RELATIONSHIP BETWEEN SELF-COMPASSION, PERFECTIONISM, AND BODY

IMAGE SATISFACTION AMONG UNIVERSITY STUDENTS IN MALAYSIA

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Satisfaction among University Students in Malaysia

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APPROVAL FORM

This research paper attached hereto, entitled "Relationship between Self-Compassion, Perfectionism and Body Image Satisfaction among University Students in Malaysia" prepared and submitted by " Chang Dixon, Pua Xin Ci, and Shirley Ng Sock Li" in partial fulfillment of the requirements for the Bachelor of Social Science (Hons) Psychology is hereby accepted.

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Abstract

University students face many challenges such as body preoccupation, social comparison, and self-evaluation which cause them to be at risk of developing negative body image. Furthermore, limited studies are done to examine self-compassion within Malaysian context. Therefore, the objective of the present study is to identify the gender difference in self-compassion among university students and to examine the unique predictor of body image satisfaction between self-compassion and perfectionism. This study was conducted using cross-sectional survey research design and convenience sampling to recruit participants. An online self-administered questionnaire was used to collect data on participant's demographic information, self-compassion level, perfectionism and body image satisfaction. A pilot study was conducted prior to the actual study and showed high reliability for all three scales respectively: $\alpha= .758$, $\alpha= .839$, and $\alpha= .836$. Independent t-test showed that there is no gender difference in self-compassion among university students while multiple linear regression analysis revealed that adaptive perfectionism was the most significant predictor of body image satisfaction. This study is able to provide implication to the counselors, university personnel and students in developing programs and interventions to assist students in reducing their body image dissatisfaction. This study also able to help students to recognize the effect of perfectionism on body image satisfaction and hence enhancing self-respect and appreciation towards own body.

Keywords: self-compassion, perfectionism, body image satisfaction

DECLARATION

We declare that the material contained in this paper is the end result of our own work and that due acknowledgement has been given in the bibliography and references to ALL sources be they printed, electronic or personal.

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Chapter I

Introduction

Background of Study

Generally, the concept of body image is an individual's self-perception, attitudes, thoughts and feelings of their own bodies and explains how the bodies are presented to other people (Kamaria, Vikram, & Ayiesah, 2016). Body image can be either viewed as positive or negative and is influenced by many factors, including family environment, peers pressure, social media, cultural differences, and other environmental factors. Human society has placed a great value on physical appearance and body image. Therefore, it has become an increasingly concerned about how we present ourselves to other people.

According to Kamaria et al. (2016), Malaysian especially the young generations pay more attention to their perceived body image and eating habits as well. A person's physical appearance is one of the most important constructs because it is the first characteristic that presented to others in the naturally occurring daily interactions (Pop, 2016). A significant amount of pressure and awareness placed upon adolescents as they desire a positive body image in order to conform to the "ideal" that portrayed by the popular culture and mass media (Khan et al., 2011). For example, males demonstrate a high level of desire to have a muscular physique and tend to be more concerned with their shoulders, chest and arms, while thinness and slender are perceived as the ideal body shape for females (Kamaria et al., 2016). Therefore, the level of body image satisfaction would likely to be affected as well. A research has shown that these internalized societal body ideals, such as ultra-slender body and thin-ideal body are positively linked to body image dissatisfaction (Yamamiya, Cash, Melnyk, Posavac, & Posavac, 2005).

University is a setting where students are likely to experience the ups and downs during the time in university. It would seem the university students not only have to manage a lot of the academic tasks, there are many social demands that they have to fulfill in the competitive environment (Duarte, Ferreira, Trindade, & Pinto-Gouveia, 2015). A study involving 300 participants from private and public sector universities, Abbasi and Zubair (2015) found that university students are more likely to aware of their body and occupied in the issues of social comparison, self-assessment, destructive opinions, and life dissatisfaction. Those issues faced by the students are correlated with the impairment of academic performance in school and their daily functioning will be affected as well (Abbasi & Zubair, 2015). Celio et al. (2006) has discovered that body image has been seen as a prevalent and normative experience among college-aged students especially female students are more focus on their body weight, eating habits and related behaviors. The perception of body image is crucial for university students because maintaining a healthy body weight and physical appearance become more popularity among friends (Kamaria et al., 2016). Hence, they become highly focused on developing a desirable and culturally acceptable body image in order to be accepted by the society.

In attempting to achieve and maintain the desirable body image, strict dieting has become a common strategy among university students to lose weight (Yahia, El-Ghazale, Achkar, & Rizk, 2011). Study conducted by Kamaria et al. (2016) also showed that people practice dangerous and unhealthy weight control behaviors such as starving, taking diet products, skipping meals, extreme exercising, using drugs and smoking. A continuous desire among students to portray an idealized body shape would eventually lead to an increased problem. These unhealthy eating habits and hazardous health decisions would eventually cause an individual to become a less active, less sociable and more fatigue students, which would lead to poor quality of life and depression (Kamaria et al., 2016). The actual-ideal

discrepancy of body image that exuberated by the social media was correlated with an increase in body shape dissatisfaction, binge eating disorder, diet practices and consumption of weight-control pills (Martin, 2010). Related literature pointed out the increment in body weight and body shape concerns will increase the risk of developing pathology eating behaviors (Garner & Garfinkel, 1980). In sum, it can be concluded that body image becomes a more important and controversial issue in today's society.

Some researchers have proved that self-compassion plays as an important predictor in the body image perceptions and level of satisfaction. Self-compassion is described as an individual is treated with the attitude of caring, unconditional kindness and non-judgmental understanding towards personal inadequacies and failure, distress events, and difficult life experiences (Neff, 2003a). Past study has attempted to address that being compassionate towards oneself is correlated with a healthy body image and eating behavior, yet the relationships examined at the between-persons level only (Kelly & Stephen, 2016). More specifically, the study investigated at the between-persons level rather than within-persons level since the self-compassion has been conceptualized as a variable that more towards personal oneself (Kelly & Stephen, 2016). However, the findings showed self-compassionate people will experience a healthier body image and a more adaptive and intuitive form of eating (Kelly & Stephen, 2016). Another research involving university female athletes indicated that students with less self-compassionate are more likely to experience the feeling of distress with the perceptions of how others judge one's physical appearance (Seekis, Bradley, & Duffy, 2017). In consequence, negative perceptions of body image and body image dissatisfaction will be induced in the person who did not show compassion for oneself.

According to Albertson, Neff, and Dill-Shackleford (2015), self-compassion has the tendency to reduce the level of body dissatisfaction and promote satisfaction to evaluate own self. In addition to buffering the negative effects, self-compassion is a beneficial

characteristic as people with this character are psychological healthier than those who lack of. An individual who practices self-compassion is positively linked to cheerfulness, emotional intelligence, curiosity, positive thinking, and personal initiative (Albertson et al., 2015). As introduced by Hi çdurmaz and Aydin (2017), being compassionate towards oneself is positively linked to life satisfaction, job satisfaction, social connectedness, happiness, positive moods and healthy behavior conducts. On the other hand, people with self-compassion are less likely to experience anxiety, depression, negative evaluation of oneself, perfection and other pathological concerns (Hi çdurmaz & Aydin, 2017). Further, some researchers have conceptualized self-compassion as a buffer to regulate and reduce the negative feelings about the self and distressing events as well. Therefore, human's abilities to appreciate their bodies can be improved and in the other way, eating pathology can be weakened by self-compassion in order to accept and respect their bodies as well (Albertson et al., 2015).

Another variable that has been shown to influence on the forming body image is perfectionism. Perfectionism is a complex personality trait characterized by a person who wants to be perfect in all aspect of lives. They tend to pursue unachievable goals, strive for flawlessness and set high performance standards (Flett & Hewitt, 2002). Scholars have acknowledged that perfectionism is a normative concern among college students that significantly distressing them. People with perfectionism are more likely to experience different kinds of issues than non-perfectionists. Once the person fails to meet these goals and standards, the feelings of dissatisfaction, a sense of inadequacy and excessive self-criticism can be observed (Mehr & Adams, 2016). According to Hi çdurmaz and Aydin (2017), a positive association between perfectionism with burnout, perceived stress and psychopathology symptoms has been established.

In a college student study conducted by Mehr and Adams (2016), researchers have concluded that the psychological distress are different between adaptive and maladaptive perfectionism. The findings showed adaptive perfectionism has a negative or no relationship with psychological distress (Aldea & Rice, 2006; Elion, Wang, Slaney, & French, 2012), whereas maladaptive perfectionist are accounted for the effect on psychological concerns (Ashby, Rice, & Martin, 2006; Elion et al., 2012). Study reported the college students with maladaptive perfectionism have a higher chance to develop the symptoms of depression than non-perfectionist (Ashby et al., 2006). However, the discrepancy between the actual performances and unrealistic high goals is closely matched with the discrepancy between the actual and ideal body image. In this study, it would seem that an exploration of the university students' self-compassion, perfectionism and body image satisfaction is important to examine in the present research.

Problem Statement

Majority of the males and females tend to be overly concerned about their look in life because they are frequently being judged by themselves and others. This happens because our society emphasizes and values individuals who have a perfect body image. Individuals tend to be bullied, victimized and avoid interacting with others if they do not fit the set of ideal body standards (Holubcikova, Kolarcik, Geckova, Van Dijk, & Reijneveld, 2015). As they feel insecure and dissatisfied with their bodies, they will invest excessively in their appearance so that they can obtain the ideal body image (Martin, 2010).

Consequently, the number of individuals with body image dissatisfaction has increased and this may be due to social comparison towards models in the media and cultural influences (Martin, 2010; Akan & Grilo, 1995). This issue should be viewed seriously because body image dissatisfaction can begin to develop at a very young age and it may persist to increase as individual ages. According to Lukman (2010), about 65% of female adolescents aged between 13 to 16 years old in Malaysia want to become thinner, and 10% of them are at risk for developing eating disorders.

Moreover, individual may be vulnerable to various health and mental health problems if body image dissatisfaction exceeds moderate levels after the individual is unable to meet the unrealistic expectations. This is particularly dangerous for perfectionist individuals as they often believe that the ideal standards are a part of perfection and therefore work extra hard to meet the ideal standards. To name a few, the person may develop stress, depression, anxiety, eating disorders, low self-esteem and negative body attitudes which has strong links to overall wellbeing and psychological functioning (Duchesne et al., 2016; Manaf, Saravanan, & Zuhrah, 2016; Noles, Cash, & Winstead, 1985).

Some of the individuals who dissatisfied with their body can develop self-defeating behaviors too. For instance, they may go to extreme by taking pills to reduce body weight or over-exercising at harmful levels (Vander Wal, 2011; Lynch, Heil, Wagner, & Havens, 2008). On the other hand, more and more people are interested in obtaining plastic surgery due to body image dissatisfaction (Lee & Lee, 2016). This happens because individuals who are less self-compassionate always see their bodies in an unrealistic manner and demonstrate greater body image concerns (Homan & Tylka, 2015).

Besides, most Malaysian studies focus on self-esteem and to our knowledge, limited studies are done to examine self-compassion as a predictor of body image satisfaction among university students in Malaysia. Furthermore, past studies on self-compassion are less comprehensive and focus more in the Western culture while much of the researches comparing gender differences demonstrate inconsistency in the results. In this study, the researchers are also keen to know which specific forms of perfectionism are related to body image dissatisfaction because past researchers have suggested that perfectionism is one of the risk factors that cause body image dissatisfaction (Wade & Tiggemann, 2013). In addition, most studies on body image satisfaction focus mainly on females only because distorted body image is said to be a phenomenon that is more commonly occurred in females. In fact, Turel et al. (2018) state that males do suffer from poor body image too and it has become increasingly common nowadays.

As such, we should not under-recognized self-compassion and perfectionism in the context of body image satisfaction among Malaysian university students. University life is considered a high-risk period because students experience more freedom and it can impact students' health and wellbeing. In addition, university students face many challenges such as body preoccupation, social comparison and self-evaluation due to increased exposure of more people and environment (Duarte et al., 2015; Wasylkiw, MacKinnon, & MacLellan, 2012).

As a result, it is worried that university students may pick the wrong role models as their benchmarks in pursuit of an ideal body image. Previous study by Eow and Gan (2018) also reported that 76.4% of the students in a Malaysian university were not satisfied with their body. This shows that majority of the university students have negative feelings about their own body which indicates a higher risk for body image dissatisfaction.

Hence, in this study, we aim to investigate the role that is played by self-compassion and perfectionism in predicting body image satisfaction among university students in Malaysia. This study is carried out to fulfill the following research objectives.

Research Objectives

1. To identify the gender difference in self-compassion among university students.

2. To examine the unique predictor of body image satisfaction between self-compassion and perfectionism.

Significance of Study

Body image often forms the first impression people perceived of others in a social interaction. It is considered as a public eye to evaluate people (Abbasi & Zubair, 2015). According to Grogan (2006), body image is a mental picture people form in mind about their body such as the body size, shape, and attractiveness of one's self. It has a sociological meaning whereby how the adults perceive themselves in family and society (Grogan, 2006). Research found that young adult often relate their physical appearance with their overall self-worth (Sanchez & Crocker, 2005). It is a common norms that many university students especially women believe that having attractive-body image would lead them to happiness (Neff & Pommier, 2013). However, one may feel shame, upset, depression, loss of self-confidence, and isolation if they do not possess ideal body image (Yazdani et al., 2018).

According to Toselli and Spiga (2017), body image dissatisfaction was one of the major concerns residing among university students. Therefore, the finding of this study is important in bringing awareness to the society in improving understanding of body image satisfaction related to factors such as self-compassion and perfectionism. The result of this research is able to provide insights to students on the benefits of self-compassion in promoting body image satisfaction (Wasylkiw et al., 2012). In this regard, through evaluation of self-compassion level, types of perfectionism and body image satisfaction, students are able to realize that being self-judgmental, isolated and over identified while setting unrealistic high goal will result in body image dissatisfaction. With these findings, students are able to adopt more self-accepting attitude and positive view of self in perceiving their body image (Barnett & Sharp, 2016).

Moreover, the result of this research is helpful for practitioners such as counselor, clinical psychologists, teachers, and student affair department in developing and implementing programs, workshops or talks that help students to understand how their cognitive beliefs impact own body image (Gross, 2014). These programs aim to educate and promote healthy attitudes and perspectives among university students. Interventions programs play a vital role in promoting change of perfectionist thoughts and self-judging thoughts among students. This could be done by encouraging people to reappraise maladaptive cognitions to a more humanity stance by recognizing and accepting own flaws and mistakes (Ferrari, Yap, Scott, Einstein, & Ciarrochi, 2018).

Furthermore, the finding of this research is able to increase university students' self-respect and appreciation towards on body image while less affected by social comparison. An increase of self- kindness, humanity and mindfulness towards own body image helps to challenge against the stereotypes and negative judgments often portrayed by social media on ideal body image (Barnett & Sharp, 2016). Wasylkiw et al. (2012) suggest that self-

compassion can decrease body image appearance concerns if women with high self-compassion do not compare with others. Hence, consequences of poor body image including shame, low self-esteem, and anxiety can be lessened when they accept and comfortable with their body image.

Last but not least, this research aims to promote self-compassion in Malaysia context. Self-compassion is a relatively new concept to Western Psychology founded by Neff (2009), which able to regulate negative emotions such as depression, anxiety and sadness. Self-compassion aims to help students to practice kindness towards self, non-judgmental understanding towards incompetence and common humanity in realizing and admitting negative events in life (Neff, Kirkpatrick, & Rude, 2007). However, only limited study have been done in Asian context on the topic of self-compassion (Ying & Tang, 2015). Hence, this research aims to fill in the research gap and provide information to practitioners on the role of self-compassion in predicting body image satisfaction among university students in Malaysia. With these results, researchers are able to understand self-compassion in Malaysian context and make comparison on self-compassion among university students in different societies such as Asian versus Western.

Research Questions

1. Is there a significant gender difference in self-compassion?

2. Which is the unique predictor of body image satisfaction between self-compassion and perfectionism?

Hypotheses

H_1: There is a significant gender difference in self-compassion among university students.

H_2: There is at least one factor that predicts the body image satisfaction of university students.

Conceptual Definitions

Self-compassion. Self-compassion is defined as treating oneself with greater kindness and warmth by not making any harsh self-criticism even though one faces difficulties and failures in life (Neff, 2009). According to Neff (2009), self-compassion has three main components, namely self-kindness, common humanity, and mindfulness.

Perfectionism. Perfectionism is defined as the strive for perfection while setting excessively high personal goals and overly critical evaluations of self (Flett & Hewitt, 2002). It can be categorized into "adaptive perfectionism" and "maladaptive perfectionism" (Khani, Abdi, & Norhbezare, 2013). According to Rice and Stuart (2010), adaptive perfectionism refers to people who have high standards for themselves while able to tolerate their flaws while maladaptive perfectionism refers to people with high personal standards but tend to be more self-critical.

Body Image Satisfaction. Body Image Satisfaction is defined as how an individual feels and thinks about his or her own body in the aspects of body shape, size and appearance which is affected by cultural, social, individual and biological factors (Grogan, 2006). Individual who is satisfied with his or her own body tend to have more positive thoughts about the body (Grogan, 2006).

Operational Definitions

Self-compassion. Self-compassion is measured by Self-Compassion Scale (SCS), a 26-items scale with six subscales measuring an individual's level of self-kindness, self-judgment, common humanity, isolation, mindfulness and over-identification. The higher score indicates higher levels of self-compassion.

Perfectionism. Perfectionism is measured by Short Almost Perfect Scale (SAPS), an eight items scale which measure two subscales of perfectionism: Standards and Discrepancy. Higher scores on Standards but lower scores in Discrepancy shows adaptive perfectionism while high scores on both Standards and Discrepancy shows maladaptive perfectionism.

Body image satisfaction. Body Image Satisfaction is measured by short version of Multidimensional Body–Self Relations Questionnaire (MBSRQ), a 34-items scale with five subscales which measure specific dimension of appearance-related body image. The higher the scores of MBSRQ, the greater the level of body image satisfaction of an individual.

Chapter II

Literature Review

Self-Compassion and Body Image Satisfaction

Self-compassion is a potential variable that can reduce body dissatisfaction and promote healthier body image among individuals for several reasons. There are three components of self-compassion, namely self-kindness, common humanity and mindfulness and all these three components are correlated with body image perception (Rodgers et al., 2017). For self-kindness, self-compassion means treating oneself with greater kindness and warmth by not making any harsh self-criticism when one experiences distress and disappointment (Neff, 2009). For common humanity, it means individuals who are self-compassionate will recognize that failure is merely a shared human experience and do not over identify with the problems (Neff, 2009). For mindfulness, it means individuals who are self-compassionate will always be mindful of their thoughts and feelings and they will never exaggerate or suppress them (Neff, 2009).

Therefore, self-compassion can somehow benefit individuals by preventing the happening of maladaptive outcomes that are caused by risk factors. For instance, instead of constantly feels bad about one's body image and catching up with personal or societal standards, individuals who are self-compassionate will accept and respect their bodies regardless of imperfections because they know that no one in the world is perfect. This is consistent with a study conducted by Breines, Toole, Tu, and Chen (2013) that self-compassion can actually decrease body shame. Interestingly, a meta-analysis reported that females have a lower level of self-compassion as compared to males (Yarnell et al., 2015).

Body image dissatisfaction has become more common these days due to media and cultural influences. As such, individuals will have more negative thoughts and negative evaluation on their bodies due to higher levels of social comparison (Myers & Crowther, 2009). Hence, individuals who do not fit the ideal standards may feel embarrassed and then develop body image dissatisfaction (Wasylkiw et al., 2012). However, individuals who are able to take care of themselves compassionately are less affected by societal and media pressures (Wasylkiw et al., 2012).

Furthermore, self-compassion is also linked with lesser body preoccupation, higher appreciation of one's body, higher acceptance in one's physical self and reduced thin-ideal internalization (Wasylkiw et al., 2012; Homan & Tylka, 2015). Overall, few studies had demonstrated positive relationship between self-compassion and body image which indicated that higher levels of self-compassion was linked to greater body image satisfaction (Albertson et al., 2014; Ferreira, Pinto-Gouveia, & Duarte, 2013; Abbasi & Zubair, 2015).

Perfectionism and Body Image Satisfaction

According to a research conducted by Wade and Tiggemann (2013) suggested that the presence of high level of perfectionism has been played a significant role for the later development of eating disorder pathology. A positive association between perfectionism and eating disorder has been well established. Body image dissatisfaction emerges as a result from the actual-ideal discrepancy which may promote unhealthy eating behaviors (Ferreira, Pinto-Gouveia, & Duarte, 2014). Therefore, whether perfectionism will influence body image satisfaction is essential to be investigated.

Perfectionism is a term frequently researched and it has been conceptualized as a multidimensional construct. A perceived discrepancy must be made between different forms of perfectionism which are normal or adaptive perfectionism and neurotic or maladaptive

perfectionism (Lo & Abbott, 2013). According to multidimensional perspective, adaptive perfectionists are those who set high standards, yet to feel satisfied with the one's performances when those standards are met (Lo & Abbott, 2013). On the other hand, maladaptive or neurotic perfectionism involves the pursuing of unachievable goals, striving for perfection, and setting of high performance standards (Flett & Hewitt, 2002). However, the failure to achieve the desired goals is associated with negative feelings about oneself and dissatisfaction (Enns & Cox, 2002).

In studies examining perfectionism, it has been shown that people express this characteristic individually as not everyone needs to be perfect all the time. Other than social media and popular cultural influences, personality features have been recovered to be a significant key factor in the body image satisfaction in both genders (MacNeill, Best, & Davis, 2017). Examples include Big Five personality trait (openness, neuroticism, conscientiousness, extraversion, and agreeableness) and perfectionism in predicting the body image (Rasooli & Lavasani, 2011). Individuals with a high level of perfectionism are associated with setting high personal standards for themselves and behaving according to their expectations (Hewitt & Flett, 1991). Regarding the body weight and body shape, perfectionists have an intense desire to achieve the "perfection".

According to research's result indicated that perfectionists prefer to have an ideal body shape (Arji, Borjali, Sohrabi, & Farrokhi, 2016) and they need to show up their appearance perfectly to others (Rasooli & Lavasani, 2011). However, individuals who are maladaptive perfectionist will perceive an inconsistency between the ideal body image and their actual body shape. They are often like to compare with the unrealistic media standards of physical attractiveness and ultimately resulting in body depreciation when the standards are not able to reach (Iannantuono & Tylka, 2012). By comparing the ideal or undesirable body image, the individuals tend to view themselves as less attractive than other people.

Anton, Perri, and Riley (2000) have suggested the body image self-discrepancies between the ideal and actual body image are very important factor in developing body dissatisfaction, especially among adolescents. In another study, Zoletić and Duraković-Belko (2009) proposed that people who drive for a slim body display a high level of body dissatisfaction, tend to be a perfectionist, and more eating disturbances are emerged. As a result, researchers have been proven perfectionism was linearly associated with body image satisfaction (Pearson & Gleaves, 2006).

More specifically, a few studies have examined the adaptive and maladaptive perfectionism's association with body image satisfaction. According to the previous literature, researchers have revealed negative perfectionism has a positive relationship with body image dissatisfaction, where positive perfectionism was negatively correlated with dissatisfaction of body image (Pearson & Gleaves, 2006). In addition to the study conducted by Rasooli and Lavasani (2011), a negative relationship between adaptive perfectionism and body image dissatisfaction and positive relationship between maladaptive perfectionism and body image dissatisfaction have been found. The relationship can be explained by adaptive perfectionists are able to tolerate when they fall short of those high standards and will lead to a low level of dissatisfaction. The healthy perfectionists always enjoy their strivings and experience the feelings of pride, whereas the neurotic perfectionists are more prone to feel shame and guilt (Stoeber, Harris, & Moon, 2007).

Past studies have examined the relationship between perfectionism and body image satisfaction, yet there are inconsistencies among various research findings. The current study aims to fill the gaps regarding the relationship between normal or neurotic perfectionism and body image satisfaction. There is one study differs somehow from prior findings which pointed out that adaptive and maladaptive perfectionism was positively associated with body image dissatisfaction (Pearson & Gleaves, 2006). Wade and Tiggemann (2013) have been

hypothesized that body dissatisfaction would be associated with both adaptive and maladaptive perfectionism. On the other hand, there is a significant positive relationship between body image dissatisfaction and disordered eating behaviors (Barnett & Sharp, 2016). However, Teixeira, Pereira, Marques, Saraiva, and Macedo (2016) proved that the maladaptive dimension of perfectionism was positively associated with eating behavior disturbances, yet negatively linked to self-esteem and body dissatisfaction. In accordance with other researchers, adaptive and maladaptive perfectionism are related to a greater risk of eating disorder symptoms (Boone, Soenens, Braet, & Goossens, 2010).

Nevertheless, the study showed an indirect contradiction with the previous researches. Healthy perfectionism was negatively correlated with body image dissatisfaction (Teixeira et al., 2016), yet significantly associated with high levels of disordered eating (McVey, Pepler, Davis, Flett, & Abdolell, 2002). Therefore, the inconsistency relationship between perfectionism and body image dissatisfaction has made a significant contribution to current study.

Gender Difference and Self-Compassion

Past researches findings have shown inconsistent result of gender difference in self-compassion. Neff (2003) stated that female are more self-compassionate than male as female are often perceived being better in common humanity, more independent and more emphatic than men. However, several existing research evidences show that women reported lower level of self-compassion compared to men. Raes (2010) explained the findings that females are more self-deprecating and having more ruminative coping style than men. This result is consistent with findings by Neff and Pommier (2013) showing that women often self-sacrifice for the needs or benefits of others, which impairs their ability to be kind for themselves and resulting in low self-compassion. Similarly, Yarnell et al. (2015) conducted a

meta-analysis and discovered that females are less self-compassionate than males as females are more self-critical and judgmental and use negative self-talk more frequent. A recent study also shows that male shows significant higher self-compassion scores than female when administered on 515 adults from general population in Australia (Ferrari et al., 2018).

Many studies investigating relationship between gender differences in self-compassion have been done in different population such as adolescents, adults as well as university students. Some studies suggest that gender difference in self-compassion is associated with age while some evidences revealed that there are no differences. Neff and McGehee (2010) conducted a research and found adolescents sample do not show significant gender differences in self-compassion while self-compassion seems to be higher in young male adults sample. Both the samples are from large Southwestern city in United States. Similarly, another research conducted by Muris, Meesters, Pierik, and de Kock (2016) with Dutch adolescents did not found gender differences in self-compassion. However, they discovered that males reported higher levels of self-compassion among older adolescents when the adolescents are categorized into younger and older adolescents. In contrast, no significant difference has been found in self-compassion among male and female adolescents sample in Australia while females reported lower self-compassion in adult sample (Ferrari et al., 2018).

Past research findings have shown inconsistent result of gender differences in self-compassion within different cultural context. Implication of self-compassion level for males and females differ in western and non-western cultural context (Sun, Chan, & Chan, 2016). In a research done by Birkett (2014), no significant difference in self-compassion scores has been observed between Chinese (collectivist cultures) and American (individualistic cultures) students. However, it was found that females scored significantly lower than males in both groups. Their study also demonstrated that regardless cultures, males scored higher in overall

self-compassion and mindfulness subscale while female scored higher in the self-judgment subscale in self-compassion. Iskender (2009) inferred that a gender difference in self-compassion is not significant in Turkish sample of 390 university students. Neff, Pisitsungkagarn, and Hsieh (2008) conducted a study in America and conclude that females had significantly lower self-compassion than males. They also reported that Thailand has the highest overall levels of self-compassion, followed by United States and Taiwan. It is being explained that individual from Eastern culture are having interdependent sense of self at the same time influenced by the beliefs and teachings of Buddhism which promote compassionate view. However, sometimes, Asians are likely to show more self-critical behaviors compared to Westerners in improving self (Neff et al., 2008).

In sum, past researches has shown inconsistent findings of self-compassion in males and females. Some studies show that there were significance gender differences whereby female scored lower in self-compassion as compared to male; however, some studies revealed that gender difference in self-compassion is not significance. Therefore, as suggested by Zessin, Dickhäuser, and Garbade (2015), more research is needed to clarify findings on this area as there are many explanation of factors such as recent events that one experienced, social economic status and education level that could result in gender differences in self-compassion. Besides that, most of the studies were carried out in Western countries, thus, more research have to be carried out in Eastern countries including Asian country.

Theoretical Background

Social Mentality Theory. According to Gilbert (2007), Social Mentality Theory (SMT) was developed to explain the way different components of our minds are stimulated to respond to different stimuli. Social mentalities are the internal systems that involved the

exchange of different social signals in activating different patterns of cognition, affection and behaviors (Hermanto & Zuroff, 2016).

According to this theory, there are two internal systems that posed by human being which are threat defense system and self-soothing system. Threat defense system is related with vulnerability feelings, defensiveness and self-criticism whereas self-soothing system is represented by secure attachment feelings, safeness and self-acceptance (Barnett & Sharp, 2016). They explained that when the self-critical aspect of maladaptive perfectionism stimulated the threat defense system, it is likely that negative cognitive belief and affective responses will be triggered to increase negative view of self and overall body image satisfaction.

Self-compassion is helpful in deactivating threat system and activates self-soothing system. The components of self-compassion such as self-acceptance and self-kindness provoke self-soothing system. It may help to dominate humanity of self over the criticism towards oneself. Self-compassion is helpful in activating positive cognition and developing a more positive accepting view of self. Therefore, self-compassionate individual is unlikely to feel unsatisfied with own body image or imposes unrealistically high perfections on oneself (Wasylkiw et al., 2012). In this study, we theorize that high levels of self-compassion will decrease the levels of maladaptive perfectionism and result in lower level of body dissatisfaction among university students.

Self-Discrepancy Theory. Self-discrepancy theory was developed by Edward Tory Higgins in 1987. It hypothesizes two cognitive dimensions which involve the three elements of self and viewpoints of the self (Higgins, 1987). The three elements of the self include the actual self, ideal self, and ought self. Actual self touches on the characteristics that a person actually has. Ideal self talks about the characteristics that a person ideally wishes to have.

Lastly, ought self discusses about the characteristics that one should or ought to hold through social comparison. Self-discrepancy theory also suggests that ideal discrepancy occurs when actual characteristics from the standpoint are distinct with the ideal self that one would like to attain. If that were to happen, the individual will experience negative emotions (Higgins, 1987). Furthermore, individual will experience more dissatisfaction and disappointment if a big gap between actual self and the ideal self is found (Higgins, 1987).

It was reported that the discrepancies in body image occurred due to the unrealistic beauty standards that were frequently used to judge one's body and physical features (Jung, Lennon, & Rudd, 2001). According to Williamson, Gleaves, Watkins, and Schlundt (1993), discrepancy between self and ideal body size estimates is conceptualized and validated as a measure of body image dissatisfaction which is widely used in the present. Furthermore, a study conducted by Kowner (2004) suggested that discrepancy in the self and ideal was correlated negatively with body image satisfaction and appearance evaluation. Moreover, few studies have also supported that self-discrepancy is related to body dissatisfaction, and it can cause emotional distress and the occurrence of self-defeating behaviors among individuals (Solomon-Krakus et al., 2016; Vartanian, 2012; Strauman, Vookles, Berenstein, Chaiken, & Higgins, 1991; Woodman & Hemmings, 2008).

Conceptual Framework

The focus of this research is on self-compassion, perfectionism and body image satisfaction among university students in Malaysia. Self-compassion and perfectionism will be the independent variables while body image satisfaction will be the dependent variable. According to Neff (2009), self-compassion means treating oneself with greater kindness and warmth by not making any harsh self-criticism when one experiences distress and disappointment. Furthermore, researchers have suggested that individuals with high level of

perfectionism are associated with setting high personal standards for themselves in order to strive for the perfections (Hewitt & Flett, 1991). Therefore, we are interested to find out whether self-compassion or perfectionism is the better predictor of body image satisfaction since not many studies are conducted using these three variables. The conceptual framework for this research is postulated in Figure 1.1.
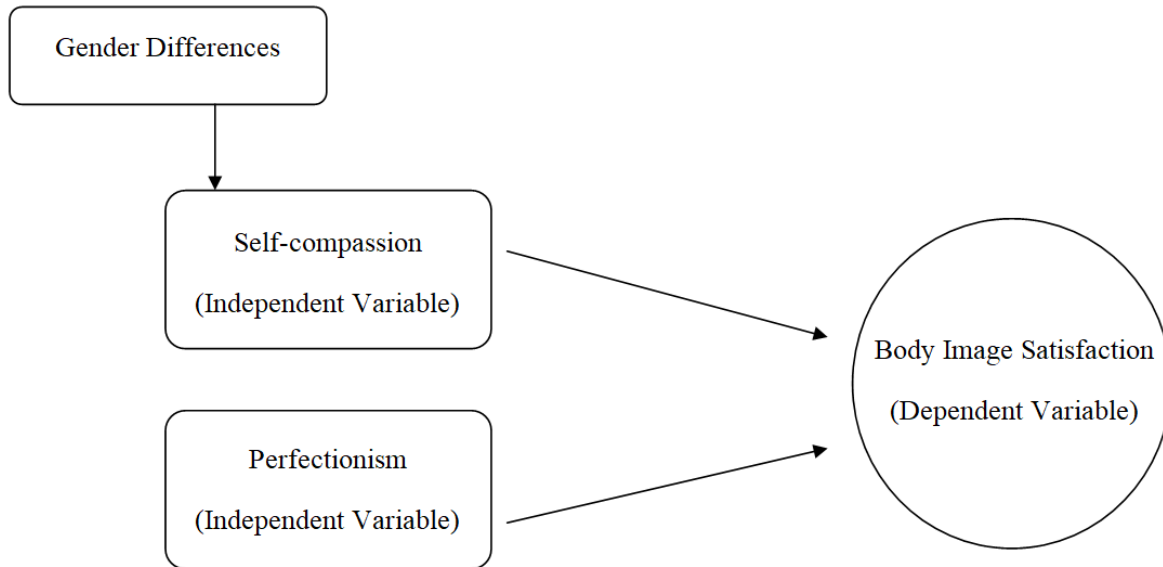
Figure 1.1 Conceptual framework

Chapter III

Methodology

Research Design

This study employed quantitative survey research to collect and analyze numerical data in examining the relationship between self-compassion, perfectionism and body image satisfaction among university students in Malaysia. A cross-sectional survey research design was used to collect data to make inferences about a population of interest at a single point of time (Ballou & Lavrakas, 2008). In this study, multiple samples were chosen from university student population at one time to respond to this study. This research design was chosen in this study as it allowed the researchers to collect information from respondents in a short period of time. Overall, quantitative research was used in this study as it was suitable in testing hypotheses and deriving inferences by using statistical techniques that helped the researchers to predict scores on one variable from scores on other variables (Sukamolson, 2007).

Sampling Techniques

Sample size. A total of 182 university students participated in this study using online self-administered questionnaire. However, 49 responses were excluded from the study as they did not meet the requirements of the study. After exclusion, a total of 136 participants remained for the study which consisted of 62 male students and 74 female students. They were aged between 19 to 26 years old. The respondents were made up of 94.1% of Chinese, 2.9% of Malay, 2.2% of Indian and 0.7% of other race. Majority of the respondents having Buddhism (52.9%) as their religion, followed by Christianity (39.7%), Islam (2.9%), Hinduism (1.5%) and others (2.9%) such as Taoism or no religion. Among 136 participants,

78.7% which is 107 respondents were private universities' students while 21.3% which is 29 of them were public universities' students.

Sampling method. Samples were recruited to participate in the study using convenience sampling. It was a non-probability sampling method where individuals were chosen randomly to participate in the study as they were attainable easily in a quick and economical way (Ballou & Lavrakas, 2008). This sampling method was used as it only required lesser time to collect participant's responses and most importantly cost-effective. Convenience sampling was used in this study to collect responses through the internet since our targeted respondents were available over the internet at different places. Therefore, the researchers were able to collect responses from respondents who were pursuing studies at different universities at short time instead of visiting university by university to collect data.

Research location. This study was conducted among university students from both Malaysian public and private universities. In this study, samples were randomly targeted to include students from different states in both West and East Malaysia. Majority of the participants were mainly from private universities while the rest were from public universities. Descriptive statistics of demographic information showed that the respondents were students from 18 private universities and 13 public universities. In short, selections of different universities in Malaysia as the sampling location enabled the findings of this research to be generalized to the entire population with a higher reliability.

Procedure

An online questionnaire was constructed using Qualtrics and distributed to university students from public and private universities in Malaysia using anonymous link. The link was sent personally to participants for data collection by the researchers as well as sharing it on Facebook group. The survey comprised of an informed consent form, demographic

information, and three measurements. At first, an informed consent form was attached to the online questionnaire and participants were required to read through and understand the topic of study. For the participants who agreed with the terms and willing to participate in the study, they were required to click on the "I agree to participate" button. After that, they were asked to complete the online questionnaire and if participants had any doubts, they may contact our group leader through email. A pilot test was administered with 50 participants to test the reliability of the instruments in Malaysian university students' context. The data collection was continued until sufficient responses were collected. The survey was opened from 16th January 2019 to 26th February 2019 for data collection. A total of 182 responses were collected and being analyzed using SPSS.

Instruments

A self-administered online questionnaire which contained four sections, section A to section D was designed to collect data for this research. The first section of the questionnaire required respondents to fill up their demographic information such as age, gender, ethnicity, etc. The following sections included three validated and reliable instruments such as Self-Compassion Scale (SCS), Short Almost Perfect Scale (SAPS), and Multidimensional Body Self Relations Questionnaire Appearance Scale (MBSRQ-AS).

Self-Compassion Scale (SCS). Self-Compassion Scale is a 26-items instrument developed by Neff (2003) which used to assess participant's self-compassion level. It is made up of six subscales measuring Self-Kindness (5 items), Self-Judgment (5 items), Common Humanity (4 items), Isolation (4 items), Mindfulness (4 items), and Over-Identification (4 items). SCS was scored on a 5 point Likert scale from 1 (almost never) to 5 (almost always). The scores of negative subscale items such as self-judgment, isolation, and over-identification are reversed before calculating the mean of each subscale. Finally, a grand

mean of all subscales were calculated. Higher scores indicate higher level of self-compassion (Neff, 2003). This scale has an internal reliability of α= .94 when administered with undergraduate students from large Southwestern university (Neff, Kirkpatrick, & Rude, 2007).

Short Almost Perfect Scale (SAPS). Short Almost Perfect Scale (SAPS) is an eight items self-report measure of perfectionism on two subscales: Standards and Discrepancy. Standards measures how high are the standards people set for themselves while Discrepancy measures the perceived gap between personal standards and one's evaluation of having those standards met (Slaney, Rice, Mobley, Trippi, & Ashby, 2001). Participants respond to the items using a 7-point Likert scale ranging from 1= strongly disagree to 7 = strongly agree. The total scores of each subscale are computed. According to Rice, Richardson, and Tueller (2014), high scores on Standards shows adaptive perfectionism while high scores on Discrepancy shows maladaptive perfectionism. This scale has a reliability of α = .87 for Standards and α = .84 for Discrepancy in a sample of 749 undergraduate students from a south-eastern university in United States (Rice et al., 2014).

Multidimensional Body Self Relations Questionnaire Appearance Scale

(MBSRQ-AS). Multidimensional Body Self Relations Questionnaire Appearance Scale is a 34-items instrument that measure only appearance-related components of the body image construct (Cash, Morrow, Hrabosky, & Perry, 2004). It assesses on five subscales including Appearance Evaluation (7 items), Appearance Orientation (12 items), Body Area Satisfaction (9 items), Overweight Preoccupation (4 items), and Self Classified Weight (2 items). To complete this scale, participants were asked to indicate to what extent they agree with the 34 statements on a 5-point Likert scale ranging from definitely disagree to definitely agree. The total scale scores ranged from 34 to 170. Higher scorers have more positive and satisfaction with their appearance while lower scorers are more likely to be unhappy with

their physical appearance (Cash et al., 2004). This scale has a reliability of $\alpha = .84$ in the context of university students in Rawalpindi and Islamabad, Pakistan (Abbasi & Zubair, 2015).

Data Analysis

The collected data was analyzed using SPSS version 23. The demographic information such as age, gender, race, religion and universities were examined using descriptive statistics analysis. The frequencies mean, median, variance and standard deviations of each component were shown. Independent T-test was used to examine gender difference in self-compassion level among university students. In addition, the predicting role of self-compassion and perfectionism on body image satisfaction were investigated through Multiple Linear Regression Analysis.

Pilot Study

A pilot study was conducted prior to the actual study to test the reliability of the instruments used in Malaysia context. A total of 50 responses were being included in the pilot study. It has been found that all three scales have high reliability of $\alpha = .758$ for Self-Compassion Scale (SCS), $\alpha = .839$ for Short Almost Perfect Scale (SAPS) and $\alpha = .836$ for Multidimensional Body Self Relation Questionnaire Appearance Scale (MBSRQ-AS).

Chapter IV

Results

The finding of this research was reported using descriptive statistics and inferential statistics. In descriptive statistics, the statistical results of respondents' demographic information and variables' total scores were shown using frequencies, percentage, mean, variance and standard deviations. Inferential statistics was run to provide statistical results of the two independent variables and dependent variable using appropriate statistical analysis such as Independent t-test and Multiple regression analysis. Assumption checking was conducted prior to multiple regression analysis to ensure the accuracy of the test results. Filtration of data had been conducted to ensure normal distribution of data, linearity relationship between variables, nonmulticollinearity data and homoscedastic data.

Demographic information

A total of 182 respondents were recruited to participate in this study. However, 29 responses had been excluded due to incomplete participation while four responses were excluded as they violated the criteria required of the study. Another ten responses were further excluded as they were identified as outliers in the study. After filtration and exclusion, 136 responses remained for the study.

The demographic information of the participants was showed in Table 4.1. Among 136 respondents, there are 62 male students and 74 female students participated in this study. Their age ranged between 19 to 26 years old, with 22 years old shows highest mode. Majority of the respondents were Chinese (94.1%), Malay (2.9%), Indian (2.2%) and others (0.7%). Moreover, most of the respondents had the faith of Buddhism (52.9%), followed by Christianity (39.7%), Islam (2.9%), Hinduism (1.5%) and others (2.9%) such as Taoism or no

religion. Last but not least, 78.7% of the respondents were pursuing studies in private

universities while 21.3% were in public universities.

Table 4.1

Demographic Information of Participants (N=136)

	Frequencies (n)	Percentage (%)
Gender		
Male	62	46
Female	74	54
Race		
Malay	4	2.9
Chinese	128	94.1
Indian	3	2.2
Others	1	0.7
Religion		
Islam	4	2.9
Buddhism	72	53.9
Christianity	54	39.7
Hinduism	2	1.5
Others	4	2.9
Universities		
Private	107	78.7
Public	29	21.3

Gender Difference and Self-compassion

Research Question 1: Is there a significant gender difference in self-compassion?

H₁: There is a significant gender difference in self-compassion among university students.

Independent t-test was administered to analyze gender difference in self-compassion

among university students in Malaysia. The results showed that there was no significant

gender difference in self-compassion, $t(112.5) = 1.672$, $p = .097$ (see Table 4.2). Both male

students ($M = 3.199$, $SD = 0.428$) and female students ($M = 3.088$, $SD = 0.326$) have similar

self-compassion level. Therefore, the alternative hypothesis was rejected.

Table 4.2

Gender Difference in Self-Compassion

	Gender				df	t	95% Confidence Interval of the Difference		Sig.
	Male		Female						
	M	SD	M	SD			Lower	Upper	
Self-compassion	3.199	0.428	3.088	0.326	112.501	1.672	-.021	.242	.097

Note. M= Mean, SD= Standard Deviation

Self-compassion, Perfectionism, and Body Image Satisfaction

Research Questions 2: Which is the unique predictor of body image satisfaction between self-compassion and perfectionism?

H$_2$: There is at least one factor that predicts the body image satisfaction of university students.

Multiple regression analysis was used to determine the most significant predictors between self-compassion and perfectionism towards body image satisfaction among university students in Malaysia. The results showed that the model was statistically significant, $F(3,132) = 3.658$, $p < .05$ and accounted for 5.6% of variance (See Table 4.3). It was found that adaptive perfectionism ($\beta = .340$, $p = .002$) significantly predicted body image satisfaction among university students in Malaysia but not self-compassion ($\beta = -.099$, $p = .244$) and maladaptive perfectionism ($\beta = -.206$, $p = .059$).

Hence, H_0 was rejected and H_2 was supported as there is at least one factor that predicts the body image satisfaction among university students in Malaysia. It was found that adaptive perfectionism strongly predicted body image satisfaction.

Table 4.3

Model Summary of Multiple Regression Analysis

Model	R	R^2	Adjusted R^2	Std. Error of the Estimate	Durbin-Watson
1	.277	.077	.056	11.141	1.931

Note.   Predictors: (Constant), Self-compassion, Perfectionism

Dependent variable: Body Image Satisfaction

Table 4.4

ANOVA Statistics between Self-Compassion, Perfectionism, and Body Image Satisfaction

Model	Sum of Squares	df	Mean Square	F	Sig.
Regression	1362.463	3	454.154	3.658	.014
Residual	16386.883	132	124.143		
Total	17749.346	135			

Note.   Predictors: (Constant), Self-compassion, Perfectionism

Dependent variable: Body Image Satisfaction

Table 4.5

Multiple Regression Analysis of Self-Compassion and Perfectionism in Predicting Body Image Satisfaction

Model		Unstandardized Coefficients		Standardized Coefficients		Sig.
		β	Std. Error	β	t	
1	(Constant)	107.709	9.947		10.829	.000
	Self-compassion	-2.988	2.556	-.099	-1.169	.244
	Adaptive Perfectionism	.958	.303	.340	3.165	.002
	Maladaptive Perfectionism	-.597	.314	-.206	-1.904	.059

Note.   Dependent variable: Body Image Satisfaction

Chapter V

Discussion & Conclusion

Analysis by Hypothesis

H_1: *There is a significant gender difference in self-compassion*

The result of this study revealed that there is no gender difference in self-compassion between male and female university students in Malaysia. The result was consistent with previous studies conducted by Ying and Hashima (2016), which showed that there were no significant gender differences documented in self-compassion when analyzed on male and female undergraduates in Malaysia. This result is also similar to a study done by Neff (2008) and found no gender differences in self- compassion level among Asians samples as compared to East culture's samples.

These results could be explained by the perspectives of cultures in the society. Malaysia, an Asian country with collectivist cultures has been presumably highlighted to have an interdependent view of self that emphasized social connectedness, conformity and the act of caring for others (Markus & Kitayama, 1991). As compared to people in Western countries, they are more likely to have an independent view of self which they focus on fulfilling personal needs. As suggested by Neff and McGehee (2010), social connectedness increased the feelings of belongingness to one's social environment and reduce the feelings of separation, and hence reducing over-identification. This enables the individual to see their experience as a common human experience.

Besides that, the observed result could be explained by the perspective of religion in practicing self-compassion. From the results of this study, it is observed that most of the respondents are having Buddhism and Christianity as their religion. A similar level of self-compassion level among males and females may be influenced by the teachings of Buddhism which propose that suffering, failure and imperfection are seen as an inevitable part of human

life (Neff, Pisitsungkagarn, & Hsieh, 2008). Therefore, Buddhism followers are encouraged to be self-compassionate and accepting one's shortcomings. Moreover, according to Homan (2014), people are likely to practice self-compassion towards themselves by having more self-worth of love and kindness in recognizing their own weaknesses and shortcomings if they have a strong attachment to God. He also suggested that people who perceive God as loving and accepting are able to extend compassion to themselves.

H1: *There is at least one factor that predicts the body image satisfaction of university students*

It is hypothesized that at least one factor can predict body image satisfaction. Therefore, perfectionism and self-compassion were examined and the predictive power was assessed as well. Perfectionism can be separated into two subscales which are standards and discrepancy. Based on the findings, it was found that standards perfectionism plays an important role in predicting the level of body image satisfaction. Standards reflects the adaptive dimensions of perfectionism that measures how high the expectations or strivings people set for themselves (Rice et al., 2014). The current results showed a positive association was established between adaptive perfectionism and body image satisfaction. It has been indicated that people who have high standards of perfectionism would lead to an increased level of body image satisfaction.

The results can be explained by adaptive perfectionists strive towards a higher performance standard but do not become overly frustrated when they fail to achieve (Slaney, Rice, & Ashby, 2006). Regarding the body image, the intense desire to achieve "perfection" drives people towards a more ideal body shape and body weight. Even they perceive any discrepancies or gaps between the high standards and their actual performance, they are less likely to experience anxiety and depression (Mathew, Dunning, Coats, & Whelan, 2014). As

introduced by Pearson and Gleaves (2006), they are able to re-evaluate their desired goals

when needed and feel a sense of satisfaction when goals are met (Pearson & Gleaves, 2006).

Therefore, adaptive perfectionism is related to optimizing human potential.

Adaptive perfectionism is a positive motivation that lies behind the perfectionist in

order to move people strives for success (Terry-Short, Owens, Slade, & Dewey, 1995).

Unlike maladaptive perfectionism, positive perfectionism was characterized by realistic and

reasonable self-expectations that accompanied by a sense of satisfaction in accomplishments

(Terry-Short et al., 1995). Hence, when they fall short of attaining their desired standards,

healthy perfectionists are able to tolerate their flaws and accept the non-perfection (Lundh,

2004). The results of the study support the positive relationship between adaptive

perfectionism and high levels of body image satisfaction. In short, adaptive aspect of

perfectionism was found to be the most dominant predictor of body image satisfaction among

university students.

Meanwhile, the findings revealed that discrepancy (maladaptive dimensions of

perfectionism) is not the predictor in body image satisfaction of university students.

Maladaptive perfectionism is a risk factor in the development of body image dissatisfaction.

Maladaptive perfectionism has driven people to attain unrealistic goals and the pursuit of

excessively high standards of performance (Rice et al., 2014). Therefore, unhealthy

perfectionists perceive differences between their desired goals and achieved results. In terms

of the body image concern, students with maladaptive perfectionism are more likely to

compare their physical appearance with media exposure of idealized body image

(Iannantuono & Tylka, 2012). It will then lead to self-criticism when students are not able to

meet the ideal standards. As a consequence, students tend to view themselves as less

attractive and ultimately lead to the lowering of body esteem and confidence. Consistent with

previous research demonstrated that the perceived discrepancies related to body image can

cause body dissatisfaction in the population of America university students (Sheldon, 2010).

Hence, the research showed perfectionism discrepancy has no correlation with body image

satisfaction and no prediction was found between these two variables in the current study.

The results of this study showed that self-compassion does not predict body image

satisfaction. This result is contrary to a past study conducted by Adams and Leary (2007)

which showed that self-compassion was significantly positively predicted body image

satisfaction. Current research helps people to understand that by having a high ability of self-

compassion does not necessarily predicted body image satisfaction of an individual.

One of the possible interpretations is that Asians who practiced interdependent culture tend to

be more self-critical towards themselves as self-criticism is adaptive in helping an individual

to be aware of their personal shortcomings in order for them to improve in functioning

harmoniously with others in the society (Heine, as cited in Yamaguchi, Kim, & Akutsu,

2014). However, to a certain extent, it reflected concerns with social conformity and harsh

self-regulatory tactics which hinders self-compassion (Kagitcibasi, 2005). Therefore, people

who are self-critical tend to be motivated in engaging with behaviors such as dieting and

restricted eating to overcome their perceived shortcomings to achieve body image satisfaction

(Wasylkiw et al., 2012). Hence, it is difficult to relate self-compassion with self-critical

aspect in predicting body image satisfaction.

Moreover, the result of the findings may be interpreted in a way that students in the

current sample were more concerned with how others perceive their body image rather than

how they look at themselves compassionately. Students also tend to feel inferior and

dissatisfied when comparing their body image with with the idealized body image standards

portrayed in the social media (Latiff, Muhamad, & Rahman, 2018). Researchers have

revealed that university students are more worried about how the body is perceived and

evaluated by others (El Ansari, Vodder Clausen, Mabhala, & Stock, 2010) and they apt to

compare themselves with the ideal body image (Zaccagni, Masotti, Donati, Mazzoni, & Gualdi-Russo, 2014). As suggested by Zaccagni et al. (2014), how others perceive an individual's appearance and attractiveness is an important determinant of one's level of body image satisfaction. This is due to the fact that people evaluate themselves based on the evaluations given by others to determine their values and self-worth in the mind of others (Gilbert & Irons, 2009). Therefore, they tend to increase self-blame, social inhibition and self-judgment as if negative comments on their body image were given by others.

Implication of the study

There are a few implications for counselors, university personnel and students. First, it is important to recognize that males may begin to develop body image concerns more often too and body image dissatisfaction is no longer a female's problem. Hence, higher education counselors can develop programs and interventions that assist both male and female university students to reduce their body image dissatisfaction. As such, higher education counselors can start to develop strategies to reduce the perfectionism tendencies of university students. By doing so, it can increase university students' positive feelings about their body and ultimately it can enhance their level of body image satisfaction. Besides, university personnel need to be taught to distinguish between adaptive and maladaptive perfectionism because adaptive and maladaptive perfectionism has different effects on the university students. Furthermore, university students will have a better understanding about the effects of perfectionism on body image satisfaction. It can create awareness of body image issues and eventually it can increase university students' self-respect and self-appreciation towards their own body. Last but not least, the study contributes to the existing literature on gender differences in self-compassion and the results may be helpful for psychologists to understand self-compassion within Malaysian context.

Limitations of the study

The study has several limitations. First, the researchers did not explore the variables in a clinical sample. It was possible that individuals who were clinically diagnosed with eating disorders could in certain ways affect the relationship among the three variables. Mantilla and Birgegard (2015) observed that clinical samples with eating disorders symptoms are twice more likely than other typical non-clinical samples to develop poor self-image. Moreover, bias in the participants' responses could exist since the researchers were using self-report questionnaires as the measures. Hence, if the participants chose to hold back their feelings or respond in a more socially and culturally acceptable manner, accuracy of the results could be affected. King and Brunner (2000) suggested that social desirability bias is a threat to self-report data and usually individuals respond in such a way to avoid excessive criticism or gain social approval.

Besides, another limitation was related to sample size; the number of participants recruited in the study is 136. Therefore, the sample might not be entirely representative because small sample size could result in low level of significance. Using a small sample size in studies can easily generate a low statistical power which in turn decreases the chance of detecting a real effect during statistical analysis (Button et al., 2013). Furthermore, the use of convenience sampling was also one of the limitations. It was found that the sample was predominantly Chinese and there was a lack of racial and ethnic diversity among the participants. According to Kennedy, Templeton, Gandhi, and Gorzalka (2004), males and females of different ethnicities differ in their vulnerability for body image dissatisfaction. Last but not least, the current study only focused on the relationship between self-compassion, perfectionism and body image satisfaction without taking into account of other possible socio-demographic, psychological and biological variables which might yield different results. It should be noted that factors such as sexual orientation, socioeconomic status, personality

and parental, peer or media influences can have an impact on body image satisfaction too (Peplau et al., 2008; McCabe & Ricciardelli, 2003; Allen & Walter, 2016; Story, French, Resnick, & Blum, 1995).

Recommendations for future research

Future researchers are recommended to investigate the variables in a clinical sample that has eating disorders to see if the outcomes would be the same. Besides, random sampling and a larger sample size of participants should be included in future research to enhance the significance of findings. Furthermore, future researchers are encouraged to use a more diversified population of university students that is composed of different races and religions. In addition, future researchers might also want to further examine other risk factors such as socio-demographic, psychological and biological factors that can influence body image satisfaction among university students in Malaysia. Last but not least, future researchers can seek to find out why the predictive value of self-compassion as revealed in the study is so low. It appears that the levels of self-compassion differ across cultures and cultural differences in the six subcomponents should also be further investigated (Neff, Pisitsungkagarn, & Hsieh, 2008).

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Appendix A

Questionnaire

Default Question Block

UNIVERSITI TUNKU ABDUL RAHMAN
FACULTY OF ARTS AND SOCIAL SCIENCE
BACHELOR OF SOCIAL SCIENCE (HONS) PSYCHOLOGY

Research Title

Relationship between Self-compassion, Perfectionism and Body Image Sastisfaction among University Students in Malaysia

Introduction

You are hereby invited to participate in a study of the relationship between self-compassion, perfectionism and body image satisfaction among university students in Malaysia. This research is conducted to fulfill the requirements of UAPZ 3023 FINAL YEAR PROJECT II. Your participation in this research is highly appreciated.

Procedure

This questionnaire consists of four main sections. In the first section, you will be asked to fill in your demographic details. The next three sections will be made up of questions related to self-compassion, perfectionism and body image satisfaction. You are required to complete ALL the sections. This survey will take approximately 15 minutes or less to complete.

Confidentiality

All information obtained from participants will be kept private and confidential under the protection of strict rules. The information collected will only be reported as group data with no identifying information and it will only be used for research purpose. Furthermore, all information will be kept in a secure location where only our group members are able to access.

Participation

Your participation in this study is completely voluntary. Risks are minimal for involvement in this study and should you experience discomfort or uneasiness while responding to the questionnaire, you may withdraw at any time without consequences. If you have any questions, kindly contact Chang Dixon (dixonchang97@1utar.my), Pua Xin Ci (cindypua97@1utar.my) or Shirley Ng Sock Li (shirleyngsockli@1utar.my).

Agreement

I have read and understood about the description stated above and decided to take part in this study.

○ Yes, I agree to participate in this study

○ No, I disagree to participate in this study

Part A: Demographic Information

PART A: Demographic Information

Instruction: Please fill in the information below.

Gender

○ Male

○ Female

Age

[   ]

State of origin (e.g. Selangor)

[   ]

University (e.g. Universiti Tunku Abdul Rahman)

[   ]

Course of study (e.g. Psychology)

[   ]

Year & Trimester of Study (e.g. Y3S2)

[   ]

Race

○ Malay
○ Chinese
○ Indian
○ [   ] Others (Please specify)

Religion

○ Islam
○ Buddhism
○ Christianity
○ Hinduism
○ [   ] Others (Please specify)

Block 2

Part B: Self-compassion Scale (SCS)

HOW I TYPICALLY ACT TOWARDS MYSELF IN DIFFICULT TIMES

Please read each statement carefully before answering. Please respond using the scale ranging from **1 (Almost never)** to **5 (Almost always)**.

	1 (Almost never)	2	3	4	5 (Almost always)
1. I'm disapproving and judgmental about my own flaws and inadequacies.	○	○	○	○	○

	1 (Almost never)	2	3	4	5 (Almost always)
2. When I'm feeling down I tend to obsess and fixate on everything that's wrong.	O	O	O	O	O
3. When things are going badly for me, I see the difficulties as part of life that everyone goes through.	O	O	O	O	O
4. When I think about my inadequacies, it tends to make me feel more separate and cut off from the rest of the world.	O	O	O	O	O
5. I try to be loving towards myself when I'm feeling emotional pain.	O	O	O	O	O
6. When I fail at something important to me I become consumed by feelings of inadequacy.	O	O	O	O	O
7. When I'm down and out, I remind myself that there are lots of other people in the world feeling like I am.	O	O	O	O	O
8. When times are really difficult, I tend to be tough on myself.	O	O	O	O	O
9. When something upsets me I try to keep my emotions in balance.	O	O	O	O	O
10. When I feel inadequate in some way, I try to remind myself that feelings of inadequacy are shared by most people.	O	O	O	O	O
11. I'm intolerant and impatient towards those aspects of my personality I don't like.	O	O	O	O	O
12. When I'm going through a very hard time, I give myself the caring and tenderness I need.	O	O	O	O	O

	1 (Almost never)	2	3	4	5 (Almost always)
13. When I'm feeling down, I tend to feel like most other people are probably happier than I am.	O	O	O	O	O
14. When something painful happens I try to take a balanced view of the situation.	O	O	O	O	O
15. I try to see my failings as part of the human condition.	O	O	O	O	O
16. When I see aspects of myself that I don't like, I get down on myself.	O	O	O	O	O
17. When I fail at something important to me I try to keep things in perspective.	O	O	O	O	O
18. When I'm really struggling, I tend to feel like other people must be having an easier time of it.	O	O	O	O	O
19. I'm kind to myself when I'm experiencing suffering.	O	O	O	O	O
20. When something upsets me I get carried away with my feelings.	O	O	O	O	O
21. I can be a bit cold-hearted towards myself when I'm experiencing suffering.	O	O	O	O	O
22. When I'm feeling down I try to approach my feelings with curiosity and openness.	O	O	O	O	O
23. I'm tolerant of my own flaws and inadequacies.	O	O	O	O	O
24. When something painful happens I tend to blow the incident out of proportion.	O	O	O	O	O

	1 (Almost never)	2	3	4	5 (Almost always)
25. When I fail at something that's important to me, I tend to feel alone in my failure.	O	O	O	O	O
26. I try to be understanding and patient towards those aspects of my personality I don't like.	O	O	O	O	O

Block 3

Part C: Short Almost Perfect Scale (SAPS)

The following items are designed to measure certain attitudes people have toward themselves, their performance, and toward others. It is important that your answers be true and accurate for you. In the space next to the statement, please enter a number from **"1" (strongly disagree)** to **"7" (strongly agree)** to describe your degree of agreement with each item.

	1 Strongly disagree	2 Disagree	3 Slightly Disagree	4 Neutral	5 Slightly Agree	6 Agree	7 Strongly Agree
1. I have high expectations for myself.	O	O	O	O	O	O	O
2. Doing my best never seems to be enough.	O	O	O	O	O	O	O
3. I set very high standards for myself.	O	O	O	O	O	O	O
4. I often feel disappointment after completing a task because I know I could have done better.	O	O	O	O	O	O	O
5. I have a strong							

	① Strongly disagree	2 Disagree	3 Slightly Disagree	4 Neutral	5 Slightly Agree	6 Agree	⑦ Strongly Agree
need to strive for excellence.							
6. My performance rarely measures up to my standards.	O	O	O	O	O	O	O
7. I expect the best from myself.	O	O	O	O	O	O	O
8. I am hardly ever satisfied with my performance.	O	O	O	O	O	O	O

Block 4

Part D: Multidimensional Body Self Relations Questionnaire Appearance Scale (MBSRQ-AS)

The following pages contain a series of statements about how people might think, feel, or behave. You are asked to indicate the extent to which each statement pertains to you personally. There are no right or wrong answers. Just give the answer that is most accurate for you. Please be completely honest and answer the items. Using a scale ranging from **1 (definitely disagree)** to **5 (definitely agree)** to indicate your answer for each statement.

	1 Definitely disagree	2 Mostly disagree	3 Neither agree nor disagree	4 Mostly agree	5 Definitely agree
1. Before going out in public, I always notice how I look.	O	O	O	O	O
2. I am careful to buy clothes that will make me look my best.	O	O	O	O	O
3. My body is sexually appealing.	O	O	O	O	O
4. I constantly worry about being or becoming fat.	O	O	O	O	O
5. I like my looks just the way they are.	O	O	O	O	O

	1 Definitely disagree	2 Mostly disagree	3 Neither agree nor disagree	4 Mostly agree	5 Definitely agree
6. I check my appearance in a mirror whenever I can.	O	O	O	O	O
7. Before going out, I usually spend a lot of time getting ready.	O	O	O	O	O
8. I am very conscious of even small changes in my weight.	O	O	O	O	O
9. Most people would consider me good-looking.	O	O	O	O	O
10. It is important that I always look good.	O	O	O	O	O
11. I use very few grooming products.	O	O	O	O	O
12. I like the way I look without clothes on.	O	O	O	O	O
13. I am self-conscious if my grooming isn't right.	O	O	O	O	O
14. I usually wear whatever is handy without caring how it looks.	O	O	O	O	O
15. I like the way my clothes fit me.	O	O	O	O	O
16. I don't care what people think about my appearance.	O	O	O	O	O
17. I take special care with my hair grooming.	O	O	O	O	O
18. I dislike my physique.	O	O	O	O	O
19. I am physically unattractive.	O	O	O	O	O
20. I never think about my appearance.	O	O	O	O	O
21. I am always trying to improve my physical appearance.	O	O	O	O	O

1/29/2019   Qualtrics Survey Software

	1 Definitely disagree	2 Mostly disagree	3 Neither agree nor disagree	4 Mostly agree	5 Definitely agree
22. I am on a weight-loss diet.	O	O	O	O	O

For the remainder of the items, use the response scale given with the item and choose the answer that most described you.

23. I have tried to lose weight by fasting or going on crash diets.

O 1. Never
O 2. Rarely
O 3. Sometimes
O 4. Often
O 5. Very often

24. I think I am:

O 1. Very Underweight
O 2. Somewhat Underweight
O 3. Normal Weight
O 4. Somewhat Overweight
O 5. Very Overweight

25. From looking at me, most other people would think I am:

O 1. Very Underweight
O 2. Somewhat Underweight
O 3. Normal Weight
O 4. Somewhat Overweight
O 5. Very Overweight

For question 26-34, use 1 (very dissatisfied) to 5 (very satisfied) to indicate how dissatisfied or satisfied you are with each of the following areas or aspects of your body:

	1 Very dissatisfied	2 Mostly dissatisfied	3 Neither satisfied nor dissatisfied	4 Mostly satisfied	5 Very satisfied
26. Face (facial features, complexion)	O	O	O	O	O
27. Hair (color, thickness, texture)	O	O	O	O	O
28. Lower torso (buttocks, hips, thighs, legs)	O	O	O	O	O
29. Mild torso (waist, stomach)	O	O	O	O	O
30. Upper torso (chest or breasts, shoulders, arms)	O	O	O	O	O
31. Muscle tone	O	O	O	O	O
32. Weight	O	O	O	O	O
33. Height	O	O	O	O	O
34. Overall appearance	O	O	O	O	O

Powered by Qualtrics

Appendix B

SPSS Output: Pilot Test (Reliability of Self-Compassion Scale)

Case Processing Summary

		N	%
Cases	Valid	50	100.0
	Excluded[a]	0	.0
	Total	50	100.0

a. Listwise deletion based on all variables in the procedure.

Reliability Statistics

Cronbach's Alpha	Cronbach's Alpha Based on Standardized Items	N of Items
.758	.757	26

SPSS Output: Pilot Test (Reliability of Short Almost Perfect Scale)

Case Processing Summary

		N	%
Cases	Valid	50	100.0
	Excluded[a]	0	.0
	Total	50	100.0

a. Listwise deletion based on all variables in the procedure.

Reliability Statistics

Cronbach's Alpha	Cronbach's Alpha Based on Standardized Items	N of Items
.839	.845	8

SPSS Output: Pilot Test (Reliability of Multidimensional Body Self Relation Questionnaire

Appearance Scale)

Case Processing Summary

		N	%
Cases	Valid	50	100.0
	Excluded[a]	0	.0
	Total	50	100.0

a. Listwise deletion based on all variables in the procedure.

Reliability Statistics

Cronbach's Alpha	Cronbach's Alpha Based on Standardized Items	N of Items
.836	.831	34

SPSS Output: Independent t-test

Group Statistics

	Gender	N	Mean	Std. Deviation	Std. Error Mean
SC_GM	Male	62	3.1988	.42831	.05440
	Female	74	3.0880	.32623	.03792

Independent Samples Test

		Levene's Test for Equality of Variances		t-test for Equality of Means							
						Sig. (2-tailed)	Mean Difference	Std. Error Difference	95% Confidence Interval of the Difference	
		F	Sig.	t	df				Lower	Upper
SC_GM	Equal variances assumed	4.714	.032	1.712	134	.089	.11084	.06476	-.01725	.23893
	Equal variances not assumed			1.672	112.501	.097	.11084	.06631	-.02054	.24222

SPSS Output: Multiple Regression Analysis

Descriptive Statistics

	Mean	Std. Deviation	N
MBSRQ_Total	106.8897	11.46633	136
SC_GM	3.1385	.37883	136
SAPS_S	20.6618	4.06652	136
SAPS_D	18.8088	3.95065	136

Correlations

		MBSRQ_Total	SC_GM	SAPS_S	SAPS_D
Pearson Correlation	MBSRQ_Total	1.000	-.081	.213	.018
	SC_GM	-.081	1.000	-.022	-.120
	SAPS_S	.213	-.022	1.000	.624
	SAPS_D	.018	-.120	.624	1.000
Sig. (1-tailed)	MBSRQ_Total	.	.173	.006	.417
	SC_GM	.173	.	.401	.082
	SAPS_S	.006	.401	.	.000
	SAPS_D	.417	.082	.000	.
N	MBSRQ_Total	136	136	136	136
	SC_GM	136	136	136	136
	SAPS_S	136	136	136	136
	SAPS_D	136	136	136	136

Model Summary[b]

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	Durbin-Watson
1	.277[a]	.077	.056	11.14195	1.931

a. Predictors: (Constant), SAPS_D, SC_GM, SAPS_S

b. Dependent Variable: MBSRQ_Total

ANOVA[a]

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	1362.463	3	454.154	3.658	.014[b]
	Residual	16386.883	132	124.143		
	Total	17749.346	135			

a. Dependent Variable: MBSRQ_Total

b. Predictors: (Constant), SAPS_D, SC_GM, SAPS_S

Coefficients[a]

Model		B	Std. Error	Beta	t	Sig.	Zero-order	Partial	Part	Tolerance	VIF
		Unstandardized Coefficients		Standardized Coefficients			Correlations			Collinearity Statistics	
1	(Constant)	107.709	9.947		10.829	.000					
	SC_GM	-2.988	2.556	-.099	-1.169	.244	-.081	-.101	-.098	.981	1.019
	SAPS_S	.958	.303	.340	3.165	.002	.213	.266	.265	.607	1.647
	SAPS_D	-.597	.314	-.206	-1.904	.059	.018	-.163	-.159	.599	1.670

a. Dependent Variable: MBSRQ_Total

Coefficient Correlations[a]

Model			SAPS_D	SC_GM	SAPS_S
1	Correlations	SAPS_D	1.000	.136	-.626
		SC_GM	.136	1.000	-.069
		SAPS_S	-.626	-.069	1.000
	Covariances	SAPS_D	.098	.109	-.059
		SC_GM	.109	6.532	-.053
		SAPS_S	-.059	-.053	.092

a. Dependent Variable: MBSRQ_Total

Collinearity Diagnostics[a]

Model	Dimension	Eigenvalue	Condition Index	(Constant)	SC_GM	SAPS_S	SAPS_D
				Variance Proportions			
1	1	3.940	1.000	.00	.00	.00	.00
	2	.039	10.036	.03	.14	.09	.21
	3	.015	16.423	.01	.00	.90	.70
	4	.006	25.874	.96	.86	.01	.09

a. Dependent Variable: MBSRQ_Total

Residuals Statistics[a]

	Minimum	Maximum	Mean	Std. Deviation	N

Predicted Value	99.3655	116.0834	106.8897	3.17684	136
Std. Predicted Value	-2.368	2.894	.000	1.000	136
Standard Error of Predicted Value	.989	3.240	1.843	.505	136
Adjusted Predicted Value	99.8888	116.3350	106.9104	3.17599	136
Residual	-23.46569	22.82927	.00000	11.01746	136
Std. Residual	-2.106	2.049	.000	.989	136
Stud. Residual	-2.181	2.115	-.001	1.005	136
Deleted Residual	-25.17448	24.44409	-.02067	11.38489	136
Stud. Deleted Residual	-2.213	2.143	-.001	1.010	136
Mahal. Distance	.071	10.424	2.978	2.158	136
Cook's Distance	.000	.087	.008	.014	136
Centered Leverage Value	.001	.077	.022	.016	136

a. Dependent Variable: MBSRQ_Total

Appendix C

IAD Consent Form

Universiti Tunku Abdul Rahman			
Form Title : **Sample of Submission Sheet for FYP/Dissertation/Thesis**			
Form Number : **FM-IAD-004**	Rev No: **0**	Effective Date: **21 June 2011**	Page No: **1 of 1**

FACULTY OF ARTS AND SOCIAL SCIENCE

UNIVERSITY TUNKU ABDUL RAHMAN

Date : 24 March 2019

SUBMISSION OF FINAL YEAR PROJECT

It is hereby certified that   CHANG DIXON   (ID No : 15AAB05207) has completed this final year project entitled   "Relationship between Self-Compassion, Perfectionism and Body Image Satisfaction among University Students   in   Malaysia"   under   the   supervision   of   Mr. Yap Wei Li   (Supervisor) from the Department of Psychology and Counselling, Faculty of Arts and Social Science.

I understand that University will upload my final year project in pdf format into UTAR Institutional Repository, which may be made accessible to UTAR community and public.

Yours truly,

_____

Name: CHANG DIXON

Universiti Tunku Abdul Rahman		
Form Title : **Sample of Submission Sheet for FYP/Dissertation/Thesis**		
Form Number : **FM-IAD-004**	Rev No: **0**	Effective Date: **21 June 2011**	Page No: **1 of 1**

FACULTY OF ARTS AND SOCIAL SCIENCE

UNIVERSITY TUNKU ABDUL RAHMAN

Date : 24 March 2019

SUBMISSION OF FINAL YEAR PROJECT

It is hereby certified that   PUA XIN CI   (ID No : 15AAB05118) has completed this final year project entitled   "Relationship between Self-Compassion, Perfectionism and Body Image Satisfaction among University Students in Malaysia"   under the supervision of   Mr. Yap Wei Li   (Supervisor) from the Department of Psychology and Counselling, Faculty of Arts and Social Science.

I understand that University will upload my final year project in pdf format into UTAR Institutional Repository, which may be made accessible to UTAR community and public.

Yours truly,

_____

Name: PUA XIN CI

Universiti Tunku Abdul Rahman		
Form Title : **Sample of Submission Sheet for FYP/Dissertation/Thesis**		
Form Number : **FM-IAD-004**	Rev No: **0**	Effective Date: **21 June 2011**	Page No: **1 of 1**

FACULTY OF ARTS AND SOCIAL SCIENCE

UNIVERSITY TUNKU ABDUL RAHMAN

Date : 24 March 2019

SUBMISSION OF FINAL YEAR PROJECT

It is hereby certified that   __Shirley Ng Sock Li__   (ID No : 15AAB06316) has completed this final year project entitled   "Relationship between Self-Compassion, Perfectionism and Body Image Satisfaction among University Students in Malaysia"   under the supervision of   __Mr. Yap Wei Li__   (Supervisor) from the Department of Psychology and Counselling, Faculty of Arts and Social Science.

I understand that University will upload my final year project in pdf format into UTAR Institutional Repository, which may be made accessible to UTAR community and public.

Yours truly,

_____

Name: Shirley Ng Sock Li

Appendix D

FYP 1 Turnitin Originality Report

Relationship between self-compassion, perfectionism and body image satisfaction among university students in Malaysia

ORIGINALITY REPORT

7%	2%	6%	2%
SIMILARITY INDEX	INTERNET SOURCES	PUBLICATIONS	STUDENT PAPERS

PRIMARY SOURCES

1   Michael D. Barnett, Kendall J. Sharp. "Maladaptive perfectionism, body image satisfaction, and disordered eating behaviors among U.S. college women: The mediating role of self-compassion", Personality and Individual Differences, 2016   2%
Publication

2   Allison C. Kelly, Elizabeth Stephen. "A daily diary study of self-compassion, body image, and eating behavior in female college students", Body Image, 2016   <1%
Publication

3   Submitted to TAR University College   <1%
Student Paper

4   www.compassionatemind.co.uk   <1%
Internet Source

5   Submitted to University of Ulster   <1%
Student Paper

Submitted to Columbia College of Missouri

FYP 2 Turnitin Originality Report

Self-compassion, perfectionism, body image satisfaction among university students in Malaysia

ORIGINALITY REPORT

10%	4%	7%	6%
SIMILARITY INDEX	INTERNET SOURCES	PUBLICATIONS	STUDENT PAPERS

PRIMARY SOURCES

1	Submitted to University of Northampton Student Paper	1%
2	libres.uncg.edu Internet Source	1%
3	Vossbeck-Elsebusch, Anna N., Manuel Waldorf, Tanja Legenbauer, Anika Bauer, Martin Cordes, and Silja Vocks. "German version of the Multidimensional Body-Self Relations Questionnaire – Appearance Scales (MBSRQ-AS): Confirmatory factor analysis and validation", Body Image, 2014. Publication	1%
4	Submitted to TAR University College Student Paper	<1%
5	Xiaoyan Sun, David W. Chan, Lai-kwan Chan. "Self-compassion and psychological well-being among adolescents in Hong Kong: Exploring gender differences", Personality and Individual Differences, 2016	<1%

DEPARTMENT OF PSYCHOLOGY AND COUNSELLING
FACULTY OF ARTS AND SOCIAL SCIENCE
UNIVERSITI TUNKU ABDUL RAHMAN

UAPZ 3023 Final Year Project II

<u>Research Project Evaluation Form</u>

<u>TURNITIN:</u> *'In assessing this work you are agreeing that it has been submitted to the University-recognised originality checking service which is Turnitin. The report generated by Turnitin is used as evidence to show that the students' final report contains the similarity level below 20%.'*

Project Title: **Relationship between Self-Compassion, Perfectionism and Body Image Satisfaction among University Students in Malaysia**	
Supervisor: **Mr. Yap Wei Li**	

Student's Name:	Student's Id
1. Chang Dixon	**1. 15AAB05207**
2. Pua Xin Ci	**2. 15AAB05118**
3. Shirley Ng Sock Li	**3. 15AAB06316**

INSTRUCTIONS:
Please score each descriptor based on the scale provided below:
1. For criteria **1, 2, 3,4, 5, 6**:
    0 = no attempt, 1 = very poor, 2 = poor, 3 = average, 4 = good, 5 = very good

2. For criteria **3,4**:
    0 = no attempt, 1 = very poor, 3 = poor, 5 = average, 7 = good, 10 = very good

3. For criteria **7**:
    Please retrieve the mark from "**Oral Presentation Evaluation Form**".

1. ABSTRACT (5%)	Score
1. States clearly the research objectives. (5%)	
2. Describe briefly and clearly the approach/methodology of the study. (5%)	
3. Highlights the outcomes of the study. (5%)	
4. Highlights the significance of the study. (5%)	
5. Three relevant keywords mentioned. (5%)	
Sum	
Subtotal (*Sum* /5)	**/ 5%**
Remark:	

2. METHODOLOGY (20%)	
1. Appropriate research design/framework (5%)	
2. Appropriate sampling techniques (5%) - Sample size is justified. - Sampling method correctly mentioned - Location of how the subjects are selected	
3. Clear explanation of procedure (5%) - How is consent obtained - Description of how data was collected	
4. Explanation on the instruments/questionnaires used (5%) - Description of instrument measures, scoring system, meaning of scores, reliability and validity information.	
Subtotal	**/ 20%**
Remark:	

3. RESULTS (20%)	
1. Analyses used are appropriate for each hypothesis. (10%)	
2. Interpretations and explanations of the statistical analyses are accurate. (10%)	
Subtotal	**/ 20%**
Remark:	

4. DISCUSSION & CONCLUSION (25%)	
1. Constructive discussion of findings.	

- Explanation and critical analysis. Results were critically analyzed with similar and/or dissimilar results. (10%)	
2. Implication of the study. (5%)	
3. Limitations mentioned relevant and constructive to the study. (5%)	
4. Recommendations for future research. (5%)	
Subtotal	**/ 25%**
Remark:	

5. LANGUAGE & ORGANIZATION (5%)	
1. Comprehensiveness: Content Organization + Language	
Subtotal	**/ 5%**
Remark:	

6. APA STYLE AND REFERENCING (5%)	
1. APA format is followed	
Subtotal	**/ 5%**
Remark:	

7. *ORAL PRESENTATION (20%)		**Score**	
	Student 1	**Student 2**	**Student 3**
Subtotal			
Remark:			

PENALTY: **Maximum 10 marks for LATE SUBMISSION, MISSING FORM or POOR ATTENDANCE for consultation with supervisor**			
	Student 1	**Student 2**	**Student 3**
****FINAL MARK/TOTAL**			

***Overall Comments:

_____

_____

_____

_____

_____

Signature: _____   **Date:**
_____

Notes:
1. **Subtotal**:   The sum of scores for each assessment criteria
2. **FINAL MARK/TOTAL**:   The summation of all subtotal score
3. Plagiarism is UNACCEPTABLE. Parameters of originality required and limits approved by UTAR are as follows:
     (i) **Overall similarity index is 20% and below**, and
     (ii) Matching of individual sources listed must be less than 3% each, and
     (iii) Matching texts in continuous block must not exceed 8 words

   Note: Parameters (i) – (ii) shall exclude quotes, references and text matches which are less than 8 words.

   Any works violate the above originality requirements will NOT be accepted. Students have to redo the report and meet the requirements in **SEVEN(7)** days.

*The marks of "Oral Presentation" are to be retrieved from **"Oral Presentation Evaluation Form".**
**It's compulsory for the supervisor/reviewer to give the overall comments for the research projects with A- and above
    or F grading.

Action Plan of UAPZ 3023 (group-based)Final Year Project II for Jan & May trimester

Supervisee's Name: _Chang Dixon , Pua Xin Ci , Shirley Ng Sock Li_

Supervisor's Name: _Mr. Yap Wei Li_

Task Description	Duration	Date/Time	Supervisee's Signature	Supervisor's Signature	Supervisor's Remarks	Next Appointment Date/Time
Methodology, Data Collection & Data Analysis	W1-W2	29/1/19 9am	[signatures]	[signature]	To produce the questionnaire for review.	
Finding & Analysis	W3-W6	5/3/19 9am	[signatures]	[signature]		
Discuss Findings & Analysis with Supervisor						
Amending Findings & Analysis						
Discussion & Conclusion	W7-W9	14/3/19 11am	[signatures]	[signature]	Need of your set some changes especially on discussion & reasonable.	
Discuss Discussion & Conclusion with Supervisor						
Amending Discussion & Conclusion						
Submission of first draft*	Monday of Week 10				submit the first draft to Turnitin.com to check similarity rate	
Amendment	W10					
Submission of final FYP (FYP I + FYP II)*	Monday of W11				submit hardcopy, CD, and relevant documents to supervisor	
Oral Presentation	W11-W12	Oral Presentation Schedule will be released and your supervisor will inform you via email.				

Notes:
1. The listed duration is for reference only, supervisors can adjust the period according to the topics and content of the projects.
2. *Deadline for submission can not be changed, one mark will be deducted per day for late submission.
3. Supervisees are to take the active role to make appointments with their supervisors.
4. Both supervisors and supervisees should keep a copy of this re 5. This record is to be submitted together with the submission of the FYP IL.

Universiti Tunku Abdul Rahman			
Form Title : Supervisor's Comments on Originality Report Generated by Turnitin for Submission of Final Year Project Report (for Undergraduate Programmes)			
Form Number: FM-IAD-005	Rev No.: 0	Effective Date: 01/10/2013	Page No.: 1of 1

FACULTY OF ARTS AND SOCIAL SCIENCE

Full Name(s) of Candidate(s)	1. **Chang Dixon** 2. **Pua Xin Ci** 3. **Shirley Ng Sock Li**
ID Number(s)	1. **15AAB05207** 2. **15AAB05118** 3. **15AAB06316**
Programme / Course	**Bachelor of Social Science (HONS) Psychology**
Title of Final Year Project	**Relationship between Self-Compassion, Perfectionism and Body Image Satisfaction among University Students in Malaysia**

Similarity	**Supervisor's Comments** **(Compulsory if parameters of originality exceeds the limits approved by UTAR)**
Overall similarity index:_____% **Similarity by source** Internet Sources:_____% Publications:_____% Student Papers:_____%	
Number of individual sources listed of more than 3% similarity: _____	

Parameters of originality required and limits approved by UTAR are as follows:
  (i)   **Overall similarity index is 20% and below, and**
  (ii) **Matching of individual sources listed must be less than 3% each, and**
  (iii) **Matching texts in continuous block must not exceed 8 words**
Note: Parameters (i) – (ii) shall exclude quotes, bibliography and text matches which are less than 8 words.

Note Supervisor/Candidate(s) is/are required to provide softcopy of full set of the originality
      report to Faculty/Institute

Based on the above results, I hereby declare that I am satisfied with the originality of the Final Year Project Report submitted by my student(s) as named above.

Signature of Supervisor   Signature of Co-Supervisor

Name: Name:

Date: Date: