

# **Impact of Mindfulness on Psychological State and Psychosocial Behaviour Among Emerging Adults**

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**DOCTOR OF PHILOSOPHY IN PSYCHOLOGY**

by

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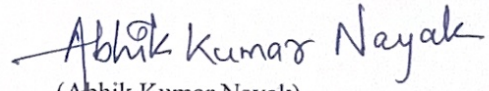
## DECLARATION

I, Abhik Kumar Nayak, hereby declare that this thesis titled "Impact of Mindfulness on Psychological State and Psychosocial Behaviour Among Emerging Adults" is my original work and has not submitted for any degree or academic qualifications at any other university or institution. All sources used in the research have been duly acknowledged, and proper citations have been provided wherever necessary.

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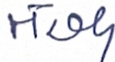
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## CERTIFICATE

This is to certify that the thesis entitled “Impact of Mindfulness on Psychological State and Psychosocial Behaviour Among Emerging Adults” submitted by Mr. Abhik Kumar Nayak bearing Registration Number 19CPPH02, in partial fulfilment of the requirements for award of Doctor of Philosophy in the Centre for Psychology, School of Medical Sciences is a bonafide work carried out by him under my supervision and guidance.

**This thesis is free from Plagiarism and has not been submitted previously in part or in full to this or any other University or Institution for award of any degree or diploma.**

Further, the student has the following publication before submission of the thesis for adjudication and has produced evidence for the same in the form of acceptance letter or the reprint in the relevant area of his research:


1. Nayak, A. (2025). Impact of Self-Compassion on Well-Being in Emerging Adults: A Revelation From Cluster Analysis. *Indian Journal of Health Studies*, 07(01), 38-70. <https://doi.org/10.56490/ijhs>

The student has made presentations in the following conferences:

1. Presented a paper on “Impact of Self-Compassion on Well-Being in Emerging Adults: A Revelation From Cluster Analysis” in the International conference on “Emerging Issues and Challenges in Global Mental Health and Public Health for the 21st Century” jointly organised by National Association of Mental Health and Allied Health (NAMAHA) Foundation and Capital Institute of Management and Science, Bhubaneswar, Odisha, India from 28<sup>th</sup> to 30<sup>th</sup> November, 2022.
2. Presented a paper on “Self-Transcendence During Emerging Adulthood: A Predictor of Positive Emotion and Flourishing” in the International conference on “Emerging Issues and Challenges in Global Mental Health and Public Health for the 21st Century” jointly organised by National Association of Mental Health and Allied Health (NAMAHA) Foundation and Capital Institute of Management and Science, Bhubaneswar, Odisha, India from 28<sup>th</sup> to 30<sup>th</sup> November, 2022.

Further, the student has passed the following courses towards fulfilment of coursework requirement for Ph.D.:


Course code	Name	Credits	Pass/Fail
HP826	Research Methodology and Advanced Statistics	4	Pass
HP827	Book Review	4	Pass
HP828	Review Paper	4	Pass
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## ABSTRACT

Emerging adulthood (ages 18–29) represents a pivotal developmental stage marked by the transition from adolescence to adulthood and is characterized by identity exploration, instability, and self-discovery. During this period, young adults experience increased psychological vulnerability due to shifting social roles, heightened stress, and evolving life responsibilities. Research indicates that this age group faces a significantly higher risk of psychological distress, including maladaptive coping, low self-esteem, and reduced social support. Epidemiological data from the United States reveal that over 40% of individuals aged 18–29 experience at least one psychiatric disorder within a 12-month period - a rate substantially higher than in other age groups, particularly concerning anxiety, mood disorders, and substance use. Therefore, identifying the factors that contribute to well-being in this high-risk population is both necessary and timely, particularly within the Indian context.

The present study aimed to examine the relationship between dispositional mindfulness, self-compassion, emotion regulation, coping competence, prosocial behavior, and well-being among emerging adults. In addition, the study sought to assess how dispositional mindfulness, self-compassion, emotion regulation, coping competence, and prosocial behavior—both individually and collectively influence overall well-being in this population. Furthermore, the study investigated the mediating roles of self-compassion, emotion regulation, coping competence, and prosocial behavior in the relationship between dispositional mindfulness and well-being among emerging adults.

A cross-sectional design with a retrospective approach was employed using the survey method. Data were collected in two phases: a pilot study and a main quantitative survey. After removing outliers and excluding incomplete responses, the final sample comprised 600 emerging adults (222 males and 378 females), aged 18 to 29 years, recruited through purposive sampling. Data collection was carried out in various educational institutions across India. Standardized tools

were used, including the Socio-Demographic Data Sheet, Self-Compassion Scale (SCS-12), Emotion Regulation Questionnaire (ERQ-10), Coping Competence Questionnaire (CCQ-12), Pro-socialness Scale for Adults, and The PERMA Profiler. Data analysis was conducted using IBM SPSS Version 22 and IBM AMOS Version 22.

The pilot study, conducted on a sample of 120 participants, confirmed that the data met essential statistical assumptions of normality, internal consistency, sampling adequacy, and multicollinearity, thus supporting its suitability for parametric tests and Structural Equation Modeling (SEM).

Findings from the main study indicated significant associations among dispositional mindfulness, self-compassion, emotion regulation strategies, coping competence, and prosocial behavior, all statistically significant at the 0.05 level. The measurement model demonstrated acceptable to good fit (CFI = .924, TLI = .919, RMSEA = .038), indicating model adequacy. SEM revealed that dispositional mindfulness had a significant positive effect on cognitive reappraisal and self-compassion, and a negative effect on expressive suppression. Self-compassion significantly predicted both coping competence and prosocial behavior, and in turn, self-compassion and prosocial behavior significantly predicted well-being. However, coping competence did not show a direct effect on well-being. Mediation analysis revealed several significant indirect pathways. Dispositional mindfulness influenced self-compassion through both cognitive reappraisal ( $\beta = 0.056$ ,  $p = .003$ ) and expressive suppression ( $\beta = 0.041$ ,  $p < .001$ ). Self-compassion mediated the relationship between dispositional mindfulness and well-being ( $\beta = 0.393$ ,  $p < .001$ ). Prosocial behavior significantly mediated the link between self-compassion and well-being ( $\beta = 0.183$ ,  $p < .001$ ), while coping competence did not show a significant mediating effect ( $\beta = 0.101$ ,  $p = .172$ ). Furthermore, cognitive reappraisal positively influenced coping competence ( $\beta = 0.292$ ,  $p < .001$ ), prosocial behavior ( $\beta = 0.081$ ,  $p < .001$ ), and well-being ( $\beta = 0.477$ ,  $p < .001$ ) through self-compassion. In contrast, expressive

suppression negatively impacted coping competence ( $\beta = -0.126, p = .001$ ), prosocial behavior ( $\beta = -0.035, p = .001$ ), and well-being ( $\beta = -0.206, p = .001$ ) through self-compassion.

The findings of this study underscore the role of dispositional mindfulness and self-compassion in enhancing psychological well-being among emerging adults. The results support the notion that adaptive emotion regulation strategies (such as cognitive reappraisal), prosocial behaviors, and self-compassion are crucial mediators in the mindfulness–well-being relationship. Although coping competence emerged as a significant outcome of self-compassion, it did not directly influence well-being, suggesting its effects may be better understood in combination with other psychological constructs. These insights have practical implications for designing mindfulness-based interventions aimed at fostering emotional regulation, compassion, and prosocial functioning among young adults in India. Future research may explore these pathways longitudinally and consider integrating qualitative methods to capture the lived experiences behind these statistical associations.

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## List of Abbreviation

<b>Abbreviation</b>	<b>Details</b>
FFMQ	Five Facet Mindfulness Questionnaire
SCS	Self-Compassion Scale
ERQ	Emotion Regulation Questionnaire
CCQ	Coping Competence Questionnaire
PERMA	Positive Emotions, Engagement, Relationships, Meaning and Accomplishment
SEM	Structural Equation Modeling
DM	Dispositional Mindfulness
SC	Self-Compassion
ES	Expressive Suppression
CR	Cognitive Reappraisal
CC	Coping Competence
PB	Prosocial Behavior
AIC	Average Inter-Item Correlation
VIF	Tolerance and Variance Inflation Factor
KMO	Kaiser-Meyer-Olkin
SD	Standard Deviation
PE	Positive Emotion
EN	Engagement
RL	Relationships
MN	Meaning
ACM	Accomplishment
HP	Happiness
SWB	Subjective Well-Being
OBS	Observation
DES	Describe
NR	Non-Reactivity
NJ	Non-Judgment
ACW	Acting with awareness
CFA	Confirmatory Factor Analysis

AVE	Evaluated convergent validity
CFI	Comparative Fit Index
TLI	Tucker-Lewis Index
RMSEA	Root Mean Square Error of Approximation
MSV	Maximum Shared Squared Variance
HTMT	Heterotrait-Monotrait
IV	Independent Variable
DV	Dependent Variables
M	Mediator

# **CHAPTER-1**

## **INTRODUCTION**

## **Introduction**

India is presently experiencing a demographic shift, with a sizable proportion of its population being young. The median age in India is 28, significantly younger than the average ages of 38 in China and the US, 43 in Western Europe, and 48 in Japan. The "Youth in India 2022" Report, published by the Ministry of Statistics and Program Implementation (MoSPI), reveals that the percentage of youth in India who are between the ages of 15 and 29 years which fall under the category of emerging adulthood makes up 27.2% of the total population in 2021 and is predicted to drop to 22.7 by 2036. According to the report, "In terms of our nation's growth and development, the huge number of youngsters has been referred to as a window of opportunity that must be taken advantage of to maximize the demographic dividend of the country."

Emerging adulthood, spanning roughly from the ages of 18 to 29, marks a critical developmental time characterized by significant transitions between adolescence and adulthood (Arnett et al., 2014). During this stage of life, individuals frequently engage in exploring their identity, experiencing increased instability, and enjoying the liberty of self-discovery, as young adults seek out various life encounters while striving to take on the responsibilities of mature adulthood (Arnett et al., 2014; Arnett, 2007). Although, the phase of emerging adulthood is known to be particularly susceptible to common mental disorders and risky behaviours (Arnett et al., 2014). This susceptibility may be attributed to the rapid and frequent changes that took place during this period in numerous developed societies. Young individuals often experience significant life events such as leaving home, getting married, purchasing homes, entering full-time employment, navigating financial independence, managing substantial loans, and making important decisions without sufficient guidance or support from their social network (Thomas, 2023). It has been noted that Emerging adulthood is characterized by a notably elevated incidence and prevalence of common mental disorders

(Arnett et al., 2014). Research has substantiated that adult encounter various obstacles such as the fear of being rejected, the possibility of being abandoned by their partners, unfavorable depictions of others, and a proclivity to experience unease when it comes to intimacy (Mikulincer et al., 2002). Moreover, given that emerging adulthood encompasses significant changes in social responsibilities (Bell & Lee, 2008), individuals in this stage are at a higher risk of encountering psychological distress, persistent stress, minor daily hassles, maladaptive coping mechanisms, decreased self-esteem, and diminished social support (Matud et al., 2020). Based on the epidemiological studies performed in the United States, it has been noted that individuals between the ages of 18 and 29 have a prevalence rate of more than 40% for any psychiatric disorder within 12 months. This percentage is notably higher compared to individuals in other age groups, particularly when it comes to mood disorders (Kessler et al., 2005; Arnett et al., 2014). According to the research conducted by Biggio and Colleague (2017), it was found that emerging adults who possess a pessimistic attitude towards life and struggle to establish a clear sense of purpose experience lower levels of perceived psychosocial well-being. Conversely, emerging adults who maintain a more optimistic perspective and possess a subjective sense of direction tend to rate their well-being more positively and exhibit higher levels of perceived psychosocial well-being. As per the findings presented above, it can be considered that emerging adulthood represents a period of heightened vulnerability to various psychological issues. Given these findings, it becomes evident that identifying and addressing factors contributing to the psychological well-being of emerging adults is imperative. As noted by Rosales-Villacrés et al. (2021), dispositional mindfulness leads to improved psychological well-being. This is achieved through the facilitation of improved daily life and adaptive functioning, as well as the alleviation of suffering.

In understanding individual functioning and well-being, it is essential to differentiate between psychological states and psychosocial behaviors. Psychological states refer to internal

emotional and cognitive conditions that influence how individuals perceive and respond to their environment. These include traits and processes such as dispositional mindfulness, emotion regulation strategies (e.g., expressive suppression and cognitive reappraisal), self-compassion, & coping competence—factors that help regulate internal experiences, manage stress, and shape self-perceptions (Gross, 2015; Neff, 2003; Lazarus & Folkman, 1984). In contrast, psychosocial behaviors are externally observable actions and social patterns that reflect one’s adaptation and interpersonal functioning. These include prosocial behavior, characterized by voluntary actions intended to help or benefit others (Eisenberg et al., 2006), and subjective well-being, which includes self-perceived life satisfaction, positive emotions, and the absence of negative emotions (Diener et al., 1999). Together, these psychological and psychosocial constructs provide a comprehensive framework for examining how internal processes influence interpersonal behaviors and overall mental health.

### **1.1 Well-being**

Emerging adulthood is a phase characterized by significant transformations. During this period, individuals experience shifts in their relationships with both peers and family members. Moreover, they encounter new educational and occupational obligations, which bring about additional responsibilities. One of the crucial developmental tasks that emerging adults confront is the establishment of a coherent sense of identity. This process, as proposed by Erikson (1968), is a challenging endeavour that requires careful exploration and self-reflection. When a person is undergoing a period of change and working towards significant objectives, the overall state of their wellness, mental well-being, or health is typically compromised in the pursuit of success (Angad, 2019). Therefore, it is essential to understand the psychological welfare of young people to guide policy, research, and interventions aimed at enhancing their well-being. In the literature, numerous models of well-being have been proposed, each offering

unique perspectives and frameworks for understanding human flourishing. However, this study specifically focuses on the PERMA Model of well-being to conceptualize the well-being status of emerging adults, examining various aspects within the PERMA framework. Positive psychologists strive to assess well-being from a positive-oriented perspective, such as enhancing subjective well-being, fostering mental well-being, and facilitating personal flourishing (Kun, 2017). Mental well-being plays a foundational role in our capacity as individuals and as a society to engage in cognitive processes, express emotions, socialize, work, and find fulfillment in life. The concept of well-being is multifaceted and requires assessment through various methods to encompass key elements of positive human experiences, including resilience and optimistic outlooks (Leontopoulou, 2020). Seligman's (2011) PERMA model has been suggested as an effective framework for evaluating different aspects of mental well-being in positive education, thereby enabling the measurement of well-being as a multidimensional construct (Kern et al., 2015).

### **Theoretical Foundation of Seligman's Well-being Model**

As per Seligman's theory (2011), well-being encompasses both hedonism and eudaimonism, consisting of five domains of well-being: Positive emotion, Engagement, Relationships, Meaning, and Accomplishment. By emphasizing the importance of dedicating time, attention, and focus to these elements, individuals can potentially experience a more joyful, involved, and satisfying life (Hill, 2020; Kovich et al., 2023).

According to Seligman, well-being involves more than mere absence of negative psychological states—it symbolizes a more enriched condition of thriving. (Seligman & Csikszentmihalyi, 2000). What distinguishes Well-being Theory from other multidimensional frameworks—such as Psychological Well-Being by Ryff (1989), Self-Determination Theory (Ryan & Deci, 2001), and Subjective Well-Being (Diener et al., 2010)—is the integration of

both eudaimonic (living with purpose) and hedonic (feeling joy and pleasure) components. (Coffey et al., 2016). The five components of Well-being Theory, as proposed by Seligman (2011), are designed to reflect the preferences of individuals who possess autonomy and the freedom to choose what brings them fulfillment. According to Seligman, for any element to be regarded as a true component of well-being, it must fulfill three distinct criteria. First, it should foster well-being. Second, it must be sought for its own intrinsic value. Third, the component must be defined and measured independently of the others, maintaining its distinctiveness within the model. These criteria ensure that each element within the PERMA framework functions as a distinct and crucial component of an all-encompassing comprehension of well-being.

### **The components of Seligman's Well-being Theory**

The theory of well-being comprises five distinct elements and every component plays a role in enhancing happiness. The integration of PERMA components fosters thriving, which signifies the highest level of performance for people, groups, societies, countries, and the world (Seligman, 2011; Kovich et al., 2023). The five components named earlier are described as follows.

*1. Positive Emotion:* Positive emotions encompass pleasurable sensations associated with happiness, such as experiencing joy, contentment, and cheerfulness (Kern, 2015). This component is most closely linked to the general idea of happiness. Emphasizing positive feelings involves cultivating the capacity to maintain a hopeful outlook and interpret life's challenges and situations in a constructive and optimistic manner. Throughout their lives, all individuals have encountered various forms of positive emotions (Hill, 2020). Kun et al. (2017) suggested that these positive emotions significantly influence multiple facets of our existence. They have been associated with enhanced physical health, as they can alleviate stress and encourage overall well-being. Moreover, positive emotions are essential in nurturing robust

and meaningful relationships, as they enhance effective communication, empathy, and trust. In addition, these emotions foster a sense of optimism and hope for the future, empowering individuals to navigate challenges and persist despite adversity. Overall, the power of positive emotions cannot be underestimated, as they have far-reaching benefits that extend beyond individual well-being.

2. *Engagement*: Engagement denotes the connection individuals experience with activities or organizations. It is characterized by a sense of absorption, interest, and active participation, where individuals feel fully immersed and meaningfully involved in various aspects of life (Kern et al, 2015). This concept is closely associated to the idea of flow, as explained by Kovich et al (2015). According to psychologist Csikszentmihalyi (1990), flow is characterized by being completely immersed in an activity for its own sake, with the ego disappearing, time passing quickly, and every action, movement, and thought flowing seamlessly like jazz (Hill, 2020). By focusing on activities that bring us joy and align with our values, we can achieve a state of complete engagement with the present moment, entering the state of flow as described by Seligman (2011). It has been noted that engagement exhibits a positive correlation with various measures of well-being, such as life satisfaction, contentment in both work and leisure activities, and an elevation in positive emotions following the engagement encounter ( Rogatko, 2009; Coffey et al., 2016).

3. *Relationship*: Positive relationships include constructive interrelationships and reciprocal support systems (Kern et al., 2015). Fredrickson (2011) emphasized the importance of both temporary connections and lasting bonds in shaping the social fabric that integrates individuals into their surrounding social world. By cultivating strong networks of relationships with others, we can improve our well-being (Kun et al., 2017). Research has shown that friendships positively influence self-esteem, and enhancements in the quality of these friendships are associated with improved well-being (Bagwell et al., 2005). Pascha (2017) highlighted the

significance of positive relationships with various individuals such as parents, siblings, peers, coworkers, and friends. These relationships play a key role in establishing meaningful connections and offering support during challenging times that demand resilience.

4. *Meaning*: Believing in the significance of one's existence and experiencing a sense of association with a higher purpose defines the concept of meaning (Kern et al., 2015). Seligman (2011) defines it as having a sense of purpose in life, which entails utilizing personal strengths not solely for self-gratification, but to achieve objectives that are deemed significant. Our optimal state is attained when we devote our time and efforts to endeavors that transcend ourselves. Such endeavors may encompass engaging in volunteer work, being part of a community, or a civic or religious organization, or pursuing knowledge with a specific aim. Such activities are deeply meaningful and offer individuals a strong sense of purpose, giving them a clear and motivating reason for their actions. (Kun et al., 2017).

5. *Accomplishment*: Achievement encompasses advancing towards objectives, possessing the ability to engage in everyday tasks, and experiencing a sense of fulfillment (Kern et al., 2015). Seligman (2011) defines achievement as a continuous and resolute pursuit of mastering or achieving something for personal fulfillment. Therefore, measuring well-being through achievement should focus on individuals' motivation to accomplish goals (such as perseverance) rather than solely on their tangible accomplishments (Coffey et al., 2016). Achievement frequently necessitates determination and tenacity, encompassing academic pursuits, athletic endeavors, or professional accomplishments (Seligman, 2011). According to Mulder (2018), the key focus lies in exerting oneself to enhance personal performance through engaging challenges. This process aids in cultivating a positive self-image, enabling individuals to take pride in their accomplishments. Mulder highlights that increased self-confidence leads to greater happiness and enhanced overall well-being. Additionally,

establishing achievable goals promotes a sense of accomplishment and acts as a motivating factor to keep moving forward.

Multiple studies suggest that each element of the PERMA Model plays a distinct role in enhancing an individual's overall well-being. Research has shown that higher levels of PERMA among college students are linked to better physical health outcomes. Specifically, PERMA was found to be a significant predictor of reduced doctor visits related to physical health and fewer self-reported physical health symptoms both at the same time and after a period of 2 years (Coffey et al., 2016). Research performed by Kern et al. (2015) revealed that the various components of the PERMA Model exhibited significant associations with several positive outcomes, including hope, satisfaction with life, gratitude, academic engagement, and overall activity levels. Wagner and colleagues (2019) and Littman-Ovadia and colleagues (2017) discovered favourable connections between character strengths and the dimensions of PERMA. Additionally, they observed that individuals who experienced character strengths also reported higher levels of positive emotions, fulfilling relationships, and increased engagement in their professional and academic pursuits.

## **1.2 Mindfulness**

The concept of mindfulness originated from ancient Eastern indigenous systems, particularly Buddhist psychology (Black, 2011). The term "mindfulness" originates from the *Pali* term *Sati*, deeply rooted in Buddhism. It serves as the initial component of the Seven Factors of Enlightenment, while the practice of "right" mindfulness represents the ultimate stage of the Noble Eightfold Path (Pierce, 2017). Buddhists employed the practice of mindfulness with the specific aim of cultivating self-awareness and discernment, ultimately leading to the attainment of enlightenment and liberation from suffering (Pierce, 2017). However, Mindfulness is currently acknowledged as an intrinsic attribute of human consciousness, which is a cognitive

ability focused on the current moment, which varies in intensity among and within individuals and can be measured objectively regardless of religious, spiritual, or cultural ideologies (Black, 2011). The human mind tends to dwell on thoughts about the past or the future. Mindfulness helps anchor the mind in the present moment, promoting awareness on the present moment. (Hariharan et al., 2024). Despite mindfulness being a longstanding practice in Eastern philosophy, it has recently garnered renewed interest in the modern Western world. The academic community has only recently begun to focus on mindfulness as a psychological construct, leading to ongoing discussions on how to operationalize and establish a clear definition as a psychological construct (Mondal, 2022).

Kabat-Zinn (1994) articulated mindfulness as a method of focusing attention in a specific manner; intentionally, in the current moment, and without judgment. Dispositional Mindfulness (Trait Mindfulness) is characterized as a natural tendency underlying the inclination to be mindful in everyday situations (Brown & Ryan, 2003; Kong et al., 2014). Brown and Ryan highlighted that while it is acknowledged that many individuals possess the ability to focus and be mindful, there is a recognition that people vary in their inclination or willingness to be attentive and maintain focus on the present moment. Moreover, they pointed out that the mindfulness capacity within individuals is not fixed, as it can either be enhanced or diminished by different influences (Brown & Ryan, 2003). Bishop et al. (2004) presented a collective document that aimed to establish a clear understanding of mindfulness. As per their perspective, mindfulness is characterized as the process of consciously directing one's attention to the current moment. Engaging in this practice allows individuals to improve their awareness of cognitive events. Additionally, mindfulness involves adopting a specific mindset characterized by curiosity, acceptance and openness towards one's experiences (Bishop et al., 2004; Siegel et al., 2009). This trait mindfulness definition might resonate with numerous individuals, as it aligns with the primary objectives of meditation techniques, which aim to

enhance focus and consciousness on the current moment (Tang & Tang, 2020). However, Dispositional Mindfulness should be distinguished from State Mindfulness as the present research focuses on Dispositional Mindfulness. Dispositional Mindfulness pertains to the extent of mindfulness an individual possesses during their daily routines, while State Mindfulness refers to the level of mindfulness one achieves during or after participating in mindfulness meditation practices (Cahn & Polich, 2006; Murphy et al., 2012). According to these definitions, one can deduce that the act of mindfulness encompasses the act of remaining grounded in the current moment and being aware of both external and internal sensations, without any intention of manipulating or altering them. Consequently, it cultivates a mindset of acceptance and openness (Mondal, 2022).

Naik et al. (2013) have identified three key features of Mindfulness as *Purpose*- Mindfulness entails the deliberate and conscious act of directing one's attention, as opposed to allowing it to wander. The second key feature is *Presence* – Mindfulness requires complete engagement and attentiveness to the current moment, acknowledging any thoughts associated with the past or future as mere occurrences in the present. The third key feature is *Acceptance* – Mindfulness requires a non-judgmental attitude toward present experiences, whether they are sensations, thoughts, or emotions. Instead of categorizing them as positive or negative, enjoyable or unpleasant, individuals are encouraged to simply acknowledge their presence and observe them until they naturally fade away.

In addition to this, Baer and colleagues conducted research into the facet organization of mindfulness. A factor structure analysis on the items of various Dispositional Mindfulness questionnaires uncovered five distinct facets of mindfulness: (1) *Observing* - can be described as the act of perceiving or focusing on both internal and external sensations. In other words, it is an ability to witness experiences happening in the here and now; (2) *Describing* – It involves the act of articulating internal experiences by assigning them verbal labels or the capacity to

articulate experiences occurring in the current moment; (3) *Acting with awareness* – It can be described as the act of consciously attending to one's present activities, in direct contrast to acting on automatic pilot; (4) *Nonjudging of inner experience* – It involves adopting a non-evaluative position towards one's thoughts and emotions or present moment experiences; (5) *Non-Reactivity to internal experiences* - it involves observation of thoughts and affective responses as they originate and sustain, without becoming entangled or overwhelmed by them (Baer et al., 2006; Tang & Tang, 2020).

### **Dispositional Mindfulness and Well-Being**

Mindfulness could potentially hold significant value in detaching individuals from automatic thoughts, routines, and detrimental behavioral patterns. Consequently, it could serve as a pivotal factor in promoting conscious and self-validated regulation of behavior, a concept that has long been linked to the augmentation of overall well-being (Ryan & Deci, 2000; Bohlmeijer et al., 2011). Mindfulness techniques have been incorporated into a variety of therapeutic approaches (Bohlmeijer et al., 2011). Prominent examples encompass Mindfulness-based interventions aimed at stress reduction (Kabat-Zinn, 1990), cognitive restructuring (Teasdale et al., 2000), behavior modification (Linehan, 1993), and emotion regulation (Hayes et al., 1999), and Acceptance-based behavioral therapy (Roemer et al., 2008). Mindfulness contrasts with mindless thinking, which involves a less alert state of habitual or automatic functioning. Excessive mind wandering can lead to the mind operating on autopilot. When individuals are not fully present at the moment, they tend to react habitually based on past experiences. Operating on autopilot means the mind is not fully conscious of the present moment, resulting in thoughts and behaviors that may not always be suitable or beneficial to the current situation (Ben Salem & Karlin, 2023). Dispositional mindfulness has been linked to embracing thoughts, emotions, and situations, thereby potentially resulting in

enhanced positive self-assessments (Kong et al., 2014). Self-awareness plays a critical role in assisting emerging adults in navigating and conquering the stress associated with the social and academic dimensions commonly associated with the conventional college experience (Ben Salem & Karlin, 2023). Mindfulness is regarded as a significant psychological trait and characteristic that plays a critical role in safeguarding individuals against adverse life circumstances and influencing diverse outcomes (Huang et al., 2021).

### **1.3 Self-compassion**

In recent years, there has been an increasing focus on the exploration of self-compassion, as demonstrated by the substantial research carried out in this area. More than 200 journal articles and dissertations have been dedicated to examining self-compassion since 2003. It was during this year that the first two articles by Neff (2003a;2003b) were published, which provided the initial definitions and measurement techniques for self-compassion (Neff, 2003a; 2003b; Neff & Dahm, 2015). Compassion towards oneself and others has long been a central concept in Buddhism, spanning hundreds of years. However, in Western psychology, this construct is relatively recent and still gaining recognition (Dzwonkowska & Żak-Łykus, 2015). Because Buddhist psychology's primary emphasis is on the analysis and comprehension of the self, it has proven to be highly valuable for researchers investigating self-processes. This is evident in the work of Gallagher and Shear (1999), who have found many of the concepts and principles within Buddhist psychology to be particularly beneficial in their research endeavors (Neff, 2003). According to Paul Gilbert (2009, p. xiii) compassion can be defined as a fundamental act of kindness, accompanied by a profound understanding of one's suffering and the suffering of all living beings. This definition encompasses the sincere desire and active endeavour to alleviate this suffering. In short, this explains when a person perceives the difficulty or suffering of another person, feels the pain, and tries to find ways to help,

Self-compassion involves the ability to acknowledge one's suffering with kindness, interconnectedness, and a caring attitude (Neff & McGehee, 2010). Additionally, self-compassion entails extending empathy towards oneself at times of pain, failure, or difficulty, while acknowledging that such experiences are a natural and shared aspect of human existence. (Neff & Germer, 2017). Therefore, self-compassion involves directing compassion toward oneself (Neff & McGehee, 2010). Self-compassion is not synonymous with self-centeredness, as it is closely linked to feelings of compassion and concern for others. It does not imply prioritizing self over others. It emphasizes an individual being compassionate and understanding towards oneself (Neff, 2003). Self-compassion gains significance when contemplating individual shortcomings, errors, and setbacks, as well as when facing distressing circumstances in life that lie beyond our influence (Neff & Germer, 2017). By practicing self-compassion, individuals create a nurturing environment that enables them to accurately examine their thoughts, emotions, and actions without the fear of self-judgment. This emotional safety empowers individuals to gain a more accurate understanding of their maladaptive patterns and make necessary adjustments to their thinking, emotions, and behaviors (Brown, 1999). Self-compassion stands apart from self-pity in a significant way. Self-pity involves adopting a "woe is me" mentality, where individuals become consumed by their troubles and fail to acknowledge that others may be facing similar challenges. On the other hand, self-compassion acknowledges the universal nature of suffering, promoting a mindset that fosters connection and inclusivity with others (Neff & Dahm, 2015).

### **Components of Self-Compassion**

These elements, Self-kindness, Common Humanity, and Mindfulness, work together harmoniously to cultivate a sense of self-compassion (Neff, 2003 ; Neff & Germer, 2017).

These three components have been discussed below, providing a comprehensive understanding of how each element contributes to fostering self-compassion.

(1) *Self-kindness*: Self-kindness involves showing kindness and understanding towards ourselves when we make mistakes or fall short, rather than being overly critical. It means accepting our imperfections and realizing that nobody is perfect (Neff & Germer, 2017). Self-kindness is an attitude towards 'I' / oneself, rooted in acknowledging personal flaws and errors. It is demonstrated by showing compassion, nurturing, and positivity during challenging moments, without engaging in self-judgment or self-evaluation. Recognizing that it is unrealistic to always meet one's expectations and ideals helps prevent feelings of frustration, stress, and harsh self-criticism. The opposite of self-kindness involves self-judgment and an excessive tendency to criticize oneself (Dzwonkowska & Żak-Lykus, 2015) which is evident among individuals with anxiety and depressive disorder (Blatt, 1995). Self-Kindness also involves approaching any disliked aspect of one's personality with gentleness and use a soft and supportive tone towards oneself when addressing it which are imperative aspects of Self-Kindness (Neff, 2009).

(2) *Common humanity*: Common humanity involves recognizing our shared humanity by viewing our own experiences as interconnected with the experiences of others, rather than viewing them as divisive and alienating (Neff, 2003b). In terms of self-compassion, recognizing the sense of common humanity entails acknowledging that everyone encounters failures, makes mistakes, and experiences moments of being wrong. It is a fundamental aspect of being human that we do not always attain our desires and often face disappointment, whether intrinsically or extrinsically. We are not alone in our imperfections; instead, our imperfections serve as a testament to our

membership in humanity (Neff & Dahm, 2015). This perspective helps prevent feelings of frustration and irritation when facing failure, preventing feelings of isolation, loneliness, and the misconception of being the only one who makes mistakes and suffers. On the contrary, perceiving one's position as separate from the world can lead to a sense of isolation and detachment (Dzwonkowska & Żak-Łykus, 2015).

- (3) *Mindfulness*: often defined as a state that involves observing and acknowledging present-moment occurrences without passing judgment or reacting to them. These occurrences encompass a wide range of experiences, including emotions, thoughts, physical sensations, and external stimuli like visual cues, auditory stimuli, and olfactory sensations (Kabat-Zinn, 2005; Baer et al., 2012). Mindfulness, within the context of self-compassion, is observed as a harmonious state of consciousness towards negative thoughts and emotional patterns, instead of evading and repressing those thoughts and emotions (Baer et al., 2012). Overidentification with one's negative experiences stands in stark contrast to mindfulness (Dzwonkowska & Żak-Łykus, 2015). Mindfulness is essential because, in times of adversity, it is common for us to instinctively shift into a problem-solving mindset, neglecting the importance of providing solace to ourselves amidst the challenges we encounter. On the contrary, practicing mindfulness provides a space of detachment, preventing us from becoming entangled and overwhelmed by our adverse reactions (Bishop et al., 2004; Neff, 2012).

Although these elements of self-compassion possess unique conceptual characteristics and are subjectively experienced in distinct ways, they also intertwine in a manner that mutually reinforces and fosters each other (Neff, 2003b). Self-kindness reflects the affective facet of self-compassion, involving Nonjudgmental self-regard. Mindfulness, meanwhile, functions as

the regulatory element that balances and supports both self-kindness and common humanity, helping individuals maintain awareness and composure in difficult moments (Zhang et al., 2010).

### **Self-Compassion and Its Relationship with Well-being**

Self-compassion acts as a facilitative adaptive mechanism, specifically in diminishing self-blaming, avoidance, and denial. Moreover, it is closely associated with acceptance, positive reinterpretation, and personal growth (Leary et al., 2007). In addition, Self-compassion, when utilized as a constructive and empathetic reaction during times of stress or adversity, has the potential to motivate emerging adults to manage their negative emotions effectively. By adopting this approach, individuals are better equipped to view challenges in a more objective and equitable manner, ultimately enabling them to come to terms with challenging circumstances (Neff, 2003a) ultimately leading to enhanced mental well-being. The integration of self-compassion into routine clinical practice has been substantiated by research. The development of self-compassion has the potential to assist clinical and health psychologists in embracing a compassionate stance during psychotherapeutic interventions (Yela et al., 2020). Furthermore, training in self-compassion has been recommended to enhance caregiving and could potentially boost job fulfillment among healthcare professionals (Scarlet et al., 2017; Yela et al., 2020). Self-compassionate individuals possess the ability to assume a suitable degree of accountability for their thoughts and behaviors, thereby allowing them to avoid the pitfalls of excessive self-blame. Rather than subjecting themselves to harsh self-criticism when they make mistakes, they approach their errors with empathy and benevolence. This well-balanced outlook empowers them to reframe challenges in a positive light, perceiving setbacks as chances for personal development and acquiring knowledge, rather than as indications of their own shortcomings (Maynard et al., 2022). Breines and Chen (2012) discovered that

cultivating self-compassion towards one's personal weaknesses, failures, and past moral transgressions led to increased motivation for self-improvement, greater determination to acquire knowledge, and a conscious effort to avoid repeating previous errors. Self-compassion not only serves as a safeguard during challenging times, but it also assumes a distinctive and noteworthy function in fostering individuals' sense of connection, worthiness, and acceptability. These dimensions are integral components of the positive affect scale, further emphasizing the significance of self-compassion in promoting overall well-being (Barnard & Curry, 2011). In general, self-compassion has been acknowledged as a unique construct separate from other self-related concepts and is linked to mental well-being (Barnard & Curry, 2011).

#### **1.4 Emotion regulation**

Emotions are frequently depicted as powerful forces that have a profound impact on individuals' behaviour, with the methods by which we manage them carry significant consequences for our health and interpersonal connections (Koole, 2009; Webb et al., 2012; Cameron et al., 2018). Additionally, our emotional experiences shape our psychological, social, and physical welfare. For instance, they can propel us towards achieving our goals, foster meaningful connections with others, and steer our actions towards promoting better health (Verzeletti et al., 2016). Prior to delving into the concept of emotion regulation, it is essential to comprehend the significance of 'Emotion'. The American Psychological Association (APA) defines emotion as a complex response pattern involving experiential, behavioral, and physiological components.

Emotions serve as the means through which individuals navigate matters or circumstances that hold personal significance to them (UWA, 2019). Over the last decade, there has been a

significant surge in studies focusing on emotion regulation. This increased empirical interest in the construct of emotion regulation has established this field as an evolving area within modern psychology (Koole, 2009). Emotion regulation is a subject of study that is explored across various disciplinary domains, including neuroscience, developmental psychology, personality psychology, social psychology, clinical psychology, and health-related literatures (Gross, 2007; Verzeletti et al., 2016). Emotion Regulation is defined as “an individual's capacity to manage or modulate their emotional responses in order to achieve their goals” (Gross & Thompson, 2007). Emotion regulation pertains to the strategies individuals employ to control their emotional responses to achieve personal and social purposes (Thompson et al., 2008). Verzeletti and colleagues suggested that emotion regulation is a mechanism that can be initiated at any stage of emotional response, utilizing strategies that encompass both conscious and unconscious processes (Verzeletti et al., 2016). Throughout the process of emotion regulation, individuals can amplify, sustain, or diminish both positive and negative emotions. As a result, emotion regulation frequently encompasses alterations in emotional reactivity (Koole, 2009). Thus, emotion regulation offers insight into the varying ways individuals cope with sadness, such as seeking support from friends or turning to substances to alter their mood. Emotion regulation is a distinct form of emotion processing, especially emotional sensitivity. It involves individuals' deliberate efforts to control their emotional experiences. Broadly speaking, emotion regulation encompasses emotion regulation includes handling various emotionally intense states. It plays a role in ending an emotional response and initiating an emotional reaction. Research by Koole (2009) highlights that emotional sensitivity and emotion regulation follow different developmental paths and fulfill distinct roles throughout a person's life.

## **Process Model of Emotion Regulation Strategy**

Individuals can achieve their emotion regulation goals by engaging in various activities. They can multitask or perform multiple actions in rapid succession to attain these goals (Gross, 2015). Gross (2002) has categorized emotion regulation strategies within the process model into various distinct types, depending on their primary impact within the emotion generative process (English et al., 2017) and it potentially offer a beneficial structure for examining variations in emotion regulation across different age groups (Gurera & Isaacowitz, 2019). Gross (1998) outlined five primary families of regulatory processes for managing responses to emotional experiences.

*(1) Situation selection* – It refers to the act of choosing or avoiding specific situations to attain the most favourable emotional outcomes (Gurera & Isaacowitz, 2019). This form of emotional regulation entails engaging in behaviours that increase or decrease the probability of encountering a situation that is anticipated to elicit positive or negative emotions. Once a particular situation is selected, it becomes possible to modify the said scenario to adjust its emotional effect (Yarwood, 2022) through the process of ‘Situation Modification’.

*(2) Situation Modification-* Situation modification refers to the act of individuals attempting to modify certain elements of their external surroundings to bring about a change in their emotional experience while already being engaged in an event (Yarwood, 2022). Yarwood explained it with an example, suppose you are feeling anxious about delivering a speech in your class; in such a scenario, you may request your friends to occupy the front row seats so that you can seek comfort by glancing at them. According to Gross (2015), the term "situations" can refer to both external and internal factors, but in this context, situation modification specifically pertains to adjusting physical surroundings rather than altering internal factors such as thoughts. Given that situation selection and situation modification are influenced by past

experiences, older adults may derive greater benefits from these strategies compared to young adults. This is attributed to the older adults' wealth of experiential knowledge, which surpasses that of their younger counterparts (Gurera & Isaacowitz, 2019). To distinguish between situation selection is carried out prior to the onset of an emotional circumstance or provocation, while the situation modification takes place immediately after the commencement of the emotional experience (Gurera & Isaacowitz, 2019). When evaluating the significance of various elements within a given scenario, our focus may be directed towards a specific component where the 'attention deployment' occurs (Yarwood, 2022).

*(3) Attention Deployment* - It involves the act of consciously directing one's attention within a specific context with the intention of influencing their emotions (Gross, 2015). In other word, attention deployment involves shifting our focus either to the external environment or internally to our own thoughts and feelings, without making any changes to the external environment itself, as is the case with situation modification (Yarwood, 2022). For example, individuals who want to steer clear of negative stimuli in their surroundings might opt to listen to music that distracts them or engage in a task that is unrelated (Gurera & Isaacowitz, 2019). This strategy is commonly employed at a later stage in the emotional experience compared to preceding strategies like situation selection (Gurera & Isaacowitz, 2019). A prevalent form of attentional deployment distraction entails shifting one's focus towards different elements of the situation or diverting attention completely away from the situation itself (Gross, 2015).

*(4) Cognitive Change* -It involves adjusting one's evaluation of a circumstance to change its emotional impact, whether by altering one's perspective on the situation or on one's ability to handle the challenges it presents (Gross, 2015). Subsequently, this interpretation leads to subjective feelings, as well as alterations in behavior and physiology, and modifying these

cognitive evaluations can alter our emotional encounters (Yarwood, 2022). Gross (2015) documented that cognitive change can be employed in various contexts. On one hand, individuals may apply cognitive change to an external situation, such as perceiving an interview as an opportunity to acquire knowledge about the company. On the other hand, cognitive change can also be directed towards an internal situation, where individuals reframe their anxiety as excitement, viewing it to enhance their performance in a game. *Cognitive Reappraisal* is a form of cognitive change that has been extensively researched (Gross, 2015). Cognitive Reappraisal (referred to CR hereafter) is characterized as an antecedent focused strategy, a deliberate cognitive shift that aims to alter the emotional impact of a situation by interpreting it differently. The goal of CR is to reduce or enhance the emotional experience.

(5) *Response modulation* –Response Modulation is the fifth concept of emotion regulatory processes which takes place towards the end of the emotion-generative process (Gross, 2015). It involves the modification of emotional responses and expressions that arise from a particular event (Gross, 1998). Strategies such as alcohol, cigarettes, drugs, as well as activities like eating and exercise including physical exercise and deep breathing, can help reduce both the emotional and physical effects of negative emotions (Gross, 2015). The most frequently researched form of response modification is *Expressive Suppression* (refers to ES hereafter) (John & Gross, 2004). ES refers to *response focused strategy*, serving as a method of response modulation that entails suppressing the current display of emotional behavior within the given context (Verzeletti et al., 2016). In other words, this phenomenon takes place when an individual attempts to conceal or restrain facial expressions that correspond to their emotional state, either during or following the emotional experience (Gross & Levenson, 1993; Yarwood, 2022). It is believed that CR can be an effective strategy in influencing the overall impact of emotions while ES is believed to be a less efficient approach compared to CR, as it does not

alter the influence of the emotional subjective experience. For instance, it may not have a significant impact on physiological activation, but rather focuses on reducing or inhibiting the outward expression of the felt emotion (Verzeletti et al., 2016; Gross, 1998).

### **Emotion Regulation and Well-being**

A key distinction is made between two primary emotion regulation strategies: Cognitive Reappraisal and Expressive Suppression. Cognitive Reappraisal, which falls under the category of antecedent-focused strategies, and Expressive Suppression, which belongs to the response-focused strategies (Gross, 2002; Gross, 2015). Numerous studies have demonstrated the relationship between Cognitive Reappraisal and Expressive Suppression with diverse psychological outcomes (Verzeletti et al., 2016). Suppression has minimal effects on negative emotion experience, but it tends to reduce positive emotions. It is associated with increased sympathetic activation of the cardiovascular system, which may not correspond to the metabolic demand. In contrast, reappraisal reduces the experience and expression of negative emotions while promoting positive emotions (Gross, 1998; Gross, 2002). The ability to effectively modify emotional expressive behavior can assist individuals in adapting flexibly to situational requirements. Possessing this capacity may enable individuals to better convey attitudes, objectives, and intentions that are suitable in different circumstances, potentially resulting in rewards and satisfaction. Consequently, the ability to successfully accommodate situational demands could be linked to different markers of prosperity and achievement (Keltner & Haidt, 1999; Cote et al., 2010). Through research, it has been investigated how differences in individuals' capacity to modify their emotional responses to various stimuli are linked to their overall well-being and financial achievements. The findings indicate that those who are most effective at controlling their emotional reactions to sudden noises tend to report higher levels of life satisfaction. On the other hand, individuals who excel at intensifying their

emotional responses to repulsive scenes in movies tend to report higher levels of life satisfaction, as well as possess greater disposable income and socioeconomic status (Cote et al., 2010). The author concluded that the ability to effectively utilize emotion regulation strategies in controlled settings has been shown to have a strong correlation with both overall well-being and financial prosperity (Cote et al., 2010). In the realm of social interactions, it seems that the act of suppression yields more unfavorable outcomes than the practice of reappraisal. Suppression, when contrasted with reappraisal, causes individuals to express fewer of their positive and negative emotions, which in turn diminishes the level of social support they receive and may even result in them being less favored by others. Furthermore, unlike reappraisal, suppression is associated with elevated blood pressure in social companions (Gross, 2002).

### **1.5 Coping competence**

The significant transitions and challenges during Emerging adulthood can be a source of stress, making the ability to cope effectively even more crucial during this stage (Arnett, 2007). Emerging adults who develop strong coping competence are better equipped to navigate these changes, leading to more positive outcomes in terms of mental health and overall life satisfaction (Konaszewski et al., 2022). The concept of coping competence was initially proposed within the framework of action control theory, which assesses the inclination towards action as opposed to a focus on current circumstances (Kuhl, 1984). Kuhl formulated the theory of action control to differentiate between individuals who exhibit action-oriented behaviour, demonstrating the ability to effectively initiate and maintain actions directed towards goals even in the presence of obstacles or challenges, and those who display a state-oriented approach, characterized by a tendency towards hesitation and indecisiveness when confronted with stress or adversity. Schroder and Ollis (2013) have defined coping competence as a

characteristic that acts as a protective factor against the emergence of depression rooted in helplessness. It encompasses the ability to effectively handle adverse life events and setbacks, as evidenced by a decreased likelihood of experiencing helplessness reactions and a swift recovery from any symptoms associated with helplessness. Schroder (2003) has examined coping competence as a variable that contributes to resisting stress. This variable is rooted in the theories of helplessness and hopelessness to depression. From a theoretical standpoint, the key aspect of coping competence lies in its ability to counteract a depressogenic attributional style and the resulting motivational deficits during periods of stress and crisis. Coping competence also involves widespread negative self-efficacy, control, and outcome beliefs, or simply put, the lack of susceptibility to feelings of helplessness or hopelessness (Schroder, 2003).

### **Coping Competence Theory**

According to the coping-competence theory, the outcomes and competence in future life are influenced by the challenges faced in the present (Blechman et al., 1995). The theory postulates that obstacles can be categorised into three distinct domains: *affective*, which encompasses challenges that demand responses primarily addressing emotional situations; *social*, which encompasses challenges involving interpersonal situations; and *achievement*, which encompasses issues focusing on goal-directed behaviour, in physical, academic and work-related domains (Moreland & Dumas, 2007). Blechman et al. (1995) reported the significant role of social interactions in shaping future trajectories of life and their mediating function on surface attributes, risk-protection factors, and competency on future life outcomes. The theory of coping competence suggests that during the early stages of development, young children display coping mechanisms that may be seen as precursors to antisocial and asocial behaviour. However, these coping mechanisms play a crucial role in survival and attachment (Moreland

& Dumas, 2007). Just as crying serves as a signal in infants for their primary needs like affection, food, and protection. Similarly, avoidance of unfamiliar situations helps toddlers to avoid potential dangers. Impatient demands can be seen as early attempts to assertively communicate their needs, while angry outbursts are expressions of emotions that occur before the child develops the ability to express themselves appropriately in social settings (Moreland & Dumas, 2007). The theory also posits that despite the individuality of each life narrative, it is still influenced by a continuous series of common challenges experienced by people over the course of their lives (Blechman et al., 1995).

### **Coping Competence, Dispositional Optimism, and Self-Efficacy**

Literature has shown that Coping competence has certain characteristics with other notions, including Dispositional Optimism and Self-efficacy (Schroder, 2003). Scheier and Carver (1985) provided a definition of dispositional optimism as a consistent and broad anticipation that favourable results would happen in significant areas of life. Individuals who possess a dispositional inclination towards optimism, meaning they normally have positive expectations for the future, tend to experience lower levels of discomfort in many circumstances, even those that are stressful (Andersson, 1996; Nes & Segerstrom, 2006). Self-efficacy is operationally defined as an individual's belief in their capacity to successfully accomplish the desired outcome (Bandura, 1982).

Individuals with low self-efficacy are characterised by their tendency to shy away from complex activities, their inability to effectively plan and execute objectives, and their lack of belief in their abilities to succeed (Safaria & Ahmad, 2013). In contrast to these two phenomena, coping competence refers to the ability to successfully handle adverse life events and setbacks, as shown by a decreased probability of exhibiting feelings of helplessness and a

rapid recovery from any symptoms of helplessness that may arise (Schroder & Ollis, 2013). In simpler terms, coping competence refers to the ability to effectively handle and bounce back from difficult situations. Dispositional optimism involves maintaining an optimistic outlook and anticipating favourable outcomes in the future. Self-efficacy entails having confidence in one's capacity to successfully do certain activities. Each person plays a distinct role in how they handle difficulties and strive towards their objectives.

### **Coping Competence and Mental Health**

It has been noted that having a high level of coping competence will weaken the association between a risk factor and the occurrence of adverse mental health conditions (Hovey et al., 2022). There is a negative correlation between coping competence and factors such as depression, stress response, neuroticism, feelings of alienation, and the use of maladaptive coping strategies. On the other hand, there is a positive relationship between coping competence and well-being, life orientation, and self-efficacy (Schroder & Ollis, 2013). Hovey et al. (2022) propose that the perception of being burdened is a crucial factor in the likelihood of suicide among college students. Specifically, the results indicate that addressing coping competence and hopelessness might be effective in reducing the link between perceived burdensomeness and suicidal thoughts. These factors should be targeted in treatments to potentially weaken the relationship between feeling like a burden and having thoughts of suicide. Furthermore, in her research, Schroder (2003) discovered that coping competence acts as a buffer against the impact of stress. Additionally, a significant correlation exists between stress and poor coping competence. However, the study has shown that patients with higher level of coping competence had low levels of depression and were not impacted by stress (Schroder, 2003). While it has been established that coping competence develops in earlier stages of life (Compas et al., 2001), it is possible to promote this construct at the preschool level, thus preventing maladaptive developmental outcomes.

## 1.6 Prosocial behaviour

Good deeds make you feel good. Over the last several decades, this straightforward adage has been subjected to rigorous scientific examination, yielding a substantial amount of data supporting its validity (Miles et al., 2021). Prosocial behaviour entails various behavioural components recognised by larger social norms as helpful to others (Penner et al., 2005). McDougall (1908) proposed that prosocial behaviour is an outcome of instinctual patterns in humans. Prosocial behaviour refers to voluntary activities or behaviours that are intended to benefit others and society, such as sharing, caring, and assisting (Eisenberg et al., 2006). Prosocial behaviour encompasses a wide range of conditions, including both simple acts of kindness such as assisting in picking up items, as well as more long-term or organised actions like working with charity organisations (Lay & Hoppmann, 2015), sharing resources, offering one's knowledge, working together and showing compassion for others, buying items that are good for the environment and conforming to societal norms (e.g., paying taxes or observing traffic laws) (Piff et al., 2012; Goldsmith et al., 2020).

The reason why people help others focuses on three types of mechanisms (Penner et al., 2005). (a) *Learning*; the learning explanation used fundamental concepts derived from learning theories, including operant conditioning and social learning, to facilitate the acquisition of helpful abilities and the development of beliefs about the importance of using these talents for the betterment of others (Grusec et al., 2002). (b) *Social and personal standards*; the concept of social and personal standards focuses on the role of norms, such as social duty and reciprocity, in promoting helpful behaviour. According to Dovidio (1984), individuals are motivated to assist others to retain their self-images or attain their goals. Additionally, Schwartz and Howard (1982) argue that helping behaviour also fulfils personal needs. (c) *Arousal and affect*; these methods acknowledge the significant influence of emotion in stimulating prosocial behaviour. Affect plays a crucial role in several possible scenarios when

assistance is provided (Penner et al., 2005). Individuals experience arousal in response to the suffering of others; this reaction is seen in even very young infants and is present in many cultures (Eisenberg & Fabes, 1991; Penner et al., 2005).

Helping other people may be a result of three normative beliefs: social responsibility, social justice, and reciprocity (Crisp & Turner, 2020). *(a) Social responsibility:* The social responsibility norm indicates that we are obligated to assist anyone in need, irrespective of whether they have previously aided us or are expected to reciprocate in the future (Crisp & Turner, 2020). There is empirical data indicating that individuals often demonstrate a willingness to assist those in need, even when they want to remain anonymous and have no expectation of receiving external validation or rewards (Berkowitz, 1972). *(b) Reciprocity:* According to the reciprocity principle (Gouldner, 1960), it is anticipated that we would provide assistance to others who have previously aided us. This concept is generally acknowledged and has a substantial influence on interpersonal process. However, we lack an inherent tendency to help people who have helped us. On the contrary, we are more likely to respond in kind to those who have previously made a substantial and unexpected sacrifice for us (Tesser et al., 1968). *(c) Social justice :* The concept of social justice may be most effectively elucidated by the just world theory. The prevailing notion among individuals is that the universe operates on principles of justice and fairness, where individuals get outcomes that align with their actions and merits (Lerner & Miller, 1978). According to this hypothesis, there is a common belief that positive outcomes are often experienced by morally upright individuals, whereas negative outcomes are typically experienced by morally corrupt individuals. Our inclination is to assist those who want assistance, but only if we see their distress to be a result of circumstances beyond their control. Based on this theory, individuals are more inclined to contribute funds to a breast cancer charity, where the perception is that the patients have no responsibility for the

development of the illness, as opposed to a lung cancer charity, where it is often assumed that smoking is a significant factor in the condition (Crisp & Turner, 2020).

### **Types of Prosocial Behaviour**

Most studies on prosocial behaviour concentrate on two distinct categories of prosocial behaviour: (a) *Helping behaviour* (Crisp & Turner, 2020). The term "helping behaviour" describes actions taken voluntarily and intentionally by people who think their actions will benefit others and at the same time such actions may also benefit them. This definition henceforth eliminates behaviour that unintentionally helps another person but was not meant, such as accidentally dropping some money that someone else finds later (Crisp & Turner, 2020). However, the author also includes that the helping behaviour must be purposeful. Furthermore, this behaviour might involve or not involve physical contact with the receiver, and they also could involve or not involve anticipating external benefits (Dovidio, 1984). The second form of Prosocial behavior is (b) *Altruism*: it refers to an act of prosocial behaviour that helps other people without expecting anything in return and it's a narrower kind of helpful action (Crisp & Turner, 2020). This kind of assistance also involves responding positively to the needs and well-being of other people (Ali & Bozorgi, 2016). According to Batson (2011), who proposed the theory of empathy and sought to explain the traits of altruistic people. He put forward that this kind of behaviour is defined by the capacity to understand and share the feelings of other people. According to him, people are more inclined to help those in need if they can put themselves in their shoes and feel what they're going through (Ali & Bozorgi, 2016).

## **Stages of Prosocial Behaviour during Emergency**

Darley and Latane (1969) have delineated five stages of prosocial behaviour in emergencies in their book titled “The unresponsive bystander: why does not he help?”. *(a) Notice that something is wrong:* initially, the bystander must actively observe and acknowledge the occurrence of an event. When we encounter a possible emergency, there may be several concurrent factors in the environment that might cause us to completely overlook the situation (Crisp & Turner, 2020). Darley and Batson (1973), demonstrated that seminary students who were pressed for time to deliver a sermon on campus had a much lower likelihood of assisting a supposedly wounded Confederate individual who was audibly moaning at a doorway, compared to those who were not under time constraints. *(b) Interpret the event as an emergency:* upon seeing the event, the bystander must define it as an emergency. While emergencies may seem straightforward, their infrequent and unexpected nature may result in misunderstanding, even in unambiguous instances (Crisp & Turner, 2020). Ironically, when there are other bystanders present, people are more likely to see an emergency as something little or no emergency. Pluralistic ignorance occurs when people see the reactions of others (informational influence) and deduce that there is no emergency if they believe that everyone else has a neutral expression (Darley & Latane, 1970). *(c) Assume responsibility:* the bystander's decision to assist in the emergency may be influenced by the presence of other individuals who may potentially handle the issue and the bystander's perceived competence in dealing with the circumstance (Crisp & Turner, 2020). When there are several bystanders, there is a diffusion of responsibility, which is the phenomena where each bystander's feeling of obligation to assist diminishes as the number of bystanders increases. There is a common assumption that when a situation arises when aid is needed, individuals often rely on the belief that someone else will step in to help. This phenomenon, known as the bystander effect, was evident in the case of the Kitty Genovese murder (Crisp & Turner, 2020). *(d) Know appropriate*

*form of assistance:* once the bystander becomes aware of the situation, recognizes it as an emergency, and assumes personal responsibility for resolving it, their next step is to evaluate whether it is possible for them to provide aid and, if so, identify the precise measures they can do given the circumstances (Crisp & Turner, 2020). *(e) Implementing the intervention:* During the ultimate phase, bystander will ultimately choose whether to help. In a study conducted by Markey (2000), the act of helping in an Internet chat room was investigated. It was found that when the whole chat room group was requested to provide information on locating profiles, the length of time it took for someone to offer aid increased as the size of the group increased. Nevertheless, when an individual was directly referred to by their name, that individual promptly helped, irrespective of the number of people involved. According to the Darley and Latane (1969), it is recommended that all five phases of the model be completed in sequence before any intervention takes place. The bystander's failure to answer suggests that they are unable to proceed due to an obstacle at one of the phases, causing them to stop their activity (Siegal, 1972).

### **Prosocial Behaviour and Well-Being**

Prosocial activities have been linked to several favorable outcomes throughout life (Rosli & Perveen, 2021). The psychological advantages of altruism indicate that acts of kindness may be used in therapies to enhance mental well-being (Miles et al., 2021). Because prosocial actions may be quickly and inexpensively executed in a variety of contexts, prosocial interventions can be rapidly and extensively implemented (Miles et al., 2021). Researchers have posited that individuals who exhibit social responsibility and participate in prosocial conduct have a eudemonic existence, suggesting that life happiness may be influenced by involvement in prosocial activities (Ryan et al., 2013; Dou et al., 2019). According to research by Raposa et al. (2016) participating in acts of kindness may lessen the effect that chronic stress has on one's emotional and mental health. The research has shown that exposure to various

outcomes of prosocial behaviour motivates people to continue engaging in prosocial behaviour. This finding emphasizes the significance of moral elevation and empathy in comprehending this process (Li et al., 2022). According to Pavey et al. (2011), one aspect of the self-determination theory, called relatedness, might encourage prosocial conduct by fostering connections with other individuals.

**CHAPTER-II**  
**REVIEW OF LITERATURE**

## **Review of Literature**

A comprehensive literature review was conducted to understand and synthesize existing research on the key constructs of the present study, impact of Mindfulness on Psychological State and Psychosocial Behaviour Among Emerging Adults. To facilitate systematic extraction and analysis of data, a review matrix was developed to organize findings from the selected literature. The initial search was performed using Google Scholar, and was further expanded to include high-quality articles from reputed academic databases such as ScienceDirect, Wiley Online Library, SpringerLink, SAGE, Emerald Insight, EBSCOhost, Scopus, Web of Science, and PubMed. To ensure academic rigor and reliability, only peer-reviewed journal articles were considered for inclusion. To refine the search, Boolean search strings and relevant keywords were employed. Combinations included: "dispositional mindfulness AND emotion regulation," "emotion regulation strategies AND coping competence," "self-compassion AND prosocial behavior," "coping competence AND well-being," "mindfulness AND emerging adults," and "psychological well-being AND self-compassion." The search was limited to articles published before 2024, aligning with contemporary theoretical and empirical developments.

### **2.1 Dispositional Mindfulness and Well-Being**

Dispositional mindfulness significantly influences well-being as conceptualized by the PERMA model, which encompasses Positive Emotions, Engagement, Positive Relationships, Meaning, and Achievement (Moscardini et al., 2023). Mindfulness facilitates the process of reducing discomfort and enhancing attention and awareness (Teasdale et al. 1995). Empirical studies conducted on various populations indicate that people typically vary in their inclination to practise mindfulness in their everyday activities. Moreover, higher levels of dispositional mindfulness are associated with reduced discomfort and increased well-being (Kemp., et al 2011). Additionally, higher levels of dispositional mindfulness correlate with improved

emotional regulation and reduced stress, thereby enhancing overall well-being (Moscardini et al., 2023). Mindfulness is potentially significant in helping individuals detach from automatic thoughts, habitual actions, and detrimental behavior patterns. Consequently, it may serve a crucial function in promoting informed and self-directed behavioral regulation, a process that has been historically linked to improvements in well-being (Ryan & Deci, 2000).

As per the Mindfulness-to-Meaning Theory, increased awareness and focused attention are key components of mindfulness, which enhance positive emotions and foster overall well-being and a sense of meaning in life. This theory suggests that through mindfulness, individuals are able to reinterpret and reframe experiences in ways that promote positive emotional responses and contribute to a deeper sense of purpose (Garland et al., 2015). Heightened dispositional mindfulness is linked to increased exercise motivation, autonomous self-regulation, and reduced psychological distress, supporting a healthy relationship with exercise and overall wellbeing (Lynn et al., 2022). Mindfulness practice emphasizes the importance of engaging with present experiences instead of contemplating future possibilities or dwelling on past events. Individuals practicing mindfulness consciously observe their sensations and emotions without assigning value judgments of good or bad, or right or wrong (Al-Abyadh et al., 2021). Consequently, those who exhibit a greater degree of mindfulness tend to demonstrate enhanced qualities of compassion, acceptance, and empathy towards both themselves and others. They also possess improved personal skills, communicate more effectively, and lead healthier lifestyles (Burgoon et al, 2000; Feltman et al., 2009; Al-Abyadh et al., 2021).

Mindfulness calms the mind and fosters greater awareness of the needs of others, which in turn can lead to more constructive responses that promote the well-being of those around us (Hafenbrack et al., 2020). Positive emotion encompasses individual accounts of feelings such as happiness, hope, joy, and satisfaction (Kovich et al., 2023). The significance of positive emotions in everyday life extends beyond their immediate pleasure value, offering advantages

broader in scope (Diener & Larsen, 1993). Based on extensive empirical evidence, the broaden-and-build hypothesis elucidates the importance of positive emotions in contributing to several dimensions of well-being (Fredrickson, 2013). Existing research indicates that dispositional mindfulness is positively correlated with positive emotion and inversely with negative emotion (Geschwind et al., 2019). Dispositional mindfulness theoretically moderates the relationship between the capacity to savour the present moment and positive emotions. Therefore, the extent Hence, the extent to which one's ability to savor the present influences daily positive emotions depends on how much present-moment awareness is supported by their level of dispositional mindfulness.

Specifically, dispositional mindfulness may assist people in recognising and appreciating the positive elements of daily experiences, therefore creating more chances to use one's capacity to fully enjoy the present moment (Kiken et al, 2017).

Research conducted by Jimenez et al. (2010) revealed that elevated dispositional mindfulness correlates with increased positive emotions, enhanced mood regulation expectations, and greater self-acceptance. These factors were found to reduce depressive symptoms. Notably, self-acceptance was identified as the most significant mediator between mindfulness and depressive symptoms. The findings of this research suggested that mindfulness may play a crucial regulatory role by addressing low levels of positive emotionality, inadequate mood regulation, and a negative self-concept, all of which are risk factors associated with the onset, progression, and persistence of depressive symptoms. Mindfulness may foster cognitive abilities, particularly in domains such as attention, memory, executive functioning, and the promotion of positive emotions (Khoury et al., 2015). The research conducted by Brown and Ryan (2003) assessed the association between dispositional mindfulness and various indicators of well-being, revealing a positive correlation between dispositional mindfulness and enhanced

well-being. Specifically, dispositional mindfulness was found to correlate with reduced levels of neuroticism, unpleasant affect, depression, anxiety and negative affectivity. In contrast, enhanced levels of dispositional mindfulness were linked to increased pleasant affect, vitality, positive affectivity, self-esteem, life satisfaction, optimism, and self-actualization. Interpersonal relationships encompass the bonds and connections formed with family members, friends, and colleagues. These relationships play a crucial role across an individual's life and significantly enhance overall well-being in various aspects (Kovich et al., 2023).

Research indicates that individuals exhibiting elevated levels of dispositional mindfulness tend to demonstrate more adept reactions to relational stress, enhanced empathy, a greater capacity for accepting their partners, and a more secure attachment to their spouses (Burpee & Langer, 2005; Wachs & Cordova, 2007; Barnes et al., 2007; Jones et al., 2011;). On the other hand, elevated levels of dispositional mindfulness may diminish the likelihood of romantic partners engaging in behaviors commonly linked to decreased sexual satisfaction and sexual dysfunction. These behaviors include inhibition, distraction, self-criticism, anxiety and judgment during sexual encounters (Dove & Wiederman, 2000; McCabe et al., 2010). Studies suggest that elevated dispositional mindfulness may promote healthier interpersonal relationships by improving coping strategies and mitigating socioemotional difficulties. Particularly, participants who demonstrate higher dispositional mindfulness tend to experience fewer challenges related to loneliness, social anxiety, and depression, largely due to enhanced coping mechanisms in their interactions with peers. This mindfulness encourages engagement coping, which correlates with more robust peer relationships and diminished emotional distress (Zimmer-Gembeck et al., 2021).

Individuals who possess an awareness of their own cognitive processes, emotional states, feelings, personal experiences, and intentions, while also being attentive to both verbal and nonverbal cues in a manner that is accepting, responsive, and nonreactive, are more inclined to

engage in behaviours that promote the development of positive friendships (Pratscher et al., 2017). Engaging in mindful interactions with others is likely to enhance effective communication, a fundamental component for the proper functioning of intimate relationships, such as friendships (Burgoon et al. 2000; Pratscher et al., 2017). In educational environments, educators with higher levels of dispositional mindfulness tend to experience more positive relationships with their students, which are marked by reduced conflict and increased intimacy. This association is partially influenced by diminished depressive symptoms, indicating that mindfulness may facilitate emotional regulation, thus enhancing the quality of interactions with children (Becker et al., 2017). Mindfulness contributes to overall psychological well-being, which is positively correlated with relationship satisfaction. Practicing mindfulness has predicted a significant reduction in adverse mental health conditions (Wimmer et al., 2023). The ability to remain present and engaged in relationships can enhance intimacy and connection, further promoting satisfaction (Lynn et al., 2022).

## **2.2 Dispositional Mindfulness and Self-Compassion**

Mindfulness and compassion represent intricate, multidimensional constructs that are understood and articulated in diverse manners (Murfield et al., 2024). Self-compassion is a multifaceted construct that promotes emotional resilience and well-being by fostering a supportive attitude towards oneself during difficult times. It encompasses self-kindness, mindfulness and common humanity, which collectively mitigate negative self-judgment and isolation (Neff, 2022; Neff, 2003). An increasing amount of studies have aimed to investigate the connection between compassion and dispositional mindfulness as well as their impact on psychological health (Murfield et al., 2024). Shapiro et al. (2006) assert that mindfulness encompasses a compassionate stance characterized by non-judgment and acceptance of one's experiences. Furthermore, self-compassion is believed to alleviate psychological distress by

engaging the self-soothing system (Neff & Germer 2013; Gilbert & Proctor, 2006). Mindfulness promotes self-compassion by nurturing a non-judgmental perspective and acceptance of one's thoughts, emotions, and experiences, which is crucial for emotional resilience. Mindfulness accounted for 46.5% of the effect, while self-compassion accounted for 79.3%, highlighting their significant roles in fostering resilience (Clarke & Hartley, 2024; MacBeth & Gumley, 2012; Tomlinson et al., 2018). Furthermore, it has been linked to ethical behavior, as individuals with higher self-compassion exhibit lower tendencies toward moral disengagement and unethical actions (Yang et al., 2020).

Among university students, mindfulness has been directly predicting self-compassion, which mediates the relationship between dysfunctional attitudes and emotional distress (Póka et al., 2023). Mindfulness, particularly through awareness and non-judgment, mediates the relationship between psychological distress and resilience (Christodoulou et al., 2024). In addition, it was noted that mindfulness and self-compassion may serve as protective factors, reducing relational aggression and victimization, and offering potential avenues for intervention. The study further highlights the limited understanding of protective factors against relational aggression in college. Additionally, Xie (2023) found that dispositional mindfulness and self-compassion are related to reduced loneliness and improved coping styles. Dispositional mindfulness has the potential to improve self-compassion by cultivating an open and accepting perspective towards oneself, as outlined in the research concerning mindfulness, self-compassion, and gratitude within the context of music education. The integration of mindful self-compassion and gratitude contributes positively to both mental and social well-being. Accounts from educators and learners provide evidence of the beneficial impacts of these practices (Diaz, 2023). Prior experimental studies conducted in both community and mental health clinics indicate that self-compassion mediates the relationship between

mindfulness-based interventions (MBIs) and overall well-being (Gu et al., 2015; Gu et al., 2017).

Mindfulness-based interventions were shown to decrease loneliness and increase social interactions, suggesting a promising approach for addressing social isolation. Gutiérrez-Hernández et al. (2023) examined the effects of daily meditative practices centered on mindfulness and self-compassion, showing that these interventions significantly increased self-compassion levels and reduced emotional distress under stressful conditions. Additionally, online intervention programs centered on self-compassion were found to be effective in reducing psychological distress and enhancing overall well-being. However, the study noted that the efficacy of self-compassion-based interventions may not be sustained at follow-up, indicating the need for continued practice or supplementary interventions to maintain long-term benefits. Uchida et al. (2023) investigated the effectiveness of Mindfulness-Based Interventions (MBIs) on self-compassionate behaviors. The findings revealed that although there were no significant alterations in levels of depression, trait anxiety, trait mindfulness, and trait self-compassion, there were marked enhancements in self-compassionate behaviors, mindful actions, and overall mood subsequent to the intervention. Furthermore, the study identified that self-compassionate behaviors played a significant moderating role in the association between mindful actions and mood in everyday contexts, particularly evident in assessments conducted prior to the intervention. This highlights the importance of self-compassion in amplifying the benefits of mindfulness on emotional health.

A meta-analysis and systematic review conducted by Gu et al. (2015) focused on the mediating effect of mindfulness-based interventions. The review found that, in comparison to other factors such as cognitive and emotional reactivity, mindfulness, rumination, and worry, self-compassion showed initial but non-confirming evidence as a mediating pathway (Yip et al., 2017). Moore et al. (2022) examine the effects of a trauma-informed mindful recovery

program on the enhancement of self-compassion in individuals suffering from Opioid Use Disorder. The study elucidates the beneficial role of mindfulness in promoting self-compassion. It was observed that patients with Opioid Use Disorder who experienced childhood adversity exhibited lower levels of self-compassion, which showed significant improvement following participation in the program. Meneo et al. (2024) reviewed the relationship between mindfulness and self-compassion in dermatological settings. The findings indicated that Dispositional mindfulness has been associated with increased self-compassion among individuals with chronic skin conditions. Programs focused on mindfulness and self-compassion demonstrate potential in alleviating distress and enhancing quality of life.

Kuyken et al. (2010) discovered that the beneficial impact of mindfulness-based cognitive therapy was facilitated by enhancements in mindfulness and self-compassion in individuals who had experienced remitted depression. Another study investigated the emotion-regulation mechanisms that relate to mindfulness, self-compassion, and substance use. It specifically examined the association between mindfulness and coping-motivated consumption of alcohol and marijuana. The results have shown that dispositional mindfulness is significantly positively associated with self-compassion, which in turn affects unhealthy emotion-regulation processes (Wisener & Khoury, 2021). In a study by Israel et al. (2023), dispositional mindfulness was linked to reduced negative impacts of stuttering by fostering objective and compassionate perspectives. This suggests that mindfulness may be particularly beneficial for people who stutter by promoting self-compassion and reducing the emotional burden associated with the condition. Research has underscored the relationship between dispositional mindfulness, along with gratitude and self-compassion in lessening the suffering experienced by individuals with tinnitus. Interventions grounded in mindfulness are effective in diminishing the distress associated with tinnitus by altering individuals' responses (Reeves et al., 2021).

A study addressing psychosomatic distress with mindfulness-based cognitive therapy (MBCT) for somatic symptom disorder (SSD), the role of dispositional mindfulness and self-compassion is highlighted. The study demonstrates that mindfulness not only mediates treatment outcomes but also fosters self-compassion, which plays a crucial role in reducing distress. Specifically, improvements in self-compassion were found to mediate the reduction of psychosomatic distress, indicating that dispositional mindfulness enhances self-compassion, which in turn contributes to overall well-being. These outcomes indicated that mindfulness-based interventions can enhance self-compassion, serving as a key mechanism in emotional regulation and distress reduction in clinical populations (Xu et al., 2024).

Potter et al. (2019) examined the relationship between dispositional mindfulness, self-compassion, and psychological distress in an IBS population and found that mindfulness lowered distress levels and reduced symptom interference. Further, the study revealed that self-compassion and symptom interference mediated the association between mindfulness and psychological distress, suggesting that mindfulness promotes emotional resilience by improving self-compassion and reducing the impact of IBS symptoms. Additionally, mindfulness was shown to moderate the relationship between symptom frequency and interference. This moderation effect highlights the potential of mindfulness to buffer the negative impact of IBS symptoms, emphasizing the importance of MBIs in enhancing well-being and reducing distress in IBS patients. Research indicates that self-compassion not only enhances individual mental health but also positively influences interpersonal relationships and caregiving dynamics (Borelli, 2023). The practice of mindful parenting has been found to have a beneficial correlation with the dispositional mindfulness and self-compassion of youth, which subsequently contributes to improved emotional adjustment, as shown by empirical evidence on mindful parenting and the well-being of young adults (Mera et al., 2023).

Additionally, mindful parenting may also influence interpersonal mindfulness, a distinct form of mindfulness that has been shown to have a specific relationship with social adjustment. The research indicated that mindful parenting is both directly and indirectly linked to the emotional adjustment of emerging adults, while it is indirectly correlated with social adjustment through interpersonal mindfulness (excluding dispositional mindfulness and self-compassion) (Mera et al., 2023). The presence of dispositional mindfulness among midlife married Canadians correlates positively with self-compassion, the fulfillment of needs, and overall satisfaction, underscoring its beneficial influence on self-compassion within interpersonal relationships. This research examines the interconnections between mindfulness, self-compassion, need fulfillment, and satisfaction, emphasizing the importance of Self-Determination Theory within these dynamics. Furthermore, the overarching framework of the network aligns with emerging theories regarding mindfulness in relational contexts (Quinn-Nilas & Milhausen, 2024)).

Research involving family caregiver groups has demonstrated a negative correlation between caregiver burden and self-compassion (Lloyd et al., 2019). Additionally, self-compassion and dispositional mindfulness have been recognized as significant predictors of depression (Hlabangana & Hearn, 2019). In the caregivers of the elderly individuals, self-compassion and dispositional mindfulness have been found to significantly reduce distress factors (Murfield et al., 2024). Furthermore, adaptive emotion regulation emerged as a significant mechanism facilitating these associations. These findings offer initial evidence in integrating self-compassion and mindfulness into interventions designed to enhance the psychological health of family caregivers, highlighting important implications for both future research and practical applications. Another study highlighted the protective role of dispositional mindfulness and self-compassion in mitigating stress levels in caregivers of lung cancer patients.

Notably, self-compassionate actions were determined to be the more robust protective factor within a multiple moderation framework (Hsieh et al., 2019). Research indicates that self-

compassion significantly contributes to the well-being of mental health professionals. Studies have indicated a potential correlation between mindfulness practices and an increased level of compassion towards clients among therapists (Bell, 2009). A study by Kemper et al. (2015) asserted a positive association between mindfulness, self-compassion, resilience, and improved sleep quality among mental health professionals. Given the demanding nature of their profession, they are at risk of developing adverse health outcomes (Lalor & Khoshfetrat, 2024). Therefore, it is imperative to promote mindfulness-based self-help among mental health professionals. Enhancing their capability for professing self-compassion can elevate their ability to empathize with their clients, ultimately supporting both the therapist's well-being and therapeutic effectiveness (Lalor & Khoshfetrat, 2024). While mindfulness and self-compassion have garnered significant interest as strategies for improving well-being and resilience to stress among helping professionals, their role in sustaining or enhancing compassion towards clients has been comparatively overlooked until recently (Yip et al., 2017).

### **2.3 Dispositional Mindfulness and Coping Competence**

Lazarus and Folkman (1984), refers Coping, as the cognitive and behavioral strategies employed by an individual to navigate and address the external and internal pressures arising from a particular person-environment interaction that is perceived as stressful. Schroder and Ollis (2013) have conceptualized coping competence as a trait-like protective factor that mitigates the onset of depression rooted in feelings of helplessness. They define it as "the capacity to effectively cope with negative life events and failure, as evidenced by a diminished probability of helplessness responses and a swift recovery from any symptoms of helplessness" (Akin & Akin, 2015). Coping competence necessitates cognitive-behavioral flexibility, as well as a diminished dependence on impulsive behavior. In this realm, mindfulness may cultivate coping competence by promoting greater awareness and acceptance of painful or distressing

emotions (Baer, 2003; Akin & Akin, 2015). When coping competence is integrated into cognitive behavioral patterns, it allows for easy modification as needed during times of crisis (Padhy et al., 2020).

Dispositional mindfulness is increasingly recognized for its role in enhancing coping competence, particularly in stressful situations. It has been reported that dispositional mindfulness contributes to affective regulation and adaptive coping strategies, which can mitigate the impact of stressors (Wisener & Khoury, 2019). As individuals navigate through life crises, they often develop a set of skills that can be employed to address future challenges that arise (Akin & Akin, 2015). The recent studies have highlighted the constructive psychological and behavioral outcomes of mindfulness, much of this work has focused on **state mindfulness**, often induced through interventions or short-term practices. However, there is **limited research** specifically addressing the relationship between **dispositional mindfulness** and **coping competence**. Schroder (2012) elucidates that mindfulness and coping competence function as complementary mechanisms that operate synergistically during times of crisis. In a study, the results indicated that mindfulness positively predicted both coping competence and subjective happiness. Additionally, coping competence was found to positively predict subjective happiness. Furthermore, coping competence served as a mediator in the relationship between mindfulness and subjective happiness. Collectively, these findings underscore the significance of mindfulness in fostering psychological and cognitive adaptation (Akin & Akin, 2015). Mindfulness techniques are recognized as effective strategies for coping with cravings associated with substance use (Baer, 2003).

According to Marlatt (1994), mindfulness entails embracing the ever-evolving experiences of the present, in contrast to addiction, which reflects a struggle to accept the current moment and a continual pursuit of the next euphoric experience linked to the addiction. The concept of "urge surfing" serves as a metaphor, prompting clients to visualize their cravings as ocean

waves that gradually build, peak, and eventually recede. By "riding" these waves, clients learn to resist succumbing to their urges, thereby understanding that such cravings are transient. Furthermore, clients come to realize that new urges will inevitably arise and that these cannot be easily eradicated. Instead, it is essential to recognize urges as typical reactions to stimuli associated with desire. Mindfulness skills empower clients to observe their cravings as they manifest, accept them without judgment, and manage them in constructive ways (Baer, 2003). Schroder (2012) has considered that coping competence may play a dual role in fostering a state of mindfulness. On one hand, adopting a mindful perspective necessitates both emotional and cognitive flexibility to effectively navigate challenges. On the other hand, a high level of coping competence facilitates timely adaptive responses, which are essential for implementing emotionally stabilizing coping strategies (Padhy et al., 2020).

Numerous scholars have observed that enhanced self-awareness stemming from mindfulness training can facilitate the application of various coping strategies (Baer, 2003). For instance, Kabat-Zinn (1982) posits that a heightened consciousness of pain sensations and stress reactions as they manifest may empower individuals to utilize a diverse array of coping mechanisms, including those not explicitly outlined in their therapeutic regimen (Baer, 2003). The mindfulness education program has been shown to significantly foster the growth of social and emotional skills, as well as enhance positive emotional experiences. Central to this program are daily lessons that focus on training students in mindful attention. Mindfulness-based initiatives in educational institutions have shown a significant contribution towards emotional and social competence in students (Schonert-Reichl & Lawlor, 2010). Linehan (1993a, 1993b) characterizes individuals diagnosed with borderline personality disorder as emotion phobic. This aversion stems from a profound fear of confronting intense negative emotional experiences. Such apprehension is justifiable, given the extreme nature of their

negative affective states. Nevertheless, their strategies to evade these emotions frequently result in maladaptive outcomes (Baer, 2003).

Linehan (1993a, 1993b) posits that sustained awareness of present thoughts and feelings, without the impulse to flee or suppress them, can serve as a form of exposure therapy. This approach is intended to facilitate the reduction of fear responses and avoidance behaviors that have been conditioned by these emotional stimuli. Consequently, the cultivation of mindfulness skills may enhance patients' capacity to endure and manage negative emotional states more effectively (Baer, 2003). Stanley (2014) emphasizes that, in the context of soldiers confronting the potential of mortality, mindfulness offers two primary advantages: an increased capacity to endure difficult situations and enhanced control over one's focus. These advantages are essential components of coping competence, particularly in demanding professions such as emergency care (Rahnama et al., 2003). Numerous frameworks have been suggested to elucidate the mechanisms that serve as buffering factor for mental health challenges and behavioral issues among individuals (Schonert-Reichl & Lawlor, 2010). Nonetheless, the predominant body of existing theoretical and empirical research endorses a perspective centered on social and emotional competence. This perspective posits that children who possess strong emotional and social skills exhibit resilience when faced with stressful circumstances (Masten & Motti-Stefanidi 2009; Schonert-Reichl & Lawlor, 2010; Greenberg et al. 2003).

Studies have indicated that mindfulness fosters the ability to re-perceive, enabling individuals to reflect on distressing experiences in an objective manner without triggering the negative emotional responses typically associated with such events. This process allows for the consideration of a broader array of coping resources and strategies, thereby enhancing coping competence. Furthermore, when individuals encounter distressing circumstances, mindfulness can promote coping competence, which may mitigate the adverse effects on overall well-being.

In contrast, individuals with lower levels of mindfulness were more likely to react in ways that may lead to psychopathological outcomes rather than effective coping, potentially undermining their sense of flourishing (Shapiro et al. (2006; Thomas, 2011; Akin & Akin, 2015). Martins et al. (2002) discovered that individuals with elevated self-esteem demonstrate greater resilience through challenges, which correlates with a higher likelihood of achieving success. Consequently, mindfulness, by enhancing self-esteem, concentration, attention, and awareness, is expected to have a positive relationship with the coping abilities of employees. Those who practice mindfulness tend to respond more effectively in high-pressure scenarios and exhibit proactive behaviors. They also show an increased ability to manage their emotions and actions (Rahnama et al., 2003). In a study, it was found that emergency personnel who practiced mindfulness exhibited notable coping competence. Mindfulness among employees facilitates emotional regulation, thereby enabling them to cultivate and demonstrate effective coping skills. Those with elevated coping competence are adept at managing work-related stressors efficiently. Successfully navigating difficult circumstances or crises, which are intrinsic to the roles of emergency healthcare workers, necessitates behavioral adaptability and significant emotional investment (Rahnama et al., 2003; Atkins & Styles, 2015; Hölzel et al., 2011).

With regard to the association between mindfulness and student flourishing, Akin and Akin (2015) discussed the function that coping competence plays as a mediator in the relationship. When it comes to flourishing, it has been seen that mindfulness has an effect on flourishing through coping competence both directly and indirectly. Furthermore, participants who have a greater degree of mindfulness are high likely to have a greater level of coping competence as well as wellbeing. It is clear from the implications of these studies that mindfulness and the ability to cope well are two of the most important factors in promoting psychological wellbeing. There is a possibility that researchers in the field of mental health may run programs that will assist college students in developing greater coping competence and mindfulness,

eventually leading to an increase in flourishing. Therefore, mindfulness-based interventions have the potential to be utilized by educators and counsellors in an effective manner in order to instruct individuals in identifying and addressing distressing thoughts and feelings, while also guiding them to detach from automatic maladaptive thought processes and behavioral tendencies, including rumination and avoidance, which have a negative impact on coping competence (Segal et al., 2002; Schroevers & Brandsma, 2010; Akin & Akin, 2015).

#### **2.4 Dispositional Mindfulness and Emotion Regulation Strategies**

Dispositional mindfulness significantly influences emotion regulation strategies, promoting well-being. Research indicates that mindfulness fosters adaptive emotion regulation, particularly through cognitive reappraisal, while mitigating maladaptive strategies like expressive suppression (Scafuto et al., 2024; Pandey et al., 2023). Studies suggest that mindfulness helps individuals recognize emotional patterns early, which allows for more conscious and deliberate responses, rather than automatic reactions (Keng et al., 2011). This capacity to respond reflectively rather than reflexively lies at the core of effective emotion regulation. Mindfulness is believed to enhance emotion regulation by fostering greater awareness and acceptance of emotional experiences. Individuals those who exhibited higher levels of mindfulness are more likely to engage in adaptive emotion regulation strategies, including cognitive reappraisal, and are less likely to rely on maladaptive strategies like emotional suppression (Chambers et al., 2009). Mindfulness is positively correlated with cognitive reappraisal, an adaptive emotion regulation strategy that involves reframing negative or distressing situations in a more positive or neutral light (Garland et al., 2011). At the same time, mindfulness is associated with a lower tendency to use emotional suppression, a maladaptive strategy associated with higher stress and worse mental health outcomes (Gross & John, 2003). Emotional suppression, while useful in some short-term contexts, often leads

to increased emotional arousal and a range of negative physiological outcomes, such as increased cardiovascular activation (Butler et al., 2003), which may ultimately impair well-being. In contrast, mindfulness practices promote acceptance of emotions as they arise, allowing for better emotional processing without the need for suppression (Feldman et al., 2007). Mindful individuals are high likely to employ cognitive reappraisal, which contributes to greater psychological resilience and reduced emotional distress. Studies indicate that mindfulness-based interventions can help enhance reappraisal skills, thereby improving emotional regulation capacities (Troy et al., 2010). As a result, individuals experience reductions in distress symptoms such as anxiety, depression, and stress, as well as improvements in psychological well-being (Chambers et al., 2009; Feldman et al., 2007; Lordanić & Junaković, 2022).

The D-MER model (Dual-mode Model of Mindful Emotion Regulation) integrates dispositional mindfulness into emotion regulation strategies, proposing two modes: Implementation (regulation strategies) and Facilitation (cognitive processes influence) (Rough & Strauss, 2024). The concept of implementation suggests that the elements of mindfulness function as strategies for regulating emotions by influencing attentional focus and cognitive transformation. In contrast, the notion of facilitation indicates that these mindfulness elements impact both the generation and regulation of emotions through their effects on cognitive mechanisms and systems of positive or negative valence. Additionally, the D-MER framework proposes that engaging in mindfulness practices can enhance the effectiveness of mindfulness-based strategies for emotion regulation (implementation), while the influence of mindfulness on emotional regulation processes tends to become more ingrained and automatic over time (facilitation) (Rough & Strauss, 2024). Neuroscientific evidence also supports this link. Dispositional mindfulness is associated with structural and functional alterations in brain regions involved in emotional reactivity, cognitive control, and semantic processing

(Baltruschat et al., 2021). These neurobiological findings highlight mindfulness as not merely a behavioral trait but a multidimensional construct that can actively shape emotional processing systems at both psychological and physiological levels.

Emerging evidence highlights the positive relationship between emotion regulation, mindfulness, and creativity. Dispositional mindfulness mediates the relationship between emotion regulation and creativity, showing a significant connection between mindfulness and effective emotion regulation strategies in predicting self-reported creativity. This means that the ability to be mindful can enhance the effect of emotion regulation on creativity, indicating that mindfulness plays a crucial role in fostering creative thinking (Yousaf & Taylor, 2023). Beyond intrapersonal benefits, mindfulness also influences interpersonal functioning, particularly in romantic relationships. Erkan et al., (2020) study focuses on regular mindfulness meditators' emotion regulation strategies in romantic relationships, highlighting shifts in strategies and relationship dynamics, suggesting benefits for couples through mindfulness practice. In line with this, Barnes et al. (2007) reported that couples engaging in mindfulness practices together experience reduced conflict and increased relationship satisfaction.

Emotion regulation is also closely linked to defense mechanisms, which are influenced by levels of dispositional mindfulness. Di Giuseppe et al. (2022) found that individuals with higher levels of mindfulness tend to employ more mature defense mechanisms, particularly during stressful events. This reflects a reciprocal relationship in which mindfulness promotes emotional resilience by facilitating adaptive psychological defenses. Social support further interacts with mindfulness in shaping emotional outcomes. Yu et al. (2022) demonstrated that perceived social support moderates the association between dispositional mindfulness and emotion regulation among Chinese firefighters. Specifically, individuals with higher social support and greater mindfulness reported a reduced dependence on dysfunctional emotion regulation pattern such as expressive suppression. This finding emphasizes the importance of

contextual and relational factors in enhancing the benefits of mindfulness. In the domain of sleep and trauma, mindfulness has also shown protective effects. Nagy et al. (2022) reported that dispositional mindfulness is related to fewer PTSD-related sleep disturbances and improved sleep quality. Importantly, these effects were observed independently of traditional emotion regulation difficulties, suggesting a unique contribution of mindfulness to restorative processes and overall well-being. In educational settings, mindfulness has been linked to emotional health among teachers. A study conducted in Germany by Karing and Beelmann (2019) found that dispositional mindfulness is associated with emotional modulation strategies such as emotional distancing and resignation, which subsequently influence levels of emotional exhaustion and satisfaction among student and novice teachers. Their findings highlight the mediating role of cognitive emotion regulation and recommend the integration of mindfulness and cognitive restructuring in stress prevention programs to reduce burnout and improve well-being in educators.

Mindfulness is regarded as a key mechanism in decreasing risk factors related to disordered eating. Nevertheless, the specific mechanisms underlying this relationship remain ambiguous (Osborne et al., 2023). In their investigation, Osborne et al. examined whether mindfulness contributes to the reduction of these risks by enhancing individuals' emotional management capabilities. The results revealed that dispositional mindfulness is a predictor of improved emotion regulation, which in turn diminishes concerns related to weight and body shape, as well as negative emotional states. This underscores the potential of mindfulness in alleviating risk factors for disordered eating. Furthermore, the authors emphasized the necessity of incorporating mindfulness and emotion regulation strategies into prevention and early intervention programs targeting eating disorders and other mental health issues (Osborne et al., 2023). Among clinical population, studies have also identified Protective effects of dispositional mindfulness on emotion regulation in substance use disorder. Dispositional

mindfulness positively correlates with emotion regulation, mental health symptoms, and addiction severity in women with substance use disorders, as shown in the fMRI study. These findings indicate that enhancing mindfulness could be a valuable therapeutic target which may improve treatment outcomes and reduce relapse rates (Droutman et al., 2022). In younger populations, Chen et al., (2023) have investigated trait mindfulness moderating emotion regulation and post-traumatic stress symptoms in children which suggested that dispositional mindfulness moderates the association between emotion regulation strategies and post-traumatic stress symptoms in children after an explosion accident, particularly affecting expressive suppression's impact on post-traumatic stress symptoms.

Studies focusing on individuals with borderline personality disorder (BPD) have similarly identified low levels of dispositional mindfulness as a contributing factor to poor emotion regulation. Research by López et al. (2021) and Salgó et al. (2021) found that individuals with BPD often exhibit deficits in mindfulness, self-compassion, and emotional regulation, resulting in maladaptive emotional responses. However, mindfulness practice has been shown to promote more adaptive emotion regulation strategies, offering a potential therapeutic approach for improving emotional stability in BPD patients (Linehan, 2018). Nonetheless, findings in non-clinical and younger populations have been mixed. For instance, Wimmer et al. (2023) noted an inverse relationship between dispositional mindfulness and emotion regulation strategies in pre-adolescents. While long-term mindfulness training showed some positive effects on executive functioning and well-being, dispositional mindfulness without training was linked to lower executive functioning. Similarly, Costa et al. (2022) reported that among nursing students, dispositional mindfulness was only weakly correlated with emotional suppression and showed no significant association with general emotion regulation strategies or perceived stress. These findings suggest that age and experience with formal mindfulness training may influence its effectiveness in supporting emotion regulation.

Scafuto et al., (2024) posited that dispositional mindfulness in the Gaia program positively influences psychological well-being through cognitive reappraisal, but not distress, among adolescents. Additionally, it was noted that Emotion regulation strategies mediate mindfulness effects on psychological well-being. Other study has indicated that Dispositional mindfulness is linked to better mental health through reduced maladaptive emotion processing (e.g., suppression, avoidance) rather than enhanced adaptive strategies like cognitive reappraisal (Pandey et al., 2023). This suggests that fostering a mindful disposition may be more about embracing emotions than altering them. This perspective emphasizes the importance of acceptance and presence in emotional experiences, potentially leading to greater emotional resilience and well-being. Recovery Dharma is a peer-supported recovery program rooted in Buddhist teachings, tailored for individuals dealing with substance use and behavioral addictions. The approach incorporates meditation, emotion regulation strategies, supportive literature, and Buddhist practices into its group meetings, with the goal of fostering emotional balance and improving overall well-being. Findings from the study revealed that emotion regulation skills were the most significant predictor of recovery capital among participants in the program. While mindfulness did predict some variability in recovery capital, its impact was less significant compared to emotion regulation. This suggests that enhancing emotion regulation skills is crucial for achieving positive recovery outcomes, even more so than demographic factors or mindfulness practices (Wang et al., 2024).

Parental influences have also been identified as important in shaping children's emotion regulation. Parents' dispositional mindfulness impacts their children's emotion regulation through mindful parenting practices, suggesting that fostering mindfulness in parents can enhance children's emotional skills (Uygun & Erus, 2024). A study on Chinese families highlights the roles of parental mindfulness and coparenting in children's emotional development. The findings suggest that dispositional mindfulness and lower emotional

regulation difficulties in parents are associated with better parenting quality, which subsequently enhances children's emotion regulation (Yan et al., 2021). Shang (2024) proposes dispositional mindfulness as an effective emotion regulation strategy for teachers in the context of online teaching, complementing traditional strategies such as cognitive reappraisal and expressive suppression. In comparing emotion regulation strategies used in traditional versus online teaching, the study introduces mindfulness as a promising approach that can help teachers manage the unique emotional challenges associated with virtual classrooms.

## **2.5 Dispositional Mindfulness and Prosocial Behavior**

Prosocial behavior comprises voluntary actions intended to assist others, including activities such as helping, sharing, cooperating, donating, caring, and providing comfort. Engaging in prosocial behavior necessitates a precise perception and comprehension of the needs and desires of the individual in need, as well as the ability to make appropriate decisions that address those needs effectively (Guo et al., 2023). The relationship between mindfulness and prosocial conduct has garnered a significant amount of attention (Kil et al., 2021). Research suggests that dispositional mindfulness may improve prosocial behavior by heightening awareness of individual motivations. In particular, the internalization of prosocial motivation serves as a mediator in this relationship, indicating that mindfulness contributes to a deeper comprehension of one's altruistic objectives (Kil et al., 2021).

Meta-analytic research indicates a positive correlation between prosocial behavior and mindfulness, irrespective of whether mindfulness is considered a personal trait, a state induced through experimental methods, or a skill developed through training (Donald et al., 2019). Scholars have proposed that mindfulness fosters prosocial behavior by enhancing awareness of individual goals and motivations. Kil and associates (2021) studied the mediating effect of internalized prosocial tendency in a sample of 232 undergraduate students that involved

completing questionnaires designed to evaluate mindfulness and prosocial motivation. The social mindfulness decision-making task was used for the assessment of prosocial behavior. The research findings indicated that internalized prosocial motivation served as a mediating factor in the association between the mindfulness aspect of acting with awareness and social mindfulness. The study revealed that internalized prosocial motivation acted as a mediator between the mindfulness facet of acting with awareness and social mindfulness. This emphasizes the role of individual traits—particularly internalized prosocial motivation—as crucial intermediaries linking dispositional mindfulness to prosocial behavior. Moreover, since only the acting with awareness dimension of mindfulness showed an indirect association with prosocial behavior, the findings suggest that broad measures of dispositional mindfulness might lack the precision needed to fully capture these specific relational dynamics (Kil et al., 2021). Research has increasingly examined the association between mindfulness and prosocial behavior in various contexts, including the workplace (Hafenbrack et al., 2020).

Prior studies have examined whether mindfulness enhances prosocial behavior, such as helping others or being generous. A longitudinal study by Hafenbrack et al. (2020) found a significant increase in pro-social tendencies and financial generosity post participation in mindfulness programs in the USA as well as India, suggesting that mindfulness may facilitate other-oriented actions in work-related contexts. To gain a deeper insight into the mechanisms by which mindfulness affects prosocial behavior, the same researchers carried out a study, which investigated possible mediators, revealing robust evidence for empathy and moderate evidence for perspective-taking. These findings suggest that whether in a dispositional or state form, it has the potential to enhance prosocial behavior. The evidence indicated that mindfulness could foster an other-oriented perspective, leading to greater helping behaviors and generosity in a variety of contexts, including the workplace (Hafenbrack et al., 2020). Mindfulness training was found to be associated with the development of social competence and prosocial behaviors

in elementary school children. Research indicates that mindfulness interventions, irrespective of the emphasis on fostering moral emotions, have demonstrated significant efficacy in enhancing prosocial tendencies (Donald et al., 2019; Dewaal, 2008).

## **2.6 Theoretical assumptions of Dispositional Mindfulness and Prosocial Behaviour**

Several mechanisms have been proposed through which mindfulness may enhance prosocial behavior. Mindfulness practices are linked to an enhanced bodily sensations awareness, often characterized as interoceptive awareness. This heightened interoceptive awareness may lead to an increased sensitivity to the needs of others within one's social context (Holzel et al., 2011; Vago & Silbersweig, 2012; Donald et al., 2019). Mindfulness has the potential to soothe the mind and foster greater awareness of the needs of others, which in turn can lead to more constructive interactions that promote the well-being of those around us (Hafenbrack et al., 2020). Additionally, mindfulness is posited to be associated with improved executive control and the enhancement of self-regulatory abilities. This is due to the belief that mindfulness cultivates executive functions, particularly inhibition. In situations where assistance is required, individuals in a mindful state are better equipped to manage and transcend negative emotions, such as fear of failure or disgust. As a result, mindfulness is likely to encourage prosocial behavior, particularly in contexts where these adverse emotions may arise (Ostafin et al., 2015; Berry et al., 2020; Donald et al., 2019).

Mindfulness may enhance prosocial behavior by improving individuals' ability to maintain and focus their attention. In social situations, heightened attentional capacities can lead to a greater awareness of others' needs, thereby increasing the probability that an individual will respond to those needs (Brown & Ryan, 2003; Condon, 2017). An enhancement in mindfulness is associated with an elevation in empathic concern (Berry et al., 2020) which is driving force for prosocial engagement (Carlo & Randall, 2002). Empathic concern, often referred to as

"compassion," can be characterized as the emotional responses triggered by the suffering of others (Pfattheicher et al., 2015). It is posited that cultivating this capacity may diminish self-referential thoughts and emotions, thereby lessening the distinctions between oneself and others, which subsequently fosters a greater empathic concern for those in distress (Berry et al., 2020). A study by Berry et al. (2018) indicates that individuals who have undergone mindfulness training are more inclined to assist a socially excluded stranger and to incorporate them into social interactions. Cameron and Fredrickson (2015) discovered a correlation between dispositional mindfulness and an increase in positive emotions, including love, joy, gratitude, and interest, while simultaneously observing a decrease in negative emotions such as anger, fear, guilt, and stress. Furthermore, these emotional states were linked to enhanced and diminished self-reported helping behaviors, respectively. Mindfulness contributes to heightened moral awareness and sensitivity to ethically significant information. Characterized by openness and impartial awareness, a mindful state can improve the ability to perceive both internal and external cues that are relevant to moral considerations (Sevinc & Lazar, 2019). Mindfulness may facilitate the manifestation of prosocial behavior by allowing individuals to view their thoughts as mere mental occurrences rather than absolute realities. This perspective diminishes the likelihood that judgments, assumptions, and biases will obstruct the inclination to engage in helping behaviors (Condon, 2017). Condon and colleague have (2017) referred this phenomenon as 'cognitive defusion'. The term cognitive defusion is technique often used in mindfulness and acceptance-based therapies. Cognitive defusion is a psychological process that involves diminishing the impact of verbal relations on behavior, thereby altering the function of stimuli. Essentially, the goal of defusion is to lessen the effect that thoughts and other verbal constructs have on an individual's actions, particularly when this reduction facilitates more adaptive behaviors and promotes a life aligned with personal values (Assaz et al., 2018). Research indicates that cognitive defusion is associated with reduced avoidance

behaviors in the face of suffering and an increased propensity for approach behaviors, including active coping and positive reinterpretation (Donald et al., 2016).

## **2.7 Rationale for the study:**

Emerging adulthood is a critical developmental phase characterized by exploration, identity formation, and significant emotional transitions (Arnett, 2000). In this transitional period, factors such as dispositional mindfulness, emotion regulation, self-compassion, coping competence, and prosocial behavior play pivotal roles in shaping the overall well-being of the individuals. Empirical studies have shown the role of dispositional mindfulness in determining well-being (Ryan & Deci, 2000; Kemp et al, 2011; Moscardini et al., 2023). Despite the existing literature on the influence of dispositional mindfulness on well-being, most studies have focused on Ryff Psychological Well-Being (1989) constructs to assess the overall well-being of participants (Baer et al., 2008; Harrington et al., 2014). It has been noted that Carol Ryff's model of Psychological Well-being distinguishes itself from earlier frameworks by emphasizing a crucial aspect: well-being is a multidimensional construct rather than being solely defined by happiness or positive emotions. A good life encompasses a harmonious integration of various dimensions of well-being, rather than being limited to a singular focus. The instruments employed in the current study differ from those utilized by earlier researchers, specifically the PERMA model of well-being, as it integrates flourishing, representing the optimal functioning of individuals, groups, communities, nations, and society as a whole (Seligman, 2011; Kovich et al., 2023). Limited studies have been done in India examining the relationship between **dispositional mindfulness** and the **PERMA model of well-being**, especially among emerging adults. Furthermore, the **mechanisms** through which dispositional mindfulness influences well-being are still not fully understood. Recent research has begun to explore these mechanisms, but further investigation is required, particularly within the Indian

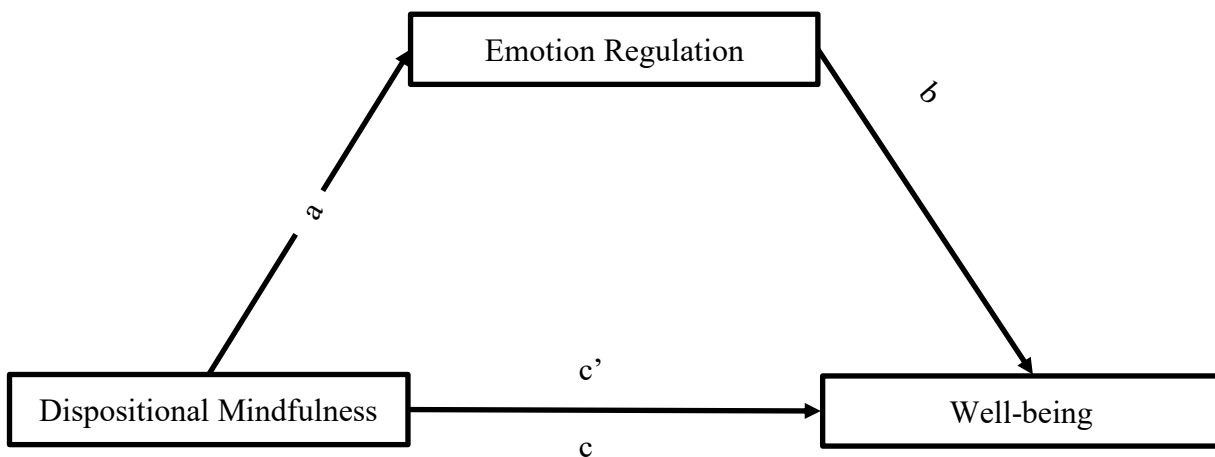
context. Evidence suggests that mindfulness enhances emotion regulation by fostering greater awareness and acceptance of emotional experiences (Chambers et al., 2009). Emotion regulation serves as an important factor governing psychological well-being, as it influences how individuals process and respond to their emotional states (Tasneem & Panwar, 2022). Research has commenced to explore the particular mechanisms by which compassion and dispositional mindfulness function, building upon these encouraging findings. Preliminary evidence indicates that emotion regulation and adaptive coping strategies are significant factors in this process (Murfield et al., 2020; Scafuto et al., 2024). However, little is known about which specific emotion regulation strategies serve as key processes linking mindfulness to psychological well-being.

The study, however, focused on mindfulness-based interventions rather than dispositional mindfulness, leaving a gap in understanding the natural, inherent mindfulness disposition and its association to well-being. According to Ogbodo et al. (2023), mindfulness was linked to enhanced mental well-being through a decrease in expressive suppression—an emotion regulation strategy—among professional caregivers working with psychiatric patients. While this study adds to the evidence supporting the mediating role of emotion regulation, its focus on a specific population of caregivers limits its generalizability to emerging adults, a non-clinical population. Therefore, in the present study, we aim to assess the mediating role of cognitive reappraisal and expressive suppression- as emotion regulation strategies- in the relationship between dispositional mindfulness and well-being among emerging adults, particularly within the Indian context (see Figure 2.1).

Another mediating variable considered in the present study is self-compassion. Self-compassion is generally understood as a disposition towards oneself that is defined by the lack of self-criticism, the presence of self-kindness, an awareness of shared human experiences that fosters a sense of connection with others, and a mindful approach to one's thoughts and

experiences (Neff, 2003). Studies have identified that dispositional mindfulness has the potential to improve self-compassion by cultivating an open and accepting perspective towards oneself, as outlined in the research concerning mindfulness, self-compassion, and gratitude within the context of music education (Xie, 2023). Furthermore, self-compassion is believed to alleviate psychological distress by engaging the self-soothing system (Neff & Germer 2013; Gilbert & Proctor 2006).

**Figure 2.1|| Hypothesized model predicting well-being based on dispositional mindfulness, mediated by emotion regulation strategies (cognitive reappraisal and expressive suppression) among emerging adults.**

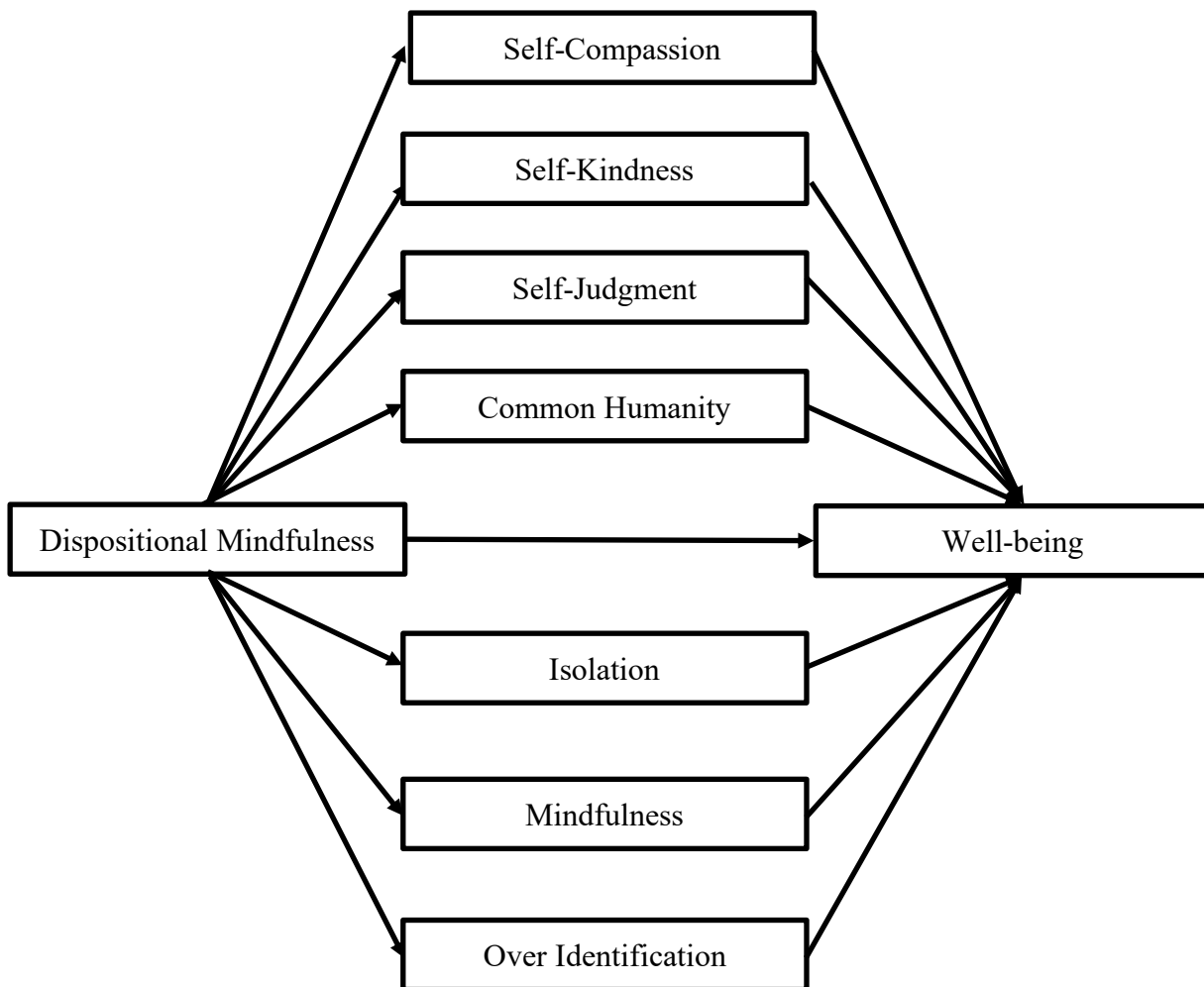


Individuals who exhibit high levels of self-compassion are more likely to confront their personal shortcomings with kindness and warmth. Such an approach can influence the cognitive and emotional states of these individuals, enhancing their positive experiences while diminishing negative emotional responses. Consequently, this may lead to an improvement in the individual's subjective well-being (Ge et al., 2019). Based on the given findings it can be concluded that self-compassion may mediate the relationship between Dispositional mindfulness and wellbeing among emerging adults. Hollis-Walker & Colosimo (2011) have noted that psychologist has explored the link between mindfulness and well-being; however,

the potential influence of self-compassion as an additional factor in this relationship has received insufficient attention. Hollis-Walker and Colosimo (2011) pointed out this oversight, suggesting that self-compassion could act as a partial mediator between dispositional mindfulness and psychological well-being. Although their study provides preliminary insights into the significance of self-compassion, it primarily addresses the construct in a general, without delving into its specific components as possible mediators. The investigation did not assess how the six dimensions of self-compassion—self-kindness, self-judgment, common humanity, isolation, mindfulness, and over-identification—might uniquely mediate the connection between dispositional mindfulness and well-being. Consequently, additional research is warranted to identify which elements of self-compassion exert the most substantial influence in this context (Hollis-Walker & Colosimo, 2011). Thus, the current study seeks to fill this gap by examining which facets of self-compassion mediate this relationship between dispositional mindfulness and well-being, with a particular emphasis on the PERMA model of well-being among emerging adults, especially within the Indian context (refer to Figure 2.2).

In addition to emotion regulation and self-compassion, another mediating variable considered in the present study is coping competence. Schroder and Ollis (2013) have conceptualized coping competence as a trait-like protective factor that mitigates the onset of depression, particularly in the face of feelings of helplessness. Coping competence refers to the ability to adapt cognitively and behaviorally, with less dependence on habitual responses and emotional impulsivity. Within this framework, mindfulness may strengthen coping competence by promoting increased awareness and acceptance of difficult or distressing emotions.(Baer, 2003). Research has noted that when individuals are confronted with distressing situations, mindfulness can facilitate coping competence, thereby alleviating the negative consequences on well-being (Akin & Akin, 2015).

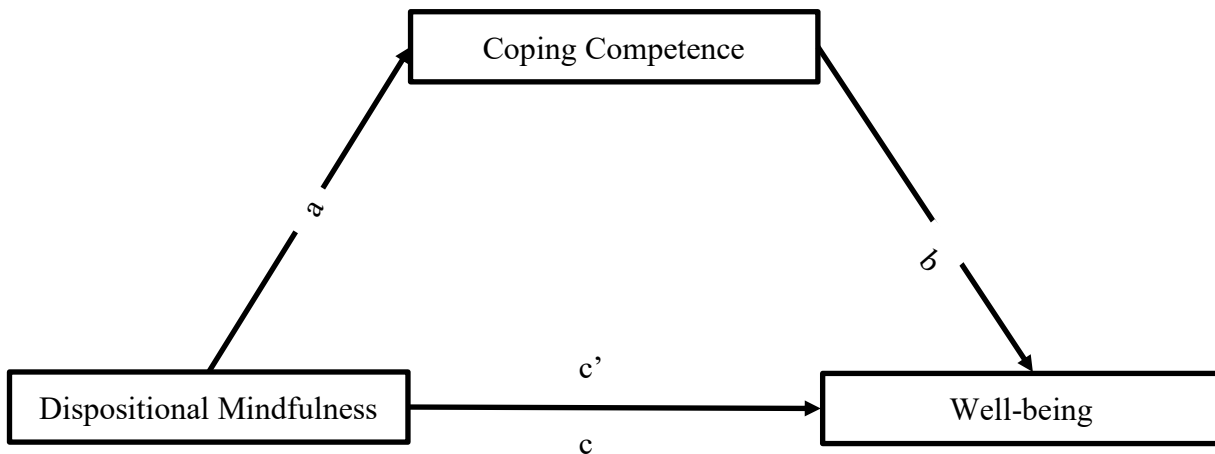
**Figure 2.2|| Hypothesized model predicting well-being based on dispositional mindfulness, mediated by self-compassion and its facet self-kindness, self-judgment, common humanity, isolation, mindfulness, and over-identification among emerging adults.**



Despite these insights, only one study has examined the mediating role of coping competence in the relationship between dispositional mindfulness and flourishing (Akin & Akin, 2015) a factor which is often defined in terms of levels of wellbeing (Burns et al., 2022). Importantly, no studies have explored the interplay between dispositional mindfulness, coping competence, and the PERMA model of well-being, especially within the Indian context. Therefore, the present study aims to assess the mediating role of coping competence in the relationship

between dispositional mindfulness and well-being, as conceptualized by the PERMA model, among emerging adults in India (see Figure 2.3).

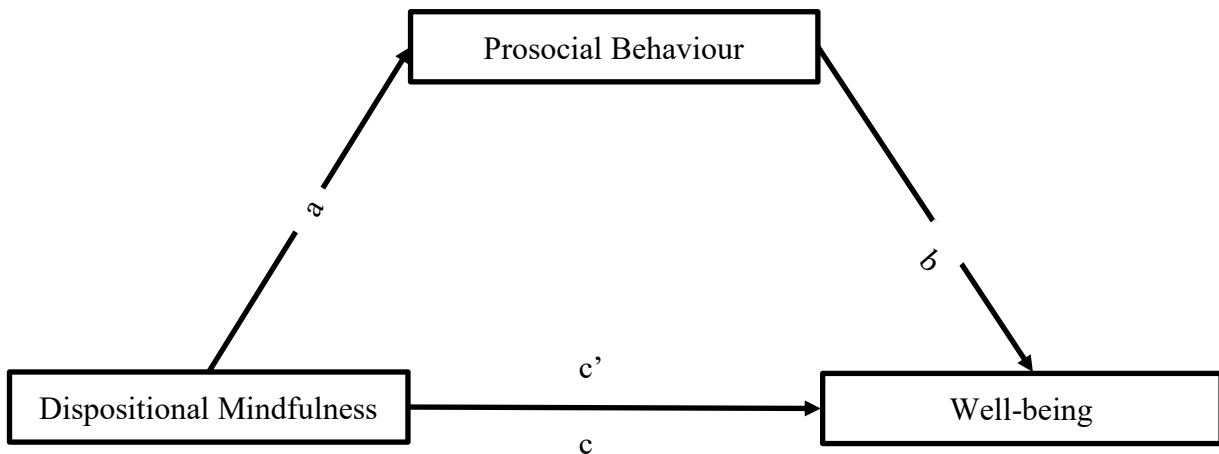
**Figure 2.3|| Hypothesized model predicting well-being based on dispositional mindfulness, mediated by Coping Competence among emerging adults.**



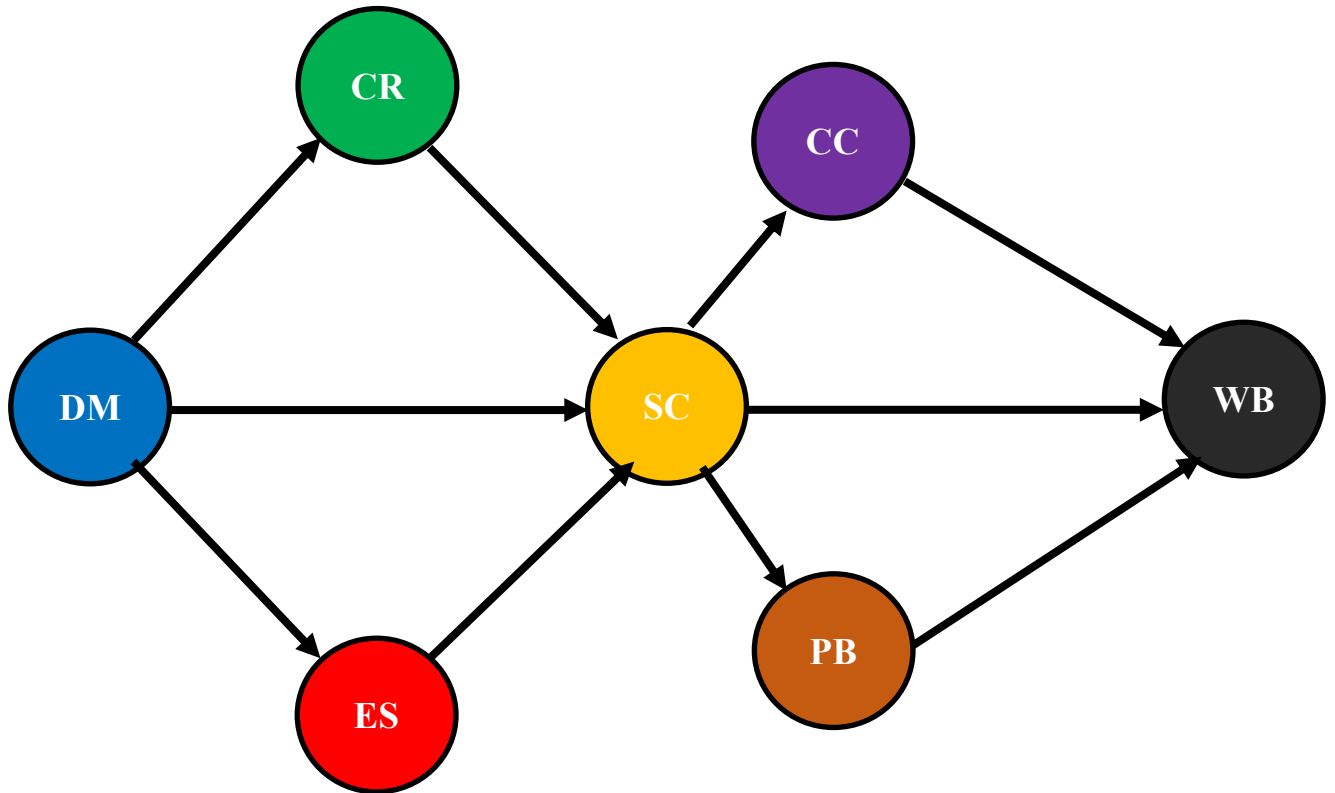
The fourth mediating variable considered in the present study is prosocial behavior. As noted elsewhere, prosocial behavior encompasses voluntary actions intended to assist others, including activities such as helping, sharing, cooperating, donating, caring, and providing comfort (Guo et al., 2023). Research suggests that dispositional mindfulness may enhance prosocial behavior by increasing awareness of individual motivations (Kil et al., 2021), and meta-analytic evidence shows that mindfulness is positively correlated with prosocial behavior (Donald et al., 2019). Empirical studies further indicate that engaging in prosocial behavior is associated with enhanced psychological well-being. Such behaviors promote positive emotional experiences while simultaneously reducing the occurrence of negative emotions (Kakulte & Shaikh, 2023). Given these findings, it is plausible that prosocial behavior may mediate the relationship between dispositional mindfulness and well-being among emerging adults. Despite these insights, there is a paucity of research in the Indian context exploring this relationship. Therefore, the present study also aims to investigate the mediating role of

prosocial behavior in the association between dispositional mindfulness and well-being (see Figure 2.4).

**Figure 2.4| Hypothesized model predicting well-being based on dispositional mindfulness, mediated by Prosocial Behaviour among emerging adults.**



**Figure 2.5 Hypothesized path model**



DM = Dispositional Mindfulness; SC = Self-Compassion; WB = Well-being; ES = Expressive Suppression; CR = Cognitive Reappraisal; CC = Coping Competence; PB = Prosocial Behavior

## **2.8 Research Questions**

Based on the review of the existing literature, the following research questions were formulated for the present study:

1. What is the relationship between dispositional mindfulness, selfcompassion, emotion regulation, coping competence, prosocial behaviour, and well-being among emerging adults?
2. How does dispositional mindfulness, self-compassion, emotion regulation, coping competence, and prosocial behaviour individually and collectively influence overall wellbeing in emerging adults?
3. How do self-compassion, emotion regulation, coping competence, and prosocial behaviour mediate the relationship between dispositional mindfulness and well-being among emerging adults?

# **CHAPTER-III**

## **METHOD**

## METHOD

This chapter delineates the methodology employed to fulfill the aims of the current study, which sought to explore the connections between dispositional mindfulness and well-being in emerging adults, emphasizing the mediating roles of emotion regulation strategies, self-compassion, coping competence, and prosocial behaviour. The study seeks to explore how these psychological factors influence the well-being of emerging adults, specifically within the Indian context, using the PERMA model of well-being as the primary outcome measure. The research was conducted in two distinct phases: a pilot study followed by the main study. The primary design employed was quantitative and cross-sectional, utilizing standardized self-report measures. The two-phase structure allowed for preliminary testing and refinement of instruments and procedures prior to the main data collection. This approach ensured that the tools used were both psychometrically sound and appropriate for the target population. The methodology was guided by established research practices to ensure validity, reliability, and ethical compliance, ultimately supporting a robust investigation of the proposed hypotheses.

### 3.1 Objectives:

1. To investigate how dispositional mindfulness, self-compassion, emotion regulation, coping competence, prosocial behavior, and well-being are interrelated among emerging adulthood
2. To examine the interplay and influence of dispositional mindfulness, self-compassion, emotional regulation, coping competence, prosocial behavior, and well-being among emerging adults within a structural model

**Table 3.1**

**Objectives -2 Hypotheses List**

<b>SL No</b>	<b>Hypotheses</b>
H1	Cognitive Reappraisal will be positively predicted by Dispositional Mindfulness
H2	Expressive Suppression will be negatively predicted by Dispositional Mindfulness
H3	Self-Compassion will be positively predicted by Cognitive Reappraisal
H4	Self-compassion will be negatively predicted by Expressive Suppression
H5	Self-compassion will be positively predicted by Dispositional Mindfulness
H6	Coping Competence will be positively predicted by Self-Compassion
H7	Prosocial Behaviour will be positively predicted by Self-Compassion
H8	Well-Being will be positively predicted by Coping Competence
H9	Well-Being will be positively predicted by Prosocial Behaviour
H10	Well-Being will be positively predicted by Self-Compassion

3. To identify the underlying pathways by examining the mediating roles of emotion regulation, coping competence, prosocial behavior, and self-compassion within the proposed structural model.

**Table 3.2**

**Objectives -3 Hypotheses List**

<b>SL No</b>	<b>Hypotheses</b>
H11	The relationship between Dispositional Mindfulness and Self-Compassion will be mediated by Cognitive Reappraisal

H12	The relationship between Dispositional Mindfulness and Self-Compassion will be mediated by Expressive suppression
H13	The relationship between Self-Compassion and Well-Being will be mediated by Coping Competence
H14	The relationship between Self-Compassion and Well-Being will be mediated by Prosocial Behaviour
H15	The relationship between Dispositional Mindfulness and Well-Being will be mediated by Self-Compassion
H16	The relationship between Expressive Suppression and Prosocial Behaviour will be mediated by Self-Compassion
H17	The relationship between Cognitive Reappraisal and Coping Competence will be mediated by Self-Compassion
H18	The relationship between Cognitive Reappraisal and Prosocial Behaviour will be mediated by Self-Compassion
H19	Self-compassion will negatively mediate the relationship between Expressive Suppression and Coping Competence
H20	The relationship between Cognitive Reappraisal and Well-Being will be mediated by Self-Compassion
H21	Self-Compassion will negatively mediate the relationship between Expressive Suppression and Well-Being

**3.2 Research Design:** This study utilizes a Cross-sectional design with a retrospective approach, employing a survey method. This design represents a category of observational

study. in which the researcher simultaneously assesses both the outcomes and exposures among the participants (Vandenbroucke et al., 2007). The retrospective aspect of the design allows the participants to reflect on their recent psychological experiences and behaviours, as measured by standardized self-report instruments.

**Study Setting:** The research is carried out at various educational institutions and locations across India.

**Study Duration:** The data collection for the present study was carried out over a period of approximately two and a half months, beginning on October 18, 2024, and concluding on December 28, 2024. This duration allowed sufficient time for participant recruitment, dissemination of the survey, follow-up reminders, and monitoring of response rates. The chosen time frame ensured that a diverse and adequate number of participants could be reached and that the study proceeded in an organized and timely manner.

**3.3 Sample:** The current research included a sample of 600 emerging adults, aged 18 to 29 years, representing both male and female participants. Tables 3.1 shows the demographic characteristics of the sample. The study comprised 600 emerging adults aged 18 to 29 years ( $M = 23.12$ ,  $SD = 3.26$ ), with a higher representation of females ( $n = 378$ , 63%) compared to males ( $n = 222$ , 37%). The majority were unmarried ( $n = 486$ , 81%), while 16.8% ( $n = 101$ ) were married, and a small percentage ( $n = 13$ , 2.2%) had a different marital status. Most participants came from nuclear families ( $n = 397$ , 66.2%), followed by joint families ( $n = 191$ , 31.8%), and extended families ( $n = 12$ , 2%). Regarding place of residence, 69.5% ( $n = 417$ ) lived in urban areas, while 30.5% ( $n = 183$ ) were from rural backgrounds. Educationally, 40.3% ( $n = 242$ ) were undergraduates, 42% ( $n = 252$ ) had completed postgraduation, and 17.7% ( $n = 106$ ) were pursuing or had completed a PhD.

**Table 3.3|| Socio Demographic Characteristics of the Participants (n = 600)**

Variable	Groups	f (%)
Age (in years) M ± SD		23.12 ± 3.26
Gender	Male	222 (37.0)
	Female	378 (63.0)
Marital Status	Unmarried	486 (81.0)
	Married	101 (16.8)
	Other	13 (2.2)
Family Type	Nuclear Family	397 (66.2)
	Joint Family	191 (31.8)
	Extended Family	12 (2.0)
Place of Residence	Urban	417 (69.5)
	Rural	183 (30.5)
Education Level	Undergraduate	242 (40.3)
	Postgraduate	252 (42.0)
	PhD +	106 (17.7)

**Sampling Technique:** A purposive sampling method was employed to recruit participants, wherein individuals were selected based on specific characteristics relevant to the research objectives. This non-probability sampling technique is commonly used in qualitative and exploratory research, allowing the researcher to target participants who possess experiences, knowledge, or traits necessary for an in-depth understanding of the phenomenon under study. (Stratton, 2021).

**Inclusion Criteria:**

1. Individuals classified as emerging adults, specifically those aged 18 to 29 years.
2. Emerging adults who are willing to provide informed consent for participation in the research.
3. Participants who possess the ability to read and comprehend English language.

**Exclusion Criteria: .**

1. Individuals with significant medical conditions or severe psychiatric disorders, including but not limited to Schizophrenia, Bipolar Affective Disorder (BPAD), Obsessive-Compulsive Disorder (OCD), and substance use disorders.

2. Participants who are undergoing psychological intervention or psycho pharmacotherapy.

### **3.4 Measurements:**

**1. Socio-Demographic Data Sheet:** It contains information on participants' age, gender, family type, marital status, education, and their area of stay (Urban/rural) providing key background data for research analysis.

**2. Five Facet Mindfulness Questionnaire (FFMQ-15):** The FFMQ-15, created by Baer et al. in 2012, is a self-assessment tool comprising 15 items aimed at evaluating mindfulness concerning thoughts, experiences, and behaviors in daily life. Each item is rated on a 5-point Likert scale, where 1 denotes "rarely true" and 5 signifies "always true." Higher scores indicate a greater level of mindfulness in everyday activities. The FFMQ-15 includes five separate subscales of mindfulness: Observing (items 1, 6, 11), Describing (items 2, 7, 12), Acting with Awareness (items 3, 8, 13), Non-judgment (items 4, 9, 14), and Non-reactivity (items 5, 10, 15). It is important to note that items 3, 4, 7, 8, 9, 13, and 14 are scored negatively. To calculate average scores, the responses are summed and divided by the total number of items, which reflects the mean level of agreement with each subscale. The five dimensions of the FFMQ have shown satisfactory to excellent internal consistency, with Cronbach's alpha coefficients ranging from .75 to .91, and the instrument has proven sensitive to changes during Mindfulness-Based Cognitive Therapy (Baer et al., 2006). In a recent investigation, the internal consistency was reported as .70 for Observing, .65 for Describing, .74 for Acting with Awareness, .84 for Non-judging, and .75 for Non-reactivity (Kim et al., 2023).

**3. Self-Compassion Scale (SCS-12):** The SCS-12 was created by Neff et al. (2003a) and comprises 12 items designed to assess overall self-compassion along with its various

components across six distinct dimensions. These dimensions are: Self-Kindness; Self-Judgment; Common Humanity; Isolation; Mindfulness; and Over-identification. Each item is evaluated using a 5-point Likert scale, where a score of 1 represents "almost never" and a score of 5 indicates "almost always." Subscale scores are calculated by averaging the responses for the relevant items. To derive a total self-compassion score, it is essential to reverse score the negative subscale items—self-judgment, isolation, and over-identification (i.e., 1 = 5, 2 = 4, 3 = 3, 4 = 2, 5 = 1), after which the overall mean is computed. Higher scores reflect increased levels of self-compassion. The SCS-12 exhibits strong psychometric properties, demonstrating a high degree of internal consistency ( $\alpha = 0.92$ ) and excellent test-retest reliability ( $r = 0.93$ ) (Neff, 2003b).

**4. Emotion Regulation Questionnaire (ERQ-10):** The ERQ-10, created by Gross and John in 2003, consists of ten items aimed at assessing individuals' tendency to manage their emotions through two distinct strategies: (1) Cognitive Reappraisal (items 1, 3, 5, 7, 8, 10) and (2) Expressive Suppression (items 2, 4, 6, 9). Participants respond to each item using a 7-point Likert scale, where 1 indicates strong disagreement and 7 indicates strong agreement. The ERQ-10 demonstrates robust internal consistency, with Cronbach's alpha values of 0.82 for cognitive reappraisal and 0.76 for expressive suppression, alongside acceptable test-retest reliability coefficients of  $r = 0.69$  and  $r = 0.70$ , respectively. Confirmatory factor analysis further validates its two-factor structure (García et al., 2023).

**5. Coping Competence Questionnaire (CCQ-12):** The CCQ-12, developed by Schroder and Ellis in 2013, was explicitly formulated to assess resilience concerning feelings of helplessness and depression, utilizing theories associated with helplessness and hopelessness. This tool consists of 12 items, each evaluated on a 6-point Likert scale, with responses varying from 1,

which signifies "Very uncharacteristic of me," to 6, which represents "Very characteristic of me." The items are reversed and aggregated, with higher total scores reflecting greater resilience to learned helplessness (coping competence), while lower scores suggest a tendency towards helplessness in challenging situations. The total scores can vary from 12 to 72, encompassing the full spectrum of potential outcomes. The CCQ exhibits excellent internal consistency ( $\alpha > 0.90$ ) and strong test-retest reliability ( $r = 0.86$ ) over a 1-month period. Factor analyses confirm it is unidimensional, assessing stress reactions linked to learned helplessness theory. It shows high correlations with depression measures ( $-0.53$  to  $-0.59$ ) and good convergent validity (Schroder & Ollis., 2013).

**6. Pro-socialness Scale for Adults:** The Pro-socialness Scale for Adults, created by Carpara et al. (2005), was utilized to assess the prosocial behaviours of the participants. This scale comprises 16 items, with participants responding on a five-point Likert scale, where a score of 1 signifies never or almost never true, and a score of 5 indicates almost always or always true. The scale demonstrates strong psychometric properties, evidenced by a Cronbach's  $\alpha$  of .91 for the complete item set and a mean corrected item-total correlation of .59 (Carpara et al., 2005). Additionally, a separate study reported robust internal consistency reliability ( $\alpha = 0.890$ ) and a test-retest reliability of 0.801 (Zhan et al., 2023).

**7. The PERMA Profiler:** The PERMA Profiler, developed by Butler and Kern in 2013, serves as a concise multidimensional tool for evaluating psychological well-being. This instrument enables both individuals and organizations to assess and monitor well-being in alignment with Seligman's PERMA theory (2011). The Profiler comprises a 15-item scale that encompasses six distinct domains, each containing three items: Positive Emotions (PE), Engagement (EN), Relationships (REL), Meaning (MNG), and Accomplishment (ACC). These items have been

derived and refined from various scales that measure both eudaimonic and hedonic well-being. Each item is evaluated using an 11-point scale, which spans from 0 (never) to 10 (always). The scores for the three items in each domain are averaged to produce a domain score that varies from 0 to 10, where higher scores indicate improved well-being. Furthermore, a cumulative score can be calculated by adding the scores of all 15 items. Butler and Kern's (2013) comprehensive research has demonstrated that the model exhibits acceptable fit, as well as internal and cross-temporal consistency, alongside evidence supporting its content and convergent validity (Wammerl et al., 2019).

**3.5 PROCEDURE:** The study was carried out in two phases:

**Phase 1: Pilot Study**

The pilot study was conducted to assess the feasibility, reliability, and clarity of the tools used to measure the psychological variables of the study. It also aimed to identify any methodological or procedural issues before carrying out the main study.

**The objectives of the pilot study were:**

1. To assess the suitability of the data for conducting Structural Equation Modeling (SEM).
2. To examine the internal consistency and reliability of the measurement tools.
3. To evaluate the overall feasibility of implementing the study protocol.
4. To determine the clarity and cultural appropriateness of the items for the target population.
5. To test the practicality of the data collection process, including the time required for administration.

### **Sample and Sampling**

The pilot study included a sample of 120 emerging adults (aged 18–29 years), representing both genders. Participants were selected using purposive sampling method. The inclusion criteria were: Individuals aged between 18 – 29 years, the ability to read and understand English, and willingness to participate voluntarily.

### **Data Collection Procedure**

A survey questionnaire was utilised to collect the data, which contained an informed consent form, demographic details, and standardized psychological measures. The form was disseminated by visiting various educational institutions across India to reach a diverse group of participants. Participants were encouraged to complete the form in one sitting without external assistance. In order to evaluate the practicality and time efficiency of the procedure, participants were specifically requested to report the approximate time taken to complete the entire form. They were also encouraged to provide feedback regarding any difficulties encountered during the process, including comprehension of items, clarity of instructions, or technical issues related to form navigation.

### **Statistical Analysis and Findings of the Pilot Study**

The data collected from 120 emerging adults during the pilot phase were analyzed using IBM SPSS Statistics for Windows, Version 22.0 (IBM Corp., Armonk, NY, 2015). The aim was to examine the psychometric properties of the instruments, assess assumptions for further analyses, and establish the suitability of the dataset for conducting parametric tests and Structural Equation Modeling (SEM) in the main study.

## Demographic Profile of Participants

A sample of 120 emerging adults, aged between 18 and 29 years, with a mean age of 23.17 years ( $SD = 3.28$ ), out of which, 71 were female (59.2%) and 49 were male (40.8%). A majority of the participants were unmarried ( $n = 98$ ; 81.7%), while 22 participants (18.3%) were married. In terms of family structure, 71.7% of participants belonged to nuclear families ( $n = 86$ ), while 25.8% ( $n = 31$ ) came from joint families, and 2.5% ( $n = 3$ ) reported living in extended families. The distribution of participants by residential background showed that 67.5% ( $n = 81$ ) resided in urban areas, whereas 32.5% ( $n = 39$ ) came from rural backgrounds, reflecting a predominantly urban sample (see Table 1).

## Descriptive Statistics and Normality Assessment

Descriptive statistics were computed to explore the distributional properties of the core variables: Dispositional Mindfulness (DM), Self-Compassion (SCS), PERMA Well-being, Expressive Suppression (ES), Cognitive Reappraisal (CR), Coping Competence (CC), and Prosocial Behavior (PB). The skewness values ranged from  $-0.454$  to  $0.205$ , and kurtosis values ranged from  $-0.399$  to  $1.859$ . According to the criteria suggested by Jiang (2024), distributions were considered approximately normal if the absolute value of skewness was  $\leq 2$  and kurtosis was  $\leq 4$ . All variables fell within this acceptable range, indicating no significant deviation from normality (see Table 2).

**Table 3.4|| Socio-Demographic Characteristics of the Pilot Study Sample (N = 120)**

Variables	Category	Frequency (n)	Percentage (%)
Age (in years) M $\pm$ SD	23.17 $\pm$ 3.28		
Gender	Male	49	40.80%
	Female	71	59.20%
Marital Status	Unmarried	98	81.70%
	Married	22	18.30%
Family Type	Nuclear Family	86	71.70%
	Joint Family	31	25.80%
	Extended Family	3	2.50%
Residence	Urban	81	67.50%
	Rural	39	32.50%

### **Multicollinearity Diagnostics**

Multicollinearity among predictor variables was assessed using Tolerance and Variance Inflation Factor (VIF) values. Tolerance ranged from 0.571 to 0.818, and corresponding VIF values ranged from 1.223 to 1.751, all of which fall within acceptable thresholds (Tolerance > 0.20; VIF < 5) as recommended by Kim (2019). These findings confirm that no multicollinearity concerns were present in the dataset.

### **Internal Consistency and Reliability**

The reliability of each scale was evaluated using Cronbach's alpha and Average Inter-Item Correlation (AIC). Based on George and Mallery's (2003) guideline of  $\alpha \geq 0.70$  for acceptable internal consistency, and Clark and Watson's (1995) recommendation of an AIC between 0.15 and 0.50, the results demonstrated satisfactory psychometric strength: (a) DM:  $\alpha = 0.752$ ; AIC = 0.170, (b) SCS:  $\alpha = 0.776$ ; AIC = 0.219, (c) PERMA:  $\alpha = 0.925$ ; AIC = 0.437, (d) ES:  $\alpha = 0.733$ ; AIC = 0.406, (e) CR:  $\alpha = 0.844$ ; AIC = 0.474, (f) CC:  $\alpha = 0.932$ ; AIC = 0.536, and (g) PB:  $\alpha = 0.897$ ; AIC = 0.353. All instruments demonstrated acceptable to excellent internal consistency, with Cronbach's alpha values exceeding the standard cut-off. Most AIC values were within the recommended range, indicating strong internal homogeneity. The slightly elevated AIC for Coping Competence (0.536) may suggest item redundancy or high inter-item similarity, warranting further investigation in the main study (see Table 2).

### **Sampling Adequacy and Factorability**

To assess the factorability of the tools, the Kaiser-Meyer-Olkin (KMO) Measure of Sampling Adequacy and Bartlett's Test of Sphericity were conducted. The KMO values ranged from 0.684 to 0.931, all exceeding the minimum acceptable threshold of 0.50 (Kaiser, 1974),

indicating adequate sampling for factor analysis. Bartlett’s Test of Sphericity was statistically significant ( $p < .001$ ) across all scales, confirming that the correlation matrices were not identity matrices and were therefore suitable for exploratory factor analysis (EFA). These findings support the structural validity of the instruments (see Table 2).

**Table 3.5|| Descriptive Statistics, Normality, Reliability, and Factorability Indicators of Study Variables (Pilot Study, N = 120)**

Variables	Mean	SD	Skewness	Kurtosis	Cronbach’s alpha	AIC	KMO	Bartlett’s Test
<b>DM</b>	49.45	7.80	.205	1.011	0.752	.170	0.684	< 0.001
<b>SC</b>	37.70	7.36	-.066	1.859	0.776	.219	0.788	< 0.001
<b>ES</b>	17.76	5.50	-.454	-.214	0.925	.437	0.742	< 0.001
<b>CR</b>	28.13	7.34	-.445	.538	0.733	.406	0.847	< 0.001
<b>CC</b>	43.27	13.12	.044	-.399	0.844	.474	0.931	< 0.001
<b>PB</b>	61.44	10.55	-.305	.076	0.932	.536	0.868	< 0.001
<b>WB</b>	93.81	29.79	-.127	-.127	0.897	.353	0.921	< 0.001

Note: DM = Dispositional Mindfulness; SC = Self-Compassion; WB = Well-being; ES = Expressive Suppression; CR = Cognitive Reappraisal; CC = Coping Competence; PB = Prosocial Behavior; AIC = Average Inter Item Correlation; KMO = Kaiser-Meyer-Olkin Measure of Sampling Adequacy; SD = Standard Deviation

### **Preliminary Correlation Analysis**

As an exploratory step, Pearson’s product-moment correlation was conducted among the study variables to examine the strength and direction of their interrelationships. The analysis revealed a statistically significant association at the  $p < .001$  level between Dispositional Mindfulness, Self-Compassion, Well-being, Cognitive Reappraisal, Expressive Suppression, Coping Competence, and Prosocial Behavior. As expected, Well-being was positively correlated with Dispositional Mindfulness, Self-Compassion, Cognitive Reappraisal, Coping Competence, and Prosocial Behavior, and negatively correlated with Expressive Suppression. These associations are consistent with theoretical expectations and further confirm the appropriateness of these variables for inclusion in the main study.

**Table 3.6|| Pearson’s Correlation Coefficients Among Study Variables (Pilot Study, N = 120)**

Variables	DM	SC	ES	CR	CC	PB	WB
DM	1						
SC	.471**	1					
ES	-.376**	-.375**	1				
CR	.464**	.379**	-.330**	1			
CC	.421**	.435**	-.405**	.361**	1		
PB	.346**	.332**	-.385**	.617**	.420**	1	
WB	.443**	.531**	-.377**	.528**	.472**	.421**	1

Note: \*\* Correlation is significant at the 0.01 level; DM = Dispositional Mindfulness; SC = Self-Compassion; WB = Well-being; ES = Expressive Suppression; CR = Cognitive Reappraisal; CC = Coping Competence; PB = Prosocial Behavior

### **Participant Feedback on Comprehension and Completion Time**

Participants were asked to report the approximate time they required to complete the survey form and to share any difficulties they encountered in understanding the questionnaire items or navigating the form. The majority of participants reported that the form took approximately 15 to 20 minutes to complete. Feedback indicated that the language used in the scales was clear, comprehensible, and culturally appropriate. A small number of participants suggested improving the formatting of item spacing and response options. No major concerns were raised regarding comprehension or clarity of the items.

### **Modifications Made Based on Feedback**

The feedback from the participants was incorporated into the survey form to enhance user experience, particularly ensuring that Likert scale options were clearly aligned with their corresponding items. Additionally, brief instructional cues were added before each section to improve the flow and clarity of the form. No changes or translations were made to the wording of the scale items, as they were found to be sufficiently understandable by the target population.

Overall, the pilot data met the essential statistical assumptions of normality, internal consistency, sampling adequacy, and multicollinearity, confirming that the dataset is well-suited for parametric analyses, including multiple regression and Structural Equation Modeling (SEM) in the main study. The findings also support the reliability and structural validity of the instruments used, ensuring the methodological robustness of the forthcoming main phase.

## **Phase 2: Main Study**

The present study obtained formal approval from the Institutional Ethics Committee, University of Hyderabad (Letter No. UH/IEC/2024/205) ensuring that all procedures complied with established ethical standards and protocols throughout the research process. After the ethical approval, participants from various educational institutions across country were approached for data collection. Those who are aged between 18 – 29 years of age, can read and comprehend English language, and were willing to participate in the research were included. After a brief introduction of the study, participants were informed that the data gathered will remain confidential and will be used only for research purpose and they could choose to withdraw from research at any given time. Then the participants were asked to sign the informed consent form. After giving the formal consent, participants were handed over the survey form. The survey form comprised 88 items (FFMQ = 15 items, SCS = 12 items, ERQ = 10 items, CCQ = 12 items, Pro-socialness Scale for Adults = 16 items, The PERMA Profiler = 15 items, and 8 items pertaining to demographic characteristics). The first section included socio-demographic information, while the remaining sections contained standardized self-report scales. All items were presented in English, with no translations into regional languages. The questionnaire used Likert-type response formats. The layout and structure of the form were refined based on pilot study feedback, which helped ensure the clarity of instructions, ease of navigation, and acceptable completion time. Participants were asked to respond to all items to

prevent missing data, and participants were also asked to report the approximate time taken to complete the survey, which ranged on average from 15 to 20 minutes, as established in the pilot phase. No monetary or other incentives were offered to participants for taking part in the study. The survey was self-administered, allowing individuals to respond at their convenience and in private settings—an approach likely to reduce social desirability bias, a known issue in self-reported data (Nederhof, 1985). The data collection period extended from October 18, 2024, to December 28, 2024. By the end of this period, a total of 638 responses had been received. Before the main analyses, the dataset underwent rigorous screening to ensure data quality and validity. A total of 38 responses were excluded for the following reasons: 18 responses were excluded due to participants falling outside the specified age range of 18–29 years; 12 responses were removed due to missing data; 8 responses were excluded for reporting a completion time of less than 10 minutes, which fell below the minimum acceptable range (15–20 minutes) determined during the pilot study, suggesting potential inattention or random responding. After data cleaning, the final sample comprised 600 valid responses, which were retained for main statistical analysis. Throughout the data collection and processing phases, ethical standards related to informed consent, confidentiality, voluntary participation, and secure data handling were strictly maintained.

## **Summary**

The present study adopted a quantitative research design, incorporating both pilot testing and main data collection phases to ensure methodological rigor and clarity in addressing the research objectives. The study was conducted in two phases. The first phase involved a pilot study, which was essential for evaluating the psychometric adequacy, feasibility, clarity, and reliability of the instruments. The second phase comprised the main study. The methodological framework of this study was thoughtfully constructed to ensure rigorous data collection, ethical

compliance, and analytic precision. The use of a structured, self-administered survey form, preceded by a well-designed pilot study, enabled the assessment of the reliability and suitability of the instruments while ensuring clarity and feasibility for the target population. Through careful sampling, pre-screening, and adherence to established ethical standards, the methodology provided a solid foundation for answering the research questions and testing the proposed theoretical model. The next chapter presents the results derived from the cleaned and validated dataset, offering insights into the statistical relationships among the key study variables.

# **CHAPTER-IV**

## **RESULTS**

## RESULTS

This chapter presents the findings of the study, structured in alignment with the three research objectives and based on a cross-sectional design with a retrospective approach, utilizing the survey method. The study aimed to explore the dynamic relationships among key psychological constructs—dispositional mindfulness, self-compassion, emotion regulation, coping competence, prosocial behavior, and subjective well-being—among emerging adults. The first objective was to investigate how these variables are interrelated, which was addressed using Pearson correlation coefficient analysis. This initial statistical procedure provided a foundational understanding of the bivariate relationships among the core constructs. The second objective sought to examine the interplay and influence of dispositional mindfulness and other psychological factors within a structural model. To achieve this, Structural Equation Modelling (SEM) was employed, offering a comprehensive assessment of both direct and indirect effects, as well as the overall predictive relationships among variables. The third objective focused on identifying the underlying pathways by examining the mediating roles of emotion regulation, coping competence, prosocial behavior, and self-compassion within the proposed structural framework. SEM was used to test these mediation effects, allowing for a deeper exploration of the mechanisms through which dispositional mindfulness impacts well-being. Together, these analytical strategies provided a thorough and multidimensional understanding of the research problem, integrating statistical precision with theoretical insight to explore the psychological functioning of emerging adults.

### 4.1 Preliminary Analysis

Before conducting the analysis, the assessment of normality of the data was done using skewness and kurtosis values. Reference thresholds for significant normality are defined as an absolute skewness of  $\leq 2$  and an absolute kurtosis of  $\leq 4$  (Jiang, 2024). The skewness and

kurtosis coefficients, along with the standard error for all variables, fall within the range of -2 to 2, indicating that the data distribution is normal (see Table 4.1). Considering the risk of common method bias in self-administered questionnaires, an evaluation of common method variance was necessitated (Pangarso et al., 2020). To investigate this potential bias, Harman's single-factor test was conducted using SPSS, employing Principal Axis Factoring. All items from the FFMQ-15, SCS-26, ERQ-10, CCQ-12, PERMA Profiler and Pro-Socialness Scale for Adults were included in the un-rotated exploratory factor analysis. The first component explained 20.42% of the total variance, which falls short of the critical threshold of 50% (Pangarso et al., 2020). These findings suggest that common method bias was not a concern in the current study.

## **4.2 Descriptive Statistics**

The descriptive statistics of Mean, SD, Skewness, and Kurtosis for the study variables are presented in the Table 4.1. The Mean and SD of Well-being was (M = 83.89, SD = 27.32). The Mean and SD of Dispositional Mindfulness was (M = 47.95, SD = 7.64). Among the dimensions of Dispositional Mindfulness, Observation had a Mean of 9.67 and SD of 2.60, Description had a Mean of 9.64 and SD of 2.37, Non-reactivity had a Mean of 9.62 and SD of 2.19, Non-judgment had a Mean of 9.70 and SD of 2.67, and Acting with Awareness had a Mean of 10.31 and SD of 2.53. The Mean and SD of Self-Compassion was (M = 37.53, SD = 7.67). The subscales of self-compassion exhibited the following Mean and SD scores: Over-identification (M = 5.82, SD = 2.13), Isolation (M = 5.45, SD = 2.06), Self-Judgment (M = 6.48, SD = 2.18), Self-Kindness (M = 6.47, SD = 2.04), Mindfulness (M = 6.83, SD = 2.12), and Common Humanity (M = 6.49, SD = 1.96). Additionally, Emotion Regulation strategies such as Expressive Suppression had a Mean of 17.73 and SD of 5.54, Cognitive Reappraisal

had a Mean of 28.37 and SD of 7.22, and Coping Competence had a Mean of 43.69 and SD of 13.85. The Mean and SD of Prosocial Behavior was (M = 61.6, SD = 10.74).

**Table 4.1|| Descriptive Analysis of the Study Variables (n=600)**

Variables	Mean	SD	Skewness		Kurtosis	
	Statistic	Statistic	Statistic	Std. Error	Statistic	Std. Error
DM	47.9450	7.63867	.179	.100	.489	.199
OBS	9.6700	2.59853	-.276	.100	-.014	.199
DES	9.6367	2.36516	-.109	.100	-.109	.199
NR	9.6183	2.18875	.035	.100	.595	.199
NJ	9.7017	2.66731	.104	.100	-.391	.199
AWA	10.3117	2.52623	-.058	.100	-.357	.199
PE	5.8817	2.77016	-.311	.100	-.811	.199
EN	18.4233	6.11799	-.420	.100	-.273	.199
RL	17.7517	7.11532	-.333	.100	-.610	.199
MN	17.8733	7.17378	-.425	.100	-.519	.199
ACM	17.7200	6.61043	-.310	.100	-.508	.199
HP	6.2017	2.70367	-.446	.100	-.687	.199
WB	83.8933	27.32116	-.230	.100	-.664	.199
SC	37.5267	7.66881	-.030	.100	.692	.199
ES	17.7250	5.53568	-.447	.100	-.202	.199
CR	28.3717	7.21783	-.357	.100	.259	.199
CC	43.6883	13.84645	.012	.100	-.536	.199
PB	61.6067	10.74419	-.506	.100	.567	.199

Note: PE = Positive Emotion, EN = Engagement, RL = Relationships, MN = Meaning, ACM = Accomplishment, HP = Happiness, SWB = Subjective Well-Being, DM = Dispositional Mindfulness, OBS = Observation, DES = Describe, NR = Non-Reactivity, NJ = Non-Judgment, ACW = Acting with awareness, SC = Self-Compassion, ES = Expressive Suppression, CR = Cognitive Reappraisal, CC = Coping Competence, PB = Prosocial Behaviour

### **4.3 The Relationship Between Dispositional Mindfulness, Emotion Regulation Strategies, Self-compassion, Coping Competence, Prosocial Behaviour, and Wellbeing**

The analysis of correlation utilizing Pearson's correlation coefficient indicated notable relationships among the variables studied. As illustrated in Table 4.2, Dispositional

Mindfulness exhibited a significant positive correlation with various domains of well-being, such as Positive Emotion ( $r = .554, p < .001$ ), Engagement ( $r = .766, p < .001$ ), Relationships ( $r = .413, p < .001$ ), Meaning ( $r = .559, p < .001$ ), Accomplishment ( $r = .654, p < .001$ ), Happiness ( $r = .306, p < .001$ ), and the overall well-being score ( $r = .407, p < .001$ ). Moreover, Dispositional Mindfulness demonstrated a strong positive correlation with Self-Compassion ( $r = .539, p < .001$ ), Coping Competence ( $r = .399, p < .001$ ), Cognitive Reappraisal ( $r = .197, p < .001$ ), and Prosocial Behavior ( $r = .143, p < .001$ ). Conversely, Dispositional Mindfulness was negatively correlated with Expressive Suppression (ES,  $r = -.235, p < .001$ ), indicating that individuals with higher levels of mindfulness are less inclined to engage in maladaptive emotional suppression. Additionally, the PERMA model of well-being revealed significant positive correlations with Self-Compassion ( $r = .465, p < .001$ ), Cognitive Reappraisal ( $r = .174, p < .001$ ), Coping Competence ( $r = .338, p < .001$ ), and Prosocial Behavior ( $r = .089, p < .05$ ). However, the PERMA model of well-being was negatively correlated with Expressive Suppression ( $r = -.233, p < .001$ ). Self-Compassion exhibited significant positive correlations with Cognitive Reappraisal ( $r = .105, p < .001$ ), Coping Competence ( $r = .294, p < .001$ ), and Prosocial Behavior ( $r = .069, p < .05$ ). In contrast, Self-Compassion displayed a significant negative correlation with Expressive Suppression ( $r = -.155, p < .001$ ). Expressive Suppression showed significant negative correlations with Cognitive Reappraisal ( $r = -.066, p < .001$ ) and Coping Competence ( $r = -.165, p < .001$ ). However, Expressive Suppression did not reveal a significant relationship with Prosocial Behavior ( $r = 0.02, p > .05$ ). Cognitive Reappraisal demonstrated a significant positive correlation with Coping Competence ( $r = .11, p < .001$ ) and Prosocial Behavior ( $r = .127, p < .001$ ). Finally, Coping Competence showed a significant positive correlation with Prosocial Behavior ( $r = .086, p < .05$ ).

**Table 4.2|| Pearson Correlation Between Dispositional Mindfulness, Self-Compassion, Emotion Regulation, Coping Competence, Prosocial Behavior and Wellbeing (n = 600)**

Variables	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
1	1																	
2	.554**	1																
3	.766**	.268**	1															
4	.413**	.245**	.278**	1														
5	.559**	.138**	.349**	.131**	1													
6	.654**	.161**	.423**	.125**	.402**	1												
7	.306**	.114**	.273**	.102*	.224**	.237**	1											
8	.255**	.106**	.235**	0.052	.141**	.198**	.552**	1										
9	.374**	.143**	.353**	.094*	.216**	.226**	.580**	.631**	1									
10	.408**	.226**	.337**	.080*	.222**	.248**	.636**	.645**	.719**	1								
11	.347**	.157**	.298**	0.06	.224**	.272**	.575**	.646**	.628**	.749**	1							
12	.301**	.104*	.310**	.081*	.194**	.209**	.583**	.556**	.686**	.617**	.601**	1						
13	.407**	.184**	.363**	.093*	.245**	.282**	.737**	.820**	.865**	.897**	.861**	.765**	1					
14	.539**	.225**	.465**	.184**	.349**	.364**	.394**	.314**	.480**	.489**	.433**	.432**	.511**	1				
15	-.235**	-0.04	-.233**	-0.066	-.155**	-.165**	-.110**	-.108**	-.223**	-.126**	-.107**	-.172**	-.168**	-.275**	1			
16	.197**	.121**	.174**	.105**	0.057	.110**	.379**	.332**	.316**	.392**	.399**	.322**	.422**	.305**	.218**	1		
17	.399**	.104*	.338**	.165**	.294**	.324**	.332**	.306**	.391**	.440**	.461**	.403**	.474**	.612**	-.357**	.120**	1	
18	.143**	.111**	.089*	0.065	0.069	.127**	.393**	.413**	.318**	.380**	.406**	.351**	.441**	.178**	0.02	.339**	.086*	1

Note: 1 = Dispositional Mindfulness, 2 = Observation, 3 = Describe, 4 = Non-Reactivity, 5 = Non-Judgment, 6 = Acting with awareness, 7 = Positive Emotion, 8 = Engagement, 9 = Relationships, 10 = Meaning, 11 = Accomplishment, 12 = Happiness, 13 = Well-Being, 14 = Self-Compassion, 15 = Expressive Suppression, 16 = Cognitive Reappraisal, 17 = Coping Competence, 18 = Prosocial Behaviour

#### 4.4 Confirmatory Factor Analysis

In the present study, to validate the factor structure of the study constructs, a Confirmatory Factor Analysis (CFA) was conducted using AMOS Version 22. Confirmatory factor analysis (CFA) is a methodological approach employed to evaluate the effectiveness of measurement models, in which both the quantity of factors and their direct interconnections are predetermined (Price, 2023). The measurement model consisted of six latent constructs: Dispositional Mindfulness, Self-Compassion, Subjective Well-Being, Emotion Regulation Strategies, Coping Competence and Prosocial Behaviour. The steps used for the CFA analysis and the findings of the CFA are presented in the Table 3 and Figure 4.1 respectively.

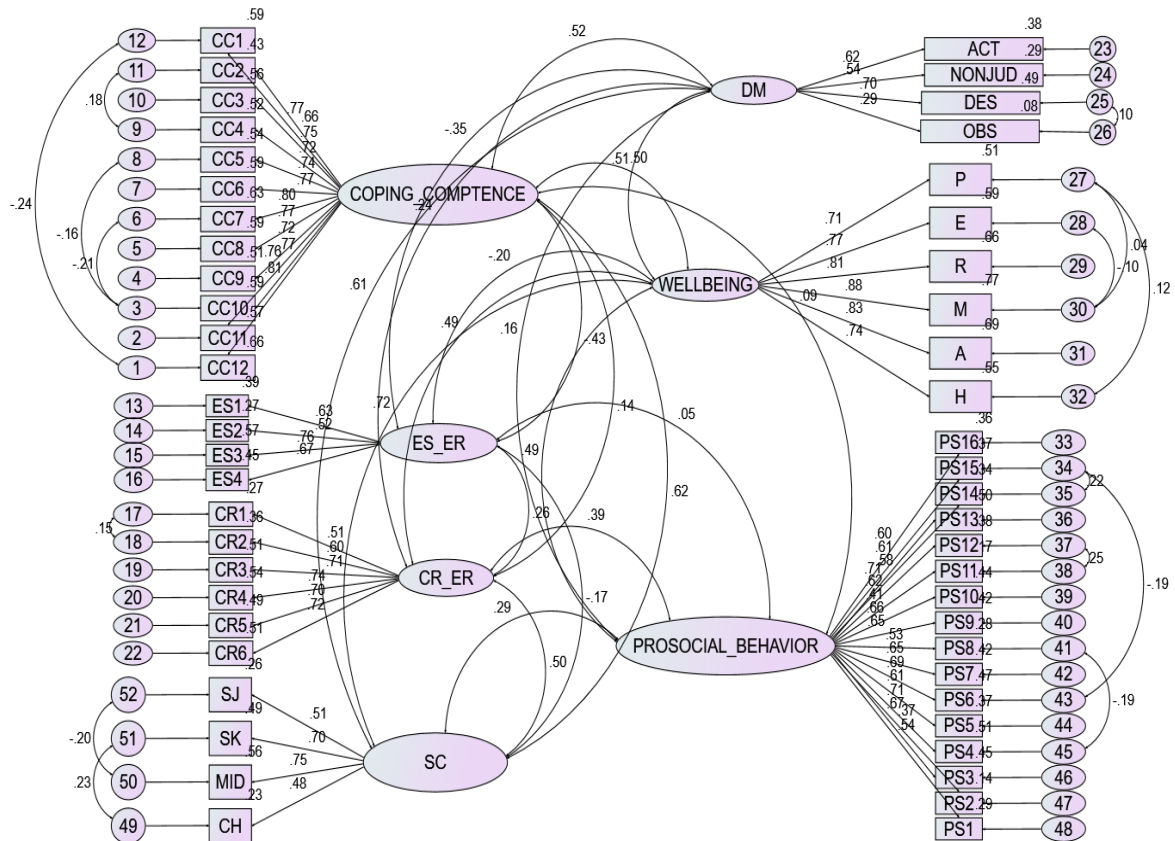
**Table 4.3|| Steps used for Confirmatory Factor Analysis (CFA)**

Step 1: Define the measurement model	Identified the latent variables (Dispositional mindfulness, emotion regulation, self-compassion, coping competence, prosocial behavior, and well-being) and their observed indicators based on theory.
Step 2: Specify the model	Developed a CFA path diagram to represent relationships between latent constructs and observed variables
Step 3: Assess data assumptions	Checked for missing values, normality, multicollinearity, and sample size adequacy.
Step 4: Estimate the model	Conducted CFA using SPSS AMOS to obtain factor loadings, covariances, and fit indices.
Step 5: Evaluate model fit	Assessed model fit using indices such as CFI ( $\geq 0.90$ ), TLI ( $\geq 0.90$ ), and RMSEA ( $\leq 0.08$ )
Step 6: Assess construct validity	Evaluated convergent validity ( $AVE > 0.5$ ), discriminant validity (HTMT ratio $< 0.85$ ), and reliability ( $CR > 0.7$ ).
Step 7: Finalize the measurement model and interpretation	Ensured that the refined model aligns with theoretical expectations before proceeding to SEM.

**Model Fit**

To assess the validity of the proposed measurement model, multiple fit indices were examined, including, Comparative Fit Index (CFI), Tucker-Lewis Index (TLI) and Root Mean Square Error of Approximation (RMSEA). In accordance with the guidelines established by Hu and Bentler (1998), an analysis and interpretation of these parameter values were conducted to assess the adequacy of the model fit. The model fit indices as presented in the Table 4.4 suggest

an acceptable to good fit for the measurement model. The Comparative Fit Index (CFI = .924) and Tucker-Lewis Index (TLI = .919) exceed the recommended threshold of .90, reflecting a good fit. Additionally, the Root Mean Square Error of Approximation value was 0.038, which is less than 0.06, indicating acceptable fit.



**Figure 4.1|| The Measurement Model**

**Table 4.4|| Model Fit Indices**

Fit Index	Recommended Threshold	Model Output	Interpretation
Chi-square ( $\chi^2/df$ )	< 3.00 (Woldgabreal et al., 2016)	1.874	Acceptable
CFI (Comparative Fit Index)	$\geq 0.90$	0.924	Acceptable
TLI (Tucker-Lewis Index)	$\geq 0.90$	0.919	Acceptable
RMSEA (Root Mean Square Error of Approximation)	$\leq 0.06$	0.038	Acceptable
GFI (Goodness-of-Fit Index)	$\geq 0.90$ (close to 0.90 acceptable)	0.873	Marginal
AGFI (Adjusted Goodness-of-Fit Index)	$\geq 0.90$ (close to 0.90 acceptable)	0.858	Marginal
IFI (Incremental Fit Index)	$\geq 0.90$	0.925	Acceptable
PClose (p-value for $RMSEA \leq 0.05$ )	$\geq 0.05$	1.000	Good Fit

### Factor Loading

The standardized factor loadings for all observed variables in the measurement model were examined to assess the strength of their associations with the latent constructs. Following the guideline by Hair et al. (2009), all standardized factor loadings should be at least 0.50 to indicate a strong relationship with the latent variable. Table 4.5 provides the factor loadings of observed variables in CFA. The magnitudes of factor loadings for the subscales of FFMQ-15 ranged from 0.543 to 0.701 except for Observing subscale the factor loading was 0.288. Additionally, the magnitudes of factor loadings for the subscales of SCS-18 ranged from 0.507 to 0.752 except for the Common Humanity subscale which had a lower loadings value of 0.477 suggesting weaker associations. The standardized factor loadings for the subscales of the PERMA-Profilier reveal significant correlations with the underlying construct. Each of the six

subscales demonstrated strong factor loadings: Positive Emotion (P = .714), Engagement (E = .755), Relationships (R = .812), Meaning (M = .879), Accomplishment (A = .848), and Health (H = .717). Similarly, the standardized factor loadings for each item of the Pro-Socialness Behaviour for Adults Scale ranged from 0.533 to 0.714, indicating an adequate representation of the latent construct. However, item 2 (0.372) and item 11 (0.407) had lower factor loadings, suggesting weaker associations with the underlying prosocial behaviour construct. Additionally, the standardized factor loadings for the Cognitive Reappraisal subscale of the ERQ ranged from 0.515 to 0.737, while for the Expressive Suppression subscale, the values ranged from 0.517 to 0.755, indicating an adequate representation of the latent constructs. Furthermore, the standardized factor loadings for each item of the Coping Competence Scale ranged from 0.658 to 0.813, suggesting a strong association between the observed variables and the underlying coping competence construct. All factor loadings were statistically significant, further supporting the validity of the measurement model (see Table 4.5 for further more information).

**Table 4.5|| Factor Loadings and Significance Levels of Observed Variables in CFA**

Observed Variables	Estimate	P
CC12 <--- COPING_COMPTENCE	.813	> 0.05
CC11 <--- COPING_COMPTENCE	.758	> 0.05
CC10 <--- COPING_COMPTENCE	.766	> 0.05
CC9 <--- COPING_COMPTENCE	.716	> 0.05
CC8 <--- COPING_COMPTENCE	.767	> 0.05
CC7 <--- COPING_COMPTENCE	.796	> 0.05
CC6 <--- COPING_COMPTENCE	.766	> 0.05
CC5 <--- COPING_COMPTENCE	.737	> 0.05
CC4 <--- COPING_COMPTENCE	.719	> 0.05
CC3 <--- COPING_COMPTENCE	.746	> 0.05
CC2 <--- COPING_COMPTENCE	.658	> 0.05
CC1 <--- COPING_COMPTENCE	.769	> 0.05
ES4 <--- ES_ER	.672	> 0.05
ES3 <--- ES_ER	.755	> 0.05
ES2 <--- ES_ER	.517	> 0.05

Observed Variables		Estimate	P
ES1	<--- ES_ER	.628	> 0.05
CR6	<--- CR_ER	.717	> 0.05
CR5	<--- CR_ER	.701	> 0.05
CR4	<--- CR_ER	.737	> 0.05
CR3	<--- CR_ER	.711	> 0.05
CR2	<--- CR_ER	.597	> 0.05
CR1	<--- CR_ER	.515	> 0.05
ACT	<--- FFMQ	.617	> 0.05
NONJUD	<--- FFMQ	.543	> 0.05
DES	<--- FFMQ	.701	> 0.05
OBS	<--- FFMQ	.288	< 0.05
H	<--- WELLBEING	.717	> 0.05
A	<--- WELLBEING	.848	> 0.05
M	<--- WELLBEING	.879	> 0.05
R	<--- WELLBEING	.812	> 0.05
E	<--- WELLBEING	.755	> 0.05
P	<--- WELLBEING	.714	> 0.05
PS10	<--- PROSOCIAL_BEHAVIOR	.661	> 0.05
PS9	<--- PROSOCIAL_BEHAVIOR	.648	> 0.05
PS8	<--- PROSOCIAL_BEHAVIOR	.533	> 0.05
PS7	<--- PROSOCIAL_BEHAVIOR	.649	> 0.05
PS6	<--- PROSOCIAL_BEHAVIOR	.686	> 0.05
PS5	<--- PROSOCIAL_BEHAVIOR	.609	> 0.05
PS4	<--- PROSOCIAL_BEHAVIOR	.714	> 0.05
PS3	<--- PROSOCIAL_BEHAVIOR	.672	> 0.05
PS2	<--- PROSOCIAL_BEHAVIOR	.372	< 0.05
PS1	<--- PROSOCIAL_BEHAVIOR	.541	> 0.05
PS11	<--- PROSOCIAL_BEHAVIOR	.407	< 0.05
PS12	<--- PROSOCIAL_BEHAVIOR	.620	> 0.05
PS13	<--- PROSOCIAL_BEHAVIOR	.705	> 0.05
PS14	<--- PROSOCIAL_BEHAVIOR	.583	> 0.05
PS15	<--- PROSOCIAL_BEHAVIOR	.608	> 0.05
PS16	<--- PROSOCIAL_BEHAVIOR	.601	> 0.05
CH	<--- SC	.477	< 0.05
MID	<--- SC	.752	> 0.05
SK	<--- SC	.701	> 0.05
SJ	<--- SC	.507	> 0.05

### Validity Measures for Convergent and Discriminant Validity of the Measurement Model

The findings presented in the Table (4.6) indicated that, as per the criteria by Hair et al. (2009), all the CR values of the latent factors were greater than 0.70, indicating good reliability.

However, FFMQ-15 had a CR value of 0.627, which is still considered acceptable, as composite reliability or Cronbach's alpha values between 0.60 and 0.70 are deemed acceptable (Hair et al., 2009). This suggests that the measurement model demonstrates adequate internal consistency and reliability across all constructs. The AVE values were greater than the Maximum Shared Squared Variance (MSV) values for all constructs, except for FFMQ-15 and Self-Compassion Scale (SCS), indicating that the measurement model demonstrates good discriminant validity based on Fornell and Larcker (1981) criteria. Specifically, the AVE and MSV values for each construct were as follows: Coping Competence (AVE = 0.57, MSV = 0.38), Expressive Suppression (AVE = 0.42, MSV = 0.19), Cognitive Reappraisal (AVE = 0.45, MSV = 0.25), Well-being (AVE = 0.62, MSV = 0.52), and Pro-Socialness Behaviour (AVE = 0.37, MSV = 0.24). However, the AVE values for Mindfulness (0.312) and Self-compassion (0.385) were lower than their respective MSV values (0.37 and 0.52), suggesting that these two constructs did not fully meet the discriminant validity criterion. Despite this, the overall measurement model exhibited satisfactory discriminant validity.

**Table 4.6|| Validity Measures for Convergent and Discriminant Validity of the Measurement Model**

	CR	AVE	MSV	MaxR(H)	CC	ES	CR	DM	SWB	PB	SC
<b>CC</b>	0.94	0.57	0.38	0.941	0.752						
<b>ES</b>	0.74	0.42	0.19	0.76	-0.432***	0.649					
<b>CR</b>	0.83	0.45	0.25	0.837	0.144**	0.260***	0.668				
<b>DM</b>	0.63	0.31	0.37	0.676	0.516***	-0.352***	0.244***	0.559			
<b>SWB</b>	0.91	0.62	0.52	0.919	0.506***	-0.196***	0.494***	0.512***	0.79		
<b>PB</b>	0.9	0.37	0.24	0.909	0.087*	0.048	0.391***	0.163**	0.488***	0.608	
<b>SC</b>	0.71	0.39	0.52	0.744	0.619***	-0.171**	0.500***	0.605***	0.724***	0.289***	0.62

Note: SWB = Subjective Well-Being, DM = Dispositional Mindfulness, SC = Self-Compassion, ES = Expressive Suppression, CR = Cognitive Reappraisal, CC = Coping Competence, PB = Prosocial Behaviour

### Heterotrait-Monotrait (HTMT) Ratio of Correlations

To assess discriminant validity, the Heterotrait-Monotrait (HTMT) ratio of correlations was computed for all latent constructs. The HTMT criterion is considered acceptable if values remain below 0.85 (Henseler et al., 2015). As displayed in the Table 4.7, the HTMT values in this study ranged from 0.03 to 0.74, indicating that all constructs demonstrated satisfactory discriminant validity. The highest HTMT value was observed between Self-Compassion (SC) and Well-being (0.74), suggesting a strong but distinct relationship. Similarly, Self-Compassion and Mindfulness (FFMQ) (0.69), as well as Coping Competence and Self-Compassion (0.65), showed moderate correlations, further supporting the distinction between these constructs. Additionally, Prosocial Behavior displayed low HTMT values (< 0.50) with all other constructs, confirming its conceptual uniqueness. As all HTMT values remained below the recommended threshold of 0.85, the findings provide strong evidence of discriminant validity among the latent constructs.

**Table 4.7|| Heterotrait - Monotrait (HTMT) Ratio of Correlations**

Variables	CC	ES	CR	DM	SWB	PB	SC
CC	---						
ES	0.43	---					
CR	0.14	0.28	---				
DM	0.50	0.32	0.24	---			
SWB	0.51	0.21	0.49	0.52	---		
PB	0.09	0.03	0.39	0.19	0.50	---	
SC	0.65	0.23	0.50	0.69	0.74	0.34	---

Note: SWB = Subjective Well-Being, DM = Dispositional Mindfulness, SC = Self-Compassion, ES = Expressive Suppression, CR = Cognitive Reappraisal, CC = Coping Competence, PB = Prosocial Behaviour

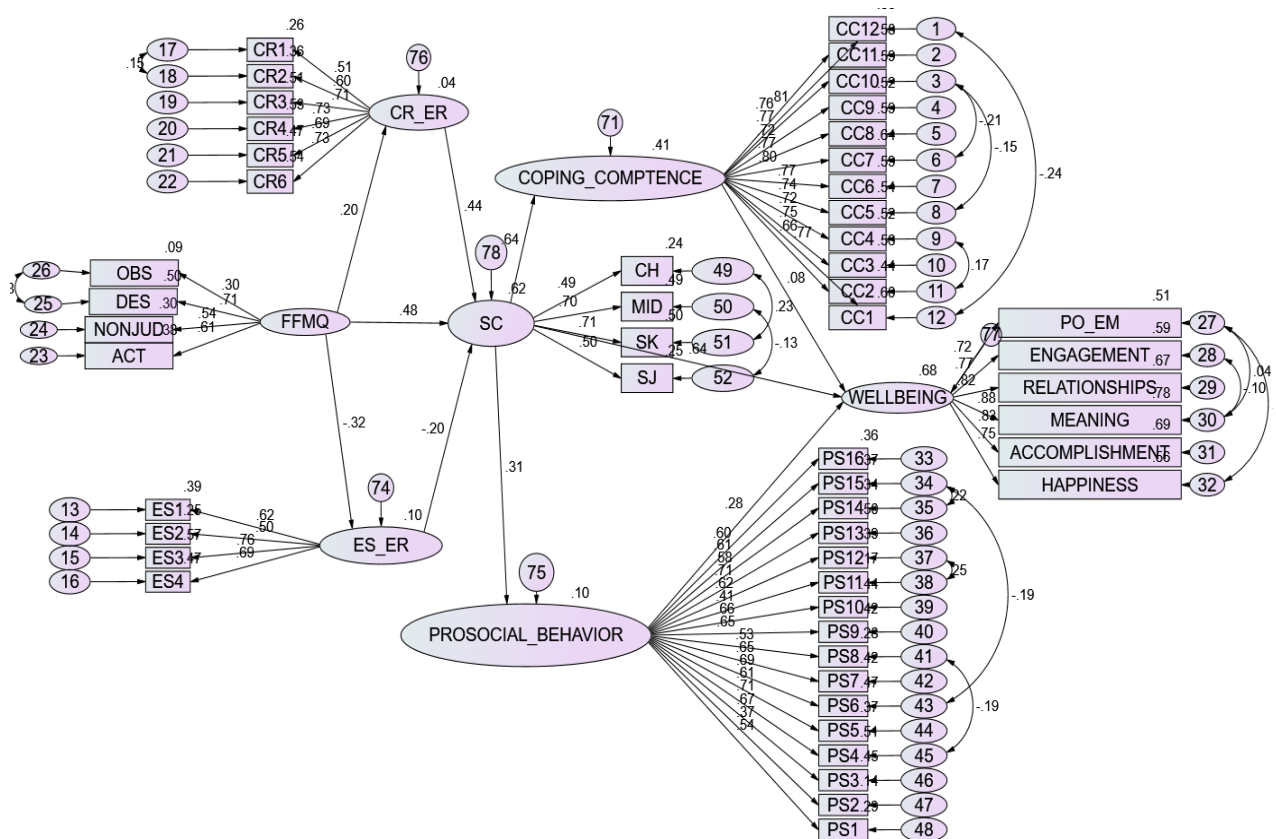
## 4.5 Structural Equation Model (SEM)

Structural equation modelling is a sophisticated multivariate analysis technique used to examine intricate relationships between constructs (latent variables) and their corresponding indicators (observed variables) (Hair et al., 2021; Stein et al., 2017). SEM serves as a comprehensive framework that addresses the simultaneous resolution of systems of linear equations and includes various methodologies such as regression analysis, factor analysis, path analysis, and latent growth curve modelling (Stein et al., 2017). The steps used in the mediational analysis are displayed in the Table 4.8

**Table 4.8|| Steps used for Structural Equation Modelling (SEM)**

Step	Description
<b>Step 1: Define the variable in Model</b>	Identify the independent variable (IV), mediator (M), and dependent variable (DV) based on theoretical background
<b>Step 2: Specify the Structural Model</b>	Develop a path diagram representing direct and indirect relationships among variables. Ensure paths align with the hypothesized mediation model
<b>Step 3: Assess Model Fit</b>	Evaluate fit indices (CFI, TLI, RMSEA) to determine if the mediation model fits the data well. Compare with direct effect-only model if needed
<b>Step 4: Estimate Direct Effects</b>	Run the model in AMOS to assess the direct and indirect effect
<b>Step 5: Mediation Analysis</b>	Use user-defined estimands and bootstrapping (10,000 subsamples) for mediation analysis and assess the significance of indirect effects. Report confidence intervals (e.g., 95% CI)
<b>Step 6: Interpretation and Conclusion</b>	Interpretation and reporting of the findings

**Figure 4.2|| The Full Structural Model**



**Table 4.9|| Model Fit Indices**

Fit Index	Recommended Threshold	Model Output	Interpretation
Chi-square ( $\chi^2/df$ )	< 3.00 (Woldgabreal et al., 2016)	1.999	Acceptable
CFI	$\geq 0.90$ (Hu & Bentler, 1999)	0.907	Acceptable
TLI	$\geq 0.90$ (Hu & Bentler, 1999)	0.913	Acceptable
IFI	$\geq 0.90$ (Bollen, 1989)	0.913	Acceptable
RMSEA	$\leq 0.06$ (Hu & Bentler, 1999)	0.041	Acceptable
PCLOSE	> 0.05 indicates close fit (MacCallum et al., 1996)	1.000	Good (close fit not rejected)
GFI	$\geq 0.90$ (Hair et al., 2010)	0.862	Marginally acceptable for complex models
AGFI	$\geq 0.90$ preferred; $\geq 0.85$ acceptable in complex models (Hair et al., 2010)	0.848	Marginally acceptable

#### **4.6 Structural Model Analysis**

In the present study, before performing the mediational analysis, the model fit indices were examined for all the measurements scale using AMOS (see Table 4.9). The Chi-square statistic was significant ( $\chi^2 = 2496.789$ ,  $df = 1249$ ,  $p < .001$ ), which is expected given the sample size ( $n = 600$ ). The chi-square test revealed that the model did not fit the current data adequately. Nonetheless, Kline (2011) noted that the chi-square test is influenced by sample size, and the significance of the test alone should not lead to the dismissal of a model. Kline proposed using the ratio of the chi-square value to the degrees of freedom ( $\chi^2/df$ ) as an additional fit index. A model is considered acceptable when this ratio falls between 2 and 3 (Woldgabreal et al., 2016). According to this standard, the initial model for this research was deemed acceptable, as the  $\chi^2$  value of 2496.789 was less than three times the degrees of freedom, which was 1249. However, the Tucker-Lewis Index (TLI) = 0.907 and the Comparative Fit Index (CFI) = 0.913 exceeded the recommended threshold of 0.90, indicating a good model fit. Additionally, the Root Mean Square Error of Approximation (RMSEA) = 0.041 (90% CI: 0.039 – 0.043) was well below the acceptable cut-off of 0.05, suggesting excellent model fit (Hu & Bentler, 1999). Subsequently, several mediational analyses were conducted. The results of these mediational analyses are illustrated in Figure 4.2, Table 4.10, and 4.11.

#### **Direct Effects of Study Variables (SEM Analysis)**

Table 4.10 presents the direct effects among the study variables, analyzed using Structural Equation Modeling (SEM). The findings indicate that Dispositional Mindfulness has a significant positive effect on Cognitive Reappraisal ( $\beta = 0.204$ ,  $p = .005$ ) and Self-Compassion ( $\beta = 0.480$ ,  $p < .001$ ), while it shows a significant negative effect on Expressive Suppression ( $\beta = -0.323$ ,  $p < .001$ ). Further, Cognitive Reappraisal positively predicts Self-Compassion ( $\beta = 0.438$ ,  $p < .001$ ), whereas Expressive Suppression has a negative effect on Self-Compassion

( $\beta = -0.203, p = .001$ ). Self-Compassion is also a significant positive predictor of both Coping Competence (CC) ( $\beta = 0.637, p < .001$ ) and Prosocial Behaviour ( $\beta = 0.313, p < .001$ ). In the final stage of the model, Well-Being is significantly influenced by Self-Compassion ( $\beta = 0.637, p < .001$ ) and Prosocial Behaviour ( $\beta = 0.285, p < .001$ ). However, the path from Coping Competence to Well-Being was not statistically significant ( $\beta = 0.077, p = .200$ ), suggesting that Coping Competence may not directly influence well-being in the presence of other mediating variables.

**Table 4.10 || The direct effect of study variables**

Parameter			Estimate	Lower	Upper	P
<b>CR</b>	<---	DM	.204	.066	.333	.005
<b>ES</b>	<---	DM	-.323	-.447	-.195	.000
<b>SC</b>	<---	CR	.438	.323	.556	.000
<b>SC</b>	<---	ES	-.203	-.317	-.081	.001
<b>SC</b>	<---	DM	.480	.357	.602	.000
<b>CC</b>	<---	SC	.637	.512	.729	.000
<b>PB</b>	<---	SC	.313	.215	.407	.000
<b>SWB</b>	<---	CC	.077	-.044	.172	.200
<b>SWB</b>	<---	PB	.285	.213	.357	.000
<b>SWB</b>	<---	SC	.637	.533	.748	.000

Note: SWB = Subjective Well-Being, DM = Dispositional Mindfulness, SC = Self-Compassion, ES = Expressive Suppression, CR = Cognitive Reappraisal, CC = Coping Competence, PB = Prosocial Behaviour

**Table 4.11 || The indirect effect of study variables**

Parameter	Estimate	Lower	Upper	P
(DM - CR_ER - SC)	0.056	0.022	0.103	0.003
(DM - ES_ER - SC)	0.041	0.017	0.077	0.000
(SC - CC - SWB)	0.101	-0.057	0.228	0.172
(SC - PB - SWB)	0.183	0.110	0.286	0.000
(DM - SC - SWB)	0.393	0.263	0.562	0.000
(ES_ER - SC - PB)	-0.035	-0.061	-0.014	0.001
(CR_ER - SC - CC)	0.292	0.215	0.380	0.000
(CR_ER - SC - PB)	0.081	0.045	0.133	0.000
(ES_ER - SC - CC)	-0.126	-0.215	-0.049	0.001
(CR_ER - SC - SWB)	0.477	0.328	0.665	0.000
(ES_ER - SC - SWB)	-0.206	-0.351	-0.083	0.001

Note: SWB = Subjective Well-Being, DM = Dispositional Mindfulness, SC = Self-Compassion, ES = Expressive Suppression, CR = Cognitive Reappraisal, CC = Coping Competence, PB = Prosocial Behaviour

### **Mediating Role of Cognitive Reappraisal in the Relationship Between Dispositional Mindfulness and Self-Compassion**

The results of the mediation analysis indicated that Dispositional Mindfulness exerted a significant positive influence on Cognitive Reappraisal (CR\_ER) ( $\beta = 0.204$ ,  $p = .005$ ). This finding suggests that individuals who possess higher levels of mindfulness are more inclined to utilize cognitive reappraisal as a strategy for emotion regulation. Furthermore, Cognitive Reappraisal (CR\_ER) was found to be a significant predictor of Self-Compassion (SC) ( $\beta = 0.438$ ,  $p < .001$ ), implying that those who regularly engage in cognitive reappraisal tend to demonstrate elevated levels of self-compassion. The analysis also explored the indirect effects, revealing that the mediation effect of Cognitive Reappraisal (CR\_ER) in the association between Dispositional Mindfulness and Self-Compassion (SC) was significant ( $\beta = 0.056$ , 95%

CI [0.022, 0.103],  $p = .003$ ). This indicates that cognitive reappraisal serves as a partial mediator in this relationship. In addition, Dispositional Mindfulness was shown to have a direct and significant positive effect on Self-Compassion (SC) ( $\beta = 0.480$ ,  $p < .001$ ), suggesting that mindfulness is directly linked to increased self-compassion (refer to Tables 4.10 & 4.11).

### **Mediating Role of Expressive Suppression in the Relationship Between Dispositional Mindfulness and Self-Compassion**

The results of the mediation analysis indicated that Dispositional Mindfulness exerted a significant negative influence on Expressive Suppression (ES\_ER) ( $\beta = -0.323$ ,  $p < .001$ ), suggesting that individuals exhibiting higher levels of mindfulness are less inclined to employ expressive suppression as a strategy for emotion regulation. Furthermore, Expressive Suppression (ES\_ER) was found to significantly and negatively predict Self-Compassion (SC) ( $\beta = -0.203$ ,  $p = .001$ ), implying that those who often engage in emotional suppression are likely to experience lower levels of self-compassion. The analysis also explored the indirect effects, revealing that Expressive Suppression (ES\_ER) partially mediated the negative relationship between Dispositional Mindfulness and Self-Compassion (SC) ( $\beta = 0.041$ , 95% CI [0.017, 0.077],  $p < .001$ ), indicating that the use of expressive suppression diminishes the beneficial effect of mindfulness on self-compassion. In addition, Dispositional Mindfulness demonstrated a direct and significant positive effect on Self-Compassion (SC) ( $\beta = 0.480$ ,  $p < .001$ ), signifying that mindfulness is directly correlated with enhanced self-compassion (refer to Tables 4.10 & 4.11).

### **Mediating Role of Coping Competence in the Relationship Between Self-Compassion and Subjective Wellbeing**

The mediation analysis investigated the indirect influence of Self-Compassion (SC) on Well-being via Coping Competence. The findings revealed that Self-Compassion was a significant predictor of Coping Competence ( $\beta = 0.637, p < .001$ ), indicating that individuals with elevated levels of self-compassion are likely to possess enhanced coping skills. Conversely, Coping Competence did not serve as a significant predictor of Well-being ( $\beta = 0.077, p = .200$ ), suggesting that, in this model, coping competence alone may not have a substantial impact on well-being. Additionally, the indirect effect of Self-Compassion on Well-being through Coping Competence was found to be non-significant ( $\beta = 0.101, 95\% \text{ CI } [-0.057, 0.228], p = .172$ ), as the confidence interval encompassed zero, implying that Coping Competence does not act as a mediator in this relationship (refer to Table 4.10 & 4.11).

### **Mediating Role of Prosocial Behaviour in the Relationship Between Self-Compassion and Subjective Wellbeing**

Moreover, the research evaluated the indirect influence of Self-Compassion (SC) on Well-being via Prosocial Behaviour. The findings revealed that Self-Compassion was a significant predictor of Prosocial Behaviour ( $\beta = 0.313, p < .001$ ), implying that individuals with elevated levels of self-compassion are more likely to participate in prosocial activities. Furthermore, Prosocial Behaviour was found to be a significant predictor of Well-being ( $\beta = 0.285, p < .001$ ), suggesting that involvement in prosocial actions has a beneficial impact on overall well-being. Additionally, the indirect effect of Self-Compassion on Well-being through Prosocial Behaviour was found to be significant ( $\beta = 0.183, 95\% \text{ CI } [0.110, 0.286], p < .001$ ), as the confidence interval did not encompass zero, thereby confirming that Prosocial Behaviour partially mediates the connection between Self-Compassion and Well-being. Nevertheless, the

direct effect of Self-Compassion on Well-being remained significant ( $\beta = 0.637, p < .001, 95\%$  CI [0.533, 0.748]), indicating that while Prosocial Behaviour serves as a mediator, Self-Compassion also independently enhances Well-being (refer to Table 4.10 & 4.11).

### **Mediating Role of Self-Compassion in the Relationship Between Dispositional Mindfulness and Subjective Wellbeing**

The mediation analysis investigated the indirect influence of Dispositional Mindfulness (FFMQ) on Well-being via Self-Compassion (SC). The findings revealed that Dispositional Mindfulness was a significant predictor of Self-Compassion ( $\beta = 0.480, p < .001$ ), indicating that individuals who possess higher levels of mindfulness are likely to demonstrate increased self-compassion. Moreover, Self-Compassion was found to be a significant predictor of Well-being ( $\beta = 0.637, p < .001$ ), suggesting that elevated self-compassion positively impacts overall well-being. Additionally, the indirect effect of Dispositional Mindfulness on Well-being through Self-Compassion was significant ( $\beta = 0.393, 95\%$  CI [0.263, 0.562],  $p < .001$ ), as the confidence interval did not encompass zero, thereby affirming that Self-Compassion serves as a mediator in the relationship between Dispositional Mindfulness and Well-being. These results imply that individuals with heightened mindfulness levels tend to experience improved well-being, partly due to their increased self-compassion (refer to Table 4.10 & 4.11).

### **Mediating Role of Self-Compassion in the Relationship Between Expressive Suppression and Prosocial Behaviour**

The study investigated the mediating function of Self-Compassion within the context of the relationship between Expressive Suppression and Prosocial Behavior. The analysis revealed a significant indirect effect ( $\beta = -0.035, 95\%$  CI [-0.061, -0.014],  $p = .001$ ). This finding suggests that Self-Compassion serves as a partial mediator in the connection between Expressive

Suppression and Prosocial Behavior, where increased levels of Expressive Suppression correlate with diminished Self-Compassion, which subsequently leads to a reduction in Prosocial Behavior. Additionally, the confidence interval (95% CI) did not encompass zero, thereby affirming the significance of the mediation effect. Additionally, the direct effect of Expressive Suppression on Prosocial Behavior remained significant, as reported elsewhere in this section, indicating that while Self-Compassion partially mediates this relationship, Expressive Suppression also has a direct impact on Prosocial Behavior (see Table 4.10 & 4.11).

### **Mediating Role of Self-Compassion in the Relationship Between Cognitive Reappraisal and Coping Competence**

The analysis indicated a notable indirect influence of Cognitive Reappraisal on Coping Competence via Self-Compassion ( $\beta = 0.292$ , 95% CI [0.215, 0.380],  $p < .001$ ). This outcome implies that individuals who practice Cognitive Reappraisal are likely to exhibit elevated levels of Self-Compassion, which subsequently improves their Coping Competence. Moreover, since the 95% confidence interval does not encompass zero, the mediating role of Self-Compassion in this association is statistically significant. Furthermore, as previously noted in this section, the direct impact of Self-Compassion on Coping Competence was also determined to be significant (refer to Table 4.10 & 4.11).

### **Mediating Role of Self-Compassion in the Relationship Between Cognitive Reappraisal and Prosocial Behavior**

The findings revealed a notable indirect influence of Cognitive Reappraisal on Prosocial Behavior via Self-Compassion ( $\beta = 0.081$ , 95% CI [0.045, 0.133],  $p < .001$ ). This implies that individuals who employ Cognitive Reappraisal as a strategy for emotion regulation are likely to exhibit elevated levels of Self-Compassion, which in turn encourages enhanced Prosocial

Behavior. Given that the 95% confidence interval does not encompass zero, the mediating function of Self-Compassion in this context is statistically significant. Additionally, as emphasized in other parts of this section, the direct impact of Self-Compassion on Prosocial Behavior was also determined to be significant, thereby underscoring its crucial role in fostering prosocial behaviors (refer to Table 4.10 & 4.11).

### **Mediating Role of Self-Compassion in the Relationship Between Expressive Suppression and Coping Competence**

The analysis demonstrated a notable indirect effect of Expressive Suppression on Coping Competence via Self-Compassion ( $\beta = -0.126$ , 95% CI [-0.215, -0.049],  $p = .001$ ). This finding suggests that a greater reliance on Expressive Suppression correlates with diminished levels of Self-Compassion, which subsequently results in a decrease in Coping Competence. The negative correlation implies that individuals who tend to suppress their emotional expressions may find it challenging to cultivate self-compassion, thereby impairing their capacity to cope effectively with difficulties. Given that the 95% confidence interval does not encompass zero, the mediating function of Self-Compassion in this context is statistically significant. Furthermore, as highlighted in other parts of this section, the direct impact of Self-Compassion on Coping Competence was also identified as significant, underscoring its essential role in fostering adaptive coping mechanisms (refer to Table 4.10 & 4.11).

### **Mediating Role of Self-Compassion in the Relationship Between Cognitive Reappraisal and Well-Being**

The results revealed a notable indirect influence of Cognitive Reappraisal on Well-Being via Self-Compassion ( $\beta = 0.477$ , 95% CI [0.328, 0.665],  $p = .000$ ). This implies that individuals who practice Cognitive Reappraisal tend to exhibit elevated levels of Self-Compassion, which

subsequently improves their overall Well-Being. The 95% confidence interval excluded zero, thereby affirming the statistical significance of this mediational relationship. Additionally, as elaborated in other parts of this section, the direct impact of Self-Compassion on Well-Being was also found to be significant, underscoring its essential function in fostering psychological well-being (refer to Table 4.10 & 4.11).

### **Mediating Role of Self-Compassion in the Relationship Between Expressive Suppression and Well-Being**

The analysis indicated a notable indirect effect of Expressive Suppression on Well-Being via Self-Compassion ( $\beta = -0.206$ , 95% CI [-0.351, -0.083],  $p = .001$ ). This result implies that individuals who practice higher levels of Expressive Suppression are likely to exhibit lower levels of Self-Compassion, which subsequently detrimentally affects their overall Well-Being. The 95% confidence interval did not encompass zero, thereby affirming the significance of this mediation effect. Furthermore, as previously noted in this section, the direct effect of Self-Compassion on Well-Being was also significant, which further highlights the crucial role of Self-Compassion in promoting psychological well-being (refer to Table 4.10 & 4.11).

# **CHAPTER-V**

## **DISCUSSION**

## Discussion

The current research was carried out in two separate phases, with the primary objective of exploring the connections between dispositional mindfulness and well-being in emerging adults in India. In particular, the study focused on the mediating effects of emotion regulation strategies, self-compassion, coping competence, and prosocial behavior, employing the PERMA model of well-being as the main outcome measure. The first phase involved a pilot study, which was conducted to evaluate the feasibility, reliability, and clarity of the instruments used to measure the psychological constructs. This phase also aimed to identify potential methodological or procedural issues in advance of the main study, thereby ensuring the appropriateness and cultural relevance of the tools within the Indian context. The second phase comprised the main study, which addressed three core objectives using both Pearson correlation coefficients and structural equation modeling (SEM). The findings revealed that nine out of ten direct pathways and ten out of eleven indirect pathways within the proposed model were statistically significant, supporting the hypothesized relationships among the study variables and providing robust evidence for the conceptual framework.

### *5.1 Objective - 1*

*To investigate how dispositional mindfulness, self-compassion, emotion regulation, coping competence, prosocial behaviour, and well-being are interrelated among emerging adulthood.*

The first objective of the study was analysed through **Pearson correlation analysis** at a significance level of 0.05. The results indicated a notable connection between dispositional mindfulness, self-compassion, emotion regulation, coping competence, prosocial behavior, and

well-being during emerging adulthood. These results align with the current literature. The identified link between dispositional mindfulness and self-compassion is theoretically supported by various essential psychological mechanisms and corroborated by an expanding collection of empirical studies (Easdale-Cheele et al., 2024; English et al., 2013; Frederickson et al., 2018; Scafuto et al., 2024). Individuals who are more mindful in their day-to-day experiences are also likely to treat themselves with greater kindness, understanding, and non-judgmental awareness, particularly during times of distress or failure. Dispositional mindfulness may act as a fundamental skill that allows individuals to enhance their awareness of internal experiences without resorting to harsh self-criticism, thereby nurturing a compassionate attitude towards themselves. A significant positive correlation has been observed between dispositional mindfulness and self-compassion, posing mindfulness as an impetus for self-reflection (Murfield et al., 2020; Zhang & Shen, 2023; Hwang et al., 2019). Mindfulness enables individuals to detach from stressful evaluations and expand their focus, facilitating a reappraisal of life situations (Scafuto et al., 2024). By observing thoughts and emotions without judgment, responding to oneself with kindness and understanding becomes imperative (Barnard & Curry, 2011). This non-judgmental awareness fosters a secure environment for acknowledging personal challenges, which is a vital step in developing self-compassion (Neff, 2003). Rather than engaging in harsh self-judgment, self-compassion promotes understanding and acceptance of one's imperfections and limitations as integral aspects of the human experience (Lathren et al., 2021). This entails acknowledging that all individuals face difficulties, challenges, and negative emotions (Shahin et al., 2021). The recognition of shared experiences alleviates feelings of isolation and cultivates a sense of connection with others (Hagerman et al., 2020). The relationship between mindfulness and self-compassion is further corroborated by research showing that mindfulness is linked to depressive symptoms through reduced rumination and elevated self-compassion (Svendsen et

al., 2016). The practice of mindfulness enhances emotional regulation by diminishing expressive suppression (Scafuto et al., 2024). This allows for the identification of values and clarification of goals (Prakash et al., 2014). Self-compassion can foster resilience when facing adversity (Mohebi et al., 2020). Mindfulness and self-compassion are linked to reduced stress, and improved emotional regulation, indicating their synergistic effects in promoting mental health (Tekin et al., 2025). At the time of the crisis, high self-compassion enables individuals to reflect on the situation in a more meaningful way, thus reducing self-criticism (Stutts, 2022). Furthermore, interventions that integrate mindfulness and self-compassion practices have demonstrated significant improvements in various psychological outcomes, suggesting that these two constructs work in tandem to enhance well-being.

The complex relationship between dispositional mindfulness and emotion regulation strategies constitutes an emerging area of research within psychological science, necessitating a thorough examination of its theoretical foundations and empirical support (Scafuto et al., 2024). This growing interest arises from the recognition that challenges in emotion regulation are associated with the onset and persistence of various types of psychopathology (Gross & Muñoz, 1995). Dispositional mindfulness may affect the choice and application of emotion regulation strategies, potentially resulting in more adaptable and flexible emotional responses (Torrence & Connelly, 2019). The dynamics between mindfulness and emotion regulation strategies continue to be a topic of active discussion among scholars (Scafuto et al., 2024). Some researchers propose a top-down model, indicating that mindfulness functions as a higher-order cognitive mechanism that influences emotional responses (Grecucci et al., 2015; Lutz et al., 2013). In contrast, others support a bottom-up viewpoint, suggesting that mindfulness enhances emotional awareness and acceptance, which in turn affects subsequent regulatory mechanisms. A higher level of dispositional mindfulness has been linked with the ability to restructure thought processes. Mindfulness may allow individuals to perceive their thoughts

and emotions with enhanced objectivity, thereby creating opportunities for cognitive restructuring and a more balanced viewpoint. The practice of mindfulness may promote the acceptance of emotional experiences without judgment, thereby diminishing the inclination to suppress or evade undesirable emotions (Clen et al., 2013). This acceptance-oriented methodology may result in a reduction of emotional reactivity and an increased readiness to confront challenging emotions in a constructive way (Scafuto et al., 2024). This mindful approach to emotions may indirectly promote the adoption of adaptive emotion regulation techniques. Additionally, mindfulness may improve the capacity to comprehend one's emotions, thereby facilitating more effective emotion regulation, leading to adaptive coping mechanisms and enhanced resilience when faced with stressful circumstances (McLaughlin et al., 2011; Scafuto et al., 2024).

The ability to acknowledge oneself without judgment, which is a fundamental aspect of mindfulness, enables a more objective evaluation of stressors and diminishes the likelihood of impulsive reactions or the use of maladaptive coping strategies (Sünbül & Özcan, 2022). Mindfulness promotes a broader perspective on stressors, enabling individuals to identify a wider range of potential coping strategies and select the most appropriate course of action. Mindfulness could lead to improved coping abilities by improving one's self-regulation (Cao et al., 2023). Coping insights can potentially strengthen resilient capacities, enabling a guided exploration of coping insight during future research (Falon et al., 2021). In effect, the practice of mindfulness could function as an intervention that nurtures resilience, which in turn, promotes constructive coping mechanisms when dealing with demanding events. The relationship between mindfulness and coping has theoretical underpinnings rooted in stress and coping theories. Furthermore, mindfulness has been linked to improved emotional regulation, which plays a crucial role in coping effectiveness. Mindfulness training has been shown to reduce rumination, a maladaptive coping strategy involving repetitive negative thinking, and

to promote cognitive reappraisal, a more adaptive strategy entailing restructuring of negative thoughts in a more meaningful way (Scafuto et al., 2024). Mindfulness interventions have demonstrated effectiveness in improving various health-related conditions, including depression and pain, suggesting that mindfulness can promote constructive responses to challenging situations (Rupprecht et al., 2019).

A positive association has been observed between dispositional mindfulness and prosocial behaviour. Understanding the mechanisms that link mindfulness to prosocial actions is crucial for designing interventions that promote compassion, altruism, and cooperation in various contexts (Busching & Krahe, 2020). The relationship between dispositional mindfulness and prosocial behaviour can be due to the fact that mindfulness enables individuals to observe their emotions without being overwhelmed by them, allowing for more thoughtful and compassionate reactions to the needs of others (Kim et al., 2022). Furthermore, mindful individuals exhibit greater empathic concern, leading to increased helping behavior towards those in distress (Berry et al., 2018). Dispositional mindfulness extends beyond mere symptom management, influencing emotional and cognitive well-being, physical health, immune function, and overall quality of life, reflecting a shift towards holistic well-being (Prakash et al., 2014). The ability to manage negative emotions effectively is essential for engaging in prosocial behaviors that often require self-sacrifice and a willingness to confront challenging situations (Scafuto et al., 2024). Mindfulness may promote evaluative processes, allowing individuals to reframe the meaning of experiences, which could lead to desired outcomes (Scafuto et al., 2024).

The proposed relationship between dispositional mindfulness and well-being is multifaceted, resting on several key theoretical frameworks. Mindfulness is thought to promote well-being by fostering a broadened attentional scope (Scafuto et al., 2024). This expanded awareness allows individuals to perceive a wider range of experiences, including both positive and

negative stimuli, without becoming overwhelmed or reactive. Furthermore, mindfulness facilitates the development of meta-awareness, enabling individuals to observe their own thoughts and emotions as transient mental events, rather than identifying with them as fixed aspects of the self (Baer et al., 2006). This meta-cognitive awareness is crucial for disrupting maladaptive thought patterns, such as rumination and worry, which are known to contribute to psychological distress. The cultivation of mindfulness is also associated with enhanced emotional regulation abilities. By observing emotions with a sense of equanimity and without judgment, individuals can acquire the ability to adjust their emotional reactions in constructive manners, thereby diminishing both the intensity and duration of adverse emotional experiences. Furthermore, mindfulness is thought to enhance self-compassion, nurturing a feeling of kindness and acceptance towards oneself, especially during challenging times or moments of perceived inadequacy. This self-compassionate perspective serves as a protective factor against self-criticism and feelings of shame, leading to improved emotional resilience and overall well-being. Additionally, engaging in mindfulness practices has been associated with heightened cognitive flexibility, allowing individuals to adapt more easily to evolving situations and to tackle challenges with a more open and innovative mindset. The capacity to manage emotions is a crucial element that underpins the impact of mindfulness on well-being (Scafuto et al., 2024).

## **5.2 Objective – 2**

*To examine the interplay and influence of dispositional mindfulness, self-compassion, emotional regulation, coping competence, prosocial behavior, and well-being among emerging adults within a structural model*

The second objective was to study the interplay and influence of dispositional mindfulness, self-compassion, emotion regulation, coping competence, prosocial behaviour, and well-being

among emerging adults within a structural model. Structural Equation Modeling (SEM) was used to test this objective. Of these, nine hypotheses were found to be statistically significant, indicating strong support for the proposed direct relationships between the variables. The study found that cognitive reappraisal was significantly positively predicted by dispositional mindfulness, indicating that elevated levels of mindfulness is linked with effective ways of managing emotions by reframing stressful or negative experiences in a constructive manner. Thereby supporting the Hypotheses 1, which proposed that cognitive reappraisal would be positively predicted by dispositional mindfulness. This finding is logical, as mindfulness fosters present-moment awareness and a non-judgmental attitude, which creates psychological space for individuals to observe their emotions without becoming overwhelmed or reactive. Such awareness allows for a deliberate shift in perspective—central to the process of cognitive reappraisal (Garland et al., 2011). The ability of restructuring thought processes within mindful individuals are a byproduct of enhanced metacognitive awareness, which is the awareness of one's own cognitive processes. The capacity of mindfulness to facilitate cognitive reappraisal stems from its emphasis on present moment awareness and non-reactivity, which allows oneself to have vigilance on their cognition and affective processes as well as impulsive reactions without getting critical to them (Scafuto et al., 2024). This detached observation provides a crucial space for individuals to evaluate and reframe their experiences in a more adaptive manner (Scafuto et al., 2024). By cultivating a heightened awareness of internal states and external stimuli, dispositional mindfulness equips individuals with the cognitive flexibility necessary to engage in effective cognitive reappraisal (Wang & Yin, 2023). Metacognitive awareness allows individuals to recognize and understand their thought patterns and emotional reactions, creating an opportunity to intervene and modify maladaptive cognitive processes. This metacognitive insight is essential for cognitive reappraisal, as it enables individuals to identify and challenge negative or distorted thought patterns that contribute to emotional

distress. Mindfulness practices, such as meditation, encourage individuals to observe their thoughts as transient mental events rather than fixed representations of reality. This decentering from thoughts reduces the tendency to identify with and react automatically to negative thoughts, thereby creating space for alternative interpretations and appraisals. The self-regulatory information processing theory of emotional disorder posits that mindfulness cultivates a metacognitive state that facilitates change in underlying pathological processes (Wells, 2005). Evidence from neuroimaging studies has found the association between mindfulness practices and increased activation in brain regions involved in cognitive control and emotion regulation, such as the prefrontal cortex (Schonert-Reichl et al., 2014). These findings suggest that mindfulness may enhance the neural circuitry underlying cognitive reappraisal, leading to improved ability to regulate emotions effectively. The cultivation of mindfulness involves training in focused attention and executive function, which allows for mindful awareness to be brought to daily activities (Schonert-Reichl et al., 2014).

Further, expressive suppression was significantly negatively predicted by dispositional mindfulness. This suggests that individuals with higher levels of mindfulness are less likely to regulate their emotions by suppressing their outward emotional expressions. Thereby supporting hypothesis 2, which proposed that expressive suppression will be negatively predicted by dispositional mindfulness (Scafuto et al., 2024). It has been traditionally believed that emotion regulation is a conscious effort to suppress or change emotions (Leersnyder et al., 2013). Individuals high in dispositional mindfulness are more likely to observe their emotions without attempting to control or alter them, thus diminishing the perceived need to suppress emotional expressions. The basic idea of mindfulness revolves around the concept of embodiment. This might be because body awareness is crucial for embodiment and psychotherapeutic research (Sünbül & Özcan, 2022). Furthermore, research indicates that mindfulness training enhances emotional awareness and facilitates the identification of

emotional triggers (Lutz et al., 2013). This heightened awareness may enable individuals to employ more adaptive emotion regulation strategies towards a meaningful interpretation of emotion-provoking events. Mindfulness-Based Interventions can enable one to focus their attention, with regular practice (Coholic et al., 2020). In contrast, expressive suppression, by focusing on inhibiting emotional expression, may actually interfere with emotional processing and lead to increased physiological arousal and negative emotional experiences (Schonert-Reichl et al., 2014).

Self-compassion has been positively predicted by cognitive reappraisal, which indicates that individuals who frequently engage in adaptive reappraisal strategies are more likely to treat themselves with kindness, understanding, and acceptance during difficult situations. This relationship is logical because cognitive reappraisal involves rethinking negative experiences in a more balanced or constructive way, which aligns closely with self-compassion (Neff, 2003), thereby providing support to Hypothesis 3, which proposed that self-compassion will be positively predicted by cognitive reappraisal. The interplay between cognitive reappraisal and self-compassion represents a burgeoning area of interest within psychological research, particularly concerning the mechanisms by which individuals navigate emotional experiences and cultivate well-being. The capacity to reframe negative experiences and modify one's emotional responses is central to adapting to life's inevitable challenges. The rationale behind the hypothesis that cognitive reappraisal positively predicts self-compassion lies in their shared cognitive and affective mechanisms. Cognitive reappraisal often entails reframing negative or threatening events, thereby reducing emotional arousal (Scafuto et al., 2024). Individuals high in self-compassion tend to approach their own suffering with kindness and understanding, affirming that imperfections are a basic block of the human experience (Stutts, 2022). When individuals engage in cognitive reappraisal, they are, in essence, practicing a form of self-directed compassion by altering their perspectives to alleviate emotional distress and promote

well-being. The ability to reappraise situations adaptively leads to a greater sense of balance and acceptance, which, in turn, may foster self-compassion by reducing self-judgment and promoting a more balanced view of oneself in the face of adversity (Scafuto et al., 2024). By employing cognitive reappraisal, individuals may become more attuned to the nuances of their experiences, which allows them to recognize their own resilience and capacity for growth, which further cultivates self-compassion and reinforces a positive cycle of emotional regulation and self-acceptance. Given that cognitive reappraisal allows for a shift in the viewpoint of an individual, further enabling one to take cognizance of their situation in a broader way (Torrence & Connelly, 2019). Exploring the cognitive and emotional mechanisms that link cognitive reappraisal to self-compassion is of paramount importance, as it offers insights into interventions designed for promoting psychological resilience and emotional well-being (Wu et al., 2013). This paper posits that cognitive reappraisal positively predicts self-compassion, supported by theoretical underpinnings and empirical evidence, because cognitive reappraisal reframes situations into something constructive while self-compassion enhances positive self-perception (Mohebi et al., 2020).

The result showed that self-compassion was negatively predicted by expressive suppression, which indicates that individuals who habitually inhibit or hide their emotional expressions are less likely to extend kindness and understanding toward themselves in moments of difficulty, thereby supporting the Hypotheses 4, which proposed that self-compassion will be negatively predicted by expressive suppression. Understanding the interplay between self-compassion and expressive suppression is critical because these constructs represent fundamentally different approaches to managing emotions and self-perception. The hypothesis that self-compassion will be negatively predicted by expressive suppression stems from the contrasting nature of these two constructs: self-compassion entails an open and accepting stance toward one's emotions and experiences, while expressive suppression involves actively concealing and

inhibiting emotional expression (Scafuto et al., 2024). The tendency to suppress emotions may undermine the development and manifestation of self-compassion by creating a barrier to authentic self-expression and self-acceptance. Individuals who habitually suppress their emotions may struggle to acknowledge and validate their own suffering, hindering their ability to extend kindness and understanding towards themselves. By exploring the theoretical underpinnings and empirical evidence linking these constructs, we can gain valuable insights into the ways in which emotion regulation strategies impact self-perception and psychological health. Furthermore, self-compassion involves recognizing personal problems and misfortunes as part of the common human experience, fostering a sense of interconnectedness and reducing feelings of isolation during difficult times, and also entails maintaining a balanced and open perspective towards one's problems, avoiding both over-identification and disengagement. Expressive suppression may conflict with the core components of self-compassion, potentially diminishing one's capacity to practice self-kindness and acceptance (Shahin et al., 2021). For example, when a student's grant submission is rejected, individuals with low self-compassion are more likely to engage in self-critical thoughts, attributing the outcome to personal shortcomings and perceiving the rejection as a reflection of their overall inadequacy. In contrast, students with high levels of self-compassion are more inclined to adopt a balanced perspective, recognizing the competitive nature of the process and affirming that they performed to the best of their ability given the available resources (Stutts, 2022). The tendency to suppress emotions may hinder the recognition of common humanity by creating a sense of distance and disconnection from others' experiences.

Furthermore, the findings noted that self-compassion was positively predicted by dispositional mindfulness, which indicates that individuals who are more mindful demonstrated greater self-compassion, thereby supporting Hypothesis 5, which proposed that self-compassion would be positively predicted by dispositional mindfulness. Mindful practices create a fertile ground for

self-compassion to flourish. Empirical evidence suggests a positive association between mindfulness and self-compassion. Studies have revealed that individuals with higher levels of dispositional mindfulness tend to exhibit greater self-compassion. Mindful individuals tend to have more capacity to reduce suffering and peacefully resolve conflicts in their lives (Tobias et al., 2022). When individuals are more attuned to their present experiences and less reactive to their thoughts and emotions, they are better positioned to respond to themselves with compassion. Mindfulness helps create a safe psychological space for self-compassion to arise by fostering a non-judgmental awareness of one's suffering (Coholic et al., 2020; Neff, 2009). Self-compassion promotes healthier responses to stress and offers emotional resilience, contributing to better psychological well-being. Mindfulness, when cultivated, leads to a shift in perspective, facilitating self-regulation, values clarification, and cognitive, emotional, and behavioral flexibility. By observing thoughts and emotions without judgment, individuals are better equipped to acknowledge their difficulties with kindness and understanding. This shift in perspective allows individuals to recognize that suffering is a universal human experience, fostering a sense of common humanity that is vital for self-compassion.

The findings noted that coping competence was positively predicted by self-compassion, which indicates that individuals who treat themselves with kindness, acknowledge their struggles as part of shared human experience, and remain mindful of their emotions are more likely to feel capable of effectively managing stress and adversity, thereby supporting the Hypotheses 6, which proposed that coping competence will be positively predicted by self-compassion. The rationale for positing a positive relationship between self-compassion and coping competence rests on the premise that self-compassion facilitates a more adaptive and flexible approach to stress. Individuals who are self-compassionate are more likely to engage in constructive self-reflection, allowing them to gain insights into their coping patterns and identify areas for improvement (Falon et al., 2021). Self-compassion acts as a protective factor reducing the

detrimental outcomes of self-criticism, which can impair coping efforts and exacerbate feelings of distress. Self-compassionate individuals demonstrate a greater willingness to acknowledge their mistakes and learn from them, fostering a growth-oriented mindset that promotes adaptive coping (Neff, 2009). They can also acknowledge their failures with a non-judgemental attitude (Khalili et al., 2021). Rather than berating themselves, they can objectively analyze their actions and identify areas for improvement (Stutts, 2022). Furthermore, self-compassion encourages individuals to seek support from others when needed, facilitating access to valuable resources and perspectives that can enhance coping effectiveness. Self-compassion has also been shown to promote prosocial behavior, such as helping others, further enhancing coping competence. Professionals who are more self-compassionate have fewer symptoms of compassion fatigue (Tekin et al., 2025; Liu et al., 2025). Research suggests that self-compassion promotes health-promoting behaviors related to eating, exercise, sleep, and stress management (Marina, 2017). Self-esteem has been linked with predicting self-compassion, leading to lower tendencies like self-blaming, sense of inferiority, and inflated sense of superiority (Neff, 2003). Self-compassion can be cultivated through various interventions, including mindfulness-based programs and compassion-focused therapy, suggesting that coping competence can be enhanced by promoting self-compassionate attitudes and behaviors (Barnard & Curry, 2011; Chan et al., 2022).

The findings noted that prosocial behaviour was positively predicted by self-compassion, which indicated that individuals who are kind and understanding toward themselves often empathize with others, thereby supporting Hypothesis 7, which proposed that prosocial behaviour will be positively predicted by self-compassion. The existing literature offers a compelling case for the positive association between self-compassion and prosocial behavior. Research suggests that self-compassion is associated with increased empathy, a critical precursor to prosocial behavior (Chan et al., 2022). It is also linked with a lower level of

negative mental health outcomes, which can often inhibit one's ability to perform altruistic acts (Scafuto et al., 2024). By mitigating self-critical rumination, self-compassion allows individuals to adopt a more balanced perspective, fostering resilience and the ability to learn from failures (Stutts, 2022; Neff & Dahm, 2015). Studies have shown that compassion meditation, including loving-kindness meditation, can enhance pro-social behaviour (Zheng et al., 2023). Furthermore, in organizational settings, self-compassion has been proven to be effective in stress management and self-regulation tendencies (Liu et al., 2025). By cultivating a classroom environment that embraces self-compassion, educators can equip students with the self-care skills necessary for sustained success beyond graduation (Coaston & Lawrence, 2019). The link between altruism and self-help behaviour is rooted in the idea that individuals who treat themselves with kindness and understanding are more likely to extend that same compassion to others (Mohebi et al., 2020; Shahin et al., 2021). When individuals encounter their own imperfections and struggles with self-compassion, they develop a greater capacity to recognize and understand the suffering of others, which in turn motivates prosocial actions (Tekin et al., 2025). Self-compassion fosters emotional resilience and promotes mental health and well-being, and buffers against psychological distress in the face of difficulty (Hagerman et al., 2020; Marina, 2017). This creates a positive feedback loop where self-compassionate individuals are better equipped to cope with their own challenges, freeing up mental and emotional resources to assist others. Self-compassion helps people to accept their imperfections and learn from them, rather than becoming discouraged and withdrawn.

The present study hypothesized that well-being would be positively predicted by coping competence; however, the finding was not statistically significant, which indicates that the perceived ability to cope with stress may not directly contribute to the overall well-being of emerging adults in the sample, at least not in a linear or isolated manner, thereby not supporting the Hypotheses 8, which proposed that well-being will be positively predicted by coping

competence. The assertion that there is no relationship between well-being and coping competence presents a compelling counterpoint to conventional understanding in psychological research. While a vast body of literature posits a positive correlation between these constructs, suggesting that individuals with higher well-being exhibit greater coping competence, and vice versa, it is crucial to explore the theoretical and empirical grounds for questioning this relationship (Bijttebier & Vertommen, 1999). The transactional model of stress highlights the bidirectional pathway between the individual and their surroundings (Freire et al., 2016). Therefore, the stress response depends on coping, which is a modulating variable (Freire et al., 2016). The exploration of a null relationship necessitates a critical examination of the assumptions underlying the presumed positive association, considering potential moderating and mediating factors that may attenuate or negate the relationship between well-being and coping competence. One potential argument for the absence of a direct relationship lies in the possibility that well-being and coping competence operate independently, influenced by distinct sets of factors. Individuals might possess innate or acquired traits that predispose them to higher levels of well-being, irrespective of their coping abilities (Heffer & Willoughby, 2017). Conversely, coping competence may be primarily determined by environmental factors, such as access to resources and social support, rather than being directly linked to an individual's subjective experience of well-being. The underlying mechanisms through which coping strategies confer benefits are not always clearly defined (Amirkhan & Greaves, 2003). This independence could arise from coping mechanisms representing successful adaptation to adverse situations (Wadsworth, 2015). This further suggests that the effectiveness of coping strategies might not always translate into an increase in subjective well-being, especially if the individual's baseline level of well-being is already high or if the coping strategies employed are not in accordance with subjective beliefs and desired outcomes.

Well-being was positively predicted by prosocial behaviour in the current study, which indicated that individuals who engage in acts that benefit others—such as helping, sharing, and showing empathy—enhance overall well-being, thereby supporting Hypothesis 9, which proposed that well-being will be positively predicted by prosocial behaviour. The concept of altruism has garnered increasing attention in psychological research, with studies suggesting a positive correlation between engaging in prosocial acts and experiencing enhanced levels of well-being (Carlo & Pierotti, 2020). It has been established that prosocial behaviors are hallmarks of social competence, with these behaviors correlating positively with social adjustment later in life (Etkin et al., 2010). Early adolescence is a particularly sensitive period for developing social-emotional skills and positive behaviors, as it marks a critical transition from childhood, making it essential to understand how prosocial behavior can promote health-related quality of life (Oberle et al., 2022). The rationale that proposes a positive association between prosocial behavior and well-being is rooted in several theoretical perspectives. The broaden-and-build theory of positive emotions suggests that positive emotions, which are often elicited by engaging in prosocial behavior, can promote the recovery of an individual's psychological resources and lead to the construction of lasting personal resources such as resilience (Tintori et al., 2021). Humans across all age demographics seek to achieve psychological well-being throughout their lives, and adolescence is no exception (Megawati & Herdiyanto, 2016). Additionally, engaging in prosocial behavior can enhance an individual's sense of social support and confidence, further contributing to their well-being (Li & Hu, 2023). From an evolutionary standpoint, prosocial behavior may have evolved because it promotes group cohesion and cooperation, increasing the likelihood of survival and reproduction. Prosocial behavior is linked to improved peer relationships and acceptance, reduced loneliness, and better school performance (Martins et al., 2022). Furthermore, prosocial behavior is viewed as a cornerstone of positive youth development, encompassing

skills and attributes that contribute to success and satisfaction in various life domains (Law et al., 2012). The potential of prosocial behavior to buffer against the adverse effects of stress highlights its importance in promoting well-being, particularly in challenging circumstances (Scafuto et al., 2024). Finally, the result revealed that well-being was positively predicted by self-compassion, which indicates that individuals who treat themselves with kindness, recognize their struggles as an inevitable part of life, and respond to personal setbacks with mindfulness and acceptance, thereby supporting Hypothesis 10, which proposed that well-being will be positively predicted by self-compassion. In contemporary times, psychological well-being has received considerable focus, marking a shift towards constructs like self-compassion. Self-acceptance and gentleness towards oneself are a cornerstone of self-compassion, contrasting sharply with the punitive nature of self-criticism that often exacerbates emotional distress (Mohebi et al., 2020). Furthermore, self-compassion entails recognizing that suffering and imperfection are intrinsic aspects of living, fostering a sense of interconnectedness rather than isolation when facing personal challenges (Barnard & Curry, 2011). This recognition of shared human fallibility can be a powerful antidote to feelings of shame and inadequacy that often accompany negative experiences. In addition, mindfulness, as a component of self-compassion, encourages a balanced and non-judgmental awareness of one's thoughts and emotions, preventing over-identification with transient negative states. The present paper aims to explore the theoretical underpinnings of the role of self-compassion in the relationship between well-being and resilience. It was found that self-compassion acts as a buffer mechanism against negative psychological states by mitigating the impact of negative self-evaluations and promoting emotional resilience (Stutts, 2022). Self-acceptance is a key to deal without being overwhelmed with challenging times (Shahin et al., 2021). This self-compassionate stance facilitates a more balanced perspective, allowing individuals to acknowledge their imperfections without defining themselves solely by their shortcomings

(Neff, 2003). Self-compassion is related to health-conscious behaviours like adherence to a healthy lifestyle, sleep schedule, and management of stress, further contributing to their overall well-being (Marina, 2017). Indeed, research indicates a strong association between self-compassion and well-being, demonstrating that an optimistic attitude, interrelatedness, and elevated levels of happiness, as well as lower levels of negative mood, are the outcomes of self-compassion. Contrary to the common misconception that self-compassion may undermine motivation or lead to self-indulgence, it has been proven to facilitate personal growth and needed changes in one's life (Tekin et al., 2025).

### **5.3 Objective 3:**

***To identify the underlying pathways by examining the mediating roles of emotion regulation, coping competence, prosocial behavior, and self-compassion within the proposed structural model***

The final objective of the present study was to identify the underlying pathways by examining the mediating roles of emotion regulation, coping competence, prosocial behavior, and self-compassion within the proposed structural model. These pathways were studied using Structural Equation Modelling (SEM). Out of eleven hypotheses framed, ten hypotheses were found to be statistically significant, indicating strong support for the proposed indirect relationships between the variables. It was found that cognitive reappraisal significantly mediated the relationship between dispositional mindfulness and self-compassion, confirming the positive role of cognitive reappraisal strategies in promoting self-compassion, thus supporting Hypothesis 11, which proposed that self-compassion and cognitive reappraisal will mediate the relationship between dispositional mindfulness and self-compassion. It is plausible that cognitive reappraisal mediated the mechanism through which mindfulness promotes self-

compassion because dispositional mindfulness promotes non-judgmental awareness of thoughts and feelings, creating opportunities for individuals to evaluate their experiences with greater objectivity and compassion. Mindfulness is an active process of regulating attention to bring awareness to current experiences. This awareness can facilitate the recognition of maladaptive thought patterns and emotional responses, thereby creating a window for cognitive reappraisal to take place. By cultivating a non-judgmental stance toward one's experiences, mindfulness may reduce the tendency to engage in self-criticism and promote a more compassionate understanding of oneself (Dobkin & Monshat, 2020). A research study demonstrated that the cognitive reappraisal aspect of emotion regulation serves a beneficial mediating function between mindfulness and well-being by promoting enhanced well-being. The indirect effect observed was statistically significant. This finding elucidates the partial mediation role of emotion regulation, wherein the pathway from mindfulness to well-being diminishes in magnitude but remains non-zero upon the introduction of the mediator. This research underscores the significance of the cognitive reappraisal strategy within the context of emotion regulation as it pertains to the interplay between mindfulness and well-being. Additionally, the results offer insights into how the combined influence of mindfulness and emotion regulation may foster healthy adaptation and overall well-being (Padhy et al., 2022). Mindfulness meditation and training has therapeutic effects, can foster emotional and mental health, and can affect the structure of the brain (Guendelman et al., 2017). In light of evidence, mindfulness meditation can lead to better executive functioning and attention regulation abilities (Capurso et al., 2014). Research suggests a positive correlation between self-compassion and an individual's spiritual well-being, which can reduce drug cravings in people with substance use disorders (Shahin et al., 2021). Mindfulness enables individuals to detach from stress-inducing thoughts by broadening their perspective towards reconstructive processes (Scafuto et al., 2024). Cognitive reappraisal, also referred to as cognitive reframing,

involves changing the way one views events or situations (Wu et al., 2013). By reframing our thoughts, we can change our emotional experience, which, in turn, influences our behavior (Scafuto et al., 2024). Given that cognitive reappraisal targets evaluations and judgments of emotion-laden events, it appears to be a particularly functional emotion regulation strategy.

Further, the study found that expressive suppression significantly mediated the relationship between dispositional mindfulness and self-compassion, which indicated that a higher level of Dispositional mindfulness leads to lower expressive suppression, leading to greater self-compassion, thus supporting Hypothesis 12, which proposed that expressive suppression will mediate the relationship between dispositional mindfulness and self-compassion. Meta-analysis on these constructs suggests that cognitive reappraisal is associated with reduced anxiety and depression, while expressive suppression is linked to increased distress (Scafuto et al., 2024). Individuals who engage in mindfulness can intentionally respond to challenging situations and emotions, rather than reacting impulsively with maladaptive behaviors or negative interpretations (Coholic et al., 2020). Mindfulness may promote more adaptive emotion regulation by enhancing present moment awareness of emotional experiences and fostering a non-judgmental stance toward them (Eisenstadt et al., 2021). Mindfulness training programs such as Mindfulness-Based Stress Reduction have been implemented in workplaces across the country (Kachan et al., 2016). Self-compassion has been linked with the ability to accept oneself with one's flaws, and work on them towards modifying critical behaviors (Neff, 2009; Tekin et al., 2025). This may be because self-compassion encourages them to view failure and suffering as opportunities for growth (Mohebi et al., 2020).

The study also examined the mediating effect of coping competence in the relationship between self-compassion and well-being. However, the results indicated that coping competence did not significantly mediate this pathway, which suggests that self-compassion may affect well-being in emerging adults through other psychological mechanisms rather than through

perceived coping ability alone, thus not supporting Hypothesis 13. This finding is somewhat unexpected given the theoretical assumption that self-compassion enhances emotional regulation and resilience, which should logically translate into more effective coping and, in turn, greater well-being. This study results posits that coping competence does not mediate the relationship between self-compassion and well-being. This stance is grounded in the belief that self-compassion, as a fundamental orientation towards oneself, directly influences well-being by fostering emotional resilience and reducing the impact of self-criticism (Neff, 2003; Neff & Dahm, 2015). The capacity to treat oneself with kindness and understanding, particularly in the face of adversity, creates a buffer against negative emotions and promotes a sense of inner security that is not necessarily contingent upon one's perceived coping skills (Khalili et al., 2021). Individuals high in self-compassion tend to exhibit lower levels of rumination and self-blame, which are known to undermine well-being (Stutts, 2022). Self-compassionate individuals acknowledge that difficulties and negative emotions are part of the universal human experience (Shahin et al., 2021; Tekin et al., 2025). This recognition helps to normalize their own struggles and eliminates self-condemnation. Openness to present experiences enables individuals to accept negative emotional and cognitive experiences (Kotera et al., 2021). This acceptance allows individuals to distance themselves from the negative experience without avoidance. Instead, individuals are receptive to novel information, which allows for a reappraisal of life circumstances (Scafuto et al., 2024). When people encounter situations that hinder their basic psychological needs, practicing self-compassion can help fulfill those needs, reducing feelings of threat or distress (Wouters-Soomers et al., 2022). It has also been shown that self-compassion is linked to health promoting behaviors (Marina, 2017). The ability to healthily self-soothe is linked to the emotional integration, self-understanding and an overall healthy self (Wong, 2021). The potential lack of mediation by coping competence does not diminish the importance of coping strategies in general. Effective coping mechanisms are

undoubtedly essential for navigating life's challenges and maintaining psychological health. However, the argument here is that the direct impact of self-compassion on well-being is so profound that it overshadows the indirect effect that might be exerted through coping competence. Furthermore, the relationship between self-compassion and coping may be more complex than a simple mediator model suggests. It is possible that self-compassion influences the selection and utilization of coping strategies, rather than simply being mediated by them. The study also found that prosocial behaviour significantly mediated the relationship between self-compassion and well-being, thus supporting Hypothesis 14. The role of prosocial behavior brings out the importance of self-compassion in promoting well-being, indirectly through its influence on prosocial behavior. Higher levels of self-compassion have been linked to greater pro-social tendencies and less preoccupation with shortcomings and failures, and more attunement to the needs and suffering of others. Self-compassion fosters acknowledgement of imperfections, reducing the tendency toward self-criticism and rumination, which can be emotionally draining and limit their capacity to engage in prosocial behavior. It has been shown that prosocial behavior helps individuals maintain positive emotions, improve academic and professional performance, create good interpersonal relationships, enhance self-esteem and self-confidence, cultivate psychological qualities such as innovation, empathy, and sense of responsibility, reduce behavior problems, and become more resistant to stress (Ibáñez et al., 2023). Furthermore, motivating individuals to act in ways that alleviate suffering and promote well-being. Mindfulness meditation can promote prosocial responses in various interpersonal contexts (Zheng et al., 2023). Acts of kindness, generosity, and support not only improve the well-being of recipients but also contribute to the psychological health of the individuals performing these actions. The act of helping others has been associated with increased positive affect, reduced stress, and a greater sense of self-worth. It may promote social connectedness and help reduce anxiety, stress, and depression (Slavich et al., 2021). Moreover, prosocial

behavior acts as a protective shield against adversity, providing individuals with a sense of control and empowerment in challenging situations. From an evolutionary perspective, prosocial behavior may have conferred adaptive advantages to humans, as cooperation and mutual support within social groups enhance survival and reproductive success. This positive association may be attributed to the fact that self-compassion promotes adaptive coping mechanisms, allowing individuals to approach their shortcomings and failures with greater acceptance and understanding.

The findings highlight the mediating role of Self-Compassion in the relationship between Dispositional Mindfulness and Well-Being, thus supporting Hypothesis 15. Mindfulness may facilitate an individual's potential to lead a meaningful life devoid of distress (Scafuto et al., 2024). Specifically, an attentive presence to internal experiences may enable individuals to approach themselves with greater warmth and understanding, mitigating the detrimental effects of self-criticism and promoting a sense of self-worth. Furthermore, the recognition of shared human experiences, fostered by mindfulness, can reduce feelings of isolation and promote a sense of connection with others, contributing to enhanced well-being. Moreover, self-compassion may serve as a protective factor against the negative consequences of stress and adversity, mitigating the impact of challenging life events on psychological well-being. Individuals who approach themselves with compassion may be better equipped to cope with difficulties, regulate their emotions, and maintain a positive outlook, thereby enhancing their overall well-being (Svendsen et al., 2016). Additionally, mindfulness promotes self-regulation, cognitive flexibility, and emotional regulation, all of which are aspects that facilitate well-being. Mindfulness-based interventions have demonstrated effectiveness in improving well-being outcomes in school settings (Scafuto et al., 2024). Therefore, the capacity to manage one's emotions is also linked with the ability to maintain attention and self-awareness (Guendelman et al., 2017). By observing thoughts and feelings without judgment, individuals

high in dispositional mindfulness may foster a supportive inner dialogue (Neff, 2003). This non-judgmental awareness allows individuals to recognize their shared humanity, acknowledging that suffering and imperfection are intrinsic aspects of the human experience (Mohebi et al., 2020). Mindfulness-based interventions allow individuals to be non-judgmental towards themselves as well as situations (Montero-Marín et al., 2015), promoting focused attention and awareness of thought patterns, feelings, and bodily sensations (Coholic et al., 2020). The practice of mindfulness meditation has been shown to improve mental health across a variety of disorders (Wolkin, 2015).

The result highlights the mediating role of self-compassion in the relationship between expressive suppression and prosocial behaviour, thus supporting Hypothesis 16. This mediation model indicates that individuals who tend to suppress their emotions are less likely to engage in prosocial behaviours, but this negative association can be buffered through self-compassion. In other words, even if someone habitually suppresses emotional expression typically associated with emotional avoidance and interpersonal distancing, developing self-compassion may help counteract these effects by promoting greater emotional openness and empathy toward oneself and others. Studies have demonstrated that expressive suppression can lead to decreased rapport and increased negative feelings in both the suppressors and their interaction partners (Kühn et al., 2011). The act of suppressing emotions can make individuals appear less genuine and less approachable, hindering the development of close relationships (Yu et al., 2023). Furthermore, expressive suppression has been linked to reduced memory for the suppressed event and increased physiological arousal, suggesting that it requires significant cognitive and emotional resources. The energy expended in suppressing emotions may detract from cognitive resources available for other tasks, including social engagement and prosocial behavior. Rather than fixating on negative experiences, self-compassionate individuals acknowledge their suffering with non-judgment. Self-compassion stands in contrast to self-

criticism, which involves harsh judgment and condemnation of one's perceived flaws and inadequacies. For instance, students with elevated self-compassion find growth opportunities in the face of failure, while those with low self-compassion engage in self-blaming (Stutts, 2022). Moreover, self-compassion has been linked to greater emotional resilience in the face of traumatic events, such as natural disasters (Mohebi et al., 2020). Self-compassionate individuals also tend to exhibit more adaptive coping strategies, such as seeking social support and engaging in problem-focused coping, compared to those who are self-critical (Neff, 2009; Neff & Dahm, 2015).

As observed in the present study, self-compassion mediates the relationship between cognitive reappraisal and coping competence, thus providing support for Hypothesis 17. This mediation model suggests that the process of reframing negative situations in a more adaptive light is more likely to develop greater coping competence when they also possess higher levels of self-compassion. In essence, reappraisal facilitates a more balanced emotional outlook, which fosters a self-compassionate attitude; this compassionate self-view, in turn, enhances one's capability of stress management. The rationale for this finding from the recognition that stress and coping are universal experiences with profound implications for psychological well-being (Parkes & Hughes, 2020). When stress is not effectively managed, it can trigger negative emotional reactions that impair well-being (Extremera & Rey, 2015). A person's cognitive interpretation of a stressor is critical because it differs from person to person and initiates the stress and coping process (Roesch et al., 2002). Coping, which involves the thoughts and actions people use to manage stressful situations, has been a major focus of social science research for more than three decades (Folkman & Moskowitz, 2004). While external factors undoubtedly contribute to an individual's experience of stress, their internal resources and coping mechanisms play a critical role in mediating its impact. Cognitive reappraisal, as a cognitive strategy, allows individuals to adaptively regulate their emotional responses by

reinterpreting the meaning of a situation (Jamieson et al., 2018). The effectiveness of treatment is maximized when other treatment components are also included such as relaxation and social support (Roesch et al., 2002). The capacity to re-evaluate stressful situations and adopt a more positive outlook is linked to better emotional outcomes, suggesting that cognitive reappraisal enhances coping mechanisms (Scafuto et al., 2024). Self-compassion, on the other hand, cultivates an inner sense of security and acceptance, which reduces the severity of self-criticism and promotes adaptive coping responses (Neff, 2009). Individuals high in self-compassion tend to approach difficulties with greater emotional resilience and equanimity, facilitating more effective problem-solving and emotional regulation. Mindfulness, as a component of self-compassion, promotes evaluative processes fostering restructuring of experiences to derive meaning out of it (Scafuto et al., 2024).

The findings suggested that self-compassion significantly mediated the relationship between cognitive reappraisal and prosocial behaviour thus supporting the Hypotheses 18. This indicates that the association between cognitive reappraisal and prosocial behaviour may be partly explained by the presence of self-compassion. Individuals who skilfully employ cognitive reappraisal may be more inclined to exhibit self-compassionate attitudes, potentially amplifying their inclination towards prosocial behaviour (Shahin et al., 2021). Cognitive reappraisal, by enabling individuals to reframe stressful situations in a more positive light, may reduce negative emotional reactivity and promote a sense of emotional equilibrium. This, in turn, can facilitate the adoption of a more compassionate stance towards oneself, as individuals are less likely to engage in self-blame or harsh judgment (Stutts, 2022). Moreover, the capacity to reappraise cognitive processes can contribute to a heightened awareness of the interconnectedness of human experiences. This realization can foster a sense of shared humanity, further enhancing self-compassionate feelings. Mindfulness, a facet of self-compassion, facilitates a broadened awareness, enabling individuals to reappraise life

circumstances and foster positive affect (Scafuto et al., 2024). The interconnected nature of self-compassion counters self-centeredness and narcissism (Neff, 2003). Prosocial values encompass cognitive, moral, and socioemotional processes that prioritize the well-being of others and society over self-interest (Ibáñez et al., 2023). Self-compassion, in turn, strengthens these values by fostering a sense of interconnectedness, empathy, and concern for the welfare of others. Self-compassionate people recognize that suffering is a universal human experience (Tekin et al., 2025). This underscores the constructive role played by compassion in encouraging and motivating oneself to engage in actions that alleviate suffering and promote well-being. Consequently, those adept at cognitive reappraisal may exhibit heightened self-compassion, leading to a stronger endorsement of prosocial values and a greater likelihood of engaging in prosocial behavior. Self-compassion is linked to psychological well-being and decreased anxiety (Kotera et al., 2021; Neff, 2009). It enhances basic needs satisfaction and mitigates the impact of unmet needs (Wouters-Soomers et al., 2022). Self-compassion promotes resilience and facilitates recovery from adversity, enabling individuals to regain emotional equilibrium more effectively (Marina, 2017). Moreover, self-compassion plays a crucial role in fostering emotional regulation capabilities, in managing stress emanating from work, and reducing self-blame (Liu et al., 2025). Self-compassion provides individuals with the emotional resources necessary to cope with challenging situations without succumbing to self-doubt or negative self-talk. Furthermore, self-compassion helps individuals maintain a balanced perspective on their strengths and weaknesses, preventing them from becoming overly critical of themselves or their performance.

The study result demonstrated that self-compassion significantly negatively mediates the relationship between expressive suppression and coping competence, thus supporting the Hypotheses 19. The interplay between emotion regulation strategies, self-compassion, and coping competence constitutes a critical area of investigation in psychological science, with

implications for mental health and adaptive functioning (Scafuto et al., 2024). Expressive suppression, a common emotion regulation strategy, involves inhibiting the outward expression of emotions (Scafuto et al., 2024). While seemingly straightforward, the effects of expressive suppression are multifaceted and not always benign (Hu et al., 2014). Specifically, studies indicate that expressive suppression is negatively linked with indicators of well-being and positively linked with markers of psychological distress (Hu et al., 2014). The habitual suppression of positive emotions, but not necessarily negative ones, consistently predicts diminished well-being and heightened distress, highlighting the complexity of this emotion regulation strategy (Yu et al., 2023). Indeed, employing distraction as an emotion regulation strategy early on has shown some positive results (Li et al., 2017). Mindfulness often contrasts with emotional suppression, given its focus on openly acknowledging and accepting experiences without evaluation, regardless of their emotional quality or strength (Scafuto et al., 2024). The frequent use of expressive suppression has been linked to various negative outcomes, including diminished social support, increased cardiovascular reactivity, and poorer psychological well-being (Hu et al., 2014). Individuals who habitually suppress their emotions may experience difficulties in forming and maintaining close relationships, as their emotional inexpressiveness can hinder genuine connection and intimacy. However, some studies note suppression not always having negative impacts on things such as anxiety (Lemaire et al., 2014). Conversely, expressive suppression can serve an adaptive function in certain situations, such as when maintaining composure is necessary for professional or social reasons (Kühn et al., 2011). Situations that favor successful stress-coping strategies are related to mental and physical health (Pérez-Chacón et al., 2023). Despite potential short-term benefits, the long-term consequences of relying heavily on expressive suppression can be detrimental to psychological well-being and adaptive functioning. Specifically, expressive suppression can increase feelings of unhappiness, pessimism and fear of failure (Neff, 2009). In the context of

caregiving, for example, caregivers may suppress their emotions to maintain a positive attitude and avoid burdening the care recipient, potentially leading to emotional exhaustion and burnout (Brandão et al., 2023).

The results showed that self-compassion significantly mediated the relationship between cognitive reappraisal and well-being, thus supporting Hypothesis 20. The intricate relationship between cognitive processes, emotional regulation, and overall well-being has garnered significant attention in psychological research, leading to investigations into the mechanisms that underlie these associations (Scafuto et al., 2024; Hu et al., 2014). Further research indicates that reappraisal, in particular, targets the evaluations and judgments of emotion-laden events (Torrence & Connelly, 2019). Further research indicates that reappraisal, in particular, targets the evaluations and judgments of emotion-laden events (Torrence & Connelly, 2019). Meta-analytic evidence suggests that cognitive reappraisal correlates positively with indicators of mental health and negatively with negative indicators, underscoring its adaptive role in emotional regulation (Hu et al., 2014). Further research indicates that reappraisal, in particular, targets the evaluations and judgments of emotion-laden events (Torrence & Connelly, 2019). Studies have demonstrated the potential of interventions designed to cultivate self-compassion, indicating that the capacity for self-compassion can be enhanced through targeted training and practices (Hagerman et al., 2020). This orientation facilitates the acknowledgment of personal flaws without self-condemnation. Self-compassion is not self-pity. Self-pity involves exaggerating one's problems, while self-compassion puts experiences into perspective (Neff, 2011; Coaston & Lawrence, 2019).

Self-Compassion negatively mediated the relationship between expressive suppression and well-being, thus supporting Hypothesis 21. The negative mediation of self-compassion in the relationship between expressive suppression and well-being suggests that individuals who tend to suppress their emotions are also vulnerable to experiencing diminished well-being. This

could be because suppressing emotions without the buffer of self-compassion may lead to increased self-criticism, feelings of isolation, and difficulty coping with stress. The process model suggests expressive suppression and cognitive reappraisal are common emotion regulation strategies (Scafuto et al., 2024). In contrast to cognitive reappraisal, which is known as an "antecedent-focused" strategy, expressive suppression is considered a "response-focused" strategy (Scafuto et al., 2024). Expressive suppression, while potentially serving a purpose in specific social contexts (Kühn et al., 2011), often entails inhibiting the outward signs of emotion. This can lead to internal emotional experiences being prolonged or intensified (Li et al., 2009). The findings underscore the importance of fostering self-compassion as a potential protective factor against the negative consequences of expressive suppression on well-being (Neff, 2009). Interventions aimed at cultivating self-compassion may help individuals mitigate the adverse effects of suppressing emotions by promoting self-acceptance, reducing self-criticism, and fostering a sense of interconnectedness with others (Barnard & Curry, 2011). This perspective aligns with findings indicating that self-compassion can improve psychological health by acting as a buffer against self-critical ruminative cognitive processes (Stutts, 2022). The interplay between these constructs highlights the multifaceted nature of emotional well-being and the importance of considering both emotion regulation strategies and self-attitudes in understanding psychological health. Individuals who habitually suppress their emotions may experience heightened physiological arousal, impaired social interactions, and diminished psychological well-being (Shahzad, 2019). Rather than harsh self-judgment, self-compassion encourages a caring and accepting approach toward oneself in difficult times (Neff, 2003; Mohebi et al., 2020). Mindfulness embraces any experience (Scafuto et al., 2024). The interaction between expressive suppression and self-compassion, as highlighted by the present study, sheds light on the complex pathways through which emotion regulation strategies impact well-being (Snyder et al., 2013).

## Conclusions

The current study aimed to investigate the relationships between dispositional mindfulness and well-being among emerging adults, with particular attention to the mediating roles of emotion regulation strategies (cognitive reappraisal and expressive suppression), self-compassion, coping competence, and prosocial behaviour within the framework of the PERMA model of well-being. Based on the structural model, out of ten hypothesized direct effects, nine were found to be statistically significant. Specifically, dispositional mindfulness significantly positively predicted cognitive reappraisal and negatively predicted expressive suppression. In turn, cognitive reappraisal positively predicted self-compassion, whereas expressive suppression negatively predicted it. Furthermore, dispositional mindfulness directly predicted higher levels of self-compassion. Self-compassion also significantly predicted both coping competence and prosocial behaviour. While prosocial behaviour and self-compassion positively predicted well-being, coping competence did not show a significant direct effect on well-being. In terms of mediation analyses, out of eleven proposed hypotheses, ten were supported. Self-compassion not only mediated the effects of dispositional mindfulness on self-compassion via both cognitive reappraisal and expressive suppression but also mediated the link between dispositional mindfulness and well-being. It also significantly mediated the relationships between expressive suppression and prosocial behaviour, cognitive reappraisal and coping competence, cognitive reappraisal and prosocial behaviour, and expressive suppression and both coping competence and well-being. Moreover, prosocial behaviour was found to significantly mediate the relationship between self-compassion and well-being. However, coping competence did not significantly mediate the association between self-compassion and well-being. These findings collectively highlight the central role of self-compassion and prosocial behaviour as psychological and interpersonal mechanisms that

contribute to enhanced well-being in emerging adults, whereas coping competence may require further contextual exploration to determine its influence.

### **Implication**

The findings of this research provide significant implications, presenting various opportunities to improve the mental health and overall well-being of emerging adults, especially in the Indian context where distinct sociocultural factors may affect psychological processes (Pepping et al., 2016). The study emphasizes the mediating roles of emotion regulation, self-compassion, coping competence, and prosocial behavior in the connection between dispositional mindfulness and well-being, suggesting that interventions could be developed to specifically address these psychological mechanisms (Ma & Fang, 2019). Mindfulness-based interventions have demonstrated effectiveness in enhancing mental health outcomes across diverse populations, and this research indicates that MBIs customized for emerging adults could yield particularly beneficial results if they include elements designed to improve emotion regulation skills, nurture self-compassion, enhance coping competence, and encourage prosocial behavior (Guendelman et al., 2017). For instance, cognitive reappraisal, an essential strategy for emotion regulation, can be imparted through mindfulness techniques, allowing individuals to reinterpret negative experiences in a more constructive manner (Ma & Fang, 2019).

The results of this study may contribute to preventive mental health initiatives tailored for emerging adults, encountering various challenges associated with education, career, relationships, and identity development. By focusing specific psychological elements that influence the connection between mindfulness and well-being, mental health practitioners and educators can devise focused interventions that cater to the distinct requirements of this demographic (Coholic et al., 2020). In academic environments, mindfulness training could be incorporated into educational programs to foster emotional resilience, alleviate stress, and

improve academic outcomes. Additionally, workshops and support groups centered on self-compassion may assist emerging adults in developing a more accepting and forgiving self-view, thereby diminishing self-criticism and enhancing psychological health. Moreover, strategies aimed at bolstering coping skills can empower individuals with effective methods for handling stress and adversity, thus fostering resilience and mitigating the likelihood of mental health issues. The study's focus on prosocial behavior as a mediating factor underscores the significance of social connectedness and altruism in enhancing well-being among emerging adults. Promoting engagement in community service, nurturing empathy and compassion, and encouraging positive social interactions can foster a sense of purpose and meaning in life, ultimately contributing to improved overall well-being. Mental health professionals can leverage these findings to advocate for the development of self-compassion in adolescents, which may enhance resilience and facilitate exploration, thereby providing new and constructive coping mechanisms for challenges and ultimately leading to better emotional health (Bluth et al., 2018). These findings uphold the value of mindfulness-based interventions in alleviating psychological distress, anxiety, and depression while simultaneously enhancing psychological well-being (Scafuto et al., 2024).

### **Limitations and future direction of the study**

The current research presents several limitations despite its noteworthy findings. The reliance on self-reported measures for evaluating dispositional mindfulness, emotion regulation strategies, self-compassion, coping competence, prosocial behavior, and well-being raises concerns regarding potential biases, including social desirability bias and recall bias (Chandna et al., 2022). The cross-sectional nature of the study prevents the establishment of causal relationships among the examined variables; while the research can identify correlations and mediating factors, it cannot conclusively determine whether dispositional mindfulness

enhances well-being through the suggested mediators. The study design did not consider potential confounding variables that could affect the relationships between mindfulness, psychological factors, and well-being. Variables such as socioeconomic status, educational attainment, physical health, and previous trauma experiences could all influence an individual's levels of mindfulness, emotion regulation, self-compassion, and coping competence. A mixed method approach focusing on qualitative aspect of research could have provided deeper, context-rich understanding of participants' lived experiences.

# REFERENCES

## References

- Aggarwal, S., & Berk, M. (2014). Evolution of adolescent mental health in a rapidly changing socioeconomic environment: A review of mental health studies in adolescents in India over last 10 years. *Asian Journal of Psychiatry*, 13, 3. Elsevier BV. <https://doi.org/10.1016/j.ajp.2014.11.007>
- Akin, A., & Akin, U. (2015). Mediating role of coping competence on the relationship between mindfulness and flourishing. *Suma Psicológica*, 22(1), 37-43.
- Al-Abyadh, M. H. A., Aldbyani, A., & Ullah, A. (2021). Dispositional mindfulness, self-esteem, subjective well-being, and mental health: cross-culture study. *Pakistan Journal of Educational Research*, 4(4), 98-111
- Alarcón, X., Bobowik, M., & Prieto-Flores, Ò. (2021). Mentoring for Improving the Self-Esteem, Resilience, and Hope of Unaccompanied Migrant Youth in the Barcelona Metropolitan Area. *International Journal of Environmental Research and Public Health*, 18(10), 5210. <https://doi.org/10.3390/ijerph18105210>
- Alarcón-Espinoza, M., Sanduvete-Chaves, S., Anguera, M. T., García, P. S., & Moscoso, S. C. (2022). Emotional Self-Regulation in Everyday Life: A Systematic Review. *Frontiers in Psychology*, 13. *Frontiers Media*. <https://doi.org/10.3389/fpsyg.2022.884756>
- Aldbyani, A., Wang, G., Qi, Y., Chuanxia, Z., Li, J., Leng, J., & Alhimaidi, A. (2025). Positive psychological traits and psychological well-being: investigating roles of positive coping strategies and life stressors. *BMC Psychology*, 13(1). <https://doi.org/10.1186/s40359-025-02807-9>
- Alves-Martins M, Peixoto F, Gouveia-Pereira M, Amaral V, Pedro I. Self-esteem and academic achievement among adolescents. *Educ Psychol*. 2002;22(1):51–62

- Amirkhan, J. H., & Greaves, H. (2003). Sense of Coherence and Stress: The Mechanics of a Healthy Disposition. *Psychology and Health*, 18(1), 31. <https://doi.org/10.1080/0887044021000044233>
- Arnett, J. J. (2007). Emerging Adulthood: What Is It, and What Is It Good For? *Child Development Perspectives*, 1(2), 68–73. <https://doi.org/10.1111/j.1750-8606.2007.00016.x>
- Arnett, J. J., Žukauskienė, R., & Sugimura, K. (2014). The new life stage of emerging adulthood at ages 18–29 years: implications for mental health. *The Lancet Psychiatry*, 1(7), 569–576. [https://doi.org/10.1016/s2215-0366\(14\)00080-7](https://doi.org/10.1016/s2215-0366(14)00080-7)
- Asheghi, M., & Hashemi, E. (2019). The Relationship of Mindfulness with Burnout and Adaptive Performance with the Mediator Role of Resilience Among Iranian Employees. *Annals of Military and Health Sciences Research*. <https://doi.org/10.5812/amh.87797>
- Assaz, D. A., Roche, B., Kanter, J. W., & Oshiro, C. K. (2018). Cognitive defusion in acceptance and commitment therapy: What are the basic processes of change?. *The Psychological Record*, 68, 405-418.
- Atkins, P. W., & Styles, R. (2015). Mindfulness, identity and work: Mindfulness training creates a more flexible sense of self.
- Aznar, M. P. M., Díaz, A., Pérez, J. M. B., & Fernández, I. I. (2020). Stress and Psychological Distress in Emerging Adulthood: A Gender Analysis. *Journal of Clinical Medicine*, 9(9), 2859. <https://doi.org/10.3390/jcm9092859>
- Baer, R. A., Lykins, E. L., & Peters, J. R. (2012). Mindfulness and self-compassion as predictors of psychological wellbeing in long-term meditators and matched nonmeditators. *The Journal of Positive Psychology*, 7(3), 230–238. <https://doi.org/10.1080/17439760.2012.674548>

- Baer, R.A. (2003). Mindfulness training as a clinical intervention: a conceptual and empirical review. *Clinical Psychology and Scientific Practice*, 10, 125-143.
- Baggio, S., Studer, J., Iglesias, K., Daeppen, J. B., & Gmel, G. (2017). Emerging Adulthood: A Time of Changes in Psychosocial Well-Being. *Evaluation & the health professions*, 40(4), 383–400. <https://doi.org/10.1177/0163278716663602>
- Baker, S. (2018). The Effects of Parenting on Emotion and Self-Regulation. In Springer eBooks (p. 217). Springer Nature. [https://doi.org/10.1007/978-3-319-94598-9\\_10](https://doi.org/10.1007/978-3-319-94598-9_10)
- Baltruschat, S., Cándido, A., Maldonado, A., Verdejo-Lucas, C., Catena-Verdejo, E., & Catena, A. (2021). There is more to mindfulness than emotion regulation: a study on brain structural networks. *Frontiers in psychology*, 12, 659403.
- Barnard, L. K., & Curry, J. F. (2011). Self-Compassion: Conceptualizations, Correlates, & Interventions. *Review of General Psychology*, 15(4), 289–303. <https://doi.org/10.1037/a0025754>
- Barnard, L., & Curry, J. F. (2011). Self-Compassion: Conceptualizations, Correlates, & Interventions. *Review of General Psychology*, 15(4), 289. <https://doi.org/10.1037/a0025754>
- Barnes, S., Brown, K. W., Krusemark, E., Campbell, W. K., & Rogge, R. D. (2007). "The role of mindfulness in romantic relationship satisfaction and responses to relationship stress." *Journal of Marital and Family Therapy*, 33(4), 482-500.
- Becker, B. D., Gallagher, K. C., & Whitaker, R. C. (2017). Teachers' dispositional mindfulness and the quality of their relationships with children in Head Start classrooms. *Journal of school psychology*, 65, 40-53.
- Bell S., Lee C. Transitions in emerging adulthood and stress among young Australian women. *Int. J. Behav. Med.* 2008; 15:280–288. <http://doi:10.1080/10705500802365482>

- Bell, L. G. (2013). Mindful psychotherapy. In *The Spiritual Horizon of Psychotherapy* (pp. 125-143). Routledge.
- Ben Salem, M., & Karlin, N. J. (2023). Dispositional mindfulness and positive mindset in emerging adult college students: the mediating role of decentering. *Psychological Reports*, 126(2), 601-619.
- Berardis, D. D., Fornaro, M., Orsolini, L., Ventriglio, A., Vellante, F., & Giannantonio, M. D. (2020). Emotional Dysregulation in Adolescents: Implications for the Development of Severe Psychiatric Disorders, Substance Abuse, and Suicidal Ideation and Behaviors. *Brain Sciences*, 10(9), 591. <https://doi.org/10.3390/brainsci10090591>
- Berry, D. R., Cairo, A. H., Goodman, R. J., Quaglia, J. T., Green, J., & Brown, K. W. (2018). Mindfulness increases prosocial responses toward ostracized strangers through empathic concern. *Journal of Experimental Psychology General*, 147(1), 93. <https://doi.org/10.1037/xge0000392>
- Berry, DR, Hoerr JP, Cesko S, Alayoubi A, Carpio K, Zirzow H, Walters W, Scram G, Rodriguez K, Beaver V. Does mindfulness training without explicit ethics-based instruction promote prosocial behaviors? A meta-analysis. *Pers. Soc. Psychol. Bull.* 2020, 46:1247-1269. <https://doi.org/10.1177/0146167219900418>.
- Bijttebier, P., & Vertommen, H. (1999). Coping strategies in relation to personality disorders. *Personality and Individual Differences*, 26(5), 847. [https://doi.org/10.1016/s0191-8869\(98\)00187-1](https://doi.org/10.1016/s0191-8869(98)00187-1)
- Bishop SR, Lau MA, Shapiro S, Carlson L, Anderson ND, Carmody J, Segal ZV, Abbey S, Speca M, Velting D, Devins G: Mindfulness: A proposed operational definition. *Clinical Psychol. Science Practice* 2004, 11:230-241. <https://doi.org/10.1093/clipsy.bph077>

- Bishop, S., Lau, M., Shapiro, S., Carlson, L., Anderson, N., Carmody, J., et al. (2004). Mindfulness: A proposed operational definition. *Clinical Psychology: Science and practice*, 11(3), 230–241.
- Bjørnsen, H. N., Espnes, G. A., Eilertsen, M. B., Ringdal, R., & Moksnes, U. K. (2017). The Relationship Between Positive Mental Health Literacy and Mental Well-Being Among Adolescents: Implications for School Health Services. *The Journal of School Nursing*, 35(2), 107. <https://doi.org/10.1177/1059840517732125>
- Black, D. S. (2011). A brief definition of mindfulness. *Mindfulness Research Guide*. Retrieved from <http://www.mindfulexperience.org>
- Bluth, K., Mullarkey, M. C., & Lathren, C. (2018). Self-Compassion: A Potential Path to Adolescent Resilience and Positive Exploration. *Journal of Child and Family Studies*, 27(9), 3037. <https://doi.org/10.1007/s10826-018-1125-1>
- Bohlmeijer, E., Ten Klooster, P. M., Fledderus, M., Veehof, M., & Baer, R. (2011). Psychometric properties of the five facet mindfulness questionnaire in depressed adults and development of a short form. *Assessment*, 18(3), 308-320.
- Bowman, N. A. (2010). The Development of Psychological Well-Being Among First-Year College Students. *Journal of College Student Development*, 51(2), 180. <https://doi.org/10.1353/csd.0.0118>
- Brown, K. W., & Ryan, R. M. (2003). The benefits of being present: Mindfulness and its role in psychological well-being. *Journal of Personality and Social Psychology*, 84(4), 822–848. <https://doi.org/10.1037/0022-3514.84.4.822>
- Burgoon, J. K., Berger, C. R., & Waldron, V. R. (2000). Mindfulness and interpersonal communication. *Journal of Social Issues*, 56(1), 105-127.
- Burpee, L.C., & Langer, E.J. (2005). Mindfulness and marital satisfaction. *Journal of Adult Development*, 12(1), 43-51.

- Busching, R., & Krahe, B. (2020). With a Little Help from Their Peers: The Impact of Classmates on Adolescents' Development of Prosocial Behavior. *Journal of Youth and Adolescence*, 49(9), 1849. <https://doi.org/10.1007/s10964-020-01260-8>
- Cahn, B. R., & Polich, J. (2006). Meditation states and traits: EEG, ERP, and neuroimaging studies. *Psychological bulletin*, 132(2), 180.
- Cameron, L. D., & Overall, N. C. (2018). Suppression and expression as distinct emotion-regulation processes in daily interactions: Longitudinal and meta-analyses. *Emotion*, 18(4), 465–480. <https://doi.org/10.1037/emo0000334>
- Cao, F., Li, J., Wei, X., Yang, Z., & Wu, D. (2023). The impact of resilience on the mental health of military personnel during the COVID-19 pandemic: coping styles and regulatory focus. *Frontiers in Public Health*, 11. <https://doi.org/10.3389/fpubh.2023.1240047>
- Capurso, V., Fabbro, F., & Crescentini, C. (2014). Mindful creativity: the influence of mindfulness meditation on creative thinking. *Frontiers in Psychology*, 4. <https://doi.org/10.3389/fpsyg.2013.01020>
- Carlo G, Randall BA. The development of a measure of prosocial behaviors for late adolescents. *J. Youth Adolesc.* 2002;31(1):31–44. doi: 10.1023/A:1014033032440.
- Carlo, G., & Pierotti, S. L. (2020). Prosocial Behaviors in Adolescents. In *The Encyclopedia of Child and Adolescent Development* (p. 1). <https://doi.org/10.1002/9781119171492.wecad345>
- Chan, K. K. S., Lee, J. C., Yu, E. K. W., Chan, A. W. Y., Leung, A. N. M., Cheung, R. Y. M., Li, C. W., Kong, R. H.-M., Chen, J., Wan, L. Y. S. 溫麗妍, Tang, H. Y. C., Yum, Y. N., Jiang, D., Wang, L., & Tse, C. Y. (2022). The Impact of Compassion from Others and Self-compassion on Psychological Distress, Flourishing, and Meaning

- in Life Among University Students. *Mindfulness*, 13(6), 1490.  
<https://doi.org/10.1007/s12671-022-01891-x>
- Chandna, S., Sharma, P., & Moosath, H. (2022). The Mindful Self: Exploring Mindfulness in Relation with Self-esteem and Self-efficacy in Indian Population. *Psychological Studies*, 67(2), 261. <https://doi.org/10.1007/s12646-021-00636-5>
- Chang, S., Vaingankar, J. A., Seow, E., Samari, E., Chua, Y. C., Luo, N., Verma, S., & Subramaniam, M. (2023). Understanding Emotion Regulation Strategies Among Youths: A Qualitative Study. *Journal of Adolescent Research*.  
<https://doi.org/10.1177/07435584231161002>
- Chen, J., Fu, G., Zhou, Y., & Xu, W. (2023). Emotion regulation strategies and PTSS among children who experienced an explosion accident: the moderating role of trait mindfulness. *Psychology, Health & Medicine*, 28(8), 2021-2031.
- Chen, L., Li, X., & Lü, X. (2022). From mindfulness to work engagement: The mediating roles of work meaningfulness, emotion regulation, and job competence. *Frontiers in Psychology*, 13. <https://doi.org/10.3389/fpsyg.2022.997638>
- Cheung, R. Y. M., Ke, Z., & Ng, M. C. Y. (2020). Dispositional mindfulness and mental health in Chinese emerging adults: A multilevel model with emotion dysregulation as a mediator. *PLoS ONE*, 15(11), e0239575.  
<https://doi.org/10.1371/journal.pone.0239575>
- Christodoulou, V., Ilia, C., & Hadjigeorgiou, S. (2024). Can mindfulness and self-compassion protect from relational aggression and victimization in college?. *Journal of College Student Mental Health*, 1-25.
- Clarke, B., & Hartley, M. (2024). Contemplative Dispositions and Mental Health: The Supportive Role of Self-Compassion and Mindfulness on College Students' Resilience. *Journal of College Student Mental Health*, 1-23.

- Clen, S. L., Mennin, D. S., & Fresco, D. M. (2013). Emotion Regulation Strategies (p. 1).  
<https://doi.org/10.1002/9781118528563.wbcbt05>
- Coaston, S. C., & Lawrence, C. (2019). Integrating Self-Compassion Across the Counselor Education Curriculum. *Journal of Creativity in Mental Health*, 14(3), 292.  
<https://doi.org/10.1080/15401383.2019.1610536>
- Coffey, K. A., & Hartman, M. (2008). Mechanisms of action in the inverse relationship between mindfulness and psychological distress. *Complementary Health Practice Review*, 13(2), 79–91.
- Coholic, D., Schwabe, N., & Lander, K. (2020). A Scoping Review of Arts-Based Mindfulness Interventions for Children and Youth [Review of A Scoping Review of Arts-Based Mindfulness Interventions for Children and Youth]. *Child and Adolescent Social Work Journal*, 37(5), 511. Springer Science+Business Media.  
<https://doi.org/10.1007/s10560-020-00657-5>
- Cole, P. M., Martin, S. E., & Dennis, T. A. (2004, March). Emotion Regulation as a Scientific Construct: Methodological Challenges and Directions for Child Development Research. *Child Development*, 75(2), 317–333. <https://doi.org/10.1111/j.1467-8624.2004.00673.x>
- Compas, B. E., Jaser, S. S., Dunbar, J. P., Watson, K. H., Bettis, A. H., Gruhn, M. A., & Williams, E. (2013). Coping and emotion regulation from childhood to early adulthood: Points of convergence and divergence. *Australian Journal of Psychology*, 66(2), 71. <https://doi.org/10.1111/ajpy.12043>
- Costa, D. A. V. D., Kogien, M., Hartwig, S. V., Ferreira, G. E., Guimarães, M. K. D. O. R., & Ribeiro, M. R. R. (2022). Dispositional mindfulness, emotional regulation and perceived stress among nursing students. *Revista da Escola de Enfermagem da USP*, 56, e20220086.

- Côté, S., Gyurak, A., & Levenson, R. W. (2010). The ability to regulate emotion is associated with greater well-being, income, and socioeconomic status. *Emotion* (Washington, D.C.), 10(6), 923–933. <https://doi.org/10.1037/a0021156>
- Courtwright, S. E., Makic, M. B. F., & Jones, J. K. N. (2019). Emotional wellbeing in youth: A concept analysis. *Nursing Forum*, 55(2), 106. <https://doi.org/10.1111/nuf.12404>
- Cowand, A., Amarsaikhan, U., Ricks, R. F., Cash, E. D., & Sephton, S. E. (2024). Self-Compassion is Associated with Improved Well-Being and Healthier Cortisol Profiles in Undergraduate Students. *Mindfulness*, 1-15.
- Cracco, E., Goossens, L., & Braet, C. (2017). Emotion regulation across childhood and adolescence: evidence for a maladaptive shift in adolescence. *European Child & Adolescent Psychiatry*, 26(8), 909. <https://doi.org/10.1007/s00787-017-0952-8>
- Cutuli, D. (2014). Cognitive reappraisal and expressive suppression strategies role in the emotion regulation: an overview on their modulatory effects and neural correlates [Review of Cognitive reappraisal and expressive suppression strategies role in the emotion regulation: an overview on their modulatory effects and neural correlates]. *Frontiers in Systems Neuroscience*, 8. *Frontiers Media*. <https://doi.org/10.3389/fnsys.2014.00175>
- Dewaal F.B.M. Putting the Altruism Back into Altruism: The Evolution of Empathy. *Annu. Rev. Psychol.* 2008;59:279–300. doi: 10.1146/annurev.psych.59.103006.093625.
- Di Giuseppe, M., Orrù, G., Gemignani, A., Ciacchini, R., Miniati, M., & Conversano, C. (2022). Mindfulness and defense mechanisms as explicit and implicit emotion regulation strategies against psychological distress during massive catastrophic events. *International Journal of Environmental Research and Public Health*, 19(19), 12690.

- Diaz, F. M. (2023). Mindfulness, self-compassion, and gratitude in music teaching and learning. *The Oxford handbook of care in music education*, 328.
- Diener E, Larsen RJ. The experience of emotional well-being. In: Lewis M, Haviland JM, editors. *Handbook of Emotions*. New York, NY: Guilford; 1993. pp. 405–415
- Dixon-Gordon, K. L., Bernecker, S. L., & Christensen, K. A. (2015). Recent innovations in the field of interpersonal emotion regulation. *Current Opinion in Psychology*, 3, 36. <https://doi.org/10.1016/j.copsyc.2015.02.001>
- Dobkin, P. L., & Monshat, K. (2020). *Mental Illness through the Lens of Mindfulness*. In Oxford University Press eBooks. Oxford University Press. <https://doi.org/10.1093/oxfordhb/9780198808640.013.33>
- Dolbier, C. L., Haley, E., Conder, L., & Guiler, W. (2021). Adverse childhood experiences and adult psychopathological symptoms: The moderating role of dispositional mindfulness. *Journal of Contextual Behavioral Science*, 21, 73. <https://doi.org/10.1016/j.jcbs.2021.06.001>
- Dollar, J. M., & Calkins, S. D. (2019). Emotion Regulation and Its Development. In Elsevier eBooks (p. 546). Elsevier BV. <https://doi.org/10.1016/b978-0-12-809324-5.23665-1>
- Donald, J. N., Sahdra, B. K., Van Zanden, B., Duineveld, J. J., Atkins, P. W., Marshall, S. L., & Ciarrochi, J. (2019). Does your mindfulness benefit others? A systematic review and meta-analysis of the link between mindfulness and prosocial behaviour. *British Journal of Psychology*, 110(1), 101-125.
- Dore, B. P., & Ochsner, K. N. (2015). Emotion regulation. In A. W. Toga (Ed.), *Brain mapping: An encyclopedic reference* (pp. 53–58). Academic Press. <http://dx.doi.org/10.1016/B978-0-12-397025-1.00153-6>

- Dove, L., Wiederman, N.M. (2000). Cognitive distraction and women's sexual functioning. *Journal of Sex & Marital Therapy*, 26(1), 67-78
- Drouman, V., Poppa, T., Monterosso, J., Black, D., & Amaro, H. (2022). Association between dispositional mindfulness, clinical characteristics, and emotion regulation in women entering substance use disorder treatment: an fMRI Study. *Mindfulness*, 13(6), 1430-1444.
- Duckworth, A., Quinn, P. D., & Seligman, M. E. P. (2009). Positive predictors of teacher effectiveness. *The Journal of Positive Psychology*, 4(6), 540. <https://doi.org/10.1080/17439760903157232>
- Duncan, L. G., Coatsworth, J. D., & Greenberg, M. T. (2009). A Model of Mindful Parenting: Implications for Parent–Child Relationships and Prevention Research [Review of A Model of Mindful Parenting: Implications for Parent–Child Relationships and Prevention Research]. *Clinical Child and Family Psychology Review*, 12(3), 255. Springer Science+Business Media. <https://doi.org/10.1007/s10567-009-0046-3>
- Dunfield, K. A. (2014). A construct divided: prosocial behavior as helping, sharing, and comforting subtypes [Review of A construct divided: prosocial behavior as helping, sharing, and comforting subtypes]. *Frontiers in Psychology*, 5. Frontiers Media. <https://doi.org/10.3389/fpsyg.2014.00958>
- Dvir, Y., Ford, J. D., Hill, M. A., & Frazier, J. A. (2014). Childhood Maltreatment, Emotional Dysregulation, and Psychiatric Comorbidities [Review of Childhood Maltreatment, Emotional Dysregulation, and Psychiatric Comorbidities]. *Harvard Review of Psychiatry*, 22(3), 149. Lippincott Williams & Wilkins. <https://doi.org/10.1097/hrp.0000000000000014>

- Dzwonkowska, I., & Żak-Łykus, A. (2015). Self-compassion and social functioning of people – research review. *Polish Psychological Bulletin*, 46(1), 82–87. <https://doi.org/10.1515/ppb-2015-0009>
- Eisenberg, N., Spinrad, T. L., & Eggum, N. D. (2010). Emotion-Related Self-Regulation and Its Relation to Children’s Maladjustment [Review of Emotion-Related Self-Regulation and Its Relation to Children’s Maladjustment]. *Annual Review of Clinical Psychology*, 6(1), 495. Annual Reviews. <https://doi.org/10.1146/annurev.clinpsy.121208.131208>
- English, T., Lee, I. A., John, O. P., & Gross, J. J. (2017). Emotion regulation strategy selection in daily life: The role of social context and goals. *Motivation and emotion*, 41(2), 230–242. <https://doi.org/10.1007/s11031-016-9597-z>
- Erkan, I., Kafescioglu, N., Cavdar, A., & Zeytinoğlu-Saydam, S. (2020). Romantic Relationship Experiences and Emotion Regulation Strategies of Regular Mindfulness Meditation Practitioners: A Qualitative Study. *Journal of marital and family therapy*.
- Etkin, A., Egner, T., & Kalisch, R. (2010). Emotional processing in anterior cingulate and medial prefrontal cortex [Review of Emotional processing in anterior cingulate and medial prefrontal cortex]. *Trends in Cognitive Sciences*, 15(2), 85. Elsevier BV. <https://doi.org/10.1016/j.tics.2010.11.004>
- Eysenck, H. J. (1985). Stress, appraisal, and coping. *Behaviour Research and Therapy*, 23(6), 714. [https://doi.org/10.1016/0005-7967\(85\)90087-7](https://doi.org/10.1016/0005-7967(85)90087-7)
- Falon, S. L., Kangas, M., & Crane, M. F. (2021). The coping insights involved in strengthening resilience: The Self-Reflection and Coping Insight Framework. *Anxiety Stress & Coping*, 34(6), 734. <https://doi.org/10.1080/10615806.2021.1910676>

- Feltman, R., Robinson, M. D., & Ode, S. (2009). Mindfulness as a moderator of neuroticism–outcome relations: A self-regulation perspective. *Journal of Research in Personality*, 43(6), 953–961.
- Fletcher, L., & Hayes, S. C. (2005). Relational frame theory, acceptance and commitment therapy, and a functional analytic definition of mindfulness. *Journal of Rational-Emotive & Cognitive-Behavior Therapy*, 23(4), 315. <https://doi.org/10.1007/s10942-005-0017-7>
- Folkman, S., & Moskowitz, J. T. (2004). Coping: Pitfalls and Promise [Review of Coping: Pitfalls and Promise]. *Annual Review of Psychology*, 55(1), 745. Annual Reviews. <https://doi.org/10.1146/annurev.psych.55.090902.141456>
- Francesca Scafuto., Rossella, Mattea, Quinto., Silvia, Ghiroldi., Nitamo, Federico, Montecucco., Fabio, Presaghi., Luca, Iani., Francesco, De, Vincenzo. (2024). 1. The mediation role of emotion regulation strategies on the relationship between mindfulness effects, psychological well-being and distress among youths: findings from a randomized controlled trial. doi: 10.1007/s12144-024-06081-7
- Fredrickson BL. Positive emotions broaden and build. In: Ashby Plant E, Devine PG, editors. *Advances on Experimental Social Psychology*. Vol. 47. Burlington, MA: Academic Press; 2013. pp. 1–53
- Freire, C., Ferradás, M. del M., Valle, A., Núñez, J. C., & Vallejo, G. (2016). Profiles of Psychological Well-being and Coping Strategies among University Students. *Frontiers in Psychology*, 7. <https://doi.org/10.3389/fpsyg.2016.01554>
- Freire, C., Ferradás, M. del M., Valle, A., Pérez, J. C. N., & Vallejo, G. (2016). Profiles of Psychological Well-being and Coping Strategies among University Students. *Frontiers in Psychology*, 7. <https://doi.org/10.3389/fpsyg.2016.01554>

- Garland, E. L., Farb, N. A., Goldin, P. R., & Fredrickson, B. L. (2015). Mindfulness broadens awareness and builds eudaimonic meaning: A process model of mindful positive emotion regulation. *Psychological Inquiry*, 26 (4), 293–314. <https://doi.org/10.1080/1047840X.2015.1064294>
- Geiger, P. J., Boggero, I. A., Brake, C. A., Caldera, C. A., Combs, H. L., Peters, J. R., & Baer, R. A. (2015). Mindfulness-Based Interventions for Older Adults: a Review of the Effects on Physical and Emotional Well-Being. *Mindfulness*, 7(2), 296. Springer Science+Business Media. <https://doi.org/10.1007/s12671-015-0444-1>
- Geschwind, N., Martinmäki, S., & Garland, E. L. (2019). Facilitation of positive emotions through mindfulness-based therapy in June Gruber (ed.), *The Oxford Handbook of Positive Emotion and Psychopathology*, Oxford Library of Psychology, Pages 561–574. <https://doi.org/10.1093/oxfordhb/9780190653200.013.34>
- Gicharu, R., & Sindabi, A. M. (2016). Influence of Adolescence Developmental Changes on Academic Performance of Students in Public Secondary Schools in Nakuru Municipality, Nakuru County. *International Journal of Science and Research (IJSR)*, 5(7), 180. <https://doi.org/10.21275/v5i7.sub158426>
- Gilbert, P., & Procter, S. (2006). Compassionate mind training for people with high shame and self-criticism: overview and pilot study of a group therapy approach. *Clinical Psychology & Psychotherapy*, 13(6), 353–379. <https://doi.org/10.1002/cpp.507>.
- Gouda, S., Luong, M. T., Schmidt, S., & Bauer, J. (2016). Students and Teachers Benefit from Mindfulness-Based Stress Reduction in a School-Embedded Pilot Study. *Frontiers in Psychology*, 7. <https://doi.org/10.3389/fpsyg.2016.00590>
- Gr, G. (1992). One moment, please. *PubMed*, 82(1), 37. <https://pubmed.ncbi.nlm.nih.gov/1499783>

- Grecucci, A., Pappaianni, E., Šiugždaitė, R., Theuninck, A. C., & Job, R. (2015). Mindful Emotion Regulation: Exploring the Neurocognitive Mechanisms behind Mindfulness [Review of Mindful Emotion Regulation: Exploring the Neurocognitive Mechanisms behind Mindfulness]. *BioMed Research International*, 2015, 1. Hindawi Publishing Corporation. <https://doi.org/10.1155/2015/670724>
- Gross, J. J. (1998). Antecedent- and response-focused emotion regulation: Divergent consequences for experience, expression, and physiology. *Journal of Personality and Social Psychology*, 74(1), 224–237. <https://doi.org/10.1037//0022-3514.74.1.224>
- Gross, J. J. (1998). The emerging field of emotion regulation: An integrative review. *Review of General Psychology*, 2(3), 271-299. <https://doi.org/10.1037/1089-2680.2.3.271>
- Gross, J. J. (2002). Emotion regulation: Affective, cognitive, and social consequences. *Psychophysiology*, 39(3), 281–291. <https://doi.org/10.1017/s0048577201393198>
- Gross, J. J. (2008). Emotion regulation. In M. Lewis, J.M. Haviland-Jones, and L.F. Barrett's *Handbook of emotions* (3rd Edition, pp. 497-513). Guilford.
- Gross, J. J. (2015). Emotion regulation: Conceptual and empirical foundations. In J. J. Gross (Ed.), *Handbook of Emotion Regulation* (pp. 3-20). The Guilford Press.
- Gross, J. J., & Levenson, R. W. (1993). Emotional suppression: physiology, self-report, and expressive behavior. *Journal of Personality and Social Psychology*, 64(6), 970-986. <https://doi.org/10.1037/0022-3514.64.6.970>
- Gross, J. J., & Muñoz, R. F. (1995). Emotion regulation and mental health. *Clinical Psychology Science and Practice*, 2(2), 151. <https://doi.org/10.1111/j.1468-2850.1995.tb00036.x>

- Gu, J., Cavanagh, K., & Strauss, C. (2017). Investigating the specific effects of an online mindfulness-based self-help intervention on stress and underlying mechanisms. *Mindfulness*, 9, 1245–1257. <https://doi.org/10.1007/s12671-017-0867-y>.
- Gu, J., Strauss, C., Bond, R., & Cavanagh, K. (2015). How do mindfulness-based cognitive therapy and mindfulness-based stress reduction improve mental health and wellbeing? A systematic review and meta-analysis of mediation studies. *Clinical Psychology Review*, 37, 1–12.
- Guendelman, S., Medeiros, S., & Rampes, H. (2017). Mindfulness and Emotion Regulation: Insights from Neurobiological, Psychological, and Clinical Studies [Review of Mindfulness and Emotion Regulation: Insights from Neurobiological, Psychological, and Clinical Studies]. *Frontiers in Psychology*, 8. Frontiers Media. <https://doi.org/10.3389/fpsyg.2017.00220>
- Guo Q, Li S, Liang J, Yu X, Lv Y. Mindfulness may be associated with less prosocial engagement among high intelligence individuals. *Sci Rep*. 2023 Mar 14;13(1):4208. doi: 10.1038/s41598-023-31039-3. PMID: 36918613; PMCID: PMC10015037.
- Gurera, J. W., & Isaacowitz, D. M. (2019). Emotion regulation and emotion perception in aging: A perspective on age-related differences and similarities. In N. Srinivasan (Ed.), *Progress in Brain Research* (Vol. 247, pp. 329-351). Elsevier. <https://doi.org/10.1016/bs.pbr.2019.02.007>
- Gutiérrez-Hernández, M. E., Fanjul Rodríguez, L. F., Díaz Megolla, A., Oyanadel, C., & Peñate Castro, W. (2023). The Effect of Daily Meditative Practices Based on Mindfulness and Self-Compassion on Emotional Distress under Stressful Conditions: A Randomized Controlled Trial. *European Journal of Investigation in Health, Psychology and Education*, 13(4), 762-775.

- Hafenbrack A.C., Cameron L.D., Spreitzer G.M., Zhang C., Noval L.J., Shaffakat S. Helping people by being in the present: Mindfulness increases prosocial behavior. *Organ. Behav. Hum. Decis. Process.* 2020;159:21–38. doi: 10.1016/j.obhdp.2019.08.005
- Hagerman, L.-A., Manankil-Rankin, L., & Schwind, J. (2020). Self-compassion in undergraduate nursing: an integrative review [Review of Self-compassion in undergraduate nursing: an integrative review]. *International Journal of Nursing Education Scholarship*, 17(1). De Gruyter. <https://doi.org/10.1515/ijnes-2020-0021>
- Hall, K., Youssef, G. J., Simpson, A., Sloan, E., Graeme, L., Perry, N., Moulding, R., Baker, A., Beck, A., & Staiger, P. K. (2021). An Emotion Regulation and Impulse Control (ERIC) Intervention for Vulnerable Young People: A Multi-Sectoral Pilot Study. *Frontiers in Psychology*, 12. <https://doi.org/10.3389/fpsyg.2021.554100>
- Hasking, P., Chen, N. T. M., Chiu, V., Gray, N., Gross, J. J., & Boyes, M. (2023). “Managing emotion”: Open label trial and waitlist controlled trial of an emotion regulation program for university students. *Journal of American College Health*, 72(9), 3297. <https://doi.org/10.1080/07448481.2022.2155468>
- Heffer, T., & Willoughby, T. (2017). A count of coping strategies: A longitudinal study investigating an alternative method to understanding coping and adjustment. *PLoS ONE*, 12(10). <https://doi.org/10.1371/journal.pone.0186057>
- Hlabangana, V., & Hearn, J. H. (2019). Depression in partner caregivers of people with neurological conditions; associations with self-compassion and quality of life. *Journal of Mental Health*, 29(2), 176–181. doi:10.1080/09638237.2019.1630724
- Hölzel, B. K., Lazar, S. W., Gard, T., Schuman-Olivier, Z., Vago, D. R., & Ott, U. (2011). How does mindfulness meditation work? Proposing mechanisms of action from a

conceptual and neural perspective. *Perspectives on psychological science*, 6(6), 537-559.

- Hsieh, -C.-C., Yu, C.-J., Chen, H.-J., Chen, Y.-W., Chang, N.- T., & Hsiao, F.-H. (2019). Dispositional mindfulness, self-compassion, and compassion from others as moderators between stress and depression in caregivers of patients with lung cancer. *Psycho-Oncology*, 28(7), 1498–1505. doi:10.1002/pon.5106
- Hu, T., Zhang, D., Wang, J., Mistry, R., Ran, G., & Wang, X. (2014). Relation between Emotion Regulation and Mental Health: A Meta-Analysis Review [Review of Relation between Emotion Regulation and Mental Health: A Meta-Analysis Review]. *Psychological Reports*, 114(2), 341. SAGE Publishing. <https://doi.org/10.2466/03.20.pr0.114k22w4>
- Huang, C. C., Yang, M. F., Geng, Y., Chen, Y. F., Cheung, S. P., Deng, G. S., et al. (2021). Adverse childhood experiences and mindfulness in Chinese college students during the COVID-19 pandemic. *Frontiers Psychology*. 12:619128. doi: 10.3389/fpsyg.2021.619128
- Huang, J. (2022). The Role of English as a Foreign Language Teachers' Mindfulness and Compassion in Fostering Students' Foreign Language Enjoyment [Review of The Role of English as a Foreign Language Teachers' Mindfulness and Compassion in Fostering Students' Foreign Language Enjoyment]. *Frontiers in Psychology*, 13. Frontiers Media. <https://doi.org/10.3389/fpsyg.2022.899298>
- Ibáñez, A., Matallana, D., & Miller, B. L. (2023). Can prosocial values improve brain health? *Frontiers in Neurology*, 14. <https://doi.org/10.3389/fneur.2023.1202173>
- Israel, S., Reuveni, O., Glick, I., & Levit-Binnun, N. (2023). Accepting things as they are: Dispositional mindfulness, decentering, self-compassion, and the impact of

- stuttering on adults who stutter. *American Journal of Speech-Language Pathology*, 32(4), 1578-1594.
- Jimenez, S. S., Niles, B. L., & Park, C. L. (2010). A mindfulness model of affect regulation and depressive symptoms: Positive emotions, mood regulation expectancies, and self-acceptance as regulatory mechanisms. *Personality and individual differences*, 49(6), 645-650. <https://doi.org/10.1016/j.paid.2010.05.041>
- Jones, K.C., Welton, S.R., Oliver, T.C., & Thoburn, J.W. (2011). Mindfulness, spousal attachment, and marital satisfaction: A mediated model. *The Family Journal*, 19(4), 357-361.
- Kabat-Zinn, J. (1994). *Wherever you go, there you are: Mindfulness meditation in everyday life*. New York: Hyperion Books.
- Karing, C., & Beelmann, A. (2019). Cognitive emotional regulation strategies: Potential mediators in the relationship between mindfulness, emotional exhaustion, and satisfaction?. *Mindfulness*, 10(3), 459-468.
- Kazdin, Alan E. 2007. Mediators and Mechanisms of Change in Psychotherapy. *Annual Review of Clinical Psychology* 3: 1–27
- Keng, S., Smoski, M. J., & Robins, C. J. (2011). Effects of mindfulness on psychological health: A review of empirical studies [Review of Effects of mindfulness on psychological health: A review of empirical studies]. *Clinical Psychology Review*, 31(6), 1041. Elsevier BV. <https://doi.org/10.1016/j.cpr.2011.04.006>
- Kessler, R. C., Birnbaum, H., Demler, O., Falloon, I. R., Gagnon, E., Guyer, M., Howes, M. J., Kendler, K. S., Shi, L., Walters, E., & Wu, E. Q. (2005). The Prevalence and Correlates of Nonaffective Psychosis in the National Comorbidity Survey Replication (NCS-R). *Biological Psychiatry*, 58(8), 668–676. <https://doi.org/10.1016/j.biopsych.2005.04.034>

- Khalili, N., Bahrami, M., & Ashouri, E. (2021). Self-Compassion and Adherence to Treatment in Patients with Cancer. *Iranian Journal of Nursing and Midwifery Research*, 26(5), 406. [https://doi.org/10.4103/ijnmr.ijnmr\\_174\\_20](https://doi.org/10.4103/ijnmr.ijnmr_174_20)
- Khoury, B., Sharma, M., Rush, S. E., & Fournier, C. (2015). Mindfulness-based stress reduction for healthy individuals: A meta-analysis. *Journal of Psychosomatic Research*, 78(6), 519-528.
- Kiken, L. G., Lundberg, K. B., & Fredrickson, B. L. (2017). Being present and enjoying it: Dispositional mindfulness and savoring the moment are distinct, interactive predictors of positive emotions and psychological health. *Mindfulness*, 8(5), 1280–1290. <https://doi.org/10.1007/s12671-017-0704-3>
- Kil, H., O'Neill, D., & Grusec, J. E. (2021). Prosocial motivation as a mediator between dispositional mindfulness and prosocial behavior. *Personality and Individual Differences*, 177, 110806.
- Kim, E., Gentile, D. A., Anderson, C. A., & Barlett, C. P. (2022). Are mindful people less aggressive? The role of emotion regulation in the relations between mindfulness and aggression. *Aggressive Behavior*, 48(6), 546. <https://doi.org/10.1002/ab.22036>
- Klussman, K., Curtin, N., Langer, J., & Nichols, A. (2020). Examining the effect of mindfulness on well-being: self-connection as a mediator. *Journal of Pacific Rim Psychology*, 14. <https://doi.org/10.1017/prp.2019.29>
- Kong, F., Wang, X., & Zhao, J. (2014). Dispositional mindfulness and life satisfaction: The role of core self-evaluations. *Personality and individual differences*, 56, 165-169.
- Koole, S. L. (2009, January). The psychology of emotion regulation: An integrative review. *Cognition & Emotion*, 23(1), 4–41. <https://doi.org/10.1080/02699930802619031>
- Kotera, Y., Mayer, C.-H., & Vanderheiden, E. (2021). Cross-Cultural Comparison of Mental Health Between German and South African Employees: Shame, Self-Compassion,

- Work Engagement, and Work Motivation. *Frontiers in Psychology*, 12. <https://doi.org/10.3389/fpsyg.2021.627851>
- Kovich, M. K., Simpson, V. L., Foli, K. J., Hass, Z., & Phillips, R. G. (2023). Application of the PERMA Model of Well-being in Undergraduate Students. *International journal of community well-being*, 6(1), 1–20. <https://doi.org/10.1007/s42413-022-00184-4>
- Kuo, S. (2022). Well-Being of Teachers: The Role of Efficacy of Teachers and Academic Optimism [Review of Well-Being of Teachers: The Role of Efficacy of Teachers and Academic Optimism]. *Frontiers in Psychology*, 12. Frontiers Media. <https://doi.org/10.3389/fpsyg.2021.831972>
- Kuyken, W., Watkins, E., Holden, E., White, K., Taylor, R. S., Byford, S., Evans, A., Radford, S., Teasdale, J., & Dalgleish, T. (2010). How does mindfulness-based cognitive therapy work? *Behaviour Research and Therapy*, 48(11), 1105–1112.
- Laghi, F., Lonigro, A., Pallini, S., & Baiocco, R. (2018). Emotion Regulation and Empathy: Which Relation with Social Conduct? *The Journal of Genetic Psychology*, 179(2), 62. <https://doi.org/10.1080/00221325.2018.1424705>
- Lai, J., Rahmani, A. M., Yunusova, A., Rivera, A., Labbaf, S., Hu, S., Dutt, N., Jain, R., & Borelli, J. L. (2021). Using Multimodal Assessments to Capture Personalized Contexts of College Student Well-being in 2020: Case Study. *JMIR Formative Research*, 5(5). <https://doi.org/10.2196/26186>
- Lalor, J., & Khoshfetrat, A. (2024). An examination of the association between mindfulness and compassion for others in psychotherapists: A mediating role of self-compassion. *Counselling and Psychotherapy Research*, 24(3), 1006-1013.

- Lane, J. A. (2015). Counseling Emerging Adults in Transition: Practical Applications of Attachment and Social Support Research. *The Professional Counselor*, 5(1), 15. <https://doi.org/10.15241/jal.5.1.15>
- Lathren, C., Rao, S. S., Park, J., & Bluth, K. (2021). Self-Compassion and Current Close Interpersonal Relationships: a Scoping Literature Review. *Mindfulness*, 12(5), 1078. <https://doi.org/10.1007/s12671-020-01566-5>
- Law, B. M. F., Siu, A. M. H., & Shek, D. T. L. (2012). Recognition for Positive Behavior as a Critical Youth Development Construct: Conceptual Bases and Implications on Youth Service Development [Review of Recognition for Positive Behavior as a Critical Youth Development Construct: Conceptual Bases and Implications on Youth Service Development]. *The Scientific World JOURNAL*, 2012, 1. Hindawi Publishing Corporation. <https://doi.org/10.1100/2012/809578>
- Leary, M. R., Tate, E. B., Adams, C. E., Batts Allen, A., & Hancock, J. (2007). Selfcompassion and reactions to unpleasant self-relevant events: The implications of treating oneself kindly. *Journal of Personality and Social Psychology*, 92(5): 887–904. <http://doi:10.1037/0022-3514.92.5.887>
- Leersnyder, J. D., Boiger, M., & Mesquita, B. (2013). Cultural regulation of emotion: individual, relational, and structural sources. *Frontiers in Psychology*, 4. <https://doi.org/10.3389/fpsyg.2013.00055>
- Li, Q., & Hu, G. (2023). Positive impacts of perceived social support on prosocial behavior: the chain mediating role of moral identity and moral sensitivity. *Frontiers in Psychology*, 14. <https://doi.org/10.3389/fpsyg.2023.1234977>
- Linehan, M. M. (2018). *Dialectical Behavior Therapy for Borderline Personality Disorder: A Guide for Therapists*. Guilford Press.

- Liu, X., Fang, H., Tian, T., Guo, F., Zhang, J., & Zhong, Y. (2025). Ethical leadership and nurses' job performance: the mediating role of self-compassion. *Frontiers in Public Health*, 12. <https://doi.org/10.3389/fpubh.2024.1535065>
- Lloyd, J., Muers, J., Patterson, T. G., & Marczak, M. (2019). Self-compassion, coping strategies, and caregiver burden in caregivers of people with dementia. *Clinical Gerontologist*, 42(1), 47–59. doi:10.1080/07317115.2018.1461162
- López, A., Pinto-Gouveia, J., & Cunha, M. (2021). "Mindfulness and emotion regulation in borderline personality disorder: A systematic review and meta-analysis." *Journal of Personality Disorders*, 35(5), 634-650.
- Lordanić, L., & Junaković, I. T. (2022). Mindfulness and Mental Health: The Mediating Role of Cognitive Emotion Regulation. *Društvena istraživanja*, 31(4), 577-596.
- Lutz, J. G., Herwig, U., Opialla, S., Hittmeyer, A., Jäncke, L., Rufer, M., Holtforth, M. G., & Brühl, A. B. (2013). Mindfulness and emotion regulation—an fMRI study. *Social Cognitive and Affective Neuroscience*, 9(6), 776. <https://doi.org/10.1093/scan/nst043>
- Lynn, S., Satyal, M. K., Smith, A. J., Tasnim, N., Gyamfi, D., English, D. F., Suzuki, W. A., & Basso, J. C. (2022). Dispositional mindfulness and its relationship to exercise motivation and experience. *Frontiers in Sports and Active Living*, 4. <https://doi.org/10.3389/fspor.2022.934657>
- Ma, Y., & Fang, S. (2019). Adolescents' Mindfulness and Psychological Distress: The Mediating Role of Emotion Regulation. *Frontiers in Psychology*, 10. <https://doi.org/10.3389/fpsyg.2019.01358>
- MacBeth, A., & Gumley, A. (2012). Exploring compassion: A meta-analysis of the association between self-compassion and psychopathology. *Clinical Psychology Review*, 32(6), 545–552. doi:10.1016/j.cpr.2012.06.003

- Marina, K. (2017). The Self-Compassion Solution. *Scientific American*, 27, 64.  
<https://doi.org/10.1038/scientificamericanmind0517-64>
- Martin, R., & Ochsner, K. N. (2016). The neuroscience of emotion regulation development: implications for education. *Current Opinion in Behavioral Sciences*, 10, 142.  
<https://doi.org/10.1016/j.cobeha.2016.06.006>
- Martins, M. C., Santos, C., Fernandes, M., & Veríssimo, M. (2022). Attachment and the Development of Prosocial Behavior in Children and Adolescents: A Systematic Review [Review of Attachment and the Development of Prosocial Behavior in Children and Adolescents: A Systematic Review]. *Children*, 9(6), 874. Multidisciplinary Digital Publishing Institute.  
<https://doi.org/10.3390/children9060874>
- Mastorci, F., Lazzeri, M. F. L., Vassalle, C., & Pingitore, A. (2024). The Transition from Childhood to Adolescence: Between Health and Vulnerability [Review of The Transition from Childhood to Adolescence: Between Health and Vulnerability]. *Children*, 11(8), 989. Multidisciplinary Digital Publishing Institute.  
<https://doi.org/10.3390/children11080989>
- Mateu, D. N., Alonso-Larza, L., Gómez-Domínguez, M. T., Prado-Gascó, V., & Valero-Moreno, S. (2020). I'm Not Good for Anything and That's Why I'm Stressed: Analysis of the Effect of Self-Efficacy and Emotional Intelligence on Student Stress Using SEM and QCA. *Frontiers in Psychology*, 11.  
<https://doi.org/10.3389/fpsyg.2020.00295>
- Matud, M. P., Díaz, A., Bethencourt, J. M., & Ibáñez, I. (2020). Stress and Psychological Distress in Emerging Adulthood: A Gender Analysis. *Journal of clinical medicine*, 9(9), 2859. <https://doi.org/10.3390/jcm9092859>

- Maynard, P. G., van Kessel, K., & Feather, J. S. (2022, November 12). Self-forgiveness, self-compassion and psychological health: A qualitative exploration of change during compassion focused therapy groups. *Psychology and Psychotherapy: Theory, Research and Practice*, 96(2), 265–280. <https://doi.org/10.1111/papt.12435>
- McCabe, M., Althof, S.E., Assalian, P., Chevret-Measson, M., Leiblum, S.R., Simonelli, C., & Wylie, K. (2010). Psychological and interpersonal dimensions of sexual function and dysfunction. *The Journal of Sexual Medicine*, 7(1pt2), 327-336
- McLaughlin, K. A., Hatzenbuehler, M. L., Mennin, D. S., & Nolen-Hoeksema, S. (2011). Emotion dysregulation and adolescent psychopathology: A prospective study. *Behaviour Research and Therapy*, 49(9), 544. <https://doi.org/10.1016/j.brat.2011.06.003>
- Megawati, E., & Herdiyanto, Y. K. (2016). Hubungan antara Perilaku Prososial dengan Psychological Well-Being pada Remaja. *Jurnal Psikologi Udayana*, 3(1). <https://doi.org/10.24843/jpu.2016.v03.i01.p13>
- Meneo, D., Martoni, M., Giannandrea, A., Tengattini, V., & Baglioni, C. (2024). Mindfulness and self-compassion in dermatological conditions: a systematic narrative review. *Psychology & health*, 39(2), 268-300.
- Mera, S., Zimmer-Gembeck, M. J., & Conlon, E. G. (2023). Emerging adults' experience of mindful parenting: distinct associations with their dispositional and interpersonal mindfulness, self-compassion, and adjustment. *Emerging Adulthood*, 11(5), 1180-1195.
- Mikulincer, M., Omri Gillath, and Phillip R. Shaver. 2002. Activation of the attachment system in adulthood: Threat-related primes increase the accessibility of mental representations of attachment figures. *Journal of Personality and Social Psychology* 83: 881–95

- Mohebi, M., Zandi, H. G., Beshārat, M. A., & Najafabadi, M. G. (2020). Resilience and Emotional Reactions to Failure Mediated by Self-compassion and Emotion Regulation in Martial Artists. *Journal of Exercise Science and Medicine*, 12(1), 245. <https://doi.org/10.32598/jesm.12.1.12>
- Monsillion, J., Zebdi, R., & Romo, L. (2023). School Mindfulness-Based Interventions for Youth, and Considerations for Anxiety, Depression, and a Positive School Climate—A Systematic Literature Review [Review of School Mindfulness-Based Interventions for Youth, and Considerations for Anxiety, Depression, and a Positive School Climate—A Systematic Literature Review]. *Children*, 10(5), 861. Multidisciplinary Digital Publishing Institute. <https://doi.org/10.3390/children10050861>
- Montero-Marín, J., Tops, M., Manzanera, R., Demarzo, M., Álvarez-Mon, M., & García-Campayo, J. (2015). Mindfulness, Resilience, and Burnout Subtypes in Primary Care Physicians: The Possible Mediating Role of Positive and Negative Affect. *Frontiers in Psychology*, 6. <https://doi.org/10.3389/fpsyg.2015.01895>
- Moore, S. K., Okst, K., Smith, L., Fatkin, T., Creedon, T., Fredericksen, A. K., ... & Schuman-Olivier, Z. (2022). “Today I can look in the mirror and like myself”: effects of a trauma-informed mindful recovery program on self-compassion. *Frontiers in Psychology*, 13, 780383.
- Moscardini, E. H., Robinson, A., Gerner, J., & Tucker, R. P. (2023). Perceived stress and suicidal ideation: The role of dispositional mindfulness. *Suicide and Life-Threatening Behavior*, 53(5), 776–786. <https://doi.org/10.1111/sltb.12982>
- Munroe, M., Al-Refae, M., Chan, H. W., & Ferrari, M. (2021). Using self-compassion to grow in the face of trauma: The role of positive reframing and problem-focused coping

- strategies. *Psychological Trauma Theory Research Practice and Policy*, 14.  
<https://doi.org/10.1037/tra0001164>
- Murfield, J., Moyle, W., O'Donovan, A., & Ware, R. S. (2024). The role of self-compassion, dispositional mindfulness, and emotion regulation in the psychological health of family carers of older adults. *Clinical Gerontologist*, 47(2), 316-328.
- Muris, P., Bongers, K., Schenning, C., Meesters, C., & Otgaar, H. (2022). Self-Compassion Correlates of Anxiety and Depression Symptoms in Youth: A Comparison of Two Self-Compassion Measures. *Children*, 9(12), 1930.  
<https://doi.org/10.3390/children9121930>
- Murphy, M. J., Mermelstein, L. C., Edwards, K. M., & Gidycz, C. A. (2012). The benefits of dispositional mindfulness in physical health: A longitudinal study of female college students. *Journal of American College Health*, 60(5), 341-348.  
<http://dx.doi.org/10.1080/07448481.2011.629260>
- Mustafa, M. B., Rani, N. H. M., Bistaman, M. N., Salim, S. S. S., Ahmad, A., Zakaria, N. H., & Safian, N. A. A. (2020). The Relationship between Psychological Well-Being and University Students Academic Achievement. *International Journal of Academic Research in Business and Social Sciences*, 10(7).  
<https://doi.org/10.6007/ijarbss/v10-i7/7454>
- Nagy, S. M., Pickett, S. M., & Hunsanger, J. A. (2022). The relationship between mindfulness, PTSD-related sleep disturbance, and sleep quality: Contributions beyond emotion regulation difficulties. *Psychological Trauma: Theory, Research, Practice, and Policy*, 14(7), 1073.
- Naik, P., Harris, V., & Forthun, L. (2013). Mindfulness: An Introduction: FCS2335/FY1381, 9/2013. *Edis*, 2013(8).

- Neff, K. (2003b). Self-Compassion: An Alternative Conceptualization of a Healthy Attitude Toward Oneself. *Self and Identity*, 2(2), 85–101. <https://doi.org/10.1080/15298860309032>
- Neff, K. D. & Germer, C. (2017). Self-Compassion and Psychological Wellbeing. In J. Doty (Ed.) *Oxford Handbook of Compassion Science*, Chap. 27. Oxford University Press.
- Neff, K. D. (2003). Self-Compassion: An Alternative Conceptualization of a Healthy Attitude Toward Oneself. *Self and Identity*, 2(2), 85. <https://doi.org/10.1080/15298860309032>
- Neff, K. D. (2003). The Development and Validation of a Scale to Measure Self-Compassion. *Self and Identity*, 2(3), 223. <https://doi.org/10.1080/15298860309027>
- Neff, K. D. (2009). The Role of Self-Compassion in Development: A Healthier Way to Relate to Oneself. *Human Development*, 52(4), 211. <https://doi.org/10.1159/000215071>
- Neff, K. D. (2011). Self-Compassion, Self-Esteem, and Well-Being. *Social and Personality Psychology Compass*, 5(1), 1. <https://doi.org/10.1111/j.1751-9004.2010.00330.x>
- Neff, K. D. (2012). The science of self-compassion. In C. Germer & R. Siegel (Eds.), *Compassion and Wisdom in Psychotherapy* (pp. 79-92). New York: Guilford Press.
- Neff, K. D., & Dahm, K. A. (2015). Self-Compassion: What It Is, What It Does, and How It Relates to Mindfulness. In *Springer eBooks* (p. 121). Springer Nature. [https://doi.org/10.1007/978-1-4939-2263-5\\_10](https://doi.org/10.1007/978-1-4939-2263-5_10)
- Neff, K. D., & Germer, C. K. (2013). A pilot study and randomized controlled trial of the Mindful Self-Compassion program. *Journal of Clinical Psychology*, 69, 28–44. <https://doi.org/10.1002/jclp.21923>.

- Neff, K. D., & Seppälä, E. (2016). *Compassion, Well-Being, and the Hypo-egoic Self*. In Oxford University Press eBooks. Oxford University Press. <https://doi.org/10.1093/oxfordhb/9780199328079.013.13>
- Oberle, E., Ji, X. R., & Molyneux, T. M. (2022). Pathways From Prosocial Behaviour to Emotional Health and Academic Achievement in Early Adolescence. *The Journal of Early Adolescence*, 43(5), 632. <https://doi.org/10.1177/02724316221113349>
- Osborne, E. L., Ainsworth, B., Chadwick, P., & Atkinson, M. J. (2023). The role of emotion regulation in the relationship between mindfulness and risk factors for disordered eating: A longitudinal mediation analysis. *International Journal of Eating Disorders*, 56(2), 458-463.
- Padhy, M., Monteiro, S. R., & Chelli, K. (2020). Coping competence, mindfulness, and well-being of Indian adolescents. *Psychological studies*, 65, 531-535.
- Padhy, M., Hariharan, M., Angiel, P. R., Kavya, C., & Monteiro, S. R. (2022). Role of mindfulness in well-being: Mediating effect of emotion regulation. *International Journal of Happiness and Development*, 7(4), 354-366.
- Pepping, C. A., Duvenage, M., Cronin, T. J., & Lyons, A. (2016). Adolescent mindfulness and psychopathology: The role of emotion regulation. *Personality and Individual Differences*, 99, 302. <https://doi.org/10.1016/j.paid.2016.04.089>
- Perzow, S. E. D., Bray, B. C., Wadsworth, M. E., Young, J. F., & Hankin, B. L. (2021). Individual Differences in Adolescent Coping: Comparing a Community Sample and a Low-SES Sample to Understand Coping in Context. *Journal of Youth and Adolescence*, 50(4), 693. <https://doi.org/10.1007/s10964-021-01398-z>
- Petersen, A. C., & Hamburg, B. A. (1986). Adolescence: A developmental approach to problems and psychopathology. *Behavior Therapy*, 17(5), 480. [https://doi.org/10.1016/s0005-7894\(86\)80090-9](https://doi.org/10.1016/s0005-7894(86)80090-9)

- Pfattheicher S, Sassenrath C, Schindler S: Feelings for the suffering of others and the environment: Compassion fosters proenvironmental tendencies. *Env. Beh.* 2015, 48:929-945. <https://doi.org/10.1177/0013916515574549>
- Pierce, R. K. (2017). *Mindfulness: Where Religion Meets Science*. Washington University in St. Louis Arts & Sciences. Retrieved on May 15, 2024, from <https://artsci.wustl.edu/ampersand/mindfulness-where-religion-meets-science#:~:text=The%20term%20%E2%80%9Cmindfulness%E2%80%9D%20is%20a,of%20the%20Noble%20Eightfold%20Path>
- Plantade-Gipch, A., Bruno, J., Strub, L., Bouvard, M., & Martin-Krumm, C. (2023). Emotional regulation, attachment style, and assertiveness as determinants of well-being in emerging adults. *Frontiers in Education*, 8. <https://doi.org/10.3389/feduc.2023.1058519>
- Póka, T., Barta, A., & Mérő, L. (2023). Self-Compassion Mediates the Relationships Between University Students' Mindfulness, Dysfunctional Attitudes, and Various Distress and Well-Being Indicators. *Journal of Research in Higher Education*, 7(2).
- Potter, G. K., Hunter, P. V., & Morrison, T. G. (2019). Dispositional Mindfulness in Irritable Bowel Syndrome: the Mediating Role of Symptom Interference and Self-Compassion. *Mindfulness*, 11(2), 462–471. <https://doi.org/10.1007/s12671-019-01282-9>
- Prakash, R. S., Leon, A. A. D., Patterson, B., Schirda, B., & Janssen, A. (2014). Mindfulness and the aging brain: a proposed paradigm shift [Review of Mindfulness and the aging brain: a proposed paradigm shift]. *Frontiers in Aging Neuroscience*, 6. Frontiers Media. <https://doi.org/10.3389/fnagi.2014.00120>
- Pratscher, S. D., Rose, A. J., Markovitz, L., & Bettencourt, A. (2017). Interpersonal Mindfulness: Investigating Mindfulness in Interpersonal Interactions, co-

- Rumination, and Friendship Quality. *Mindfulness*, 9(4), 1206–1215.  
<https://doi.org/10.1007/s12671-017-0859-y>
- Quinlan, H., Hadden, K. L., & Storey, D. P. (2021). The Relationship Between Self-Compassion, Childhood Maltreatment and Attachment Orientation In High-Risk Adolescents. *Youth & Society*, 54(5), 890.  
<https://doi.org/10.1177/0044118x211002857>
- Quinn-Nilas, C., & Milhausen, R. R. (2024). Mindfulness networks: Analyzing associations with self-compassion, other-compassion, need fulfillment, and satisfaction in midlife married Canadians. *Personal Relationships*.
- Rahnama, N., Malekzadeh, G., & Moshtari, M. (2023). Mindflow in crisis: the mediating role of psychological capital and coping competence between mindfulness and flow during COVID-19.
- Rakesh, Pandey., Satchit, Prasun, Mandal., Meenakshi, Shukla., Vishnukant, Tripathi., Elena, Antonova., Veena, Kumari. (2023). 3. Attenuated maladaptive emotion processing as a potential mediator of the relationship between dispositional mindfulness and mental health. *Heliyon*, doi: 10.1016/j.heliyon.2023.e21934
- Raugh, I. M., & Strauss, G. P. (2024). Integrating mindfulness into the extended process model of emotion regulation: The dual-mode model of mindful emotion regulation. *Emotion*, 24(3), 847–866. <https://doi.org/10.1037/emo0001308>
- Reeves, M., Vogt, F., & Marks, E. (2021). Dispositional mindfulness, gratitude and self-compassion: factors affecting tinnitus distress. *Mindfulness*, 12, 1002-1008.
- Rosales-Villacrés, M. D. L., Oyanadel, C., Changotasig-Loja, D., Betancourt-Peters, I., & Peñate-Castro, W. (2021). The role of mindfulness in the intimate relationships and psychological wellbeing in emerging adulthood. *Social Sciences*, 10(7), 259.  
<https://doi.org/10.3390/socsci10070259>

- Ruiz, W. D. G., & Yabut, H. J. (2024). Autonomy and identity: the role of two developmental tasks on adolescent's wellbeing. *Frontiers in Psychology*, 15. <https://doi.org/10.3389/fpsyg.2024.1309690>
- Rupprecht, S., Falke, P., Kohls, N., Tamdjidi, C., Wittmann, M., & Kersemaekers, W. M. (2019). Mindful Leader Development: How Leaders Experience the Effects of Mindfulness Training on Leader Capabilities. *Frontiers in Psychology*, 10. <https://doi.org/10.3389/fpsyg.2019.01081>
- Sahdra, B. K., Ciarrochi, J., Fraser, M. I., Yap, K., Haller, E., Hayes, S. C., Hofmann, S. G., & Gloster, A. T. (2023). The Compassion Balance: Understanding the Interrelation of Self- and Other-Compassion for Optimal Well-being. *Mindfulness*, 14(8), 1997. <https://doi.org/10.1007/s12671-023-02187-4>
- Sahi, R. S., Eisenberger, N. I., & Silvers, J. A. (2023). Peer facilitation of emotion regulation in adolescence [Review of Peer facilitation of emotion regulation in adolescence]. *Developmental Cognitive Neuroscience*, 62, 101262. Elsevier BV. <https://doi.org/10.1016/j.dcn.2023.101262>
- Salgó, E., Szeghalmi, L., Bajzát, B., Berán, E., & Unoka, Z. (2021). Emotion regulation, mindfulness, and self-compassion among patients with borderline personality disorder, compared to healthy control subjects. *Plos one*, 16(3), e0248409.
- Sandham, C., & Deacon, E. (2023). The role of self-compassion in diabetes management: A rapid review [Review of The role of self-compassion in diabetes management: A rapid review]. *Frontiers in Psychology*, 14. Frontiers Media. <https://doi.org/10.3389/fpsyg.2023.1123157>
- Scafuto, F., Quinto, R. M., Ghiroldi, S., Montecucco, N. F., Presaghi, F., Iani, L., & Vincenzo, F. D. (2024). The mediation role of emotion regulation strategies on the relationship between mindfulness effects, psychological well-being and distress

- among youths: findings from a randomized controlled trial. *Current Psychology*, 43(29), 24295. <https://doi.org/10.1007/s12144-024-06081-7>
- Schonert-Reichl, K. A., & Lawlor, M. S. (2010). The Effects of a Mindfulness-Based Education Program on Pre- and Early Adolescents' Well-Being and Social and Emotional Competence. *Mindfulness*, 1(3), 137. <https://doi.org/10.1007/s12671-010-0011-8>
- Schonert-Reichl, K. A., Oberle, E., Lawlor, M. S., Abbott, D., Thomson, K., Oberlander, T. F., & Diamond, A. (2014). Enhancing cognitive and social–emotional development through a simple-to-administer mindfulness-based school program for elementary school children: A randomized controlled trial. *Developmental Psychology*, 51(1), 52. <https://doi.org/10.1037/a0038454>
- Schreiber, L. R. N., Grant, J. E., & Orlaug, B. L. (2012). Emotion regulation and impulsivity in young adults. *Journal of Psychiatric Research*, 46(5), 651. <https://doi.org/10.1016/j.jpsychires.2012.02.005>
- Sesso, G., Brancati, G. E., Fantozzi, P., Inguaggiato, E., Milone, A., & Masi, G. (2021). Measures of empathy in children and adolescents: A systematic review of questionnaires [Review of Measures of empathy in children and adolescents: A systematic review of questionnaires]. *World Journal of Psychiatry*, 11(10), 876. Baishideng Publishing Group. <https://doi.org/10.5498/wjp.v11.i10.876>
- Sevinc G, Lazar SW. How does mindfulness training improve moral cognition: A theoretical and experimental framework for the study of embodied ethics. *Curr. Opin. Psychol.* 2019; 28:268–272. doi: 10.1016/j.copsyc.2019.02.006
- Shahin, M. A. H., Hamed, S. A., & Taha, S. M. (2021). Correlation of self-compassion and spiritual well-being with drug craving in people with substance use disorders.

Middle East Current Psychiatry, 28(1). <https://doi.org/10.1186/s43045-021-00132-6>

- Shang, Y. (2024). Teachers' Emotion Regulation Strategies in Online Teaching Mode. *Journal of Education, Humanities and Social Sciences*, 26, 1024-1029.
- Shapiro, S. L., Carlson, L. E., Astin, J. A., & Freedman, B. (2006). Mechanisms of mindfulness. *Journal of Clinical Psychology*, 62, 373–386. <https://doi.org/10.1002/jclp.20237>
- Siegel, R. D., Germer, C. K., & Olendzki, A. (2009). Mindfulness: What is it? Where did it come from? In F. Didonna (Ed.), *Clinical Handbook of Mindfulness* (pp. 17-35). Springer. <http://doi: 10.1007/978-0-387-09593-6>
- Simonsson, O., Fisher, S. D., & Martin, M. (2020). Awareness and Experience of Mindfulness in Britain. *Sociological Research Online*, 26(4), 833. <https://doi.org/10.1177/1360780420980761>
- Strand, M., & Stige, S. H. (2021). Combining mindfulness and compassion in the treatment of complex trauma – a theoretical exploration. *European Journal of Trauma & Dissociation*, 5(3), 100217. <https://doi.org/10.1016/j.ejtd.2021.100217>
- Stutts, L. A. (2022). Increasing Self-Compassion: Review of the Literature and Recommendations. *PubMed*, 20(2). <https://doi.org/10.59390/wszk3327>
- Tekin, S. B., Ay, A. M., & Kenar, A. N. İ. (2025). Mental health, self-compassion, and compassion fatigue in physicians: a cross-sectional study. *Scientific Reports*, 15(1). <https://doi.org/10.1038/s41598-025-03628-x>
- Sünbül, Z. A., & Özcan, N. A. (2022). The Mediating Role of Negative Mood States and Body Responsiveness in the Associations of Mindfulness and Self-Compassion with Life Satisfaction. *Studia Psychologica*, 64(4), 343. <https://doi.org/10.31577/sp.2022.04.858>

- Svendsen, J. L., Kvernenes, K. V., Wiker, A. S., & Dundas, I. (2016). Mechanisms of mindfulness: Rumination and self-compassion. *Nordic Psychology*, 69(2), 71. <https://doi.org/10.1080/19012276.2016.1171730>
- Tali, E., Potharst, E. S., Bruin, E. I. de, & Utens, E. M. W. J. (2023). Self-Compassion and Anxiety in Adolescents with and without Anxiety Disorder. *Children*, 10(7), 1181. <https://doi.org/10.3390/children10071181>
- Tang, Y.-Y., & Tang, R. (2020). Personality and meditation. In Y. Y. Tang (Ed.), *The Neuroscience of Meditation: Understanding Individual Differences* (pp. 15-36). Academic Press.
- Tekin, S. B., Ay, A. M., & Kenar, A. N. İ. (2025). Mental health, self-compassion, and compassion fatigue in physicians: a cross-sectional study. *Scientific Reports*, 15(1). <https://doi.org/10.1038/s41598-025-03628-x>
- Theurel, A., & Gentaz, É. (2018). The regulation of emotions in adolescents: Age differences and emotion-specific patterns. *PLoS ONE*, 13(6). <https://doi.org/10.1371/journal.pone.0195501>
- Thomas, L. (2023). Clustered lifestyle risk factors linked to poor mental health in early adulthood. *News Medical Life Sciences*. Retrieved March 15, 2024, from <https://www.news-medical.net/news/20230208/Clustered-lifestyle-risk-factors-linked-to-poor-mental-health-in-early-adulthood.aspx#:~:text=From%2020%2D29%20years%2C%20this,family%2C%20friends%20or%20the%20community.>
- Thompson, R. A. (1991). Emotional regulation and emotional development. *Educational Psychology Review*, 3(4), 269. <https://doi.org/10.1007/bf01319934>

- Thompson, R. A. (1994). EMOTION REGULATION: A THEME IN SEARCH OF DEFINITION. *Monographs of the Society for Research in Child Development*, 59, 25. <https://doi.org/10.1111/j.1540-5834.1994.tb01276.x>
- Thompson, R. A., Meyer, S., & Jochem, R. (2008). Emotion Regulation. In M. M. Haith & J. B. Benson (Eds.), *Encyclopedia of Infant and Early Childhood Development* (pp. 431–441). Academic Press. <https://doi.org/10.1016/B978-012370877-9.00055-4>
- Thümmler, R., Engel, E., & Bartz, J. (2022). Strengthening Emotional Development and Emotion Regulation in Childhood—As a Key Task in Early Childhood Education. *International Journal of Environmental Research and Public Health*, 19(7), 3978. <https://doi.org/10.3390/ijerph19073978>
- Tillmann, B., Dowling, W. J., Lalitte, P., Molin, P., Schulze, K., Poulin-Charronnat, B., Schoen, D., & Bigand, E. (2012). Influence of Expressive Versus Mechanical Musical Performance on Short-term Memory for Musical Excerpts. *Music Perception An Interdisciplinary Journal*, 30(4), 419. <https://doi.org/10.1525/mp.2013.30.4.419>
- Tintori, A., Ciancimino, G., Palomba, R., Clementi, C., & Cerbara, L. (2021). The Impact of Socialisation on Children's Prosocial Behaviour. A Study on Primary School Students. *International Journal of Environmental Research and Public Health*, 18(22), 12017. <https://doi.org/10.3390/ijerph182212017>
- Tomlinson, E. R., Yousaf, O., Vittersø, A. D., & Jones, L. (2018). Dispositional mindfulness and psychological health: A systematic review. *Mindfulness*, 9(1), 23–43. [doi:10.1007/s12671-017-0762-6](https://doi.org/10.1007/s12671-017-0762-6)
- Torrence, B. S., & Connelly, S. (2019). Emotion Regulation Tendencies and Leadership Performance: An Examination of Cognitive and Behavioral Regulation Strategies. *Frontiers in Psychology*, 10. <https://doi.org/10.3389/fpsyg.2019.01486>

- Treearpornwong, A., Kantathanawat, T., Charoentham, M., Pimdee, P., & Sukkamart, A. (2025). Enhancing Psychological Well-Being Assessment Through Data Mining: A Case Study from Thailand. *European Journal of Investigation in Health Psychology and Education*, 15(4), 61. <https://doi.org/10.3390/ejihpe15040061>
- Uchida, T., Takahashi, T., Sugiyama, F., Kikai, T., Nitta, Y., & Kumano, H. (2023). Effect of a mindfulness-based intervention on self-compassionate behaviors: a randomized controlled trial. *Psychological Reports*, 126(6), 2757-2788.
- University of West Alabama. (2019). The science of emotion: Exploring the basics of emotional psychology. Retrieved May 19, 2024, from <https://online.uwa.edu/wp-content/uploads/2019/04/Science-of-Emotion-Guide-UWA.pdf>
- Uygun, E. G., & Erus, S. M. (2024). The mediating roles of mindfulness in marriage and mindfulness in parenting in the relationship between parents' dispositional mindfulness and emotion regulation of their children. *Applied Research in Quality of Life*, 1-22.
- Verzeletti, C., Zammuner, V. L., Galli, C., & Agnoli, S. (2016). Emotion regulation strategies and psychosocial well-being in adolescence. *Cogent Psychology*, 3(1), 1199294. <https://doi.org/10.1080/23311908.2016.1199294>
- Wachs, K., & Cordova, J.V. (2007). Mindful relating: Exploring mindfulness and emotion repertoires in intimate relationships. *Journal of Marital and Family Therapy*, 33(4), 464-481.
- Wadsworth, M. E. (2015). Development of Maladaptive Coping: A Functional Adaptation to Chronic, Uncontrollable Stress. *Child Development Perspectives*, 9(2), 96. <https://doi.org/10.1111/cdep.12112>

- Wadsworth, M. E. (2015). Development of Maladaptive Coping: A Functional Adaptation to Chronic, Uncontrollable Stress. *Child Development Perspectives*, 9(2), 96. <https://doi.org/10.1111/cdep.12112>
- Wang, V., Stone, B. M., Vest, N., & LaBelle, O. P. (2024). Emotion regulation predicts recovery capital beyond mindfulness and demographic variation in recovery dharma. *Addiction Research & Theory*, 1-7.
- Wang, Y., & Yin, B. (2023). A new understanding of the cognitive reappraisal technique: an extension based on the schema theory. *Frontiers in Behavioral Neuroscience*, 17. <https://doi.org/10.3389/fnbeh.2023.1174585>
- Webb, T. L., Miles, E., & Sheeran, P. (2012). Dealing with feeling: A meta-analysis of the effectiveness of strategies derived from the process model of emotion regulation. *Psychological Bulletin*, 138(4), 775–808. <https://doi.org/10.1037/a0027600>
- Wells, A. (2005). Detached Mindfulness In Cognitive Therapy: A Metacognitive Analysis And Ten Techniques. *Journal of Rational-Emotive & Cognitive-Behavior Therapy*, 23(4), 337. <https://doi.org/10.1007/s10942-005-0018-6>
- Wimmer, L., Isherwood, K. R., Parkinson, J., & Dorjee, D. (2023). Relating dispositional mindfulness and long-term mindfulness training with executive functioning, emotion regulation, and well-being in pre-adolescents. *Psychological Studies*, 68(4), 534-553.
- Wisener, M., & Khoury, B. (2019). Associations between specific mindfulness facets, self-compassion, internally motivated drinking, and alcohol-related problems. *Mindfulness*, 10, 2073-2081.
- Wisener, M., & Khoury, B. (2021). Specific emotion-regulation processes explain the relationship between mindfulness and self-compassion with coping-motivated alcohol and marijuana use. *Addictive behaviors*, 112, 106590.

- Wolkin, J. (2015). Cultivating multiple aspects of attention through mindfulness meditation accounts for psychological well-being through decreased rumination [Review of Cultivating multiple aspects of attention through mindfulness meditation accounts for psychological well-being through decreased rumination]. *Psychology Research and Behavior Management*, 171. Dove Medical Press. <https://doi.org/10.2147/prbm.s31458>
- Wouters-Soomers, L., Ruysseveldt, J. V., Bos, A. E. R., & Jacobs, N. (2022). An individual perspective on psychological safety: The role of basic need satisfaction and self-compassion. *Frontiers in Psychology*, 13. <https://doi.org/10.3389/fpsyg.2022.920908>
- Wu, G., Feder, A., Cohen, H., Kim, J. J., Calderon, S., Charney, D. S., & Mathé, A. A. (2013). Understanding resilience. *Frontiers in Behavioral Neuroscience*, 7. <https://doi.org/10.3389/fnbeh.2013.00010>
- Wu, R., Jing, L., Liu, Y., Wang, H., & Yang, J. (2022). Effects of physical activity on regulatory emotional self-efficacy, resilience, and emotional intelligence of nurses during the COVID-19 pandemic. *Frontiers in Psychology*, 13. <https://doi.org/10.3389/fpsyg.2022.1059786>
- Xiao, Q., Yue, C., He, W., & Yu, J. (2017). The Mindful Self: A Mindfulness-Enlightened Self-view. *Frontiers in Psychology*, 8. <https://doi.org/10.3389/fpsyg.2017.01752>
- Xie, Q. (2023). Coping Style as a Mediator in the Associations between Dispositional Mindfulness, Self-Compassion, and Loneliness.
- Xu, L., Shi, J., & Li, C. (2024). Addressing psychosomatic symptom distress with mindfulness-based cognitive therapy in somatic symptom disorder: mediating effects of self-compassion and alexithymia. *Frontiers in Psychiatry*, 15. <https://doi.org/10.3389/fpsyg.2024.1289872>

- Xue, C. (2023). Mitigating EFL students' academic disengagement: The role of teachers' compassion and mindfulness in China [Review of Mitigating EFL students' academic disengagement: The role of teachers' compassion and mindfulness in China]. *Heliyon*, 9(2). Elsevier BV. <https://doi.org/10.1016/j.heliyon.2023.e13150>
- Yan, J. J., Schoppe-Sullivan, S., Wu, Q., & Han, Z. R. (2021). Associations from parental mindfulness and emotion regulation to child emotion regulation through parenting: The moderating role of coparenting in Chinese families. *Mindfulness*, 12, 1513-1523.
- Yarwood, M. G. (2022). Emotion regulation. In *Psychology of Human Emotion: An Open Access Textbook*. Pressbooks. Retrieved from <https://psu.pb.unizin.org/psych425/>
- Yela, J. R., Gómez-martínez, M. N., Crego, A., & Jiménez, L. (2020, March 1). Effects of the Mindful Self-Compassion programme on clinical and health psychology trainees' well-being: A pilot study. *Clinical Psychologist*, 24(1), 41–54. <https://doi.org/10.1111/cp.12204>
- Yip, S.Y.C., Mak, W.W.S., Chio, F.H.N. et al. The Mediating Role of Self-Compassion Between Mindfulness and Compassion Fatigue Among Therapists in Hong Kong. *Mindfulness* 8, 460–470 (2017). <https://doi.org/10.1007/s12671-016-0618-5>
- Young, A. (2017). Integrating Self-Compassion and Mindfulness into the American Education System. [https://encompass.eku.edu/cgi/viewcontent.cgi?article=1428&context=honors\\_theses](https://encompass.eku.edu/cgi/viewcontent.cgi?article=1428&context=honors_theses)
- Yousaf, O., & Taylor, J. (2023). Dispositional mindfulness mediates the relationship between emotion regulation and creativity. *Journal of Creativity in Mental Health*, 18(4), 511-521.

- Yu, S., Zhou, Y., Zhang, Q., & Xu, W. (2022). Dispositional mindfulness, perceived social support and emotion regulation among Chinese firefighters: A longitudinal study. *Current Psychology*, 41(6), 4079-4087.
- Zalewski, M., Lengua, L. J., Wilson, A. C., Trancik, A., & Bazinet, A. (2011). Emotion Regulation Profiles, Temperament, and Adjustment Problems in Preadolescents. *Child Development*, 82(3), 951. <https://doi.org/10.1111/j.1467-8624.2011.01575.x>
- Zhang, D., & Shen, J. (2023). Dispositional mindfulness and mental health among Chinese college students during the COVID-19 lockdown: The mediating role of self-compassion and the moderating role of gender. *Frontiers in Psychology*, 13, 1072548.
- Zhang, Y., & Bian, Y. (2020). Emotion Regulation Questionnaire for Cross-Gender Measurement Invariance in Chinese University Students. *Frontiers in Psychology*, 11. <https://doi.org/10.3389/fpsyg.2020.569438>
- Zheng, D., Berry, D. R., & Brown, K. W. (2023). Effects of Brief Mindfulness Meditation and Compassion Meditation on Parochial Empathy and Prosocial Behavior Toward Ethnic Out-Group Members. *Mindfulness*, 14(10), 2454. <https://doi.org/10.1007/s12671-023-02100-z>
- Zimmer-Gembeck, M. J., Clear, S. J., & Campbell, S. M. (2021). Peer relationships and stress: Indirect associations of dispositional mindfulness with depression, anxiety and loneliness via ways of coping. *Journal of Adolescence*, 93, 177-189.

## Appendix – A



# UNIVERSITY OF HYDERABAD INSTITUTIONAL ETHICS COMMITTEE DECISION LETTER



EC / NEW / INST / 2023 / 3825

<b>IEC No.</b>		<b>Date of review</b>	17-10-2024
<b>Application No:</b>	UH/IEC/2024/205		
<b>Project Title:</b>	Impact of Mindfulness on Psychological State and Psychosocial Behaviour among Emerging Adults		
<b>Principal Investigator/ Co-PI:</b>	PI: Abhik Kumar Nayak CI: Dr. Meera Padhy		
<b>Participating Institutes if any</b>	----	Approval from Participating Institute	---
<b>Documents received and reviewed</b>	Protocol & ICF		
<b>In case of renewal submission of update</b>	----		
<b>Decision of the IEC:</b>	Approved Duration: One year from date of approval		
<b>Any other Comments Requirements for conditional Approval</b>	----		
<b>Members Present</b>	Dr. A. S. Sreedhar, Mr. Madhava Rao, Dr. Ramesh Maturi, Prof. Bramanandam M. and Dr. Shiva Ram Male		

**Please note:**

- Any amendments in the protocol must be informed to the Ethics committee and fresh approval taken.
- Any serious adverse event must be reported to the Ethics Committee within 48 hours in writing (mentioning the protocol No. or the study ID)
- Any advertisement placed in the newspapers, magazines must be submitted for approval.
- If the conduct of the study is to be continued beyond the approved period, an application for the same must be forwarded to the Ethics Committee.
- It is hereby confirmed that neither you nor any of the members of the study team participated in the decision making/voting procedures and declared conflict of interest.

A S Sreedhar  
17/10/24

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(Dr. A S Sreedhar)

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Dr. Shiva Ram Male  
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**Convenor**

(Dr. Shiva Ram Male)

# Appendix - B

## INFORMED CONSENT FORM

### **Part A: Participant Information Sheet**

**Study Title: Impact of mindfulness on psychological state and psychosocial behaviour among emerging adults**

**Name of Principal Investigator:** Mr. Abhik Kumar Nayak, Research Scholar

**Name of the Co-Investigator:** Dr. Meera Padhy, Research Supervisor

#### **1. Introduction: Brief background of the study**

This is a doctoral research work (study) in the field of psychology. The study aims to measure mindfulness and its impact on well-being of individuals of 18-29 years. This study will also help the individuals to assess their level of mindfulness, self-compassion, emotion regulation, coping competence, prosocial behaviour and well-being.

#### **2. Why is this study being done?**

Emerging adults (18-29 years) constitute a significant proportion of India's population. Despite that there is sparsity of research on emerging adults in India. This study aims to bring focus on the well-being of emerging adults. This study is being done to assess the mindfulness of emerging adults and how it fosters well-being.

#### **3. What is involved in participating in this study? (What is the role of the participant in this study?)**

The principal investigator will give a set of questions written in simple language to participants. He will explain how to answer to these questions. He will clarify all doubts of the participants while they answer the questions. The participant is expected to spend 20-30 mins for this assessment.

#### **4. What will happen to your samples and study data?**

This study will involve assessments in the form of surveys for which the data will be collected from human participants. By participating in this study, the participants (samples) will be able to know their level of mindfulness, self-compassion, emotional regulation, coping competence, prosocial behaviour, and well-being. The study data will be saved digitally with password protection after being coded.

**5. Who will have access to your samples and study data?**

The principal investigator and co-investigator will have access to the sample and the coded study data.

**6. What are the risks of this study?**

There are no potential risks associated with this study.

**7. Are there any other risks involved?**

There are no other known risks involved in this study.

**8. Are there benefits to participating in this optional study?**

By participating in this study, the participants will be able to know their level of mindfulness, self-compassion, emotional regulation, coping competence, prosocial behaviour, and well-being.

**9. What about confidentiality?**

Absolute confidentiality about the identity of the participant will be maintained. To maintain confidentiality, the name of the participant will neither be revealed in any form nor be linked with the dataset. Absolute anonymity will be maintained. Results of the study, including all collected data, may be published in principal investigator's thesis and in possible future journal articles and professional presentations, but the name or any identifiable references to the participant will not be revealed.

**10. Will you receive any compensation participating in this study?**

You will not receive any compensation for participating in this study.

**11. What are your rights as a participant?**

As a participant my participation in this psychological research is voluntary. If I decide now or at any point to withdraw this consent or stop participating, I am free to do so at no penalty to myself.

**12. Whom do you call, if you have questions?**

If you have any questions you should contact the principal investigator.

## **Part B: Consent Form**

By signing this informed consent statement, I hereby state that I am above 18-year- old and I understand the nature of this research study and my role in it as a participant. Therefore, I give my consent to participate in this research voluntarily. If I decide now or at any point to withdraw this consent or stop participating, I am free to do so at no penalty to myself.

**Signature of the Participant**

**Signature of Principal Investigator**

**Signature of Co-Investigator**

**Contact name/address:**

Mr. Abhik Kumar Nayak

**Email:** abhiknayak2@icloud.com

**Address:** Research Scholar, Centre for Health Psychology, School of Medical Sciences University of Hyderabad, Central University PO, Gachibowli, Hyderabad-500046, India

**Signature of the witness**

## FORM A: Participant Information Sheet

All information provided in respect of your identity will remain confidential

1. Email ID : \_\_\_\_\_
2. Age : \_\_\_\_\_ 3. Gender: Male / Female / Others
4. Marital status : Married / Unmarried / Separated / Widow(er)
5. Educational qualification : \_\_\_\_\_
6. Name of the Institution : \_\_\_\_\_
7. Area of stay : Rural / Urban
8. Type of Family: Nuclear / Joint / Extended

## FORM B: Five Facet Mindfulness Questionnaire

**Instructions:** Please read each statement carefully before answering. To the right of each item, indicate how often you act in the stated manner by encircling the number. Please rate each of the following statements with the number that best describes your own opinion of what is generally true for you. Use the following response choices.

**1 = Never or very rarely true, 2 = Rarely true, 3 = Sometimes true, 4 = Often true, 5 = Very often or always true**

1. I'm good at finding words to describe my feelings.	1	2	3	4	5
2. When I take a shower or bath, I stay alert to the sensations of water on my body.	1	2	3	4	5
3. I don't pay attention to what I'm doing because I'm daydreaming, worrying, or otherwise distracted.	1	2	3	4	5
4. I tell myself I shouldn't be feeling the way I'm feeling.	1	2	3	4	5
5. I notice how foods and drinks affect my thoughts, bodily sensations, and emotions.	1	2	3	4	5
6. I believe some of my thoughts are abnormal or bad and I shouldn't think that way.	1	2	3	4	5
7. I pay attention to sensations, such as the wind in my hair or sun on my face.	1	2	3	4	5
8. I have trouble thinking of the right words to express how I feel about things.	1	2	3	4	5
9. When I have distressing thoughts or images, I "step back" and am aware of the thought or image without getting taken over by it.	1	2	3	4	5
10. Even when I'm feeling terribly upset, I can find a way to put it into words.	1	2	3	4	5
11. When I have distressing thoughts or images, I just notice them without reacting.	1	2	3	4	5
12. I think some of my emotions are bad or inappropriate and I shouldn't feel them.					
13. When I have distressing thoughts or images, I just notice them and let them go.	1	2	3	4	5
14. I do jobs or tasks automatically without being aware of what I'm doing.					
15. I find myself doing things without paying attention.	1	2	3	4	5

## FORM C: Self-Compassion Scale

**Instructions:** The following items deal with how do you typically act towards yourself in difficult times. Please read each statement carefully before answering. I want to know to what extent you have been doing what the item says. There is no right or wrong response. Make your responses as true FOR YOU as you can. Use the following response choices.

1 = Almost never, 2 = Occasionally, 3 = About half of the time, 4 = Fairly often, 5 = Almost always

1. When I fail at something important to me I become consumed by feelings of inadequacy.	1	2	3	4	5
2. I try to be understanding and patient towards those aspects of my personality I don't like.	1	2	3	4	5
3. When something painful happens I try to take a balanced view of the situation.	1	2	3	4	5
4. When I'm feeling down, I tend to feel like most other people are probably happier than I am.	1	2	3	4	5
5. I try to see my failings as part of the human condition.	1	2	3	4	5
6. When I'm going through a very hard time, I give myself the caring and tenderness I need.	1	2	3	4	5
7. When something upsets me I try to keep my emotions in balance.	1	2	3	4	5
8. When I fail at something that's important to me, I tend to feel alone in my failure.	1	2	3	4	5
9. When I'm feeling down I tend to obsess and fixate on everything that's wrong.	1	2	3	4	5
10. When I feel inadequate in some way, I try to remind myself that feelings of inadequacy are shared by most people.	1	2	3	4	5
11. I'm disapproving and judgmental about my own flaws and inadequacies.	1	2	3	4	5
12. I'm intolerant and impatient towards those aspects of my personality I don't like.	1	2	3	4	5

## FORM D: Emotion Regulation Questionnaire

**Instructions:** We would like to ask you some questions about your emotional life, in particular, how you control (that is, regulate and manage) your emotions. The questions below involve two distinct aspects of your emotional life. One is your emotional experience, or what you feel like inside. The other is your emotional expression, or how you show your emotions in the way you talk, gesture, or behave. Although some of the following questions may seem similar to one another, they differ in important ways. For each item, please answer using the following scale:

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>
<b>strongly disagree</b>			<b>neutral</b>			<b>strongly agree</b>

1. \_\_\_\_ When I want to feel more *positive* emotion (such as joy or amusement), I *change what I'm thinking about*.
2. \_\_\_\_ I keep my emotions to myself.
3. \_\_\_\_ When I want to feel less *negative* emotion (such as sadness or anger), I *change what I'm thinking about*.
4. \_\_\_\_ When I am feeling *positive* emotions, I am careful not to express them.
5. \_\_\_\_ When I'm faced with a stressful situation, I make myself *think about it* in a way that helps me stay calm.
6. \_\_\_\_ I control my emotions by *not expressing them*.
7. \_\_\_\_ When I want to feel more *positive* emotion, I *change the way I'm thinking about the situation*.
8. \_\_\_\_ I control my emotions by *changing the way I think about the situation I'm in*.
9. \_\_\_\_ When I am feeling *negative* emotions, I make sure not to express them.
10. \_\_\_\_ When I want to feel less *negative* emotion, I *change the way I'm thinking about the situation*.

## FORM E: Emotion Regulation Questionnaire

**Instructions:** How do you usually deal with stressful situations? Please read each of the following statements and select the one answer that most closely reflects your own reactions. There are no "right" or "wrong" answers.

Please use the following response options:

- ① = **VERY UN**characteristic of me
- ② = **RATHER UN**characteristic of me
- ③ = **SOMEWHAT UN**characteristic of me
- ④ = **SOMEWHAT** characteristic of me
- ⑤ = **RATHER** characteristic of me
- ⑥ = **VERY** characteristic of me

	<u>UN</u> -characteristic of me:			<u>CHARACTERISTIC</u> of me:		
	VERY	RATHER	SOME- WHAT	SOME- WHAT	RATHER	VERY
1. I become easily discouraged by failures. ....	① .....	② .....	③ .....	④ .....	⑤ .....	⑥
2. When my performance does not satisfy I start to question my abilities. ....	① .....	② .....	③ .....	④ .....	⑤ .....	⑥
3. I often feel unable to deal with problems. ....	① .....	② .....	③ .....	④ .....	⑤ .....	⑥
4. Failures can shake my self-confidence for a long time. ....	① .....	② .....	③ .....	④ .....	⑤ .....	⑥
5. When I am confronted with unusual demands, I feel helpless. ....	① .....	② .....	③ .....	④ .....	⑤ .....	⑥
6. When I do not immediately succeed in a project, I quickly lose hope for a good outcome. ....	① .....	② .....	③ .....	④ .....	⑤ .....	⑥
7. When I can't solve a task, I blame my lack of abilities. ....	① .....	② .....	③ .....	④ .....	⑤ .....	⑥
8. When I fail at something, I tend to give up. ....	① .....	② .....	③ .....	④ .....	⑤ .....	⑥
9. When my work is criticized, I feel depressed. ....	① .....	② .....	③ .....	④ .....	⑤ .....	⑥
10. I often feel overpowered by obstacles or troubles. ....	① .....	② .....	③ .....	④ .....	⑤ .....	⑥
11. I lose faith in myself when I make mistakes. ....	① .....	② .....	③ .....	④ .....	⑤ .....	⑥
12. If I do not instantly succeed in a matter, I am at a loss. ....	① .....	② .....	③ .....	④ .....	⑤ .....	⑥

## Form F: Prosocialness Scale for Adults

**Instructions:** The following statements describe a large number of common situations. There are no right or wrong answers; the best answer is the immediate, spontaneous one. Read each phrase carefully and fill in the number that reflects your first reaction.

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Never/Almost Never</b>	<b>Rarely</b>	<b>Occasionally</b>	<b>Often</b>	<b>Always/Almost Always</b>
1. I am pleased to help my friends/colleagues in their activities.				1 2 3 4 5
2. I share the things that I have with my friends.				1 2 3 4 5
3. I try to help others.				1 2 3 4 5
4. I am available for volunteer activities to help those who are in need.				1 2 3 4 5
5. I am empathic with those who are in need.				1 2 3 4 5
6. I help immediately those who are in need.				1 2 3 4 5
7. I do what I can to help others avoid getting into trouble.				1 2 3 4 5
8. I intensely feel what others feel				1 2 3 4 5
9. I am willing to make my knowledge and abilities available to others				1 2 3 4 5
10. I try to console those who are sad.				1 2 3 4 5
11. I easily lend money or other things				1 2 3 4 5
12. I easily put myself in the shoes of those who are in discomfort				1 2 3 4 5
13. I try to be close to and take care of those who are in need				1 2 3 4 5
14. I easily share with friends any good opportunity that comes to me				1 2 3 4 5
15. I spend time with those friends who feel lonely				1 2 3 4 5
16. I immediately sense my friends' discomfort even when it is not directly communicated to me.				1 2 3 4 5

**Form G: The PERMA Profiler**

**Instructions:** Please indicate how often the following statements apply to you by writing the appropriate number from the scale below on the line beside each item:

---

0-----1-----2-----3-----4-----5-----6-----7-----8-----9-----10

never always

---

- \_\_\_\_\_ 1) How much of the time do you feel you are making progress towards accomplishing your goals?
- \_\_\_\_\_ 2) How often do you become absorbed in what you are doing?
- \_\_\_\_\_ 3) In general, how often do you feel joyful?
- \_\_\_\_\_ 4) How often do you achieve the important goals you have set for yourself?
- \_\_\_\_\_ 5) In general, to what extent do you lead a purposeful and meaningful life?
- \_\_\_\_\_ 6) To what extent do you receive help and support from others when you need it?
- \_\_\_\_\_ 7) In general, to what extent do you feel that what you do in your life is valuable and worthwhile?
- \_\_\_\_\_ 8) In general, to what extent do you feel excited and interested in things?
- \_\_\_\_\_ 9) In general, how often do you feel positive?
- \_\_\_\_\_ 10) How often are you able to handle your responsibilities?
- \_\_\_\_\_ 11) How often do you lose track of time while doing something you enjoy?
- \_\_\_\_\_ 12) To what extent do you feel loved?
- \_\_\_\_\_ 13) To what extent do you generally feel you have a sense of direction in your life?
- \_\_\_\_\_ 14) How satisfied are you with your personal relationships?
- \_\_\_\_\_ 15) In general, to what extent do you feel contented?
- \_\_\_\_\_ 16) Taking all things together, how happy would you say you are?

# Impact of Mindfulness on Psychological State and Psychosocial Behaviour Among Emerging Adults

*by* Abhik Nayak

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