

Self-criticism and how it affects psychopathology



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Self-criticism is how someone may view themselves, whether positive or negative. It is also described as “a conscious evaluation of oneself that can be a healthy and reflexive behavior but also can have harmful effects and consequences for an individual” (Kannan & Levitt, 2013, p. 166). We focused on the inadequate self, the hated self, and the effects it has on the well being of Rollins perspectives in psychology 101 students. In this lab, we measured self-criticism and psychopathology using the FSCRS (Forms of Self-Criticising/Attacking & Self-Reassuring Scale). Psychopathology is how we study different disorders, including genetic, biological, and social causes.

The main finding of the article, The phenomenology of self-critical thinking in people with depression, eating disorders, and in healthy individuals, was that the clinical group reportedly had higher levels of self-criticism. Participants from the clinical group had self-critical thoughts as a fixed trait, or this criticism was learned from others, whether it was directly or indirectly (Thew, Gregory, Roberts, & Rhimes 2017 p. 761). The clinical group also felt less in control when compared to the nonclinical group. The clinical group had higher levels of “self-criticism, negative perfectionism, depression symptoms, functional impairment from self-criticism, rumination, and items of the inadequate self FSCRS subscale compared to controls” ((Thew, Gregory, Roberts, & Rhimes 2017 p. 756). The two clinical groups were similar to each other but completely different from the nonclinical group. The nonclinical group displayed higher levels of self-esteem and self-critical thoughts. I would use this article as a guideline for my experiment. I would come up with my hypothesis and then compare mine to the articles. This

article would also help understand the proper way to measure self-criticism. This experiment focused on certain disorders, so I would base my experiment around different ones. The main finding of, Forms of Self-Criticising/Attacking & Self Reassuring Scale: Psychometric properties and normative study, was that the nonclinical group was more self-reassuring and less self-critical than the clinical group (Baiao, Gilbert, McEwan, & Carvalho 2015 p. 438). The authors proposed their research question by having groups of clinical and nonclinical participants. They also took gender, population, and previous studies as a way to conduct their research. This article focused more on gender and population, so I would use this article to help see if there is a gender bias when it comes to self-criticism and psychopathology.

There is a strong relationship between self-criticism and psychological distress. Based on the articles, forms of self-criticism seem more prominent in eating disorders and depression. Self-report symptoms might not be as accurate, because it is easier for participants to lie about their answers. Given this information, I hypothesized that as psychological distress increases, self-criticism increases as well.

Method

The participants in this study were 62 Rollins College perspective in psychology 101 students. The hypothesis was tested by giving the students a survey that described psychological distress at school and day-to-day life, and if that leads to any self-critical thoughts. We measured each construct by using FSCRS to measure self-criticism, and CCAPS-34 to measure

psychological distress. The FSCRS is a 22 item scale that measures self-criticism and being able to address self-reassurance. The self-report measures how the students report their well-being and symptoms relating to the study.

Results

Results showed that there was a weak positive correlation between inadequate self and psychological distress. There was also no correlation between the hated self and psychological distress. In the inadequate self, $r = .1$, which indicates a positive correlation between the inadequate self and psychological distress. In the hated self $r = .541$, which indicates a moderate correlation between the hated self and psychological distress. The p-value was $.000$ which indicates that the results were highly significant.

Discussion

The data fits with my previously formed hypothesis. I hypothesized that as psychological distress increases, self-criticism also increases. The data showed a positive correlation between the inadequate self and psychological distress, which helped prove the hypothesis to be correct. This data fits in with the previous research. In both articles, there was a positive correlation between self-criticism and psychopathology. In the article, Forms of Self-Criticising/Attacking & Self Reassuring Scale: Psychometric properties and normative study, it showed that the inadequate self had the highest correlation. That is the same as in our data. The limitation of this study was that the sample size was only 62 students from a 101 psychology class.

There was also a gender bias, as there are more females than males in our <https://assignbuster.com/self-criticism-and-how-it-affects-psychopathology/>

class. The students knew about the topic and it was also self-reported, so that makes it easier to lie. This could result in some of the data being skewed. Bringing awareness of the correlation between self-criticism and psychopathology can help improve the well-being of the participants, as well as others. This can be done by creating programs that allow students to meet with others going through the same problem as them. For the participants in this particular study, Rollins offers free therapy which is extremely beneficial. Being able to talk to someone about psychological distress can help lower self-criticism.

References

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