Experiences of Narcissistic Abuse:

An exploration of the effects on women who have had a long term, intimate, relationship with a suspected narcissistic male partner

Sophia Elise

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ABSTRACT

This research explores how women are affected by a long term, intimate relationship with a suspected narcissistic male partner. There has been very little empirical research, other than case studies, into women's experiences in this area, and I have not located any similar research within the New Zealand cultural context. Practitioner research methodology was used to gain an in-depth understanding of women's experiences with a view to improving my therapeutic counselling practice.

Six women, whose ex-partners (from long-term relationships) were judged to have met specific criteria for Narcissistic Personality Disorder, were interviewed using a semi-structured interview method. The enquiry focused on their experiences at three stages of the relationship (beginning, during and post) and how they were affected. Transcripts were then analysed using thematic analysis which showed women were subjected to ongoing and repeated physical and psychological aggression, coercion, social isolation and financial exploitation throughout their relationship. They lost their independence and agency, and the relationships had a significantly detrimental effect on them in most areas of their lives, i.e. mentally, physically, socially, sexually, spiritually and financially. This abuse was insidious, and the women lived in fear for their safety and the safety of their children. The research shows that the deterioration of these relationships happens gradually, it ultimately erodes and annihilates the sense of self, which makes it almost impossible to leave. The negative effects on the women were immense and continued long after the relationships had ended. Despite what they endured, they showed enormous strength, courage and resiliency. Recovery was a long process, often self-directed, including seeking help from counsellors.

Implications from the findings are discussed, and it is concluded that the experience of living long-term with a partner with strong narcissistic behaviours produces some outcomes of domestic abuse that may not be typical for other victims of domestic abuse. I discuss how these women become annihilated and trapped in these relationships and make recommendations on how response-based therapy and narrative therapy could be used to help these women rebuild their lives and sense of self.

ACKNOWLEDGEMENTS

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ABBREVIATIONS

C-PTSD	Complex Post-Traumatic Stress Disorder
DSM-V	Diagnostic and Statistical Manual of Mental Disorders Edition 5
GPS	Global Positioning System
NPD	Narcissistic Personality Disorder
NPI	Narcissistic Personality Inventory
NZAC	New Zealand Association of Counsellors
PNI	Pathological Narcissism Inventory
PTSD	Post-Traumatic Stress Disorder
UREC	Unitec Research Ethics Committee

1. Introduction

This research explores the effects on women of an intimate, long term heterosexual relationship with a male, suspected narcissistic partner. It is a 60-credit dissertation which was conducted as part of a requirement for the Master of Applied Practice for Unitec.

1.1 Choice of terminology and definitions

There are specialised psychology terms used in this dissertation, specifically narcissist, narcissistic personality disorder and narcissism which are further defined in the literature review chapter. I acknowledge that the definition of a narcissist can be contentious for several reasons including the increasingly popular usage in everyday talk and social media to describe anyone who behaves in an unwanted way. In this project, I am using the definitions that are clearly defined by social psychology and psychiatry as listed in the Diagnostic and Statistical Manual of Mental Disorders V (DSM-V) (American Psychiatric Association, 2013).

1.2 Perspective

I am a counsellor working in private practice in Auckland who specialises in relationship therapy as well as working with individuals. In recent years I have counselled women who have experienced a range of abusive behaviours that were perpetrated by a suspected narcissistic male partner or ex-partner. This was not covered in my counsellor education, so I wanted to educate myself further on the dynamics of these relationships, the effects that it can have on women, and the best therapeutic way to work with these women.

There is considerable evidence in the research showing that narcissism is associated with interpersonal violence, psychological abuse, emotional abuse and that heterosexual women are the primary targets of narcissistic males' hostility (Keiller, 2010). In addition, the diagnosis of narcissism is on the increase (Twenge & Foster, 2010), with nearly one in ten people being classified as narcissists, the majority being male (Stinson et al., 2008). All of this will be examined further in the literature review chapter.

The majority of interpersonal studies conducted on narcissism have focused on the narcissistic individual (Keller et al., 2014). There is very little empirical research that has been conducted to explore precisely how narcissism effects partners, let alone from the perspective of the partner. Patten (2016) describes empirical research as making "planned observations" (p. 3) which is a systematic, structured, thoughtful process that can use quantitative or qualitative methods (e.g. interviews or case studies) to gather information.

There is a minimal amount of empirical research that has been conducted from the perspective of the relationship partner and what there is, is primarily case studies many of which are in self-published books and non-peer reviewed conference presentations. There is, however, a plethora of anecdotal writing by people who have experienced relationships with narcissists and by therapists writing on internet sites and in the blogosphere, who are experienced with working with people who had been in those relationships. Although this body of data has not been collected using empirical research methods, its volume makes it apparent that this is an area that needs to be researched and addressed more systematically. Neither the empirical research or anecdotal writing has been within the New Zealand cultural context, and this is another contribution of the research presented here.

While most research has focused on the nature and ontology of narcissism, this project has been deliberately designed to take a different tack by focussing on the perspective of the person who was in a relationship with a narcissist. I acknowledge that there are narratives of men as victims of women who have narcissistic attributes, e.g. Reitz (2015). However, women are the most common victims of intimate partner violence (Marie, Fergusson, & Boden, 2008), and they are the more likely to be the victim of abuse at the hands of male partners who have narcissistic attributes (Beasley & Stoltenberg, 1992; Keiller, 2010; Ryan, Weikel & Sprechini, 2008; Tweed & Button 1998; Waltz, Babcock, Jacobson & Gottman, 2000).

1.3 Research aim and questions

My project aims to gain an in-depth understanding of women's experiences and to explore the effects on them and their lives. This may enable me, and potentially other counsellors, to provide more effective therapeutic interventions to clients. It could also potentially illuminate a path for the counselling profession to provide more training around these issues so that counsellors have a greater knowledge and awareness and be able to detect and manage clients who have experienced these types of relationships with increased sensitivity and competence.

1.4 Method

I have used practitioner research to conduct a qualitative study with a small group of Auckland women. The women were interviewed in person for 60-90 minutes, using a semi-structured interview schedule. A limitation of this project is that the identification of Narcissistic Personality Disorder, according to DSM-V criteria (American Psychiatric Association, 2013), is based purely on the research participant's description of their ex-partners behaviours. It is obviously beyond the scope of this research to carry out a more objective (i.e. observational) assessment on the ex-partners. Therefore, throughout this dissertation, I will refer to these men as suspected narcissists.

1.5 Structure of this dissertation

This dissertation is divided into four chapters and a conclusion.

- Chapter two contains the literature review which examines the empirical and anecdotal literature. It highlights the themes that emerge and the gaps that exist, which helped to guide my project aims, questions and interviews.
- Chapter three discusses the methodology, including data collection and analytical approach.
- Chapter four includes the findings of my interviews, divided into chronological periods of the relationship. It includes the women's experiences as well as the effects it had on them, with excerpts from the transcripts to support.
- Chapter five provides a discussion of and reflection on the findings.
- Chapter six contains considerations and recommendations for counselling practice with this particular client group, as well as suggested areas for future research.
- Chapter seven is the conclusion which includes a summary of the project

2. Literature Review

This literature review will define what narcissism and Narcissistic Personality Disorder (NPD) are, how they are measured, the incidence of them, and highlights the general behaviours that empirical research has connected with narcissism. I will then discuss in depth the behaviours that narcissistic people display in romantic relationships and how these behaviours may affect partners, with particular attention to aggression (physical, psychological and sexual), infidelity, and how narcissism affects overall relationship satisfaction. I will compare and contrast what empirical and anecdotal literature say about the effects of these relationships on women. Throughout this chapter, I will identify the absences and significant gaps in the literature and pose some questions around these. The chapter will conclude with summarising the gaps in existing literature and counsellor education which this project is aimed at starting to fill.

2.1 Definition and measures of narcissism and NPD

Narcissism is a word that has increased in mainstream usage and has become part of everyday talk about people, e.g. in conversation, on social media, news articles, television. It appears to be used to describe anyone (often men) that someone finds unpleasant, obnoxious, selfish, vain or challenging to deal with. It is now often used to describe individuals who are abusive or lack empathy or by those who have experienced a bad break up. Arabi (2016) is concerned that this will overshadow those who have had an experience with a fully-fledged narcissist, a view that I share. Therefore, with this study, I am working with a particular set of definitions that are taken from psychology and psychiatry.

Narcissism and narcissists are measured and defined in different ways, which is often contingent on the researcher or writer's background or discipline (Pincus et al., 2009). People with a clinical psychology or psychiatric background will often define Narcissist as someone who has Narcissistic Personality Disorder (NPD) which is diagnosed by the criteria in the DSM-V (American Psychiatric Association, 2013) and belongs to the Cluster B Personality Disorder group in the DSM-V. They view it as something that people either have or do not have (Fossati et al., 2005). This is assessed through clinical interviews and self-report measures (Pincus et al., 2009) and a key criterion is that it has a negative impact on the person experiencing the disorder.

However, social-personality psychology conceptualises narcissism as a personality trait that exists in everyone and can be measured on a continuum (Raskin & Terry, 1988), which is sometimes referred to as "normal narcissism" (Sedikides et al., 2004, p. 400). Individuals can express varying degrees of narcissism, i.e. low, moderate, high, and normal narcissism is seen as pathological when it is extreme and causes impairment and interpersonal problems (Miller, Lynam, Hyatt & Campbell, 2017). There is no standard cut off for being described as a "narcissist"

(Foster & Campbell, 2007) and it is standard practice to use the term "narcissist" when referring to people who score towards the higher end of the narcissism continuum (Campbell, Foster & Finkel, 2002; Keller et al., 2014; Miller & Campbell, 2010; Raskin & Hall, 1979). The self-report measure of the Narcissistic Personality Inventory (NPI), created by Raskin and Terry (1988), is the most commonly used measure for narcissism in social-personality psychology (Miller & Campbell, 2008) and in 2009 Pincus et al., created the Pathological Narcissism Inventory (PNI) to measure pathological narcissism.

Despite the different conceptualisations of narcissism and narcissists, the literature agrees that antagonism (i.e. deceitfulness, callousness, selfishness, oppositionality) is central to it (Lamkin, Lavner & Shaffer, 2017; Miller et al., 2017; Pincus et al., 2009; Samuel, Lynam, Widiger & Ball, 2012). The key traits are; arrogance, lack of empathy, grandiosity, a sense of entitlement (American Psychiatric Association, 2000; Lamkin, Campbell, vanDellen, & Miller, 2015; Samuel et al., 2012), preoccupation with self (American Psychiatric Association, 2013; Lamkin et al., 2015) and manipulativeness (Brown, Budzek & Tamborski, 2009; Samuel et al., 2012).

Narcissism is generally divided into two subtypes, vulnerable and grandiose, both of which exhibit intrusive[1] and antagonistic[2] behaviours and are associated with interpersonal dysfunction (Lamkin et al., 2015). They differ in a few ways: grandiose narcissists are immodest, self-promoting, grandiose, extroverted, and attention seeking, whereas vulnerable narcissists are vulnerable, distrustful of others, socially avoidant, prone to anxiety and depression and more likely to present to services for help (Miller et al., 2017). According to Kealy and Ogrodniczuk (2011) fluctuation between the two subtypes is typical and contingent on the person's success or failure. Often these fluctuations between the two need to be witnessed by a clinician, for the clinician to recognise that they are engaging with a narcissist. Therapists often do not recognise the links between problematic interpersonal behaviour and narcissism.

2.2 Prevalence of narcissism and NPD

Although narcissism rates are often quoted as being 1 in 10 (Arabi, 2016), in a study conducted by Stinson et al., (2008) with a sample of over 34,000 men and women it was found that 6.2% of the American population experience NPD (3.2% in over 65's and 9.4% of people in their 20's). The American Psychiatric Association (2000) states that 75% of people with NPD are males, however, Stinson et al., (2008) found that it is was 62%. Levy, Reynoso, Wasserman and Clarkin,

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[1] Intrusive: Encroach on others personal space, lack of sensitivity to other people's feelings, exhibitionism that is ill timed and lacking in consideration for others, disregard others personal boundaries, offer unsolicited advice, take what they feel entitled to (Kealy & Ogrodniczuk, 2011)

[2] Antagonistic: Behaviours that include deceitfulness, callousness, selfishness, oppositionality (Lamkin et al., 2015) and showing active opposition or hostility towards someone or something.

(2007) point out that statistical discrepancies in the diagnostic incidence of narcissism among men are likely to vary according to the clinical setting, type of practice and theoretical viewpoint.

Narcissism rates may be underreported due to the unlikelihood of narcissists seeking therapeutic help (Twenge, Miller & Campbell, 2014). In addition, to assert a diagnosis of NPD the symptoms must cause significant impairment and distress to the individual, which is often not the case as narcissism affects more negatively those closest to the person, rather than the narcissist (Foster & Twenge, 2011). There are other factors that could reduce the true prevalence of narcissism, such as the over-reliance on self-report data, the tendency of narcissists to self-enhance and have a more positive perception of themselves than others do (Carlson, Vazire & Oltmanns, 2011), and their difficulty in being entirely honest when talking about their lives and daily experiences (Holtzman, Vazire & Mehl, 2010).

Researchers do agree that narcissism scores are higher in men than women (Foster, Campbell & Twenge, 2003; Grijalva et al., 2015; Larson, Vaughn, Salas-Wright, & Delisi, 2015), men score higher on the NPI than women do (Twenge, Konrath, Foster, Campbell & Bushman, 2008) and they also have higher NPD counts than women (Miller, Campbell & Pilkonis, 2007). Researchers also agree that overall narcissism scores have risen in the United States in the last 30 years (Twenge & Foster, 2010; Twenge et al., 2008).

2.3 Cultural influences on narcissism

Narcissism can be understood as culturally dependent on its expression and how it is understood and experienced by others. Foster et al., (2003) and Hamamura and Heine (2008), found that narcissism scores are higher in individualistic cultures, which put more emphasis on agentic values (e.g. United States of America and Europe) compared with collectivistic cultures who put more emphasis on communal values (e.g. Asia, Middle East). Research showed that in eastern countries people high in narcissism showed a preference for caring partners (Tanchotsrinon, Maneesri & Campbell, 2007) whereas in western cultures narcissists were found to prefer high status and admiring partners (Campbell, 1999). A study by Lamkin et al., (2015) found that there was no support for the "victim preference" where the narcissist seeks out vulnerable partners (i.e. history of maltreatment or difficulties) who are more meek, passive and more pliable, which is often stated in anecdotal writing as well as popular writing on the internet.

Studies show that the increase in the prevalence of narcissism within the United States of America coincides with the greater cultural emphasis on promotion of self-esteem (Twenge & Campbell, 2009). In addition, narcissism scores can vary across ethnic groups, e.g. African Americans and Hispanics score higher than Caucasians (Foster et al., 2003; Zeigler-Hill & Wallace, 2011) and Caucasians score higher than Asian Americans (Twenge & Foster, 2008).

However, the higher frequency in minority groups may be due to them being subjected to more diagnostic assessments.

Although American research shows that the statistical occurrence of narcissism and entitlement has increased over time, research conducted in New Zealand does not show that entitlement is increasing (Stronge, Milojev & Sibley, 2018). This illustrates how findings can differ depending on the cultural environment where studies are conducted and why caution needs to be taken when generalising research findings to other cultures. It may also be especially important to research narcissism in our unique bi-cultural context.

2.4 Behaviour of narcissists in general

Narcissism has been heavily researched over the past 30 years and it is well documented that, when compared with non-narcissistic people, narcissists display higher levels of provoked and unprovoked aggression (Bushman & Baumeister, 1998; Bushman & Thomaes, 2011; Krizan & Johar, 2015; Reidy, Foster & Zeichener, 2010; Twenge & Campbell, 2003), anger and aggression after social rejection (Twenge & Campbell, 2003), violence (Bushman & Thomaes, 2011), hostility, rage and anger (Krizan & Johar, 2015) and overt and cyberstalking (Menard & Pincus, 2012). They are also more likely to pursue casual sex (Foster, Shrira & Campbell, 2006) and use sexual coercion and commit rape (Baumeister, Catanese & Wallace, 2002). Narcissists also display higher levels of vengeance and vindictiveness (Brown, 2004; Byrne & O'Brien, 2014; Ogrodniczuk, Piper, Joyce, Steinberg & Duggal, 2009), envy (Krizan & Johar, 2012) and manipulativeness (Konrath, Corneille, Bushman, & Luminet, 2014; Nagler, Reiter, Furtner & Rauthmann, 2014). In addition, they will blame others for their failures (Campbell, Reeder, Sedikides & Elliot, 2000), and derogate and devalue others (Morf & Rhodewalt, 1993). When compared with non-narcissists, narcissistic people are also found to have lower levels of helpfulness (Lannin, Guyll, Krizan, Madon & Cornish, 2014), empathy (Jonason & Krause, 2013; Lannin et al., 2014; Nagler et al., 2014), forgiveness (Exline, Baumeister, Bushman, Campbell & Finkel, 2004), caring (Campbell, 1999) and selflessness (Campbell, et al., 2002).

2.5 Behaviours of narcissists in romantic relationships

In heterosexual romantic relationships, when compared with non-narcissistic people, research shows that narcissists are more manipulative and deceitful (Campbell et al., 2002), cruel (Keller et al., 2014; Wink 1991), domineering and controlling (Campbell et al., 2002; Ogrodniczuk et al., 2009), more selfish, and less empathetic, tolerant and respectful (Brunell & Campbell, 2011; Campbell, Bonacci, Shelton, Exline & Bushman, 2004; Campbell, Brunell & Finkel, 2006). Narcissists are more likely to exploit or use relationships to benefit themselves (Campbell, 1999), and exhibit more violence (both courtship and marital) (Baumeister et al., 2002; Ryan et al., 2008).

Narcissists have more frequent conflicts with romantic partners (Horan, Guinn & Banghart, 2015) and are more likely to react by being unforgiving, vengeful and not actively repairing or maintaining the relationship (Exline et al., 2004; Peterson & DeHart, 2014). They will typically use stonewalling tactics (Keller et al., 2015), contempt, defensiveness and criticism during conflicts (Peterson & DeHart, 2014). They will also devalue, deny, minimise and blame their romantic partner (Gormley & Lopez, 2010).

Again, when comparing narcissists to non-narcissists, they tend to be less committed and faithful (Foster et al., 2006; Myers, Zeigler-Hill & Barry, 2013), and are more likely to be unfaithful (Hunyady, Jospehs & Jost, 2008; McNulty & Widman, 2014). Narcissists will deliberately induce jealousy (Tortoriello, Hart, Richardson & Tullett, 2017) and have a ludus (game playing) love style, which includes deception, paying attention to other romantic potentials, keeping partners uncertain about commitment and an aversion to intimacy (Campbell et al., 2002).

Keiller (2010) showed that hostility targeted toward heterosexual women is a robust indicator of narcissism. It was found that heterosexual narcissistic males hold an angry, resentful and adversarial stance towards heterosexual women, more so than towards heterosexual men, gay men, and lesbians. This was also linked with them holding a patriarchal orientation to heterosexual relationships, holding traditional gender role attitudes, being particularly invested in patriarchal control over and subordinating women. This means that heterosexual women are more likely to be the target of narcissistic males' negative behaviours.

Narcissism by itself has minimal dysfunction, and in general, it requires another person to be involved before the narcissistic traits are exhibited, i.e. a narcissistic person cannot be arrogant or exploitative by themselves, they need a person to derogate or exploit. Therefore, it is a social phenomenon (Clifton, 2011) and manifests in relationships with others and causes difficulties in the lives of those that interact with them (Kealy & Ogrodniczuk, 2011). Narcissistic behaviours do not exist in isolation, and it is essential to understand how this behaviour affects other people, especially given the range of negative behaviours others can be exposed to.

With the findings above, it is unsurprising that research also shows that narcissists encounter more relationship problems (Campbell, 2005), and that narcissism adversely affects and is detrimental to the quality of the relationship (Campbell et al., 2002; Keller et al., 2014; Khodabakhsh & Besharart, 2011; Lamkin et al., 2017; Ogrodniczuk et al., 2009; Raskin & Terry, 1988; Wurst et al., 2017).

In summary, narcissism is a trait that exists on a continuum which can be measured using the NPI, and NPD can be diagnosed using the DSM-V criteria. Approximately six per cent of the American population has NPD, with 62% being male. There are two types of narcissists,

grandiose and vulnerable, both of which have antagonism at its central core. There has been considerable research conducted on narcissism which links it to many negative behaviours, as well as being detrimental to romantic relationships and causing distress to those that interact with them.

I am now going to move on to looking more in-depth at behaviours of narcissists in relationships which have been broken down into five themes: Physical, psychological and sexual aggression, infidelity, and relationship satisfaction. Following this is a detailed review of the effects that these relationships have on women and the gaps in the existing research.

2.6 Narcissism and aggression

Foster & Twenge (2011), acknowledge that the heightened volatility, quick temper and aggressive demeanour of a narcissist may ultimately cause serious damage to relationships and does not bode well for relationship survival or stability. Women may have experienced various forms of aggression in a relationship with a narcissistic male partner which could have a significant effect on their wellbeing. I will discuss aggression under three subheadings: physical, psychological and sexual.

2.6.a Physical aggression

Women are more likely to experience physical aggression and violence in a relationship with a narcissist than a non-narcissist, which could adversely affect them in various ways. Aggression is a trait of narcissism that has received considerable empirical attention from multiple perspectives, including self-reports as well as reports, observations, and experiments involving peers, acquaintances and romantic partners. The prevailing view in the literature is that people high in narcissism engage in more frequent relational aggression (Foster & Twenge, 2011).

More specifically, narcissists are more likely to engage in physical aggression and violence towards their partners (Baumeister, Smart & Boden, 1996; Keller et al., 2014; Larson et al., 2015). Several studies have shown that males' narcissism is directly linked to higher rates of physical assaults on their partners (Beasley & Stoltenberg, 1992; Ryan et al., 2008; Tweed & Button 1998; Waltz, Babcock, Jacobson & Gottman, 2000), and higher recidivism rates for spousal abuse (Hamberger & Hastings, 1990).

An interesting finding by Keller et al., (2014), was that physical aggression was not always unilateral. One effect of being in a relationship with a narcissist is that women were more likely to be physically aggressive towards their male narcissistic partners than men were towards their narcissistic female partners. These researchers suggest that partners found the narcissist to be obnoxious and frustrating which in turn may have increased their interpersonal aggression. This could mean that, because of the difficulties of interacting with a narcissist, a woman may find

herself acting in ways that lead her to feel ashamed and blame herself for problems in the relationship.

Despite the evidence that women are more likely to experience violence from their narcissistic partners, the current research on physical aggression does not address how this behaviour may affect them. We can assume that it will affect women based on the general domestic violence research, which shows that violence is detrimental emotionally, physically (Jordan, Campbell, & Follingstad, 2010), socially and financially (Fields, 2012). The domestic violence research shows that women subjected to violence may experience depression, addiction or Post-Traumatic Stress Disorder (PTSD) (Coker et al., 2002). Given the prevalence of aggressive, violent, controlling and demeaning behaviours that narcissists direct towards their partners, there will be a relationship between narcissism and domestic violence. It is therefore likely that the effect family violence has on women will be similar to the effects that a relationship with a narcissist has on women. However, despite the extensive research on behaviours and characteristics of narcissists, there is very little research into how this affects women, a gap that this research aims to address.

2.6.b Psychological aggression

Women in relationships with narcissistic males are likely to experience various forms of psychological aggression that can have a detrimental effect on their relationship satisfaction and mental health. Psychological aggression is very common and affects almost all couples at some stage (Lawrence, Yoon, Langer & Ro, 2009), but it has received considerably less research attention than physical aggression (Yoon & Lawrence, 2013) and even less in the context of narcissism.

Psychological aggression is verbal or non-verbal behaviour that is directed at harming a partner's emotional wellbeing (Yoon & Lawrence, 2013). It can include a range of behaviours such as threats of physical abuse, violence, jealousy, damage to property (Follingstad, Rutledge, Berg, Hause & Polek, 1990), intimidation, isolation, degradation, control, domination (Follingstad & Dehart, 2000), swearing at or insulting a partner, sulking or refusing to talk about an issue, storming out of a room/house, doing or saying something to spite the partner (Straus, Hamby, Boney-McCoy & Sugarman, 1996) emotional withdrawal, manipulation and callousness (Sullivan, Parisian and Davidson, 1991).

Several studies have discussed the link between narcissism and perpetration of psychological aggression. Lachkar (2001) stated that a narcissistic person is the more prevalent perpetrator of emotional abuse than other partners and Brunell, Campbell, Smith & Krusemark (2004) and Campbell (2005) state that partners of narcissists can experience psychological control in a relationship. Since then, only I can only find two studies that have specifically examined

narcissism and psychological aggression. Gormley & Lopez (2010) found that narcissistic entitlement is a robust indicator of men's perpetuation of psychological abuse in relationships. Gewirtz-Meydan & Finzi-Dottan (2018) found that narcissism is associated with increased levels of psychological aggression and narcissists perpetrate more psychological aggression towards their partner than non-narcissists. These studies did not go into any detail as to what form the psychological aggression took, nor its consequences for the partner.

Although there has been limited research conducted on how narcissists behave in romantic relationships and how it relates to the use of destructive behaviours with partners (Keller et al., 2014), we can get some idea of what form the psychological aggression may have taken by looking at other existing research. It shows that people high in narcissism exhibit several behaviours that fall under the definition of psychological aggression. In relationships they are found to dominate and control (Byrne & O'Brien, 2014; Hart, Adams, Burton & Tortoriello, 2017; Kealy & Ogrodniczuk, 2011; Ogrodniczuk et al., 2009); derogate (Campbell, Rudich & Sedikedes, 2002), denigrate and devalue their partners (Kealy & Ogrodniczuk, 2011); be vindictive (Hart et al., 2017; Ogrodniczuk et al., 2009), vengeful (Back et al., 2013; Brown, 2004) and unforgiving towards their partner (Back et al., 2013; Exline et al., 2004); deliberately induce jealousy in partners to gain control and power and sometimes for revenge (Tortoriello et al., 2017); and exhibit intrusiveness in their relationships, disregarding other's personal space, feelings, boundaries and taking what they feel they are entitled to (Kealy & Ogrodniczuk, 2011). During conflict they have been found to use contempt and criticism (Horan et al., 2015), name-calling, insulting, complaining and post-conflict they derogate their partner (Peterson & DeHart, 2014). As is the case with narcissism research, the current research does not directly address the effects of narcissism on the female partner.

More recent research by Struzenberg (2016) on a group of people aged 18-30 years, showed that narcissists "love bomb" their partners at the start of a relationship. Love bombing is where the person uses excessive communication (often positive and flattering) to ultimately gain power and control over the others life. Although they did not investigate the effects this behaviour has on partners, they did suggest that further research was warranted as this behaviour could be a gateway into more serious behaviours such as psychological abuse/control or intimate partner violence.

To try to understand what a women's experience may have been in relationships with narcissists, we can look to study four in Campbell et al., (2002). They asked participants to compare past relationships with a narcissist and non-narcissist and found that participants described the narcissistic ex-partners as game playing, manipulative, and controlling. These behaviours could fall under the umbrella of psychological aggression, although they were not labelled as such in

the studies, and although they were identified by the research subjects, we again do not know what the effects are on the female partners.

The only researchers who have specifically examined the connection between narcissism, the perpetration of psychological aggression, and how it affects relationship satisfaction are Gewirtz-Meydan & Finzi-Dottan (2017). This was conducted on couples who had been together for at least three years and had a child together, and the majority were born in Israel. They found that the higher the men's narcissism, the higher the perpetration of psychological aggression, but it was not negatively linked to their female partner's satisfaction. I find this surprising given that research outside the narcissism arena states that psychological aggression can lead to victims experiencing lower levels of relationship satisfaction (Shortt, Capaldi, Kim & Tiberio, 2013).

Studies outside the narcissism arena show that psychological aggression can result in post-traumatic stress symptoms, depression and anxiety (Comecanha, Basto-Pereira & Maia, 2017), fear (O'Leary, Foran & Cohen, 2013), illegal drug use and cognitive impairment (Straight, Harper & Arias, 2003). With such an array of negative, and potentially damaging behaviours being exhibited by people high in narcissism in relationships and the acknowledgement that narcissistic people perpetrate psychological aggression, it is surprising that researchers have not extended these studies to explore how it affects partners.

There seems to be an overwhelming gap in the research of experiences and effects on women of being in a relationship with a narcissistic partner. There has been an enormous amount of research on the symptoms and behaviours of narcissists, measures of narcissism and how narcissism develops but the people that they encounter have been very neglected by researchers. The research that is being done is focussed towards ultimately increasing professional understanding of narcissism, not how to help the victims or potential victims. I wonder if this may be because researchers think that the domestic violence literature and research already captures the experiences of these women.

2.6.c Sexual aggression

Males who are high in narcissism are more likely to be sexually aggressive or coercive towards women. Narcissists construe sexual behaviour as involving manipulation and power (Foster et al., 2006) and place more emphasis on deriving physical pleasure and less emphasis on deriving emotional intimacy from sexual behaviours (Foster et al., 2006; Widman & McNulty, 2010). Kosson, Kelly and White, (1997) compared men that were high in narcissism with men who were low in narcissism and found that they were much more likely to use arguments and pressure to force women into unwanted sexual activity. Bushman, Bonacci, van Dijk and Baumeister (2003) found that males high in narcissism will react more negatively to sexual refusal and be more

punitive towards women who refuse to provide sexual stimulation. In addition, they found, narcissists have less empathy towards a woman who may be victims of sexual aggression or coercion and are more likely to hold "rape conducive beliefs," i.e. "no "means" yes", or that rape victims share the responsibility. Larson et al., (2015) found that males scoring high in narcissism traits, as taken from the DSM-IV, were seven times more likely to force sex than males lower in narcissism traits. A number of studies show a link between narcissism and sexual aggression including rape (Baumeister et al., 2002; Bushman et al., 2003; Chantry & Craig, 1994; Widman & McNulty, 2010; Zeigler-Hill, Enjaian & Essa, 2013) and sexual coercion (Baumeister et al.,1996; Baumeister at al., 2002; Bushman et al., 2003; Widman & McNulty, 2010).

In general, sexual violence can lead to women experiencing PTSD, depression, anxiety, fear, alcohol/drug dependency, suicidal ideation or suicide attempt post-assault (World Health Organisation, 2013). Research on intimate partner sexual assault shows that it is especially traumatic when compared with a non-intimate or past partner sexual assault. It is the strongest predictor of women experiencing PTSD, stress, and dissociation post-assault (Temple, Weston, Rodriguez & Marshall, 2007).

Foster and Twenge (2011) state that nearly all research that has examined narcissism and sex has been done so from the perspective of the narcissists therefore almost nothing is known about the sexual partners of narcissists. However, considering the existing research mentioned above, we can infer that women may experience negative sexual experiences in their relationships with narcissistic males with consequently harmful effects for their mental health. Given that intimate partners commit a third of all sexual assaults (Bagwell-Gray, Messing & Baldwin-White, 2015), and narcissistic people are more likely to commit sexual assaults, it is likely that female partners may have experienced this in their relationships. There is a gap in the literature, firstly to assess the extent to which women in these relationships have experienced a sexual assault by their narcissistic partners, and secondly, what is the severity and outcome of these assaults.

2.7 Narcissism and infidelity

A male partner who is high in narcissism is more likely to be unfaithful which may have a detrimental effect on the relationship functioning and their partner's wellbeing. An early study by Hurlbert, Apt, Gasar, Wilson & Murphy (1994) found that males with NPD more likely to be unfaithful than non-narcissistic males (46% vs 20%). Buss & Shackelford (1997) expanded on this and found that a husband's narcissism was directly related to three types of infidelity; flirting, kissing and a brief affair, although the understanding of infidelity has shifted and changed over the past 20 years. In a study by Campbell et al., (2002), where the majority of participants were females, they said that their suspected narcissistic ex-partner was more flirtatious and less committed than their non-narcissistic ex-partner. Three other studies have found a direct link

between narcissism and infidelity (Hunyady et al., 2008; Atkins, Yi, Baucom & Christensen, 2005), more specifically McNulty & Widman (2014) found that sexual narcissism, which includes, sexual exploitation, a grandiose sense of sexual skill, sexual entitlement and a lack of sexual empathy, was positively associated with marital infidelity.

Although none of these studies examined the effects on partners of the infidelity, general relationship literature shows that infidelity is associated with decreased relationship satisfaction (Spanier & Margolis, 1983), increased psychological distress for both partners (Cano & O'leary, 2000), and is one of the most common predictors of divorce (Amato & Rogers, 1997). These studies raise questions about whether a narcissist's lack of empathy and remorse may exacerbate the adverse effects on their female partner or whether there is also the possibility that if the women have been unfaithful themselves, they may be experiencing guilt and shame, or possibly retribution from their partner, given that narcissists are more vengeful and less forgiving.

2.8 Narcissism and relationship satisfaction

Narcissism can cause a relationship to deteriorate and is detrimental to relationship functioning, which results in low relationship satisfaction for romantic partners. Twenge & Campbell, (2009) state "Narcissism is absolutely corrosive to social relationships" (p. 220) and especially damaging to romantic relationships. This is supported by the general acknowledgement in research papers that narcissism adversely affects, and is destructive to, romantic relationship functioning for various reasons, including: lack of empathy, lack of emotional intimacy, high entitlement, conflict behaviours, game playing, infidelity, controlling behaviours, perception discrepancy, deception and dishonesty (Byrne & O'Brien, 2014; Campbell et al., 2002; Campbell & Brunell, 2006; Foster & Twenge, 2011; Keller et al., 2014; Khodabakhsh & Besharat, 2011; Twenge & Campbell, 2009). Spouse reports are especially helpful in identifying the negative impact that NPD has on the quality of romantic relationships (South, Turkheimer & Oltmanns, 2008) yet there are very few studies that have sought spouse or partner perspectives. Oltmanns and Lawton (2011) stress that informants (partners, friends and family) can provide valid, reliable and accurate descriptions about NPD, which is independent of the individuals self-reports.

Four studies have sought participants views of a past relationship with a suspected narcissistic partner (compared with a suspected non-narcissistic partner). Byrne & O'Brien (2014), whose study used mostly female participants, found that they perceived their relationships with a narcissistic partner to have significantly more interpersonal problems, as well as being more negative and unstable. Foster, Shrira & Campbell (2003) found that participants experienced the early stages of the relationship with a suspected narcissist as exciting and satisfying, but by the end of the relationship it was significantly less so. These relationships were always recalled as less emotionally intimate. Campbell et al., (study 4, 2002) found that partners felt that the

suspected narcissist made an initial favorable impression but that their behaviour deteriorated over time. Brunell & Campbell (2011) also found that partners reported a steeper decline in relationship satisfaction with a narcissist over time when comparing the two relationships. What these studies did not discuss was why participants perceived it that way, or what the effect of these relationships was on them.

To explain the experience of the romantic relationship from the partners perspective Campbell (2005) created the "chocolate cake model". This model is generally more applicable to the grandiose narcissistic type as assessed by the NPI. It draws from other research and literature that show that narcissists are successful at initiating new relationships and that they are likeable in the short term because they are charming, entertaining and outgoing. Over time though their more disagreeable qualities start to show (Brunell & Campbell, 2011). In this analogy, the chocolate cake symbolises a relationship with a narcissist and a salad a non-narcissist. Initially eating chocolate cake is more enjoyable, gives you a positive feeling, a rush of pleasure at the start, but eating it has long term consequences, and you regret it after. Whereas salad is the less exciting choice, that is better for you and you do not regret it in the long term (Campbell, 2005).

In a dyadic research study, Wurst e al., (2017) explored how the dimensions of admiration and rivalry in a narcissistic person may affect romantic relationships. They found the initial positive qualities that attracted a romantic partner (e.g. charming, entertaining and assertiveness) became less important over time, in favour of the more communal qualities, i.e. unselfishness, forgiveness, caring and sensitivity and since these qualities are often lacking in narcissistic people, it can result in more serious problems in the relationship. It also showed that the problems in long term relationships were often linked to the more antagonistic qualities that narcissistic people exhibit.

There are two studies that have looked at relationship satisfaction from the perspective of both people in the relationship. Lavner, Lamkin, Miller, Campbell & Karney (2016) studied heterosexual newlywed couples over a four-year period. They discovered that relationship impairment, associated with narcissistic traits, takes some time to manifest. They also showed that it was the wives' total narcissism (specifically entitlement/exploitativeness scores) that predicted steeper increases in marital problems and steeper declines in marital satisfaction. Wives' grandiose/exhibitionism scores predicted worse satisfaction for their spouse, and husbands grandiose/exhibitionism predicted greater problems for their wives. Husbands narcissism scores generally had few effects on their own marital satisfaction or that of their wives. However, a study conducted in Hong Kong, by Ye, Lam, Ma and Ng (2016), showed the opposite. It was found that male narcissism contributed more strongly than female narcissism to

relationship dissatisfaction, and overall, that narcissism was significantly negatively associated with both self and partner satisfaction.

The discrepancy in these studies around gender relationship satisfaction, could be due to cultural differences, i.e. males and females may have different expectations for themselves, and for their partners, in the way, they get treated. Lavner et al., (2016) also address gender difference in culture; for example, it may be seen as normal for males to exhibit higher narcissism traits, therefore making it less detrimental to relationship functioning, and the women's narcissistic features may be seen as especially negative due to cultural expectations. This highlights the importance of considering culture and gender expectations when examining the effects of narcissism. Neither of these studies examined how narcissistic traits eventually manifest into relationship dysfunction or how the problems and marital dissatisfaction affected each partner personally.

To date, most research on narcissism has used college dating populations (Lavner et al., 2016) which does not give a full picture of a relationship with a narcissist (Campbell & Foster, 2002; Campbell et al., 2002; Paulhus, 1998). Relationships change over time, and living together, sharing finances, and having children can create additional pressures on couples which may result in narcissists exhibiting different behaviours which have more opportunity to impact negatively on partners. In addition, we know that problems in relationships with narcissists are more likely to occur in the long term rather than the short term. Therefore, more detailed information can be gathered from longer, more committed relationships with narcissists (Brunell & Campbell, 2011; Campbell et al., 2002; Keller et al., 2014; Miller et al., 2007; Paulhus, 1998).

The existing research shows that there is a possibility that women who have had a relationship with a suspected narcissist may have experienced a steep decline in relationship satisfaction. What we do not know is how this occurs, whether there is a common point of the relationship it occurs at, what areas of the relationship this dissatisfaction effects and in what way, how the dissatisfaction effects the way the woman, thinks, feels and behaves, or whether this dissatisfaction ultimately results in the relationship ending. These research projects show that there is still a lot that we do not know about how narcissism effects relationships and the people in them.

2.9 Effects of narcissistic behaviours on romantic partners

Despite the increase in writing about narcissism, and the extensive interest narcissism has received by researchers over the past 30 years, relatively little is known about how narcissism affects the romantic partners. Narcissism in itself is a relational construct, i.e. without another person, the behaviours that narcissists exhibit would not be seen.

2.9.a Empirical literature excluding case studies

In empirical research it is consistently acknowledged that romantic relationships with narcissists have negative consequences for, and are destructive to, their partners (Brunell et al., 2004; Brunell & Campbell, 2011; Campbell, 2005; Campbell & Campbell, 2009; Kealy & Ogrodniczuk, 2011; Lavner et al., 2016; Miller et al., 2007). Research also shows that it takes longer for partners to gain insight into a narcissist's behaviour and for issues to arise and the deterioration of the relationship to occur (Brunell & Campbell, 2011; Campbell et al., 2002; Keller et al., 2014; Miller et al., 2007., Paulhus 1998). However, most empirical research has ignored the experiences of partners and how narcissism affects those partners (Arabi, 2016; Fay, 2004).

At the beginning of these relationships, as the Chocolate Cake Model discussed above suggests, partners can feel a rush of excitement due to the narcissist's charismatic, fun, exciting and confident demeanour. This can make the partners feel flattered and special (Twenge & Campbell, 2009). This can have the effect of partners feeling more satisfied with the relationship at the start (Foster et al., 2003; Brunell & Campbell, 2011).

Four studies make a general acknowledgement of the negative effects on partners, but none of them goes into any details or specifics of these. Brunell et al., (2004) acknowledges that romantic partners experience a range of negative behaviours and suffer in the long term. However, they are not specific about what form that suffering takes, and we have to look at other literature to understand the range of negative behaviours (mentioned earlier in this chapter). Kealy and Ogrodniczuk (2011) state that the major interpersonal problems associated with pathological narcissism are; dominance, vindictiveness, intrusiveness and that these manifest in relationships with others which contribute to difficulties in lives of loved ones. However, they do not discuss how these effects impact the lives of their loved ones.

Campbell and Campbell (2009) state that there are more costs and no benefits for the other person in the enduring zone of a relationship i.e. low level of emotional closeness (Foster et al., 2006), infidelity (Buss & Shackleford, 2007), overconfident decision making (Campbell et al., 2004), compulsive spending (Rose, 2007), aggression (Bushman & Baumeister, 2002), sexual assault (Bushman et al., 2003), and that overall, narcissism has very negative consequences for the other person. They do not elaborate on what those negative consequences are for the partners.

Miller et al., (2007) interviewed people who were diagnosed with Narcissistic Personality Disorder and found that NPD was strongly related to causing significant pain, duress and suffering to significant others as well as leading to problems and distress for those who interact with them. This study included family members and friends in the significant others group and is one of the few studies where romantic others were interviewed about their experience. This study, however,

only made a general report on this, as the goal of the study was to asses "spillover" effects of NPD on significant others. Therefore, it did not explore the effect on others in any detail or specify what form the pain and suffering took.

Brunell and Campbell (2011) "asked individuals to reflect on past dating relationships with narcissistic and non-narcissistic partners" (p. 346) and to rate "how satisfied they were at the beginning and end of their relationship" (p. 347). They contend that romantic relationships with a narcissist are destructive to the partner. These relationships take a large emotional toll and that partners see their own outcome from the relationship becoming significantly more negative over time. They also say that narcissists repeatedly damage relationships, hurt their partners and move onto another relationship. Brunell and Campbell (2011) differ from the above researchers in that they go deeper into the partner's experience. They found it took partners longer to gain insight into their narcissistic partner than their non-narcissistic partner. The partners also experience more anger, more negative thoughts and feelings at the end of the relationship, including regretting the relationship. In addition, they experienced negative psychological and social outcomes that lasted significantly longer than the actual relationship. However, the researchers do not go into any detail about what they mean by emotional toll for the partner, what form the hurt takes or what the specific negative outcomes are for the partners.

Twenge and Campbell (2009) offer a more detailed understanding in the book they co-wrote. When they wrote this book, they had both been involved in a considerable amount of research related to narcissism over the decade prior, and between them they had authored and co-authored nearly 185 scientific articles, journal articles and book chapters, and two books between them (Twenge & Campbell, 2009). In this book, they talk about the effects experienced by partners, and more specifically women. They do not indicate where this information comes from, except with one acknowledgement in the book where Campbell mentions receiving numerous phone calls and emails from women going through separations/divorces with narcissists. Twenge and Campbell say that women going through these divorces can feel "damaged", "used up", "sucked dry", and like they were never really loved, and some have considered suicide and been hospitalised. These partners say that they felt they could not safely express their feelings and learned to either sugar coat their opinions or keep them to themselves and that the relationship felt like they were "tip-toeing through a minefield". The partners experienced fear, stress, anxiety, depression and guilt. It affected their ability to trust others, themselves and their own judgements. After the relationship ended, the partners also experienced confusion about why they still wanted the narcissist; they had a difficult time in gaining perspective; they ruminated about the relationships for a long time, pondering what went wrong and what the early warning signs were; tried to work out what makes the narcissist a narcissist.

The few empirical studies that have concluded that relationships with narcissists are damaging for those involved with them failed to explore in any details what those effects specifically were. This is a gap that needs to be filled so that therapists have an in-depth understanding and can better identify potential victims of narcissists and target their therapeutic interventions to enable the best possible outcome for their clients.

2.9.b Anecdotal literature and case studies

To try and gain more insight into how it may affect women we need to turn to anecdotal literature and case studies written by partners of narcissists or therapists who have worked with people who have experienced relationships with narcissists. The picture that follows is drawn primarily from books or published scientific journal articles in which therapists portray a rather grim view, including some very long lists of possible effects on women. They seem to agree that these relationships cause great harm, emotionally, psychologically, mentally, physically and spiritually to people (Arabi 2017; Brown, 2009; Louis de Canonville, 2010; Schneider, 2015; Schneider & Sadler, 2007).

The most common effects that seem to recur in literature are anxiety, depression, Post Traumatic Stress Disorder/Complex Post Traumatic Stress Disorder, (Arabi, 2016; Boldt, 2007; Durvasula 2015; Louis de Canonville 2010; Schneider & Sadler, 2007), feeling fearful, powerless and dependent (Arabi, 2016; Boldt, 2007; Louis de Canonville, 2010), decreased self-esteem (Arabi, 2016; Boldt, 2007; Durvasula, 2015; Louis de Canonville, 2010), social isolation/avoidance (Arabi, 2016; Boldt, 2007; Durvasula, 2015), disassociation, derealisation, compartmentalisation, hypervigilance, suicidal ideation, self-harm (Arabi, 2016; Louis De Canonville, 2010), obsessive rigid/compulsive behaviours (Boldt, 2007; Louis de Canonville, 2010), self-doubt, difficulty making decisions, feeling worthless (Arabi, 2016; Durvasula, 2015), confusion, frustration (Durvasula, 2015; Schneider & Sadler, 2007) and guilt (Durvasula, 2015; Louis de Canonville, 2010). This creates an extensive list of diagnostic terms, and it is unclear whether some of these may have been pre-existing conditions or ones that may have made the women more susceptible to the behaviours of the narcissist.

There are a few differences between the above anecdotal and empirical literature. For example, the anger and regret that Brunell and Campbell (2011) identified is not something that readily appears in the literature by therapists, nor the trust issues that Twenge and Campbell (2009) discuss. Just as PTSD/Complex PTSD is frequently mentioned by therapists but is not identified by Brunell and Campbell (2011) or Twenge and Campbell (2009). There are a number of possibilities for these differences, i.e. it may be due to the different approaches taken by the writers and how they conceptualised the effects, or where they placed the emphasis, or because the empirical research was conducted on dating populations, rather than long term relationships.

Each therapist appears to identify effects that are not necessarily identified by the others. For example: lost interest and passions (Bodlt, 2007); emptiness and lacking in purpose (Durvasula, 2015); panic attacks, feeling that they cannot cope and are going mad, shock, eating disorders, chronic pain, shame and humiliation (Louis de Canonville, 2010); trauma bonding, Stockholm syndrome (where a hostage becomes emotionally bonded to their captor), difficulties with concentrating and logical and rational thought, grief, people pleasing and drinking (Arabi, 2016). In her books and online writings, Shahida Arabi (2017) often refers to narcissistic abuse and defines it as "…continual manipulation, which includes an idealization-devaluation-discard abuse cycle …. until the trauma begins again…" (p. 27). She says that it is often covert and insidious and results in emotional and psychological scars that can last throughout the victim's life. She also states that it gets the least amount of attention and validation in research and the media, due to the covert and insidious nature, and claims that it is a hidden health epidemic that has considerable cost to victims. With the high rates of domestic violence and the long list of possible effects from this type of abuse, it stands to reason that the costs to the victims would be high, affecting them mentally, emotionally, financially, socially and spiritually.

Arabi (2016) discusses the after-effects of these relationships and claims that partners are often left with no sense of closure at the end of the relationship, wondering how their partner could lack basic empathy, compassion and respect. She also says that at the end of the relationship, partners associate love with unpredictability, distress and unease, having come to believe they must work for love. She believes that it takes a minimum of 18 months to heal from these relationships after going "no contact" with the narcissist, but if that is not possible the effects will last much longer. This is reinforced by Schneider & Sadler, (2007) who say that the more troubled the person's family of origin is, and the longer and more complicated (e.g. joint children and finances) the relationship, the longer, more challenging and complex the recovery will be.

Louis de Canonville (2010) said that it was important for therapists to look for a cluster of symptoms in their clients, and in her writing uses the term "Narcissistic Victim Syndrome" (NVS) to describe it. This term was initially used by Fay (2004) to describe the effects of "narcissistic abuse". She came up with the term after coming out of a relationship with a suspected narcissistic male and spending four years in therapy. She then collected over 100 stories, from other women who had had similar experiences, which she used to write a book. NVS has now become a popular term on blogs, websites, internet writings, video talks, books and even lectures given by therapists, despite not being a recognised medical/mental health syndrome, nor a consistent cluster of symptoms listed to "diagnose" it. There was an unsuccessful push by American therapists to have NVS included in the DSM-V (Louis de Canonville, 2010). The research I am doing may show a pattern of effects between the women that could point towards the importance of conducting further research into validating Narcissistic Victim Syndrome.

2.10 Summary

Despite a substantial increase in peer-reviewed journal articles being published on narcissism each year since 2010 (Miller et al., 2017), and considering the obvious potential for narcissism to be detrimental to partners and cause problems in romantic relationships, the impact of narcissism on these relationships is understudied (Foster & Twenge, 2011; Keller et al., 2014). Brunell & Campbell (2011), point out that romantic involvement with a narcissist, at least once in a person's life, is likely to be a common experience, due to the high number of sexual and dating partners reported by narcissists. However, the perspective of romantic partners is seldom sought in general studies on narcissism. For example, there are few studies that take a dyadic approach, (Keller et al., 2014; Ye et al., 2016). Ignoring the perspective, experiences, effects on and responses of partners, limits a full understanding of the various manifestations and effects of narcissism.

It is clear from the current research that the risks to women in these relationships are higher than for women in relationships with non-narcissistic men and they may be one of the most abused groups in society. Brunell and Campbell (2011) emphasise that narcissism is a feature of a person's personality and even if a narcissist is motivated to change (which they usually are not) it is almost impossible to change. It may be that narcissists exhibit physical, psychological and sexual aggression in a relationship in an ongoing and regular manner, especially given that narcissism is a consistent, unchanging personality construct. This indicates that it may be more beneficial for future research to focus on understanding the partner's experience so that counsellors can then focus on developing interventions that can help them. However, this group is clearly under-researched, and therefore possibly under-educated, and under-supported especially from trained and knowledgeable professionals.

There is a concern that there is a lack of adequate education for counsellors in this area. Therapists in Ireland and America are not routinely taught about narcissism, narcissistic abuse, or the impact of narcissistic behaviours (Arabi, 2016; Louis de Canonville, 2010). Therapists who do have knowledge and understanding of the effects on women have had to primarily rely on the informal writings of other therapists or people who have been exposed to it themselves. Louis de Canonville (2018) has actively been educating therapists in Ireland (over 1500 so far) on what narcissism is and how it affects other people. In 2016, Bonchay founded World Narcissistic Abuse Awareness Day in America (World Narcissistic Abuse Awareness Day in America, 2017) to encourage awareness, provide public education and victim support resources.

People who have been exposed to negative behaviours from a narcissist can present to a therapist without knowing why they are feeling distressed or struggling (Fay, 2004) and many women have no idea that they are living with a narcissistic person (Arabi, 2016; Fay, 2004; Louis

de Canonville, 2010). Schneider & Sadler (2007) say that clients often need help from a therapist to confirm narcissism is present in their partner and to be able to identify and name patterns or tactics that the narcissist uses. They emphasise that educating the client is essential to provide therapeutic relief. Empirical research, therapist knowledge about narcissism, and training on how to help people affected by narcissism is sorely lacking, and for people to recover from this abuse, they need to be seen by a therapist who has specific knowledge and training in this area (Arabi 2017; Schneider, 2015).

Research conducted by counsellors needs to inform and develop counselling practice and benefit individuals or the community (New Zealand Association of Counsellors, 2016). "Effective health advancements for any group is dependent upon a detailed understanding of their lived experience…" (Jones, Crengle & McCreanor, 2006, p.63). By not engaging with the partners of suspected narcissists it means that a group, who may have already been marginalised, are excluded and do not have a voice (Holloway, 2006). Without this information, we miss out on essential and vital perspectives, and it is incredibly difficult to provide the best and most appropriate therapeutic interventions. Therefore, the purpose of my project is to undertake formal, structured, academic research to create a rich and detailed understanding of the experience of a small group of women, which is relevant to the context that New Zealand therapists work in, so that it can increase counsellors' knowledge and improve the effectiveness of the counselling provided to clients.

3. Methodology

3.1 Practitioner research methodology

This project was undertaken using Practitioner research. A practitioner researcher is positioned in the middle ground between practice and research, working on the margins of both (Shaw & Lunt, 2012). Practitioner research is undertaken by a practitioner who wants to understand their own practice better and improve the effectiveness of their service (Mitchell, Shaw & Lunt, 2008). The purpose is to identify ways to help people and challenge practice methods and ideas by critically examining them and then develop new ideas by considering the experience (Uggerhoj, 2012). This has the benefit of enabling a practitioner to see their practice in a different way and means that the research project ends up being shaped and challenged by both practice and research.

Mutch (2005) describes practitioner research as a systematic and purposeful process. It has a clear plan and design to gather and analyse data to answer clearly defined, focussed, research project objectives. All the decisions are documented well so that people can follow the process and see the connections. It takes into consideration ethical responsibilities, and the standards of reliability, limits of transferability (Mutch, 2005), trustworthiness, validity and credibility (Morrow, 2005). In addition, practitioner research, is usually: a small scale, stand-alone, short term study; the data collection and management are carried out alone by the research practitioner; the practitioner is responsible for setting the aims and outcomes and doing the inquiry; and the research is predominantly qualitative in approach (Lunt & Shaw, 2017).

Counsellors are guided by the ethical obligations outlined in the New Zealand Association of Counsellors (NZAC) Code of Ethics (2016), which states that research conducted by counsellors needs to inform and develop counselling practice and benefit individuals or the community. Therefore, practitioner research is an appropriate methodology for counsellors to use.

I have taken an interpretivist, qualitative approach with this project, as the aim of my project is to gain a rich description and understanding of people's experiences as it relates to a specific situation. The interpretivist methodology is particularly suited to exploring and gaining a deep understanding of people's experiences and is often associated with the human sciences (Bedford, Davidson, Good & Tolich, 2007). Qualitative methodology is especially suited to research that involves human data sources, where participants' stories, perceptions, descriptions and narratives are sought to uncover their lived reality and gather rich data of a particular phenomenon (Mutch, 2005).

Taking a qualitative approach allows for a small number of people to either, be asked specific questions or simply given the space to tell their stories in their own way. This allows the researcher to gain an understanding of the participant's experience from the participant's point of view (Kvale & Brinkmann, 2009). It has taken on an increasingly significant role in counselling research (McLeod, 2014) and can offer insights into clients' experiences that are sometimes complementary to knowledge attained in quantitative methods (Braun & Clarke, 2014).

One of the key critiques of practitioner research is that practitioners are not trained researchers and they do not have the necessary knowledge or skills to conduct research (Grant, 2013). Lunt and Shaw (2017) argue that practitioners do not have to be trained researchers to conduct research, but they do need to have research skills and support. Another critique of practitioner research and small-scale qualitative research is that it is biased, lacks objectivity, is idiosyncratic and not scientific (Ellis & Loughland, 2016; Shaw, 2005). However, the practitioner-researcher already possesses knowledge and a good understanding of the context, and they bring experience and insight with them to the project which are benefits. From a professional point of view, it can build relationships with colleagues that improve practitioner knowledge (Payne, 2008), empower practitioners (Kincheloe, 2012) and enhance practitioners learning and practice (Coleman & Lumby, 1999).

3.2 Sample selection (recruitment, size, method)

The number of participants for this study was limited to six. Qualitative studies are generally suited to small participant numbers (30 or less) as it allows the researcher to focus in depth on the details of the participant's experiences, as well as allowing the meaning of specific cases and examples to emerge from the data collected (McLeod, 2014). The number of participants in this research is restricted by the level of resources expected to be allocated to a dissertation. However, even small samples can have revealing and indicative stories and can be validated by external data sources.

I used non-probability, purposive sampling, where participants were chosen to suit the purpose of expanding the understanding of a specific phenomenon (Mutch, 2005). Criterion sampling also applied, in that participants who were selected needed to meet specified criteria (Jacobs, 2013). There was no limit applied to the age or ethnicity of participants. A range of ages, cultural and ethnic backgrounds was viewed positively as potentially providing diversity in perspective. All participants were from the greater Auckland area due to travel and time convenience. All participants were women who had been in a relationship with a suspected narcissistic male for a minimum of two years and had lived together for a portion of that time. This was because difficulties in relationships with narcissists may not become apparent in the early stages of a relationship (Brunell & Campbell, 2011; Campbell et al., 2002; Keller et al., 2014; Miller et al.,

2007; Paulhus, 1998). The project was limited to women who were already out of the relationship, as the way in which a relationship with a narcissist ends and their behaviour afterwards can further impact the woman.

Two participants were recruited via a closed New Zealand Facebook group whose members self-identify as having experienced some form of relationship with suspected narcissists. Three other participants came through word of mouth (snowballing) and one participant was recruited through a colleague.

As this project is not dyadic, the main limitation is that it is solely reliant on the women's subjective view that their ex-partner is a narcissist. However, Oltmanns & Lawton (2011) say that there is evidence that partners, peers and even strangers, can with reasonable accuracy, assess and identify people that are high in narcissism.

All participants were recruited using the same participant recruitment advertisement (Appendix A) which contained a list of 13 specified criteria for narcissism which were identified in multiple sources in the literature review, e.g. Atkins et al., (2005), Baumeister et al.,(1996), Brunell et al., (2004), Byrne & O'Brien (2014), Campbell et al., (2002), Campbell (2005), Gewirtz-Meydan and Finzi-Dottan (2018), Gormley and Lopez (2010), Hart et al., (2017), Horan et al., (2015), Hurlbert et al., (1994), Kealy and Ogrodniczuk (2011), Keller et al., (2014), Larson et al., (2015), Ogrodniczuk et al., (2009), Peterson and DeHart (2014), Paulhus (1998) and Struzenberg (2016). These criteria are operational examples of the more abstract criteria of the DSM-V.

Recruitment required the women to consider that their partner met most, if not all, the 13 criteria for narcissism (Appendix A). When I met with the participants, I specifically enquired what made the women suspect their ex-partners were narcissists to ensure they met the DSM-V criteria. I also enquired if there was anyone else that thought their ex-partner was a narcissist. Thus, the substantiation of NPD was based on participant agreement that the key criteria were met, my assessment based on the participant data that the key criteria were met and confirmation, via the participants, from professional sources (counsellors, social workers, psychologists) and/or friends and family of the ex-partner that an NPD diagnosis was appropriate. However, because all of these assessment processes are second hand and not based on actual interviews or direct observations of the ex-partners, I am referring to them as "suspected narcissists".

The aim of the project is to have my participants represent themselves, create understandings for others and shine a light on their experiences (Mutch, 2005). Due to the sample size and lack of statistical analysis, care is needed around generalising these findings and transferring them to other contexts (Biggerstaff, 2012). Despite these limitations, the rich data gathered in a study of this type can point to directions for further research and may also consolidate arguments in writing by therapists and counsellors.

3.3 Method of data collection

Semi-Structured, face-to-face interviews were used as the method of data collection. Gathering data via interviews is a way to learn what an experience feels like and allows for more in-depth investigations with participants (Kvale, 2003). This enables the researcher to create a more holistic view of a phenomenon (Berg, Lune & Lune, 2004). One-to-one interviews are a common method of data collection in social and health research (Ryan, Coughlan & Cronin, 2009) with semi-structured interviews being the most used in qualitative research (Holloway & Galvin, 2016) and commonly used in practitioner research (Lunt & Shaw, 2017). Semi-structured interviews allow for a more flexible approach (Ryan et al., 2009) and are conducted with a set of key questions, which can be followed by more open-ended ones (Mutch, 2005). Using this approach allows for digressions in conversation that can bring forward unanticipated information, which may be of relevance and interest to the inquiry (Taylor & Francis, 2013) and permits further exploration of spontaneous issues that the participant may raise (Ryan et al., 2009). The researcher can also probe and seek clarification to broaden their understanding (Alshenqeeti, 2014). Conducting interviews in person gives the researcher the opportunity to observe facial expressions and body language which can enhance the researchers understanding of the participant's words (Ryan et al., 2009).

Interviews were conducted one to one, in a quiet, private, space of the participants choosing, without interruptions. This was to aid in maintaining confidentiality and to help the participants feel more comfortable to share their experiences openly (Mutch, 2005). Interviews were 60-90 minutes in duration. McLeod (2014) recommends 60 minutes for interviews. However, when discussing potentially emotionally charged experiences, it is essential to allow time for an adjustment in the pace of the interview or to have breaks if needed (Mutch, 2005). The interviews were recorded using a digital audio recorder and later transcribed. Written notes were taken during the interviews to record any body language or facial expressions that were of relevance and reflections written after the interviews.

Dempsey, Dowling, Larkin and Murphy (2016) recommend having a distress protocol in place prior to interviews about sensitive issues because they have the potential to cause distress to the participants. It is important to watch for signs of distress during interviews to reduce and manage these quickly and appropriately. Participants were advised that they could take a break or stop the interview entirely at any time. Participants were also given an information sheet (Appendix C) before agreeing to participate which highlighted the potential emotional nature of the topic and risk of distress. A consent form (Appendix D) was signed by each participant before starting the interview. They were also given a list of support agencies at the end of the interviews, and I followed up with all participants within three days of their interviews to check how they were.

Although there is a risk of these types of interviews being harmful, Corbin and Morse (2003) state that they are more beneficial than harmful. It can give the person space to reflect on and give new meanings to their experiences and even experience positive changes to themselves (Birch & Miller, 2000).

One limitation of interviewing on a sensitive topic is that participants will only share what they feel comfortable revealing, they can hold back on answering questions and sharing honestly and openly. This may be due to feeling self-conscious or because they perceive that there is a difference in status between them and the researcher (Alshenqueeti, 2014; Ryan et al., 2009). Liamputtong, (2007) suggests that reciprocal sharing of stories by participant and researcher can help ensure the relationship is non-hierarchical and also shows respect and enhances rapport and trust which will facilitate the interview. To help mitigate this, all participants were aware that I had had first-hand experience of a relationship with a self-proclaimed narcissist.

One critique of interviews is there is the potential for the researcher to introduce bias by the way they conduct the interview process, i.e. inadequate questioning, method of participant selection, influencing the interview process (Ryan et al., 2009). To help address these issues, I had a clear interview schedule (Appendix E) which was discussed with two supervisors and piloted twice and reviewed with my counselling supervisor before conducting interviews with participants. This schedule used open-ended questions with allowed for deep listening and multiple pathways to be explored. The key findings are justified by verbatim quotes from the participants.

Interview questions were broken down into time frames, i.e. the start of the relationship, during the relationship, end of the relationship and after the relationship. Open-ended questions were asked to firstly elicit what their experience was, what behaviours they had been subjected to or had noticed, and then what the effects had been on them. Recapping was used to seek clarification at times to ensure that I understood what the participants were saying, and clarification was sought on terms or phrases that were not clear or familiar. Towards the end questions were asked about how they recovered and what positive effects they felt the relationship had had on them. This was to ensure that participants were not left entrenched in the negative, problem story. From my reading I had some ideas of what they might have experienced and the possible effects, I tried not to influence their stories with closed, specific questions. Some participants found it difficult to recall things due to the amount of time that had passed, and with those participants, I asked more specific questions i.e. was he ever physically aggressive towards you?.

The interviews were transcribed verbatim by a paid transcriber who signed a confidentiality agreement (Appendix F). Participants were given the choice of how they wanted to be identified, i.e. pseudonym, number, real name. All names of partners and children were changed in the

transcribes and chosen randomly. As this research is reliant on the accuracy of the data, transcripts were checked against audio recordings by me, and a copy of the transcript was emailed to participants for them to check, amend, change, delete things or add to as they felt was necessary. Each of the transcripts was over 10,000 words long.

3.4 Method of data analysis

I have used a thematic approach to analyse the data. Thematic analysis is a more accessible form of analysis for those early in their qualitative research career because it is reasonably easy to learn and does not require detailed theoretical and technological knowledge of approaches (Braun & Clarke, 2014). It is flexible and variable and can be used within different frameworks (Braun & Clarke, 2006). It is especially well suited to data that includes experiences of participants, particularly if the area is under-researched or when participants views on a subject are not known (Braun & Clarke, 2006). Thematic analysis is widely used in psychology qualitative studies (Boyatzis, 1998) and its usage across many other disciplines (often with a health focus) has increased since 2006 (McLeod, 2014; Braun & Clarke, 2014). The challenge is in sorting through a large amount of data, sorting the more trivial material from the more important and relevant material, and then to try and make sense of it by identifying patterns and themes to reveal the essence of the information (Patton, 2002).

Thematic analysis is a tool that can be applied to do several things: help organise the data set; provide a detailed and rich account of the data; identify, analyse and report themes/patterns (Braun & Clarke, 2006) and interpret various aspects of the topic (Boyatzis, 1998). The version that Braun and Clarke developed in 2006 gives a systematic framework for coding the qualitative data and then using that coding to identify themes across the dataset in relation to the research question. Interpretations of those themes are the responsibility of the researcher (McLeod, 2014).

The method of collecting data and the analytic process for this project is grounded in subjectivity. Care has been taken to ensure the research findings are representative of the data collected and not my beliefs or biases. Several ways I sought to manage this was by reading widely on the subject to expand my understanding and give me other ways to view the phenomenon. I also practised reflexivity by recording my thoughts, assumptions, experiences and reactions in a folder. In addition, I had regular conversations with colleagues and supervisors throughout the process to gain other perspectives. Once the preliminary findings were complete, I shared these with the participants to check that my interpretations reflected the participant's meanings, a practice which is recommended by Mutch (2005) and Morrow (2005).

Having rigour in the research process and demonstrating this is an essential part of establishing credibility (Morrow 2005). Researchers can share their findings with participants to check that

they fit with participants' understanding of the phenomena and that the researcher's interpretations reflect the participants' meanings (Mutch, 2005; Morrow, 2005). When writing up the report, it is beneficial to include rich descriptions of the data and use quotes from participant transcripts to prove that the researcher's interpretations are based on the experiences of participants (Morrow, 2005).

To analyse the data, I used the six-stage process that Braun and Clarke (2006) have clearly identified and explained. I started by familiarising myself with the data by reading and re-reading transcripts and listening to the audio interviews. I took time to reflect on the data, to code the data and look for initial themes, patterns and meanings. Each data item was given equal attention, and the coding process was thorough, inclusive and comprehensive. I underlined, and colour coded various exerts from transcripts and used a dozen large wall charts to sort the coding into initial themes and subthemes. Initially, I approached the analysis from a chronological viewpoint (start, during, end, post-relationship and recovery) and under each time theme, behaviours of the ex-partners were identified, along with corresponding effects. From here I further coded behaviours and effects into themes that had been identified from the literature review; physical aggression, psychological aggression, sexual aggression, infidelity, and relationship satisfaction and identified themes that had not been covered in the literature. Next, I reviewed the various themes that had been identified and checked them against each other and the original data set. I then named and defined those themes before I moved onto the analysis. The themes were then analysed and interpreted, and patterns were identified that linked each participants narrative. These were then reflected on against existing literature. Lastly, the findings were written up using extracts from the transcripts to illustrate and support my interpretations and as evidence of meanings. This process enabled me to eventually produce a report that used: interpretative analysis to look at what those themes meant; to explore any assumptions that underpinned them; what implications the themes had; and what those overall themes revealed about my research topic. Discussions were had with my supervisors to broaden the ideas and check any assumptions. I then shared this report with the participants to ensure that the interpretations I had made, reflected their thoughts and feelings, and the meanings they were trying to convey.

3.5 Ethics

Ethics approval for this project was granted by Unitec Research Ethics Committee (UREC) number 2018-1045 (Appendix G). As a counsellor, who is a registered full member of the NZAC, I am bound by the professional Code of Ethics which covers ethical obligations of research under guideline 11 (New Zealand Association of Counsellors, 2016). I also applied Unitec's principles of ethical research to this project. To avoid potential issues with dual relationships and conflict of

interest, participants were not family, friends, past or current clients nor are the participants able to become clients for at least two years post research project.

The participant's welfare took priority over the researcher's interests and the research project. Potential participants were provided with a full, detailed explanation of the project and topic and a schedule of interview questions so they could make an informed choice regarding participation. It was made clear to them that: participation is voluntary; there is no payment for participation; participants are free to withdraw at any stage up to two weeks post data collection without any reason being given, and without repercussions; and if they withdraw their data will be deleted/destroyed. At the start of each interview I obtained written, informed consent for participation and recording of interviews on an ethics committee approved form. To ensure participants privacy and confidentiality, they had the option to choose to have their names, locations and other identifying data not be recorded and instead be identified with a pseudonym or number. Five women chose a pseudonym, and all the ex-partners and children were assigned randomly chosen pseudonyms. The person who completed the transcribing was required to sign a confidentiality agreement before doing the transcription.

4. Findings

This chapter reports on six women's experiences of a long term, intimate, relationship with a suspected narcissistic male partner and the effects this has had on these women. The findings chapter is divided into three relationship periods; the beginning, during and post-relationship. The information under each of these time periods is divided into the women's description of their ex-partners behaviours followed by the effects that these had on them. Quotes from the transcripts are used to illustrate and support the findings.

All participants had a clear idea about what constituted narcissistic behaviours and included in their interviews various descriptors, that are also supported by the literature, to describe narcissists, e.g. entitled, arrogant, superior, manipulative, controlling, lacking empathy, never apologising, no remorse, not taking responsibly for anything, delusional, charming, demanding, self-centred, aggressive, cruel, argumentative, and selfish.

Gaia, Maria, Louise and Three stated that their ex-partners "ticked every box" on the DSM-V (Appendix B) for narcissistic personality disorder. Louise and Gaia also said they drew on their professional knowledge as a psychologist and social worker (respectively) to come to that conclusion. Three said that her ex-partners family and friends thought her ex-partner was a narcissist. Maria said that a friend of hers, who is a psychologist and has known her ex-partner for 15 years, described him as "a typical cluster B" narcissist. My assessment based on the descriptions these four women gave and their interview responses, is that their ex-partners would meet all the DSM-V criteria for NPD.

Jess and Jenny did not specifically say their ex-partners ticked all the boxes on the DSM-V. However, my assessment based on the reasons they gave for thinking their ex-partner was a narcissist, and their description of their ex-partners behaviours is that their ex-partners would tick at least seven of the nine criteria on the DSM-V. Jess said her ex-partners ex-wife also thought he was a narcissist. Jenny said a friend of hers, who is a counsellor, thought her ex-husband was a narcissist based on her professional knowledge.

All the women identified as Pakeha/NZ European. Jess and Three had children before meeting their ex-partners, and their ex-partners also had children. Regardless of the marital status, all the males are referred to as ex-partners to simplify the reporting process.

Table 1: Details of Participants						
Participant	Culture of ex-partner	Participants age	Age at start of relationship	Length of relationship	Time out of relationship	Number of children
Maria	Pakeha	33	18	15 years	4 months	2
Louise	Pakeha	34	17	16 years	3 months	1
Gaia	Pakeha	56	28	25 years	3 years	1
Three	Australian (migrated as a young child)	49	39	5 years	5 years	0
Jess	English (migrated as a young child)	51	40	3 years	8 years	1
Jenny	NZ European	56	22	18 years	16 years	1

Louise and Maria gave the most detailed accounts and expressed the most emotion while being interviewed which is understandable given the extent of their trauma and how recently their relationships ended. Gaia, Jenny, Jess and Three had some vivid memories of specific events that occurred and how it made them feel despite being out of the relationships for many years. Jess found it harder than the others to recall thoughts and feelings. The differences in the participants' abilities to recollect their experiences could be attributed to a variety of reasons, for example; length of time since the relationship ended, some people have better memories than others, choosing to block memories or forget them as a protective mechanism and a way to let go and move on.

4.1. Beginning of the relationship

4.1.a. Behaviours of the suspected narcissist

When asked what the beginning of the relationship was like, all the women were very quick to mention the positive aspects of their ex-partner and the relationship, often describing it as "normal" (Maria and Jess) The ex-partner:

- "Pursued" them (Jess and Louise), "worked really, really hard" to get them (Gaia), "enveloped me" (Jenny) and made their intentions known
- Was "intense" (Louise) and attentive (Jess and Gaia), pushed for "exclusive" leisure time (Louise) and wanted to be together all the time (Maria, Louise, Gaia and Three) or "in contact" (Jess)

- Was "charming" (Jess, Gaia, Jenny and Three), "charismatic" (Jenny), "engaging" (Three) and had the "gift of the gab" (Jenny)

- Was "funny" (Three and Jenny), a lot of "fun" to be with (Three and Louise) and they "got on well" (Jess)

- Presented as "kind" (Three and Gaia), "thoughtful" (Three), "reliable" (Gaia), "a gentleman" (Three) and "treated me really well" (Jess)

- Was "loving" (Jess) and "nice" to them (Jess, Jenny and Three)

Gaia - "He swanned into my life and worked really, really, hard to get me."

There was a rapid escalation of the relationship. Gaia and Three lived together with their ex-partner from the beginning and Jenny was married within six months.

All the participants described various warning signs or things that they thought were not quite right but chose to ignore at the time. The ex-partner:

- Was an "alcoholic" (Three)

- "Punched me in the stomach" (Louise)

- Grabbed the dog and "punched it really hard in the ribs" and hit her son (Jess)

- Seemed to have no friendship network (Gaia)

- Was unemployed or had limited employment (Three and Gaia)

- Had no money and depended on the woman to support him financially (Three, Louise and Jenny)

- Demonstrated "possessive" and controlling behaviours (Maria), had to have "everything his way" (Louise), was "judgemental" (Jenny) and critical (Louise)

- Socially isolated the woman (Gaia and Louise)

- Was emotionally manipulative by inducing sympathy (Jess, Gaia and Maria), "took advantage" of them (Louise)

- Had a "really radical faith" (Jenny)

- Was "arrogant" (Three)

4.1.b. Women's experiences of the behaviours and the effect on them

None of the women talked about actively dating or looking for a boyfriend at the time they met their ex-partners. They all appeared to be "happy" with their lives, were engaged in full-time study or work and had active social lives. Gaia and Jess stated that they were "independent". Louise just wanted to "have heaps of fun" with her friends, Jess had been single for ten years, Three said she had just come out of a long marriage and "wasn't in that headspace. I was just looking for some fun". Despite none of these women appearing to want to be rescued by a male or

desperately wanting a relationship, they ended up in one. Jenny said she "kind of got swept along".

> *Gaia – "I didn't want to be in any kind of relationships because I was really happy single, really living life fully, working fulltime, having good mates, and having a good life. Somehow, I got swiped off my feet, and I have no idea how he did it."*

All the women said initially they "got on well together", they felt "happy" and found the relationships "fun". They enjoyed the beginning of the relationship and said the way they were treated made them feel "loved", "wanted", "needed" and "special".

> *Maria – "We did everything together. I was absolutely smitten with him."*

> *Gaia – "…beginning was all roses…really good to be loved."*

> *Three – "It was great. I was really having fun."*

> *Jenny – "He used to say to me 'I can't believe how lucky I am'…he was very charismatic, funny… it was great, he was a good sort, and I really did like him."*

> *Louise – "…it was really, really fun…I felt really special… really happy to be wanted and needed."*

> *Jess – "[It was] nice to have someone show an interest in me … I felt loved…We got on really well."*

Maria, Three and Jess said that they felt empathy for the difficulties their ex-partners were facing, and it made them want to help and care for them more.

> *Maria – "I took him under my wing and just looked after him and his wellbeing."*
> *Three – "I'm here to learn…he was a bit of a case study as well…I've always been a helper so I thought I can help him."*

During the interviews, it became clear that the women reframed the early negative behaviours of their ex-partners into positive ones. Louise, Maria, Jenny and Gaia talked about being "young", "naïve", "idealistic" and/or a little "inexperienced" with relationships. They thought this contributed to them interpreting certain behaviours of their ex-partners as "normal" for relationships and that those behaviours were how you showed love.

> *Maria – "I'd dressed up really nice, and he turned around and said 'you're not wearing that' and I burst into tears and had to go and get changed…if anyone was looking at me, he changed his watch to his other hand…ready for a punch up or something…It almost had a positive effect. Someone actually wants me, someone*

is looking out for me and being protective and possessive…I looked at it as someone who loved me."

Louise said she started justifying and rationalising her ex-partners behaviour to make positive meaning from it. This had the effect of bonding her to him even more.

Louise – "My part-time job funds would all be used on his wants, which was marijuana and alcohol…that sucked, but it was also like, oh this is love, and we're having heaps of fun…he always wanted to with me and me only me…and I'd go oh that's cos he really loves me and really wants to be with me."

Maria and Louise started giving into requests and demands made by their ex-partners, changing what they did and the way they acted to keep their partners happy and preserve the relationship.

Louise - "I was apologising for things I shouldn't…Tried really hard to change… noticed I was making heaps of changes to try and make him happy and keep him happy…if I can just change this then he'll be happy, and everything will be fine…slowly everything started to be his way, his wants, his needs. I was always really, really, overly accommodating…never upset about that at the time… this is what relationships are…I was so happy to have what I thought was love."

There appeared to be a sense of discomfort for Jenny and Gaia who felt that their "boundaries" were being crossed. All the women (except Three) talked about either choosing to ignore warning signs or only seeing them in hindsight.

Gaia – "I thought wow that's really weird, but it wasn't weird enough for me to be suspicious…I didn't know anything about narcissistic personality disorder. I made a decision that I will never mix my work with my family. So that I will never diagnose anybody in my family and that I will keep that separate and I will not make assumptions."

Jenny – "I had some question marks about him before I got married when you're young and idealistic and think, Oh, it'll be ok."

Jess – "…that should have been a warning sign."

Gaia – "With hindsight, I realised I was almost being entranced."

Maria – "There were incidences of um, probably red flags that I could have taken notice of, but I didn't."

It is clear is that the women were all active participants in the relationship, making decisions based on their ideas and aspirations about romantic love, and how they wanted to be as relationship partners.

4.2. During the relationship

The women's experiences in the established relationship period were extremely negative which differed significantly from the beginning of the relationship. They were all subjected to high degrees of ongoing and repeated acts of aggression and control. All the women very briefly acknowledged that there were some "good" or "ok" times during their relationship, although this was not the dominant story.

The behaviours of the suspected narcissists have been briefly explained under five identified themes: psychological aggression, sexual behaviour, financial control, physical aggression and behaviour towards children. Each of these themes is followed by an in-depth explanation of the effects on the women, concluding with the overall effect on relationship satisfaction.

4.2.a. Psychologically aggressive behaviours of the suspected narcissist

The women were subjected to ongoing and repeated forms of psychological aggression. The ex-partners would:

- Frequently be "angry" as well as having "unprovoked", "uncontrollable", "explosive rages" (Maria, Louise, Gaia, Three, Jess and Jenny)
- Regularly "lecture", "shout" and "yell" at, "blame", denigrate, degrade, "criticise", and verbally abuse the women (Maria, Louise, Gaia, Three, Jess and Jenny)
- Play mind games by using "gaslighting"[3], false accusations and "deflection" (Maria, Louise, Gaia, Three, Jess and Jenny)
- Question everything about the women; their thoughts, ideas, decisions and who they were as a person (Maria, Louise, Gaia, Three, Jess and Jenny).
- Be manipulative and controlling; everything had to be their way; they made the rules; they monopolised the women's times and energy; and alienated them from friend's family and social supports (Maria, Louise, Gaia, Three, Jess and Jenny).
- "Sulk", stonewall or give the women the "silent treatment" (Maria, Louise, Gaia, Three, Jess and Jenny) and sometimes disappeared for hours or days in a rage (Maria, Gaia and Three)

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3 Gaslighting: Mental manipulation that deliberately sow seeds of doubt in a targeted person with the aim of making the person question their own memory, perception, and sanity (Lundberg, 2017).

- Intimidate the women by using physical gestures, looks, verbal threats (Maria, Louise, Gaia, Three and Jess), throwing things (Maria, Gaia and Jess), breaking things (Maria, Gaia) and punching holes in the wall (Jess)

> *Louise – "… [he] would kind of escalate to threats, so things like, 'I'm gonna go and sleep with someone else'… 'we're gonna break up, and you're never gonna see Jack [son]'… 'you need a brick to your face' was another common one… 'You need to get your head smashed in' or 'stomped on'."*

The women described the men as being demanding, self-focused and presenting with a sense of entitlement. They were lacking in empathy, which included invalidating their feelings and experiences, being unhelpful and unsupportive. They also said they never apologised for anything, refused to take responsibility for their actions, showed no remorse and refused to get help. They found them to be dishonest, "untrustworthy" and "jealous" of their friends', family and children. The women ultimately found the ex-partners behaviour to be unpredictable.

> *Maria – "It was like a Jekyll and Hyde[4], you know. You could have a nice husband, but he always had that nasty side to him."*

> *Gaia – "He was fine, and then he would flip. There was this hot and cold. He was good, and then he would suddenly go into a rage. And his rage was completely unprovoked, uncontrollable…he would sulk for three days and then come out of his sulking, and then he would be really nice…"*

4.2.b Effects of the psychological aggression on the women

(1) Fear, anxiety and hypervigilance

Fear was the prevailing effect for all the women, which they reported experiencing for the majority of their relationship. They were afraid of inciting a negative reaction and anger from their ex-partner. The fear varied in degree and for Jess, Louise and Gaia it increased to being almost constant towards the end of the relationship.

> *Gaia – "It was a constant state of fear because I never knew. He was unpredictable, so I was constantly in a state of shaking…fear for my life…I felt completely helpless, I felt like a baby...I would turn into a blob."*

> *Jenny – "I felt scared for my future. I knew it was gonna end badly."*

> *Jess – "We were scared of anything we did, that we were gonna get our head ripped off."*

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[4] Dr Jekyll and Mr Hyde: Fictional character created by author Robert Louis Stevenson. Dr. Jekyll is a friendly person who transforms into Mr. Hyde a violent creature without compassion or remorse (Lebeau, n.d.)

Louise – "…if I tried and cooked, then he'd find a million things wrong with it, so I just never cooked. I was just so fearful of it."

Maria – "…massive arguments. To the point where I felt like I was not comfortable sleeping next to him in our own bed anymore. That was becoming more common as the time went on."

To try and keep them and their children safe from further abuse they came up with various strategies to not enrage their ex-partners which included modifying or changing their behaviours; repressing their personalities; being compliant to their partners demands and requests; avoiding conflict by not challenging their ex-partners; not expressing their opinions, thoughts or feelings; praising their ex-partner; and admitting fault and apologising even when they did nothing wrong.

Louise – "I just tried really, really hard to do whatever it was to please him, in order to not have to go through it all again…a lot of anxiety around trying to be perfect for this person so that you don't upset them and evoke their anger."

Due to the unpredictable volatility, the women became hypervigilant. They all used the phrase "walking on eggshells" to describe their experience of living with their ex-partner. They felt disempowered and unable to relax, and everything they said or did became something they worried about or second-guessed. They wanted to keep the peace at any cost and were always on the lookout for something that would trigger a rage.

Three – "…walk on eggshells all the time, I didn't know when he's going to blow up, or what I'm going to say wrong…I'd just be really quiet, I'd just go about my business trying to keep out of his way."

Gaia – "…being really careful not to say the wrong word…it eventuated with me walking on eggshells…I was constantly trying to patch it up…So around him, I would either pussyfoot or patch it up…And then when I would pussyfoot, that would annoy him, so that would create a rage."

Maria – "…I was walking on eggshells to not upset him. I would go out of my way, make sure that he was ok so that I wouldn't upset the apple cart."

Jess – "…always trying to keep the peace…I'd just do everything to try and avoid any situations with him. We were walking around on eggshells the whole time."

Louise – "…just doing whatever it is to please him...the eggshells, you're just walking on eggshells."

This experience meant that the women started putting their needs and wants aside, prioritising their partner and focussing their energy on him. Their fear resulted in a loss of agency.

> Gaia – "I put on backburner a lot of my needs. I was completely blind to it. I was putting my needs on the side, but with hindsight, I realised for 25 years I was focussed on him, and I was completely neglecting my needs."

(2) Social isolation

The women's self-preservation strategies resulted in alienation from friends, family and support systems which appeared to make them feel isolated and alone as well as having a demoralising and deadening effect on them. Maria, Louise, Three, and Gaia talked about their partners having rages at them before or after they had social events and how their fear of this influenced their behaviours. To reduce harm to themselves and to preserve the relationship, they started minimising their activities, missed important events. Maria had to send photos of proof of where she was, and Three had a global positioning system (GPS) tracker on her phone. They had to ask permission to go out, and some stopped going out altogether. They said that what they were "allowed" to do without repercussions, gradually got less and less. Louise described it as "a noose tightening", and Maria said it was "like being in a goldfish tank which was getting smaller and smaller, suffocating" her.

> Three – "I lost most of my friends…I didn't go and see my cousin [when she visited from Australia] …I was scared of his tantrums, and how he'd behave and the ramifications of me doing what I wanted were not good."

(3) Cognitive effects (minimising, justifying, memory, dissociation and confusion)

Maria, Louise, Gaia and Three tried to make sense of the ex-partners negative behaviours by justifying, rationalising and making excuses for their behaviours, both to themselves and their children, e.g. the ex-partner is "stressed", "very wounded", "has a short fuse", "may be depressed". They also minimised the negative behaviours, playing them down to themselves, so that they did not seem as bad.

> Maria – "I minimised all his behaviours over the years…in my head…excused his behaviour, maybe I was thinking wrong…it was my fault…it was a case of oh, he's grumpy, or he's stressed, I minimalised everything and made an excuse all the time for him…you kind of excuse it from happening."

Jess, Louise, Maria and Three said they had difficulty remembering some things their ex-partner did. Louise said it was a coping mechanism that she adopted, and it helped her stay in the relationship as long as she did. If Louise could not remember what he had done, then she did

not have to think about it. When Louise realised the extent that she was doing this, she started to write down incidences to help motivate her to leave and give her evidence for court if she needed it.

> Louise – *"I just decided to start writing things down, because I knew how good I was at brushing it off. He would go into happy mode again, and I would just be so thankful he was there, that I would forget about everything he'd done to me."*

> Jess – *"I can't even remember half of it coz, you know, you sort of block it out after having to go through it all."*

There was some evidence of dissociation[5] for Three, Louise, and Gaia.

> Three – *"I don't really remember. I guess I'm quite good at shutting off my own feelings."*

> Louise – *"I would often get really detached as well…zone-out, especially with the lecturing …be off in my own daydream world for an hour."*

Another common effect these women experienced was confusion. For Gaia, Maria, Louise this was caused by their ex-partners "Jekyll and Hyde" like behaviour, the extremes of nice and nasty, which made them question in their own heads which was the "real person" or whether they had ever "seen the real person".

> Gaia – *"I tried to make sense of it, thinking, well who is the real one? Which one is the real one? This manipulator who is a smooth operator or the one who explodes and breaks stuff?"*

The various mind games, gaslighting and false accusations perpetrated by the ex-partners also resulted in confusion and all the women at various times struggled to make sense of what was real and what was not, questioning their perspective and reality.

> Maria – *"…bursting into tears, sitting on the couch thinking what the heck is going on?... Always blaming me for being the one cheating. I've never cheated in my life. To have that put on me is huge. That was constant…really working away at you thinking, am I doing these things? Am I actually doing these things? Making you believe that's the actual truth."*

Maria, Louise and Three, talked about finding it too hard to admit to themselves that they were being mistreated, which resulted in them being very loyal to their partners, as well as being "protective" and defensive of them to others.

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[5] Dissociation: Altered state of consciousness as a reaction to overwhelming trauma, that can affect identity, memory, consciousness, motor behaviour, or environmental awareness (Sharon, 2018).

(4) Depression and unhappiness

All the women felt very unhappy and upset and cried frequently. The unhappiness for all of them was insidious and gradually got worse the longer the relationship went on.

Three – "…frustration, sadness…got down on myself… I got to that really low, really low point in myself where I decided that I've lost Three."

Louise – "When I would cry, he would call it crocodile tears, and that I was just crying to try and manipulate him. Sometimes I would try not to cry… he would often keep going until I cried."

Gaia - "I cried almost every day, usually alone in my car on the way to work."

Jenny and Three specifically talked about feeling depressed, and Jenny had a psychotic break ten years into her marriage.

Jenny - "The psychological manipulation worked the best on me. It made me very depressed…and I felt really unprotected…I ended up having a psychotic break…I just lost it…I woke up one day, and I wasn't myself…it was terrible."

(5) Self-esteem and self-confidence

The psychological aggression took a huge toll on all these women and resulted in the women losing their sense of self, their identity, self-confidence and self-esteem which made it even harder for them to leave.

Jess – "…started losing my self-esteem. You get caught in this rut, and you just can't get out of it … esteem just gets lower and lower."

Three - "…he put me down…it just wore me down eventually, that's why I ended up with low self-esteem."

The women became highly self-critical, blaming themselves for the issues in the marriage or their partner's negative behaviours. They felt they were flawed, "useless", "worthless", a "shit person" and "not good enough". They also felt unwanted and unloved by their ex-partner, and Maria was made to think that no one else would want her.

Maria – "I took him back [after an affair] because I was made to feel like I was worthless and couldn't get any better…no one would want me…I always felt like I was useless, worthless, very ugly, frumpy and old…felt like I needed him there to make me feel like I was worth something."

Gaia – "I was constantly finding fault in myself and thinking that I'm not good enough…somewhere deep down, I believed that I didn't deserve a partner that I can really rely on… he questioned me as a woman, as a mother…as not being good enough…I took that shit onboard."

Jenny – "He just made me feel like a shit person, and I thought I must be…I thought I was the one that had the hang-ups and the problems."

Three – "…feeling of not being good enough …[thinking] I shouldn't have said that…making it my fault as well…one of my common sayings was 'I just feel like I'm shit stuck to your shoe Anton [ex-partner]'."

All the women in some way talked about feeling worn down, "empty" (Louise) and that they had no fight left in them. They shut down and became "withdrawn" (Gaia) and "demure" (Three).

Louise – "…almost became this empty vessel…I wasn't allowed to think for myself…eroded my sense of self…makes me feel like my spark has gone."

Gaia – "I was slowly dimming my light and getting more and more closed, withdrawn and inhibited."

4.2.c Sexual behaviour of the suspected narcissist

I did not specifically inquire into the women's sexual experiences. However, Maria, Louise, Gaia and Three mentioned certain aspects of their sex life. Maria's ex-partner was the only one who was unfaithful, and he had several affairs during their marriage. Louise's ex-partner would repeatedly threaten to sleep with other women and sex was focussed on his pleasure. Three's partner withdrew from sex during their relationship, despite saying that he would father a child with her which he knew she desperately wanted. Jenny and Jess did not talk about their sex life with their ex-partners.

4.2.d. Effects of the sexual behaviour on the women

The first time Maria confronted her ex-partner about a potential affair, he got into a rage and physically assaulted her. Due to this, she was fearful of confronting him about the second affair and made sure she had irrefutable proof. At this time, Maria said she did not feel strong enough to ask him to leave, and that she still loved and needed him, so asked him to go to counselling with her. Her ex-partner hurt her deeply by never showing remorse or apologising. The affairs made her feel that she was not good enough, ugly and worthless. At times she stopped making an effort with her appearance, or alternatively, she felt in competition with the other women and made an extra effort with her appearance. Maria became hypervigilant, suspicious and paranoid

about her ex-partner having another affair and became so stressed she was sleepwalking towards the end of the marriage.

When Three's ex-partner withdrew from sex, she felt rejected, hurt, frustrated and unloved. She became "clingy" and "begged" for affection and sex. Without sex, she missed out on having another child and grieved the loss of that dream.

When Louise's ex-partner would threaten to sleep with other people, she would "beg" him not to and would have sex with him, although sometimes she would secretly wish he would have an affair so that she had an excuse to leave him.

The reasons that Gaia and Louise had sex with their ex-partners were driven by duty and obligation or from fear of their anger. Sex was a way to tame their ex-partners anger and keep them happy. They both said it made them feel like a "prostitute" and they found different ways to cope with sex. Gaia said she withdrew from sex and blamed it on menopause and Louise dissociated during sex.

> *Louise – "It just feels so disgusting, so gross…agreeing to sex so that he wouldn't yell at you or threaten to go have sex somewhere else. I must have had sex with him over a thousand times, just to keep him happy, rather than because I wanted to. And it's so gross… [I felt] Like a piece of meat…like an empty vessel…I would normally be thinking about something else."*

> *Gaia – "I felt like a prostitute…sex was a way to tame his anger. Because if he would not get it, then he would have outbursts on the children…I'm not his punchbag…sex is not to empty his anger…I just completely froze that part of me."*

4.2.e. Financially controlling behaviour of the suspected narcissist

Financial exploitation and control were a key feature of the women's relationships with the ex-partners. Louise's, Gaia's, Three's and Jenny's ex-partners refused to work or worked very little and only intermittently for the duration of the relationships. Maria's and Jess' ex-partners either limited the women's access to money or gave them no money. Whether they were employed or not, all six of the ex-partners exhibited a variety of behaviours that either controlled or adversely impacted the finances. The ex-partners:

- Blew the budget, accrued debts and did not take responsibility for paying the debts (Gaia, Jenny, Louise and Three)
- Had repeated grandiose business ideas that failed (Gaia and Jenny)
- Took money from the savings account to spend on themselves (Maria and Louise)

- Demanded to have money for anything they wanted, whenever they wanted, including drugs, alcohol and cars (Louise, Maria, Gaia, Three and Jenny)
- Prioritised their material and financial wants and needs over anyone else (Maria, Louise, Gaia, Jenny, Three and Jess)
- Pressured the women to return to work after having children (Maria, Jess and Louise)
- Expected the women to use their money to finance everything (Louise, Gaia, Jess, Three and Jenny) including world travel (Three)

Gaia – "I was the only one working, and he did the bare minimum …this is where vampirism started … he said, 'I will not work' I was blind that I was actually financing everything."

4.2.f. Effects of the financially controlling behaviour on the women

The women said because the ex-partners were financially unreliable and untrustworthy it created a lack of financial security for them. Out of necessity, Jenny, Gaia, Louise and Three worked exceptionally hard and full time to pay the bills and provide for their ex-partners. Attempts to confront their ex-partners about money would result in negative consequences for the women. In addition to working outside the homes, they were also expected to be responsible for household chores and childcare.

Jenny – "I am working away diligently, to clean up his messes…I took responsibility for everything, and I couldn't rely on him…I cleaned up, put up and shut up."

Most felt heavily pressured by their ex-partners to work and return to work quickly after children which had a detrimental effect on their energy and stress levels.

Jess – "I was tired, coz I went back to work the day after I had him, you know. Coz he wouldn't give me any money. I was cleaning houses all week with a little baby. I almost hit rock bottom."

Louise said her work suffered because she was forced to shorten her work days and hurry home to look after their child, and then had to continue working after their child was in bed to make up the hours. Jenny and Gaia said that work became an escape for them and was a place they had some control over their lives. Jenny said she became a "workaholic" and Gaia said focussing so much on work meant that she could develop her career.

Jenny – "It just made me a workaholic, I just worked and worked and worked, and that was my kind of escape. I could feel like I had some control in my life by doing that."

The women had limited financial resources which made it hard for them to leave, and harder once they left. It was clear that there was a lack of equality in the relationships with finances, the division of labour and decision making.

> *Jess – "He wasn't giving me any money, everything I earned, went into feeding the kids and paying the power…my work wasn't full time…I was trying to save bond money [to leave], coz I was dead stinking broke."*

4.2.g. Physically aggressive behaviour of the suspected narcissist

Maria, Louise, Gaia, Jenny and Jess were subject to various acts of physical aggression and violence from their ex-partners including:

- "grabbed by the throat" and "pinned against a wall" (Jess and Maria)
- "kicked", "pushed", "shoved" and "punched" (Louise)
- "hit" (Gaia)
- "slapped" (Jenny)
- having objects or furniture thrown at them (Gaia and Jess)

Gaia and Maria were physically assaulted once. Jenny had her leg slapped "hard in anger" half a dozen times throughout their relationship. Jess talked about several assaults which included her son, step-son and their baby. Louise was subjected to regular and ongoing violence throughout her 16-year relationship.

4.2.h. Effects of the physically aggressive behaviour on the women

The physical assaults resulted in all (except Jenny) feeling terrified at the time, fearful of future assaults, fearful for their safety, and the safety of their children. Jenny said that the psychological manipulation was far more detrimental to her than the physical aggression and made her fearful of her future. Maria said she was physically intimidated on a regular basis by her ex-partner standing over her and getting in her face. This made her feel scared, anxious and upset. She would "shrink" down and stay quiet to protect herself from potential violence.

> *Maria – "…he held me around my neck and said, 'Shut the Fuck up about it', and I was petrified. I could not sleep…I was trembling."*

In addition to fear, Louise talked about feeling grateful that the assaults were not worse and minimising what had happened to her. She would feel relieved the rage was over, block out what had happened, and focus on her ex-partner being "happy" again.

Louise – "…like it was never a black eye, and that's why I always used to think, oh it could be worse, it's not a black eye…I'm pregnant…I remember thinking, well at least you weren't as violent as you usually were."

One way the women tried to stop the violence was by involving the Police. During an assault, Gaia felt scared for her life and ran outside to escape and phoned the Police. Jess and Louise both reported physical assaults to the police after they occurred. None of the women pressed charges, and they all returned to the relationships. For Gaia and Louise, the police involvement had the effect of stopping the ex-partners from being physically violent with them again but resulted in their ex-partners having more rages, shouting at them, breaking things, and subjecting them to constant micro-aggressions.

Louise – "He yelled at me for hours every single day, until I finally left … And just the impact of that, I would be coming home shaking, nearly vomiting, every day from work, knowing that it was gonna happen, and wondering what was going on with Jack [son]."

Gaia – "I grabbed the phone and ran out. He stripped my sweatshirt…so it was a lot of anger. So, I ended up outside in my bra, calling Police…he never hit me after that. So that was kind of the boundary. But then he would rage… he would smash things or yell, and shout…that was excessive…then there were those micro-aggressions that were constant."

Half the women tried to resist and stop the physical aggression. They tried to be more assertive, creating boundaries, both verbally and physically. However, it escalated the situations and made things worse for them. Fear for their physical safety resulted in Louise, Maria and Three perpetrating physical violence on their ex-partners.

Louise – "…it was just really scary, and I didn't know how to make it stop…I remember once he pushed me, and I pushed him back, but then he really pushed me, so I knew never to do that again."

Maria – "He got in my face, was all intimidating…as self-defence, and as an absolute reaction, I hit him, which I was not proud of, but it made him back off."

Louise – "…started to get a backbone…I started having this slogan where I'd say to him 'It's not ok to shout. It's not ok to swear at me. It's not ok to threaten me. And it's not ok to be violent towards me'. I would just repeat that to him every time he would start. But actually, it would make things worse…he got way worse."

During the relationship, Louise had been afraid to leave because she thought her ex-partner might harm her worse, but with the escalation of violence and anger, she realised it was safer to leave and be without him than it was to stay. She phoned the Police to help her and her son leave safely and never returned. Gaia also talked about the effect the fear had on her at the end of the relationship.

> *Gaia – "…it was fear. I was really, really scared. So, I had my cell phone all the time in my pocket, I had a packed bag in my car, ready to disappear, I started parking on the street, not in the garage, to have a quick exit."*

> *Jess – "Evan [son] was in his bouncinette…and he started crying, and he walked past and slapped him really hard on the leg. And I said, 'Oi!' And there's this bright red mark…I thought, oh my God. This was all around the same time that he grabbed the throat…we had a space of 10 days where we had to deal with this [before the kids and I could move out of the house]."*

4.2.i. Behaviour towards the children by the suspected narcissist

All the women (except Three) had biological children with their ex-partners. Three and Jess both had their own children prior to the relationship, and their ex-partners also had children. All the children (except Three's) were exposed directly or indirectly to various acts of aggression. The unpredictable behaviour, rages, shouting and abuse occurred in front of them. Jess' children were physically assaulted, i.e. "slapped", "grabbed by the throat" and the family cat was "kicked" and "killed". Maria's children were threatened and intimidated by their father's behaviour, and he referred to their baby as her "toy". Jess and Louise both had things thrown at them while holding their babies, and Louise was assaulted in front of their child. Gaia's son was subjected to emotional manipulation that was extremely distressing for him.

> *Jess – "…he was starting to throw…he threw one of these chairs at him [son] and me when he was a baby."*

> *Louise – "…pushed me into the wall when I was holding Jack [son], and we both fell into the door."*

> *Jess – "…next minute I hear yelling and screaming. And he's in there, in the bedroom, he'd grabbed him by the throat…and there's this punch hole in the wall."*

4.2.j. Effects of the behaviour towards the children on the women

Maria, Louise, Gaia, Jess and Three talked about protecting, defending or advocating for their children and or/stepchildren and Jess talked about overtly confronting and challenging her ex-partner about his behaviour. They all said this made their ex-partners even angrier which made

them more fearful. Louise and Maria said that out of fear for their and their children's safety they learned to "pick their battles" and tried other ways to de-escalate the situation to preserve their safety.

> *Gaia – "…then I would jump in between, protect him [son], and that would tick him [ex-partner] off. Because I'm kind of questioning his authority and I'm kind of standing on the side of my son."*

> *Louise – "…him screaming at his, then 10-year old niece, for several hours…I remember thinking, I should do something about this, but being too scared to, because I was pregnant to him."*

For all the women their children's well-being was of paramount importance and was a pivotal factor in their decision leave. After Jess' partner assaulted both her children in a short space of time, she told him it was over, left midweek without informing him, left no forwarding address and filed a protection order with the Police. Jess said that when she left, it felt like she "escaped".

4.2.k. Relationship satisfaction of the women

It was clear from the experiences these women had, and the way it affected them, that for the most part, these relationships were not satisfying for them.

> *Gaia – "I was in this relationship, it was not satisfying at all…emotionally, sexually, Intellectually, mentally…socially."*

Despite all the adverse effects, and the detrimental impact the relationships were having on the women, they loved their ex-partners and wanted the relationships to work. This had the effect of them persevering with the relationship and trying various ways to improve the relationships.

> *Jess – "This is it, it's gotta be over. But I loved him. You're caught in that trap."*

When the ex-partners would threaten to leave, they would plead with their partners to stay and work things out. Jenny said that her faith kept her in the marriage.

> *Jenny – "What kept me in there was this faith thing, you know. When you make vows before God, it's a big thing to break them, and I didn't want to do that. That's why I stayed in there for as long as I did."*

Only Maria and her ex-partner attended relationship counselling, and that had limited effect. Gaia and Louise suggested counselling, but their ex-partners refused. Gaia and Louise (both from social services backgrounds) also tried to work out a pattern to the cycle of aggression in the hopes that they could identify the triggers and then avoid them in the future, but it was "impossible".

Maria, Louise, Three and Gaia talked about holding onto hope and that the hope kept them in the marriage. When their partners calmed down or were in a better mood, they would feel more hopeful about the future, and that things were improving.

> Maria – "I was paralysed with hope that maybe we can get this sorted…he could get better with going to a GP and psychotherapist, and I thought that you know they could fix him, and I could have my nice husband back again."

The declines in the relationship satisfaction occurred at various rates, but for Louise, Maria and Jess the most rapid decline was after they had children. This decline coincided with an escalation of the abusive behaviours from their ex-partners.

> Jess – "It wasn't until after I had the baby that things started going downhill again."
>
> Maria – "As soon as kids came along it all changed."
>
> Louise – "…because he always wanted to have a kid. So, I just thought…that that would help him…I was ready to have kids myself, but…it actually just made things worse."

At various points throughout the relationship, most of the women had wanted to leave. Three and Jess had temporary separations and reconciled. By the end of the relationships, Jess, Louise and Gaia were scared for theirs and their children's safety.

> Louise – "…was sitting on the floor, like naked, wet still [from the shower], feeding Jack [son], trying to calm him down, and Leonard [ex-partner] came in…he kicked me in the back a few times, while I was feeding Jack. It was just like something twigged in me…obviously, it's one thing to do it to me, but he's doing that now in front of our son and to our son."

Maria, Louise, Jenny and Jess were the instigators of the separations, Gaia knew she wanted to leave but felt scared to. After a particularly scary incident for her and her children, he said he was leaving. She got a contract drawn up, he then begged to stay a bit longer, but quickly left and moved overseas. Louise and Jenny ended their relationships within two years of their child being born. Three was the only participant who did not instigate the separation, and she was shocked by it ending.

> Three – "I was really devastated, coz I worked really hard, I'd stood by him through everything…and here he was going, oh well I don't need you anymore. So, it was really devastating for me."

4.3 Post Relationship

4.3.a. Behaviours of the suspected narcissist

Maria was the only one who talked about having ongoing, unwanted contact with her ex-partner. She continued to be subjected to a "nice then nasty" cycle of behaviour from him. This included various acts of intimidation and verbal threats e.g. threats to damage her property, being witnessed walking around the house with a hammer, threatening to turn up and enter the house, saying he knew where she was when she was out with friends, and he would turn up at their children's events and hover around her.

Louise, Jess and Gaia had limited contact with their ex-partners. Louise, Maria, and Three said that their ex-partner had spread lies about them to friends and family. Jess and Three experienced some form of online stalking.

> *Maria – "…messages he would send… 'I know where you are, my sources have told me where you are. I'm coming to see you', and so I would gap it. I would leave wherever I was, thinking he knew where I was."*

4.3.b. Post relationship effects on the women

The effects on the women post-relationship appeared to be a continuation of the effects they had experienced during the relationship.

(1) Fear

Maria, Louise, Jess and Gaia shared stories of how scared they were, the fear they felt, fear for theirs and their children's safety.

> *Maria – "…very intimidated and very scared when he did come around…I would just go into this sense of shaking and just anticipating that he would say something, or he would try to get near me."*

This resulted in Louise, Jess and Gaia taking out protection and trespass orders. They were all hypervigilant and took precautions to keep themselves safe, e.g. changing locks on doors, leaving social events, family members regularly phoning to check on them, avoiding meeting new people.

> *Louise – "I remember Mum and Dad…rung me like every hour…to check that I was ok…I'm living with this fear…thinking he was gonna turn up."*

Jess took additional measures to try and keep "ten steps ahead" so her ex-partner could not follow her, e.g. removing her name from the "electoral roll", "schools all knew" and "neighbours made aware" of the situation, choosing houses "down long drives", not letting anyone know where they lived and moving frequently.

> *Jess – "I was just so worried about my kids' safety and mine…thinking…keep ten steps ahead and make sure he doesn't try to follow me."*

(2) Trust

This area was talked about the most post-relationship, and all women were affected. Even Jenny who is 16 years post relationship is still experiencing difficulties with trust. Maria, Louise, Jenny and Three said they were worried about meeting new people, and had difficulty trusting people.

> Three – "I felt I couldn't trust…I couldn't trust anybody…I couldn't trust a man again…I didn't want to have a relationship…I didn't want to be the giving person that I always have been…so I stopped helping people."

Three was the only participant who had re-partnered. Maria, Louise, Jenny and Jess talked about being afraid of having a romantic relationship again and having difficulty trusting a man again. There was a general fear and trepidation that they would miss the "warning signs", get "sucked in", become involved with another narcissist and experience similar or worse abuse. Maria and Louise were concerned that they may now be hypersensitive to narcissism, power and control and overreact in a negative way to normal dating behaviours and end relationships unnecessarily.

> Maria – "I wouldn't wish for anyone to go through this. It's horrible, and it makes me scared of how many other people are out there that are like this because you get sucked in, that's it, you're stuck in a sense."

There appeared to be a sense of disempowerment that they would not be able to get out of a relationship with a narcissist in the future should that occur again. Jess and Jenny said they have been put off men and will not have a romantic relationship again.

> Jenny – "I've been on my own for 16 years. The thought of actually getting back into another relationship is very scary, coz what's to say that person isn't gonna treat me like Eric did…Sometimes these people don't show their spots straight away…It's happened to me once before…I'm scared that it's gonna happen again."

> Jess – "Tracey [her ex-partners previous ex-wife] and I are the same, no, never again. Put us off men."

(3) Anxiety, panic attacks and flashbacks

All of the women (except Gaia) talked about having some form of anxiety after the relationship ended and Jess, Jenny and Three experienced panic attacks. Louise and Maria talked about emotional flashbacks that would be triggered by seeing their ex-partner or by objects related to them. Jenny, Gaia and Louise talked about feeling activated by witnessing any form of narcissistic behaviour, even by strangers. Maria and Louise talked about the fear and anxiety affecting their

physical health, e.g. appetite loss, sleep disturbances, frequent colds and exacerbation of existing medical conditions.

> *Jess – "I started getting panic attacks ...I had a lot of anxiety. I was going to the Doctor. I said 'I'm just not coping'…I was a real mess."*

(4) Financial impact

Jess, Louise, Three, and Maria talked about either having nowhere to live or having to move soon after the relationship ended. Three and Jess specifically talked about the financial toll the relationship took on them, and Jess said she struggled to get herself "out of debt" and "back on track". Maria, Louise and Three needed financial help from their parents soon after the separations. Gaia and Jenny talked about the relief they felt at being no longer financially responsible for their ex-partners.

> *Jenny – "I remember going down to Work and Income, and they put me on the DPB [domestic purposes benefit] …I was so thankful and grateful. I could have kissed them. Because I'd never had that stability, never."*

(5) Anger

Louise, Jess and Three talked about experiencing anger. Louise talked about feeling "angry", "resentful", and "guilty", about the financial and emotional effects this had on her extended family. Jess and Three said they felt "angry" at themselves.

> *Jess – "…angry with myself for putting up with it …and staying and putting my kids through it."*

> *Three – "I get angry with myself for allowing myself to be treated like that and be in this position."*

(6) Grief, loneliness, depression, relief and liberation

Jenny, Maria, Louise and Three all talked about experiencing grief over the relationship ending. Gaia said she did not feel grief after, as she had grieved for the relationship in the years leading up to it ending. She said she had actively worked on "letting her love for him die" with each negative experience. Maria and Jenny felt "lonely" at times but did not regret the decision to leave. Jenny experienced depression, Jess mentioned "despair" and Three talked about "devastation" and feeling "suicidal" briefly.

> *Jenny – "I still mourned, I felt guilty about the decision I made to give up on this thing…I felt sad, lonely…I'd think to myself I don't know whether I should have*

done that. Was it the right decision? It just took a long time to put those things to
bed…I was quite depressed for quite a long time."

Overall, the women felt "relief" that the relationship was over. Louise and Gaia both talked about the feeling of "liberation" that came with the relationship ending.

Louise – "It's been really hard and really liberating…go from anxiety to anger, to
resentment, to fear, to grief, a lot, and it was really horrible."

Gaia – "When he left it was just this uplift. It was just like…black ink is out of my
life…because every now and then he would spill that black ink…the rage, or
putdowns, or negativity, or sulking…I feel liberated in a way. It's like wearing too
tight shoes, and then suddenly you take them off, and you say 'ahhhhh'."

(7) Self-esteem and self-confidence

The women continued to struggle with low self-esteem and the same negative thoughts about themselves that they had experienced during the relationship. Jenny and Gaia talked about feelings of not being "good enough".

Maria – "There's so much he's said over the years to make me feel like I can't get by
without him…that feeling of worthlessness…he would always put me down…that sticks
with me right now…I feel like nobody would want me."

Jenny – "I thought I was a dirty rotten sinner…Listening to Eric all those years, I
believed that I was the problem coz I didn't see things the right way…very low self-
esteem…I felt I'd failed. I'd tried so hard, but it wasn't good enough."

Gaia and Three talked about how "stupid" they felt for being taken advantage of, and Louise talked about it being "hard to admit" what had happened to her.

Three – "I felt really dumb afterwards…I spent my whole life savings on him…I gave up
everything for him…I felt dumb. I felt stupid. I was really embarrassed."

For Louise, Maria and Jenny, the self-criticism that occurred during the relationship continued, and sometimes increased, after the relationship ended. For Maria and Louise, this included repeating to themselves the things their ex-partners would say. These three women talked about struggling with a "loss of self-confidence", "doubting their own judgements", "second-guessing" themselves, and having difficulty trusting themselves to make decisions. Maria and Louise also talked about battling to form their own opinions on things because they could still hear their ex-partners voice in their heads.

Louise – "I'm finding it hard to allow myself to think again, without the eggshells, and let myself have my own thoughts and opinions…really hard to allow myself to do things my way."

(8) Loss of self

All the participants (except Jenny) specifically mentioned what they were like as a person before the relationship, and how they had changed by the end of it. They described themselves as either "strong" (Maria, Gaia, Three, Jess and Louise), "fun" (Louis and Maria), "capable" (Gaia), "outgoing" (Louise), "sociable" (Three), "free" and "spontaneous" (Louise), "funny" (Louise), "confident" (Jess and Three), "self-assured" (Three), "independent" (Gaia and Jess), and/or "strong-willed" (Jess). None of them had a history of mental health issues prior to the relationship. By the end of the relationships, all the women said they had lost who they once were in some capacity, and they had to regain that.

Three – "When we split…I was just a shadow of who I had been…a shell even."

Jess – "I was gone in the guts …felt like I'd been rolled over by a steamroller… took me a long time to get myself back."

Maria – "Not being the same person that you were once before, and I have to find that person again somehow."

Louise – "I was really…outgoing and really funny…have these amazing, hilarious, quirky conversations…that is one thing that he's really…beaten out of me…I just don't have that anymore…I'm really trying to get my humour back."

They all saw themselves as completely different people at the start of the relationship to who they were at the end and directly attribute those changes to the relationship.

4.3.c Recovery

(1) Length of time to recover

Despite the length of time that had passed Gaia, Jenny and Three felt they were not completely recovered from the detrimental effects of the relationships in some way. Jess said it took her eight years to feel safe, Gaia said that she needed the divorce finalised to feel fully recovered and Three said that she still "pined" for her stepdaughter and was upset about the large amount of money her ex-partner refused to pay back.

Jess, Jenny, Three and Gaia said it took a long time to feel like they were mostly recovered. It varied from one year (Three) to six years (Jess) to feel like they had regained most of their old self back.

Jenny – "It took me quite a long time. For me, I just felt like it was never gonna end… It took me five years to recover after finishing with him."

Maria and Louise were only a few months post separation when I interviewed them. Therefore, they were still processing and coming to terms with what had happened, dealing with grief, anxiety and fear as well as caring for children and sorting out legal and financial issues.

(2) Making sense of the experience

There was this air of disbelief from the women that they had ended up in these relationships and tolerated or "allowed" such mistreatment and abuse.

Gaia – "It made me crazy…I was putting up with stuff that I never ever thought that I would put up with…violence, abuse, manipulation, stress...I was an independent, feminist woman and I never thought that I would be sucked into it."

To try and understand why they did, all of the women (except Jess) looked at their upbringing thinking it may have somehow contributed to why they made the decisions they did. Jenny, Three and Gaia all indicated they had a lack of positive relationship modelling at home, or experiences as children, that they felt made them more susceptible to tolerating certain behaviours. Conversely, Maria and Louise talked about having great role models in their parents, and home environment so found that more perplexing.

Jenny [whose parents were divorced] – "It's an insidious thing because the partners think there's nothing wrong with them…I just think there's such a lot of people, women, out there from broken homes, as children coming into relationships and they just don't know any better. And I think that's the problem I had coz I didn't know any better. And I didn't know that that wasn't normal."

They also wanted to understand why their ex-partners had behaved in the way they had. They sought information from a variety of sources including the internet and books. This was where they gained a lot of their knowledge about narcissists and narcissistic abuse which they found helpful.

(3) What was helpful to their recovery

Each of the women were proactive in their recovery, they all wanted to improve their lives and the way they felt. They found talking with others about their experiences very helpful. Connecting with and receiving validation and support from others who had been through similar experiences was also valuable.

Maria – "What is helpful at the moment is I've found a Narcissistic Survivors Group on Facebook, and that's been really really good. Quora…reading other people's questions and answers…anonymously asking a question and have people come back."

The women focussed on rebuilding their social networks and started going out socially. They actively sought information and educated themselves on narcissism, narcissistic abuse, domestic violence, power, control and creating personal boundaries. Louise was the only one who had intervention from the police to leave, and she spoke very highly of the family harm team, women's refuge, victim support, and stepping stones programme. She also said having a family lawyer who was ex-police and who understands domestic violence was very helpful to her when facing court.

Louise – "…getting educated, knowing what to expect has been so helpful…really recognising…power and control."

(4) Counselling

Gaia, Three, Louise, Maria and Jenny sought counselling, and the Jess reached out to her GP and was offered counselling by the court, but it never came through for her. Jenny said that the counselling she received was not overly helpful, the counsellor did not raise the issue of narcissism, she did not get what she needed and did not go back. Maria said the person she was currently seeing did not understand narcissism. Three said she had a few sessions of counselling, but it was not very helpful. Louise said the therapist she was seeing had a "really good" understanding of abuse and control which was helpful. Gaia said that the therapy she received was helpful, but narcissism only came up once the counsellor raised the term co-dependent.

Gaia – "At one point I said [to the counsellor] 'Well, what am I doing wrong? Just, can you please tell me so that I don't repeat the same thing.' And she said, 'The word that comes is co-dependent.' So, we started talking about co-dependency, and this is when narcissism came up."

(5) Making meaning from their experience

None of the women said they regretted the relationship. All the women wanted to make meaning of their relationships, and a way to do that was to focus on something positive that came from it. For all the women, except Three, the resounding positive thing for them was the children they had had.

Louise – "You want to regret not having left when I was 17, the first time he punched me in the stomach, but I can't, because I wouldn't have Jack [son]."

Louise, Gaia and Jenny felt this experience had positioned them to help others more. Gaia and Louise who work in the social services area, both said it taught them humility, and they were more understanding and compassionate towards women in abusive relationships which improved the work they did.

> Gaia – "…it's also taught me to be humble…being a social worker and you often think, why doesn't she leave?… I am a woman who is, you know, financially independent, capable, educated, and I was trapped. So, it just taught me to have more compassion for women who are, unemployed, uneducated, trapped in a relationship and how much we need to do as a society to help them break free."

> Jenny – "I've met a lot of different people, and I've been able to just help them, say 'Hey, you're not nuts. You're gonna be fine. Seriously, you'll be fine.' And that's been quite special. So, nothing's wasted is it?"

Most of the women said that they learned a variety of things from the relationship that has helped them going forward in their lives and that they had grown as individuals.

> Three – "So I've learnt, you know, that discernment is kind of like setting some boundaries and things for yourself… so it's been good. I've been much more safe in myself mostly."

4.4 Summary

All the women felt that their ex-partners met the criteria for NPD and my assessment based on the participant's descriptions and interview response is that all their ex-partners would meet the DSM-V criteria for NPD. One of the defining features of NPD is that it is stable, pervasive, inflexible and creates an ongoing and persistent pattern of behaviour. These ex-partners consistently exhibited behaviours that showed: a lack of empathy; grandiosity [6]; entitlement; expectation of compliance with their demands and favourable treatment; arrogance and haughty behaviour; interpersonal exploitation; self-importance and superiority; they required excessive admiration; they believed they are special; they were envious of others. Jess and Jenny both talked to other ex-partners of the males and discovered that the behaviour was present in every relationship they had.

The findings revealed a consistent pattern with all six women interviewed. The relationships had a rapid, intense beginning and were experienced very positively by the women despite some early warning signs. The male appeared to be so emotionally influential that he was able to come into a woman's life and quickly establish himself as a significant presence. After the initial positive

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[6] Grandiosity: "(an aspect of Antagonism); Feelings of entitlement, either overt or covert; self-centeredness; firmly holding to the belief that one is better than others; condescension toward other" (American Psychiatric Association, 2013, p. 768)

experiences, the relationships started to deteriorate. The onset of this deterioration varied from a few months to a few years, often getting even worse after children arrived.

These six women were not treated as equals by their ex-partners, they had their human rights repeatedly violated, were placed in a position of servitude, and lost their independence, autonomy and sense of agency. The women were all subjected to various control tactics including ongoing, regular psychological and emotional abuse, financial control, and most of the women experienced physical abuse. With the ex-partners' abusive behaviours, the women started to live in fear and lost their sense of self entirely. The women responded in a variety of ways to preserve the relationship, keep their partners happy, and to keep them and their children safe.

Some of the effects on the women during the relationships were fear, anxiety, hypervigilance, social isolation, depression, unhappiness, loss of self-esteem, loss of self-confidence, loss of identity, dissociation, mental confusion and a sense of walking on eggshells. This ultimately resulted in an inability to think their way out of an increasingly toxic situation. The women were adversely affected in all areas of their lives, i.e. emotionally, mentally, physically, financially, socially and spiritually.

The women who chose to leave, only left once their own or their children's safety and wellbeing was significantly adversely affected. Many of the detrimental effects seen during the relationship continued after it had finished with some additional effects seen, i.e. panic attacks, grief, anger and loss of self. Many of the effects lasted for many years post relationship and severely affected their ability to trust others and created fear of future relationships. For all the women who had time to recover, the recovery from the relationship has been a long one. All six women sought professional help, most of which was not very helpful. Despite what they endured, they showed enormous strength, courage and resiliency.

5. Discussion

As previously identified in my literature review, there are some gaps in empirical research into the ways that NPD and narcissistic behaviours impact on relationships. Specifically, empirical research has not substantiated women's experiences and how women are affected by a relationship with a narcissist, despite a significant body of anecdotal literature from partners and therapists about these experiences. One of the consequences of the gap in this literature is that this topic is under the radar in counselling training in New Zealand and (based on the experiences of the participants) counsellors may be poorly prepared to support the partners and ex-partners of men with the characteristics of narcissism. This project was designed to provide an understanding of the experiences and effects of a small group of New Zealand women to assist counsellors working in this area.

My focus for the discussion chapter is on the women's experiences, the effects on them, and how they become annihilated in relationships with suspected narcissists. I will reframe and elaborate on some of the themes that were identified in the findings chapter, ultimately shining a light on the therapeutic issues and implications that have arisen from the project. These will be further explored in the recommendations chapter. I caution readers about generalising the findings, as this project only included a small sample of Pakeha women.

This project is specifically looking at women's experiences of a relationship with a male with a specified personality disorder. Therefore, it was essential to ensure that these ex-partners met the criteria and as mentioned in the methodology and findings chapters, I believe that all their ex-partners would have met the DSM-V criteria for NPD in both the standard and alternative models (Appendix B). However, NPD can only be formally diagnosed by a clinician after detailed discussion and direct observation with the person in question, so the ex-partners are referred to as suspected narcissists.

5.1 Narcissistic Abuse

This project was designed to look at women's experiences of relationships with suspected narcissistic male partners and the effects it has on them. I have chosen to use the term narcissistic abuse in my writing to differentiate this type of abuse from other abuse. This term has been widely used on the internet, blogs and in writings by therapists. However, descriptive data varies greatly, is often vague and imprecise, and no formal, diagnostic criteria has been developed. This means that a consistent and concise definition for this term does not yet exist. On a basic level, for this term to be applicable, two conditions would need to be met: some form of abuse has been perpetrated, and the perpetrator meets the criteria for NPD. To make this a more useful term and

definition, "narcissistic abuse" would need to show that it has some distinct characteristics that may differ from general abuse, domestic violence or interpersonal violence.

From my findings, it could look like any other story of domestic violence. However, I would argue that it is different. I see several distinct differences in the way abuse perpetrated by narcissistic partners may differ from abuse perpetrated by non-narcissistic partners which are directly connected to the criteria and manifestations of NPD. These might be discriminant features of narcissistic abuse that counsellors may not be sensitive to (as shown by three participants).

1) I believe the most important feature of narcissistic abuse is how the narcissist appears to create a false persona at the beginning of the relationship that is not a genuine reflection of who they are. This is done through a high degree of deception and manipulation and creates a false reality for the women and sets up the environment where abuse can occur. The women genuinely believe this person loves them and has their interests at heart, however, this is not the case. The narcissist has their own agenda and wants to extract whatever they can from the other person that benefits them. Once they have gained the women's trust and love, they gradually let their true self show and start behaving in more negative ways. This seems to be unique to narcissistic abuse in that it creates confusion in the women and makes them question who the real person is. The contradictions between the two stages of the relationship are immense.

2) With narcissistic abuse, there is less emphasis on physical abuse and the physical health impact of that abuse than in other domestic violence literature. Although there were incidences of physical abuse, Louise was the only one who experienced an ongoing unpredictable, pattern of violent behaviour. With most of the other women physical abuse did not occur or was an isolated incident. It may be that the ex-partners were less likely to be physically abusive, or they may have been more concerned about being caught. Gaia and Louise reporting the abuse to the Police stopped the physical assaults on them, but it escalated the verbal and psychological abuse. This would imply that the ex-partners have some control over their reactions, choosing how and when they abuse, and deliberately adjusting their tactics of control. Gaia even asked her ex-partner this at one time.

> Gaia – "'Well, can you control it or not?' And he said, 'Of course I can.'… And I said, 'Well, if you can control it, then you're doing it with a purpose, then you're doing it to manipulate. If you can't control it, you need help. But if you can control it'. And then at that point, I realise, oh my God, he can control it. So, he's doing all that to manipulate and to keep me under his thumb. And that's the moment when I decided, oh I need to escape this, in a way that will not harm the children, and that will not harm me."

3) The above example speaks to the high level of manipulation that narcissists use throughout the relationship. It also explains why it was difficult for the women to work out the triggers or any pattern to the behaviour. I believe due to the nature of NPD that the level of manipulation (including the financial manipulation) that was apparent in these relationships would be higher than other domestic violent relationships. The manipulation that narcissists exhibit is intentional, aggressive and antagonistic whereas non-NPD abuser's behaviour may arise from other psychological conditions such as depression and addiction which may not be as psychologically damaging for the partners. The tactics used, frequency, and degree of psychological manipulation, may combine to make the "walking on egg-shells" effect for the women even more powerful. Whereas with partners in other domestic violence situations may be able to have periods of normality or even predict when trouble is looming. With these differences, it is understandable that the effects on the women would be different in some ways to relationships with males who may commit domestic violence, but who do not have a personality disorder.

4) The abusive behaviours exhibited by the ex-partners can be directly linked back to NPD criteria and were not connected to drug or alcohol addiction. Three's ex-partner was the only alcoholic. He was not abusive while drinking and was the only ex-partner who did not perpetrate physical violence.

5) The "Jekyll and Hyde" character of the ex-partners may not have had an empathetic side to it, and this appeared to be illustrated in the lack of remorse or apology. Without empathy it may be that they are less likely to reflect on their behaviour, make amends and adjust their behaviour accordingly. In domestic violence literature, the honeymoon period is often talked about, where the partner will make amends and be apologetic in some way. This was not the case in these six relationships. In fact, it was a common feature, that none of the ex-partners ever accepted responsibility, admitted wrongdoing or apologised.

6) NPD is a personality disorder that is very resistant to change, which means that going to counselling or doing any other type of therapeutic work is unlikely to change the quality of the relationship. The ex-partners did not see their behaviour as an issue, therefore saw no need to go to marriage or individual counselling.

5.2 Mental health consequences for women

The anecdotal literature gives a huge list of effects women can experience, and a lot of these were not experienced by my participants. Conversely, my participants experienced some effects that were not mentioned in literature, e.g. sleepwalking, and a psychotic break in one case. However, the effects that were aligned between my participants and the anecdotal literature were: anxiety, depression, dissociation, hypervigilance, guilt, self-doubt, panic attacks, grief,

embarrassment, confusion, difficulty making decisions, people pleasing, Stockholm syndrome/trauma bonding, social isolation, feeling fearful, powerless, worthless, not good enough, decreased self-esteem, ruminating for a long time about what went wrong and working out what the early warnings signs were. Although the literature showed that women could experience PTSD, self-harm and suicide attempts post-relationship, none of my participants experienced these. It is possible that some of the women may have had undiagnosed Complex PTSD[7] (C-PTSD) as they did appear to have experienced some symptoms of it, e.g. hypervigilance, flashbacks, fear, anxiety, mistrust, self-blame.

The insidious and completely overwhelming nature of abuse perpetrated by suspected narcissists is illustrated at the extreme end by Jenny. She had no mental health history before her marriage yet had a psychotic break during it. When under the mental health services and having counselling, no one looked at her relationship as a potential cause of this. Some of these women found it hard to admit to themselves how badly they were being treated, and they also hid what was going on from friends, family and colleagues. It shows the importance as counsellors to examine all areas of someone's life when we see them and to have better knowledge of the mental health consequence of a relationship with a suspected narcissist.

It is important for counsellors to be aware that the abuse that these women are subjected to instils in them the core belief that they are not good enough and holding these thoughts about themselves has a profound effect on the women's self-esteem and self-confidence. Therapeutic work needs to be focused on repairing this negative belief and helping women reclaim who they were and their identity.

5.3 Ideas about love

Most of the women wondered how their family of origin influenced their tolerance of such negative behaviours in a relationship. Gaia and Jenny believed that the poor role modelling at home might have made them more susceptible, although Louise and Maria, who believed they had excellent role models, felt even more perplexed that they had tolerated it. Louise, Maria, and Jenny mentioned that they were naive or inexperienced with relationships so did not have much of a basis for comparison with relationships.

From their stories, I noticed a common thread connecting all the participants. It became evident that how they conceptualised love, and the stories they told themselves about love, had a significant influence on how they reconciled the more negative behaviours from their ex-partners. From the beginning of the relationship, they started making meaning from their experiences,

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[7] Complex PTSD: occurs when a person is exposed to chronic, repeated or long-lasting traumatic events such as violence, abuse or neglect from which escape feels impossible (traumadissociation, 2018)

labelling behaviours as a way you show love in a normal relationship. They began to believe that that was what love was.

I would argue that it is not necessarily inexperience or naivety in relationships that create unrealistic ideas about what love is. Women's ideas about love are embedded in social discourses and connected to the messages that come from various areas of society (Burr, 2003; Hayes & Jeffries, 2013). In research by Hayes and Jeffries (2013) they discussed how the discourses about what constitutes romantic love are very powerful and are a huge part of the female-gendered experience in the Western culture. This discourse pervades society and is embedded in media, movies, books, television, art, music and magazines (Power, Koch, Kralik & Jackson, 2006). The discourse implies there is a fine line between pleasure and pain, love and hate. Hayes and Jeffries (2013) say that love stories have elements of fate and tragedy incorporated which depict love as being, "…all powerful, all-consuming and will last forever…. potentially painful, all-encompassing, controlling and obsessive….possessive and controlling behaviour…within the romantic discourse can become distorted as a demonstration of true love and commitment." (p.61).

This was clearly illustrated in these women's stories where the men wanted to be with them all the time or phoned to check where they were or used a GPS tracker. This discourse may have prevented the women from seeing the behaviour for what it was, as a warning sign for abuse.

Another aspect to the romantic love discourse is that it:

> …prioritises relationship maintenance above all else and suggests that love itself can overcome obstacles, even abuse….Often [women] believe if they try harder, love more, be a more worthy person, then the abuse will stop because they will no longer be deserving of it. (Hayes & Jeffries, 2013, p. 61).

If women are accepting of these social discourses about romantic love, then it can mean they are more accepting of abuse, feel bound to their partners, ultimately making it more difficult for them to leave these relationships. While this discourse on love can perpetuate any abusive relationships, narcissistic people with their gaslighting and other forms of manipulation may be particularly good at playing on this discourse to their own advantage.

5.4 Ideas about gender politics, power, equality and fairness

Even before the women started feeling afraid of their ex-partners anger, they had started to change what they said and did, becoming overly responsible for their ex-partners happiness and relationship stability. This could simply be normal people-pleasing behaviour that occurs at the start of the relationship which is unreciprocated by the ex-partner and then gets exploited by them. During the relationship the people pleasing behaviours get further amplified by the women's

fear of abuse. This resulted in the women becoming self-sacrificing to an extreme end and ending up in a position of servitude. Despite the lack of equality, reciprocity, and respect the women were subjected to, and that they were clearly unhappy with the relationship, none of them framed this as unequal or unfair as is understood in feminist terms.

After the relationships had ended, it appeared that some of the women started viewing being unselfish, helpful, considerate and generous as negative qualities because it left them open to being taken advantage of. This concrete, black or white thinking about their personal qualities that appeared after the relationship ended, could have the potential to trap them into a deficit view of themselves. If this happened, it would further compound their already negative self-concept. It is important to help these women view such qualities as personal strengths as well as qualities that are valued in society.

5.5 Tolerance of free-loading

Spending too much energy and attention on possessing material goods (Campbell et al., 2006) is a key feature of the superficial and non-empathetic characteristics of narcissism, and one that was a subject of complaint from the participants and from partners in the literature (Brunell & Campbell, 2011). I would have thought that the desire for material goods and prestige would have motivated the males to work hard and secure jobs that would reflect favourably on their image. However, it appeared that the ex-partners manipulated the women into being the primary earner and dominated the finances which enabled them to possess the materialistic items they wanted, without having to work for it. This is also a contrasting finding, considering general domestic violence research (Adams, Sullivan, Bybee & Greeson, 2008: Brewster, 2003; VonDeLinde, 2002) shows the female often not being allowed to work as a strategy of financially controlling her.

The ex-partners had an expectation that they should not have to work for money. The women tolerated this and had their resources and energy levels severely depleted. Despite this, they did not comment feeling that it was unfair or unequal at the time, and those thoughts occurred in retrospect. It would appear that the way they conceptualised love from the start, their desire to please, and ultimately the fear of angry outbursts, combined to make them tolerant or accepting of the freeloading. It could be that they were gradually acclimated to it, as they were already used to have less or no rights and that is why they did not see it as unfair. For Gaia, Jenny and Louise it appeared that their gratitude for having an escape from home and being able to develop careers outweighed any negative thoughts about the situation. For Maria and Louise, it enabled them to learn new skills and create a small owner-operator business.   However, after the relationships ended, Gaia and Three did express feeling used for their money and feeling taken advantage of. The control and abuse of money by the ex-partners made it much more difficult for these women

to leave and is an important consideration when working with these clients who may be wanting to leave.

5.6 Sexual safety

As mentioned earlier, sexual aggression was not a specific area of enquiry, and none of the women volunteered that they were sexually assaulted by their partners. However, half the women experienced sexual coercion which the literature identifies as a common behaviour of narcissists. The women had sex out of fear of anger, conflict and infidelity. This resulted in them feeling exploited and ashamed which negatively affected their self-worth. Since all the women interviewed talked about doing what they could to keep their partners happy, it would have been an area worthy of additional exploration given that violation of sexual rights can have such profound and long-lasting effects on a women's mental health.

5.7 How "love" becomes a form of "imprisonment"

My research showed these relationships started with an intensity that did not give the women much time to themselves. It appeared that these men were so powerful they managed to come in and colonise these women's lives from the beginning. Even the women who said they were happily single had their minds changed about having a relationship. Struzenberg (2016) identified love bombing as a tactic used by narcissists in relationship formation, but they did not explore the effect this had on women. I would suggest that without space away from the suspected narcissist, it may make it harder for the women to process or reflect on the possible early warning signs that they referred to. The fact that they did not have this space showed how early on possessiveness and control entered the relationship, which were gateway behaviours to more abusive ones during the relationship.

It became apparent that these initially loving relationships do not change overnight. Without distance from the suspected narcissist and outside perspectives, the women slowly became habituated to abuse and coercion and the relationships became a form of imprisonment. Pitman (2017) quotes Edward Stark as explaining coercive control as a "cage…the bars being men's use of psychological subjugation, strategies of violence, intimidation, isolation, exploitation and micromanagement of everyday life" (p. 156) that deny women autonomy, agency or equality. The ex-partners used these strategies to secure male privilege and dominate the women by instilling fear. It profoundly changed the women's world view and how they felt about themselves and kept them trapped in these relationships.

5.8 Explaining women's perseverance with these relationships

The women identified various reasons for persevering with the relationships: fear of further abuse if they left; fear that they would be prevented from seeing their child; hope that their partner would change and improve; lack of financial resources; and religious beliefs. In addition, they believed that no one else would want them; were ashamed to admit to themselves or others the truth about the abuse; minimised the abuse to themselves; had low self-esteem; and still loved and wanted their ex-partner. Although these latter features are common with domestic violence, the narcissistic person is exceptionally clever and skilled at emotional and psychological abuse which can exacerbate these effects and make it even more difficult for the women to leave. I would go a step further to suggest that it was also combinations of optimism bias, cognitive dissonance, and Stockholm syndrome which contributed to the women's perseverance.

5.8.a Optimism bias

Optimism bias is an inbuilt survival mechanism in our brains (Sharot, 2011). It creates the hope that things will improve and works as a protective mechanism from thinking about future pain and difficulties in a more realistic or accurate way. These women held onto the idea that their relationship and partner would improve which helped to reduce their anxiety and stress at times and kept them bonded with their ex-partners.

5.8.b Cognitive dissonance

Cognitive dissonance is a defence mechanism that occurs involuntarily as a way to survive a threatening or controlling relationship (Carver, 2011). People use it to manage the emotional discomfort caused when they hold two opposing or conflicting thoughts, opinions, or feelings simultaneously. To ease or eliminate that discomfort, they replace the thoughts with ones that cause less discomfort. They do this by rationalising, minimising, justifying or excusing the truth which enables them to stay with the abuser (Carver, 2011). For example, when their ex-partners were abusive and they could not leave, they minimised the abuse by saying at "least he doesn't punch me" (Louise); or justified it by saying "he has a lot of stress (Gaia); or excused controlling behaviour about clothing by saying it is "because he loves me" (Maria).

The more people invest in the relationships, whether it is money, emotions or time, the more they have to justify the behaviours. Carver (2011) says that investment combined with an ordeal is very bonding and the findings illustrated showed how investment worked to keep the women in the relationships, e.g. emotional investment (religious commitment felt by Jenny), social investment (professional embarrassment felt by Louise), financial (Three spending her savings on him).

5.8.c Stockholm syndrome

As noted in the literature review, the connection between Stockholm syndrome and relationships with narcissists has been identified by a number of people, e.g. Arabi (2016) and De Canonville (2010), most of whom are counsellors. Carver (2007) states that four conditions are required for Stockholm syndrome to occur: the presence of a perceived threat to a person's psychological or physical survival; the belief that the abuser would carry out the threat; the presence of a perceived small kindness from the abuser to the victim; isolation from perspectives other than those of the abuser; the perceived inability to escape the situation. The acts of abuse are combined with isolation and occasional acts of kindness. This results in the person emotionally bonding with the abuser and is a survival mechanism that protects the person from what they perceive to be a threat to their safety that is inescapable. They can even feel grateful to the abuser when the threat to themselves is removed. The combination of Stockholm syndrome and cognitive dissonance makes people believe that the abuse is acceptable or that the abuser is needed for their survival.

The conditions that most of my participants were exposed to could fit the criteria for Stockholm syndrome to develop. There was evidence of this effect on them in their stories, i.e. being grateful that the abuser did not treat them worse; focussing on the good times and positive things; denying and minimising the more negative behaviours; staying with their ex-partners because they loved them; staying because they felt they were nothing without them; being dependant on them; defending and protecting the ex-partner.

5.9 Living with abuse: deconstructing the notion of co-dependence and resistance

5.9.a Co-dependency

There is anecdotal literature that talks about women who choose relationships with narcissists being co-dependent (Fjelstad, 2013; Love, 2016; Rosenberg, 2018; Rosenberg, 2013; Schneider & Sadler, 2007). It is generally acknowledged that co-dependent behaviour starts in childhood and comes from being raised in a family that is dysfunctional to some degree leading to feelings of being overly responsible for others, resulting in self-sacrificing and people pleasing behaviours (Knudson & Terrell, 2012). I would argue that these women adopted behaviours which looked like co-dependency to stay safe and survive.

Fear was the dominant effect for these women. They were afraid of anger, reprisal, abuse and this fear had them doing whatever it took to keep the peace. It made them feel like they were walking on "eggshells", which meant that they always had to be extremely careful about what

they said and did. This resulted in them having no power in the relationship and feeling like they had no right to speak, express themselves, or do what they wanted.

Although the women's family backgrounds varied, their behaviours in the relationship with their ex-partners were remarkably similar. It became apparent from the interviews that what may have been observed and conceptualised as co-dependent traits, were behaviours that were developed within those relationships as a way to resist violence and as an attempt to keep themselves safe from further abuse. Most of the participants tried being assertive at various times and learnt quickly that it made things worse for them. These women knew that they were adjusting their behaviours and people pleasing, and they made a conscious decision to act in this way as a survival mechanism and a way to resist violence.

Conceptualising victims' behaviours in these relationships as co-dependent is potentially mislabelling what is survival behaviour and defence mechanisms, as well as obscuring their resistance, resourcefulness and strength. In addition, it blames the women for staying in the relationships by attributing it to a psychological deficiency they have which can be disempowering for them (Hayes & Jeffries, 2013).

5.9.b Resistance

The findings illustrate that each of these women tried to resist the abuse in various ways on numerous occasions. It is easy to overlook these stories of resistance, especially the more subtle, covert ones and only conceptualise what they thought, said and how they behaved as simply effects of the abuse. Resistance is considered as any mental or behavioural action where a person tries to oppose, expose, stop or withstand any form of oppression or violence, including disrespect (Wade, 1997). It is used to "preserve one's dignity and spirit and maximize safety as much as possible, both during and after the assault" (Richardson, 2008, p. 133).

What is evident at first glance is the more overt stories of resistance, e.g. Louise physically pushing back or Jenny being verbally assertive or Maria going against her ex-partner's demands or Gaia, Louise and Jess contacting the Police. These overt forms of resistance did not stop their ex-partners abuse (except with the physical assaults in Gaia's and Louise's situation), and in many cases, it escalated their ex-partners behaviour and proved to be dangerous for them. Covert forms of resistance are more commonly used by victims to avoid an escalation in violence and to ensure their safety. For example, with these women the covert form included giving into demands, people pleasing, staying quiet, apologising, having sex. Sometimes the resistance was invisible to outsiders because it occurred in the women's mind where it was safe and could go undetected, e.g. Louise daydreaming about escaping during rages or thinking about other things during sex or Gaia working out a way to make her love for her ex-partner die, bit by bit, each time he hurt her. The emotional pain, and even the response of fear, hurt and bewilderment to violence,

can be seen as resistance because it shows that the participants are opposed to violence by refusing to accept, be content, relaxed and comfortable with abuse.

It was clear though that half of the women did not conceptualise their responses in this way and instead blamed themselves for "allowing" the abuse to happen or "allowing" their ex-partner to treat them in that way. This is a classic example of the victim taking responsibility for the perpetrator's behaviour and keeps the victim trapped in self-blame and shame. In addition, victim's resistance is often only recognised if it is successful in preventing or stopping violence and this can result in further victim blaming by friends, family, and society.

5.10 Becoming a mother

For the five women who had children with their ex-partners, having children changed the dynamics of the relationships because the men's negative behaviours escalated. The ex-partners appeared to lack empathy and consideration towards the children and showed a lack of interest in caring for them. Maria, Louise, Gaia and Jess were assertive when it came to the protection of their children, and this escalated their ex-partners behaviour and put them at a higher risk of harm. It is interesting that the women did not leave the relationships until after they had children. They appeared to tolerate abuse and maltreatment when it was just themselves, but when it started to overflow onto their children, that is when they decided they needed to leave. The need to protect their children was enough motivation for Louise, Maria and Jess to take action and leave the ex-partner. For Three, it was advocating for her stepchild that resulted in her ex-partner leaving the relationship.

5.11 Escalation of fear leading to women ending the relationship

All the ex-partners perpetrated multiple forms of psychological aggression in a recurring and ongoing manner. Gewirtz-Meydan and Finzi-Dottan (2017) found that men's the perpetration of psychological aggression was not negatively linked to their female partner's satisfaction. My interviews do not support this finding and instead are in alignment with Shortt et al.,'s., (2013) findings that state that psychological aggression can lead to victims experiencing lower levels of relationship satisfaction. My findings support the literature which shows psychological aggression causes people to experience anxiety, depression, fear and cognitive impairment (Comecanha et al., 2017; O'Leary et al., 2013; Straight et al., 2003).

Although the women's needs were not being met and they were experiencing adverse effects from the relationships, it was not the relationship dissatisfaction that led four of the women to end the relationships, as the literature suggests. For these four women, it was the protection of the children and the escalation of fear for their lives that made them end the relationships. In

anecdotal literature, it is mentioned that often the narcissists will "discard" the romantic partner and be the one to leave. However, this was only the case for only one of my participants.

5.12 Long term consequences – loss of trust, fears of encountering another narcissist

It is essential for counsellors to understand that women's trust issues after a relationship with a suspected narcissist can be pervasive and is not just limited to men and romantic relationships, it encompasses themselves, neighbours, acquaintances and strangers. Most of these women also had their reputation with friends damaged through the ex-partners smear campaigns so the paranoia and distrust of others may be valid. This may also severely limit the people they can turn to and trust for support during the relationship and after it ends.

Five of the women expressed fear of another relationship, or fear of men. The fear these women had that narcissists are everywhere and that they may meet or date them in the future, would appear to be disempowering and has kept some of them stuck, sometimes for years. For example, Jenny talked about when she was in the presence of someone like her ex-partner that she felt "…like they could so overpower me easily, that I just run" and Jess talked about "putting up barriers" around men. The reality is that even if these five women decide to never date again, it is very possible they will have to manage relationships with another narcissist who could be a colleague, boss, friend, or family member. While these women may have the capacity and confidence to stay safe and see narcissistic behaviour for what it is, there is clearly more healing to be done.

5.13 Recovery and empowerment

It was evident in my study that, despite some of these relationships ending many years ago, the details of what happened during the relationship and how it affected the women were still vivid. It was obvious that these relationships have a profound impact on these women's lives, long after they have ended. The anecdotal literature said that it could take a minimum of 18 months to heal if there was no contact with the narcissist and that it was longer if they had longer relationships with children and joint finances. The healing time for the women I interviewed varied greatly and having children did seem to extend the recovery time quite dramatically. For Jess, the recovery took twice as long as the actual relationship did, and Jenny experienced adverse effects for six years or more.

All the women wanted to try and understand why their ex-partners were behaving in the ways they were. They actively sought information, during and after their relationship, to ease their confusion and make meaning from their experience. For some of the women, it took many years of researching to finally gain some insight and understanding about why their partner acted the

way they did. It appears that being able to conceptualise their ex-partner as narcissistic and attribute those behaviours to a personality disorder, answered their question of "why did my partner treat me this way?". This was pivotal in them making meaning of what happened to them and moving away from self-blame. It benefited the women by giving them a sense of relief to realise that there was nothing more they could have done to help their ex-partners, change them, or change the situation. It aided in their recovery to receive reassurance and validation that there was a systematic and ongoing undermining of their sense of self through narcissistic abuse. Hayes & Jeffries (2013) agree that this understanding can empower women and give them "permission to give up and walk away" (p. 69). This appears to be a difference from other forms of domestic violence where the psychopathology of the abuser is not a clearly defined issue, and the failure of the relationship is more likely to be seen as a shared responsibility.

When Brunell & Campbell (2011) asked women to compare their experience of a relationship with a narcissist with a non-narcissist, they found that women have more anger and regret after a relationship with a narcissist and that the regret lasts significantly longer than the relationship. However, regret was not mentioned by any of my participants, and they all found something to be grateful for. For all the women who had children, it was their children they were most grateful for, and they were determined to protect their children from further abuse. They were all motivated to improve their lives, and to heal themselves. This resulted in them focussing on what they had learnt from their experience, and what they could take with them going forward in life.

External validation also appears to be beneficial for these women for recovery, e.g. from support groups, people that have been through similar experiences, friends who are counsellors and psychologists, and police. Post relationship appears to be the time when most of the women sought counselling and support for themselves. All the women wanted and needed professional help after the relationship ended, however, most of the women who saw counsellors did not talk about narcissism or abusive behaviours of narcissists. They came across these ideas on their own after years of searching.

5.14 Summary

Narcissistic abuse is abuse perpetrated by a narcissistic person and the behaviours exhibited are linked to the criteria of NPD. It involves a high level of deceit and psychological manipulation from the beginning of the relationship, often getting worse after children are born. The lack of empathy, arrogance, remorselessness, entitlement, antagonism, exploitation, and refusal to seek help or attend counselling appear to be hallmarks for this type of abuse. The abuse is gradual, insidious and persistent, and is unpredictable which creates confusion for the women, resulting in them living in fear and walking on eggshells.

The women were dominated, controlled, disrespected and placed in a position of servitude. They were subjected to ongoing and repeated physical and psychological aggression, coercion, social isolation and financial exploitation throughout their relationship. They lost their independence and agency, and the relationships had a significantly detrimental effect on them in most areas of their lives, i.e. mentally, physically, socially, sexually, spiritually, and financially. Some of the profoundly negative effects that the women experienced included: fear, anxiety, hypervigilance, panic attacks, unhappiness, depression, social isolation, confusion, cognitive changes, self-doubt, anger, grief, loneliness, debt, trust issues, loss of self, and decreased self-confidence and self-esteem.

Various mechanisms worked together to make it difficult for these women to escape these relationships: hope, loyalty, optimism bias, cognitive dissonance, Stockholm syndrome, financial control, anxiety, low self-esteem, social isolation, fear, and social discourses about love. The women resisted the abuse in various ways both overt and covert realising that covert ways of resistance were the best ways to ensure theirs and their children's safety. Factors that motivated women to leave were the protection of their children and being able to label their ex-partners as having a personality disorder that was not going to change.

Post-separation it took many years for most of them to recover and there were long term issues with fear, anxiety and trust. What aided in the recovery was reconnecting with friends, talking with others, online support groups and learning about narcissism. Nearly all the women sought counselling to help them, but it was not overly effective due to the counsellors limited understanding of narcissism and narcissistic abuse. Despite this, the women all experienced some positive effects from the relationship in the form of relief, liberation, gratitude for their children and personal growth.

6. Recommendations

In this chapter, I will start by discussing my recommendations for counselling practice based on some of the points in my discussion chapter and then propose some areas for future research.

6.1 Recommendations for counselling practice

In the discussion chapter, I contend that there are features of domestic narcissistic abuse that are directly related to the characteristics of NPD and these are likely to vary in distinct ways from other forms of domestic abuse. It is essential that counsellors have an understanding of this and realise that the psychological effects from this form of abuse can be extreme, complicated and long-lasting, and that working with these women may need additional considerations to the therapeutic approach. It is important for counsellors to understand the insidious nature of the abuse that is perpetrated by a person with narcissistic traits and the gradual decline of the relationship. The women in these relationships do not choose to be treated in this way and have often resisted mistreatment in many ways.

6.1.a Narrative therapy and ideas about romantic love and gender roles

Narrative therapy and deconstructing social discourses around romantic love and gender roles would be beneficial when working with these women. This would include: educating the women about what social discourses are and how they influence and impact peoples lives; working with the women to identify what social discourses they hold; unpacking the social discourses and how they impact them and their lives; identifying what their position is to those discourses; exploring what other discourses and positions could be taken up instead that align with how they want to be as a person and in this world; understanding why it is important to them and how it would make a difference in their lives (Freedman & Coombs, 1996). This would be pivotal in helping these women develop an alternative story about love, relationships and gender roles and one that is aligned with their values and vision for their lives going forward (Winslade, 2005). This would aid in rebuilding their identity and sense of self and would also be empowering for these women. They could develop trust in their ability to make decisions for themselves about relationships in the future, which could result in them having relationships that are equal, respectful, healthy and free from abuse. By working with these women to identify their personal values, they can then be used to help set and maintain boundaries with others so that they are less likely to be exploited in the future.

6.1.b Working with the narcissist label

Although narrative therapy does not work with labels or a pathological approach, all therapy is based on rich ideas of possibility and knowledge as well as acknowledging and accepting a

client's perspective and reality. Therefore, it is important for counsellors to understand that for these women being able to conceptualise behaviours as narcissistic or their ex-partners as narcissists gave them a certain amount of relief and closure thus enabling their recovery. Due to this, I see including this label as an important facet to supporting clients.

6.1.c Understanding Stockholm Syndrome

It is important for counsellors to understand that women may present with Stockholm syndrome and this is why they still love, defend and sometimes support the ex-partner despite everything they have been through. It is essential to educate women that the survival instinct is at the heart of the behaviour and that emotionally bonding with an abuser is a strategy for surviving abuse and intimidation (Carver, 2007). By understanding this, it can help shine a light on why women find it so hard to leave and helps to move the women away from self-blame for deciding to stay. This could help ease the confusion they feel, as well as the anger at themselves, for staying so long.

6.1.d Avoid labelling women or their behaviour as co-dependent

When working with this client group, it is important for counsellors to be cautious about, labelling women's behaviour as co-dependent, as well as being cautious when teaching women how to be assertive and establish and maintain boundaries. If counsellors do not take the time to do an in-depth exploration of the women's relationship first, it may increase the risk to the women's wellbeing and safety. Counsellors need to be aware that relationships with suspected narcissists can become more dangerous if boundary-setting and assertiveness are attempted.

In addition, by labelling behaviours as co-dependent it can obscure behaviours the women are already using as a way of resisting mistreatment. It also has the potential to blame and shame them for the abuse that was inflicted on them which ultimately can be disempowering, making it even harder to leave the situation or recover. What looks like co-dependent behaviours need to be carefully explored and deconstructed to ensure that accurate conclusions are drawn, and appropriate therapeutic interventions used. If a counsellor only focusses on co-dependency, they will potentially miss the work that is more beneficial and needed, i.e. educating the client on the abusive tactics a narcissist uses, healing the relational trauma, and changing their story to highlight their resistance and strength.

It is vital for these women to receive validation from a counsellor that there was a systematic and ongoing undermining of their self through narcissistic abuse. Most of these women had lost or silenced their voice to help keep themselves safe, so recovery needs to incorporate a focus on helping them find their voice again and increasing their confidence in self-expression.

6.1.e Response-based therapy and conceptualising resistance

Although it is important to allow a victim to talk about the effects of the abuse, enquiries into only the effects can trap a client in the immediacy of their past distressing events (White, 2006). This has the effect of inadvertently transforming responses and resistance into problems, psychological symptoms, and labelling the victim as a passive site of damage (Todd & Wade, 2004). Victims of abuse are typically portrayed as being passive, lacking assertiveness and boundaries (Todd & Wade, 2004) or in relationships with narcissists, as being co-dependent. Using response-based therapy would help mitigate this. It is a useful modality when working with people who have experienced violence or oppression in some form which makes it ideal for this group of women.

Todd and Wade (2004) state that response-based therapy is based on the knowledge that whenever people are treated badly, whether it is violence, oppression, exploitation or other maltreatment, they always resist. This is because people have an innate drive to defend themselves from what they view as unacceptable treatment. Response-based therapy acknowledges and privileges the numerous covert and non-physical ways in which people exercise resistance. It emphasises that a response is a volitional act that shows will, judgment and imagination, which is positive and constructive because it demonstrates the persons desire to escape violence and improve their circumstances (Todd & Wade, 2004). Even emotional pain, and the response of fear, hurt and bewilderment, to violence, can be seen as resistance (Hyden, 1999) because it shows that the person is opposed to violence by refusing to accept, be content, relaxed and comfortable with abuse. It is then seen as a signifier of "mental wellness" because it shows that a person has the desire to improve their situation and escape violence (Todd & Wade, 2004).

Using response-based therapy would help these women to identify ways they responded to and resisted abuse and help them to identify their values and beliefs connected to it. It would also give the women the opportunity to reframe any deficiency statements they hold about themselves from passive/deficient to wise responses/resistance. This would result in new possibilities emerging and a brand-new perspective. This would provide a pathway for a preferred story to develop and restores their preferred identity and sense of who they are. The women would be able to experience themselves in a different way, as stronger and more capable of effectively responding to the issues that led them to seek counselling.

6.1.f Provide education about narcissism, power, control, consent and abuse

Research shows that "women who access professional therapy are more successful in staying out of abusive relationships" in the future (Hayes & Jeffries, 2013, p 58). Therefore, it would be particularly beneficial to these women to receive education from a knowledgeable therapist about

the statistics of narcissism; what behaviours to look out for in the future; what could be considered early warning signs; and power, control and types of abuse. Although it will not eradicate the risk of these relationships, it can help raise the women's awareness so that they feel more empowered about recognising these behaviours earlier in the future. This would help these women regain confidence and trust in themselves. Counsellors can often shy away from talking about sex, especially if the client does not raise the topic. It may be that women who have been in a relationship with a narcissist, might be aware that they did not enjoy sex, or that they pulled away from it but they may not understand what sexual coercion is, or how power and control played out in that area of their relationship. If they had experienced a sexual assault, they could hold deep feelings of shame and not know how to raise the subject. Therefore, it would be an important topic for counsellors to sensitively raise and explore, with the intention of healing the trauma (if it exists). It also opens up the opportunity to work with these women to formulate what a satisfying, healthy, respectful, consenting sex life looks like to them and learning how to safely assert their sexual rights in the future.

A key distinction between narcissistic abusers and most other abusers is that narcissists are more resistant to change because of their reluctance to enter treatment programmes and the limited success of those programmes (Cleveland Clinic, 2015) Therefore, prevention of harm to their potential victims needs to have a broader focus. One way to help limit the impact on others is by educating people who may come into contact with narcissistic people or be exposed to narcissistic abuse. Starting education at high school level would be beneficial as a preventative measure and a way to decrease domestic violence. It could encompass a variety of topics, e.g. what constitutes a healthy, respectful relationship; what power, control and abuse looks like in a relationship; ho to effectively communicate; how to create boundaries and keep themselves safe; how to exit an abusive relationship safely; and where they can go for help.

6.2 Recommendations for future research

I acknowledge that men are also victims of domestic violence and narcissistic abuse. The research that has been conducted into men's experiences of these relationships is minimal. It is important to understand how romantic relationships with narcissists affect men so that counsellors are better positioned to help them. Therefore, conducting research with men who have experienced these types of relationships would be beneficial in extending counsellors knowledge and understanding.

As this was only a small-scale study, I would like to see research extended to a larger group of women, to explore further whether there is a consistent cluster of experiences and symptoms that emerge. The focus and scope of this project did not allow for an in-depth comparison and contrast of the experiences and effects of domestic narcissistic abuse and domestic violence, so I would

also recommend this be included in future research to deepen understanding. In addition, conducting a dyadic research project, where the male partners are assessed for narcissism would give more weight to any findings in the future.

I would like to see research extended to include other ethnicities to help deepen counsellor's knowledge on how narcissism is experienced by different cultures. This is especially important in our unique bicultural country. It could be that narcissism is not viewed the same way in different cultures, and that cultural discourses and gender expectations make certain behaviours more acceptable and unacceptable, which would have a direct bearing on effects experienced by women. Without doing this research, we will not know and therefore cannot effectively work across cultures.

This study highlighted that narcissism detrimentally affects parenting and raised significant concerns over children's safety. This is an area which warrants further research specifically: how narcissism affects people when they become parents; how narcissistic parents treat their children during a relationship and post-separation; how narcissistic people treat their ex-partners post-separation; and the impact of narcissistic parents on children. This information would be beneficial for counsellors, as well as lawyers, police and family courts. This research would go towards strengthening families and protecting women and children.

I would also recommend extending this research to explore the effectiveness of the different counselling modalities that I suggested could be beneficial when working with these women. An evidence-based foundation for specific therapeutic practices with women survivors of narcissistic abuse would provide a guide for practitioners and a basis for funding treatment for this group.

7. CONCLUSION

"Narcissistic abuse doesn't just happen suddenly, it's insidious, creeping in slowly, until one day you don't recognize yourself. It is the epitome of domestic violence, a slowly dehumanizing and purposeful soul rape." (Christina, 2015)

I undertook this research as a practitioner to gain a greater understanding of what this client group may experience to enhance my practice and potentially educate other practitioners. What emerged in this research is that relationships with suspected narcissistic males have a profoundly detrimental effect on women both during the relationship and for many years after the relationship has ended.

The research has raised my awareness of the effects of suspected narcissistic abuse, e.g. feeling not good enough, having trust issues and self-doubt, decreased self-esteem and self-confidence, anxiety, depression, fear and hypervigilance. Understanding how this small group of six women were affected may highlight areas where counsellors could inquire more carefully with clients about their relationship context past and present. This may alert them to the fact of a narcissistic male partner.

This project also highlights, that even if counsellors enquire about the client's partner or relationship, the women may deny abuse or minimise their partner's behaviours or even defend their partner. Therefore, it is essential for these professionals to truly understand the behaviours of narcissists so that if a woman shares their experiences, they can identify the tactics and abuse that might be at play. The women may not understand why they are feeling the way they are, and education from a knowledgeable professional could accelerate their recovery.

Therapy is important as it can help women understand how the relationship and abuse affected them and provide tools that can help heal and restore their sense of self. Specifically, narrative therapy and response-based therapy are two therapeutic modalities that could help these women recover.

Counsellors are in a powerful position to help raise awareness and educate the general public about these types of relationships. This would be powerful in reducing stigma, shame and judgement that often surrounds women in these types of relationships, which would ultimately make it easier for women to seek help.

In New Zealand domestic violence campaigns, we encourage women to reach out and ask for help. All the women in my study reached out for help from counsellors or doctors, half of them went to the Police and had been involved in the legal system with their ex-partners in some

capacity. However, most were let down by people who had no understanding of narcissism, or experience of working with victims of narcissistic abuse.

It is vital that police, social services, lawyers and courts are aware of how narcissists can present, and what behaviours occur in private. Education for people who may be the first point of contact for these women is essential as they are the ones best positioned to provide the much-needed help and support. We also need the help to be appropriate so that these women do not feel let down by the system and lose hope.

No human being should be subjected to the behaviours that these women were. In 2016 the NZ Government declined to make coercive control and psychological violence a stand-alone family violence offence despite England and Wales making this illegal in 2015. The findings in my study demonstrate how damaging narcissistic abuse can be to women, and how difficult it is to escape from. By not making coercive control and psychological abuse illegal, it makes it even more difficult for these women to make sense of what is happening and seek help through the police and courts. The law needs to be designed to empower victims of this type of abuse to get justice because often these people are abused even further by a legal system that does not understand narcissism. Protection from the law would send a clear message that these types of abuse are unacceptable and would help protect women and children.

Trauma can have positive effects on people in regard to post-traumatic growth, empathy, altruism and pro-social behaviour and this was evident with these women. Despite the ongoing trauma, all these women were able to find the silver lining and experience positive effects from the relationship. Their experiences showed that even successful, confident women can find themselves drawn into a situation where they become victim to narcissistic abuse. It was clear that domestic violence and narcissistic abuse can happen to anyone regardless of one's station in life. All the women showed remarkable ingenuity, resourcefulness, strength, courage and resiliency. The stories they shared with me are inspiring and a testament to their extraordinary character.

> "The paradox of trauma is that it has both the power to destroy and the power to transform and resurrect." (Levine, 2010, p. 37)

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Appendices

Appendix A: Participant recruitment advertisement

Are you a female who has had an intimate, relationship with a suspected narcissistic male or a male who has been diagnosed with narcissistic personality disorder?

Who is considered a narcissist? This person would have displayed several characteristics:

- Arrogance including putting other people down and praising their own achievements

- Their moods may have varied quite quickly and frequently from being generous and friendly, to angry

- They liked to impress others, attention seeking, self-centred

- Sense of entitlement

- Manipulative and used people to their advantage

- Controlling

- Deceitful

- Lacked empathy and consideration of others

- Lacked insight into how their behaviour affected others

- Relationships were superficial

In addition, they may have been:

- Charming, attentive and intense at the beginning of the relationship

- Violent and/or verbally abusive and/or stalked you

- Unfaithful

Would you be interested in being involved in a research project which wants to understand what your experience was, the effect that it has had on you and your life and what helped you to recover?

To participate in this research:

Was this relationship for more than two years and did you live together for a portion of that time?

Is that relationship over?

Do you live in the Auckland area?

What it would involve:

A one to one, face to face interview of 60-90 minutes duration.

Appendix A continued: Participant recruitment advertisement

For more information about participating in this research please contact

Sophia Elise – email: sophia@sophiaelise.co.nz or mob: 027 6301810

UREC REGISTRATION NUMBER: 2018-1045

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Appendix B: DSM-V criteria for Narcissistic Personality Disorder (American Psychiatric Association, 2013)

General personality disorder criteria (p. 646-647)

A. An enduring pattern of inner experience and behavior that deviates markedly from the expectations of the individual's culture. This pattern is manifested in two (or more) of the following areas:

1. Cognition (i.e., ways of perceiving and interpreting self, other people, and events). 2. Affectivity (i.e., the range, intensity, lability, and appropriateness of emotional response). 3. Interpersonal functioning. 4. Impulse control.

B. The enduring pattern is inflexible and pervasive across a broad range of personal and social situations. C. The enduring pattern leads to clinically significant distress or impairment in social, occupational, or other important areas of functioning.

D. The pattern is stable and of long duration, and Its onset can be traced back at least to adolescence or early adulthood. E. The enduring pattern is not better explained as a manifestation or consequence of another mental disorder. F. The enduring pattern is not attributable to the physiological effects of a substance (e.g., a drug of abuse, a medication) or another medical condition (e.g., head trauma).

Narcissistic Personality Disorder Diagnostic Criteria 301.81 (F60.81) (p. 669-670)

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, as indicated by five (or more) of the following:

1. Has a grandiose sense of self-importance (e.g., exaggerates achievements and talents, expects to be recognized as superior without commensurate achievements).

2. Is preoccupied with fantasies of unlimited success, power, brilliance, beauty, or ideal love.

3. Believes that he or she is "special" and unique and can only be understood by, or should associate with, other special or high-status people (or institutions).

4. Requires excessive admiration.

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.

Alternative DSM-V Model for Personality Disorders (p. 761)

The essential features of a personality disorder are

A. Moderate or greater impairment in personality (self/interpersonal) functioning.

B. One or more pathological personality traits.

C. The impairments in personality functioning and the individual's personality trait expression are relatively inflexible and pervasive across a broad range of personal and social situations.

D. The impairments in personality functioning and the individual's personality trait expression are relatively stable across time, with onsets that can be traced back to at least adolescence or early adulthood.

E. The impairments in personality functioning and the individual's personality trait expression are not better explained by another mental disorder.

F. The impairments in personality functioning and the individual's personality trait expression are not solely attributable to the physiological effects of a substance or another medical condition (e.g., severe head trauma).

G. The impairments in personality functioning and the individual's personality trait expression are not better understood as normal for an individual's developmental stage or sociocultural environment.

Narcissistic Personality Disorder Proposed Diagnostic Criteria (p. 767-768)

A. Moderate or greater impairment in personality functioning, manifested by characteristic difficulties in two or more of the following four areas:

1. Identity: Excessive reference to others for self-definition and self-esteem regulation; exaggerated self-appraisal inflated or deflated, or vacillating between extremes; emotional regulation mirrors fluctuations in self-esteem.

2. Self-direction: Goal setting based on gaining approval from others; personal standards unreasonably high in order to see oneself as exceptional, or too low based on a sense of entitlement; often unaware of own motivations.

3. Empathy: Impaired ability to recognize or identify with the feelings and needs of others; excessively attuned to reactions of others, but only if perceived as relevant to self; over- or underestimate of own effect on others.

4. Intimacy: Relationships largely superficial and exist to serve self-esteem regulation; mutuality constrained by little genuine interest in others' experiences and predominance of a need for personal gain.

B. Both of the following pathological personality traits:

1. Grandiosity (an aspect of Antagonism); Feelings of entitlement, either overt or covert; self-centeredness; firmly holding to the belief that one is better than others; condescension toward others.

2. Attention seeking (an aspect of Antagonism): Excessive attempts to attract and be the focus of the attention of others; admiration seeking.

Appendix C: Participant information sheet

Information Sheet for Participants

Research Project Title: Women's retrospective experiences of an intimate, heterosexual, long-term, relationship with a suspected narcissistic male partner – a small scale study

Synopsis of the Project:

This project aims to explore women's experiences of a relationship with a suspected narcissistic male partner to gain an in-depth understanding of the effects that it has had on their lives and what has helped them to recover from these. For the purposes of this study the term narcissist does not necessarily mean someone formally diagnosed with Narcissistic Personality Disorder but means someone who may exhibit a range of traits and behaviours that are specific to Narcissistic Personality Disorder. We will be using the term 'suspected narcissist' when writing up the research as there is no way to confirm whether the ex-partner is a narcissist without testing them directly. A relationship will be defined as an intimate relationship, lasting for a minimum of two years, where the couple have lived together for a portion of that time. The purpose of this project is to help counsellors improve their practice for other people who may have experienced similar experiences.

What We are Doing:

The researcher will interview 6 to 8 Auckland women. The interviews will be recorded using a digital audio recording device and then transcribed using a confidential transcription service. The collected data will be analysed by the researcher and her supervisor, using qualitative methods, for common themes regarding effects on women who have experienced a relationship with a suspected narcissistic male partner. It will be written up as a research dissertation as part of a Master of Applied Practice course. The dissertation will become part of the Unitec Commons held by the Unitec library.

What it will mean for you

This project will be discussing the experiences participants have had and how they have affected them. This may include experiences of physical, emotional or psychological abuse. These subjects can affect people in negative ways leading to troubling emotions and/or feeling of vulnerability. Participants may want to consider that this project may bring up unfavourable feelings for them. Therefore, participants are asked to carefully consider the nature of this project before deciding to participate.

You will participate in a face to face interview lasting up to 90 minutes, which will be scheduled at a time and place that is convenient for you within the Auckland area. This may be my consulting room or another public place that is private of your choosing. The interview will be semi-structured, allowing plenty of time for you to explain your views and experiences. It will be recorded using digital technology and the researcher may take notes to help keep track of information.

Appendix C continued: Participant information sheet

All information provided by you will be keep confidential and your identity will be protected. After the interview a copy of the transcript will be emailed to you for you to read, correct or change. Pseudonyms will be used to preserve your anonymity within the written dissertation.

If you agree to participate, you will be asked to sign a consent form. This does not stop you from changing your mind if you wish to withdraw from the project. However, because of my schedule, any withdrawals must be done by 5 pm 14 days after I have interviewed you.

Your name and any information that may identify you will be kept completely confidential. All information collected from you will be stored in a locked cabinet and only you, my supervisor and I will have access to this information.

Below is a sample of questions that may be included in the interview

- Can you briefly tell me the nature of the relationship? i.e. When did the relationship start, were you married (if so, how long for), when did it end, do you have children together (how old are they)?
- What ethnicity do you identify with?
- What was your experience of this relationship?
- How would you describe their behaviour towards you?
- What effect did this behaviour have on you?
- How did it affect you emotionally e.g. psychologically, physically, financially, socially, spiritually?
- What were the effects on your while you were in the relationship?
- What were/are the effects on you after the relationship ended?
- What were you like at the start of this relationship started and what were you like at the end of this relationship?
- Do you feel that you have recovered from this relationship? If so, how long did it take and what was helpful for your recovery?
- What do you need for your recovery?
- Is there anything else you would like to share with me about this topic?

Please contact me if you need more information about the project.

Researcher: Sophia Elise – sophia@sophiaelise.co.nz or 027 630 1810

At any time if you have any concerns about the research project you can contact my supervisor: Geoffrey Bridgman email: gbridgman@unitec.ac.nz or by phone (09) 815-4321 ext. 7464

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Support for Survivors of Abuse and Violence

If you experience any distress or upset after this interview, please use the below resources. Please feel free to contact the researcher or her primary supervisor directly should you require any further information.

Sophia Elise: Sophia@sophiaelise.co.nz or 027 630 1810

My Supervisor is: Geoffrey Bridgman email: gbridgman@unitec.ac.nz or phone (09) 815-4321 ext. 7464

<u>Helplines:</u>

New Zealand Wide Helplines:

      Lifeline: 0800 543 354

      Youthline: 0800 376 633

      Rape Crisis: 0800 88 33 00

      Depression Helpline: 0800 111 757

      Healthline: 0800 611 116

      Samaritans: 0800 726 666

      Women's Refuge Crisis line: 0800 733 843

      Shine 0508 744633

      Victim Support 0800 842 846

      Suicide Crisis Helpline 0508 828865

      Citizens Advice Bureau 0800 367 222

      Family Court 0800 224 733

Counselling Service: (Donation based service)

Home and Family Counselling – www.homeandfamily.org.nz

Mount Eden - 09 630 8961

North Shore - 09 419 9853

Orewa - 09 419 9853

Appendix D: Participant consent form

Participant Consent Form

Research Project Title: Women's retrospective experiences of an intimate, heterosexual, long-term, relationship with a suspected narcissistic male partner – a small scale study

I have had the research project explained to me and I have read and understand the information sheet given to me.

I understand that I don't have to be part of this research project should I chose not to participate and may withdraw at any time up to 5 pm 14 days after the interview.

I understand that everything I say is confidential and none of the information I give will identify me and that the only persons who will know what I have said will be the researcher and their supervisor. I also understand that all the information that I give will be stored securely in a locked filing cabinet for a period 5 years.

I understand that my discussion with the researcher will be recorded using a digital audio recording device and transcribed.

I understand that I can see the transcribe of the interview and the finished research document.

I have had time to consider everything and I give my consent to be a part of this project.

Participant Name: …………………………………………………………….......

Participant Signature: …………………………... *Date:* …………………………

Project Researcher: ………………………….. *Date:* …………………………

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Appendix E: Interview schedule guide

What was the relationship like at the start?

How would you describe him/his behaviour/his behaviour towards you at the start?

What was the effect of this behaviour on you at the start of the relationship e.g. Emotionally, physically, psychologically, financially etc.

What was the relationship like while you were together?

How would you describe him/his behaviour/his behaviour towards you during the relationship?

What was the effect of this behaviour on you during the relationship e.g. Emotionally, physically, psychologically, financially etc.

What was the relationship like towards the end/at the end?

How would you describe him/his behaviour/his behaviour towards you at the end?

What was the effect of this behaviour on you towards the end of the relationship e.g. Emotionally, physically, psychologically, financially etc.

How have things been for you since the end of the relationship?

How would you describe him/his behaviour/his behaviour towards you since the relationship has ended?

What effect has this behaviour had on you? E.g. emotionally, physically, psychologically, financially etc.

What would you say the effects of this relationship have been on you?

How has this relationship changed you e.g. emotionally, physically, mentally etc?

What have been the positive effects on you of this relationship?

Do you feel that you have recovered from this relationship?

If so, how long did it take? What was helpful? How was it helpful?

If not, what do you need for your recovery?

Is there anything else you would like to share about your experience or this topic?

Appendix F: Confidentiality agreement for transcribers

Research Title: Women's retrospective experiences of an intimate, heterosexual, long-term, relationship with a suspected narcissistic male partner – a small scale study

Researcher Name: Sophia Elise

Address: 5 Greenleaf Way, Northcross, Auckland 0632

Phone number: 027 630 1810

Email: sophia@sophiaelise.co.nz

I _____ (full name - please print)

Agree to treat in absolute confidence all information that I become aware of in the course of transcribing the interviews or other material connected with the above research topic. I agree to respect the privacy of the individuals mentioned in the interviews that I am transcribing. I will not pass on in any form information regarding those interviews to any person or institution. On completion of transcription I will not retain or copy any information involving the above project.

I am aware that I can be held legally liable for any breach of this confidentiality agreement, and for any harm incurred by individuals if we disclose identifiable information contained in the audiotapes and/or files to which we will have access.

Signature: ……………………………………………………

Date: …………………………………………

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