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Don't be so hard on yourself! Changes in self-compassion during the first year of university are associated with changes in well-being



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ABSTRACT

Introduction: Well-being declines during the first year of university. We examined if change in self-compassion was indirectly related to change in well-being through change in psychological need satisfaction during the first year of university.

Methods: First year university students (N = 189, 77.2% female) completed self-report questionnaires at the beginning of the first semester and approximately five months later. Path analysis and bootstrapping procedures were used to examine residualized change scores.

Results: Change in self-compassion was positively related to (ps < 0.05) change in psychological need satisfaction $(\beta = 0.49)$ and negatively related to change in negative affect $(\beta = -0.24)$. Change in psychological need satisfaction was positively associated (ps < 0.05) with change in vitality $(\beta = 0.58)$ and change in positive affect $(\beta = 0.52)$ and negatively associated with change in negative affect $(\beta = -0.29)$. Change in self-compassion was indirectly related to change in vitality (b = 0.56, 95% bootstrapped bias corrected confidence interval (BcCI)[0.38, 0.77]), positive affect (b = 0.41, 95%BcCI [0.27, 0.58]), and negative affect (b = -0.26, 95%BcCI [-0.41, -0.13]) through change in psychological need satisfaction.

Conclusions: During the first year of university, change in self-compassion was associated with change in well-being because self-compassion enhanced psychological need satisfaction. Results highlight the potential of enhancing self-compassion during first year university to help mitigate student declines in well-being.

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1. Introduction

The first year of university study is often accompanied by marked changes in responsibility, identity, lifestyle, social milieus, and sometimes living arrangements (Gall, Evans, & Bellerose, 2000; Terry, Leary, & Mehta, 2013). Coinciding with these changes, first year university students often experience a rapid decline in psychological and social wellbeing as well a rapid increase in psychological distress and cognitive-affective vulnerabilities (Conley, Kirsch, Dickson, & Bryant, 2014). Although these negative setbacks in psychological health tend to plateau over time, they do not return to baseline levels over the course of the first year of university (Conley et al., 2014). Consequently, there is a clear need for research that helps to identify key mechanisms that can be used to mitigate declines in well-being during the first year of post-secondary study.

Self-compassion is one approach with potential to assist students in managing the challenges that often accompany the first year of university (Fong & Loi, 2016; Hope, Koestner, & Milyavskaya, 2014; Terry et al.,

2013). Self-compassion is relevant during times of suffering or setbacks and involves offering support and understanding to the self (Neff, 2003a). It is comprised of three components: (1) self-kindness, which represents the ability to be caring and kind to ourselves rather than excessively critical. (2) common humanity, which represents an understanding that everyone makes mistakes and fails and our experience is part of a larger common experience, and (3) mindfulness, which represents being present and aware while keeping thoughts in balance rather than overidentifying (Neff, 2003a, 2003b). Researchers have demonstrated the favourable effects of first year university students having higher self-compassion. For example, when controlling for baseline levels of self-compassion, first year undergraduate students who had higher self-compassion experienced less homesickness and depression at the end of the first semester (Terry et al., 2013). Others have shown that across the first year of university, students with higher self-compassion had favourable changes in life satisfaction, identity development, and negative affect (Hope et al., 2014). To date, however, researchers have yet to examine mediators that might be transmitting the positive effects of self-compassion to well-being.

One theory that can be used to understand the relationship between self-compassion and well-being is self-determination theory (SDT; Deci

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& Ryan, 2000). In SDT, Deci and Ryan contend that all humans have innate psychological needs that when fulfilled contribute to greater well-being. The three psychological needs are competence (i.e., the perception that one can complete personally challenging tasks), autonomy (i.e., the perception that one is in control of his/her behaviours and acting volitionally) and relatedness (i.e., the perception that one connects and belongs with important others; Deci & Ryan, 2000). Investigators have supported Deci and Ryan's (2011) assertions that psychological need satisfaction (PNS) serves as one mechanism linking self-related constructs to well-being outcomes (see Sheldon, Cheng, & Hilpert, 2011).

Neff (2003b) demonstrated that self-compassion was associated with PNS insofar as having higher self-compassion can lead one to be authentic and pursue true self-esteem (versus contingent self-esteem; Neff, 2003a). Having higher self-compassion can enhance perceived autonomy because it encourages one to be kind to oneself, pursue behaviours driven by a sense of enjoyment, learn new and challenging skills, and find happiness (Neff & Dahm, 2015). Having higher self-compassion can enhance perceived competence because it promotes an adaptive self-attitude that could enhance perceptions of competence through viewing experiences as part of a larger human experience, self-kindness, and emotional balance (Neff, Hsieh, & Dejitterat, 2005). Conversely, having lower self-compassion can lead to self-critical thoughts that undermine perceived competence (Neff et al., 2005). Finally, having higher self-compassion can facilitate perceptions of relatedness because it allows recognition that one's own needs are as valid and worthy of attention as the needs of others (Yarnell & Neff, 2013). In other words, having higher self-compassion can serve to enhance relationships because it encourages one to take the perspective of a close friend to enhance self-kindness, thereby fostering interpersonal perspective taking (Yarnell & Neff, 2013).

1.1. Research question and hypothesis

Despite the theoretical and empirical evidence that self-compassion is linked to the fulfillment of psychological needs (Ghorbani, Watson, Chen, & Norballa, 2012; Hope et al., 2014; Neff, 2003b; Neff et al., 2005), researchers have yet to examine if having higher self-compassion is associated with enhanced well-being because it provides opportunities to fulfill psychological needs. Therefore, the purpose of this investigation was to examine if changes in self-compassion were indirectly related to changes in well-being through changes in PNS during the first year of university. First year students represent an ideal population to examine the research question because researchers have shown that the first year of university is characterized by changes in well-being (Gall et al., 2000; Terry et al., 2013). Based on SDT (Deci & Ryan, 2011) and previous research (Ghorbani et al., 2012; Neff, 2003b; Neff et al., 2005), it was hypothesized that (H1) increases in self-compassion would be associated with increases in PNS, vitality, and positive affect and decreases in negative affect, (H2) increases in PNS would be associated with increases in vitality, and positive affect and decreases in negative affect, and (H3) the relationships between increase in selfcompassion and well-being indicators would be transmitted through PNS.

2. Methods

2.1. Participants and procedure

Participants were 189 (77.2% female) part-time or full-time first year university students, recruited during their first semester of study at a Canadian university. Most students were single/never married (99.5%). About half lived on campus in residence (50.3%), followed by off-campus (46.5%) and on campus in a non-residence building (3.2%). About half knew the people they lived with (49.2%) whereas just under half did not know the people they lived with prior to that year

(45.5%). Participants described themselves using multiple descriptors such as white (n=81,42.86%), Chinese (n=51,26.98%), Asian (n=35,18.52%), Southeast Asian (n=10,5.29%), Filipino (n=7,3.70%), Aboriginal (n=5,2.64%), Black (n=4,2.12%), or Other (n=28,14.83%).

Ethical approval to conduct the study was obtained from our institutional research ethics board. Participants were recruited to complete an online questionnaire within the first month of beginning university at Time 1 (T1). Participants were emailed a second online questionnaire at Time 2 (T2), approximately five months later. Recruitment took place via announcements at the start of 1st year university courses and links on course websites. Posters were placed around campus and researchers set up recruitment booths at first year events.

2.2. Measures

2.2.1. Demographic information

Participants indicated where and who they were living with and their gender. Participants reported a mix of race and ethnicities. To ensure participants were in their first year of university, they were asked how many university courses they had completed and if they were in their first year of university.

2.2.2. Self-compassion

Self-compassion was assessed with the Self-Compassion Scale (SCS: Neff, 2003b). The SCS has six subscales to assess the three components of self-compassion: (1) mindfulness (e.g., "When something upsets me I try to keep my emotions in balance") as opposed to over-identification (e.g., "when I'm feeling down I tend to obsess and fixate on everything that's wrong"), (2) self-kindness (e.g., "I try to be loving towards myself when I'm feeling emotional pain") as opposed to self-judgement (e.g., "I'm disapproving and judgmental about my own flaws and inadequacies"), and (3) common humanity (e.g., "when things are going badly for me, I see the difficulties as part of a life that everyone goes through") as opposed to isolation (e.g., "when I'm feeling down, I tend to feel like most other people are probably happier than I am"). Items were rated on a scale of 1 (almost never) to 5 (almost always) based on how often they behave in a similar manner. Scale scores can be operationalized as six correlated subscales or as one overall self-compassion score (Neff, 2003b, 2015).

2.2.3. Psychological need satisfaction (PNS)

The Basic Psychological Need Satisfaction (BPNS; Gagné, 2003) scale was used to assess perceptions of competence (e.g., "most days, I feel a sense of accomplishment from what I do"), autonomy (e.g., "I feel like I can pretty much be myself in my daily situations"), and relatedness (e.g., "I really like the people I interact with"). Participants read the items and indicated how true the statement was for them. Response options were 1 (not at all true) to 7 (very true). The BPNS contained 21items which were positively and negatively worded. Given the recent advances in theory and measurement of PNS, combined with the documented problems with the original scale (Johnston & Finney, 2010; Sheldon & Hilpert, 2012) and the negatively worded items (Gunnell, Bélanger, & Brunet, 2016; Johnston & Finney, 2010), the negatively worded items (n = 9) were removed from further analysis. The factor structure of BPNS scores without negatively worded items has been supported (Gunnell et al., 2016). To reduce model complexity and enhance power and parsimony, an overall PNS variable was calculated by averaging the means of competence, autonomy, and relatedness.

2.2.4. Well-being

A combination of well-being indicators was used. Vitality was assessed with the 7-item Subjective Vitality Scale (SVS; Ryan &

 $^{^{1}}$ Note participants could provide more than one description, therefore percentages exceed 100%

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