Activating the inner caregiver: The role of support-giving schemas in increasing state self-compassion

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HIGHLIGHTS

► Contextual activation of support-giving schemas increased state self-compassion.
► Support-giving schemas were activated via recalled or actual support-giving behavior.
► Self-compassion was assessed for a recalled negative event and a test failure.
► Effects were not explained by mood, self-esteem, or awareness of others’ problems.

ABSTRACT

Self-compassion, which involves treating one’s own suffering with compassion, mirrors the interpersonal experience of giving support to others. In four experiments we examined the hypothesis that activating support-giving schemas can increase state self-compassion. In Experiments 1 and 2, participants first recalled a negative event (Experiment 1) or experienced a lab-based test failure (Experiment 2), then were randomly assigned to recall an experience of giving support to versus having fun with another person, and finally completed a measure of state self-compassion. Experiments 3 and 4 examined the effects of actually giving support to another person (via written advice), compared to not giving support or simply reading about another’s problem, and assessed effort invested in writing a self-comforting statement, operationalized as statement length (Experiment 3), and self-reported self-compassion (Experiment 4). As predicted, both forms of support-giving schema activation increased self-compassion. Alternative explanations involving affect, self-esteem, and awareness of others’ problems were addressed. These results suggest that one way to increase compassion for the self is to give it to others.

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Introduction

Recent research suggests that self-compassion has numerous psychological benefits, but little work has experimentally examined the contextual factors that give rise to it. Because self-compassion mirrors the interpersonal process of giving support to others, we propose that activating support-giving schemas may increase compassion directed at the self.

Self-compassion

Self-compassion involves approaching one’s own suffering with an attitude of kindness and nonjudgmental understanding (Neff, 2003a). Self-compassion is especially relevant in the context of negative events such as failure or rejection, when people are more likely to be self-critical. Neff (2003a) identified three components of self-compassion: self-kindness, or being understanding and patient with negative aspects of the self; common humanity, or recognizing that making mistakes is part of being human; and mindfulness, or taking a balanced, non-judgmental approach to negative emotions. Although similar to self-esteem, self-compassion is conceptually and empirically distinct: unlike self-esteem, self-compassion is non-evaluative and helps people confront their weaknesses without being either self-deprecating or self-enhancing (Neff, Kirkpatrick, & Rude, 2007). Furthermore, self-compassion uniquely predicts a number of positive outcomes above and beyond self-esteem, such as more balanced reactions to stressful events (Leary, Tate, Adams, Allen, & Hancock, 2007), greater self-worth stability (Neff & Vonk, 2009), and lower narcissism (Neff, 2003b).

Self-compassion is associated with positive psychological and social functioning. Self-compassionate people are lower in symptoms of anxiety and depression, even when controlling for self-esteem (Neff et al., 2007), and self-compassion-focused therapeutic interventions reduce shame and self-criticism (Gilbert & Procter, 2006). Rather than being a form of self-indulgence or complacency, self-compassion is associated with taking the initiative to make positive changes (Neff et al., 2007), engaging in constructive relationship-maintenance behaviors (Baker & McNulty,
and pursuing mastery goals in academic settings (Neff, Hsieh, & Dejittirat, 2005). In addition, inducing self-compassion has been shown to increase self-improvement motivation (Breines & Chen, 2012). Given such wide-ranging benefits of self-compassion, it is important to identify factors that increase or decrease it.

The role of support-giving schemas

Although there is likely to be some degree of cross-situational stability in self-compassion, it may also be sensitive to the social context, so that self-compassion differs in various situations. To date, the overwhelming majority of research on self-compassion has assessed the construct as a stable trait, with little research examining how situational factors influence self-compassion levels in a given context. In particular, the experience of giving support to another person may in turn increase the likelihood that people will take a supportive attitude towards themselves while their support-giving schemas are activated. Although one might suspect that giving support to others would reduce self-focus, orienting people towards others’ needs rather than their own, we propose that this relational orientation may in fact facilitate self-compassion.

Self-compassion is an intrapersonal supportive exchange that mirrors interpersonal supportive exchanges and thus may be momentarily increased by the contextual activation of such exchanges. Much of the research on the influence of relationships on the self has focused on examining how others’ behavior towards the self influences self-relevant processes and outcomes. For example, priming representations of critical versus accepting significant others led participants to make corresponding self-evaluations (Baldwin, 1992, 1994; Baldwin, Carrell, & Lopez, 1990), and expecting to receive social support led participants to make less use of self-denigrating coping strategies (Pierce & Lydon, 1998). One of the basic tenets of attachment theory states that representations of others’ behavior towards the self shape internal working models of self, such as beliefs about being worthy of love (e.g., Bartholomew & Horowitz, 1991; Bowlby, 1982; Hazan & Shaver, 1987). Consistent with attachment theory, research suggests that self-compassionate adults are more likely to have supportive rather than critical mothers (Neff & McGehee, 2010). Far less research, however, has explored the influence of one’s own behavior towards others on the self. We propose that self-compassion is likely to be influenced by the priming of interpersonal schemas related to one’s own behavior towards others—specifically those involving giving support. The way we treat ourselves in difficult times may be just as much due to the salience of interpersonal schemas related to giving support as they are to schemas related to receiving support.

Cross-sectional and longitudinal research provides mixed evidence for a linkage between compassion for others and compassion for the self. Neff and Pommier (2012) found a positive association between trait self-compassion and some measures of other-focused concern (i.e., forgiveness and perspective taking) in both undergraduates and community adult samples, but in the undergraduate samples trait self-compassion was not significantly correlated with compassion for humanity, empathic concern, or altruism. Consistent with previous research showing that undergraduates tend to report being kinder to others than they are to themselves (Neff, 2003b; Pommier, 2011), this finding seemed to be driven by a sub-group of participants who were low in self-compassion but high in empathic concern (Neff & Pommier, 2012). Other studies, by contrast, have found a positive association between compassion for others and for the self among undergraduates; for example, a longitudinal study showed that incoming college freshman who held more compassionate goals towards their roommates also had higher levels of self-compassion (Crocker & Canevello, 2008). In addition, recent fMRI research found that self-compassion engages brain regions that are also involved in feeling compassion towards others (Longe et al., 2009), suggesting that caring for the self and caring for others may be neurologically linked. None of this research, however, addresses the question of whether the contextual activation of support-giving schemas may increase self-compassion in the moment, independent of trait levels of compassion or self-compassion. Furthermore, although some past research suggests that self-compassion and compassion for others may not be correlated at the trait level, we hypothesized that momentary activation of support-giving schemas might lead individuals to show greater state self-compassion.

The present experiments

Prior research has considered self-compassion primarily as a trait and has focused on assessing its correlations with various other traits and behaviors. An important next step is to examine how interpersonal processes may influence levels of state self-compassion. In four experiments, we tested the hypothesis that activating support-giving schemas can increase self-compassion. The first two experiments examined whether activating a support-giving schema by having participants think about giving support to a friend led to greater self-compassion for a recalled negative event (Experiment 1) and a lab-based academic failure (Experiment 2). Because research suggests that giving can increase positive mood (Dunn, Aknin, & Norton, 2008), and positive mood could in turn increase positive self-directed attitudes such as self-compassion, in both experiments we included a control condition in which participants were asked to think about having fun with a friend, an experience that is likely to be associated with positive mood. By having participants in this control condition write about a friend, we also controlled for any effects due to the activation of positive interpersonal schemas more generally.

In Experiments 3 and 4, support-giving schemas were activated by having participants actually give support (i.e., written suggestions to someone going through a romantic break-up, Experiment 3, or someone who recently got into a car accident, Experiment 4) compared to a control condition in which participants were not asked to give support (Experiments 3 and 4), or a control condition where they read about another person’s problem without giving support (Experiment 4). The latter control condition allowed us to address the alternative explanation that self-compassion is increased simply by reminding people that others have problems, rather than because of something specific to giving support. As a dependent measure in Experiment 3, we assessed length of the self-comforting statement that participants wrote regarding a recalled personal negative event, as an index of the effort they expended towards being self-compassionate. Experiments 1, 2, 3, and 4 used self-report measures of state self-compassion. Across experiments, we expected that participants in the support-giving schema condition (i.e., those who were asked to give support) would exhibit greater self-compassion compared to control participants.

Experiment 1

Experiment 1 compared the effects of activating a support-giving schema with those of a positive interpersonal schema unrelated to support-giving. Participants recalled a time when they gave support to a friend (experimental condition), or had fun with a friend (control condition), and then reported their state self-compassion regarding a personal negative event that they wrote about before the manipulation.

Method

Participants. Sixty-three undergraduates (61% female) participated for course credit. Five were excluded from the analyses for non-compliance with the manipulation instructions, leaving a final sample of 58. Fifty-seven percent of participants identified themselves as Asian-American, 19% as European-American, 14% as Latino/a, and 2% as African-American. The remainder identified as “Other” or did not indicate their ethnicity. Participants ranged in age from 18 to 29 (M = 20.6, SD = 2.4).
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