



The effects of self-construals, self-criticism, and self-compassion on depressive symptoms

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ABSTRACT

The purpose of this exploratory study was to cross-culturally examine associations among self-construals, comparative vs. internalized self-criticisms, self-compassion, and depressive symptoms. 1200 undergraduates in the city of Kyoto, Japan, and 420 college students in Tennessee and Michigan participated in this study. The results indicated that both independent and interdependent self-construals were negatively related to comparative self-criticism while positively related to internalized self-criticism. Both forms of self-criticism negatively affected self-compassion, while self-compassion lowered depressive symptoms. In the U.S., independent (vs. interdependent) self-construal had stronger impact on both types of self-criticism, while in Japan, interdependent (vs. independent) self-construal had stronger impact on both types of self-criticism, indicating that culturally dominant self-construal has a larger influence on self-criticism. In both cultures, internal (vs. comparative) self-criticism has a less negative impact on self-compassion. Cultural specific tests are described to support the findings.

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1. Introduction

Research on self-criticism has paid increasing attention to depressive symptoms that affect health and well-being (Blatt, Hart, Quinlan, Leadbeater, & Auerbach, 1993; Thompson & Zuroff, 2004). Claims that self-criticism engenders depressive symptoms have been applied to cross-cultural contexts (Markus & Kitayama, 1991). In addition to self-criticism, Neff (2003, 2008) established self-compassion as a promising new concept related to depressive symptoms. Studies on self-compassion in Western cultures have demonstrated that people who show compassion towards themselves experience greater psychological health and resilience than those who lack self-compassion.

It has been proposed that self-criticism is more prevalent among East Asians because awareness of personal shortcomings aids self-improvement efforts needed to function harmoniously within a group (Heine, 2003). Neff (2003) argues that if self-criticism is a key factor among those who have lower level

of self-compassion, this could be a greater problem for East Asians than for Euro-Americans. However, Neff (2003) also suggests that the relationship between self-criticism and depressive symptoms in East Asian cultures may not be the same as that in Western cultures. Japanese people may believe that, opposite to self-compassion, means of shame, rather harsh self-judgment, and threat of isolation are needed to better improve themselves. It could be misleading to generalize the implication of self-critical behavior observed in Western cultures to East Asian cultures like Japan, since cultural backgrounds need to be considered to understand the relationships between key variables. This generalization, indeed, has been called into question by cultural psychologists (Markus & Kitayama, 1991). The effect of self-compassion on depressive symptoms, however, has not been extensively examined in cross-cultural research.

The purpose of this study was to examine the cultural underpinnings of self-criticism and the lack of self-compassion, which may lead to higher levels of depressive symptoms. Drawing on the theory of independence-interdependence cultural self-construals (Markus & Kitayama, 1991), we argue that comparative self-criticism may not always be directly linked to depressive symptoms in cultures that emphasize *independence*. In contrast, internalized self-criticism is likely to be functional in cultures characterized by *interdependence*. We further argue that self-compassion may be negatively

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linked to depressive symptoms across cultures. In order to address these cross-cultural factors of self-criticism and self-compassion, we examined depressive symptoms among college students in two different cultures.

This article is organized as follows. First, we review the independent and interdependent self-construals, self-criticism, self-compassion, and depressive symptoms in relation to each other as delineated in the psychology and communications literature. We further explicate the concept of self-criticism by introducing comparative and internal self-criticism and explore their relationship to self-compassion from a cross-cultural perspective. Second, we propose a conceptual model specifying the respective influences of the cultural self-construals, two types of self-criticism, and self-compassion on depressive symptoms. Third, we describe a study conducted to test the conceptual model, followed by an analysis of the results. The concluding section discusses implications, limitations, and possible directions for future research.

1.1. Self-construal, self-criticism, and self-compassion across cultures

Markus and Kitayama (1991) found that Western cultures tend to construe the self as separate from its social context, and thus emphasize autonomy and independence, which is independent self-construal. In contrast, Eastern cultures conventionally construe and construct the self as a constituent of a broader social context; their concept of self entails characteristics and qualities of the social environment, which is interdependent self-construal. It is proposed that self-construal varies among cultures based on an emphasis on either independence or interdependence (**Markus & Kitayama, 1991**).

Kitayama and colleagues used cultural self-construal theory to support their proposition that, in interdependent East-Asian cultures such as Japanese, people tend to be more self-critical than they are in independent cultures such as Euro-American (**Kitayama & Markus, 2000**). Researchers have argued that self-criticism is adaptive for those individuals in interdependent cultures, because an awareness of personal shortcomings helps them address the required self-improvement efforts for them to function harmoniously within a group (e.g., **Heine, 2003**). If so, levels of self-compassion may be lower among East Asians than Euro-Americans, given that self-criticism is a key trait among those who lack self-compassion.

Untoward impact of self-criticism on depressive symptoms among Euro-Americans may not be necessarily exist among East Asians as suggested by some cross-cultural studies because of the complicated nature of interdependent self-construal (**Kagitcibasi, 2005**). The present study provides an evidence of this cultural variation, which would help us better understand how interdependent self-construal relates to self-compassion from a cross-cultural perspective. The promotion of self-criticism and the reflection of social conformity and harsh self-regulatory tactics are more likely to promote interdependence with the feelings of human interconnectedness (**Neff, Pisitsungkagarn, & Hsieh, 2008**). Thus, it is suggested that interdependence may hinder the impact of self-compassion on depressive symptoms. On the other hand, independence may involve and promote care and concern for the self (**Singelis, 1994**), which may increase self-compassion. However, independence may also promote feelings of separation or isolation, thus undermining self-compassion.

1.2. Comparative vs. internalized self-criticism

Thompson and Zuroff (2004) developed the Level of Self-Criticism (LOSC) scale to measure two-dimensional concepts and

developmental levels, which are comparative self-criticism and internalized self-criticism. They developed and explained comparative self-criticism as a negative perspective and view of the self as compared to others or as an unfavorable comparison of the self with others, who are seen as superior and hostile or critical. For example, from the cross-cultural perspectives, the Euro-Americans are more likely to view their own shortcomings in comparison to others. With regard to comparative self-criticism, they aim for self-enhancement, independence, seeking to confirm their positive internal attributes of self and self-esteem. By contrast, **Thompson and Zuroff (2004)** developed and explained internalized self-criticism as a negative perspective and view of the self as compared to internal, personal standards wherein people respond to success by seeing it as failure. The consequence of internalized self-criticism may be equally critical in both East Asian cultures and Western cultures.

While similar relational concepts to self-compassion have long been studied in psychology (**Baumeister, Heatherton, & Tice, 1993; Sedikides, 1993; Taylor & Brown, 1988**), **Neff (2003)** developed Self-Compassion Scale (SCS) and showed that if a person has a higher score on this scale, s/he tends to have lower scores on various depressive symptoms and anxiety self-report scales. Following research also confirmed that people with greater self-compassion were less likely to have high levels of depressive symptoms and anxiety (e.g., **Neff, Rude, & Kirkpatrick, 2007**). As such, the literature makes a strong argument for a relationship between self-compassion and positive psychological outcomes (e.g., less depressive symptoms and anxiety). However, little is known about its background mechanisms, especially about culture-related background mechanisms.

2. Proposed model

This study explored whether self-criticism and self-compassion are associated with depressive symptoms in cross-cultural contexts (**Kitayama & Markus, 2000; Markus & Kitayama, 1991; Neff et al., 2008**). We aimed to obtain a better understanding of the mechanisms involved in the relationship among self-construal, self-criticism, self-compassion, and depressive symptoms for the two contrasting cultures. In particular, we sought to ascertain the degree to which people engage in the two types of self-construal (independence vs. interdependence) and the degree to which they use (comparative vs. internalized) self-criticism and self-compassion in each culture. Then we sought to determine the influences such psychological factors have on levels of depressive symptoms and compared them between two cultures.

Heine, Lehman, Markus, and Kitayama (1999) argue that, in relation to self-compassion, self-criticism may not necessarily be a psychological problem for individuals who live in interdependent cultures. Nevertheless, when self-criticism is harsh and combined with feelings of isolation and over-identification, a lack of self-compassion may remain problematic. Thus, we expect self-criticism and self-compassion to be associated with levels of depressive symptoms across cultures. In order to link positive and functional values of lower depressive symptoms and better health conditions, we used the Level of Self-Criticism (LOSC) scale, Self-Compassion Scale (SCS), and self-construal scale. These scales may address the concerns and maintenance mechanisms of the cross-cultural outlook that can influence reports of depressive symptoms and well-being. A graphical presentation of the conceptual model that links the aforementioned factors is provided in Fig. 1.

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