Influences on the Development of Self-compassion in Adolescents

Zongai Wu¹ *, Yan Zhang²

¹Hefei University of Science and Technology, Hefei, 230000, China
²Prayan Science and Technology Park Centre School, Hefei, 230000, China
* Corresponding author: zongai87@163.com

Abstract: Self-compassion is an adaptive psychoprotective factor that helps individuals objectively perceive and accept their own encounters or suffering and respond with self-directed kindness. Adolescence is a period of rapid changes in cognitive development, and the superimposition of these changes with academic pressures, etc., is highly likely to lead to adolescents' mental health problems. In this study, we systematically investigate the factors influencing adolescents' self-compassion from physiological, psychological, and social perspectives, and clarify the role of self-compassion in adolescents' mental health and the strategies for improving self-compassion for adolescents. Future research on adolescent self-compassion should focus more on internal feelings and physiological factors, pay attention to cultural differences, and purposefully investigate the developmental level of self-compassion and its influencing factors among adolescents of different ages and family types.

Keywords: Adolescents, Self-compassion, Mental health.

1. Introduction

Adolescents are in a period of rapid physiological, cognitive, and social interaction changes, and their high level of self-concern and introspection leads to a perceived discrepancy between the current self and the ideal standard, which in turn is prone to mental health problems. Self-compassion, as a protective dimension of mental health, can regulate adolescents' negative attitudes toward the self and social others, which is conducive to the development of adolescents' mental health. However, a lot of research has been conducted on adolescent self-compassion abroad. But, there are not many related studies in China, and there is a lack of systematic discussion. It is necessary to clarify the influencing factors of adolescent self-compassion development, which is of great theoretical and practical significance for further research on the protection of adolescent mental health.

2. The Concept of Self-compassion

Self-compassion refers to an individual's ability to face failure or frustration with understanding and acceptance, and to see it as part of the life experience rather than running away from it or wallowing in it, and as something that most people will experience growing up. Specifically, there are three main components: (1) common humanity, i.e., seeing one's experience of frustration or failure as part of the common experience of the majority, rather than separate and isolated; (2) self-kindness, i.e., being kind and understanding to oneself in the face of pain or failure, rather than being self-critical; and (3) positive thinking, i.e., keeping painful thoughts and feelings balanced and in awareness, rather than wallowing in them. The three elements of self-compassion are a dynamic structural system that, when working together, can alleviate feelings of psychological discomfort and distress [1]. When the individual recognises that as a member of the human race, goes through the process of growth that most people go through, and therefore maintains more respect and patience with himself or herself, and positive thinking, as a balance of awareness of internal states, overcomes self-centredness, enhances connection with others, reduces negative emotions, and allows the individual to be more pleased with himself or herself, i.e., to be kind to his or her own self.

3. Physiological Factors of Adolescent Self-compassion

Physiological factors mainly contain both gender and age. Adolescent girls were found to have lower levels of self-compassion than adolescent boys, and adolescent girls over 14 years of age had lower levels of self-compassion than adolescent girls and boys 13 years of age and younger. Adolescents' overall self-compassion levels were not significantly different from those of college students (adults) but were less self-compassionate when compared to older adults, and it was found that among adolescent boys, self-compassion mediated the relationship between positive thoughts and negative emotions only, whereas among adolescent girls it mediated the relationship between positive thoughts and perceived stress. When adolescent girls had higher levels of self-compassion, they reported lower negative affect, and gender and age also moderated the relationship between self-compassion and mental health and psychological distress, as evidenced by greater effects of self-kindness, common humanity, and positive thoughts on psychological distress in girls than in boys [2]. Therefore, there are age and gender differences in the level of self-compassion at the adolescent stage, which is mainly manifested in the fact that the level of self-compassion of adolescent girls may be lower than that of boys, and the development of self-compassion is significantly correlated with the development of mental health of both adolescent boys and girls. In the future, the research direction can be extended to genetics, physical health status and so on, in order to expand the physiological factors of self-compassion development in adolescents.
4. Psychological Factors in Adolescent Self-compassion

4.1. Body appreciation

While body appreciation is a key component of positive body imagery, encompassing acceptance of one's own body and the ability to recognize and embrace one's own perfections or imperfections, self-compassion is empathy and acceptance of one's own experiences, and thus may be related to body appreciation. For example, self-compassion was found to be positively correlated with positive body imagery [3]. Adolescence is considered to be a critical period for the emergence of body-related problems, e.g., negative comments about weight or appearance from parents and peers tend to cause body dissatisfaction, and self-compassion can act as a protective factor to reduce psychological pressure from family and society. Especially among adolescents, self-compassion is an important factor in fostering body appreciation; for example, self-compassion has been found to lead adolescents aged 14-17 years to be more respectful and kind to their bodies. Girls with higher levels of self-compassion had lower levels of body surveillance and somatic shame, as well as more positive body attitudes (e.g., body appreciation), whereas individuals with high levels of self-compassion were negatively correlated with negative body imagery positively correlated with body appreciation [4].

4.2. Psychological resilience

Psychological resilience refers to the psychological phenomenon in which an individual's own physical and mental functioning is not more negatively affected when they are in adversity or facing stress. Individuals with higher levels of self-compassion can provide psychological resilience in difficult situations and psychological resilience in the face of adversity [1]. Self-compassion was found to be positively related to psychological resilience, and developing self-compassion among adolescents can strengthen psychological resilience, improve psycho-emotional health, and provide adolescents with psychological resilience and coping wisdom in the face of adversity. For example, self-compassion had a significant effect on coping with cyberbullying when adolescents encountered cyberbullying. Thus, self-compassion may be able to help adolescents improve their courage in the face of adversity when they are confronted with negative experiences in order to reduce the negative impact of negative upbringing experiences.

4.3. Self-efficacy

Self-efficacy is the strength of an individual's belief in his or her ability to achieve a goal, i.e., an individual's cognitive judgement of his or her own abilities, and self-compassion increases an individual's resilience in the face of adversity. The study found that total self-compassion scores were positively correlated with self-efficacy, and in the subscales, the positive elements of self-compassion (self-kindness, common humanity, and positive thoughts) were positively correlated with self-efficacy, whereas the negative elements (self-judgement, over-identification, and isolation) were negatively correlated with self-efficacy [5]. Self-compassion has been found to be positively related to personal mastery of goals (intrinsic motivation to learn and grow) and negatively related to extrinsic goals. Self-compassionate individuals achieve goals not for the sake of gaining recognition from others or society, but from an intrinsic need, and this intrinsic motivation is associated with greater self-confidence[1]. So in a study of college students, it was found that self-compassionate people were more confident in their ability to improve their intelligence, which led to less anxiety and better grades [6]. Therefore, developing self-compassion in adolescents can help to enhance their self-efficacy.

4.4. Sense of well-being

Past research has found that self-compassion is positively related to well-being, for example, self-compassion in social relationships is positively related to psychological well-being in adolescent girls, which in turn leads to a greater sense of social contact security [7]. When adolescents are exposed to stressful life events or cyberbullying, adolescents with low self-compassion are more likely to establish fatalism or engage in cyberbullying, whereas high self-compassion helps individuals face stressful life events and cyberbullying head-on in order to reduce the risk of negative impacts on mental health. Individuals with higher levels of self-compassion had less stress, anxiety, and negative emotions, and higher life satisfaction and positive emotions, which were positively correlated with well-being [8].

5. Social Factors in Adolescent Self-compassion

5.1. Childhood experience

It has been found that individuals who experienced physical as well as emotional abuse or neglect in childhood have lower levels of self-compassion. Because individuals who experience childhood abuse often make stable internal attributions about the abuse experience, believing that the abuse experience is self-inflicted and stable, leading to self-blame and self-shame, self-compassion is a protective factor against traumatic stress disorder after experiencing adversity in childhood [9]. When adolescents had more warm and secure memories of their childhood, it was significantly associated with higher self-compassion and a positive sense of social security, and adolescents who had a strained family relationship or who had experienced criticism from their mothers had lower self-compassion, whereas adolescents who had been supported by their mothers or who came from a functioning family had higher levels of self-compassion [10]. Thus, even for adolescents with negative childhood experiences, the resulting negative effects can be reduced through self-compassion, which in turn promotes adolescent mental health.

5.2. Dependence relationship

Children with anxious or avoidant attachments were found to be indirectly associated with poorer quality of life, while secure attachments were positively associated with self-compassion [11]. Empirical studies have found lower levels of self-compassion in individuals who do not expect external support in their relationships (avoidant attachment) or who are anxious about their self's worthiness for intimate relationships (anxious attachment). Maternal support in the family was significantly associated with higher self-compassion, whereas maternal criticism was significantly associated with lower self-compassion, and a close and harmonious family atmosphere significantly predicted self-compassion, whereas adolescents growing up in stressful, conflict-prone families had lower levels of self-compassion, and adolescents growing up in responsive parenting styles,
such as sensitivity, warmth, and acceptance had higher levels of self-compassion. In particular, fathers’ parenting styles had a more significant effect on adolescents’ levels of self-compassion [12]. Thus, a good attachment relationship with parents and a warm and harmonious family atmosphere may have a significant impact on the development of self-compassion in adolescents.

5.3. Cultural differences

A survey of self-compassion in British and Chinese adolescents found that self-compassion was significantly associated with depressive symptoms in the British sample, whereas interpersonal relationships were significantly associated with self-compassion and depressive symptoms in the Chinese sample. Meta-analyses showed that Eastern collectivism and Western individualism did not differ significantly in levels of the self-compassion dimension, with the difference being that self-criticism was an adaptive factor in collectivism, whereas the opposite was true for individualism. Individualism has a greater expectation of non-dependence or loyalty to groups or family members, and therefore individuals are loosely connected to each other. Western culture, as represented by the United States, for example, shows more individualism, as evidenced by difficulties in cooperation and altruism, leading to a difference in the construct of sympathy, a difference that tends to lead to a fear of failure and isolation [13]. The study found that Westerners do not seem to consider self-compassion as a virtue and tend to be more competitive, whereas Easterners (e.g., China, Thailand) have overall higher levels of self-compassion than Westerners possibly because self-compassion is Buddhist in origin, and the study also found that Westerners are more likely to be self-compassionate than Westerners [1], the popularity of Buddhist culture is higher among Asians compared to the West. There are no cross-cultural surveys on self-compassion among adolescents.

6. Reflections on Future Research

6.1. Consideration of the impact of cultural differences

Self-compassion is an internal element of psychological adjustment. When adolescents approach their own unfortunate experiences with self-acceptance and sympathy, they can be less critical and rejecting of themselves or their environment, thus enabling them to be more accepting of themselves and in tune with others. However, there are cultural differences in the level of self-compassion itself. For example, the East is influenced by Confucianism, which advocates collectivism and individual subordination to the collective, whereas the West is predominantly individualistic, but countries and regions such as Thailand, Taiwan in China, Australia, and Italy all showed high levels of self-compassion in cross-cultural surveys. Thus, the current results on the effect of cultural differences on self-compassion are contradictory and lacking in adolescent-specific investigations. There is a need for future research to delve deeper into cross-cultural surveys to understand adolescents’ self-compassion levels in different cultural contexts.

6.2. Expanding the sample

Overall, there is limited research literature on self-compassion especially in China, and even less on self-compassion for adolescents. A search in SCI-HUB, Google Scholar, and other platforms found that the amount of research on self-compassion in foreign countries has been increasing year by year, while there are fewer studies on self-compassion in China. Self-compassion, as an adaptive psychological protective factor, has a positive impact on the development of mental health. It is necessary to receive more attention in future research, especially in the adolescent stage in the period of self-compassion shaping, more worthy of in-depth investigation.

6.3. Broadening research directions

Past research has focused on the influence of social and psychological factors on the development of self-compassion. Good family atmosphere and supportive education, as well as cultural differences in the level of self-compassion itself. For example, shows more individualism, as evidenced by difficulties in cooperation and altruism, leading to a difference in the construct of sympathy, a difference that tends to lead to a fear of failure and isolation [13]. The study found that Westerners do not seem to consider self-compassion as a virtue and tend to be more competitive, whereas Easterners (e.g., China, Thailand) have overall higher levels of self-compassion than Westerners possibly because self-compassion is Buddhist in origin, and the study also found that Westerners are more likely to be self-compassionate than Westerners [1], the popularity of Buddhist culture is higher among Asians compared to the West. There are no cross-cultural surveys on self-compassion among adolescents.

References

