INVESTIGATING PREDICTIVE ROLE OF SELF-COMPASSION ON SOCIAL SELF-EFFICACY

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Abstract

The purpose of this study is to examine predictive role of self-compassion on social self-efficacy. Participants were 299 university students (151 women, 148 men; M age= 21.6 yr.). In this study, the Self-compassion Scale and the Social Self-efficacy Scale were used. The relationships between self-compassion and social self-efficacy were examined using correlation analysis and multiple regression analysis. In correlation analysis, self-kindness, common humanity, and mindfulness factors of self-compassion were found positively and self-judgment, isolation, and over-identification factors of self-compassion were found negatively related to social self-efficacy. According to regression results, social self-efficacy was predicted negatively by isolation and over-identification. Further self-kindness, common humanity, and mindfulness predicted social self-efficacy in a positive way. Self-compassion has explained 58% of the variance in social self-efficacy. The results were discussed in the light of the related literature and dependent recommendations to the area were given.

Key Words: Self-compassion, social self-efficacy, multiple regression analysis.

INTRODUCTION

Self-compassion, which is based on Buddhist philosophy and has an alternative conception of individual's achieving functional attitudes toward himself, is described as being gentle towards oneself in the face of hardship or perceived inadequacy and entails acknowledging that suffering, failure, and inadequacies are part of the human condition and that all people, oneself included, are worthy of compassion (Neff, 2003b; Neff, Kirkpatrick, & Rude, 2007). In her inspiring articles Neff (2003a, b) conceptualized and developed a valid and reliable instrument to measure this concept. According to Neff (2003a) self-compassion contains three principal components: (a) Self-kindness refers to an attitude of kindness and understanding to one's self as opposed to harsh judgment. Self-kindness stands in opposition to a self-critical approach in which one judges or blames oneself for general life difficulties, and instead involves actively soothing and comforting oneself in times of distress (Gilbert, Baldwin, Irons, Baccus, & Palmer, 2006). (b) An awareness of common humanity indicates perceiving one's negative experiences as part of the larger human condition instead of feeling separate and isolated and involves recognizing that all people have problems, make mistakes, and feel inadequate in some way. And (c) Mindfulness defines being mindfully aware of painful experiences without over-identifying with them. This a state of balanced awareness that one's feelings and thoughts are observed without avoiding or trying to change them, without exaggeration and prejudice (Gunaratana, 1993; Martin, 1997; Neff, 2003a; Nisker, 1998; Rosenberg, 1999). These three dimensions of self-compassion are conceptually are experienced differently at the phenomenological level, while they interact so as to mutually enhance and engender one another (Neff, 2003a; Neff, Hsieh, & Dejitterat, 2005).

Research on self-compassion has found that it is a powerful predictor of mental health. They proved that self-compassion is associated positively with life satisfaction, social relatedness (Neff, 2003b), reflective and affective wisdom, personal initiative, curiosity and exploration, optimism, positive affect, extraversion, agreeableness, conscientiousness (Neff, Rude, & Kirkpatrick, 2007), self-deception (Akın & Abacı, 2009), psychological well-being (Akın, 2008a), social relationship, emotional intelligence, self-determination (Neff, 2003a), learning-approach goals (Akın, 2008b), social support (Akın, Kayış, & Satıcı, 2011), and relational-interdependent self construal (Akın & Eroglu, 2013). The other studies have proved that self-compassion is negatively associated with depression, anxiety, rumination, thought suppression (Neff, 2003b), social anxiety, fear of negative evaluation (Werner et al., 2012), conscientiousness (Baker & McNulty, 2011), performance-approach/avoidance goals (Akın, 2008b), submissive behavior (Akın, 2009), interpersonal cognitive distortions (Akın, 2010a), loneliness (Akın, 2010b), internet addiction (Iskender & Akın, 2011), automatic thoughts (Akın, 2012), and neuroticism (Neff, Rude, & Kirkpatrick, 2007).

Social self-efficacy
Concept of social self-efficacy is based on Bandura's (1977, 1997) self-efficacy theory and is defined as personality belief of individuals related to their abilities while interacting with others (Bandura, 1997). Social self-efficacy contains social boldness, friendly behaviors, to join in a social group or activity, and getting and giving help (Bilgin & Akkapulu, 2007; Connolly, 1989) and is considered as a process that happens through the interaction among physiological, cognitive, behavioral, and environmental variables. Social self-efficacy is influenced by past accomplishments, mastery experiences, social modeling and persuasion, and psychological or emotional states (Dinç, 2011; McAuley & Courneya, 1993).

Social self-efficacy beliefs help students to transform their goals into actions establishing and maintaining real relationships in a social or an academic area (Dinç, 2011). These beliefs may also provide a more useful approach to psycho-social problems such as social anxiety and loneliness (Hermann & Betz, 2006). Therefore social self-efficacy is an important determinant in social relationships and interactions (Gresham, 1984). People with high social self-efficacy use more effective ways to solve problems and have self-confidence about their ability to overcome chaotic situations (Erozkan, 2013) than people with low social self-efficacy.

Previous studies have traditionally proved that social self-efficacy are positively related to self-esteem (Caprara & Steca, 2005; Connolly, 1989; Hermann & Betz, 2004, 2006; Smith & Betz, 2000, 2002), authentic living (Satici, Kayis, & Akin, 2013), social confidence (Anderson & Betz, 2001; Fan & Mak, 1998; Matsushima & Shiomi, 2003; Smith & Betz, 2000), anger control (Esen & Çelikkaleli, 2008), problem solving skills (Bilgin & Akkapulu, 2007; Di Giunta et al., 2010; Matsushima & Shiomi, 2003), cognitive, affective, and behavioral communication skills (Erozkan, 2013), constructive problem solving skills, and insistent-persevering problem solving skills (Erozkan, 2013). In contrary higher levels of social self-efficacy was found associated negatively with depression (Anderson & Betz, 2001; Bandura, Pastorelli, Barbaranelli, & Caprara, 1999; Hermann & Betz, 2004, 2006; Smith & Betz, 2002), social anxiety (Connolly, 1989; Fan, Meng, Gao, Lopez, & Liu, 2010; Sherer & Adams, 1983; Smith & Betz, 2000), trait anger (Esen & Çelikkaleli, 2008), self-alienating (Satici et al., 2013), internet addiction (İskender & Akin, 2010), game addiction (Jeong & Kim, 2011), approaching problems in a negative way, lack of self-confidence, and unwillingness to take responsibility problem solving skills (Erozkan, 2013), and shyness (Anderson & Betz, 2001; Hermann & Betz, 2004).

The present study
Because self-compassion buffers people against the negative social implications of their failures (Baker & McNulty, 2011; Leary, Tate, Adams, Allen & Hancock, 2007; Neff, Hsieh, & Dejitterat, 2005), most research has documented numerous interpersonal and social benefits of self-compassion such as; social relationship, self-determination (Neff, 2003a), extraversion (Neff, Rude, & Kirkpatrick, 2007), social relatedness (Neff, 2003b), and social support (Akın et al., 2011). Similarly, self-compassionate individuals are more likely to have fulfilled needs for relatedness (Neff, 2003a), suggesting that they may also be more likely to have positive relationship interactions. Also it was found that more self-compassionate people reported less negative self-feelings after imagining a stressful social event than did less self-compassionate people (Baker & McNulty, 2011; Leary et al., 2007). The current study aims to examine the predictive role of self-compassion on social self-efficacy. Self-compassion appears to enhance interpersonal well-being and therefore there may be a positive link between

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self-compassion and social self-efficacy. Based on the above relationships of self-compassion with social constructs it was hypothesized that self-kindness, common humanity, and mindfulness would be associated positively and self-judgment, isolation, and over-identification would be associated negatively with social self-efficacy.

METHOD

Participants
Participants were 299 university students (151 women, 148 men) enrolled in various undergraduate programs at Sakarya University Faculty of Education, Turkey. These programs were Turkish education (n=70), mathematics education (n=55), science education (n=82), and computer and instructional technology education (n=92). Of the participants, 73 were first-year students, 97 were second-year students, 60 were third-year students, and 69 were fourth-year student. Their ages ranged from 17 to 29 years old (M = 21.6, SD = 1.05) and GPA scores ranged from 1.83 to 3.72.

Measures
Self-compassion Scale. Self-compassion was measured by using Self-compassion Scale (Neff, 2003b). Turkish adaptation of this scale had been done by Akın, Akın, and Abacı (2007). Self-compassion Scale is a 26-item self-report measurement and consists of six sub-scales; self-kindness, self-judgment, common humanity, isolation, mindfulness, and over-identification. Each item was rated on a 5-point Likert scale (1=*strongly disagree* to 5=*strongly agree*). Language validity findings indicated that correlations between Turkish and English forms were .94, .94, .87, .89, .92, and .94 for six subscales, respectively. Results of confirmatory factor analysis indicated that the model was well fit. The goodness of fit index values of the model were RMSEA=.056, NFI=.95, CFI=.97, IFI=.97, RFI=.94, GFI=.91, and SRMR=.059. The internal consistency coefficients were .77, .72, .72, .80, .74, and .74 and the test-retest reliability coefficients were .69, .59, .66, .60 .69, and .56, for six subscales, respectively.

Perceived Social Self-efficacy Scale (PSSE). Social self-efficacy was measured using the Perceived Social Self-efficacy Scale (Smith & Betz, 2000). The scale contains 25 items (e.g., "Put yourself in a new and different social situation" and "Find someone to go to lunch with") on a 5-point Likert-type scale (1 = no confidence at all to 5 = complete confidence). The scale items are related to making friends, social assertiveness, pursuing romantic relationships, performance in public situations, groups and parties, and receiving and giving help. Smith and Betz (2000) reported that the PSSE scale had a single-factor structure. A sum of all scores yields a total score that ranges from 25 to 125; higher scores indicate higher levels of social self-efficacy. A Turkish adaptation of this scale has been devised by Palanci (2004). The internal consistency coefficient of the adapted Turkish form was .89. For test–retest reliability, the scale was administered to 100 undergraduate students twice in 4 weeks. The Pearson correlation coefficient was .68. In the present study, Cronbach alpha coefficient was α = .73.

Procedure
Permission for participation of students was obtained from related chief departments and students voluntarily participated in research. Completion of the scales was anonymous and there was a guarantee of confidentiality. The scales were administered to the students in groups in the classrooms. The measures were counterbalanced in administration. Prior to administration of measures, all participants were told about purposes of the study.

Statistical Analysis
In this research, hierarchical multiple linear regression analysis and Pearson correlation coefficient were used to investigate the relationships between self-compassion and social self-efficacy. The variables which were entered in multiple regression analysis were measured by summing the items of each scale. These analyses were carried out via SPSS 11.5.

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FINDINGS

Descriptive data and inter-correlations

Table 1 shows the means, standard deviations, inter-correlations, and internal consistency coefficients of the variables used.

Table 1:Descriptive Statistics, Alphas, and Inter-correlations of the Variables

Variables	1	2	3	4	5	6	7
1. Self-kindness	—						
2. Self-judgment	-.52**	—					
3. Common humanity	.60**	-.32**	—				
4. Isolation	-.44**	.69**	-.39**	—			
5. Mindfulness	.76**	-.45**	.61**	-.47**	—		
6. Over-identification	-.52**	.65**	-.36**	.73**	-.51**	—	
7. Social self-efficacy	.61**	-.52**	.51**	-.60**	.65**	-.62**	—
Mean	14.42	14.08	11.78	11.59	12.03	11.75	83.92
Standard deviation	4.29	4.33	3.14	3.99	3.97	4.31	16.42
Alpha	.70	.80	.73	.66	.75	.83	.77

 *$p < .05$, **$p < .01$

Table 1 shows descriptive statistics and correlations among the variables. Self-kindness (r=.61, $p<.01$), common humanity (r=.51, $p<.01$), and mindfulness (r=.65, $p<.01$) were found positively and self-judgment (r=-.52, $p<.01$), isolation (r=-.60, $p<.01$), and over-identification (r=-.62, $p<.01$) were found negatively associated with social self-efficacy. There were also significant correlations between dimensions of self-compassion.

Multiple Regression Analysis

Before applying regression, assumptions of multiple regression were checked. In order to run parametric tests the data were examined for normality by the Kolmogorov-Smirnov test. The Kolmogorov-Smirnov test indicated normality of distributions of test scores for all tests in the current study and therefore hierarchical multiple regression analysis has been conducted. Outliers are cases that have data values that are very different from the data values for the majority of cases in the data set. Outliers were investigated using Mahalanobis distance. A case is an outlier if the probability associated with its D^2 is .001 or less (Tabachnick & Fidell, 2001). Based on this criterion, eleven data were labeled as outliers and they were deleted. Multi-collinearity was checked and all the VIF values were less than 10 (Tabachnick & Fidell, 2001), tolerance values were above .20, and condition index values were smaller than 15. Hence, multicollinearity is unlikely to have had a significant influence on the results (O'Brien, 2007). Hierarchical multiple regression analysis was performed in which the dependent variable was flourishing and the independent variables were dimensions of self-compassion (Table 2).

According to the results of multiple regression analysis, summarized in Table 2, Mindfulness entered the equation first, accounting for 42% of the variance in predicting social self-efficacy (R^2=.42, adjusted R^2=.42, $F_{(1, 297)}$= 214,997, $p<.01$). Over-identification entered secondly accounting for an additional 12% variance (R^2=.54, ΔR^2=.12, adjusted R^2=.53, $F_{(2, 296)}$= 171,211, $p<.01$). Isolation entered thirdly accounting for an additional 2% variance (R^2=.56, ΔR^2=.02, adjusted R^2=.56, $F_{(3, 295)}$= 125,017, $p<.01$). Self-kindness entered fourthly accounting for an additional 1% variance (R^2=.57, ΔR^2=.01, adjusted R^2=.57, $F_{(4, 294)}$= 98,063, $p<.01$). Common humanity entered last, accounting for an additional 1% variance (R^2=.58, ΔR^2=.01, adjusted R^2=.57, $F_{(5, 293)}$= 80,148, $p<.01$). Despite the initial regression design included mindfulness, common humanity, self-kindness, over-identification, isolation, and self-judgment as independent variables, the last regression models involved mindfulness, over-identification, isolation, self-kindness, and common humanity as predictors of social self-efficacy and accounted for 58% of the variance. The standardized beta coefficients indicated the relative influence of the variables in last model with mindfulness (β= .26, $p<.01$), over-identification (β= -.22, $p<.01$), isolation (β= -.21, $p<.01$), self-kindness (β= .14, $p<.01$), common humanity (β= .10, $p<.01$), and all significantly influencing social self-efficacy and mindfulness was strongest predictor.

Table 2: Summary of multiple regression analysis for variable predicting social self-efficacy

Variables		*B*	Standart Error of B	*β*	*t*
Model 1	Constant				
	Mindfulness	2.680	.183	.648	14.663*
Model 2	Constant				
	Mindfulness	1.854	.190	.448	9.782*
	Over-identification	-1.504	.174	-.395	-8.622*
Model 3	Constant				
	Mindfulness	1.724	.188	.417	9.174*
	Over-identification	-.928	.224	-.244	-4.148*
	Isolation	-.937	.237	-.228	-3.958*
Model 4	Constant				
	Mindfulness	1.243	.251	.301	4.951*
	Over-identification	-.810	.225	-.213	-3.601*
	Isolation	-.942	.234	-.229	-4.024*
	Self-kindness	.661	.232	.173	2.852*
Model 5	Constant				
	Mindfulness	1.094	.260	.264	4.206*
	Over-identification	-.840	.224	-.221	-3.746*
	Isolation	-.880	.235	-.214	-3.751*
	Self-kindness	.542	.238	.142	2.277*
	Common Humanity	.538	.262	.103	2.051*

DISCUSSION AND CONCLUSION

The aim of this research was to investigate the predictive role of self-compassion on social self-efficacy. Findings demonstrated that there are significant relationships between these two variables. As expected mindfulness, common humanity, and self-kindness -adaptive dimensions of self-compassion- predicted social self-efficacy positively. On the other hand isolation and over-identification -maladaptive dimensions of self-compassion- predicted social self-efficacy negatively. These results indicated that the sense of care, connectedness, and resilience provided by mindfulness, common humanity, and self-kindness, namely by self-compassion, both are associated with greater emotional well-being more generally (Neff, 2009) and well-being within the context of interpersonal relationships (Yarnell & Neff, 2012).

Neff and Beretvas's (2012) study proved that the degree to which individuals are kind to themselves is linked to how kind they are to relationship partners, as assessed by partners' perceptions of their behavior. To the extent that they were high in mindfulness, common humanity, and self-kindness, people were perceived by partners as being significantly more caring (i.e., affectionate, warm, and considerate). In contrary feeling isolated and ruminating on negative self-related emotions may lead to a type of self-absorption that blocks connection in social relationships and inhibits social self-efficacy. The results found in the present study also support past findings of significant positive relationships between self-compassion and markers of social adjustment such as extraversion (Neff, Rude, & Kirkpatrick, 2007), social relatedness (Neff, 2003b), social relationship, self-determination (Neff, 2003a), and social support (Akın et al., 2011).

Self-compassionate individuals were more likely to have greater social self-efficacy because they are less likely to concern about the impression they make on other people, a concern that can lead to shy and withdrawn behavior (Neff, Rude, & Kirkpatrick, 2007). Also because self-compassionate people accept themselves as imperfect human beings, they may be more tended to accept other's limitations (Neff & Beretvas, 2012) and the kind, connected, and emotionally balanced stance of self-compassion may also associated with a greater ability to get along with others. Furthermore people with self-compassion do not meet the need for positive feelings by separating oneself from others but rather by incorporating appreciation of shared humanity into

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self-attitudes and treating oneself as others deserve to be treated (Neff et al., 2005). Common humanity, mindfulness, and self-kindness decrease emotional turmoil when attempting to decide how to resolve relationship conflicts. When relationship problems arise, these feelings allow people to soothe and calm the density of their emotions, so that they can solve their problems in a more balanced manner (Kelly, Zuroff, & Shapira, 2009). And thus greater self-compassion may be linked to a greater sense of social self-efficacy within relationships (Yarnell & Neff, 2012).

There were several limitations of this study that should be taken into account when evaluating the findings. First, participants were university students and replication of this study for targeting other student populations should be made in order to generate a more solid relationship among the constructs examined in this study, because generalization of the results is somewhat limited. Second, as correlational statistics were utilized, no definitive statements can be made about causality. And last, the data reported here for self-compassion and social self-efficacy are limited to self-reported data and did not include any observations of behavior. Consequently, the present research provides important information about the predictors of social self-efficacy and therefore would further our understanding of the psychological process of social self-efficacy. An increment in self-compassion will increase social self-efficacy.

In closing, results suggest that self-compassion is associated with healthy relationship functioning. Thus, the benefits of self-compassion may not only be personal, but also interpersonal. For this reason, counselors who work with individuals experiencing relationship conflicts with family, friends, or romantic partners might consider encouraging self-compassion as a way to solve these interpersonal problems in a psychologically beneficial manner (Germer, 2009; Yarnell & Neff, 2012). Additionally, encouraging the development of self-compassion should be useful individuals by helping them to counter destructive self-critical tendencies and deal with their negative emotions with greater clarity and equanimity (Neff, 2003a). Also there are enough positive indicators from self-compassion studies to suggest that more research on self-compassion would be a worthwhile (Neff, Hsieh, & Dejitterat, 2005).

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