Antagonism Attenuates the Relationship between Childhood Polyvictimization and Distress in Adulthood

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Antagonism Attenuates the Relationship between Childhood Polyvictimization and Distress in Adulthood

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PSYC 498: Honors Capstone Project
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Abstract

The cumulative effects of childhood polyvictimization, including incremental increases in experiences of childhood maltreatment (CM) types, such as sexual abuse and emotional neglect are associated with an increase in psychological distress. Personality trait domains as measured by the Personality Inventory of the DSM-5, are independently associated with psychological distress, and are thought to moderate the association between traumatic events and distress. The present study was conducted with a sample of undergraduate students (N = 485) who were administered a battery of questionnaires including the Childhood Trauma Questionnaire (CTQ), Inventory of Depression and Anxiety Symptoms (IDAS-II) and the Personality Inventory for DSM-5 Brief Form (PID-5). We hypothesized that: 1) PID-5 Negative Affectivity (NA), Detachment, Disinhibition, Antagonism, and Psychoticism would be significantly positively correlated with IDAS-II Distress; 2) the positive correlation between polyvictimization and IDAS-II Distress would be significantly stronger than the positive correlation between total scores on the CTQ and IDAS-II Distress, and; 3) the personality trait domains of NA, Detachment, and Psychoticism would moderate the relationship between polyvictimization and IDAS-II Distress. Pearson correlations, Meng’s Z-test, and multiple regressions models were used to test all hypotheses. Results indicated that all five personality trait domains were positively correlated with IDAS-II Distress. Support was not found for the second and third hypotheses. Interestingly, a significant negative interaction effect of polyvictimization with Antagonism on IDAS-II Distress was found when controlling for sex. The significant negative moderation effect suggests that higher levels of Antagonism attenuate the impact of childhood polyvictimization on distress in adulthood. The significance of these findings and their implications for future research will be discussed.
Antagonism Attenuates the Relationship between Childhood Polyvictimization and Distress in Adulthood

Childhood maltreatment is a highly prevalent form of victimization in the United States and is associated with a wide range of psychological problems (Finkelhor et al., 2015; Humphreys et al., 2020; Keyes et al., 2012; King et al., 2022; McKay et al., 2021; Prachason et al., 2023; De Ruiter et al., 2022). Experiences of emotional, physical, and sexual abuse, as well as emotional and physical neglect have been used to define childhood maltreatment (CM; Bernstein et al., 1998). Much of the literature has conceptualized childhood victimization as isolated events, congruent with definitions of other trauma typologies (e.g., natural disasters, war, and injury) where certain diagnoses are predicated upon exposure to a traumatic event (e.g., PTSD; American Psychiatric Association [APA], 2022, pp 301 – 314). However, experiences of CM are often typified by maltreatment co-occurrences and chronic revictimization, challenging the paradigm of childhood trauma as an event.

Cumulative types of childhood victimization have also been found to predict psychological sequelae (Turner et al., 2017). More specifically, psychological distress in adulthood is associated with cumulative types of CM beyond severity of CM alone (Finkelhor et al., 2007; Humphreys et al., 2020; Keyes et al., 2012; Kisely et al. 2018; Kotov et al., 2021; McKay et al., 2021; Rapsey et al., 2019). Such findings suggest that CM may be better understood as an environmental state than an event. Therefore, inclusion of both severity and variety may improve the degree to which CM assessment captures various degrees of maltreatment. For example, two scores reflecting moderate maltreatment on a global assessment of CM may represent both severe maltreatment of a single types (e.g., childhood emotional
abuse), as well as moderate maltreatment across multiple types (e.g., childhood sexual and emotional abuse; Bernstein et al., 1998).

In seminal research, Finkelhor et al. (2007) investigated the association between experiencing multiple types of childhood victimization, or polyvictimization, and psychological distress. While prior research on childhood victimization had focused on single childhood victimization types or instances (Finkelhor et al., 2005), the effect of cumulative childhood stress on psychopathology had begun to emerge in research, implicating CM as a developmental cascade (Saunders, 2003). Assessing one year prevalence of victimizations in a sample of US children (N = 2030), Finkelhor et al., (2007) found polyvictimization to be a stronger predictor of psychological distress than chronic single-type victimization. Consequently, polyvictimization may capture a more comprehensive profile of victimization.

Since Finkelhor et al., (2007) the impact of polyvictimization on distress has been demonstrated across populations and methodologies. Among adults with experiences of childhood sexual abuse, research has indicated a dose-response relationship between polyvictimization and distress (Steine et al. 2017), in that distress increased with the number of CM types experienced. In a meta-analysis of longitudinal research, McKay et al. (2021) similarly supported a dose-response relationship between childhood polyvictimization and distress in adulthood was in that experiencing multiple types of CM was positively associated with distress. Further, in a systematic review of research conducted across seven different countries, the impact of polyvictimization on distress was found among children and adolescents, with studies indicating a positive association of polyvictimization with distress beyond that accounted for by individual CM severity (Haahr-Pedersen et al., 2020). Congruent with the polyvictimization model, accounting for the effect of multiple types of maltreatment appears to allow for stronger
predictivity of clinical outcomes and greater congruence with lived experiences of CM (Finkelhor et al., 2005). In principle, polyvictimization demonstrates the importance of victimization measurement that captures the prototypical experiences, salient cooccurrences, and related sequelae. As such, accounting for commonly cooccurring risk factors, in addition to polyvictimization, may explicate the relationship between childhood victimization and distress (Riely et al., 2020; Waszczuk et al., 2018).

Diagnostic measures of personality domains such as those in the Alternative DSM-5 Model of Personality Disorders (AMPD; APA, 2022, pp 761 – 763) have been associated with distress and the inclusion of such personality domains may meaningfully expand the nomological network of childhood victimization profiles (Bach et al., 2022; Kotov et al., 2017; Oshri et al., 2012; Veith et al., 2017). Given the lasting influence of personality domains on distress (Anderson et al., 2016; Cox et al., 2023; Kendler et al., 2017), regardless of victimization status, an interaction between polyvictimization and personality may better account for distress. However, previous research has been limited to a developmental perspective, viewing personality as part of the mechanistic path between victimization and distress, rather than an independent contributor to the impact of polyvictimization on distress (Bach et al., 2022; Oshri et al., 2013).

Previous studies that investigated the role of personality in conditional processes between CM and distress have varied in their methodologies and operationalizations of personality (Bach et al., 2022; Oshri et al., 2013; Spinhoven et al., 2016; Veith et al., 2017). For example, in longitudinal study, Oshri et al. (2013) found that personality, defined as trait impulse-control, mediated between CM and distress among a sample of children and adolescents (N = 400). Bach et al. (2022) found the traits of Negative Affectivity, Detachment, Psychoticism, and
Disinhibition as defined by the AMPD, mediated the positive association between CM and distress and that all AMPD personality domains significantly positively correlated with distress among a sample of adults (N = 462). Therefore, a general tendency for CM, personality, and distress to be positively associated may be concluded despite the need to reconcile variability in constructs of personality and distress across studies.

Adding to measurement and methodological differences, studies indicating a positive association between personality and distress have drawn various conclusions. A range of empirical results using the AMPD model have indicated a) all five personality traits as positively correlated with depression, anxiety, and perceived stress (Cox et al., 2023); b) all traits except Antagonism as positively related to higher order distress (Bach et al., 2022; Morey et al., 2013); c) Negative Affectivity, Detachment, and Psychoticism as correlated with depression, dysphoria (Anderson et al., 2016), and distress (Benzi et al., 2023); d) Negative Affectivity and Detachment as dimensions of higher-order distress (Wright & Simms, 2014), and; e) Negative Affectivity as a dimension of higher-order distress (Kotov et al., 2017). Despite such variability, the AMPD model has exhibited the similar structure and validity across studies, thus the variability may be attributable to the measurements of distress.

Among polyvictimization studies, distress has been constructed as disorder-specific symptoms, or more general symptoms of high negative affect. For example, distress has been operationalized as the presence of anxiety, depression, or posttraumatic stress disorders (Rapsey et al., 2019), comprised of their respective symptoms from a variety of measures (Veith et al., 2017). Alternatively, distress has been constructed as a broad domain of symptoms related to high negative affect (Bach et al., 2022). Therefore, the assessment of distress may be limited by targeting diagnoses such as Depression rather than individual symptoms contributing to distress,
or by assessing high negative affect without regard to low positive affect (Bach et al., 2022; Oshri et al., 2013; Prachason et al., 2023). Notably, low well-being has been evidenced as a strong correlate of distress, and more specifically a factor reflective of higher-order distress (Kotov et al., 2021). Therefore, the assessment of distress may benefit from a symptom-focused scale which accounts for both high negative affect as well as low positive affect.

Altogether, the comprehensive assessment of CM and distress plays a critical role in understanding variability among the current literature. Results found in previous research may be limited by only accounting for single types of CM, measures of distress which do not account for low positive affect, or both. Therefore, novel assessments of CM and distress are needed to build upon these limitations. First, assessment of CM may account for prevalent, impactful, and relevant cooccurrences of experiences of CM, such as cumulative CM types and personality. More specifically, investigating the interaction of polyvictimization and personality on distress may lend to a more comprehensive profile of victimization than polyvictimization alone, while also maintaining reciprocal independence and relevancy to the shared sequela of distress. Second, a measurement of distress which accounts for low positive affect as well as high negative affect may be more reflective of general experiences of distress, compared outcome measures which are only sensitive to high negative affect (Forbes et al., 2023; Watson et al., 2021). Finally, such comprehensive assessment of distress may be specific enough as to reduce artifactual influence yet comprehensive enough to detect the impact of both personality trait domains and experiences of polyvictimization.

The present study aims to understand whether different levels of AMPD personality trait domains increase the impact of polyvictimization on distress. Consequently, it is hypothesized that a) CM polyvictimization will be significantly positively associated with Inventory of
Depression and Anxiety Symptoms (IDAS-II) Distress as assessed by high negative affect and low positive affect, and this relationship will moderated by the personality traits of Negative Affectivity, Detachment, and Psychoticism such that scores on the polyvictimization measure will be more strongly associated with scores on the IDAS-II Distress measure for those with higher scores of Negative Affectivity, Detachment, or Psychoticism; b) Negative Affectivity, Detachment, and Psychoticism will be significantly positively associated with IDAS-II Distress, and; c) the correlation between the scores on CM polyvictimization and IDAS-II Distress will be positive and significantly stronger than the correlation of scores of CM without regard to polyvictimization and IDAS-II Distress.

Method

Participants

The final sample included 472 undergraduate students ranging in age from 18 to 39 years ($M = 19.1, SD = 2.2$). The sample predominantly identified as women ($n = 313, 66.3\%$) with 14 non-binary and two transgender participants. The sexual orientations of respondents were identified as heterosexual ($n = 340, 72\%$), bisexual or pansexual ($n = 83, 17.6\%$), and gay or lesbian ($n = 15, 3.2\%$), with 34 participants identifying as an unlisted sexual orientation. Respondents racially identified as White ($n = 221, 46.8\%$), Black ($n = 117, 24.8\%$), Asian ($n = 33, 7\%$), Native American ($n = 7, 1.5\%$), and Pacific Islander ($n = 1, 0.2\%$). Ethnically, 41 (8.7\%) respondents identified as Hispanic. A full list of demographic characteristics is presented in Table 1.

Measures

Polyvictimization
Polyvictimization was assessed by the Childhood Trauma Questionnaire Short Form (CTQ-SF), a self-reported retrospective measure of CM consisting of the five subscales of Emotional Abuse, Physical Abuse, Sexual Abuse, Emotional Neglect, and Physical Neglect (Bernstein et al., 2003). The CTQ-SF is made up of 28 items in total with 5 items for each subscale and a 3-item scale of minimization or denial. Items are prefaced by “When I was growing up,” then present different experiences of CM (e.g., “People in my family hit me so hard it left me with bruises or marks”; Bernstein et al., 2003, p178) which are responded to on 5-point Likert-type scale ranging from 1 (Never True) to 5 (Very Often True). Responses are summed to create subscale scores, with higher values representing greater abuse or neglect. Severity of CM may also be assessed by four established thresholds corresponding to levels of None, Low, Moderate, or Severe for each subscale.

The CTQ-SF has shown good psychometric properties, such as convergence with clinician reports of CM (Bernstein et al., 2003; Spinhoven et al., 2014). The internal consistency for the CTQ-SF subscales in the present sample ranged from .64 to .92, with physical neglect and sexual abuse defining the alpha boundaries. In the present study scores at or above Low levels were considered positive cases of maltreatment, congruent with previous research (Kaubrys et al., 2021). Positive cases for each of the five types of CM were then summed to create a total score of polyvictimization (with a range of 0 to 5) with higher scores indicating higher levels of polyvictimization.

**Personality**

The Personality Inventory for the DSM-5 Brief Form (PID-5 BF; Anderson et al., 2016) is a 25-item self-reported measure used to assess personality trait domains of the AMPD (APA, 2022). Items present short descriptions of characteristics. Responses of how well each item
describes the participant are recorded using a 4-point Likert-type scale ranging from 0 (Very False or Often False) to 3 (Very True or Often True). The PID-5 is made up of 5 subscales, Negative Affectivity, Detachment, Disinhibition, Psychoticism, and Antagonism and has shown strong psychometric properties converging with current DSM-5 definitions of personality disorders as well as the Five Factor Model of personality (Anderson et al., 2016; Torres-Soto et al., 2019; Wright et al., 2017). Subscale items are summed to scores each of the five personality trait domains with extreme values being considered maladaptive and higher scores indicating higher levels of each trait. For the present study internal consistency as indicated by Cronbach’s alpha was acceptable, ranging from .71 to .81, respectively.

**Distress**

The expanded version of the Inventory of Depression and Anxiety Symptoms (IDAS-II; Watson et al., 2012) is a self-reported measure consisting of 99-items which assess 18 symptoms related to Anxiety and affective psychological problems (e.g., Dysphoria, Traumatic Intrusions, and Ill Temper). Items present symptom-related experiences and instruct participants to respond with how much they have been bothered by the experience during the previous two weeks. Likert-type response options range from 1 (not at all) to 5 (extremely) and are summed to create symptom scores with higher scores reflecting more severe experiences of symptoms. The IDAS-II has shown strong psychometric properties such as convergence with clinical diagnoses and invariance across populations (Watson et al., 2012).

Factor analyses of the IDAS-II have indicated three higher-order dimensions of Distress, Fear, and Positive Mood. As such, reverse coded items from the Positive Mood dimension (i.e., the Wellbeing subscale) as well as the Distress dimension subscales of Dysphoria, Lassitude,
Traumatic Avoidance, and Traumatic Intrusions were summed to measure Distress. The internal consistency of the subscales used ranged .85 to .92.

Procedure

An online experiment management system was used to recruit participants from an introductory psychology course as a large Midwestern university. An online survey was used to collect data from August 2022 to January 2024, and course credit was offered for participation. Responded engagement was assessed using three attention check questions, longstring analysis, and the person-fit index of the standardized log-likelihood of response patterns for polytomous data (i.e., $l_z$; Drasgow et al., 1985). The $l_z$ index for detecting aberrant response patterns has been validated in samples greater than 300 (Dai et al., 2021).

The R packages Careless and PerFit were used for longstring and $l_z$ index analyses, respectively (Yentes, 2023; Tendeiro et al., 2016). From the full sample (N = 610), participants were excluded who (a) missed all three attention check items ($n = 18$); (b) responded to the IDAS-II, CTQ-SF, or PID-5 with a single response category ($n = 70$), or; (c) were at or above the 99th percentile of $l_z$ index of the IDAS-II, CTQ-SF, or PID-5 ($n = 55$) as specified in Dai et al. (2021) and Hong et al. (2020).

Data Analyses

First, correlation analyses were conducted to examine all hypothesized relationships between study variables, using listwise deletion for missing data. Next, Meng’s $Z$ was used to compare the strength of the correlation between polyvictimization and IDAS-II Distress with CM severity and IDAS-II Distress (Meng et al., 1992). Regression assumptions were tested using descriptive statistics of the residual distribution and formal tests for heteroskedasticity and multicollinearity.
The moderating effects of personality traits on the relationship between polyvictimization and IDAS-II Distress were modeled using multiple linear regression with all variables entered simultaneously. Moderation effects were analyzed using simple slopes with the slope of IDAS-II Distress on polyvictimization analyzed at the 16th, 50th, and 84th percentiles of each moderating personality trait domain. The Johnson-Neyman technique was used to find the range of values of each moderator at which the slope of IDAS-II Distress on polyvictimization was significance. Simple slopes and the Johnson-Neyman technique were analyzed in R using the package `interactions` (Long, 2021).

**Results**

**Descriptive Statistics and Correlations**

Data met the assumptions of homoskedasticity, linearity, and independence of residuals, for the use of moderated multiple linear regression and fell within an acceptable range for of non-normality for the distribution of residuals. Polyvictimization indicated a slight positive skew (skewness = 0.46, M = 1.75, SD = 1.56. Overall, most respondents indicated (50.9%) having experienced two or more types of CM. The most reported types of CM experienced were emotional abuse (n =207, 50.6%) and emotional neglect (n = 196, 47.8%). More detailed descriptive statistics of CM and polyvictimization in the sample are presented in Table 2. As indicated by Person correlations, the PID-5 subscales of the personality trait domains of Negative Affectivity (r = .62), Detachment (r = .59), Psychoticism (r = .51), Antagonism (r = .36), and Disinhibition (r = .38) were all significantly correlated with IDAS-II Distress at the p < .001 level. Meng’s Z did not identify a significant difference between the strengths of the correlations of polyvictimization and severity of childhood maltreatment with IDAS-II Distress (z = - 0.39, p
> .05). More detailed descriptive statistics and a full list of correlation coefficients are presented in Table 3.

**Moderation of Polyvictimization and Distress**

The multiple regression model accounted for 54.82% of the variance in IDAS-II Distress with an adjusted $R^2$ of .53 ($F[12, 280] = 28.31, p < .0001$). As indicated by a Wald test, the addition of the individual interaction terms in the model of polyvictimization with all five personality domains significantly increased the total IDAS-II Distress variance accounted for ($ΔR^2 = .03, \chi^2[5, 280] = 17.54, p < .01$). However, only the direct effects from Negative Affectivity ($b = 2.52, t = 4.53, SE = 0.56, p < .0001$), Psychoticism ($b = 1.4, t = 2.17, SE = 0.65, p < .05$), and Antagonism ($b = 2.67, t = 3.21, SE = 0.83, p < .01$) to IDAS-II Distress remained significant in the full model. Additionally, the polyvictimization with Antagonism interaction significantly accounted for variation in IDAS-II Distress ($b = -1.04, t = -3.18, SE = 0.33, p < .01$).

Simple slopes analyses of the interaction of Antagonism and polyvictimization indicated that the slope of IDAS-II Distress on polyvictimization was positive and significant and at the minimum score of 5 for Antagonism ($b = 4.77, SE = 0.94, t = 5.05, p < .001$) and the mean score of 7.24 ($b = 2.45, SE = 0.68, t = 3.62, p < .001$) but not at the one standard deviation above the mean ($b = -0.01, SE = 1.03, t = -0.01, p > .05$). Johnson-Neyman technique indicated that the slope of IDAS-II Distress on polyvictimization was significant when scores on Antagonism were outside the range of 8.17 and 13.6. Interestingly, when the score Antagonism was set at 8.16 the slope was significant and positive ($b = 1.5, SE = 0.76, t = 1.98, p < .05$) and significant and negative when the score of Antagonism was set at 13.61 ($b = -4.14, SE = 2.1, t = -1.97, p < .05$).
Discussion

The current study aimed 1) to understand the strengths of the relationships between AMPD personality trait domains, polyvictimization, and IDAS-II Distress; 2) to investigate whether a score of polyvictimization had a stronger relationship with IDAS-II Distress than an overall score of CM severity; 3) whether personality trait domains affect the relationship between childhood polyvictimization and subsequent adulthood IDAS-II Distress. Prior research has found positive correlations between distress and personality domains of the AMPD (Anderson et al., 2016; Bach et al., 2022; Cox et al., 2023), polyvictimization as more predictive of distress than single type maltreatment severity (Kisely et al., 2018), and that personality has played a dynamic role between polyvictimization and IDAS-II Distress (Bach et al., 2022, Veith et al., 2017) The current study hypothesized that all trait domains of the AMPD and polyvictimization would significantly correlate with IDAS-II Distress, polyvictimization would be more closely related to IDAS-II Distress than CM severity, and that Negative Affectivity, Detachment, and Psychoticism would act as moderators increasing the positive relationship between polyvictimization and IDAS-II Distress. Supporting the first hypothesis, Pearson correlations indicated that all personality trait domains of Negative Affectivity, Detachment, Psychoticism, Antagonism, and Disinhibition as well as polyvictimization were positively related to IDAS-II Distress.

Support for the second hypothesis was not found. CM severity and polyvictimization did not significantly differ on correlations with IDAS-II Distress. Finally, results of the linear regression model of moderation did not support the hypothesized moderators but did reveal the moderating effect of Antagonism, which reduced the impact of polyvictimization on IDAS-II Distress. In the absence of the hypothesized moderation effects, the significant and positive
association between polyvictimization and IDAS-II Distress attests to the ubiquity of the impact of polyvictimization on IDAS-II Distress across various levels of Detachment and Psychoticism. Importantly, high Negative Affectivity significantly predicted IDAS-II Distress in the full moderation model, suggesting the influence of Negative Affectivity on IDAS-II Distress is robust enough to manifest even in the absence of multiple types of CM, indicating its central role in emotional well-being.

The attenuating effect of Antagonism on the relationship between polyvictimization and IDAS-II Distress may reflect a protective action of Antagonism against IDAS-II Distress. Our findings offer support to the potential buffering effect of Antagonism on distress (Hart et al., 2024), as well as previous research that has found positive associations for resilience among constructs related to Antagonism in undergraduate samples and among those with histories of traumatic events (e.g., narcissism; Ng et al., 2014; Sękowski et al., 2021; Szab´o et al., 2022). Current literature has espoused various roles of Antagonism as a buffer against distress regardless of trauma history or even as a direct contributor to resilience in the wake of traumatic events (Cai & Luo, 2018; Hart et al., 2024; Ng et al., 2014).

The attenuating effect of Antagonism in the current study may expand these findings to histories of household dysfunction (i.e., polyvictimization) or current dysfunction related to polyvictimization. However, the significant negative association between polyvictimization and IDAS-II Distress among those high on Antagonism may point to an effect beyond buffering. The moderating role of Antagonism in our study lends support to previous findings of positive change following trauma among those high on Antagonism (Lyons et al., 2019). Specific to the characterization of polyvictimization as an environmental process, there is potential that our findings represent polyvictimization as a reinforcer for Antagonism as a protective factor or
contributor to positive change, which has been found in previous student samples (Hart et al., 2024; Lyons et al., 2019). In other words, polyvictimization places an environmental demand on the individual to be resilient; in response, the expression or presentation of high trait Antagonism is altered to promote resilience and reduce IDAS-II Distress. When polyvictimization is mitigated through the transition to college, Antagonism may exhibit a protective factor against IDAS-II Distress, particularly in an environment with a respective reduction in CM.

For example, students who have experienced polyvictimization and are high on Antagonism, may have perceived childhood maltreatment as less stressful, facilitating continued pursuit of academic achievement (i.e., antagonistic attention seeking; APA, 2022; Miller et al., 2022) while enabled by higher callousness to utilize deceit and manipulation to achieve goals (Spencer et al., 2017). Importantly, previous research also suggests that reliance on Antagonism is reinforced in achievement-oriented environments when the desired outcome is perceived as a direct result of their actions towards social dominance (Sheldon et al., 2020). In total, the reinforcement of Antagonism in the academic environment of the sample may have implications beyond a reduction in IDAS-II Distress in which adaptive mechanism of Antagonism are amplified by polyvictimization.

Alternatively, the bi-directional interaction of Antagonism and polyvictimization may also implicate Antagonism as a risk factor for revictimization. The reduction of IDAS-II Distress found in our research for the interaction between Antagonisms and polyvictimization, may be revealing a potential pathway to revictimization through antagonistic features such as an indifference to environmental stressors (i.e., polyvictimization), loss of social resources, or cognitive processes such as disavowal of one’s needs or self-deception (Levi & Bachar, 2019;
Van Buren et al., 2015; Lyons et al., 2019). In sum, the protective and diathetic roles of Antagonism are not mutually exclusive.

The seemingly paradoxical roles of Antagonism are contextualized by models seeking to understand narcissism that support a three-factor structure consisting of Grandiose Narcissism, Antagonism, and Vulnerable Narcissism (Crowe et al., 2019; Miller et al., 2011; Miller et al., 2021; Krizan & Herlache, 2017). Repeatedly the core of Narcissism has been evidenced as Antagonism (i.e., self-importance), which shares elements of grandiose narcissism (i.e., agentic extraversion) and vulnerable narcissism (i.e., narcissistic neuroticism) (Back 2018; Miller et al., 2021; Rogoza et al., 2022). Grandiose stands in contrast to vulnerable narcissism as characteristically more adaptive and related to Antagonism as measured by the PID-5 (Cai & Luo, 2018; Hopwood et al., 2013), whereas vulnerable narcissism has been strongly related to overall psychopathology, avoidant coping, and Negative Affectivity (Back, 2018; Fernie et al., 2016; Miller et al. 2013; Miller et al. 2017; Ng et al. 2014). In congruence, the interaction of Antagonism and polyvictimization in our model may be representative of adaptive grandiose narcissism with our inclusion of Negative Affectivity. In our non-clinical sample, significant variance in IDAS-II Distress was accounted for by Negative Affectivity leaving the aspects of grandiose narcissism that are shared with Antagonism to account for unique variance in IDAS-II Distress.

The adaptive potential of Antagonism lends to previous literature suggesting that prematurely pathologizing Antagonism among treatment seeking individuals may be more detrimental than beneficial (Miller et al., 2022). Consequently, our model supports the heterogeneity of Antagonism in the wake of polyvictimization and the potential for the adaptive aspects of Antagonism as avenues to therapeutic alliance and positive change. Antagonism in the
context of polyvictimization and adaptation may contribute to the growing dialectic in the
treatment of personality disorders as a traumatic sequela (Bach et al., 2022; Miller et al., 2022).

Limitations and Future Directions

While the current study highlights the important role of personality in developmental
cascade from polyvictimization to adulthood distress, multiple limitations warrant review. Our
reliance on a cross-sectional design limits the ability to draw causal or temporal conclusions
regarding our findings. Furthermore, reliance on a non-clinical sample and measuring only one
of the two diagnostic criteria (i.e., Criterion B) of the AMPD did not allow for insight into the
potential functionality (i.e., Criterion A) of personality trait domains. Other measurement
considerations include, the IDAS-II Distress variable used in the model which was incongruent
with the dimension of Distress as defined by the IDAS-II. The IDAS-II Distress variable used in
the model consisted of four of the 12 subscales in the dimension of Distress as defined by the
IDAS-II and one of the two subscales from the IDAS-II dimension of Positive Mood (i.e., well-
being).

Future research may build upon the findings of the current study by exploring the
association of distress on the three-way interaction of Criterion A, Criterion B, and
polyvictimization or by using longitudinal designs to examine the possible temporal or causal
nature of the polyvictimization-Antagonism interaction and distress. Generalization of our
findings to clinical populations in future research may contribute to the implications Antagonism
may have on resilience to polyvictimization or resistance to change in interventions targeting
posttraumatic stress symptoms. The potential for adaptive Antagonism, a trait which has been
characterized as unilaterally pathological and relatively immutable, offers auspicious insight for
future research and emphasizes the pervasive impact of polyvictimization.
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### Table 1

**Sociodemographic Characteristics of the Sample**

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<td>American or Alaskan Native</td>
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<td>1.9</td>
</tr>
<tr>
<td>Asian or South-Asian</td>
<td>31</td>
<td>6.6</td>
</tr>
<tr>
<td>Black or African American</td>
<td>115</td>
<td>24.6</td>
</tr>
<tr>
<td>Hawaiian or Pacific Islander</td>
<td>1</td>
<td>0.2</td>
</tr>
<tr>
<td>White</td>
<td>218</td>
<td>46.7</td>
</tr>
</tbody>
</table>

*Note. N = 467. Participants were on average 19.1 years old (SD = 2.2)*
Table 2

Counts and frequency of childhood maltreatment

<table>
<thead>
<tr>
<th>Variable</th>
<th>Full Sample</th>
<th></th>
<th>Male</th>
<th></th>
<th>Female</th>
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</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>n</td>
<td>%</td>
<td>n</td>
<td>%</td>
</tr>
<tr>
<td>Types of CM</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Emotional Abuse</td>
<td>207</td>
<td>50.6</td>
<td>55</td>
<td>43.7</td>
<td>141</td>
<td>52</td>
</tr>
<tr>
<td>Physical Abuse</td>
<td>106</td>
<td>25.8</td>
<td>29</td>
<td>22.8</td>
<td>71</td>
<td>26</td>
</tr>
<tr>
<td>Sexual Abuse</td>
<td>81</td>
<td>20.1</td>
<td>8</td>
<td>6.3</td>
<td>69</td>
<td>26</td>
</tr>
<tr>
<td>Emotional Neglect</td>
<td>196</td>
<td>47.8</td>
<td>57</td>
<td>45.6</td>
<td>131</td>
<td>48.2</td>
</tr>
<tr>
<td>Physical Neglect</td>
<td>147</td>
<td>34.9</td>
<td>50</td>
<td>38.8</td>
<td>91</td>
<td>32.6</td>
</tr>
<tr>
<td>Counts of CM</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>0</td>
<td>113</td>
<td>30</td>
<td>47</td>
<td>38.8</td>
<td>65</td>
<td>26.4</td>
</tr>
<tr>
<td>1</td>
<td>72</td>
<td>19.1</td>
<td>15</td>
<td>12.4</td>
<td>56</td>
<td>22.8</td>
</tr>
<tr>
<td>2</td>
<td>70</td>
<td>18.6</td>
<td>23</td>
<td>19</td>
<td>45</td>
<td>18.3</td>
</tr>
<tr>
<td>3</td>
<td>63</td>
<td>16.7</td>
<td>21</td>
<td>17.4</td>
<td>40</td>
<td>16.3</td>
</tr>
<tr>
<td>4</td>
<td>41</td>
<td>10.9</td>
<td>12</td>
<td>9.9</td>
<td>25</td>
<td>10.2</td>
</tr>
<tr>
<td>5</td>
<td>18</td>
<td>4.8</td>
<td>3</td>
<td>2.5</td>
<td>25</td>
<td>6.1</td>
</tr>
</tbody>
</table>

Note. CM = Childhood Maltreatment. The total responses available for each variable were used to calculate percentages.
Table 3

Correlations of Distress, Personality, and Polyvictimization

<table>
<thead>
<tr>
<th>Variable</th>
<th>n</th>
<th>M</th>
<th>SD</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. IDAS-II Distress</td>
<td>395</td>
<td>79.53</td>
<td>23.16</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Negative Affect</td>
<td>431</td>
<td>11.61</td>
<td>3.87</td>
<td>.62</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Detachment</td>
<td>431</td>
<td>9.12</td>
<td>3.01</td>
<td>.51</td>
<td>.46</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Psychoticism</td>
<td>431</td>
<td>9.69</td>
<td>3.6</td>
<td>.59</td>
<td>.61</td>
<td>.58</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Antagonism</td>
<td>431</td>
<td>7.33</td>
<td>2.47</td>
<td>.36</td>
<td>.39</td>
<td>.41</td>
<td>.47</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Disinhibition</td>
<td>431</td>
<td>8.36</td>
<td>3.01</td>
<td>.38</td>
<td>.48</td>
<td>.44</td>
<td>.56</td>
<td>.46</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Polyvictimization</td>
<td>374</td>
<td>1.75</td>
<td>1.56</td>
<td>.43</td>
<td>.27</td>
<td>.44</td>
<td>.42</td>
<td>.29</td>
<td>.26</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. CTQ Total Score</td>
<td>374</td>
<td>40.32</td>
<td>14.4</td>
<td>.44</td>
<td>.30</td>
<td>.43</td>
<td>.42</td>
<td>.28</td>
<td>.27</td>
<td>.88</td>
<td></td>
</tr>
</tbody>
</table>

Note. CTQ = Childhood Trauma Questionnaire; IDAS II = Inventory of Depression and Anxiety Symptoms II; SD = Standard Deviation. All correlation coefficients are significant at $p < .001$. 
Table 4

_IDAS-II Distress Regressed on Interactions of Polyvictimization with Personality_

<table>
<thead>
<tr>
<th>Effect</th>
<th>Estimate</th>
<th>SE</th>
<th>95% CI</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>LL</td>
<td>UL</td>
</tr>
<tr>
<td>Intercept</td>
<td>9.87</td>
<td>6.25</td>
<td>-2.43</td>
<td>22.17</td>
</tr>
<tr>
<td>Polyvictimization (PV)</td>
<td>9.51</td>
<td>2.52</td>
<td>4.56</td>
<td>14.47</td>
</tr>
<tr>
<td>Negative Affectivity (NA)</td>
<td>2.52</td>
<td>0.56</td>
<td>1.43</td>
<td>3.61</td>
</tr>
<tr>
<td>Detachment (DET)</td>
<td>0.64</td>
<td>0.71</td>
<td>-0.78</td>
<td>22.05</td>
</tr>
<tr>
<td>Psychoticism (PSY)</td>
<td>1.4</td>
<td>0.65</td>
<td>0.13</td>
<td>2.68</td>
</tr>
<tr>
<td>Antagonism (ANT)</td>
<td>2.67</td>
<td>0.83</td>
<td>1.04</td>
<td>4.31</td>
</tr>
<tr>
<td>Disinhibition (DIS)</td>
<td>-0.23</td>
<td>0.77</td>
<td>-1.74</td>
<td>1.28</td>
</tr>
<tr>
<td>Gender</td>
<td>0.04</td>
<td>2.09</td>
<td>-4.08</td>
<td>4.16</td>
</tr>
<tr>
<td>PV x NA</td>
<td>0.03</td>
<td>0.25</td>
<td>-0.46</td>
<td>0.52</td>
</tr>
<tr>
<td>PV x DET</td>
<td>0.24</td>
<td>0.29</td>
<td>-0.33</td>
<td>0.81</td>
</tr>
<tr>
<td>PV x PSY</td>
<td>-0.09</td>
<td>0.28</td>
<td>-0.64</td>
<td>0.45</td>
</tr>
<tr>
<td>PV x ANT</td>
<td>-1.04</td>
<td>0.33</td>
<td>-1.68</td>
<td>-0.39</td>
</tr>
<tr>
<td>PV x DIS</td>
<td>-0.15</td>
<td>0.3</td>
<td>-0.74</td>
<td>0.45</td>
</tr>
</tbody>
</table>

Note. SE = Standard Error; CI = Confidence Interval; LL = Lower Limit; UL = Upper Limit; Reported Distress was used as the dependent variable. Multiple $R^2 = 0.55$. Adjusted $R^2 = 0.53$ ($F \ [12, 280] = 38.1, p < .0001$).
Figure 1

Polyvictimization on IDAS-II Distress at Different Levels of Antagonism

Note. Regression lines of IDAS-II Distress on polyvictimization are shown at three levels of Antagonism. Min = minimum score on Antagonism (5); Mean = mean score on Antagonism (7.24); + 1 SD = one standard deviation above the mean score on Antagonism (9.61).

\(^a\) The minimum score on Antagonism was used in place of one standard deviation below the mean (i.e., 4.86) to reflect observed values.