NARCISSISM OR SOMETHING ELSE?

Lately I have encountered clients who come to me because of a narcissistic parent/spouse/boss, and I have discovered upon exploration, that the problem individual in the client's life may not be primarily narcissistic. I have spoken of this a bit before in my blog on "Narcissism as a Scale of Behavior." If you are particularly interested in this aspect of narcissism, perhaps you may want to read that blog as well.

When two or more medical or mental health issues exist at the same time in a single individual, we call that "co-morbidity". Not a lovely term, but I didn't invent it. As it turns out, narcissism can be a co-morbid condition with several other diagnosis. Recently a new client was telling me about her narcissistic mother. The mother is morbidly obese, moderately agoraphobic and pays almost no attention to my client and never has. She lacks friends or social connections, and even though she spent her career as a primary school teacher, doesn't seem to like children and found herself frequently "in trouble" at work. Upon further questioning, I find that the mother doesn't pick up on social cues which can attribute to her lack of friends and outside connections. Mom, in this case, exhibits classic symptoms of Asperger's Syndrome, a type of autism. Because of the lack of ability to read other people and truly connect with them, they appear quite narcissistic. But it's not narcissism in the classic sense. I have an acquaintance who has Asperger's. He, unlike true narcissists, has lots of empathy. It just takes him longer to recognize someone else's empathic needs. Everything gets funneled through his own lens. This can be very frustrating and certainly appears self-involved. But when confronted with his behavior, he can and will make adjustments.

Another co-morbid state with narcissism, can be protracted grief. After a major loss, it is natural and normal to go through a grief process. This can last up to a year but is often less time. During primary grief, a person can feel very wrapped up in their own feelings and not take others into account as they once did. They can lack interest in the outside world or in other people. Rarely do we experience these people as narcissistic, because we

know that grief can take its time and its toll on the bereft. Perhaps we too have experienced grief and know what its like to get lost in it temporarily.

When someone's grief is protracted or goes on longer than what is normally expected (over 12 months in adults), we call this Persistent Protracted Bereavement Disorder. This is characterized by preoccupation with the death, the deceased or the circumstances of the death. It can also be characterized by avoidance of anything or anyone who reminds them of the loss. A client of mine was born a twin. She lost her twin sister a few months after birth to SIDS (Sudden Infant Death Syndrome). Her mother went into a protracted bereavement state that included massive amounts of self-blame. She also fell into a deep depression. My client never felt connected to her mom who wasn't able to securely attach to her living child due to the grief. She had an experience growing up similar to someone growing up with a narcissist. But narcissism wasn't the real issue we discovered after exploring her childhood in depth; protracted bereavement was.

Similarly, depression and anxiety can make someone behave in a selfinvolved manner. These people can love and feel for others, can be empathic in attitude, but lack the mental energy to express that love and concern. The depth of their own mental issues prevents them from connecting to others. As a young woman I developed a deep and loving friendship with a person I will call Dora. Dora and I spent much time together in our 20's and had a lot of fun and shared much in common. In her late 30's Dora developed severe anxiety and panic attacks. She was debilitated by them and would talk to me about them constantly. She also refused to get professional help because she didn't want to pay for it. Increasingly, I found our conversations and interactions to be all about her and her anxiety. If I didn't return her calls fast enough, she would accuse me of not caring about her. I did care about her, but I found our interactions to be exhausting and one sided. It was always about her. Maybe Dora was narcissistic and I just didn't see it when we were young. But clearly her anxiety caused so much self-involvement that friendship was no longer possible and we "broke up". I now see this as a case of someone's narcissism being secondary to their anxiety disorder.

Knowing and understanding the complexity of the human mind can help us feel more empathic toward those who maybe aren't true narcissists but who sometimes act like one.