

# I HAVE SELF-COMPASSION SO I FEEL SEXY! SEXUAL SATISFACTION AND SELF-COMPASSION EFFECTS ON SELF-ESTEEM AND BODY ESTEEM

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## ABSTRACT

Body esteem, self-esteem, and sexual satisfaction influence people's well-being so it is important to look for psychological factors that may contribute to their improvement. However, men and women differ in the factors that affect their body esteem, self-esteem, and sexual satisfaction. We analyzed links between men's and women's self-esteem, body esteem, sexual satisfaction, and self-compassion. The research involved 716 heterosexual participants (365 men and 351 women). All measured variables correlated positively; however, some correlations were stronger among women than among men. Mediation analyses revealed that sexual satisfaction directly affected women's body esteem but did not directly affect men's body esteem. Self-compassion and sexual satisfaction explained more variance in self-esteem and body esteem among women than among men. We explained observed differences in the contexts of the self-perception theory and the objectification theory.

BODY ESTEEM  
SELF-ESTEEM  
SELF-COMPASSION  
SEXUAL SATISFACTION

KEYWORDS



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## INTRODUCTION

Body esteem, self-esteem, and sexual satisfaction are factors affecting people's well-being (Paradise & Kernis, 2002; Olenik-Shemesh et al., 2018; Vasconcelos et al., 2022) and their low level contributes to reduced satisfaction with life (Vasconcelos et al., 2022; Pelc et al., 2023). However, body esteem, self-esteem, and sexual satisfaction are related (Castellini et al., 2017; Claudat & Warren, 2014; Taleporos & McCabe, 2002), so it is important to look for psychological factors that may contribute to their parallel improvement. On the other hand, body esteem in women and men is based on different factors (Franzoi & Shields, 1984). Moreover, women more often have lower body esteem and self-esteem than men (Prichard & Tiggemann, 2005; Harrison & Fredrickson, 2003; Lowery et al., 2005) and such discrepancies are regulated by cultural norms and standards of femininity (Brannon, 2016). Therefore, gender differences should be considered in research on the links between body esteem, self-esteem, and sexual satisfaction.

In the current study, we analyzed links between self-esteem, body esteem, sexual satisfaction, and self-compassion among men and women. Many studies have shown that body esteem and self-esteem positively influence sexual satisfaction (e.g., Castellini et al., 2017; Claudat & Warren, 2014). However, the opposite direction has also been analyzed, where sexual satisfaction translates into more positive body esteem and self-esteem (cf. Taleporos & McCabe, 2002). In addition, different factors influence men's and women's sexual satisfaction (Smith et al., 2011; Stephenson et al., 2011). The complexity of the relationships between self-esteem, body esteem, and sexual satisfaction is even higher because self-esteem and body esteem are linked with self-compassion (cf. Albertson et al., 2015), which affects their growth.

## SELF-ESTEEM AND BODY ESTEEM

Self-esteem is a relatively constant positive or negative attitude toward oneself (Rosenberg, 1965). Self-esteem is associated with adaptive skills (Pyszczynski et al., 2004), and is determined by how people are perceived by others and by how others react to them (Leary & Baumeister, 2000). Self-esteem links to body image (Olivardia et al., 2004; Paxton et al., 2006), which represents individual experiences and positive or negative feelings toward one's body (Cash & Pruzinsky, 2002). Cultural patterns also form the context in which body image develops (López-Guimerà et al., 2010).

Body esteem differs across genders (Franzoi & Shields, 1984). In men, body esteem is affected by physical attractiveness, upper body strength, and physical condition. In women, body esteem is affected by sexual attractiveness, weight concerns, and physical condition. Moreover, body esteem differs more among women than among men (Franzoi & Shields, 1984). Women experience sexual objectification and perceive themselves as objects to be looked at and judged based on their body appearance more often than men (Fredrickson & Roberts, 1997). The effects of such sexual objectification include negative body image (Prichard & Tiggemann, 2005), eating disorders (Muehlenkamp & Saris-Baglama, 2002), symptoms of depression and lower self-esteem (Harrison & Fredrickson, 2003; Lowery et al., 2005), and sexual dysfunctions (Steer & Tiggemann, 2008).

## SELF-COMPASSION

Self-compassion is an accepting attitude toward oneself, even in situations of experiencing failure or having a sense of imperfection (Neff, 2011). Self-compassion includes openness and sensitivity to one's suffering, accompanied by a feeling of caring and kindness toward oneself, adopting an understanding and nonjudgmental attitude about one's imperfections and failures, and realizing that one's experiences are part of the universal human experience (Neff, 2003a, 2003b). Compared to self-esteem, self-compassion provides greater emotional resistance and stability and is associated with a weaker focus on ego defense and self-improvement (Neff, 2011). Self-compassion also mitigates negative emotions after receiving ambiguous feedback, especially in people with low self-esteem (Leary et al., 2007).

A higher self-compassion is associated with lower body shame, lower body dissatisfaction, lower tendency to objectified body consciousness, lower body surveillance, and less negative eating attitudes (Liss & Erchull, 2015; Mosewich et al., 2011; Wollast et al., 2021). Among women, higher self-compassion predicts fewer body and weight concerns along with lower body preoccupation (Wasylikiw et al., 2012). Among men, self-compassion moderate relationship between gender role stress and the self-stigma of seeking help (Booth et al., 2019). In romantic relationships, self-compassion correlates positively with perceived quality of relationships (Jacobson et al., 2018) and predicts positive relationship behaviors (Neff & Beretvas, 2013). Higher self-compassion also helps deal with distress regarding sexual problems and is associated with higher sexual satisfaction (Ferreira et al., 2020).

## SEXUAL SATISFACTION

Sexual satisfaction is a subjective evaluation of aspects associated with one's sexual relationships (Lawrance & Byrnes, 1995). Sexual satisfaction is shaped by being in close relationships, as well as by individual traits (Sánchez-Fuentes et al., 2014). Sexual satisfaction positively correlates with satisfaction with the relationship (Henderson et al., 2009; Litzinger & Gordon, 2005), quality of communication with partner (MacNeil & Byers, 2009), mental and physical conditions (Scott et al., 2012), and well-being (Davison et al., 2009).

Sexual satisfaction also correlates positively with self-esteem (cf. Lin & Lin, 2018) and people with higher body esteem have fewer appearance-based distracting thoughts during sexual activity, which leads to greater sexual pleasure (Pujols et al., 2010). On the other hand, self-objectification decreases the quality of sexual activity and body shame and body self-consciousness during sexual activity negatively correlate with sexual satisfaction (Claudat & Warren, 2014). Reduced mindfulness, which is an aspect of self-compassion, correlates with a negative perception of one's own body in a sexual context and translates into lower sexual satisfaction (Fink et al., 2009). Moreover, among couples in which women suffer from vulvodynia (pain during intercourse), partners with higher self-compassion report higher satisfaction with relationship and lower sexual distress (Santerre-Baillargeon et al., 2018).

## CURRENT STUDY

In the current study, we wanted to analyze links between self-esteem, body esteem, sexual satisfaction, and self-compassion. We formulated six hypotheses regarding the relationships between these variables (see Table 1). We decided to check our hypotheses in the overall

sample and in groups of men and women because body appearance has different functions among sexes (Buss, 1989; Puts, 2010). Such approach is also justified from the perspective of objectification theory (Fredrickson & Roberts, 1997), which states that women, more than men, are socialized to internalize the observer's perspective as their primary view of their physical selves and monitor the outward appearance of their bodies which results in increased feelings of shame, poor body image, and self-loathing (Lowery et al., 2005; Prichard & Tiggemann, 2005).

We also conducted mediation analyses including sexual satisfaction and self-compassion as exogenous variables, self-esteem as a mediator, and body esteem as an outcome. We based our model on the following assumption that self-compassion is a general attitude toward oneself (Neff, 2003a, 2011); thus, it may affect self-esteem and body esteem. Subsequently, sexual satisfaction is perceived as a desired aspect of people's life (Sánchez-Fuentes et al., 2014) and is related to physical functions of the body (Scott et al., 2012); thus, it may affect self-esteem and body esteem. Moreover, self-esteem is a general, relatively constant trait (Rosenberg, 1965); thus, it may affect many specific aspects of people's self-evaluation, such as body esteem.

**Table 1. Hypotheses regarding links between self-esteem, body esteem, sexual satisfaction, and self-compassion**

Hypothesis	Background
(H1) Sexual satisfaction would positively correlate with body esteem.	If people had a satisfactory sexual life, they might judge their body not so much in terms of what it looks like, but rather in terms of how much pleasure it gives them and their sexual partners.
(H2) Self-esteem would positively correlate with body esteem.	People with higher self-esteem may tend to make more positive judgments about their bodies.
(H3) Higher self-compassion would correlate with higher sexual satisfaction (e.g., by accepting the possibility that there are better and worse moments in one's sexual life).	Self-compassion manifests through a greater understanding and acceptance of one's own's imperfections, weaknesses, and failures.
(H4) Self-compassion would positively correlate with self-esteem (e.g., through a more accepting attitude toward the actual self).	
(H5) Self-compassion would positively correlate with body esteem (e.g., because higher self-compassion may lead to a greater acceptance of the body)	
(H6) Self-esteem and body esteem would display a higher correlation among women than among men	Body appearance has different functions among sexes. Moreover, women, more than men, are socialized to internalize the observer's perspective as their primary view of their physical selves and monitor the outward appearance of their bodies which results in increased feelings of shame, poor body image, and self-loathing.

## METHOD

### PARTICIPANTS AND PROCEDURE

We conducted our study on a Polish sample of heterosexual men and women collected with snowball sampling method. The participants provided answers by paper and pencil or by an online survey module. The participants did not provide any information that would allow for the identification of individual participants or link specific responses to a specific person. The respondents were informed about the purpose of the study and participated in it voluntarily and without remuneration.

The study involved 716 heterosexual participants, including 365 men and 351 women. The mean age was 27.53 years ( $SD = 9.38$  years). Men and women did not differ in terms of age ( $t = -0.64, p = .53, d = .05$ ). Sample size was satisfactory concerning the a priori likelihood of the effects posited in the hypotheses being revealed, here with a threshold value of  $p$

of .05 in the two-tailed tests and power of .80 of the tests used. For the parameters adopted, significant correlation coefficients  $\geq .20$  should be found in a sample of 191 respondents, and weak intergroup differences ( $d = .20$ ) in a sample of 310 respondents. The size of the study sample exceeded both the threshold values mentioned above.

## MEASURES

We measured self-esteem using the Self-Esteem Scale (SES; Rosenberg, 1989; Polish adaptation by Łaguna et al., 2007). The participants were asked how much they agreed (1 = *strongly disagree*; 4 = *strongly agree*) with 10 items corresponding to their general evaluations of themselves. Cronbach's  $\alpha$  reliability coefficients were as follows: overall sample  $\alpha = .87$ , men  $\alpha = .87$ , and women  $\alpha = .88$ .

To measure body esteem, we used the Body Esteem Scale (BES; Franzoi & Shields, 1984; Polish adaptation by Lipowska & Lipowski, 2013), which consists of 35 items regarding an individual's perceptions of their body. The respondents were asked to identify their feelings about specific parts of their body using a 5-point Likert scale (1 = *I have a strong negative feeling*; 5 = *I have a strong positive feeling*). The tool's reliability was as follows: overall sample  $\alpha = .94$ , men  $\alpha = .94$ , and women  $\alpha = .94$ .

We measured self-compassion using the Polish translation of the Short Form of Self-Compassion Scale (SCS-SF; Raes et al., 2011), which consists of 12 statements concerning the components of self-compassion: self-kindness, common humanity, and mindfulness. The respondents gave their answers on a 5-point scale (1 = *Almost never*; 5 = *Almost always*). The reliability of the tool was as follows: overall sample  $\alpha = .81$ ; men  $\alpha = .77$ ; women  $\alpha = .84$ .

To measure sexual satisfaction, we used the Sexual Satisfaction Scale by Davies et al. (2006; Polish translation by Szumski & Małeczka, 2009); this scale consists of 21 statements, on which the respondents answered using a 5-point Likert scale (1 = *I strongly disagree*; 5 = *I strongly agree*). The reliability of the tool was satisfactory: overall sample  $\alpha = .87$ ; men  $\alpha = .87$ ; women  $\alpha = .87$ .

We averaged the scores of all measures used. We performed statistical analyses using JAMOVI software (version 2.3.2).

## RESULTS

Descriptive statistics and pairwise comparisons among men and women are presented in Table 2. Men displayed higher self-esteem ( $p < .05$ ), body esteem ( $p < .001$ ), and self-compassion ( $p < .001$ ) than women. However, sexual satisfaction did not differ across genders.

**Table 2. Measured variables – Descriptive statistics and gender differences**

Variable	Overall sample		Men		Women		<i>t</i>	<i>d</i>
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>		
Sexual satisfaction	3.36	0.63	3.40	0.63	3.33	0.63	1.54	.12
Body esteem	3.64	0.60	3.74	0.56	3.54	0.61	4.58**	.34
Self-esteem	3.03	0.54	3.07	0.55	2.98	0.53	2.32*	.17
Self-compassion	3.02	0.68	3.13	0.64	2.90	0.70	4.68**	.35

Note: \* $p < .05$ , \*\* $p < .001$

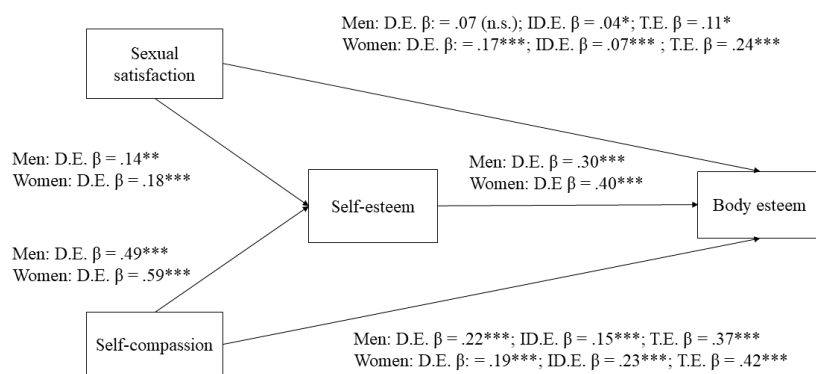
Correlation analysis (see Table 3) confirmed the positive relationship between sexual satisfaction and body esteem ( $p < .001$ ), as posited in Hypothesis 1. However, this relationship was stronger in women than in men ( $p < .05$ ). Consistent with Hypothesis 2, participants revealed positive links between self-esteem and body esteem ( $p < .001$ ). We also observed positive relationship between sexual satisfaction and self-compassion ( $p < .01$ ), as posited in Hypothesis 3. Consistent with Hypothesis 4, self-compassion linked with self-esteem positively ( $p < .001$ ); however, this relationship was stronger in women than in men ( $p < .05$ ). We also observed positive correlations between self-compassion and body esteem ( $p < .001$ ), as posited in Hypothesis 5. Hypothesis 6 was also accurate since we observed higher correlation between self-esteem and body esteem among women than among men ( $p < .01$ ).

**Table 3. Correlation coefficients in the overall sample and groups of men and women**

Overall sample	Sexual satisfaction	Body esteem	Self-esteem
Body esteem	.26***		
Self-esteem	.26***	.50***	
Self-compassion	.19***	.45***	.57***
Men	Sexual satisfaction	Body esteem	Self-esteem
Body esteem	.16**		
Self-esteem	.21***	.42***	
Self-compassion	.14**	.38***	.51***
Women	Sexual satisfaction	Body esteem	Self-esteem
Body esteem	.34***		
Self-esteem	.31***	.57***	
Self-compassion	.22***	.47***	.62***
Difference between men and women (Fischer z, two-tailed)	Sexual satisfaction	Body esteem	Self-esteem
Body esteem	-2.57*		
Self-esteem	-1.43	-2.66**	
Self-compassion	-1.10	-1.47	-2.16*

Note: \*  $p < .05$ ; \*\*  $p < .01$ ; \*\*\*  $p < .001$

We carried out mediation analyses separately for men and women (see Figure 1). We calculated 95% confidence intervals using the bootstrapping method with 10,000 samples (see Appendix). Among women, all effects were significant. However, among men, direct effect of sexual satisfaction on body esteem turned out to be insignificant. The model explained 37.21% of women's body esteem and 42.08% of women's self-esteem, as well as 22.13% of men's body esteem and 29.91% of men's self-esteem.



**Figure 1. Regression model of body esteem with sexual satisfaction and self-compassion as predictors and self-esteem as a mediator**

Note: \*  $p < .05$ , \*\*  $p < .01$ , \*\*\*  $p < .001$ ; D.E. = direct effect, I.D.E. = indirect effect, T.E. = total effect.



## DISCUSSION

Our results showed that sexual satisfaction, self-compassion, self-esteem, and body esteem were positively correlated. However, the correlations between sexual satisfaction and body esteem, self-esteem and body esteem, and self-compassion and self-esteem were stronger among women than among men. Mediation analyses also revealed that although sexual satisfaction and self-compassion had significant total effects on self-esteem and body esteem, these effects were stronger among women than among men. Moreover, the model explained more variance in body esteem and self-esteem among women than among men.

Our results suggest that people with higher sexual satisfaction may treat their experiences as a context that elevates their self-perception and use judgments concerning the sexual sphere when referring to other aspects related to self-satisfaction. These results refer to the self-perception theory (Bem, 1972) and the evaluative subjective well-being model (Schwartz & Strack, 1999). According to the self-perception theory, people form beliefs about themselves based on observations of their own activities (e.g., sexual activity). According to the evaluative subjective well-being model, people rate their overall satisfaction in the context of their specific experiences (e.g., related to sexual aspects). Other research has shown that sexual life and sexual satisfaction influence higher self-esteem among older people (Choi et al., 2011). Our results also are consistent with the results showing that sexual satisfaction is a positive predictor of self-esteem among people with physical disabilities (Taleporos & McCabe, 2002) and correlate with higher self-esteem among patients with relapse-remitting multiple sclerosis (Furmańska et al., 2017). Therefore, our results support more open communication and higher fulfillment of people's sex-related needs, which may contribute to an improvement in self-esteem and satisfaction with one's appearance.

The positive effects of self-compassion on self-esteem and body esteem suggest that the development of skills that allow people to distance themselves from their weaknesses and failures can provide a starting point for increasing their level of self-esteem and satisfaction with their bodies. A positive correlation between self-compassion and sexual satisfaction was consistent with previous studies (Jacobson et al., 2018; Neff & Beretvas, 2013). Moreover, previous studies have shown that a higher ability to develop such component of self-compassion as mindfulness is important for a better quality of sexual life, especially among women (Fink et al., 2009; Leavitt et al., 2019).

Observed differences between men and women may be explained by objectification theory (Fredrickson & Roberts, 1997). Cultural norms force women more than men to be attractive (Parker et al., 2017) and to show satisfaction during sex (Chadwick & van Anders, 2017). Moreover, women's sexual dissatisfaction and other sexual problems are attributed to their internal characteristics (Angel, 2010). Therefore, a low level of sexual satisfaction can lower women's self-esteem and body esteem. On the other hand, a high self-compassion may protect women from the influence of cultural demands and patterns related to sex and body. Compared with women, men judge themselves less often in the context of their appearance (cf. Furnham et al., 2002). Therefore, men's self-esteem may be less related to their body esteem. From a different perspective, men perceive successful and satisfactory sexual activity as an indicator of self-esteem; for example, men with erectile dysfunction treated with Sildenafil experienced a significant improvement in self-esteem, self-confidence, and satisfaction with their close relationships (O'Leary et al., 2006).

Our study revealed gender as an important factor that affects relationships between self-compassion, self-esteem, body esteem, and sexual satisfaction among men and women. These gender differences may be associated with reduced well-being among women, which may result in difficulties such as eating disorders (Harrison & Fredrickson, 2003), affective disorders (Gao et al., 2022), and self-perception disorders (Lowery et al., 2005). Therefore,

our results support psychoeducational and psychotherapeutic interventions that would develop self-compassion, self-esteem, and body-esteem, taking into account the need to adapt these interventions to the gender of their participants (Alleva et al., 2015).

## LIMITATION AND CONCLUSION

Our study is not without limitations. Firstly, the measurement of body esteem was not accompanied by an investigation of other body-related aspects, e.g., weight normativity and perceived body attractiveness. Secondly, we measured only general level of self-esteem; however, it would be useful to include a more specific indicator of self-esteem related to sexual aspects, e.g. sexual self-esteem (Kong et al., 2023). Thirdly, although our mediation model described the relationships between measured variables, data collected in cross-sectional studies do not allow for cause-and-effect conclusions (Maxwell & Cole, 2007). Future studies should verify our results using an experimental or longitudinal methodology. Fourthly, we focused on Polish heterosexual people, and we did not include participants' relationship status in our analyses. Future research should include samples of nonheterosexual people and people with different relationship statuses as well as people from other cultural contexts to check whether the relationships between variables are universal or rather culture-dependent. Finally, in our model, we included sexual satisfaction as a predictor of self-esteem and body esteem. Although such an approach appears in psychological research (Taleporos & McCabe, 2002), esteem aspects are often mentioned as affecting sexual satisfaction (e.g., Castellini et al., 2017; Claudat & Warren, 2014). We do not postulate one-way relationships between sexual satisfaction and self-esteem and body esteem. However, considering possible impact of sexual satisfaction on self-esteem and body esteem is justified in the context of theories indicating the importance of individual experiences in shaping general beliefs about oneself (Bem, 1972, Schwarz & Strack, 1999).

We conducted a study of correlations and mediation effects between sexual satisfaction, self-compassion, self-esteem, and body esteem among men and women. Our results suggest that people may judge their self-esteem and body esteem in the context of self-compassion and the quality of their sexual lives. However, links between mentioned variables differ across genders. Moreover, self-compassion and sexual satisfaction explained more variance in self-esteem and body esteem among women than among men.



## SUPPLEMENTARY MATERIALS

Supplementary Table 1. Regression coefficients in the mediation model

Effect	Men			Women		
	<i>b</i> (SE)	95% C.I.	$\beta$	<i>b</i> (SE)	95% C.I.	$\beta$
<b>Total</b>						
<i>SS</i> → <i>BES</i>	.10 (.04)	.01–.18	.11*	.24 (.05)	.14–.33	.24***
<i>SC</i> → <i>BES</i>	.32 (.04)	.24–.41	.37***	.37 (.04)	.29–.49	.42***
<b>Direct</b>						
<i>SS</i> → <i>BES</i>	.06 (.05)	-.03–.15	.07	.17 (.05)	.08–.26	.17***
<i>SC</i> → <i>BES</i>	.19 (.05)	.08–.29	.22***	.16 (.05)	.06–.27	.19***
<i>SS</i> → <i>SES</i>	.12 (.04)	.04–.20	.14**	.15 (.04)	.08–.22	.18***
<i>SC</i> → <i>SES</i>	.43 (.04)	.36–.50	.49***	.44 (.03)	.38–.50	.59***
<i>SES</i> → <i>BES</i>	.30 (.07)	.17–.45	.30***	.46 (.07)	.32–.59	.40***
<b>Indirect</b>						
<i>SS</i> → <i>SES</i> → <i>BES</i>	.04 (.02)	.01–.07	.04*	.07 (.02)	.03–.11	.07***
<i>SC</i> → <i>SES</i> → <i>BES</i>	.13 (.03)	.07–.20	.15***	.20 (.04)	.13–.27	.23***

Note: \*  $p < .050$ , \*\*  $p < .01$ , \*\*\*  $p < .001$ ; *SS* = sexual satisfaction, *SC* = self-compassion, *SES* = self-esteem, *BES* = body esteem

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