Repressive coping among British college women: A potential protective factor against body image concerns, drive for thinness, and bulimia symptoms

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A B S T R A C T

Repressive coping, as a means of preserving a positive self-image, has been widely explored in the context of dealing with self-evaluative cues. The current study extends this research by exploring whether repressive coping is associated with lower levels of body image concerns, drive for thinness, bulimic symptoms, and higher positive rational acceptance. A sample of 229 female college students was recruited in South London. Repressive coping was measured via the interaction between trait anxiety and defensiveness. The results of moderated regression analysis with simple slope analysis show that compared to non-repressors, repressors reported lower levels of body image concerns, drive for thinness, and bulimic symptoms while exhibiting a higher use of positive rational acceptance. These findings, in line with previous evidence, suggest that repressive coping may be adaptive particularly in the context of body image.

1. Introduction

Body image is a multidimensional construct that refers to the perceptions and attitudes of individuals toward their own physical appearance (Cash & Pruzinsky, 2002; Jakatdar, Cash, & Engle, 2006). The nomological network that describes the domain of body image is broad. It encompasses a wide range of cultural, familial, and interpersonal experiences as well as actual physical characteristics (Cash, Jakatdar, & Williams, 2004). The burden associated with body image concerns includes impairments in psychological well-being and occupational, social, and family functioning. For instance, empirical evidence suggests that body image concerns are associated with depression (Jackson et al., 2014; Noles, Cash, & Winstead, 1985; Tiggemann & McGill, 2004), social anxiety (Aderka et al., 2014; Cash & Fleming, 2002), disordered eating symptoms (Barnett & Sharp, 2016; Stice & Shaw, 2002; van den Berg et al., 2007), impaired sexual functioning (Milhausen, Buchholz, Opperman, & Benson, 2015), substance abuse (van den Berg et al., 2007), poor quality of life (Cash et al., 2004; Duarte, Ferreira, Trindade, & Pinto-Gouveia, 2015), poor academic performance (Cash & Fleming, 2002; Kiefer, Sekaquaptewa, & Barczyk, 2006), and low self-esteem (Powell & Hendricks, 1999; Zeigler-Hill & Noser, 2015). On one

hand, these findings highlight that body image concerns impair overall well-being and health (Grogan, 2006; Jackson et al., 2014). Yet on the other hand, empirical evidence (e.g., Cash, 2002) indicates that people react in markedly different ways to body image concerns – while some people struggle with their body image and exhibit physical or psychological issues, others suffer less intensely or not at all (Hughes & Gullone, 2011).

The cognitive behavioral perspective of body image and its disturbances (Cash, 2002; Cash & Smolak, 2011; Gusella, Clark, & van Roosmalen, 2004) describes body image concerns as self-evaluative, affect-laden, threatening information. Hence, it is plausible that individual differences in reacting to body image concerns may be related to different coping mechanisms in dealing with self-related information. Indeed, adaptive forms of coping may protect individuals from an overly critical evaluation of their body image and may decrease the likelihood that body image concerns place their health at risk (Hughes & Gullone, 2011; Smith-Jackson, Reel, & Thackeray, 2011). *Repressive coping* is a coping mechanism that has been widely explored in the context of dealing with self-evaluative cues. Freud (1915/1966) introduced the term "repression" as an ego-protecting defense mechanism and suggested that the main purpose of repression is anxiety avoidance. Psychological research on defense mechanisms has since shifted from Freud's notion and towards the concept of stress and stress coping (Somerfield & McCrae, 2000). In 1979,

Weinberger, Schwartz, and Davidson suggested a 2×2 classification of individuals varying in their anxiety and defensiveness. In their seminal work, Weinberger et al. defined "repressors" as individuals who report low levels of trait anxiety and high levels of defensiveness. Apart from repressors, Weinberger et al. defined three non-repressor groups: low anxious (low anxiety-low defensiveness), high anxious (high anxiety-low defensiveness), and defensive high anxious (high anxiety-high defensiveness; see Myers, 2010 for a review).

Four decades of research on repressive coping has concluded that repressive coping occurs primarily as a means of preserving a self-image that is dependent on maintaining a positive self-evaluation (Derakshan & Eysenck, 1999; Weinberger, 1990; Weinberger & Davidson, 1994) and is primarily motivated by the desire to protect self-integrity or self-worth (Sherman & Cohen, 2002). Hence, it would be beneficial to explore the role of repressive coping in the context of body image as a potential self-image threatening cue. It is important, however, to highlight that repressive coping is conceptually different from emotion dysregulation strategies such as emotional suppression (Gross & John, 2003). While the main function of emotional suppression is to inhibit the ongoing expressive component of both positive and negative emotion response tendencies (Gross & John, 2003), the main function of repressive coping is to preserve a positive self-image.

Previous research on repressive coping has established that the signature characteristic of repressors is that they use an avoidant style of processing self-related, affect-laden information (e.g., Bonanno & Singer, 1995; Cook, 1985; Myers & Brewin, 1995; Myers, Vetere, & Derakshan, 2004; Tomarken & Davidson, 1994). In a series of experiments, Derakshan, Feldman, Campbell, and Lipp (2002, 2003) found that repressors' avoidant style of information processing occurs automatically and at very early stages of processing—below the level of conscious awareness. Accordingly, repressors automatically direct their attention away from self-related threatening stimuli (such as a negative feedback) and the corresponding negative feelings. This assertion is further supported by experimental approaches using an emotional Stroop task that established that repressors exhibit a greater ability to avoid socially threatening words (Myers & McKenna, 1996) and shift their attention away from socially threatening cues during tasks measuring automatic biases of attention (Fox, 1993; Jansson, Lundh, & Oldenburg, 2005). Similarly, studies using both free and cued recall tasks have also established that repressors have memory deficits for negatively valenced autobiographical material both from childhood and adulthood (Davis, 1987, 1995; Derakshan & Eysenck, 1998; Myers & Brewin, 1995) and have a cognitive bias to invoke positive memories or experiences (e.g., Boden & Baumeister, 1997). Consistent with this notion, individual difference studies using self-report measures show that repressors answer health-related questions in an overly positive manner (Myers & Vetere, 1997), scoring high on adaptability and health, and low on negative affectivity, fear, anxiety, sadness, and hostility (e.g., Furnham, Petrides, & Spencer-Bowdage, 2002; Kreitler & Kreitler, 1991; Myers & Brewin, 1995; Myers & Vetere, 1997). Repressors appear to benefit from their capacity to divert attention away from their negative feelings and toward goal directed coping strategies and other self-preserving behaviors in confrontation with self-related stressful events (e.g., Langens & Moerth, 2003) and therefore "appear to be most adapted, relaxed, and happy" (Furnham et al., 2002, p. 121).

Taken together, the studies noted above suggest that repressors could be a potentially important group for research on body image concerns as a self-evaluative cue. Repressive coping potentially filters out autobiographical material, media images, and social messages that could threaten women's positive body image (e.g., focusing on deviations between their body and appearance ideals) and help them to internalize information that maintains or enhances a positive body image. This concept is similar to, and thus may help explain, the "a protective filter" construct in qualitative studies (Wood-Barcalow, Tylka, & Augustus-Horvath, 2010), whereby women use their protective filter to process and respond to information typically in a self-and body-preserving manner. This filter helps focus women's body investment on self-care and improving body functionality while preserving their positive body evaluation.

Repressors make up approximately 20% of the population (Myers & Vetere, 1997; Phipps & Srivastava, 1997), and therefore, exploring the link between repressive coping and body image concerns may provide important clues on the automatic process of coping with threats to body image. Understanding of both automatic and deliberate processing of body image-related cues are crucial to inform sound prevention programs in dealing with society's fast growing body image concerns (Dittmar, Halliwell, Banerjee, Gardarsdottir, & Jankovic, 2007). Therefore, the aim of the present study was to extend the literature on repressive coping and body image and explore the relationship between these phenomena.

In consideration of the evidence presented earlier, it is hypothesized that repressors will exhibit lower levels of body image concerns (H1), drive for thinness (H2) and bulimic symptoms (H3) due to their use of an avoidant style of processing adverse self-related affect laden information and their ability to maintain a positive self-image. Furthermore, it is hypothesized that repressors will display a more functional approach to dealing with threats to body image as indicated by higher levels of positive rational acceptance (H4), as positive rational acceptance comprises strategies emphasizing acceptance of the challenging event and positive self-care or rational self-talk about one's appearance (Cash, Santos, & Williams, 2005). In addition, considering repressors' tendency to automatically avoid threatening cues to self-worth, it expected that repressors display lower levels of appearance fixing behaviors (H5). Importantly, previous findings suggest that repressors do not differ from non-repressors on measures of deliberate avoidance (e.g., Bonanno, Keltner, Holen, & Horowitz, 1995; Myers et al., 2004). Therefore, the current study investigated the link between repressive coping and the conscious avoidance of situations and feelings related to body image, but no hypothesis was generated given these previously null findings.

2. Method

2.1. Participants and procedure

The project was approved by the institutional ethics board and was carried out in accordance with the Declaration of Helsinki principles. To my best knowledge, there is no published study on the link between repressive coping and body image concerns. Therefore, in order to establish the optimal sample size, an a priori power analysis was conducted based on past research that investigated the link between defensiveness (measured as social desirability), trait anxiety, and body image concerns. This research suggested that an expected percentage of explained variance in body image concerns, with trait anxiety, defensiveness, and trait anxiety × defensiveness interaction as predictors could range between .01 and .33, depending on how much trait anxiety and defensiveness covary (Brannan & Petrie, 2008; Levinson & Rodebaugh, 2012; Petrie, Galli, Greenleaf, Reel, & Carter, 2014). This range represents a small to medium effect size, based on Cohen's (1988) guidelines. Accordingly, at the .05 alpha level, a sample of $N = 176$ would be necessary to detect an effect of this size at a power level of .95 (Cohen, 1992; Shieh, 2009). Thus, the present sample of 229 was sufficient for this analysis.