Self and Identity

Publication details, including instructions for authors and subscription information:
http://www.tandfonline.com/loi/psai20

Self-compassion, Interpersonal Conflict Resolutions, and Well-being

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Published online: 03 Apr 2012.

To cite this article: Lisa M. Yarnell & Kristin D. Neff (2013) Self-compassion, Interpersonal Conflict Resolutions, and Well-being, Self and Identity, 12:2, 146-159, DOI: 10.1080/15298868.2011.649545

To link to this article: http://dx.doi.org/10.1080/15298868.2011.649545

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Self-compassion, Interpersonal Conflict Resolutions, and Well-being

Lisa M. Yarnell¹ and Kristin D. Neff²

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This study examined the link between self-compassion and the balance of the needs of self and other in conflict situations. College undergraduates (N = 506) were asked to provide an example of a time in which their needs conflicted with those of their mother, father, best friend and romantic partner. Participants were asked how they resolved the conflict (subordinating, self-prioritizing, or compromising). They also reported whether their resolution choice felt authentic, the degree of emotional turmoil experienced when resolving the conflict, and their sense of well-being in each relational context. Across contexts, higher levels of self-compassion were related to greater likelihood to compromise and lesser likelihood to self-subordinate needs, as well as greater authenticity, lower levels of emotional turmoil, and higher levels of relational well-being. With fathers and romantic partners, the link between self-compassion and well-being was mediated by greater likelihood to make compromise decisions.

Keywords: Self-compassion; Interpersonal relationships; Conflict; Autonomy; Connectedness; Compromise; Authenticity; Well-being.

Psychologists have recently become interested in self-compassion as a healthy way of relating to oneself (Neff, 2009). Traditionally, compassion has been understood in terms of concern for the suffering of others (Goetz, Keltner, & Simon-Thomas, 2010). With self-compassion, however, one is emotionally supportive toward both the self and others when hardship or human imperfection is confronted. While most people report being kinder to others than themselves, self-compassionate individuals report being equally kind to themselves and others (Neff, 2003a). When viewed through the lens of self-compassion, both the self and others are equally worthy of consideration and care. A growing body of research suggests that self-compassion is associated with personal well-being (Neff, 2009), but relatively few studies have examined the association of self-compassion with healthy interpersonal behavior.

Neff (2003b) defined self-compassion as being comprised of three main components: self-kindness, common humanity, and mindfulness. Self-kindness refers to the tendency to be nurturing and understanding toward oneself rather than harshly judgmental. The sense of common humanity involves recognizing that all people have problems, make mistakes, and feel inadequate in some way. Mindfulness, the third component of self-compassion, involves being aware of present-moment experience in a clear and balanced way so that one neither ignores...
nor ruminates on disliked aspects of oneself or one's life (Brown & Ryan, 2003). These three components overlap and interact, resulting in a single overarching factor of self-compassion.

Research suggests that self-compassion is a robust predictor of psychological health. Higher levels of self-compassion have been associated with lower levels of depression, anxiety, maladaptive perfectionism, thought suppression, fear of failure, and egocentrism (Neff, 2003a; Neff, Hseih, & Dejitthirat, 2005; Neff, Kirkpatrick, & Rude, 2007; Neff & McGehee, 2010). Self-compassion has also been linked to positive states such as greater life satisfaction, emotional intelligence, personal initiative, perceived competence, happiness, secure attachment and social connectedness (Neff, 2003a; Neff, Pisitsungkagarn, & Hseih, 2008; Neff, Rude, & Kirkpatrick, 2007). Importantly, self-compassion is not associated with self-enhancement bias (Neff, 2003a; Neff & Vonk, 2009), but is associated with taking greater responsibility for past mistakes (Leary, Tate, Adams, Allen, & Hancock, 2007). This suggests that self-compassion is not just a way of distorting past or present actions in order to see oneself positively. Self-compassion has been shown to have discriminant validity with regard to other measures of psychological adjustment such as self-esteem (Neff, 2003a), attachment security (Neff & McGehee, 2010), negative affect (Neff, Kirkpatrick et al., 2007) and the “Big Five” personality traits of agreeableness, extroversion, conscientiousness, openness to experience, and neuroticism (Neff, Rude et al., 2007).

A smaller body of research suggests that self-compassion may also be linked to interpersonal well-being. One recent study of adult heterosexual couples (Neff & Beretvas, in press) found that self-compassionate individuals were described by their partners as being more emotionally connected, accepting and autonomy-supporting while being less detached, controlling, and aggressive. Crocker and Canevello (2008) found that individuals who scored high in self-compassion tended to have more compassionate goals in close relationships (as assessed by self-reports and partner reports), meaning that they tended to provide social support and encourage interpersonal trust with partners. Self-compassion may also play an important role in the ability to effectively balance the needs of self and other in relationships.

Balancing the needs of self and others in a way that integrates concerns with autonomy and connectedness is often viewed as central to healthy psychological development (Bowlby, 1988), and to healthy interpersonal relationships (Grotevant & Cooper, 1986). From the perspective of self-determination theory (Deci & Ryan, 2000), the balanced integration of autonomy and connectedness is crucial for positive relationship functioning in romantic relationships and the development of intimacy and mutual support (see La Guardia & Patrick, 2008, for a review). The theory posits that there are three basic psychological needs that underlie growth and development: autonomy, competence, and relatedness (Deci & Ryan, 2000). Autonomy refers to volition and the active endorsement of one’s behavior. Conversely, a lack of autonomy involves feeling controlled in one’s behavior so that personal needs are subordinated to external demands. Competence refers to the propensity to experience challenge and mastery in one’s activity (note that competence will not be a focus in the current study). Finally, relatedness, or the “need to belong,” refers to the tendency to form strong and stable interpersonal bonds. Individuals who have their needs for autonomy, competence and relatedness met experience more intimacy in relationships, increased willingness to express their desires and the relative authenticity of these expressions, as well as greater overall well-being (La Guardia, 2007).
A central manifestation of concerns with autonomy and connectedness within relationships may be observed in how conflicts between the needs and desires of each partner are resolved (Kelley & Thibaut, 1978; Miller, 1986; Spitzberg, Canary, & Cupach, 1994). An emphasis on mutuality in relationships involves the tendency to compromise in conflict situations, because both the self’s needs and the other’s needs are validated and taken into account. Compromise solutions have been found to be the most constructive in interpersonal conflicts, being associated with increased communication, closeness, and relationship satisfaction than solutions that prioritize or subordinate personal needs and desires (Gottman, 1994; Stein & Albro, 2001; Zacchilli, Hendrick, & Hendrick, 2009). Over-emphasizing autonomy, on the other hand, often leads to conflict resolutions that prioritize the self’s needs; and over-emphasizing connectedness involves placing priority on meeting the other’s needs, so that personal desires are subordinated.

The choices people make in conflict situations stem partly from external factors such as power inequality (Neff & Harter, 2002b) or the degree of perceived support received from relationship partners (Neff & Harter, 2002a). However, conflict resolutions might also be influenced by internal psychological factors such as the level of compassion people feel toward themselves. Self-compassion acknowledges that personal needs are valid and worthy of response just as others’ needs are valid and worthy. It allows people to remain interconnected and avoid self-centeredness without negating the self (Neff & Vonk, 2009). Because self-compassion involves taking the perspective of a compassionate other towards the self, it also tends to encourage interpersonal perspective-taking (Davidson, 2007; Neff & Pommier, in press). Finally, self-compassionate individuals are more likely to have fulfilled needs for autonomy, competence, and relatedness (Neff, 2003a), suggesting that they may also be more likely to have positive relationship interactions.

For these reasons, we hypothesized that people who are higher in self-compassion would be more likely to compromise than to subordinate their personal needs when conflicts occurred in their relationships. The theoretical association between self-compassion and the prioritization of personal needs was less clear, since neither those high nor low in self-compassion should be expected to put their own needs first in relationships. Thus, we made no predictions concerning the link between self-compassion and self-prioritization. However, we did expect that self-compassionate individuals would more often feel that their resolution was authentic, with authenticity being defined as the subjective perception that external actions match inner thoughts, emotions and values (Neff & Harter, 2002b). We also predicted that they would feel less inner turmoil when resolving conflicts, and that they would report experiencing greater psychological well-being in their relationships. This is because self-compassionate individuals have been found to have more authentic and intrinsic motivation (Neff, 2003a; Neff et al., 2005), greater emotional resilience in challenging situations (Allen & Leary, 2010), and relationship satisfaction with romantic partners (Neff & Beretvas, in press). Moreover, we expected that the greater well-being experienced by self-compassionate individuals in their relationships would be partially mediated by their tendency to make compromise resolutions. Dealing with conflicts in a manner that meets both the self’s and the other’s needs is likely to create harmony within a relationship, and should therefore be related to feelings of relational well-being.

The current study was designed to investigate these hypotheses, examining the link between self-compassion and the resolution of conflicts across a variety of relational contexts: with mothers, fathers, best friends, and romantic partners.
Method

Participants

Participants were recruited from a subject pool of college students attending a public, southwestern US university who were offered class credit in exchange for participation. The sample consisted of 267 females and 239 males ranging from 17 to 24 years in age ($M = 20.79$, $SD = 1.24$). The sample was 54% European American, 31% Asian/Asian American, 9% Latino/Hispanic, 4% Multiethnic, 2% African American, and 0.2% Native American.

Measures

Conflict resolution behavior. Participants were asked to provide a written example of a real-life situation in which their needs or desires conflicted with those of their mother, father, best friend, and romantic partner (Neff & Harter, 2002a). (In the latter two contexts, participants were asked to focus on their current friendship and romantic relationship, or on a past friendship/relationship if they weren’t currently involved in one.) Conflict resolution was assessed in these four separate relational domains within subjects because interpersonal behavior often varies between relationship contexts (Neff & Harter, 2003). Participants were asked to report how they resolved the conflict given the following three choices, with wording drawn from past research (Neff & Harter, 2002a): self-subordination, “You have given up your personal need or desire in order to meet the need or desire of your mother/father/best friend/partner”; compromise, “You have tried to come up with a compromise solution, even if it meant that neither you nor your mother/father/best friend/partner got exactly what you wanted”; or self-prioritization, “You have not given up your personal need or desire, and explained to your mother/father/best friend/partner why the matter was so important to you.”

Authenticity. In line with past research examining the authenticity of conflict resolutions (Neff & Harter, 2002a, 2002b), participants were asked whether their resolution to the conflict felt authentic or inauthentic with the dichotomous question: “When you resolved conflicts this way, did you feel like you were being your true self, the real you, or did it feel false, that you were acting that way, but it was not the real you?” Respondents chose one of the two options.

Emotional turmoil. The degree of inner conflict and turmoil felt while resolving the conflict was measured with three items, e.g., “I felt conflicted inside,” when solving the conflict in this way. Response options were given on a scale of 1 (Not at all) to 5 (Very much). Reliabilities ranged between $\alpha = .90$ and .94 across relationship contexts.

Relational well-being. Well-being was assessed within each relational context with three items measuring relational self-esteem and three items measuring relational depression. The scales used were adapted from instruments used in previous research by Harter and colleagues (Harter, Marold, & Whitesell, 1992; Harter, Waters, Whitesell, & Kastelic, 1998). Relational rather than general measures of self-esteem and depression were used because emotional well-being has been found to vary between relational contexts (Harter, Waters, & Whitesell,
Each item was scored on a scale from 1 to 4. A sample relational self-esteem item measured the degree to which participants “like the kind of person they are” when with their mother/father/friend/romantic partner. A sample relational depression item measured the degree to which they “feel down in their relationship.” Because the self-esteem and depression scales were highly intercorrelated within each context ($r = .77$ for mother, $r = .84$ for father, $r = .62$ for best friend, and $r = .82$ for partner, all $ps < .001$), items for these constructs were combined into a single measure of relational well-being (with depression scores reverse coded). Reliabilities for the combines scale were $\alpha = .91$ for mother, $\alpha = .94$ for father, $\alpha = .86$ for best friend, and $\alpha = .94$ for partner.

**Self-compassion.** Participants were given the 26-item Self-Compassion Scale (SCS; Neff, 2003a), which assesses six different aspects of self-compassion (with negative aspects reverse coded): Self-kindness (e.g., “I try to be understanding and patient toward aspects of my personality I don’t like”); Self-judgment (e.g., “I’m disapproving and judgmental about my own flaws and inadequacies”); Common humanity (e.g., “I try to see my failings as part of the human condition”); Isolation (e.g., “When I think about my inadequacies it tends to make me feel more separate and cut off from the rest of the world”); Mindfulness (e.g., “When something painful happens I try to take a balanced view of the situation”); and Over-identification (e.g., “When I’m feeling down I tend to obsess and fixate on everything that’s wrong”). Responses are given on a 5-point scale from “Almost never” to “Almost always.” As mentioned, research indicates the SCS has an appropriate factor structure, with a single overarching factor of “self-compassion” explaining the intercorrelations between subscales, and demonstrates predictive, convergent, and discriminant validity (Neff, 2003a). Internal consistency for the SCS in the current study was $\alpha = .92$.

**Results**

**Preliminary Analyses**

On the whole, the sample reported moderate levels of self-compassion, $M = 3.01$, $SD = 0.59$. Men reported slightly higher levels of self-compassion than women ($M = 3.10$, $SD = 0.58$ for men; $M = 2.94$, $SD = 0.58$ for women). Although this difference was statistically significant, $t(503) = 3.08, p < .01$, it was small in effect size, $d = 0.27$ (Cohen, 1977, 1988).

Descriptive analyses for resolution style, authenticity, emotional turmoil, and psychological well-being are presented in Table 1. Consistent with previous findings (e.g., Neff & Harter, 2003), participants were most likely to choose compromise in every relational context, and this pattern was especially strong with best friends.

Table 1 also displays descriptive statistics by gender. Men and women did not differ in their resolution style with mothers, $\chi^2(2, N = 494) = 1.39, p = .50$; fathers, $\chi^2(2, N = 473) = 1.43, p = .49$; or best friends, $\chi^2(2, N = 429) = 0.86, p = .65$. There was a marginally significant sex difference in resolution style reported with romantic partners, however, $\chi^2(2, N = 401) = 4.80, p = .09$, with males showing a slightly greater tendency to self-subordinate with romantic partners than females (31.9% of resolutions among males, compared to 22.8% of resolutions among females). Males and females did not differ significantly in terms of relational well-being in any context, though females reported significantly greater emotional turmoil when
resolving conflicts with fathers (p < .001), best friends (p < .05), and romantic partners (p < .01). They also reported feeling significantly less authentic than men when resolving conflicts with mothers (p < .05) and fathers (p < .001), and marginally less authentic with friends (p = .09). Given these gender differences, we tested our hypotheses on the link between self-compassion and relationship variables separately by gender as well as for the sample as a whole.

Testing of Main Hypotheses

Conflict resolution styles. Because self-compassionate people should acknowledge that the needs of both self and others are valid and worthy, we hypothesized that higher self-compassion scores would be associated with the tendency to compromise rather than subordinate personal needs in conflict situations. We tested this hypothesis by running a multinomial logistic regression in each of the four relational contexts, with self-compassion predicting resolution style and compromise

<table>
<thead>
<tr>
<th>Resolution style</th>
<th>Mother</th>
<th>Father</th>
<th>Best friend</th>
<th>Romantic partner</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total sample (N = 506)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Self-subordinate (%)</td>
<td>18</td>
<td>31</td>
<td>16</td>
<td>26</td>
</tr>
<tr>
<td>Compromise (%)</td>
<td>52</td>
<td>42</td>
<td>67</td>
<td>48</td>
</tr>
<tr>
<td>Self-prioritize (%)</td>
<td>29</td>
<td>26</td>
<td>16</td>
<td>24</td>
</tr>
<tr>
<td>Authentic (%)</td>
<td>84</td>
<td>77</td>
<td>90</td>
<td>79</td>
</tr>
<tr>
<td>Emotional turmoil</td>
<td>2.27 (1.09)</td>
<td>2.30 (1.18)</td>
<td>1.84 (0.98)</td>
<td>2.44 (1.26)</td>
</tr>
<tr>
<td>Relational well-being</td>
<td>3.37 (0.66)</td>
<td>3.33 (0.73)</td>
<td>3.68 (0.47)</td>
<td>3.37 (0.74)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Resolution style</th>
<th>Males (N = 239)</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-subordinate (%)</td>
<td>19</td>
<td>29</td>
<td>17</td>
<td>32</td>
</tr>
<tr>
<td>Compromise (%)</td>
<td>55</td>
<td>45</td>
<td>69</td>
<td>47</td>
</tr>
<tr>
<td>Self-prioritize (%)</td>
<td>27</td>
<td>26</td>
<td>14</td>
<td>21</td>
</tr>
<tr>
<td>Authentic (%)</td>
<td>88</td>
<td>84</td>
<td>93</td>
<td>80</td>
</tr>
<tr>
<td>Emotional turmoil</td>
<td>2.18 (1.01)</td>
<td>2.10 (1.10)</td>
<td>1.71 (0.88)</td>
<td>2.26 (1.18)</td>
</tr>
<tr>
<td>Relational well-being</td>
<td>3.33 (0.64)</td>
<td>3.32 (0.71)</td>
<td>3.68 (0.44)</td>
<td>3.39 (0.70)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Resolution style</th>
<th>Females (N = 267)</th>
<th></th>
<th></th>
<th></th>
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</thead>
<tbody>
<tr>
<td>Self-subordinate (%)</td>
<td>18</td>
<td>33</td>
<td>16</td>
<td>23</td>
</tr>
<tr>
<td>Compromise (%)</td>
<td>50</td>
<td>40</td>
<td>66</td>
<td>49</td>
</tr>
<tr>
<td>Self-prioritize (%)</td>
<td>32</td>
<td>27</td>
<td>18</td>
<td>28</td>
</tr>
<tr>
<td>Authentic (%)</td>
<td>82</td>
<td>72</td>
<td>88</td>
<td>80</td>
</tr>
<tr>
<td>Emotional turmoil</td>
<td>2.34 (1.16)</td>
<td>2.47 (1.22)</td>
<td>1.93 (1.04)</td>
<td>2.59 (1.31)</td>
</tr>
<tr>
<td>Relational well-being</td>
<td>3.40 (0.68)</td>
<td>3.35 (0.75)</td>
<td>3.69 (0.49)</td>
<td>3.36 (0.78)</td>
</tr>
</tbody>
</table>
used as the reference category. Results supported our hypothesis in all four relational contexts (see Table 2). For each one-point increase in self-compassion, participants were 61% more likely to compromise with mothers, 47% more likely to compromise with fathers, 117% more likely to compromise with best friends, and 100% more likely to compromise with romantic partners, relative to self-subordinating. Participants were also 53% more likely to compromise with romantic partners, relative to self-prioritizing. (Note that these percentages are calculated by taking the inverse of the odds for the predicted outcome, and subtracting 1.00.) All of these differences were significant (see Table 2 for \( p \) values). Self-compassion was not significantly associated with greater likelihood to compromise rather than self-prioritize in the other three contexts.

We also present these models estimated separately by gender in Table 2. The finding that higher levels of self-compassion are associated with greater likelihood to compromise relative to self-subordinate held in all contexts for females (marginally so in conflicts with mothers), but only in the best friends and romantic partner context for men (marginally with best friends). The use of unstandardized betas from these regression models allows us to make relative comparisons of effects across models (Keith, 2006). Self-compassion had a stronger association with compromise relative to self-subordinating in the best friend context for females as compared to males. In the romantic partner context, however, self-compassion had a stronger association with compromise relative to self-subordination for males compared to females.

**Authenticity.** Our next hypothesis was that participants who were higher in self-compassion would be more likely to solve conflicts in a way that felt authentic in all relationship contexts. We tested this hypothesis by running a series of logistic regressions predicting authenticity for each relational context. For each one-point increase in self-compassion, odds for participants to resolve conflicts authentically (opposed to inauthentically) increased with mothers by a factor of 3.15 (a 215% increase), with fathers by a factor of 2.25 (a 125% increase), with best friends by a factor of 1.59 (a 59% increase), and with romantic partners by a factor of 1.63 (a 63% increase). The association was significant for mothers, fathers, and romantic partners (all \( p s < .05 \)), and marginally significant with best friends, \( p = .10 \). Results held in the mother and father contexts for both genders. However, the association between self-compassion and authenticity with best friends was marginally significant for women (\( p = .09 \)) but non-significant for men (\( p = .96 \)). Also, self-compassion was marginally related to authenticity with romantic partners for men (\( p = .07 \)), but was non-significant for women (\( p = .13 \)).

**Emotional turmoil and relational well-being.** Our third and fourth hypotheses were that participants with more self-compassion would report less emotional turmoil when resolving conflicts, and also greater psychological well-being in their relationships. We tested these hypotheses by calculating Pearson’s correlations between self-compassion and emotional turmoil and well-being scores in each context. As expected, self-compassion was significantly associated with less emotional turmoil in all four contexts: mothers, \( r = -.32 \); fathers, \( r = -.35 \); best friends, \( r = -.23 \); and romantic partners \( r = -.28 \) (all \( p s < .05 \)). Self-compassion was also significantly associated with greater relational well-being in all contexts: mothers, \( r = .23 \); fathers, \( r = .29 \); best friends, \( r = .22 \); and romantic partners, \( r = .17 \) (all \( p s < .05 \)). The statistical significance of these correlations held for both genders.
<table>
<thead>
<tr>
<th>Regression term</th>
<th>Mothers (N=493)</th>
<th>Fathers (N=472)</th>
<th>Best friends (N=428)</th>
<th>Romantic partners (N=401)</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>b (SE) OR</td>
<td>b (SE) OR</td>
<td>b (SE) OR</td>
<td>b (SE) OR</td>
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<tr>
<td><strong>Total sample</strong></td>
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<tr>
<td><strong>Subordinate</strong></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Intercept</td>
<td>0.41 (0.63) –</td>
<td>0.83 (0.57) –</td>
<td>0.86 (0.69) –</td>
<td>1.52* (0.64) –</td>
</tr>
<tr>
<td>Self-compassion</td>
<td>–0.49* (0.21) 0.62</td>
<td>–0.38* (0.19) 0.68</td>
<td>–0.78*** (0.24) 0.46</td>
<td>–0.70*** (0.21) 0.50</td>
</tr>
<tr>
<td><strong>Prioritize</strong></td>
<td></td>
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<tr>
<td>Intercept</td>
<td>–0.26 (0.55) –</td>
<td>0.34 (0.60) –</td>
<td>–1.69* (0.72) –</td>
<td>0.68 (0.66) –</td>
</tr>
<tr>
<td>Self-compassion</td>
<td>–0.10 (0.18) 0.90</td>
<td>–0.27 (0.20) 0.76</td>
<td>0.09 (0.23) 1.09</td>
<td>–0.44* (0.21) 0.65</td>
</tr>
<tr>
<td><strong>Males</strong></td>
<td></td>
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<tr>
<td><strong>Subordinate</strong></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Intercept</td>
<td>0.16 (0.93) –</td>
<td>–0.02 (0.87) –</td>
<td>0.51 (1.07) –</td>
<td>2.41* (0.99) –</td>
</tr>
<tr>
<td>Self-compassion</td>
<td>–0.40* (0.30) 0.67</td>
<td>–0.15 (0.28) 0.87</td>
<td>–0.65*** (0.35) 0.07</td>
<td>–0.90** (0.32) 0.41</td>
</tr>
<tr>
<td><strong>Prioritize</strong></td>
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<tr>
<td>Intercept</td>
<td>–0.39 (0.84) –</td>
<td>0.38 (0.89) –</td>
<td>–3.50 (1.28) –</td>
<td>0.66 (1.12) –</td>
</tr>
<tr>
<td>Self-compassion</td>
<td>–0.10 (0.27) 0.91</td>
<td>–0.30 (0.28) 0.74</td>
<td>0.60 (0.38) 1.82</td>
<td>–0.45 (0.35) 0.64</td>
</tr>
<tr>
<td><strong>Females</strong></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td><strong>Subordinate</strong></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Intercept</td>
<td>0.66 (0.88) –</td>
<td>1.38 (0.78) –</td>
<td>1.22 (0.93) –</td>
<td>1.23 (0.88) –</td>
</tr>
<tr>
<td>Self-compassion</td>
<td>–0.58* (0.30) 0.56</td>
<td>–0.54* (0.26) 0.58</td>
<td>–0.92** (0.33) 0.40</td>
<td>–0.69* (0.30) 0.50</td>
</tr>
<tr>
<td><strong>Prioritize</strong></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Intercept</td>
<td>–0.27 (0.73) –</td>
<td>0.26 (0.83) –</td>
<td>–0.80 (0.90) –</td>
<td>0.60 (0.82) –</td>
</tr>
<tr>
<td>Self-compassion</td>
<td>–0.07 (0.24) 0.94</td>
<td>–0.22 (0.27) 0.80</td>
<td>–0.17 (0.30) 0.841</td>
<td>–0.40 (0.28) 0.67</td>
</tr>
</tbody>
</table>

Notes: OR=Odds Ratio. †p < .10; *p < .05; **p < .01; ***p < .001.
in all contexts (although the association between self-compassion and emotional turmoil in conflicts with best friends among men was only marginally significant, \( p = .07 \)).

**Mediation models.** Finally, our last hypothesis was that the association of self-compassion with greater relational well-being would be partially mediated by conflict resolution style, specifically, compromise. To test this hypothesis, we relied on MacKinnon and Dwyer’s (1993) calculations for mediation with dichotomous mediators. In our mediation models, the predictor was self-compassion (a continuous variable), the mediator was choice to compromise (a dichotomous, 0/1 variable), and the outcome was relational well-being (a continuous variable). We estimated models separately for each of the four relational contexts.

Sobel test statistics revealed that compromise significantly mediated the association of self-compassion with well-being in conflicts with fathers, \( z = 1.962, p < .05 \); and with romantic partners, \( z = 3.043, p < .01 \). However, in both models, self-compassion still significantly predicted relational well-being when both the predictor and the mediator were entered into the model simultaneously, suggesting that mediation was partial, \( b = 0.32, p < .001 \) for fathers; \( b = 0.14, p < .05 \) for romantic partners. Compromise did not significantly mediate the association between self-compassion and well-being with mothers, \( z = 1.533, p = .13 \); or with best friends, \( z = 1.682, p = .09 \).

When analyzed separately by gender, significant mediation was found for both men and women in the romantic partner context, \( z = 2.136 \) for females and \( z = 2.254 \) for males, both \( ps < .05 \). For females, a marginally significant regression coefficient for self-compassion in the model with self-compassion and compromise simultaneously predicting well-being with partners suggested partial mediation, \( b = 0.16, p = .055 \). However, for males, the regression coefficient for self-compassion was no longer significant when self-compassion and compromise were simultaneously entered into the model, suggesting full mediation, \( b = 0.10, p = .22 \). Mediation did not reach significance for the other contexts.

**Discussion**

In order to simplify the discussion of study results, we will first discuss findings for the sample as a whole, and later discuss gender differences in findings. Results suggest that our main hypothesis was supported: Self-compassionate individuals are more likely to resolve relationship conflicts in a way that balances the needs of the self and others. Participants who were higher in self-compassion were significantly more likely to report compromising rather than subordinating their needs in conflicts with mothers, fathers, best friends, and romantic partners. This suggests that self-compassionate individuals tend to value the personal needs and desires of both themselves and their relationship partners, allowing them to resolve conflicts in relationships in a healthy and productive manner (Gottman, 1994; Stein & Albro, 2001; Zacchilli et al., 2009).

We had not advanced any hypotheses concerning whether or not self-compassion would be associated with the tendency to prioritize personal needs in conflict situations, and, in fact, self-compassion was not significantly associated with self-prioritization with mothers, fathers, and best friends. This makes sense, given that people lacking in self-compassion should be no more likely to prioritize their own needs than those with higher levels of self-compassion. With romantic partners,
however, it was found that self-compassionate participants were less likely to self-prioritize (relative to compromise) than those who lacked self-compassion. Because conflicts with romantic partners are often emotionally intense, it may be that individuals with lower levels of self-compassion do not have the stable emotional platform needed to respond to conflicts in an evenhanded manner, being more likely to both prioritize and subordinate their needs with partners as compared to self-compassionate individuals.

As expected, self-compassionate participants were also more likely to report feeling authentic when resolving relationship conflicts (in all contexts) than those who lacked self-compassion. The ability of self-compassionate people to accept themselves as they are may allow them to act in accordance with their inner thoughts and values (Neff, 2003a; Neff et al., 2005), and therefore to assert themselves in an authentic manner with relationship partners. Self-compassionate individuals also reported experiencing less emotional turmoil when trying to decide how to resolve relationship conflicts. When thorny relationship issues arise, self-compassion may allow people to soothe and calm the intensity of their emotions, so that they can respond to conflicts more peacefully (Kelly, Zuroff, & Shapira, 2009). Similarly, results indicated that greater self-compassion was linked to a greater sense of well-being within relationships. Self-compassion has consistently been associated with enhanced emotional resilience (Neff, 2009), and this appears to also hold true in terms of how people feel about themselves within relationship contexts.

Results also indicated that the tendency of self-compassionate people to compromise in conflict situations partially mediated the link between self-compassion and psychological well-being. The ability to problem solve in this balanced and constructive way is likely to enhance the quality and satisfying nature of interpersonal relationships (Gottman, 1994; Stein & Albro, 2001; Zacchilli et al., 2009). Results also support a self-determination theory model of healthy interpersonal relationships (Deci & Ryan, 2000), which posits that meeting basic needs for autonomy and connectedness via interpersonal interactions is central to positive relationship functioning (La Guardia & Patrick, 2008).

While some might see the subordination of personal needs as a commendable act of self-sacrifice, the cost associated with the continual denial of the self’s needs may be high. For instance, caregivers who lack self-compassion are more likely to experience compassion fatigue and burnout as a result of continually giving to others while ignoring their own emotional needs (Ringenbach, 2009). Taken as a whole, these findings suggest that a compassionate stance toward oneself is associated with healthier and more sustainable relationship interactions (Crocker & Canevello, 2008; Neff & Beretvas, in press).

Results were also analyzed separately by gender in this study. As found in prior research (Neff, 2003a), findings indicated that women had significantly less self-compassion than men (though the size of the difference was small). Women also reported feeling significantly less authentic than men when resolving conflicts with mothers, fathers and friends, and significantly greater emotional turmoil with mothers, fathers, and romantic partners. These results may be related to the fact that females tend to be more self-critical and have a more ruminative coping style than males (Leadbeater, Kuperminc, Blatt, & Hertzog, 1999; Nolen-Hoeksema, Larson, & Grayson, 1999), meaning that they are less emotionally healthy when dealing with both themselves and others. On the other hand there were no gender differences in relational well-being, which calls this interpretation into question. Further research will be needed to understand this pattern of findings.
In terms of the association between self-compassion and outcome variables, it was found that self-compassion significantly predicted resolution style in all relationship contexts for women, but only in the best friend and romantic partner contexts for men. While the reason for this pattern of findings is also unclear, it may be that there is something about the involuntary nature of relationships with parents that make conflict resolutions less influenced by self-attitudes for men than for women. Once again, more research will be needed to examine this issue.

While women in this sample were found to have less self-compassion than men, it appears to be a particularly helpful self-attitude for women in terms of allowing them to take both their own needs and those of their partners in relationship conflicts into account. For example, one woman in the current study who was low in self-compassion described a conflict between herself and her romantic partner: “I got jealous that he was still talking to his ex-girlfriend. He wanted to remain friends with her, but it was very hard for me to accept and understand that.” This participant reported that she chose to subordinate her needs anyway, explaining: “I always want to please him and make him happy. I’m also scared that if I make him mad he will not want to be with me. He is very persuasive and usually convinces me to see things from his point of view.” In contrast, a more self-compassionate woman explained a conflict with her romantic partner quite differently: “As a senior, I was VERY busy with school, cheer, sports, music and work. I put a lot of my time and effort into these things because they were important to me. I know my boyfriend wanted to have more time with me, but there just weren’t enough hours in the day.” This participant reported that she chose to compromise, explaining: “We have worked things out in this way because we respected each other. We both had our own wants and needs and our relationship was way more important to us than any issue we had at some point in time.”

Limitations and Future Directions

There were limitations to this research study, of course. For example, individuals may have been biased when making self-reports of their relationship behavior. Given that fairness and equal rights are valued ideals in American culture, the tendency for individuals to claim that they compromised in their relationships may have been inflated. Moreover, self-reports of conflict resolution behavior were retrospective, so it is possible that in looking back at past conflicts, participants judged resolutions more positively than if their descriptions of the conflicts were more immediate. Even though self-compassionate people have been found to have greater self-clarity and take more responsibility for past actions (Leary et al., 2007; Neff, 2003a; Neff & Vonk, 2009), one cannot be certain that memories of past conflict resolutions are accurate.

Future research should aim to provide more objective assessments of individuals’ relationship behavior, perhaps by comparing self-reports of conflict resolution behavior to partner reports to see if they are consistent. Of course, partner reports of behavior are also biased in their own way, and cannot be assumed to be more accurate than self-reports. Another useful approach would be to observe conflict resolution behavior in lab settings. It should be noted, however, that many of the constructs measured in this study are intrapsychological and hard for others to assess. For example, the assessment that a resolution feels authentic or inauthentic must necessarily be a subjective one. There are also some advantages to asking participants about naturally occurring real-life conflict situations as compared to
observing conflicts in an artificial lab setting. Ideally, multiple methodologies should be used in future research to more fully understand how self-compassion relates to conflict resolution behavior.

Additionally, it is important to note that the findings of this study do not infer causality, and the association between self-compassion and healthy relationship behavior may be bidirectional. In future research, mediation models such as the ones estimated here can be elaborated upon using structural equation modeling, which allows the testing of competing hypotheses regarding directionality, as well as the estimation of models in which bidirectional effects are hypothesized. Moreover, the current study did not control for order effects, which could have possibly influenced responses. Future research should ensure counterbalancing of relationship contexts to control for this possible bias.

Finally, although the ethnic composition of this sample was relatively diverse (with only about half of participants being European American), it would also be worthwhile to examine the way that self-compassion impacts relationship behavior within specific cultural contexts. It may be that in more collectivistic cultures the link between self-compassion and conflict resolution styles operates differently. There is some research that suggests that self-compassion strongly enhances mental health in both individualistic and collectivistic cultures, however (Neff et al., 2008), and compromise has also been found to be the healthiest resolution style among Mexican Americans as well as European Americans (Neff & Suizzo, 2006). Thus, it may turn out that the association between self-compassion and healthy relationship interactions is relatively universal.

In closing, results suggest that self-compassion is associated with healthy relationship functioning and the tendency to integrate concerns with autonomy and connectedness when faced with relationship conflicts. Thus, the benefits of self-compassion may not only be personal, but also interpersonal. For this reason, counselors who work with individuals experiencing relationship conflicts with family, friends, or romantic partners might consider encouraging self-compassion as a way to heal these ruptures in a psychologically beneficial manner (Germer, 2009).

References


