

SITAR

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PRESIDENT'S MESSAGE MARC FOURNIER



In my dual capacities last year as on-site meeting coordinator and program chair, it is with a sense of pride, satisfaction, and relief that I report on

the success of our 12th annual meeting, held May 30-31, in Toronto, Canada. I would like to take this opportunity to again thank my former lab manager, Nina Dhir, and Cody Codeman from Seamless Events, for their assistance in helping with the meeting arrangements over the last year, and to thank Aubrey Gibson and Caitlyn Timmings for volunteering their time to help out over the two-day meeting.

As in previous years, those in attendance were privy to an outstanding series of talks and

posters covering a wide range of topics relevant to contemporary interpersonal theory and research. Attachment, social cognition, and peer perception figured prominently in the presentations. Interestingly, talks seemed to cluster into distinct content areas. Scale development appears to have been of particular interest, as evidenced in the series of progress reports we received on the development of agency/communion dictionaries, an open-source measure of interpersonal traits, an adolescent inventory of interpersonal problems, and a circumplex measure of interpersonal stressors.

In the months following the annual meeting, Patrick Markey was elected to the position of vice president (VP) of SITAR. Patrick has served as member-at-large for two years and is currently editor of the newslet-

ter. Patrick's election to VP left a vacancy among the members-at-large that Emily Ansell has graciously agreed to fill. Emily has been a member of SITAR for nine years, and for the past year has served as associate editor of the newsletter. Please join me in welcoming Patrick and Emily to their new positions.

We now begin to look forward to our next meeting, which will be held in Philadelphia, PA, June 12-13, 2010. Patrick Markey has agreed to serve as on-site coordinator, and Martin Grosse Holtforth will serve as program chair. Patrick is currently in the midst of making all of the necessary arrangements, and we are most grateful to him for all the work he is doing to ensure that our 13th annual meeting will be a success.

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SPECIAL POINTS OF INTEREST:

- The next SITAR conference will be in Philadelphia on June 12th - 13th, 2010
- Read Mark Lukowitsky's award winning research
- Emily Ansell has been appointed member-at-large of the Executive Council

SITAR'S NEW VICE PRESIDENT PATRICK MARKEY



Patrick Markey received his Ph.D. in personality/social psychology from the University of California at Riverside in 2002, and is currently an

associate professor and director of the Interpersonal Research Lab at Villanova University. Patrick is also the associate editor for the Journal of Personality, and the editor of

SITAR's newsletter. The majority of Patrick's research focuses on how behavioral tendencies develop and are expressed within social relationships. The behavioral tendencies that Patrick has examined range from fairly mundane interpersonal activities (e.g., responding warmly during an interaction) to less common behaviors (e.g., unhealthy dieting, interpersonal behaviors during ovulation, interpersonal aggression after playing violent video games, etc.). In order to study how these behavioral ten-

dencies develop and are expressed in social contexts, Patrick has examined a multitude of social relationships (e.g., parent-child relations, peer relationships, romantic relationships, internet interactions, etc.) at different stages of life. The majority of Patrick's research has been conducted with his wife, Charlotte Markey, of Rutgers University. In addition to their academic collaboration, Patrick and Charlotte are also the proud parents of Charlie (age 4) and Grace (age 2).

SELF AND PEER PERSPECTIVES OF PATHOLOGICAL NARCISSISM AND INTERPERSONAL PROBLEMS

MARK R. LUKOWITSKY & AARON L. PINCUS

Recipient of the Jerry S. Wiggins Student Award for Outstanding Interpersonal Research



Given that the self is believed to possess unique access to internal states and private experiences, it is no wonder that self-report questionnaires are widely used as an important source of information for understanding personality (Kolar, Funder, Colvin, 1996; Wiggins, 1973). Although self-report data provide important information about an individual, they may not always provide a complete or accurate picture. For example, some individuals may be unwilling or unable to report on aspects of themselves, leading to biased, distorted, or otherwise misleading information (John & Robins, 1993; Paulhus, 1998; Shedler, Mayman, & Manis, 1993). People with personality disorders (PDs) often lack self-awareness and may be particularly prone to be defensive or to use self-presentation strategies that result in inaccurate reports of their personality and behaviors, adding to concerns associated with the validity of their responses to self-report measures (Oltmanns & Turkheimer, 2009; Westen, 1997).

A primary feature of PDs is impaired social functioning, and many clinical investigators have argued that personality pathology is expressed through disturbed interpersonal relations (e.g., Benjamin, 1996; Pincus, 2005). Interpersonal theorists have

proposed that one potential source of interpersonal dysfunction in PDs comes from distortions in perception of the interpersonal situation (Pincus, Lukowitsky, & Wright, in press). These distortions may lead individuals to misperceive the behaviors and intentions of others, resulting in inappropriate responses that maintain chronic interpersonal difficulties (Pincus, Lukowitsky, Wright, & Eichler, 2009). Individuals with PDs may therefore have an especially difficult time understanding and reporting about the interpersonal situation, and how their personality and interpersonal behaviors impact others (Clifton, Turkheimer, & Oltmanns, 2005). As such, a more complete assessment of personality pathology should include descriptions and observations provided by others (Oltmanns & Turkheimer, 2006).

Despite their importance for understanding both normal and disordered personality traits and behaviors, to date most studies that have utilized self and other ratings of personality have come from investigations of normal personality (Klonsky, Oltmanns, & Turkheimer, 2002). In an analysis of the few studies that have investigated self-other agreement of PD traits, Klonsky, Oltmanns, and Turkheimer (2002) reported that the median correlation was .36 and ranged from .29 (narcissism) to .56 (antisocial). These modest correlations led the authors to conclude that for PDs, "self/informant concordance is modest at best" (p. 303)

and that narcissistic PD might be a disorder that is particularly prone to self-other disagreement. In spite of the relevance of interpersonal dysfunction to PDs, investigations of self-other agreement of interpersonal problems has also been largely understudied. Studies that have used the *Inventory of Interpersonal Problems-Circumplex* (IIP-C; Alden, Wiggins, & Pincus, 1990) to investigate self-other agreement of interpersonal problems have found self-other correlations to be comparable to studies of PDs (e.g., Foltz, Morse, & Barber, 1999; Hill, Zrull, McIntire, 1998).

In light of the consistent disagreement between self and other reports of maladaptive traits a number of researchers have now recognized the need to move beyond consensus and straightforward self-other agreement in order to investigate systematic patterns of associations that compare the way people view themselves and the way others view them. With regards to narcissism, several studies (e.g., Clifton, Turkheimer, & Oltmanns, 2004) have found that, within both clinical and nonclinical samples, people seen as narcissistic by others tend to put a positive spin on their personality and report being extraverted, likeable, and low in neuroticism. In contrast, others report seeing something very different in these same people. They associate individuals high in narcissism with being neurotic, impulsive, and prone to depression and shame. In a study using the IIP-C, Clifton, Turkheimer, and Oltmanns (2005) reported (continued on page 7)



"Narcissism"
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"... although individuals may have a narcissistic 'blind spot,' individuals expressing the full range of pathological narcissism do have some awareness of their interpersonal problems."



Aaron Pincus (L) gives Mark Lukowitsky(R) the Jerry S. Wiggins' Award for outstanding student research.

BODY IMAGE GETS INTERPERSONAL: EXPLORING ROMANTIC PARTNERS' INFLUENCE

CHARLOTTE N. MARKEY



At first glance, body image might seem like an *intrapersonal* construct. Often defined as the perception an individual

has of his or her body, the construct seems inherently isolated from interpersonal influence. Body image or body perception is most often defined as a subjective, emotionally-laden construct referred to as body satisfaction (or dissatisfaction) – the extent to which an individual is satisfied with the appearance of their body. However, research suggests that this satisfaction is born out of social comparison and can be best understood in the context of social influence (Markey & Markey, in press). In my research, an examination of social influences on body satisfaction has led me to explore parents' influences on their children's body satisfaction (e.g., Davison, Markey, & Birch, 2000; Markey et al., 2002), media influences on body satisfaction (e.g., Markey & Markey, 2009), and cultural influences on body satisfaction (e.g., Markey, 2004). However, the majority of my research in this area focuses on a less obvious influence on body satisfaction: romantic partners.

Romantic partners, particularly marriage partners, have been considered by researchers for decades as an important influence on health. Some researchers have gone as far as to suggest that not having a significant other represents a health risk comparable to smoking or high blood pressure (House, Landis, & Umberson, 1988).

Indeed, romantic relationships appear to contribute to everything from risk for alcohol use to longevity (Horowitz, White, & Howell-White, 1996; Tucker, Friedman, Wingard, & Schwartz, 1996). However, until very recently, research has had little to contribute to our understanding of romantic relationship influences on body image. This is odd given that many of us would freely admit that our concerns about the appearance of our bodies are rooted in our desire to attract, please, or maintain a romantic partner.

When I asked participants in the Rutgers' Study of Couple's Health to list the ways in which their partners might influence their psychological or physical health, the three top categories (over half of all responses) reported were all relevant to body image: eating behaviors, physical activity behaviors, and self-esteem (see Markey, Markey, & Gray, 2007). Responses included comments such as, "she makes me feel better about my appearance" and "he tells me I have a nice figure." It seemed pretty clear to these individuals that body image was interpersonally relevant and that their partners influenced how they felt about their bodies.

In other studies, I've asked participants to rate their own body satisfaction and their perceptions of their partners' satisfaction with their bodies. I've also asked their partners to rate their actual satisfaction with these participants' bodies. Among both women and men, participants' perceptions of their partners' satisfaction with their bodies is significantly associated with their own body satisfaction

(Goins & Markey, 2009; Markey, Markey, & Birch, 2004; Markey & Markey, 2006). These results remain significant when controlling for individuals' actual body size (i.e., body mass index). In other words, how an individual feels about their body is significantly associated with how they believe their partner feels about their body. Interestingly, in women this perception of a partners' satisfaction appears to be more relevant to their body image than is their partners' actual satisfaction with their bodies. This evidence further supports the interpersonal nature of body image and the relevance of romantic partners in understanding individuals' body satisfaction.

In some of my recent research (Markey & Markey, 2006) I've attempted to determine potential elements of romantic relationships that may contribute to romantic partners' influences on body image. Although relationship quality (e.g., love and conflict) does not appear to be particularly relevant to the role romantic partners' play in influencing each other's body image, the length of the relationship appears relevant. In particular, women in the Rutgers Couples' Health Study were more likely to report that they believed their partners were dissatisfied with their bodies if they had been in a committed relationship for a relatively long period of time (e.g., 5+ years as opposed to couples in relationships of ~1 year). These findings remained significant when taking into account women's weight status and age (i.e., this finding is not explained by women's likelihood of being less

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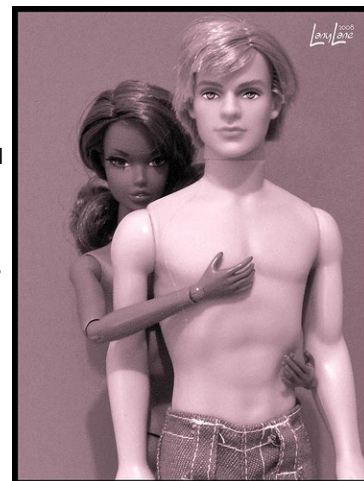


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"Although our bodies 'belong to' no one but ourselves, the feelings we have about them are shaped by the people around us."

GRADUATE STUDENT CORNER

AIDAN G. C. WRIGHT



As this is the first Grad Student Corner I have had the privilege to write, I would like to focus on one of my favorite topics:

change. I know that this may seem out of character for a personality psychologist, but regardless, it seems appropriate as this marks the change of graduate student representatives—when I take over the duties from the very capable Lindsay Ayearst. These are very large shoes to fill, and I hope that the transition will be a smooth one.

Graduate school is a time for change. In fact, the entire reason for attending graduate school seems to be so that change can occur. (If no change is occurring, I suggest that it is time you had a long talk with your advisor!) As graduate students we have self-selected for the type of change that will lead to a new way of thinking, a new outlook, and ultimately (hopefully) a rewarding career. At least that is what I wager led each of us to apply. However, it is an inevitability that the person we were when we chose to go to graduate school will not be the same person we will be when we emerge on the other side. It will be that version of us that will live with the consequences of this decision. We can only hope that that person likes what we chosen for them.

And yet, with as much change that is occurring, I often hear the belief expressed from graduate students who are in the middle of this journey, that they cannot wait to graduate so that things will finally start moving

forward. What I have always taken this to mean is that life is somehow put on hold while we take five years (or a couple more) to get a degree. I suspect parents and friends with shiny cars reinforce this belief. But, it is as if we, as graduate students, are insulated from the changes and vicissitudes of “real” life. Unfortunately, nothing can be further from the truth. And nothing, at least that I know of, can protect us from the natural change and growth that everyone experiences. Like falling in and out of love, getting hitched, breaking it off, dealing with friends and landlords and everything in between those two poles of human relationships. If anything, I see graduate school as a time of accelerated change. Not only are we endeavoring to change ourselves, but life’s changes are also keeping pace.

I can see evidence of this change in my own laboratory at Penn State. Nicole Cain (now Dr. Cain), who was an invaluable mentor to me when I was a first year grad student, graduated just last month (yes it does happen) and is now a post doc at the Personality Disorder Institute at Cornell Medical School. As I write this, Mark Lukowitsky, another graduate student in my lab, who has been a constant fixture and always available for guidance and sage advice, is writing his dissertation and internship essays, planning *his* next big change. And, Michael Roche, the newest addition to our lab, has recently made the transition from undergraduate research assistant to graduate student, with all the honors and privileges (and suffering!) that go along with that change. I briefly share their stories here because they capture so many of the seemingly big changes that occur that are unique to our shared

experience of graduate studenthood. These types of changes can sometimes seem like cause for concern or even alarm. I think that this is because they represent very visible change, looming large on the horizon, and seemingly casting a long shadow out to meet us.

I would like to share a hypothesis of mine: These “big” changes that seem to cause so much worry are actually small in comparison to the more gradual change that is effected through our different approach to the world after graduate school. Here are some examples that are perhaps particular to my training as a clinician, but that I believe all will be able to relate to: (a) I can’t listen to the news. Not for any really good reason, it’s just that it doesn’t contain a segment outlining the methods and results in a way that I have come to expect. (b) I can no longer give anyone anything that approximates a simple and straightforward answer. “Well it depends...” statements followed by five minutes of analysis only go so far outside of the ivory tower. (c) What’s more, I can no longer make fun of people without wondering what I am narcissistically defending against. These may be my own idiosyncrasies, but the premise still holds. We are each in the clutches of a hurricane of change during this time period, some self-inflicted, some imposed on us, all unavoidable. This is big, lasting, and core change. This is what we asked for.

As the graduate corner-keeper changes from Lindsay to me, I actually expect the content to change very little. This is because she had

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“Graduate school is a time for change. In fact, the entire reason for attending graduate school seems to be so that change can occur.”

RECENT WORK BY SITAR MEMBERS

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SELF AND PEER PERSPECTIVES OF PATHOLOGICAL NARCISSISM AND INTERPERSONAL PROBLEMS

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that, in contrast to results from within-source comparisons (self-self and peer-peer), canonical analyses across source (self-peer) demonstrated less predictive ability. However, results also revealed some consistent, albeit modest, systematic relationships between PD traits and interpersonal problems. For example, individuals who rated themselves high in narcissistic PD traits were seen by peers as domineering and vindictive, while individuals who reported problems with being socially avoidant tended not to be seen by peers as high in narcissistic PD traits. The authors proposed that the large within-source variance and modest across source variance was the result of differing perceptions of maladaptive traits and behaviors.

Overall, the literature suggests that narcissism is consistently associated with low self-other agreement and that narcissists tend to view themselves in ways that systematically differ from how they are perceived by others. An important limitation of those studies is that they have tended to focus on the assessment of narcissistic grandiosity. However, recent reviews suggest two broad themes of narcissistic expression, one that reflects grandiosity and another that reflects vulnerability (Pincus & Lukowitsky, in press). Expressions of narcissistic grandiosity are characterized by entitled expectations, interpersonally exploitative acts, and exhibitionism. In contrast, vulnerable expressions of narcissistic pathology are marked by conflicts around entitled expectations and behaviors leading to shame, interpersonal distress, and social avoidance (Dickinson & Pincus, 2003). Thus, while research investigating convergence in self-other ratings of narcissistic grandiosity and studies examining systematic associations between self and other ratings have proven to be a fruitful area of investigation, the conclusions that can be drawn are necessarily limited if they do not provide information about narcissistic vulnerability.

The goal of the current study was to investigate self-other agreement regarding the full expression of pathological narcissism by including the *Pathological Narcissism Inventory* (PNI; Pincus et al., 2009), a 52-item multidimensional self-report measure of pathological narcissism that includes scales reflecting the characteristic grandiose (Exploitativeness, Grandiose Fantasy, Self-sacrificing Self-enhancement) and vulnerable (Contingent Self-Esteem, Entitlement Rage, Devaluing, Hiding the Self) affect and self states described in the clinical, psychiatric, and social/

personality psychology literature (Cain, Pincus, & Ansell, 2008). Given the importance of interpersonal dysfunction to understanding PDs, the current study also included the *Inventory of Interpersonal Problems-Short Circumplex* (IIP-SC; Hopwood, Pincus, DeMoor, & Koonce, 2008), a 32-item version of the longer IIP-C. The IIP-SC would be used to investigate self-other agreement of interpersonal problems, and to see if pathological narcissism is associated with systematic differences in the perception of interpersonal problems.

Participants were 869 college students (530 males and 339 females) from a large, rural university participating in a senior-level capstone business course. The structure of the course was such that, at the start of the semester, students were randomly assigned to teams and worked together over the course of the semester on a business simulation. A total of 174 mixed sex groups with 4 to 7 students per team were assessed.

Data collection occurred in two phases. During the first phase participants completed the PNI and IIP-SC. The second phase of data collection took place 8 weeks into the semester after students within teams had sufficient opportunity to get acquainted. Participants reported a moderate degree of acquaintance with their teammates as assessed on a 7-point Likert scale ($M = 3.06$, $SD = .62$). During the second phase, participants completed peer-report versions of the PNI and IIP-SC for each teammate in a round-robin design, such that everyone served as both a judge and a target. Both self and peer-ratings were completed via a professional online survey server.

The first set of analyses investigated consensus among peers. Consensus for each questionnaire was measured by calculating an intraclass correlation (ICC) for each team, and then averaging it across all teams. The average ICC for the PNI total score and IIP-SC octants was .61 and .53, re-

spectively, suggesting moderate levels of agreement among peers. Given moderate levels of consensus, peer ratings for each target were aggregated and correlated with self-ratings in order to measure self-other agreement. Results suggested no association between self and peer ratings of pathological narcissism ($r = .03$, ns). Results did indicate modest self-other agreement for Agentic ($r = .27$, $p < .01$) and Communal problems ($r = .20$, $p < .01$), but not for profile elevation ($r = -.02$, ns), an indicator of general interpersonal distress (Tracey, Rounds, & Gurtman, 1996).

Systematic relationships were then explored to help better understand the discrepancy between self and peer-ratings. First, within-source correlations were calculated to examine the relationship between self-ratings on the PNI and self-ratings on the IIP-SC. Consistent with the initial validation of the PNI, and what is known clinically about pathological narcissism, the PNI scales were uniquely associated with interpersonal problems, and were related to general interpersonal distress (see Table 1). Next, within-source correlations examining peer-ratings of the PNI and peer-ratings of the IIP-SC were calculated. Overall, peers saw pathological narcissism as being strongly associated with interpersonal problems in ways that were generally consistent with the self-ratings (see Table 1). Nevertheless, some interesting differences emerged. For example, whereas self-ratings associated grandiose fantasy with general interpersonal distress, peers tended to associate individuals whom they

(continued on page 9)

Table 1. Monomethod Correlations

	PNI Self-Ratings with IIP-SC Self-Ratings		
	Agency	Communion	Elevation
CSE	-.03	.02	.57**
EXP	.44**	-.04	.01
SSSE	.02	.28**	.21**
HS	-.08*	-.14**	.44**
GF	.07	.07	.44**
DEV	.02	-.09**	.54**
ER	.28**	-.10**	.42**
PNI total	.12**	-.01	.54**
	PNI Peer-Ratings with IIP-SC Peer-Ratings		
	Agency	Communion	Elevation
CSE	.30**	.02	.52**
EXP	.40**	.14**	.19**
SSSE	.08*	.32**	.07*
HS	.14**	-.10**	.38**
GF	.21**	.18**	.15**
DEV	.19**	-.11**	.57**
ER	.45**	-.01	.43**
PNI total	.32**	.07	.43**

PNI = Pathological Narcissism Inventory, IIP = Inventory of Interpersonal Problems, CSE = Contingent Self-esteem, EXP = Exploitative, SSSE = Self-sacrificing Self-enhancement, HS = Hiding the Self, GF = Grandiose Fantasy, DEV = Devaluing, ER = Entitlement Rage.
** $p < .01$, * $p < .05$

BODY IMAGE GETS INTERPERSONAL: EXPLORING ROMANTIC PARTNERS' INFLUENCE (CONTINUED)

slender and/or older the longer they have been in the relationships). Further, women believed their partners would like them to be thinner than they currently were but did not believe their partners viewed them as getting heavier the longer they were in a relationship. Interestingly, when men were queried, they reported being relatively satisfied with their partners' bodies. So, what can we make of these somewhat surprising interpersonal dynamics? Perhaps, women would benefit from talking with their partners about their bodies and understanding that their partners were relatively satisfied with their bodies and didn't expect them to strive for the unrealistic ideals women often hope to attain (Markey & Markey, 2006).

Although the majority of body image research (including my own) focuses primarily on girls and women, there is a growing recognition that boys and men are often dissatisfied with their bodies, and this dissatisfaction may prove consequential (e.g., resulting in steroid use; see McCabe & Ricciardelli, 2004). My research indicates that men's romantic relationships are relevant to our understanding of their body image. For example, we've recently determined that men's body satisfaction is associated with their own and their partners' reports of sexual intimacy in their relationship (Goins & Markey, 2009). Men who report greater intimacy in their relationship also report greater body satisfaction. Although the direction of effects remains unclear thus far, preliminary analyses seem to indicate that it may be sexual intimacy that improves men's body satisfaction and not the other way around.

Although our bodies "belong to" no one but ourselves, the feelings we have about them are shaped by the people around us. In

adulthood, the people that appear to be consequential in shaping our body satisfaction include our romantic partners. Whenever I complete a manuscript on this topic, I can't help but ponder what would happen if men and women in relationships discussed these issues openly. Given that my coauthor on the majority of these manuscripts is my husband, there is not a lack of communication about these issues in our home. I'm pretty sure that I've benefited through the years by the open dialogue we have about a topic most often avoided among romantic partners. After all, most "smart" men wouldn't dare discuss their girlfriends or wives bodies or physical appearance unless it is in the context of providing a specific compliment. Perhaps they don't realize the potential they may have to improve the body image of their beloved by engaging in conversations about this topic? Perhaps they just don't realize the interpersonal nature of body image?

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GRADUATE STUDENT CORNER (CONTINUED)

already, purposefully or not, set this up as a place to discuss change. In the past year, articles by Anthony Ruocco and Chris Hopwood addressed two quintessential aspects of graduate change. In a very helpful article, Anthony discussed making the change from grad school to being a post doctoral trainee. This is the type of change that we often stress about, and it is helpful that we have senior colleagues who are here to help us weather these transitions.

In contrast, Chris tackled the task of putting into words some of that more gradual change by sharing what he learned in graduate school. My hope is that this section of the newsletter will serve primarily as a guide for all of this change that we have in store for us. As I mentioned above, laboratories are fluid entities. I would gradually like to introduce the newest members of other labs. Following that, I hope to enlist the help of senior students and recently minted doctors to discuss topics such as developing an

identity as an interpersonal psychologist, finding an internship (and the experience on internship as an interpersonalist), and how to successfully secure extramural funding for interpersonal research.

I am very excited to be your student representative, and I encourage anyone who has thoughts, comments, concerns, or pleasantries to contact me at aidan@psu.edu. I look forward to hearing from you.

SELF AND PEER PERSPECTIVES OF PATHOLOGICAL NARCISSISM AND INTERPERSONAL PROBLEMS

(CONTINUED)

perceived as having grandiose fantasies as overly intrusive. To further explore these differing perceptions we calculated across-source correlations. As can be seen in Table 2 there were few significant correlations between self-ratings of pathological narcissism and peer ratings of interpersonal problems. Peer ratings of pathological narcissism, however, were more modestly associated with self-ratings of interpersonal problems, suggesting that individuals perceived by their peers as high in pathological narcissism have some awareness of their dominant interpersonal problems.

To further investigate how pathological narcissism impacts ratings of interpersonal problems we explored whether a discrepancy between self- and peer-ratings of interpersonal problems was associated with pathological narcissism. To examine this we created a self-other discrepancy score for each participant by taking the square root of the sum of the squared differences of self and other scores across the eight IIP-SC scales (Foltz et al., 1999). The discrepancy score was then correlated with ratings on the PNI. As can be seen in Table 3, discrepancy about interpersonal problems was positively and significantly correlated with self-ratings on the PNI, suggesting that the more narcissistic one rates oneself the more discrepancy there is with peers on ratings of interpersonal problems. On the other hand, when peer ratings on the PNI were correlated with the same discrepancy score, the direction of the correlation

changed, suggesting that the more narcissistic individuals are perceived to be the less discrepancy (or more agreement) there is about interpersonal problems.

Overall, the results from this study suggest that, in spite of considerable consensus among team members, individuals have little awareness of how others perceive their maladaptive traits. Specifically, while both self and peer ratings noted a significant association between pathological narcissism and interpersonal distress, peers tended to associate pathological narcissism with more Agentic problems. The results from this study also indicate that self-ratings of pathological narcissism are not related to peer ratings of interpersonal problems, and are associated with significant discrepancies in ratings of those problems. Thus, views about one's own level of pathological narcissism seem to result in perceptions about interpersonal problems that differ from those of one's peers. However, when assessed by peers, ratings of pathological narcissism were more consistently related to self-ratings of interpersonal problems in addition to significant peer-self agreement about those problems. This may imply that, as one's narcissistic traits are more apparent to others, they lead to interpersonal problems that are obvious to both self and peers.

Together these results point to the importance of assessing the full expression of pathological narcissism, and of supplement-

ing self-reports with observer ratings. Specifically, results suggest that, although individuals may have a narcissistic "blind spot," individuals expressing the full range of pathological narcissism do have some awareness of their interpersonal problems. This is consistent with theoretical and clinical descriptions of narcissistic patients that suggest that, while these individuals may not be fully aware of how their personality and behaviors impact others, they are aware of their inability to adaptively relate to others, particularly as their personality and maladaptive behaviors impede their relationships (Ronnigtstam, 2009). Indeed, it is typically distress around interpersonal difficulties that brings these patients into therapy.

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Table 2. Heteromethod Correlations

PNI Self-Ratings with IIP-SC Peer Ratings			
	Agency	Communion	Elevation
CSE	-.04	.00	.01
EXP	.15**	.02	-.02
SSSE	-.04	.07	-.01
HS	-.04	-.01	-.01
GF	.04	.02	-.08
DEV	-.05	.00	-.01
ER	.07*	.00	-.01
PNI total	.01	.01	-.02
PNI Peer-Ratings with IIP-SC Self-Ratings			
	Agency	Communion	Elevation
CSE	.09*	-.03	.02
EXP	.21**	-.03	-.01
SSSE	.03	.03	.00
HS	.06	-.08*	-.02
GF	.09*	.00	-.01
DEV	.05	-.03	.01
ER	.16**	-.08*	.01
PNI total	.12**	-.04	.00

PNI = Pathological Narcissism Inventory, IIP = Inventory of Interpersonal Problems, CSE = Contingent Self-esteem, EXP = Exploitative, SSSE = Self-sacrificing Self-enhancement, HS = Hiding the Self, GF = Grandiose Fantasy, DEV = Devaluing, ER = Entitlement Rage.
** p<.01, *p<.05

Table 3. Discrepancy of Interpersonal Problems

PNI Scale Self-Rating	IIP-SC Discrepancy Score
CSE	.48**
EXP	.05
SSSE	.18**
HS	.37**
GF	.18**
DEV	.46**
ER	.38**
PNI total	.47**
PNI Scale Peer-Rating	IIP-SC Discrepancy Score
CSE	-.22**
EXP	-.09*
SSSE	-.06
HS	-.19**
GF	-.08*
DEV	-.25**
ER	-.19**
PNI total	-.19**

PNI = Pathological Narcissism Inventory, IIP = Inventory of Interpersonal Problems, CSE = Contingent Self-esteem, EXP = Exploitative, SSSE = Self-sacrificing Self-enhancement, HS = Hiding the Self, GF = Grandiose Fantasy, DEV = Devaluing, ER = Entitlement Rage.
** p<.01, *p<.05

PRESIDENT'S MESSAGE (CONTINUED)

Additional details concerning the meeting can be found elsewhere in this newsletter, and registration information will be available soon through our website, listerv, and the next newsletter. In the interim, please begin to think about what you might want to present, and with whom.

Now is the time to think about which interesting theoretical or empirical work you could present to ensure a vibrant and intellectually enriching meeting. I would ask that you consider consulting with colleagues who regularly attend our annual meeting to see if the talks you intend to propose could be integrated into a panel or symposium. As we have seen at past meetings, talks often seem to naturally coalesce around a small number of intellectual themes that would be well suited for the under-utilized panel format. Panels and symposia afford attendees greater opportunities for reflection and discussion, as attendees can consider not only the themes particular to each talk, but also the themes that emerge across talks. For my own part, I intend to introduce a President's Symposium at next year's meeting. Such a symposium will afford the president an opportunity to ensure that topics of particular importance receive adequate attention. I hope for this to become an annual tradition. The president might use the symposium as an opportunity to attract new members to our

society, all around a particular theme; however, it need not be used for recruitment purposes. I have yet to decide what the topic of the 2010 symposium will be, but some of the topics that I am currently considering are interpersonal neuroscience and the technologies of 21st century interpersonal assessment.

Now is also the time to think about which colleagues you could invite whose work could be presented either in collaboration with yours, or instead on its own. Last year about one third of our talks and posters were given by first-time presenters, and a number of them were attending our meeting for the first time. Many of our members expressed to me how pleased they were to see the reach of interpersonal research extend into new disciplines and content areas, such as I/O psychology and management, and how much they felt they benefited from hearing the talks of these new attendees. However, if we are to ensure that our meeting continues to attract new attendees and that our society continues to attract new members, we will need to do everything we can to ensure that our annual meeting is intellectually accessible. Although we are united by a common belief in the fundamental impor-

tance of the interpersonal domain, we must remember that our membership encompasses a staggering range of intellectual variation. We are students and faculty, clinicians and researchers. We are neuroscientists and evolutionary psychologists as well as circumplexers. Some of us know how to test for circumplexity; others do not. Some of us know Leary's system of labeling variables; others do not. Although our annual meetings often feel like a family reunion, we must remember that we are also hosts each year to first-time attendees who potentially represent new and lasting additions to our family. Not all of them are familiar with our shorthand. Let us thus do what we can to ensure that they benefit as much from our talks as we benefit from theirs.

In closing, allow me to say what a pleasure it is to serve as president of our society this year. Should you have suggestions about ways in which we can enhance the society, please feel free to contact me. I welcome your input. I look forward to working with the Executive Council and you, the members, to ensure the continuation of what Ken Locke aptly called a singularly welcoming and stimulating professional community.

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SITAR: MISSION, AIMS, AND ACTIVITIES

The Society is an international, multidisciplinary, scientific association devoted to interpersonal theory and research. By encouraging systematic theory and empirical research, it seeks to clarify the processes and mechanisms of interpersonal interactions that explain interpersonal and intrapersonal phenomena of normal and abnormal psychology.

The goals of the Society are (1) to encourage the development of this research, (2) to foster the communication, understanding, and application of research findings, and (3) to enhance the scientific and social value of this research.

The activities of the Society include: (1) regular meetings for the communication of current research ideas, methods, and findings; (2) discussion of work in progress; (3) maintenance of an inventory of data and data-gathering resources available for use by members of the Society; and (4) facilitation of collaborative research.

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THE NEXT SITAR MEETING IS IN PHILADELPHIA, JUNE 12TH - 13TH, 2010



The Philadelphia skyline from the art museum.
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day you can explore the world's largest municipal park, the best collection of public art in the United States, four centuries of history and architecture, and experience

SITAR's 13th Annual Meeting is returning to the City of Brotherly Love—Philadelphia. Philadelphia is a city rich in history where by

endless shopping.. After the sun sets, enjoy award winning restaurants, acclaimed performing arts, candlelight tours, and a vibrant night life.

This year, the conference will be held June 12th-13th at the Radisson Plaza Warick Hotel located in Center City. Guests can stay at the Warick (US\$149/night). Listed on the National Register of Historic Places, the Plaza Wawick Hotel was originally constructed in 1926. This historic yet modern downtown Philadelphia hotel is located just off the world-renowned Rittenhouse Square, the city's most prestigious residential, commercial and business district. Details about the Meeting and a Call for Proposals will be mailed in February.



A sunny day at Rittenhouse Square park.
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