



The association between self-consciousness about appearance and psychological adjustment among newly diagnosed breast cancer patients and survivors: The moderating role of appearance investment

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ABSTRACT

This study examined the moderating role of two facets of appearance investment (self-evaluative salience (SES) and motivational salience (MS)) in the relationship between self-consciousness about appearance and psychological adjustment (depression, anxiety and psychological quality of life (QoL)) in a sample of 134 breast cancer patients (68 newly diagnosed patients and 66 survivors). No significant differences were found between groups on body image variables. Among survivors, the associations between self-consciousness about appearance and the outcome variables were only significant at high (depression, psychological QoL) levels and at moderate (psychological QoL) levels of SES. Self-consciousness about appearance contributed to poor adjustment in both groups. This study demonstrates that appearance investment plays a key role in patients' adjustment and highlights the SES–MS distinction. SES seems to be a vulnerability factor for poor adjustment, and MS seems to be a protective factor that helps women cope with changes in appearance

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Introduction

Breast cancer is the most frequent type of cancer among women worldwide. The World Health Organization's International Agency for Research on Cancer estimated that 1.38 million new cases were diagnosed in 2008, although the mortality rates were much lower (Ferlay et al., 2010). The high prevalence of cases, as well as the increasing number of survivors, reinforces the need to study the psychological adjustment of these patients and the factors that can influence this adjustment. A distressing but often unrecognized aspect of breast cancer is the associated change in physical appearance, such as breast loss or chemotherapy-induced alopecia due to surgery and adjuvant treatments (White & Hood, 2011). These changes in appearance may lead to a general dissatisfaction with the altered body or to high levels of self-consciousness about appearance. This dissatisfaction or self-consciousness can, in turn, lead to adjustment difficulties (Moreira & Canavarro, 2010).

In recent years, increasing attention has been paid to understanding body image issues among cancer patients and, in particular, among breast cancer patients (e.g., Fobair et al., 2006;

Zimmermann, Scott, & Heinrichs, 2010). A few studies have provided empirical evidence that a more positive body image (e.g., higher satisfaction with appearance and less self-consciousness about appearance) is associated with greater psychological adjustment (Carver et al., 1998; Pikler & Winterowd, 2003). However, this association must continue to be investigated because the extant studies have important limitations. For instance, most of the studies failed to consider the contribution of moderating variables (e.g., the importance an individual places on his/her physical appearance), and they often did not take the disease phase of patients into account, meaning that study samples included patients who were experiencing very different challenges and difficulties. In fact, the influence of body image on women's adjustment to breast cancer may depend on a number of factors and differ across the different phases of cancer (e.g., diagnosis, adjuvant treatment, and survivorship). Therefore, this study intends to investigate the association between a specific body image emotion (self-consciousness about appearance) and the psychological adjustment of two different groups of patients (newly diagnosed patients and breast cancer survivors), as well as the moderating role of appearance investment on this association.

Self-consciousness about appearance describes the general uneasiness and inhibition regarding one's appearance that may arise when an individual has experienced a real or perceived change in appearance due to, for instance, treatment of a disease such as breast cancer. Carr, Harris, and James (2000) note that self-consciousness about appearance "clearly has features in common

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with social-evaluative concerns, but includes a wider range of experience and behavior and is powerfully characterized by general and specific issues of appearance" (p. 213). This construct is conceptually similar to body shame (Carr, 2002; Carr et al., 2000), a specific negative emotion focused on physical appearance and bodily functions (Gilbert & Miles, 2002). Therefore, self-consciousness about appearance can be considered a body image emotion that arises, according to Cash's (2011) cognitive-behavioral model of body image functioning, from the schematic processing of appearance information. According to this model, body image is a multidimensional construct that encompasses both perceptual experiences and subjective attitudes toward one's body. These attitudes include an evaluative dimension (i.e., beliefs and appraisals of appearance) as well as an investment dimension (Cash & Smolak, 2011).

In general, appearance investment is related to the importance an individual places on physical appearance and the perceived significance and effects of appearance on one's life (Cash & Labarge, 1996; Cash, Melnyk, & Hrabosky, 2004; Cash & Smolak, 2011). Cash's (2011) body image model holds that this variable is intrinsically related to the appearance schemas that represent the cognitive generalizations about the importance and meaning of body image in one's life (Cash et al., 2004; Cash & Labarge, 1996). These schemas guide the processing of appearance-related information and produce specific emotions and behaviors (Cash, 2011).

The dimension of appearance investment includes two facets: self-evaluative salience (SES) and motivational salience (MS; Cash et al., 2004). The former refers to the importance an individual attributes to physical appearance in defining their self-worth and self-concept, and the latter refers to the individual's efforts to maintain or achieve a certain level of attractiveness (Cash et al., 2004; Cash & Labarge, 1996). Several studies have found consistent differences between these two facets. In the general population, higher levels of SES were associated with more body image distortions (Jakatdar, Cash, & Engle, 2006), lower self-esteem (Cash et al., 2004) and greater body image dissatisfaction (Ip & Jarry, 2008). In contrast, the associations between MS and these negative outcomes were weak or nonsignificant. For breast cancer patients, Moreira, Silva, and Canavarro (2010) found that a higher investment in SES was associated with poorer social and psychological quality of life (QoL), higher levels of depression and fear of others' negative evaluations. In contrast, higher levels of MS were associated with a better social and psychological QoL and lower levels of depression.

Although some studies have examined the influence of appearance investment on the psychosocial adjustment of cancer patients (e.g., Carver et al., 1998; Lichtenthal, Cruess, Clark, & Ming, 2005; Moreira & Canavarro, 2010), no previous study appears to have examined the moderating role of this construct on the relationship between women's psychological adjustment and body image dimensions such as self-consciousness about appearance. Exploring the moderating role of this variable could improve our understanding of the differential impact of appearance changes on adjustment, which would make it easier to identify and assist women who were more vulnerable to the negative effects of changes in appearance.

The degree of self-consciousness about appearance, the association between body image and adjustment, as well as the effect of appearance investment on this association may differ according to the phase of breast cancer. For example, a patient who has recently received breast surgery and a long-term survivor might be expected to differ in terms of how they experience appearance changes. Most studies have suggested that body image issues may only arise during the survivorship phase, when disease-related concerns, such as survival, treatments or side effects, are less prominent and the focus has shifted to other consequences of cancer, such as body image changes, sexual functioning and relational issues (Bloom, Stewart, Johnston, & Banks, 1998; Moreira & Canavarro, 2010). In a sample

of women who had been diagnosed with breast cancer within the prior year, Spencer et al. (1999) found that the body image concerns were moderate and that the strongest concerns were related to the life-threatening aspects of cancer, such as recurrence, pain, death, and harm from adjuvant treatment.

The present study focused on two different phases of cancer: the recent diagnosis and surgery phase and the survivorship phase. Despite the multiple definitions of survivorship (e.g., Feuerstein, 2007), the present study adopted Kornblith's (1998) definition of a cancer survivor as someone who is "currently free of disease and off treatment for a minimum of one year" (p. 223). Women's psychological adjustment was operationalized as emotional adjustment (i.e., levels of depression and anxiety) and their psychological QoL, both relevant outcomes in psycho-oncology research.

This study had two specific goals. First, we intended to compare the levels of self-consciousness about appearance and both facets of appearance investment among the newly diagnosed patients and the breast cancer survivors. Based on previous research, it was hypothesized that breast cancer survivors would report higher levels of self-consciousness about appearance when compared with newly diagnosed patients (H1). In addition, it was expected that no differences would be found between newly diagnosed breast cancer patients and survivors regarding appearance investment (H2). The second goal of the study was to investigate the extent to which the two types of salience (SES and MS) of appearance investment moderated the relationship between self-consciousness about appearance and psychological adjustment in each group. It was hypothesized that at higher levels of SES and lower levels of MS, an increase in self-consciousness about appearance would be associated with an increase in depression and anxiety and with a decrease in psychological QoL (H3). Based on the literature review, SES was viewed as a vulnerability factor for poor psychological adjustment, and MS was viewed as a protective factor that may buffer the impact of self-consciousness about appearance on women's psychological adjustment.

Method

Participants

The sample included 134 women with breast cancer: 68 who had been recently diagnosed with breast cancer (G1) and 66 disease-free breast cancer survivors (G2). The criteria for inclusion in this study consisted of the following: (1) a diagnosis of non-metastatic breast cancer; (2) no other major disabling medical or psychiatric conditions; (3) the ability to read and write Portuguese; and (4) being at least 18 years old. Additionally, participants from G1 should not have undergone neo-adjuvant chemotherapy prior to the primary surgery, and participants from G2 should have completed their treatments at least one year prior to the study.

Table 1 presents the sociodemographic and clinical characteristics of the sample. The two groups of participants differed significantly in the time since diagnosis, $F(1, 117) = 104.67, p < .001$, the type of surgery, $\chi^2(1, N = 131) = 41.30, p < .001$, and the type of treatment, $\chi^2(3, N = 129) = 113.84, p < .001$. There were no other significant differences between the two groups.

Procedures

Participants were recruited through the Coimbra University Hospitals EPE (CUH), the main public hospital in the central region of Portugal, and the Reach to Recovery Association, a voluntary organization of breast cancer survivors. The newly diagnosed patients were invited to participate in the study during their hospitalization for primary breast surgery, which occurred an average

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