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Self-Compassion, Affect, and Body Image in College Women

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The aim of this study was to understand the relationships between self-compassion, positive affect, negative affect, and variables representative of positive body image for college women. Regression analyses indicated that self-compassion and affect accounted for 39% and 30% of the variance, respectively, in body appreciation and body image quality of life. Mediational analyses demonstrated that positive affect mediated the relationships between self-compassion and both indicators of body image. Implications for college counseling are discussed.

Keywords: self-compassion, body image, positive affect, negative affect, college women

Body image is a broad, multidimensional construct that encompasses a multitude of factors, including self-perceptions and attitudes about one's body. Factors that make up body image have been largely pathologized, as the research literature emphasizes dimensions such as body dissatisfaction and eating disorders. According to Tylka (2011), this strict focus on negative body evaluation has limited the perspective on body image and may hinder attempts at prevention.

With social norms that center on a drive for thinness and fear of fat, college women have been identified as a population at risk for body image disturbance (Cook-Cottone & Phelps, 2003; Levitt, 2004). More than 50% of college women have reported that their body shape or weight influenced their self-worth to a moderate or extreme extent (Cain, Epler, Steinley, & Sher, 2010). Although the literature on such contributors to disordered eating and body disturbance among college women is fairly extensive, less is known about factors that contribute to a positive body image, such as body appreciation and body image quality of life. Still, early research in this area has indicated that self-compassion may be a particularly important contributor (Raque-Bogdan, Piontkowski, Hui, Ziemer, & Garriot, 2016). Self-compassion has been shown to increase in response to a brief group intervention designed to teach college women strategies for treating themselves with compassion during times of personal suffering (Smeets, Neff, Alberts, & Peters, 2014). Thus, understanding the connection between positive body image and self-compassion may help inform interventions directed at improving college women's ways of relating to their bodies. Through increased attention to positive evaluation of body image, research can help us better understand how to prevent body image disturbance and enhance body appreciation and related aspects of quality of life in college women (Avalos, Tylka, & Wood-Barcalow, 2005).

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Body Image

Body image is a complex construct comprising both negative and positive aspects (Avalos et al., 2005). Whereas negative body image has been linked to outcomes such as disordered eating thoughts, urges, and behaviors in college women (Fitzsimmons-Craft, Ciao, & Accurso, 2016), body appreciation, one component of a positive body image, has been shown to contribute to college women's self-esteem, proactive coping, and optimism when variables that reflect negative body image are controlled for (Avalos et al., 2005). Positive body image therefore goes beyond the absence of the negative and moves toward more active acceptance of and respect for one's body (Tylka, 2013), and the positive feelings toward one's body may generalize to higher levels of well-being (Avalos et al., 2005). Body appreciation, the component of a positive body image that has been most widely examined, has been defined as favorable opinions of the body despite physical appearance, imperfections, and body shape/weight; awareness and attention to the body's needs; and healthy behaviors and attitudes that take care of and protect the body (Avalos et al., 2005). Body appreciation has been found to be negatively associated with body surveillance, body shame, and drive for thinness in college women (Avalos et al., 2005) and positively associated with intuitive eating and increased self-esteem (Swami, Airs, Chouhan, Leon, & Towell, 2009; Tylka & Kroon Van Diest, 2013).

Another component of a positive body image is body image quality of life, which involves the positive and negative effects one's body image can have on various aspects of life, such as emotions, social contact, relationships, health behaviors, sexuality, and work/school (Assuncão et al., 2013; Cash & Fleming, 2002). Cash and Fleming (2002) noted that body image can vary in terms of its impact on the content and context of quality of life, with significant implications in one or more life domains but no implications on others. In Cash and Fleming's (2002) study examining college women, positive attributions of body image to quality of life correlated positively with body satisfaction and negatively with body shame, preoccupation with being or becoming fat, dysfunctional investment in appearance, body surveillance, and internalized cultural beauty standards. Cash, Jakatdar, and Williams (2004) demonstrated that better body image quality of life was related to higher self-esteem, optimism, and social support for college women and men and less eating disturbance for women. These results further point to the potential of favorable body image for life-enhancing outcomes for college women. Still, recent research on body image quality of life has focused on how body image disturbance, such as anorexia nervosa, contributes to negative aspects of quality of life (e.g., Mountford et al., 2015), limiting our understanding of the potential positive conceptualizations of body image.

Positive Affect, Negative Affect, and Self-Compassion

Researchers have examined positive and negative affect as predictors and outcomes of various body image disturbances (Heron & Smyth, 2013; Kvalem, von Soest, Roald, & Skolleborg, 2006; Miner-Rubino, Twenge, & Fredrickson,

2002; Swami, Taylor, & Carvalho, 2011). Internalized social standards of beauty and thinness that college women often experience as self-objectification have been associated with increased negative affect for college women—in particular, feelings of shame, anxiety, and depression (Miner-Rubino et al., 2002). Positive affect, on the other hand, has been associated with greater appreciation of the body for those in treatment for bulimia (Trentowska, Bender, & Tuschen-Caffier, 2013), but the mechanisms by which positive affect relates to variables connected to a positive body image have not been fully investigated in college women more generally. Because far more college women report that their body image has a strong impact on their self-worth (Cain et al., 2010) than meet diagnostic criteria for eating disorders, examining the relationship between positive affect and feelings toward one's body in a nonclinical population is imperative. Fredrickson's (2001) broaden-and-build theory of positive emotion suggests that when individuals experience positive emotions, such as joy, interest, love, and gratitude, they are more likely to expand their ways of thinking (e.g., cognitive flexibility) and relating to themselves and their surrounding world. Following this logic, increases in positive emotions, such as fostering self-kindness and appreciation experienced with regard to one's body, may help enhance one's overall sense of a positive body image.

Several scholars have suggested that the presence of self-compassion is associated with positive affect (Neff, 2003b; Neff, Kirkpatrick, & Rude, 2007; Neff, Rude, & Kirkpatrick, 2007) and that the practice of self-compassion may lead to a transformation of negative emotions to a positive affective state through methods of acceptance (Germer & Neff, 2013). Additionally, self-compassion shows promise as a mediator between predictors and outcomes related to both positive and negative body evaluation (Barnett & Sharp, 2016; Raque-Bogdan et al., 2016).

Self-compassion, or the quality of considering oneself with kindness, compassion, and acceptance during challenging times, has received much attention in the research examining healthier body image (Raque-Bogdan et al., 2016; Sirois, Kitner, & Hirsch, 2015). Neff (2003b) identified three primary components of self-compassion: self-kindness, common humanity, and mindfulness. Unlike self-esteem, which is derived from self-evaluation and comparison with others or societal ideals, self-compassion focuses on feeling kind toward oneself and feeling connected to others during times of difficulty (Neff, 2003b). According to Leary, Tate, Adams, Allen, and Hancock (2007), self-compassion appears to ameliorate the effects of negative events on affect, with individuals who display higher self-compassion showing less negative emotional reactions to both real and imagined negative events.

Given the findings on self-compassion, individuals who experience negative emotions in connection to their bodies may transform those feelings to a more positive emotional state, such as gratitude and appreciation for their shape, size, and weight, when they take a more compassionate stance (Germer & Neff, 2013; Sirois et al., 2015). Indeed, undergraduate college women who report high levels of self-compassion also report greater body appreciation (Wasylkiw, MacKinnon, & MacLellan, 2012). Furthermore, self-compassion has been shown to contribute to decreased body preoccupation when self-esteem is controlled for, which points to the unique contribution of self-compassion to college women's body image (Wasylkiw et al., 2012).

Barnett and Sharp (2016) tested the hypothesis that self-compassion transforms negative affect associated with internalized maladaptive perfectionism into a more positive affective state characterized by less body dissatisfaction. They discovered that self-compassion was a mediator between maladaptive perfectionism and body image dissatisfaction in a sample of college women. Similarly, Raque-Bogdan et al. (2016) found that self-compassion mediated the relationship between peer and romantic attachment anxiety and body appreciation in college women, suggesting that when these types of interpersonal anxieties are high and associated with lower self-compassion, body appreciation is negatively affected. Raque-Bogdan and colleagues noted that self-compassion appeared to be particularly important to body appreciation in this population, and interventions to increase self-compassion through reflective writing, psychoeducation, or mindfulness training could potentially have a positive impact on college women's appreciation of their bodies.

Given the emerging potential of self-compassion and the lack of investigation on the role of affect in college women's positive body image, the current study examined the relationship between self-compassion, positive affect, negative affect, and positive body image. We hypothesized that positive affect, negative affect, and self-compassion would predict unique and shared variance in body appreciation and body image quality of life. Furthermore, we expected that positive affect and negative affect would mediate the relationship between self-compassion and body appreciation and body image quality of life.

Method

Participants and Procedure

This study was conducted as part of a larger, collaborative investigation that examined the effects of a self-compassion writing intervention for improving body image among college women. The procedure described herein reflects data that were collected from participants prior to their participation in the intervention. Participants were required to be over the age of 18, to be currently enrolled at a college or university, and to identify as female. Participants were recruited from undergraduate psychology classes, which represented a mix of majors and nonmajors. Participants were informed that participation in the study entailed completing a survey of several measures on Qualtrics. Before beginning the survey, participants read through an informed consent document, followed by the option to agree or decline to participate in the present study. Students who consented to participate in the study were directed to the online survey. As part of the larger investigation, participants received an incentive, which varied depending on the institution and class from which they were recruited (i.e., course credit, extra credit, or gift card).

Of the 152 participants, 35% were students at a rural Mid-Atlantic university and 65% were from an urban Mid-Atlantic university. Institutional review board approval was obtained at both universities. Participants' ages ranged from 18 to 28 years (M = 19); 82% of participants identified as White, 7% as

Asian, 6% as African American, 3% as Latina/o, and 2% as multiracial. There was greater participation from students earlier in their college experience: 41% of students were in the first year, 30% had completed 1 year, 15% completed 2 years, 10% completed 3 years, and 4% completed 4 years. Ninety-three percent of participants reported never having received counseling or mental health treatment related to body image concerns, and no participants reported receiving such treatment at the time of the survey.

Measures

Body Appreciation Scale–2 (BAS-2). Body appreciation was measured with the BAS-2 (Avalos et al., 2005; Tylka & Wood-Barcalow, 2015a), a 10-item scale that inquires about people's perception of their body (e.g., "Despite its flaws, I accept my body for what it is") and attitude toward their body (e.g., "I am attentive to my body's needs"). Tylka and Wood-Barcalow (2015a) revised the original 13-item version of the BAS to make item wording clearer. Items on the BAS-2 are rated using a 5-point scale ranging from 1 (*never*) to 5 (*always*), and all items are averaged to yield a total mean score, with higher BAS scores reflecting greater body appreciation. Tylka and Wood-Barcalow (2015a) found the scores on the BAS-2 to be internally consistent and reliable (Cronbach's $\alpha = .94$) and reported adequate test–retest reliability over a 3-week period ($r = .90$). In the same study, the BAS-2 demonstrated construct validity through positive correlations with measures of appearance evaluation (i.e., self-attractiveness), self-esteem, and proactive coping and a negative correlation with a measure of body dissatisfaction. Incremental validity was evidenced by the contribution of scores on the BAS-2 to eating behavior and psychological well-being above and beyond that of appearance evaluation and body dissatisfaction. The reliability for the scores in the current study was .93.

Body Image Quality of Life Inventory (BIQLI). The BIQLI (Cash & Fleming, 2002) includes items about the effect one's body image has on various domains of one's life (e.g., "My basic feelings about myself—feelings of personal adequacy and self-worth," "My interactions with people of the other sex," and "My activities for physical exercise"). The BIQLI consists of 19 statements in which participants rate the impact of each item on a scale from –3 (*very negative effect*) to +3 (*very positive effect*). All items are summed to yield a total score for the BIQLI, which ranges from –57 to +57. High scores denote a positive influence of body image on various domains of life and overall life quality, whereas low scores reflect a negative influence. Initial validation of the BIQLI's reliability was demonstrated using a sample of college students. Furthermore, this measure reflected a Cronbach's alpha of .95, demonstrating internal consistency (Cash & Fleming, 2002). Additionally, Cash et al. (2004) found this measure to be reliable, valid, and unidimensional in a sample of college students. The reliability for scores in the current study was .90.

Positive and Negative Affect Schedule (PANAS). The PANAS (Crawford & Henry, 2004) is a 20-item measure composed of different emotion words, 10 of which assess for positive affect (e.g., interested, strong, enthusiastic, inspired) and

10 of which assess for negative affect (e.g., distressed, upset, hostile, nervous). Each word is rated on a Likert-type scale from 1 (*very slightly or not at all*) to 5 (*extremely*) on the degree to which the individual has felt that way during the past week, yielding scores for positive affect and negative affect independently. Each score is obtained by adding all items for the respective dimension (either positive or negative) and ranges from 10 to 50. The PANAS has demonstrated discriminant validity and good internal consistency, with a Cronbach's alpha of .88 (Crawford & Henry, 2004). The reliability for scores in the current study was .85 for positive affect and .84 for negative affect.

Self-Compassion Scale (SCS). Self-compassion was measured using the SCS (Neff, 2003a), a 26-item scale that assesses actions toward oneself during difficult times (e.g., "I try to be loving towards myself when I'm feeling emotional pain" and "When I think about my inadequacies, it tends to make me feel more separate and cut off from the rest of the world"). Items are scored on a scale from 1 (*almost never*) to 5 (*almost always*) and averaged, with higher scores indicating greater self-compassion. This measure yields several subscales, including self-kindness, self-judgment, common humanity, isolation, mindfulness, and overidentification, although only the total mean score was used for the current study. The total mean score is obtained by reverse scoring the negative subscale items (i.e., self-judgment, isolation, and overidentification) and calculating a mean across all scores. Although the SCS has been found to have a six-factor structure using confirmatory factor analysis, a single higher order factor of self-compassion has been determined to explain the intercorrelation between subscales (Neff, 2003a). The measure has shown test–retest reliability across 3 weeks ($r = .93$) in a sample of undergraduate students and a Cronbach's alpha of .92 (Neff, 2003a). Furthermore, the SCS has demonstrated construct, convergent, and discriminant validity (Neff, 2003a). The reliability for the current study was .92.

Results

Means, standard deviations, and bivariate correlations are provided in Table 1. In tests of normality, we found that none of the variables exhibited significant skewness or kurtosis. There were no statistically significant correlations between age, ethnicity, and key variables, and thus, demographic variables were not included in the regression analyses.

Correlation and Regression Analyses

Table 1 shows that positive affect correlated positively with body appreciation and body image quality of life, and negative affect correlated negatively with these variables. Hierarchical regression analyses were conducted independently with the dependent variables of body appreciation and body image quality of life, with self-compassion entered as the first step and positive affect and negative affect as the second step (see Table 2). For body appreciation, self-compassion explained 35% of the variance, with positive affect and negative affect explaining an additional 4% of the variance ($p = .025$). The final model

TABLE 1

Descriptive Statistics and Pearson Correlation Matrix

Variable	*M*	*SD*	1	2	3	4	5
1. Self-compassion	2.87	0.56	—				
2. Body appreciation	3.42	0.70	.59**	—			
3. Body image quality of life	17.78	17.31	.50**	.65**	—		
4. Positive affect	33.84	6.82	.31**	.35**	.35**	—	
5. Negative affect	22.61	6.40	–.45**	–.28**	–.26**	–.10**	—

Note. $N = 152$.
**$p < .01$.

accounted for 39% of the variance in body appreciation, $F(3, 148) = 30.85$, $p < .001$. For body image quality of life, self-compassion explained 25% of the variance, with positive affect and negative affect explaining an additional 5% of the variance ($p = .008$). The final model accounted for 30% of the variance in body image quality of life, $F(3, 148) = 20.69$, $p < .001$.

Mediation Analyses

To assess whether positive and negative affect mediated the relationship between self-compassion, body appreciation, and body image quality of life, we used the bootstrap resampling method (Preacher & Hayes, 2008). This nonparametric method for assessing mediation involves the creation of 10,000 bootstrap samples (each with $n = 152$) by random sample with replacement (see Preacher & Hayes, 2008, for a more detailed discussion). This process resulted in 10,000 estimates of each path coefficient, which were then used to calculate estimates of indirect effects for the two dependent variables. The indirect effects were calculated by multiplying the 10,000 pairs of path coefficients (a) from self-compassion to the mediator variables

TABLE 2

Hierarchical Regression Analysis Summary for Variables Predicting Body Appreciation and Body Image Quality of Life

Dependent Variable	R^2	ΔR^2	*B*	*SE B*	β
Body appreciation					
Step 1	.35***				
Self-compassion			0.75	0.08	.59***
Step 2	.39***	.04*			
Self-compassion			0.67	0.10	.53***
Positive affect			0.02	0.01	.19**
Negative affect			–0.00	0.01	–.02
Body image quality of life					
Step 1	.25***				
Self-compassion			15.39	2.19	.50***
Step 2	.30***	.05***			
Self-compassion			12.55	2.50	.41***
Positive affect			0.57	0.18	.23**
Negative affect			–0.14	0.21	–.05

*$p < .05$. **$p < .01$. ***$p < .001$.

(positive and negative affect) and (b) from the mediator variables (positive and negative affect) to the dependent variable (either body appreciation or body image quality of life). Bootstrapping provides a point estimate of the indirect effect that represents the mean path value computed across the 10,000 samples. Shrout and Bolger's (2002) criteria indicate that indirect effects are statistically significant when the 95% confidence interval (CI) for the upper and lower bounds of the bias-corrected CI for the indirect effects does not include zero. In the current model, positive affect mediated the path between self-compassion and body appreciation; the indirect coefficient was significant (b = 0.07, SE = 0.03, 95% CI [0.02, 0.15]). However, negative affect failed to be a significant mediator between self-compassion with body appreciation (b = 0.01, SE = 0.05, 95% CI [–0.09, 0.11]). We conducted similar analyses for body image quality of life and again found that positive affect mediated the relationship between self-compassion and body image quality of life (b = 2.12, SE = 0.80, 95% CI [0.90, 4.18]); however, negative affect failed to significantly mediate the relationship between self-compassion and body image quality of life (b = 0.72, SE = 1.24, 95% CI [–1.71, 3.19]).

Discussion

Consistent with the literature suggesting that self-compassion has the potential to enhance women's body image, the current study found that self-compassion contributed statistically significant variance to college women's body appreciation and body image quality of life. Furthermore, positive affect mediated the relationship between self-compassion and body appreciation, as well as self-compassion and body image quality of life. Because body appreciation accounts for exclusively positive evaluations of the body, and body image quality of life accounts for both positive and negative ways that body image affects various aspects of life, this study's findings suggest that self-compassion's role in body image could be multifaceted during the college years. Given the indirect effect of self-compassion on both body appreciation and body image quality of life through positive affect, we can posit that self-compassion may contribute to increased positive affect, which can enhance positive ways of relating to one's body as well as limit the effects of negative body evaluation, a particular concern for college women (Cain et al., 2010). It is interesting that the same did not appear to hold true for negative affect, which did not mediate the relationship between self-compassion, body appreciation, and body image quality of life in this sample. Although negative affect maintained negative bivariate correlations with self-compassion, body appreciation, and body image quality of life, self-compassion's role in the dependent variables did not appear to exist through its connection to negative affect. Positive affect, however, appears to be the pathway through which self-compassion contributes to college women's body appreciation and body image quality of life. This finding is consistent with the broaden-and-build theory of positive emotions

(Fredrickson, 2001), which asserts that positive emotions have the capacity to increase psychological resources—in this case, enhancing how college women relate to their bodies.

The results of this study draw on affect regulation theory and self-compassion as an emotion-focused coping mechanism. Affect regulation theory posits that eating disorder behaviors result from an inability to regulate affect. Furthermore, these behaviors may be used in response to negative appraisals of one's body in an attempt for control or relief from the resulting aversive emotions (Stice, Shaw, & Nemeroff, 1998; Webb, Butler-Ajibade, & Robinson, 2014). Therefore, self-compassion may aid in self-regulation by allowing one to approach aversive emotions, body image content, and experiences with compassion and mindfulness. Drawing on this framework, Webb et al. (2014) suggested that women who engage in emotional self-regulation and acceptance-based coping strategies are able to approach aversive thoughts and feelings about the body from a more balanced outlook. Additionally, Neff (2003b) suggested that self-compassion may function as an emotional approach coping strategy, involving mindful emotional awareness and acceptance. Neff (2003b) explained that self-compassion can lead to a transformation of the feeling state, which may generate positive emotion and lead a woman to become more accepting of and respectful toward her body. Although an individual may continue to experience negative affect, using self-compassion may help reduce the impact on one's psychological health (Germer & Neff, 2013). When applied to the ongoing evaluation of one's body, which college women are so often affected by (Cain et al., 2010), the results of the current study suggest that self-compassion may be integral to the development and maintenance of positive body image for this population.

Limitations

Limitations of this study should be considered in the interpretation and application of the results. Although the sample included the target population of undergraduate college women, the diversity of the sample was relatively limited. Tiggemann (2015) noted the importance of social identities (e.g., culture, gender, race, sexual orientation, religion/spirituality, socioeconomic status, size, ability) in the development of positive body image, and Tiggemann and McCourt (2013) found that positive body image is positively related to age. These assertions by previous studies are noteworthy as a reminder that the current study's findings are primarily applicable to a relatively homogeneous group of college women. Furthermore, other variables, such as high self-esteem, proactive coping, intuitive eating, and body image flexibility, are constructs that have been associated with positive body image throughout the literature (Tylka & Wood-Barcalow, 2015b) but were not examined in this study. Thus, although there are numerous potential contributors to body image for college women, the current study focused exclusively on the relations between self-compassion, affect, and body image. However, because self-compassion accounted for a large portion of variance in both body appreciation and body image quality of life, this construct should continue to be included in future examinations of body image for college women.

Implications for College Counseling

The findings of this study, in conjunction with the broader literature, suggest that self-compassion may help promote positive affect for college women, particularly as it relates to body appreciation. Interventions aimed at increasing self-compassion may have potential for preventing body image distress and enhancing positive ways of relating to one's body for students on college campuses. Given the strong, unique contribution of self-compassion to body image for college women in this study, programs aimed at increasing self-compassion may be particularly relevant in college counseling. One example that has been described previously is a journaling intervention in which undergraduate participants were asked to write about a negative event that involved failure, humiliation, or rejection, but to do so in such a way as to elicit self-compassion through feelings of common humanity, self-kindness, and mindfulness (Leary et al., 2007). This intervention was shown to decrease negative affect and increase self-compassion to a greater extent than writing about one's positive characteristics while externalizing the event. Writing to promote self-compassion may hold promise for college women who struggle with body image concerns but are unwilling to seek formal mental health services.

Psychoeducational groups may be another intervention used by college counseling centers to help women develop and maintain healthier body image. Smeets et al. (2014) found that a 3-week, facilitated psychoeducational group focused on increasing female college students' self-compassion during times of suffering resulted in increased self-compassion, mindfulness, optimism, and self-efficacy and decreased rumination compared with a control group. Such interventions could be adapted to specifically teach college women self-compassion strategies in relation to body evaluation. Because body image quality of life explores the impact of the way one feels about one's body in relation to other life domains, more research is needed to explore how increases in self-compassion within the context of body image could have a spillover effect into other areas of functioning. For example, a psychoeducational group that explores how one's body image relates to other relevant areas of functioning, including social connections, health behaviors, and academics, holds potential for college women to practice self-compassion across the various domains of their lives.

College counseling centers can contribute to the enhancement of body image for college women through self-compassion interventions. Possibilities exist for using self-compassion-directed activities in group settings in conjunction with traditional individual counseling and as campus outreach programs that promote a culture emphasizing body acceptance. Findings from this study point to the important contribution of self-compassion to positive body image and can serve as a basis for interventions aimed at preventing or alleviating body image distress in college women.

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