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# Normal and pathological communal narcissism in relation to personality traits and values

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## ABSTRACT

Communal narcissism can be defined as grandiose self-views in the communal domain. Within the literature, two forms of communal narcissism, normal and pathological, can be distinguished. However, no study to date has investigated their convergence and divergence. Using a large community sample ( $N = 781$ ), the current study aimed to fill this gap through examination of 1) the distinctiveness of normal and pathological communal narcissism; 2) their relationship to broad personality characteristics; and 3) values. Results suggest that 1) normal and pathological communal narcissism are structurally distinct constructs; 2) the difference in relation to personality characteristics is limited to neuroticism; and 3) they share the values of self-enhancement and self-transcendence.

## 1. Introduction

Can the trait of narcissism be realized in the communal domain? Although this question may be regarded as an oxymoron, Gebauer, Sedikides, Verplanken, and Maio (2012) suggested that the answer can be “yes” – especially so if it serves to satisfy the core self-motives of grandiosity, esteem, entitlement, and power, all of which refer to narcissistic personality features (Morf & Rhodewalt, 2001). Gebauer et al. (2012) elaborated that the distinction between agency (concentration on oneself and one's own goals) and communion (concentration on other people and interpersonal relations; Abele & Wojciszke, 2007) can also be applied to narcissism. This proposal can be considered as the foundation of the agency-communion model of narcissism (Gebauer et al., 2012), stipulating that there are two facets of narcissism, one of which is agentic and the other communal.

The agency-communion model of narcissism refers to normal narcissism (Paulhus, 2001). However, within the literature, pathological narcissism can also be distinguished (Pincus & Lukowitsky, 2010), which refers to the use of maladaptive self-regulatory strategies to deal with threats to one's self-image (Pincus et al., 2009). This raises the question of the extent to which the agency-communion model can also be applied to pathological narcissism. Indeed, a brief look into the literature reveals that one of the pathological narcissism components actually reflects the communal domain – through self-sacrificing self-enhancement (SSSE; Pincus et al., 2009). However, up to date, no study systematically compared these two forms of communal narcissism (i.e.,

normal and pathological). The current study aimed to fill this gap.

### 1.1. Normal communal narcissism

Normal communal narcissism presents an alternative form of normal agentic narcissism in which the same core self-motives (i.e., grandiosity, esteem, entitlement, power) are realized through communal (vs. agentic) means (Gebauer et al., 2012). On the basis of studies using the only existing measure of normal communal narcissism, that is, the Communal Narcissism Inventory (CNI; Gebauer et al., 2012), normal communal narcissists consider themselves as the most helpful person they know, the best friend one can have, amazing listeners, but also as the harbinger of freedom, happiness, and peace (Gebauer et al., 2012; Luo, Cai, Sedikides, & Song, 2014; Żemojtel-Piotrowska, Czarna, Piotrowski, Baran, & Maltby, 2016). Although these examples reflect a definite focus on the communal domain, empirical research also reports relations between normal communal narcissism and traits reflecting high agency like power, self-assuredness, and dominance (Gebauer et al., 2012; Żemojtel-Piotrowska et al., 2016). Moreover, it has been shown that normal communal narcissism is positively associated with self-reported pro-social behaviors but is also related to peer-reported aggression (Barry, Lui, Lee-Rowland, & Moran, 2017). Thus, it may be suggested that the underlying goal of normal communal narcissism (i.e., maintenance of grandiose self-views; Gebauer et al., 2012) is in fact not uniquely communal, but also agentic.

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## 1.2. Pathological communal narcissism

Pathological communal narcissism is actually not interpreted as an alternative form of pathological narcissism, but rather as one of its facets (i.e., SSSE; Wright, Lukowitsky, Pincus, & Conroy, 2010). Existing research suggests that SSSE is somewhat specific and may be relatively unique in its content (Wright et al., 2013). Although the SSSE facet does not contain the label “communal”, it refers to using altruistic acts to support one's inflated self-image (Pincus et al., 2009). It therefore falls within the theoretical description of the agency-communion model of narcissism (Gebauer et al., 2012). Importantly, the items of SSSE clearly pinpoint to the communal domain, as they describe someone who makes sacrifices for the sake of others, helps others, cares for others, and likes to have friends – it is to show others what a good and important person one is (Pincus et al., 2009). As such, pathological communal narcissism has been linked to communal outcomes, such as prosocial behavior and empathic concern (Kauten & Barry, 2014; Morf et al., 2017; Schoenleber, Roche, Wetzel, Pincus, & Roberts, 2015). Similar to normal communal narcissism, however, its pathological expression has also been linked to traits reflecting high agency, including attention seeking, deceptiveness, dominance, and manipulateness (Schoenleber et al., 2015; Wright et al., 2013). Thus, pathological communal narcissism may also be perceived as a trait, which is agentic in nature (i.e., maintenance of an inflated self-image; Pincus et al., 2009), but fulfills this goal through communal means.

## 1.3. Convergence and divergence between normal and pathological communal narcissism

Normal and pathological communal narcissism seem to share the fundamentals, that is, the use of communal means to achieve agentic goals. Yet, there is also divergence between them as regards the clinical features, which are more prominent for pathological communal narcissism (Pincus et al., 2009). This may suggest that the two forms of communal narcissism (i.e., normal and pathological) are lying on a single continuum from normal to impaired functioning (Pincus & Lukowitsky, 2010). Indeed, whereas normal communal narcissism is associated with adaptive outcomes like higher self-esteem and subjective well-being (Zemajtel-Piotrowska, Clifton, & Piotrowski, 2014), pathological communal narcissism is associated with maladaptive outcomes like submissiveness, separation insecurity, anxiousness, emotional lability (Wright et al., 2013), guilt and shame proneness (Schoenleber et al., 2015) and, perfectionism (Stoerber, Sherry, & Nealis, 2015). Thus, normal and pathological communal narcissism seem to be distinct constructs with different nomological networks, which however seem to share underlying motivational dynamics.

## 1.4. Communal narcissism in relation to personality traits and basic values

Because personality traits and values constitute complementary characteristics describing the structure of personality and its underlying motivation (Cieciuch, 2012), it makes them a desirable reference point for most personality describing constructs. Therefore, the assessment of relations between normal and pathological communal narcissism and personality traits and values seems to be a promising direction in the assessment of their distinct outcomes and similar motivation. Despite this fact, up to date, no study systematically investigated the relations between normal and pathological communal narcissism and personality traits and basic values. In previous research, the pattern of relationships between normal and pathological communal narcissism and personality traits has been shown to be largely congruent with one major exception, namely neuroticism. Whereas normal communal narcissism is negatively associated with neuroticism (Gebauer et al., 2012), pathological communal narcissism is positively associated with it (Miller et al., 2011). As neuroticism is among the Big Five traits, which is most strongly linked to clinical and pathological outcomes (McCrae & Costa,

1997), this picture emphasizes the distinction between normal versus pathological narcissism in relation to normal personality traits.

Values, on the other hand, are interpreted as trans-situational motivational goals (Schwartz, 1992) and may be arranged in two bipolar dimensions comprising four higher-order values: openness to change (i.e., independence in thought and action as well as the need to seek excitement and pleasure) versus conservation (i.e., seeking security and stability in personal and societal life, adjusting to existing law and norms as well as acceptance and supporting habits, tradition, and culture) and self-enhancement (i.e., aspiration towards personal successes and having power over other people and material and social resources) versus self-transcendence (i.e., aspiration towards being reliable, trustworthy, caring and also valuing equality, fairness, and tolerance; Schwartz et al., 2012). Although agentic normal narcissism has been analyzed in the context of values (Rogoza, Wyszynska, Maćkiewicz, & Cieciuch, 2016), a joint examination of normal and pathological communal narcissism in their relation to values is lacking so far. Gebauer et al. (2012) only analyzed the relations between normal communal narcissism and power and reported a positive relationship, which suggests that apart from self-reported communal correlates, normal communal narcissism may also possess an agentic motivation. As normal and pathological narcissism seem to mainly differ in their extremity (Pincus, 2013), their communal facets should share core (agentic) motives realized through similar (communal) means.

## 2. Current study

The current study addresses two main research questions. First, is the distinction between normal and pathological communal narcissism empirically plausible? Despite the fact that both facets assess communal expressions of narcissism, they were not directly compared in terms of the extent to which they capture convergent or divergent characteristics. We hypothesized that although both forms of communal narcissism should be positively related, it is possible to meaningfully differentiate between them. Second, is there any substantial divergence in basic personality characteristics and values between normal and pathological narcissism? This question provides an extension to the first hypothesis, as its aim is to provide evidence that apart from being different constructs, they also possess different correlates. On the basis of the aforementioned literature, we hypothesized that regarding personality traits, the differences should be visible in the most maladaptive personality trait, that is, neuroticism, which should be more strongly related to pathological (vs. normal) communal narcissism. Although the literature does not provide a clear picture of how the values of communal narcissists should look like, we reasoned that they should be similar for normal and pathological communal narcissism, which are both hypothesized to predict self-enhancement (representing the agentic component) and self-transcendence (representing the communal component).

## 3. Method

### 3.1. Participants and procedure

The study was conducted on a large community sample of Polish adults ( $N = 781$ ) aged from 18 to 80 years ( $M_{\text{age}} = 46.35$ ;  $SD_{\text{age}} = 15.44$ ; 42.5% male). Participants were recruited online and, as an incentive, they were awarded with points, which they could exchange for rewards. The data presented in this manuscript was part of a larger data collection effort. Below we report all measures, which are of relevance to the current study.

## 3.2. Measures

### 3.2.1. Communal Narcissism Inventory

Normal communal narcissism was measured using the 16-item Communal Narcissism Inventory (CNI; Gebauer et al., 2012). Respondents answered using a 7-point Likert-type scale ranging from 1 (*disagree strongly*) to 7 (*agree strongly*). Although designed as a global measure of normal communal narcissism, the CNI comprises items that refer to the present (e.g., “I am extraordinarily trustworthy”) or the future (e.g., “I will bring freedom to the people”), which may produce systematic differences in error variance if examined as a one-factor solution (Gebauer et al., 2012). Following Žemojtel-Piotrowska et al. (2016), we used a bifactor model, which is deemed methodologically superior to the one-factor solution because it allows (a) the correct separation of variance accounted for by the general and grouping factors (i.e., present or future communal narcissism) and (b) assessment of the underlying multidimensionality of the measure (Reise, Moore, & Haviland, 2010).<sup>1</sup> Previous research attests to the reliability of the CNI (mean  $\alpha$  across 14 samples = 0.91; Gebauer et al., 2012).

### 3.2.2. Self-Sacrificing Self-Enhancement

Pathological communal narcissism was measured using the 6-item Self-Sacrificing Self-Enhancement subscale (SSSE; e.g., “I help others in order to prove I’m a good person”) from the Pathological Narcissism Inventory (PNI; Pincus et al., 2009). Respondents answered using a 6-point Likert-type scale ranging from 0 (*not at all like me*) to 5 (*very much like me*). Previous research supports the reliability of SSSE ( $\alpha = 0.75$ – $0.79$ ; Pincus et al., 2009).

### 3.2.3. Big Five Inventory-15

Personality traits were measured using the 15-item Big Five Inventory-Short Version (BFI-15; Lang, John, Lüdtke, Schupp, & Wagner, 2011). The BFI-15 prompts respondents with the phrase “I see myself as someone who...” and asks them to rate themselves on trait-descriptive attributes, such as “worries a lot” (neuroticism), “is outgoing, sociable” (extraversion), “has an active imagination” (openness to experience), “has a forgiving nature” (agreeableness), and “does a thorough job” (conscientiousness). Respondents answered using a 5-point Likert-type scale ranging from 1 (*completely disagree*) to 5 (*completely agree*). Consistent with the fact that the Big Five are measured economically using only three items each, the BFI-15 has demonstrated only modest internal consistency in the past, reflecting the width of the assessed constructs ( $\alpha = 0.60$  for neuroticism,  $\alpha = 0.66$  for extraversion,  $\alpha = 0.63$  for openness,  $\alpha = 0.50$  for agreeableness, and  $\alpha = 0.60$  for conscientiousness; Lang et al., 2011).

### 3.2.4. Portrait Values Questionnaire

Basic values were measured using the Portraits Values Questionnaire (PVQ-RR; Schwartz et al., 2012). The PVQ comprises short verbal portraits, each describing a person’s goals, aspirations, or wishes that point implicitly to the importance of a particular value type. Given that our prime interest was in examining the higher-order values, the following analyses focus on openness to change (e.g., “It is important to him/her to have all sorts of new experiences”), self-enhancement (e.g., “It is important to him/her to have the power to make people do what he/she wants”), conservation (e.g., “It is important to him/her to maintain traditional values or beliefs”), and self-transcendence (e.g., “It is important to him/her that every person in the world has equal opportunities in life”). Respondents answered using a 6-point Likert-type scale ranging from 1 (*not like me at all*) to 6 (*very much like me*). Past research supports the reliability of the higher-order values measured by the PVQ ( $\alpha = 0.86$  for openness to change, 0.85 for self-

enhancement, 0.83 for conservation, and 0.88 for self-transcendence; Caprara, Alessandri, & Eisenberg, 2012).

## 3.3. Statistical analyses

To test the hypothesis about the distinctiveness of normal and pathological communal narcissism, we used Exploratory Structural Equation Modeling (ESEM; Asparouhov & Muthén, 2009) with robust maximum likelihood (MLR) estimation in Mplus v.7.2. (Muthén & Muthén, 2012). ESEM integrates the features of both exploratory and confirmatory factor analysis and is considered to yield superior fit statistics (for more details, see Marsh, Morin, Parker, & Kaur, 2014). Target rotation was used in ESEM to ascertain that the specified cross-loadings are as close to zero as possible, because we wanted to assess to what extent (if at all) the two hypothesized forms of communal narcissism overlap (i.e., we aimed to examine the strength of the cross-loadings). To evaluate model fit, we followed the criteria proposed by Schermelleh-Engel, Moosbrugger, and Müller (2003). Acceptable model fit is indicated by Comparative Fit Index (CFI)  $\geq 0.95$  and Root Mean Square Error of Approximation (RMSEA)  $\leq 0.08$ .

To test the hypothesis about the relationship between normal and pathological communal narcissism and personality traits and values, respectively, we used multiple linear regression models. In the assessment of relations between few variables, regression models control for shared variance among compared constructs, which makes them preferable to using correlations (Kline, 2011). In all regression models, normal and pathological communal narcissism were independently predicted either by personality traits or values.

## 4. Results

### 4.1. Descriptive statistics and bivariate correlations for all studied variables

Descriptive statistics (i.e.,  $M$ ,  $SD$ , and Cronbach’s  $\alpha$ ) and bivariate correlations for all studied variables are presented in Table 1. We corrected for the multiple comparisons using the Bonferroni method (i.e.,  $0.05/n$ ;  $n$  = number of study variables), yielding a corrected alpha level of 0.005.

To note, the reliability estimates for some of the BFI dimensions (e.g., agreeableness), albeit modest, parallel those of Lang et al. (2011;  $\alpha = 0.45$ – $0.51$ ) and other studies using this measure (e.g., Hahn, Gottschling, & Spinath, 2012;  $\alpha = 44$ ).

### 4.2. Test of the hypothesis regarding the distinction between normal and pathological communal narcissism

The standardized factor loadings obtained from the joint ESEM conducted on all items measuring normal and pathological communal narcissism are presented in Table 2.

The model demonstrated an adequate fit ( $\chi^2[149] = 533.63$ ;  $p < 0.001$ ; CFI = 0.95; RMSEA = 0.057; 90%CI[0.052–0.063]). The structure of normal communal narcissism was shown to be bifactorial with two factors grouping items referring to the present and to the future, and one general factor (hereafter referred to as normal communal narcissism), which was significantly loaded by all CNI items, thereby replicating Žemojtel-Piotrowska et al. (2016). The structure of pathological communal narcissism turned out to be unifactorial and was solely loaded by the SSSE items.

The strength of the factor loadings for normal ( $M = 0.64$ ) and pathological communal narcissism ( $M = 0.64$ ) was adequate and equal among each other, and the strength of the cross-loadings was marginal for both normal ( $M = 0.03$ ) and pathological communal narcissism ( $M = 0.10$ ). Moreover, the latent correlation between normal communal narcissism and pathological communal narcissism was moderate in size ( $\rho = 0.53$ ,  $p < 0.001$ ). Thus, the hypothesis that the two forms of communal narcissism are distinct, yet related, was supported.

<sup>1</sup> To note, we obtained similar results when using the original one-factor solution introduced by Gebauer et al. (2012).

**Table 1**  
Descriptive statistics and bivariate correlations for all studied variables.

Variable	1	2	3	4	5	6	7	8	9	10	M	SD	$\alpha$
1. Normal communal narcissism											3.48	0.79	0.94
2. Pathological communal narcissism	0.52 <sup>a</sup>										2.71	0.80	0.82
3. Neuroticism	-0.15 <sup>a</sup>	0.04									3.07	0.75	0.66
4. Extraversion	0.25 <sup>a</sup>	0.23 <sup>a</sup>	-0.08								2.92	0.76	0.66
5. Openness to experience	0.38 <sup>a</sup>	0.32 <sup>a</sup>	-0.16 <sup>a</sup>	0.30 <sup>a</sup>							3.56	0.68	0.74
6. Agreeableness	0.19 <sup>a</sup>	0.13 <sup>a</sup>	-0.30 <sup>a</sup>	0.19 <sup>a</sup>	0.10						3.43	0.62	0.43
7. Conscientiousness	0.22 <sup>a</sup>	0.13 <sup>a</sup>	-0.20 <sup>a</sup>	0.09	0.26 <sup>a</sup>	0.26 <sup>a</sup>					3.81	0.61	0.61
8. Openness to change	0.42 <sup>a</sup>	0.38 <sup>a</sup>	-0.12 <sup>a</sup>	0.22 <sup>a</sup>	0.46 <sup>a</sup>	0.11 <sup>a</sup>	0.29 <sup>a</sup>				4.33	0.66	0.86
9. Self-enhancement	0.44 <sup>a</sup>	0.37 <sup>a</sup>	0.08	0.16 <sup>a</sup>	0.25 <sup>a</sup>	-0.13 <sup>a</sup>	0.06	0.45 <sup>a</sup>			3.27	0.89	0.88
10. Conservation	0.34 <sup>a</sup>	0.35 <sup>a</sup>	-0.04	0.07	0.17 <sup>a</sup>	0.35 <sup>a</sup>	0.33 <sup>a</sup>	0.51 <sup>a</sup>	0.17 <sup>a</sup>		4.37	0.70	0.92
11. Self-transcendence	0.35 <sup>a</sup>	0.36 <sup>a</sup>	-0.13 <sup>a</sup>	0.16 <sup>a</sup>	0.31 <sup>a</sup>	0.36 <sup>a</sup>	0.33 <sup>a</sup>	0.61 <sup>a</sup>	0.02	0.79 <sup>a</sup>	4.69	0.72	0.93

<sup>a</sup> N = 781. Correlations were adjusted for multiple comparisons:  $0.05/11 = p \leq 0.005$  (two-tailed).

**Table 2**  
Standardized factor loadings of the normal and pathological communal narcissism Exploratory Structural Equation Model.

Item	Normal communal narcissism			Pathological communal narcissism
	Present	Future	Bifactor	
CNI1	-.09	-.14	.79	.00
CNI2	-.06	.13	.80	-.04
CNI3	.20	-.09	.79	-.05
CNI4	-.19	.29	.71	.05
CNI5	.10	-.03	.63	-.04
CNI6	.09	-.06	.76	.01
CNI7	-.06	.61	.59	.00
CNI8	.14	.33	.61	.07
CNI9	.04	.62	.56	.01
CNI10	.43	-.09	.51	.02
CNI11	.00	.68	.52	.00
CNI12	.44	.12	.59	.06
CNI13	.37	.00	.61	.02
CNI14	.14	.60	.55	.03
CNI15	.40	.01	.65	-.01
CNI16	.08	.70	.55	-.05
SSSE1	.24	-.07	.19	.38
SSSE2	.09	-.02	-.12	.76
SSSE3	.13	-.01	.12	.52
SSSE4	.11	-.11	-.11	.80
SSSE5	-.16	.03	.04	.77
SSSE6	-.28	.13	.03	.63

Note. CNI = Communal Narcissism Inventory; SSSE = Self-Sacrificing Self-Enhancement. Loadings targeted to be close to 0 were greyed. Loadings with strength > 0.30 were bolded.

**4.3. Test of the hypothesis regarding communal narcissism's relations with personality traits**

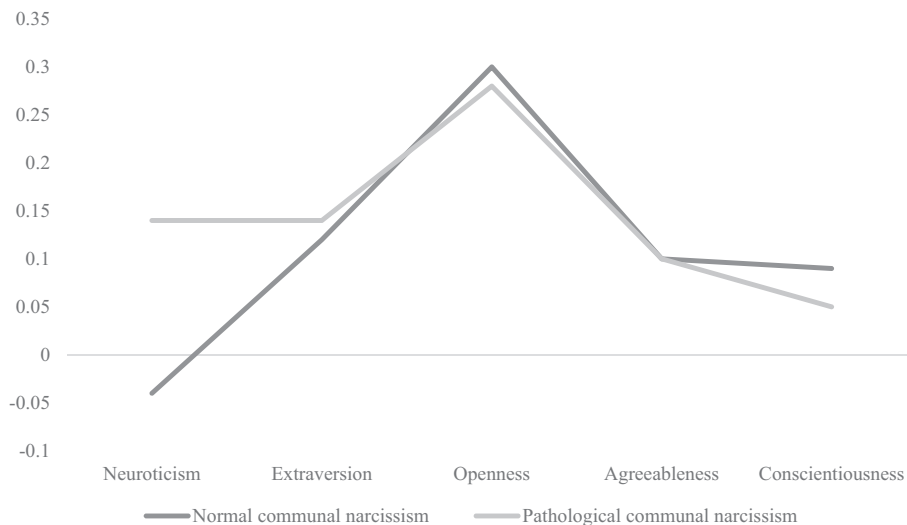
The standardized  $\beta$  coefficients from the linear regression models of normal and pathological communal narcissism regressed on personality traits are depicted in Fig. 1.

Both models were significant ( $F[5775] = 36.55; p < 0.001; R^2 = 0.19$  for normal communal narcissism and  $F[5775] = 26.65; p < 0.001; R^2 = 0.15$  for pathological communal narcissism). As shown in Fig. 1, the strength of relationships was rather similar for normal versus pathological communal narcissism. As expected, the only significant difference was found in neuroticism ( $Z = 5.20; p < 0.001$ ), which was a significant better predictor of pathological ( $\beta = 0.14; p < 0.001$ ) than normal communal narcissism ( $\beta = -0.04; p = 0.269$ ). The strength of correlations for the remaining personality traits was almost equal and not significantly different from each other ( $ps = 0.124-0.500$ ). Thus, the second hypothesis that neuroticism will be a distinctive trait of normal versus pathological communal narcissism was also supported.

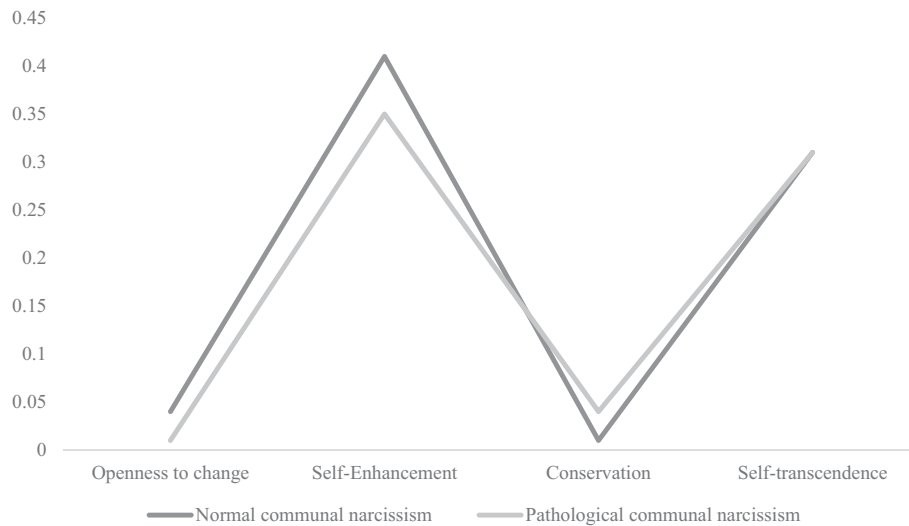
**4.4. Test of the hypothesis regarding communal narcissism's relation to basic values**

The standardized  $\beta$  coefficients from the linear regression models of normal and pathological communal narcissism regressed on values are illustrated in Fig. 2.

Both models were significant ( $F[4776] = 85.23; p < 0.001$ ;



**Fig. 1.** Standardized  $\beta$  coefficients from the linear regression models of communal narcissism regressed on personality traits. Coefficients > 0.09 are significant at  $p < 0.01$ .



**Fig. 2.** Standardized  $\beta$  coefficients from the linear regression models of normal and pathological communal narcissism regressed on values. Coefficients  $> 0.30$  are significant at  $p < 0.001$ .

$R^2 = 0.31$  for normal communal narcissism and  $F[4776] = 67.79$ ;  $p < 0.001$ ;  $R^2 = 0.26$  for pathological communal narcissism). As anticipated, normal and pathological communal narcissism manifested an almost identical pattern of correlations with values. Specifically, normal and pathological communal narcissism scores were significantly associated with increased levels of self-enhancement and self-transcendence ( $ps < 0.001$ ). However, the relationships with openness to change ( $p = 0.398$  for normal and  $p = 0.409$  for pathological communal narcissism) and conservation ( $p = 0.815$  for normal and  $p = 0.819$  for pathological communal narcissism) were not significant. The highest and the only significant difference between normal and pathological narcissism was observed for self-enhancement, which predicted more strongly normal (vs. pathological) communal narcissism ( $Z = 1.91$ ;  $p = 0.028$ ). As hypothesized in our third hypothesis, it seems that normal and pathological communal narcissism share, to a great extent, similar values.

## 5. Discussion

The current study was the first to empirically compare a hitherto understudied facet of narcissism, namely, normal and pathological communal narcissism. Throughout the study, we analyzed the extent to which these two constructs differ in terms of their structural relations. Moreover, we compared their relations with basic personality traits and values.

As expected, structural analyses revealed that normal and pathological communal narcissism are distinct, yet related, constructs. This implies that although sharing the theoretical foundation of having agentic goals satisfied through communal means, they also bring a new quality. Within the literature comparing normal and pathological narcissism two viewpoints exist, one of which suggests that they are arranged on a continuum and the pathology arises from extremity, and the other that suggests they are distinct constructs (Pincus & Lukowitsky, 2010). The results of our study provide evidence in favor of the dimensional view because although normal and pathological communal narcissism indeed turned out to be distinct constructs, they seem to share a common core.

Miller, Lynam, Hyatt, and Campbell (2017) proposed that narcissism is pathological when it leads to distress and/or functional impairment. Following this line of thought, we compared normal and pathological communal narcissism with broad trait dimensions and found the only difference in neuroticism – a personality trait, which is primarily linked with psychological distress (McCrae & Costa, 1997;

Ploubidis & Frangou, 2011). Our results support the prediction that pathological communal narcissism should be related to higher levels of neuroticism. Hence, it may be suggested that pathological communal narcissism is characterized by higher level of psychological distress. Lack of differences regarding the other traits may suggest that the core personality characteristics of normal and pathological communal narcissism are similar and that the difference lies in the psychological distress component.

Finally, we scrutinized the underlying values of normal and pathological communal narcissism. Our findings reveal that there were virtually no differences between normal and pathological communal narcissism. Both types of communal narcissism were primarily motivated by self-enhancement and self-transcendence. At first sight, these results may appear paradoxical as self-enhancement and self-transcendence are believed to reside on opposite ends of the same dimension and, hence, unlikely to co-occur (Schwartz, 1992; Schwartz et al., 2012). However, these results imply that communal narcissists are driven by both concern for others' welfare and their own interest. As such, these findings may help explain why others tend to view communal narcissists in a negative light ("hypocritical communalism"; Barry et al., 2017, p. 789).

Our results should be interpreted with caution, as we relied on self-reports of personality. Thus, it may be that communal narcissists present themselves as possessing other-oriented interests but in the end they seek to satisfy their agentic needs. This superficial communal self-presentation may be studied further by complementing self-report measures with implicit measures (Fatfouta, Zeigler-Hill, & Schröder-Abé, 2017). Moreover, future studies might substantiate our findings by peer-reports of personality and/or values.

In summary, the current study highlights the necessity for a more nuanced examination of narcissism by demonstrating structural similarities and differences between normal and pathological communal narcissism. Our results support the view that both normal and pathological communal narcissism may be conceptualized as continua. It is necessary to distinguish between normal and pathological communal narcissism as they turned out to be distinct constructs. However, they seem to share similar underlying values and can be distinguished by their differential relations to psychological distress (Miller et al., 2017).

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