b <sub>i</sub>	SCS	AS	-.017	.007	-0.032	-0.003
	W: Moderator		WD	-.005	.003	-0.013	-0.002

Note. *N* = 316. SCS = Self-Compassion Scale; AS = attack self; CN = covert narcissism; WD = withdrawal; DEP = depressive symptoms; CI = confidence interval; *LL* = lower limit; *UL* = upper limit.

Figure 2 illustrates the moderated mediation model results. The data suggest that stronger self-compassion weakened the effect of covert narcissism on depressive symptoms. (Results for the strategies of AS and WD in regard to the conditional indirect effects of covert narcissism on depressive symptoms are available in the supplementary data.)

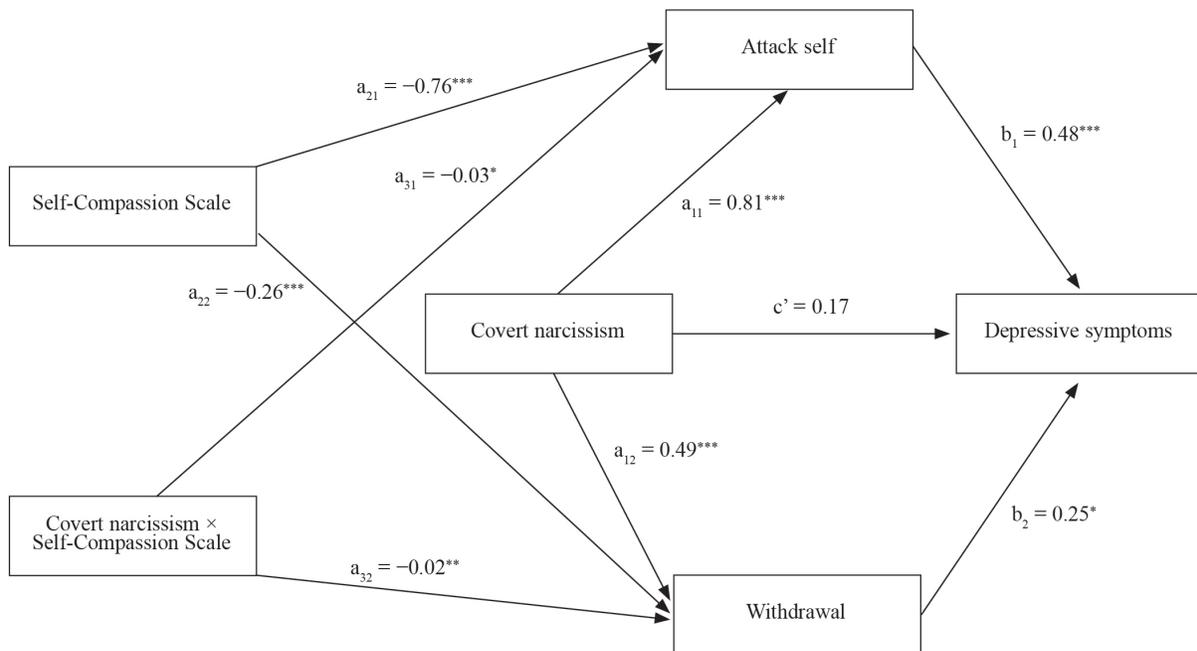


Figure 2. *Effects of Shame-Focused Coping Strategies on Depressive Symptoms as Moderated by Self-Compassion*

Note. SCS = Self-Compassion Scale; CN = covert narcissism; AS = attack self; WD = withdrawal; DEP = depressive symptoms. Effects of SCS on the mediating effects of AS ( $-0.017$ , boot 95% CI  $[-0.032, -0.003]$ ) and WD ( $-0.005$ , boot 95% CI  $[-0.013, -0.002]$ ) in the relationship between CN and DEP.

\*  $p < .05$ . \*\*  $p < .01$ . \*\*\*  $p < .001$ .

To support our proposed direction, we also tested the moderating effect of self-compassion in the link (AS:  $b_2$ ; WD:  $b_4$ ) between each shame-focused coping strategy, and in the link (c) between covert narcissism and depressive symptoms. The results show that neither effect was significant,  $b_2: t = -1.47, p = .14, 95\% \text{ CI } [-0.027, 0.004]$ ;  $b_4: t = -0.56, p = .57, 95\% \text{ CI } [-0.023, 0.013]$ ;  $c: t = 0.76, p = .45, 95\% \text{ CI } [-0.016, 0.036]$ . These results support our hypotheses by showing that self-compassion buffered the link between covert narcissism and the shame-focused coping strategies of AS and WD, and thereby reduced depressive symptoms.

## Discussion

### Theoretical and Practical Implications

Although previous research found a relationship between covert narcissism and depression (Tritt et al., 2010), the mechanism of the relationship was not clarified. Our findings provide a possible explanation, in that we found the shame-focused coping strategies of attack self and withdrawal mediated the relationship between covert narcissism and depressive symptoms. Moreover, the moderating effect of self-compassion in this pathological path that we observed suggests guidelines for understanding of and interventions for people with covert narcissism.

In line with previous work (see, e.g., Given-Wilson et al., 2011; Jauk & Kaufman, 2018; Kealy et al., 2012; Sturman, 2000), we found strong associations among covert narcissism, depressive symptoms, and shame-focused coping strategies. Consistent with Hypothesis 1, the multiple mediation model analysis results indicate that covert narcissism was correlated with depressive symptoms. However, the only mediators of this link were the coping strategies of attack self (Kealy et al., 2012) and withdrawal (Given-Wilson et al., 2011); thus, Hypothesis 2 was only partially supported.

We found that the direct effect of covert narcissism on depression symptoms was not significant. This indicates that one possible consequence of depression in people with high covert narcissism might be the automatic use of shame-focused coping strategies, such as self-criticism or withdrawal. As covert narcissists are especially prone to rejection sensitivity (Besser & Priel, 2010) and are more likely than are nonnarcissists to experience shame in social situations (Lewis, 1987; Morrison, 1989), they may use strong shame-related defense mechanisms, including self-criticism or withdrawal, to protect themselves from damage to their self-esteem or the pain of failure (Nathanson, 1992; Park, 2011).

However, the mediating effect of the defense mechanisms of avoidance and attack others was not significant in our study. Nathanson (1992) suggested that the avoidance and attacking others strategies involve a lower degree of conscious acceptance of shame and shame internalization. In a shame-inducing situation, the subjective experience may include avoidance (e.g., joking about a failing grade or feigning disinterest in a class), and shame may be disavowed or overridden with joy or excitement via distractions. Fossati et al. (2010) also found that attacking others or aggression are strategies that are more closely associated with overt than with covert narcissism.

Moreover, in our study self-compassion had a buffering effect in the relationship between covert narcissism and the shame-focused coping strategies of AS and WD, and this buffering effect also applied in regard to depressive symptoms. This result indicates that greater self-compassion can reduce the effect of covert narcissism on depressive symptoms by alleviating the negative effect of these two coping strategies. Self-compassion allows people to have an accurate and unbiased view of themselves (Peterson, 2014), rather than an inflated self-assessment (Breines & Chen, 2012; Kim et al., 2010). Thus, these self-compassionate qualities can help covert narcissists understand their conditioned emotional responses and maladaptive coping strategies (Neff & Germer, 2013).

Compassion-related interventions, such as compassionate mind training (Gilbert & Procter, 2006) and mindful self-compassion (Neff & Germer, 2013), have been found to buffer against high levels of self-criticism and shame. Given our findings, we suggest that such interventions might also be useful in helping covert narcissists (Kramer et al., 2018) to deal with their shame. As guidance for narcissism treatment is currently limited, our study provides a potential psychotherapy orientation for treating covert narcissists.

### Limitations and Directions for Future Research

There are some limitations to this study. First, as we used cross-sectional self-reports for data collection, it is difficult to establish causation in the reported relationships. However, our additional direction test results support our finding that self-compassion buffers the relationship between covert narcissism and shame-focused strategies. We recommend that in future studies controlled designs are used to test the mediating effect of shame-focused strategies and the moderating self-compassion model. Second, our sample of Chinese international students in South Korea had a higher level of narcissism compared to that of a Korean college student sample in a prior study (HSNS:  $M = 22.33$ ,  $SD = 5.51$ ; Yoon & Shin, 2007); however, our sample size was not big enough, and the gender ratio was too unbalanced to represent all Chinese international students. Thus, research in this area needs more representative samples to increase the validity of our results. Third, the Chinese revision of the SCS (Gong et al., 2014) that we used in our study has validity issues. Gong et al. (2014) removed 14 items from the 26-item SCS (Neff, 2003), because each of these items had item-total interrelationship values below .30, factor loadings below .40, and cross-loadings

above .20. The Cronbach's alpha internal consistency values for the 12-item Chinese SCS (Gong et al., 2014) were as follows: self-kindness = .56, common humanity = .74, mindfulness = .74, and total scale = .77. Thus, it is hard to claim that this short Chinese SCS is appropriate for generalization. In future studies, scholars could test our findings using a different self-compassion scale. Moreover, in light of our research results, development of a more reliable compassion scale for use with Chinese respondents is called for.

## Conclusion

Our findings suggest that among Chinese international students studying in South Korea, the shame-focused coping strategies of attack self and withdrawal mediated the link between covert narcissism and depression symptoms. However, self-compassion weakened this link through buffering the relationships between covert narcissism and attack self or withdrawal. Therefore, although current guidance for narcissism treatment is limited, our findings may help clinicians to engage with clients with covert narcissism.

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Supplementary data for this article are located at <https://github.com/yvonne83g/Selfcompassion/>

## References

- Affsprung, E. H. (1998). Closet narcissistic disorder and the college student. *Journal of College Student Psychotherapy, 13*(2), 5–19.  
[https://doi.org/10.1300/J035v13n02\\_03](https://doi.org/10.1300/J035v13n02_03)
- American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders* (5th ed.). Author.
- Barnett, M. D., & Flores, J. (2016). Narcissus, exhausted: Self-compassion mediates the relationship between narcissism and school burnout. *Personality and Individual Differences, 97*, 102–108.  
<https://doi.org/10.1016/j.paid.2016.03.026>
- Besser, A., & Priel, B. (2010). Grandiose narcissism versus vulnerable narcissism in threatening situations: Emotional reactions to achievement failure and interpersonal rejection. *Journal of Social and Clinical Psychology, 29*(8), 874–902.  
<https://doi.org/10.1521/jscp.2010.29.8.874>
- Breines, J. G., & Chen, S. (2012). Self-compassion increases self-improvement motivation. *Personality and Social Psychology Bulletin, 38*(9), 1133–1143.  
<https://doi.org/10.1177/0146167212445599>
- Brookes, J. (2015). The effect of overt and covert narcissism on self-esteem and self-efficacy beyond self-esteem. *Personality and Individual Differences, 85*, 172–175.  
<https://doi.org/10.1016/j.paid.2015.05.013>
- Brown, A. A., Freis, S. D., Carroll, P. J., & Arkin, R. M. (2016). Perceived agency mediates the link between narcissistic subtypes and self-esteem. *Personality and Individual Differences, 90*, 124–129.  
<https://doi.org/10.1016/j.paid.2015.10.055>
- Butcher, J., Dahlstrom, W. G., Graham, J., Tellegen, A., & Kaemmer, B. (1989). *MMPI-2: Manual for Administration and Scoring*. University of Minnesota Press.
- Cai, H., Kwan, V. S. Y., & Sedikides, C. (2012). A sociocultural approach to narcissism: The case of modern China. *European Journal of Personality, 26*(5), 529–535.  
<https://doi.org/10.1002/per.852>

- Cain, N. M., Pincus, A. L., & Ansell, E. B. (2008). Narcissism at the crossroads: Phenotypic description of pathological narcissism across clinical theory, social/personality psychology, and psychiatric diagnosis. *Clinical Psychology Review, 28*(4), 638–656. <https://doi.org/10.1016/j.cpr.2007.09.006>
- Chen, S. X. (2009). Explaining individuating behavior across cultures: The contributions of values and social axioms. In K. Leung & M. H. Bond (Eds.), *Psychological aspects of social axioms: Understanding global belief systems* (pp. 293–315). Springer SBM.
- Derogatis, L. R. (1983). *SCL-90-R administration, scoring, and procedures manual* (2nd ed.). Clinical Psychometric Research.
- Dickinson, K. A., & Pincus, A. (2003). Interpersonal analysis of grandiose and vulnerable narcissism. *Journal of Personality Disorders, 17*(3), 188–207. <https://doi.org/10.1521/pedi.17.3.188.22146>
- Ehret, A. M., Joormann, J., & Berking, M. (2015). Examining risk and resilience factors for depression: The role of self-criticism and self-compassion. *Cognition and Emotion, 29*(8), 1496–1504. <https://doi.org/10.1080/02699931.2014.992394>
- Elison, J., Lennon, R., & Pulos, S. (2006). Investigating the compass of shame: The development of the Compass of Shame Scale. *Social Behavior and Personality: An international journal, 34*(3), 221–238. <https://doi.org/10.2224/sbp.2006.34.3.221>
- Elison, J., Pulos, S., & Lennon, R. (2006). Shame-focused coping: An empirical study of the compass of shame. *Social Behavior and Personality: An international journal, 34*(2), 161–168. <https://doi.org/10.2224/sbp.2006.34.2.161>
- Fossati, A., Borroni, S., Eisenberg, N., & Maffei, C. (2010). Relations of proactive and reactive dimensions of aggression to overt and covert narcissism in nonclinical adolescents. *Aggressive Behavior, 36*(1), 21–27. <https://doi.org/10.1002/ab.20332>
- Freud, S. (1917). Mourning and melancholia. In J. Strachey (Ed. & Trans.), *The standard edition of the complete psychological works of Sigmund Freud* (Vol. 14, pp. 237–258). Hogarth.
- Gilbert, P. (2010). *Compassion focused therapy: Distinctive features. The CBT distinctive features series*. Routledge/Taylor & Francis Group.
- Gilbert, P. (2015). The evolution and social dynamics of compassion. *Social & Personality Psychology Compass, 9*(6), 239–254. <https://doi.org/10.1111/spc3.12176>
- Gilbert, P., & Procter, S. (2006). Compassionate mind training for people with high shame and self-criticism: Overview and pilot study of a group therapy approach. *Clinical Psychology & Psychotherapy, 13*(6), 353–379. <https://doi.org/10.1002/cpp.507>
- Given-Wilson, Z., McIlwain, D., & Warburton, W. (2011). Meta-cognitive and interpersonal difficulties in overt and covert narcissism. *Personality and Individual Differences, 50*(7), 1000–1005. <https://doi.org/10.1016/j.paid.2011.01.014>
- Gong, H. L., Jia, H. L., Guo, T. M., & Zou, L. L. (2014). The revision of the Self-Compassion Scale and its reliability and validity in adolescents. *Psychological Research, 7*(1), 36–40. <https://bit.ly/3m7p4ou>
- Gu, X. Y., H.-K., Cho, Y.-K., Kim, H.-J., & Hyun, M.-H. (2017). The moderating effect of adaptive cognitive emotion regulation in the relationship between internalized shame and adaption to college among Chinese international students [In Korean]. *Stress, 25*(4), 233–238. <https://doi.org/10.17547/kjsr.2017.25.4.233>

Hayes, A. F., & Rockwood, N. J. (2017). Regression-based statistical mediation and moderation analysis in clinical research: Observations, recommendations, and implementation. *Behaviour Research and Therapy*, 98, 39–57.

<https://doi.org/10.1016/j.brat.2016.11.001>

Hendin, H. M., & Cheek, J. M. (1997). Assessing hypersensitive narcissism: A reexamination of Murray's narcissism scale. *Journal of Research in Personality*, 31, 588–599.

<https://doi.org/10.1006/jrpe.1997.2204>

Jauk, E., & Kaufman, S. B. (2018). The higher the score, the darker the core: The nonlinear association between grandiose and vulnerable narcissism. *Frontiers in Psychology*, 9, Article 1305.

<https://doi.org/10.3389/fpsyg.2018.01305>

Jeong, H. S. (2016). Factors influencing depression in Chinese students studying in Korea: Focused on acculturative stress, academic stress and career stress [In Korean]. *The Journal of the Korea Contents Association*, 16(7), 63–72.

<https://doi.org/10.5392/JKCA.2016.16.07.063>

Kaurin, A., Schönfelder, S., & Wessa, M. (2018). Self-compassion buffers the link between self-criticism and depression in trauma-exposed firefighters. *Journal of Counseling Psychology*, 65(4), 453–462.

<https://doi.org/10.1037/cou0000275>

Kealy, D., Tsai, M., & Ogrodniczuk, J. S. (2012). Depressive tendencies and pathological narcissism among psychiatric outpatients. *Psychiatry Research*, 196(1), 157–159.

<https://doi.org/10.1016/j.psychres.2011.08.023>

Kim, Y.-H., Chiu, C.-Y., & Zou, Z. (2010). Know thyself: Motivated misperceptions of actual performance undermine subjective wellbeing, future performance, and achievement motivation. *Journal of Personality and Social Psychology*, 99(3), 395–409.

<https://doi.org/10.1037/a0020555>

Kohut, H., & Wolf, E. S. (1978). The disorders of the self and their treatment: An outline. *The International Journal of Psychoanalysis*, 59(4), 413–425. <https://bit.ly/2Q7nasd>

Korean Ministry of Education. (2019). *Statistics of international students in Korea* [In Korean]. <https://bit.ly/3lhujkZ>

Kramer, U., Pascual-Leone, A., Rohde, K. B., & Sachse, R. (2018). The role of shame and self-compassion in psychotherapy for narcissistic personality disorder: An exploratory study. *Clinical Psychology & Psychotherapy*, 25(2), 272–282.

<https://doi.org/10.1002/cpp.2160>

Krieger, T., Berger, T., & Holtforth, M. G. (2016). The relationship of self-compassion and depression: Cross-lagged panel analyses in depressed patients after outpatient therapy. *Journal of Affective Disorders*, 202, 39–45.

<https://doi.org/10.1016/j.jad.2016.05.032>

Kwan, V. S. Y., Kuang, L. L., & Hui, N. H. H. (2009). Identifying the sources of self-esteem: The mixed medley of benevolence, merit, and bias. *Self and Identity*, 8(2–3), 176–195.

<https://doi.org/10.1080/15298860802504874>

Leaviss, J., & Uttley, L. (2015). Psychotherapeutic benefits of compassion-focused therapy: An early systematic review. *Psychological Medicine*, 45(5), 927–945.

<https://doi.org/10.1017/S0033291714002141>

Lee, H. J. (2011). Determinants of acculturative stress among Chinese students in Korea: Focusing on socioeconomic characteristics, language skills and social support [In Korean]. *Stress*, 19(2), 183–194.

<https://bit.ly/3dk1Pn7>

- Lewis, H. B. (1987). Shame and the narcissistic personality. In D. L. Nathanson (Ed.), *The many faces of shame* (pp. 93–132). Guilford Press.
- Lim, S.-J., & Ham, G.-S. (2009). Sociopsychological predictors of psychological maladjustments among Chinese students in Korea [In Korean]. *The Korean Journal of School Psychology*, 6(3), 413–427.  
<https://doi.org/10.16983/kjsp.2009.6.3.413>
- MacBeth, A., & Gumley, A. (2012). Exploring compassion: A meta-analysis of the association between self-compassion and psychopathology. *Clinical Psychology Review*, 32(6), 545–552.  
<https://doi.org/10.1016/j.cpr.2012.06.003>
- Miller, A. (1979). Depression and grandiosity as related forms of narcissistic disturbance. *International Review of Psycho-Analysis*, 6(1), 61–76. <https://bit.ly/3rQ7NCd>
- Miller, J. D., Hoffman, B. J., Gaughan, E. T., Gentile, B., Maples, J., & Campbell, W. K. (2011). Grandiose and vulnerable narcissism: A nomological network analysis. *Journal of Personality*, 79(5), 1013–1042.  
<https://doi.org/10.1111/j.1467-6494.2010.00711.x>
- Miller, J. D., Lynam, D. R., Hyatt, C. S., & Campbell, W. K. (2017). Controversies in narcissism. *Annual Review of Clinical Psychology*, 13, 291–315.  
<https://doi.org/10.1146/annurev-clinpsy-032816-045244>
- Moon, S.-B., & Rhee, M.-K. (2018). The relationship between covert narcissism and social networking service addiction proneness: Focusing on the indirect effects of maladaptive cognitive emotion regulation strategies and internalized shame [In Korean]. *The Korean Journal of Health Psychology*, 23(2), 379–396.  
<https://doi.org/10.17315/kjhp.2018.23.2.005>
- Morrison, A. P. (1989). *Shame: The underside of narcissism*. Analytic Press.
- Nathanson, D. L. (1992). *Shame and pride: Affect, sex, and the birth of the self*. W. W. Norton.
- Neff, K. D. (2003). The development and validation of a scale to measure self-compassion. *Self and Identity*, 2(3), 223–250.  
<https://doi.org/10.1080/15298860309027>
- Neff, K. D., & Germer, C. K. (2013). A pilot study and randomized controlled trial of the mindful self-compassion program. *Journal of Clinical Psychology*, 69(1), 28–44.  
<https://doi.org/10.1002/jclp.21923>
- Neff, K. D., Kirkpatrick, K. L., & Rude, S. S. (2007). Self-compassion and adaptive psychological functioning. *Journal of Research in Personality*, 41(1), 139–154.  
<https://doi.org/10.1016/j.jrp.2006.03.004>
- Park, J. S. (2011). Psychoanalysis of shame and narcissism [In Korean]. *Korean Journal of Psychology: General*, 30(3), 889–907. <https://bit.ly/3cTmvDv>
- Parker, S. T. (1998). A social selection model for the evolution and adaptive significance of self-conscious emotions. In M. Ferrari & R. J. Sternberg (Eds.), *Self-awareness: Its nature and development* (pp. 108–134). Guilford Press.
- Peterson, L.-E. (2014). Self-compassion and self-protection strategies: The impact of self-compassion on the use of self-handicapping and sandbagging. *Personality and Individual Differences*, 56, 133–138.  
<https://doi.org/10.1016/j.paid.2013.08.036>
- Pincus, A. L., Cain, N. M., & Wright, A. G. C. (2014). Narcissistic grandiosity and narcissistic vulnerability in psychotherapy. *Personality Disorders: Theory, Research, and Treatment*, 5(4), 439–443.  
<https://doi.org/10.1037/per0000031>

Rathvon, N., & Holmstrom, R. W. (1996). An MMPI-2 portrait of narcissism. *Journal of Personality Assessment*, 66(1), 1–19.

[https://doi.org/10.1207/s15327752jpa6601\\_1](https://doi.org/10.1207/s15327752jpa6601_1)

Rose, P. (2002). The happy and unhappy faces of narcissism. *Personality and Individual Differences*, 33(3), 379–391.

[https://doi.org/10.1016/S0191-8869\(01\)00162-3](https://doi.org/10.1016/S0191-8869(01)00162-3)

Schurman, C. L. (2001). *Social phobia, shame and hypersensitive narcissism* (Published doctoral dissertation). Wright Institute Graduate School of Psychology, Berkeley, CA, USA.

Sturman, T. S. (2000). The motivational foundations and behavioral expressions of three narcissistic styles. *Social Behavior and Personality: An international journal*, 28(4), 393–407.

<https://doi.org/10.2224/sbp.2000.28.4.393>

Tritt, S. M., Ryder, A. G., Ring, A. J., & Pincus, A. L. (2010). Pathological narcissism and the depressive temperament. *Journal of Affective Disorders*, 122(3), 280–284.

<https://doi.org/10.1016/j.jad.2009.09.006>

Wang, X. Y. (2008). *The effect of narcissism on self-esteem and subjective well-being among college students* [In Chinese] (Unpublished master's thesis). Shanxi Normal University, Xi'an, China.

<https://bit.ly/3cAx2Df>

Wang, Z. Y. (1984). Chinese translation of the Symptom Checklist-90 [In Chinese]. *Shanghai Archives of Psychiatry*, 2, 68–70.

Wink, P. (1991). Two faces of narcissism. *Journal of Personality and Social Psychology*, 61(4), 590–597.

<https://doi.org/10.1037/0022-3514.61.4.590>

Yoon, S. M., & Shin, H. C. (2007). Effects of covert narcissism on social interaction anxiety: Mediating effects of experiential avoidance [In Korean]. *The Korean Journal of Counseling and Psychotherapy*, 19(4), 968–982. <https://bit.ly/3dG9OLx>

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