



From competition to compassion: A caregiving approach to intervening with appearance comparisons

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ABSTRACT

This study used a novel intervention grounded in social mentalities theory to compare the effects of cultivating a caregiving versus competitive mentality when intervening with appearance comparisons. For 48 hours, 120 female undergraduates were randomly assigned to use one of three strategies whenever they made unfavorable appearance comparisons: cultivating compassion and loving-kindness toward the comparison target (Caregiving); comparing themselves favorably to the target in non-appearance domains of superiority (Competition); or distracting themselves (Control). Although there was no main effect of condition, trait social comparison orientation interacted with condition to predict outcomes. Among women engaging more frequently in social comparison, the Caregiving condition was more effective than the Competition condition at reducing body dissatisfaction, restrained eating, and body, eating, and exercise-related comparisons. Findings suggest that cultivating a compassion-focused, caregiving mentality when threatened by appearance comparisons could be beneficial to women who engage more frequently in social comparison.

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1. Introduction

To compare is human: indeed, “keeping up with the Joneses” has never been easier, with the advent of modern technology and the concurrent development of mass and social media. However, while comparing ourselves to others can sometimes be beneficial in non-appearance domains (Buunk, Collins, Taylor, Van Yperen, & Dakof, 1990; Collins, 1996; Helgeson & Taylor, 1993; Wood, Taylor, & Lichtman, 1985), little evidence suggests this is true for the domain of physical appearance. Current research suggests that a higher frequency of appearance comparisons is strongly linked with higher levels of body dissatisfaction and disordered eating (Murnen & Smolak, 2015; Myers & Crowther, 2009; O'Brien et al., 2009). Women in particular are much more likely than men to make unfavorable appearance comparisons (Morrison, Kalin, & Morrison, 2004) and to feel distressed and body-dissatisfied afterwards (Strahan, Wilson, Cressman, & Buote, 2006). Furthermore, women frequently continue to make appearance comparisons even when the practice becomes harmful to their body image (Strahan et al., 2006). Perhaps most worryingly, unfavorable appearance comparisons are more frequent and emotionally damaging to those

who are already high in body dissatisfaction and/or eating pathology (Groesz, Levine, & Murnen, 2002; Leahey, Crowther, & Ciesla, 2011; Leahey, Crowther, & Mickelson, 2007) and have been implicated in the maintenance of eating disorders (Blechert, Nickert, Caffier, & Tuschen-Caffier, 2009). In sum, unfavorable appearance comparisons seem to drive a cycle wherein women who are already unhappy with their bodies are made unhappier. How, then, do we intervene with these comparisons and alleviate the distress they cause?

Social comparison theory might provide some ideas. This theory postulates that individuals frequently compare themselves to others to determine their standing in various life domains (Festinger, 1954). In downward or favorable comparisons, the target is perceived to be inferior in the comparison domain, whereas in upward or unfavorable comparisons, the target is perceived to be superior. Downward comparisons tend to have positive effects on affect and self-esteem (Gibbons, 1986; Hakmiller, 1966; Lemyre & Smith, 1985; Morse & Gergen, 1970), and can make one feel better when threatened by others' perceived superiority (Wills, 1981) or when coping with distressing life events (Wood et al., 1985). Upward comparisons can provide useful information to guide self-evaluation in a given domain, and can serve as a source of motivation for self-improvement (Buunk et al., 1990; Collins, 1996; Helgeson & Taylor, 1993), but tend to have negative effects on affect and self-esteem (Morse & Gergen, 1970; Salovey & Rodin, 1984).

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Research on appearance comparisons, however, is largely at odds with the wider literature on social comparison theory. For example, although Festinger (1954) argued that individuals will stop making upward comparisons if they become generally unfavorable or detrimental to their self-image, Strahan et al. (2006) found that women continue to make upward appearance comparisons even when their self-views are threatened. Their findings also suggest that women tend to make more comparisons to irrelevant targets (e.g., models). This is again out of step with the broader social comparison literature, where it is suggested that people avoid making comparisons with irrelevant others due to the dearth of diagnostic information (Wood, 1989). Taken together, current research suggests that the framework of social comparison theory falls short in explaining the phenomenology of appearance comparisons, highlighting a need for new perspectives.

Empirical research on interventions for appearance comparisons further suggests a need for new theoretical perspectives. Social comparison theory might suggest that individuals who make frequent upward appearance comparisons should counteract the negative consequences of these comparisons by making more downward appearance comparisons. For example, women who typically compare themselves to more attractive others could focus on finding less attractive women with whom to compare themselves. They could also find other domains (e.g., intelligence, social skills) in which they are superior to their attractive comparison target. Indeed, these downward comparison strategies appear to be the most studied approach to date (e.g., Bailey & Ricciardelli, 2010; Lew, Mann, Myers, Taylor, & Bower, 2007). The research surrounding this downward comparison strategy is nevertheless mixed.

Consistent with what social comparison theory might predict, Lew et al. (2007) found that highly body-dissatisfied female undergraduates who, after viewing pictures of fashion models, made downward comparisons with them on non-appearance domains, experienced improved body and weight satisfaction, decreased appearance anxiety, and decreased desires to lose weight. Another study by van den Berg and Thompson (2007) further suggested that participants who viewed images of downward comparison targets in the appearance domain showed increases in body satisfaction and positive mood. Other studies, however, challenge the idea that downward appearance comparisons are universally protective. Rancourt, Schaefer, Bosson, and Thompson (2016) found that although these comparisons were positively associated with body satisfaction for Asian and Caucasian women, for Hispanic/Latina women, downward comparisons were as detrimental to eating behaviors and attitudes as upward comparisons. Similarly, in a “dating game” experiment, women presented with a thin peer “competitor” experienced a reduction in body satisfaction and confidence, while those presented with an oversized peer experienced no compensatory effects on body satisfaction and confidence (Lin & Kulik, 2002). Further, Lin and Soby (2016) found that women who frequently made downward appearance comparisons tended to show an increased drive for thinness and greater dietary restraint. In general, the social comparison theory-inspired strategy of encouraging downward appearance comparisons appears to have mixed success in lessening body dissatisfaction and eating pathology (Fitzsimmons-Craft, 2017; Leahey et al., 2011).

We further propose that even though downward comparisons may sometimes offer temporary emotional benefits, this practice is a competitively-motivated one that carries important costs for the comparer. Indeed, when making downward comparisons focused on one’s relative superiority in a given domain, whether appearance or other, individuals implicitly adopt a competitive orientation with those in their social environment. Such an orientation, when routinely adopted, can be harmful on physical, psychological, and social fronts. Consistent with this theory, Lin and Soby (2016) found

that those women who engaged in *both* upward and downward appearance comparisons endorsed more body image concerns and maladaptive behaviors relative to women who only made unidirectional comparisons (i.e., only upward or only downward). That is, the tendency to compare, no matter the direction, may be what is most toxic. This theory, together with current findings in the field point to a need for new theoretical viewpoints from which to approach the problem of damaging appearance comparisons.

1.1. Social mentalities theory: from competition to compassion

Social mentalities theory (Gilbert, 1989, 2000) may offer a promising perspective through which to understand and intervene with the maladaptive tendency to engage in unfavorable appearance comparisons. This evolutionary theory postulates that individuals can adopt various mentalities, or mindsets, in their interactions with others, each of which drives the formation of relationships that indirectly promote survival and reproduction. Each of these mindsets serves to organize our minds such that certain patterns of attention, thinking, feeling, and behaving are triggered. In turn, these patterns allow for the enactment of various evolutionarily important relationships, including relationships based on care-giving/care-seeking, co-operation and reciprocity, dominance/submissiveness, and sex (Gilbert, 2000, 2005). From a particular social mentality, “the self” is construed in one way (e.g., caregiving, dominant) while “the other” is construed in another (e.g., care-seeking, subordinate). As a result, one’s approach and reaction to interactions with others depend upon the social mentality adopted at the time. For example, seeing another person suffer might be a pleasurable experience if one’s current mindset is oriented towards competing with them, but a distressing one if one’s current mindset is oriented towards caring for them (Gilbert, 2014).

The mentality that is most relevant to social comparisons is the social ranking or *competitive mentality* (Gilbert, 2000). This mentality orients individuals towards appraising their rank or status relative to others, and to behaving accordingly. For example, an individual might dominate versus submit if s/he believes s/he is higher versus lower rank than a peer (Gilbert, 2000). When this competitive mindset is active, we see others as competitors for desired, limited resources (e.g., food, mates), and our primary cognitive concern is to compare ourselves to them to determine who is superior or inferior. This concern with social rank is elevated when individuals feel insecure in their social environments (Gilbert, McEwan, Bellew, Mills, & Gale, 2009)—as many body-dissatisfied women do (Pinto-Gouveia, Ferreira, & Duarte, 2014).

Therefore, rather than intervening with upward comparisons by encouraging downward comparisons and propagating a competitive orientation, there may be people for whom it is more beneficial to shift to a different mindset altogether. Specifically, we expect that individuals who are highly prone to comparing themselves with others and likely to be over-reliant upon the competitive mentality may need to practice adopting a different mindset in their interactions with others – one that can reduce a sense of competitiveness and increase a sense of social connectedness. To that end, Gilbert’s (2005) conceptualization of a caregiving, compassion-based mindset may be a promising mentality for such individuals to work on adopting. In line with work by Bowlby, 1982, Gilbert (2005) suggests that humans are evolutionarily hard-wired to be caring and compassionate, arising from our motivation to take care of our offspring. When we adopt a caregiving mentality, we are oriented towards supporting and connecting with others rather than trying to establish our relative rank. We see others as fellow human beings who, like ourselves, experience suffering and desires to be happy (Gilbert, 2005, 2010).

A large body of research supports the benefits of adopting a caregiving mentality. The Buddhist tradition of loving-kindness

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