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Maladaptive perfectionism, body image satisfaction, and disordered eating behaviors among U.S. college women: The mediating role of self-compassion



Michael D. Barnett *, Kendall J. Sharp

University of North Texas, Department of Psychology, 1155 Union Circle #311280, Denton, TX 76203, United States

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ABSTRACT

Maladaptive perfectionism has been linked with body image dissatisfaction and disordered eating behaviors. From the standpoint of social mentality theory, this relationship may be the result of an overactive threat system and/or an underactive self-soothing system. Self-compassion represents the activities of the self-soothing system. This article describes two studies that were conducted in order to investigate whether self-compassion mediates these relationships in a large sample of U.S. college women. Study 1 found that self-compassion mediates the relationship between maladaptive perfectionism and body image dissatisfaction. Study 2 replicated the results of Study 1 but found that self-compassion did not mediate the relationship between maladaptive perfectionism and bisordered eating. Results from both studies suggest that the self-judgment component of self-compassion was the most consistent mediator, suggesting that maladaptive perfectionism impacts body image satisfaction and disordered eating through negative self-evaluations.

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1. Introduction

The inverse relationship between perfectionism and body image satisfaction among women has been well-documented (Downey & Chang, 2007; Siegling & Delaney, 2013; Welch, Miller, Ghaderi, & Vaillancourt, 2009). The link between perfectionism and low body image satisfaction has been found in disordered eating patients and female athletes, but body image dissatisfaction and eating-disordered behaviors exist in non-clinical samples of women as well (Downey & Chang, 2007; Welch et al., 2009; Williamson et al., 1995). This relationship has also been found cross-culturally (Chan, Ku, & Owens, 2010; Choo & Chan, 2013). This widespread low body image satisfaction may be due to the constant media exposure in our society today. Wolf (1991) argues that American culture is continually exposed to idealized female images heavily characterized by youth and slimness, a standard ideal that is unrealistic and impossible to achieve for most women (Thompson, Heinberg, Altabe & Tantleff-Dunn, 1999; Thompson, Coovert & Stormer, 1999; Yamamiya, Cash, Melnyk, Posavac, & Posavac, 2005). Body image dissatisfaction is linked to this thin-ideal internalization (Thompson, Heinberg, Altabe & Tantleff-Dunn, 1999a; Thompson, Coovert & Stormer, 1999b; Thompson & Stice, 2001). The purpose of this study was to investigate the role of self-compassion in the relationship between perfectionism and body image satisfaction among U.S. collegeaged women. Increased understanding of the cognitive processes that mediate this relationship may lead to insights helpful for designing new cognitive interventions.

1.1. Maladaptive perfectionism

Perfectionism has often been conceptualized as having normal and neurotic, positive and negative, or adaptive and maladaptive forms (Lo & Abbott, 2013; Slade & Owens, 1998; Slaney, Rice, Mobley, Trippi, & Ashby, 2001). Consistent with previous research utilizing the Almost Perfect Scale - Revised Short Form (Slaney et al., 2001), we chose to conceptualize perfectionism as having both adaptive and maladaptive forms (Ashby & Rice, 2011; Chester, Merwin, & DeWall, 2014; Park & Jeong, 2016; Paulson & Rutledge, 2014). Adaptive perfectionism is characterized by setting high goals but being satisfied with one's performance, whereas maladaptive perfectionism is characterized by setting unrealistically high goals and resulting dissatisfaction (Enns & Cox, 2002; Slaney et al., 2001). This study operationalized maladaptive perfectionism as the discrepancy between one's high standards and their actual performance (Slaney et al., 2001) because it most closely matches the discrepancy between ideal body image and an individual's actual body image satisfaction. Maladaptive perfectionism has been associated with high levels of perceived stress (Rice & Van Arsdale, 2010) and

^{*} Corresponding author.

E-mail addresses: Michael.Barnett@unt.edu (M.D. Barnett), KendallSharp@my.unt.edu (K.J. Sharp).

neuroticism (Hill, McIntire, & Bacharach, 1997; Parker & Stumpf, 1995; Stumpf & Parker, 2000). In this study, we sought to explore whether maladaptive perfectionism has an effect on body image satisfaction through self-compassion.

1.2. Self-compassion and social mentality theory

Self-compassion can be defined as "nonjudgmental understanding of one's pain, inadequacies, and failures, so that one's experience is seen as part of the larger human experience" (Neff, 2003a, p. 87). Social mentality theory, based on concepts from evolutionary biology, neurobiology, and attachment theory, suggests that social processing systems can produce internal signal-responses that allow for self-soothing (Gilbert & Irons, 2005). This theory posits that self-compassion deactivates the threat system and activates the self-soothing system (Gilbert, 1989). The threat system is associated with feelings of insecurity and defensiveness while the self-soothing system is associated with feelings of secure attachment and safeness. The self-soothing system has been posited to help individuals feel emotionally calm and cared for. This theory suggests that self-compassion is related to well-being because it creates feelings of safeness and security (Gilbert, 1989; Gilbert & Irons, 2005; Neff, 2003b, 2011). These self-soothing aspects of self-compassion have been theorized to increase successful coping in one's environment (Gilbert, 1989). Self-compassion is negatively associated with neurotic perfectionism (Neff, 2003b) and has been found to inhibit the effects of negative body image and perfectionism in female undergraduate students (Wasylkiw, MacKinnon, & MacLellan, 2012), perhaps because individuals high in self-compassion are less likely to compare themselves to others (Neff, 2011).

Women have reported lower levels of self-compassion compared to men, and are more likely to engage in self-judgment, feel isolated when confronted with painful situations, and to be more over-identified and less mindful of their negative emotions (Neff, 2003b; Neff, Hsieh, & Dejitterat, 2005). These findings are consistent with the idea that women tend to have higher levels of rumination (Leadbeater, Kuperminc, Blatt, & Hertzog, 1999), depression (Nolen-Hoeksema, 1990; Nolen-Hoeksema, Larson, & Grayson, 1999), anxiety (for review see, McLean & Anderson, 2009), and negative affect (Fujita, Diener, & Sandvik, 1991). These lower levels of self-compassion may contribute to lower levels of body image satisfaction experienced by women (Siegling & Delaney, 2013).

According to social mentality theory, the threat system is associated with self-criticism, and the soothing system is associated with selfacceptance (Gilbert & Irons, 2005; Neff, 2011). The self-critical aspects of maladaptive perfectionism closely relate to the threat system, while the self-accepting and self-kindness aspects of self-compassion represent the soothing system. Consistent with previous research, these traits will activate cognitive appraisals and affective responses consistent with their associated system (Gilbert & Irons, 2005). It has been posited that individuals who are high in self-criticism are often automatically self-critical and may be less rehearsed in soothing the self (Gilbert & Irons, 2005). This suggests that personality traits, such as maladaptive perfectionism, may impact the way individuals relate to the self. Increased levels of self-judgment and maladaptive perfectionism will manifest through the threat system, which activates more negative cognitive appraisals and affective responses. Conversely, higher levels of self-compassion will manifest through the soothing system, which will activate more positive cognitive appraisals and create a kind and accepting view of the self. These cognitive appraisals and affective responses may effect the individual's overall body image satisfaction. We posit that increased levels of maladaptive perfectionism could lead to lower levels of self-compassion, which would effect an individual's overall body image satisfaction.

Previous research has linked self-compassion and body image (Breines, Toole, Tu, & Chen, 2014; Wasylkiw et al., 2012) and has examined self-compassion as a mediator in body image and psychological

functioning (Duarte, Ferreira, Trindade & Pinto-Gouveia, 2015). We sought to explore this relationship but with a larger and more diverse sample. Wasylkiw et al. (2012) found that self-compassion mediated the relationship between body preoccupation and depressive symptoms among female undergraduate students. Breines et al. (2014) found that body shame mediated the relationship between self-compassion and disordered eating behaviors among college women. We sought to expand upon this research by considering the role of maladaptive perfectionism along with self-compassion and body image. In Study 1, we examined this effect using maladaptive perfectionism and body image satisfaction. In Study 2, we replicated the analyses conducted in Study 1, and examined the effect of self-compassion on disordered eating behavior.

1.2.1. Study 1

The purpose of this study was to examine the relationship between maladaptive perfectionism, self-compassion, and body image satisfaction among U.S. college women. Consistent with the theoretical model described above, it was hypothesized that: (H_1) total self-compassion will mediate the relationship between maladaptive perfectionism and body image satisfaction. More specifically, and consistent with previous research into subfacets of self-compassion and body image (Wasylkiw et al., 2012), it was hypothesized that maladaptive perfectionism would have an indirect effect on body image through (H_2) self-kindness and (H_3) self-judgment.

2. Method

2.1. Participants

Participants consisted of 580 female undergraduate students age 18–30 at a large public university in the southern U.S. Participants were recruited through the department research website. Demographic information is provided in Table 1.

2.2. Procedure

The study was approved by the university IRB. Informed consent was obtained from all participants. Participants completed the survey online and received course credit for participating.

Table 1
Demographic Characteristics.

Characteristic	Study 1		Study 2	
	n (580)	%	n (398)	%
Age				
18–21	437	75.3	293	73.6
22–25	123	21.3	92	23.1
26–30	20	3.4	13	3.3
Ethnicity				
White	308	53.1	175	44.0
Black/African-American	94	16.2	76	19.1
Hispanic	113	19.5	98	24.6
Asian/Pacific Islander	46	7.9	32	8.0
Native American	1	0.2	3	0.8
Other	18	3.1	14	3.5
Academic classification				
Freshman	148	25.5	98	24.6
Sophomore	133	22.9	84	21.1
Junior	172	29.7	100	25.1
Senior	126	21.7	115	28.9
Other	1	0.2	1	0.3

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