A Compassionate Self Is a True Self? Self-Compassion Promotes Subjective Authenticity

Jia Wei Zhang1, Serena Chen2, Teodora K. Tomova3, Begüm Bilgin4, Wen Jia Chai5, Tamilselvan Ramis5, Hadi Shaban-Azad6, Pooya Razavi7, Thingujam Nutankumar8, and Arpine Manukyan2

Abstract

Theory and research converge to suggest that authenticity predicts positive psychological adjustment. Given these benefits of authenticity, there is a surprising dearth of research on the factors that foster authenticity. Five studies help fill this gap by testing whether self-compassion promotes subjective authenticity. Study 1 found a positive association between trait self-compassion and authenticity. Study 2 demonstrated that on days when people felt more self-compassionate, they also felt more authentic. Study 3 discovered that people experimentally induced to be self-compassionate reported greater state authenticity relative to control participants. Studies 4 and 5 recruited samples from multiple cultures and used a cross-sectional and a longitudinal design, respectively, and found that self-compassion predicts greater authenticity through reduced fear of negative evaluation (Study 4) and heightened optimism (Study 5). Across studies, self-compassion’s effects on authenticity could not be accounted for by self-esteem. Overall, the results suggest that self-compassion can help cultivate subjective authenticity.

Keywords

self-compassion, authenticity, self-esteem, fear of negative evaluation, optimism

Received 27 January 2018; revised manuscript accepted 1 November 2018

To be yourself in a world that is constantly trying to make you something else is the greatest accomplishment.

—Ralph Waldo Emerson

Personal and cultural admonishments to “be yourself” suggest the importance of authenticity. Authenticity underlies utterances as diverse as “I can be myself around her”; “I want a job that allows me to be who I am”; “Don’t change who you are, just be yourself”; and “I’ve got to do what I feel is right.” In short, many people value and strive for authenticity. This is wise, as extensive research indicates that authenticity has many positive well-being outcomes. Relatively little empirical attention, however, has been given to what cultivates authenticity in the first place. In the present research, we proposed and tested the novel hypothesis that self-compassion promotes authenticity.

Subjective Authenticity and Positive Psychological Adjustment

We focus on authenticity, as defined in terms of subjective feelings of authenticity—that is, “the sense or feeling that one is currently in alignment with one’s true or genuine self; that one is being their real self” (Sedikides, Slabu, Lenton, & Thomaes, 2017, p. 521). Accordingly, we operationalized authenticity in line with what researchers refer to as state authenticity (Schmader & Sedikides, 2018)—how authentic or “true to the self” people currently feel. Daily diary studies suggest that subjective authenticity operationalized in this manner varies considerably within person and more so than between people (Lenton, Slabu, & Sedikides, 2016). Other studies have shown that subjective authenticity defined in a similar manner shapes various psychological outcomes (e.g.,

1University of Memphis, TN, USA
2University of California, Berkeley, USA
3New York University, New York City, USA
4Koç University, Istanbul, Turkey
5HELP University, Shah Alam, Malaysia
6University of Tehran, Islamic Republic of Iran
7University of Oregon, Eugene, USA
8Tripura University, Agartala, India

Corresponding Author:
Jia Wei Zhang, Assistant Professor, Department of Psychology, University of Memphis, 400 Innovation Drive, Memphis, TN 38152, USA.
Email: jzhang11@memphis.edu
power, morality; Gan, Heller, & Chen, 2018; Gino, Kouchaki, & Galinsky, 2015).

Relevant to the current research, authenticity has been linked to optimal human functioning, promoting both intrapersonal and interpersonal well-being. Rogers (1961) argued that incongruent experiences between one’s inner self and outer expression can lead to anxiety and depression. Other work suggests that authenticity signals characteristics to interaction partners (e.g., trust, honesty) that are critical to the development of close relationships (Reis & Patrick, 1996). Trait authenticity has been associated with greater life satisfaction, positive affect, gratitude, and lower negative affect across many cultures (Kernis & Goldman, 2006; Robinson, Lopez, Ramos, & Nartova-Bochaver, 2012; Toor & Ofori, 2009; Wood, Linley, Maltby, Baliousis, & Joseph, 2008). Other work examining authenticity within specific social contexts corroborates the link between authenticity and well-being. For instance, communal strength (i.e., being highly motivated to respond to relationship partners’ needs) has been linked to greater positive emotions while sacrificing for one’s partner and higher relationship satisfaction after sacrificing—and these associations are mediated by feeling authentic in making the sacrifices (Kogan et al., 2010). English and John (2013) found that inauthenticity mediates the inverse relationship between emotional suppression and relationship satisfaction. In short, diverse evidence indicates that authenticity, across various operationalization, breeds psychological adjustment, whereas inauthenticity has detrimental intrapersonal and interpersonal consequences.

Despite broad consensus about authenticity’s benefits, there is surprisingly little research on what people can do to cultivate authenticity. In one exception, researchers found that attachment security (lower anxiety and avoidance) was associated with greater trait authenticity (Gillath, Sesko, Shaver, & Chun, 2010). They also showed that people induced with attachment security, compared with participants in various control conditions, reported greater state authenticity. Extending this small body of work, we theorized that self-compassion (Neff, 2003) promotes subjective feelings of authenticity. As a secondary aim, we explored several plausible mechanisms for the hypothesized link between self-compassion and subjective authenticity and did so across several cultures (the United States, Iran, Turkey, and Malaysia). Finally, we compared the effects of self-compassion with those of self-esteem, defined as a personal sense of worthiness (Rosenberg, 1965), because the two constructs are highly positively correlated.

**Self-Compassion and Subjective Authenticity Through Reduced Fear of Negative Evaluation, Lowered Shame, and Increased Optimism**

Self-compassion is rooted in sympathy extended toward the self when one is faced with a difficult experience (Neff, 2003). Self-compassion has three interrelated components: (a) self-kindness, a tendency to apply a caring and tender, rather than judgmental, attitude toward one’s difficult experiences; (b) common humanity, the recognition that it is only “human” to make mistakes and that one’s suffering is shared by others; and (c) mindfulness, or facing one’s failure and observing one’s pain with equanimity (Neff, 2011). Thus, self-compassionate people are aware of their experiences (both positive and negative), recognize others share their experiences, and handle setbacks and failures with relative calm and acceptance.

It is worth noting that self-compassion is not simply the opposite of self-criticism. Although self-criticism is measured with items (e.g., “I tend to be very critical of myself”) that appear similar in wording to the reverse-scored items in the self-kindness component of self-compassion (e.g., “I’m disapproving and judgmental about my own flaws and inadequacies”), self-criticism has less conceptual overlap with the mindfulness and common humanity components, both of which are important facets of self-compassion. This suggests that self-criticism and self-compassion may be inversely related to some degree, but are nonetheless distinct. Indeed, research shows that self-compassion is negatively correlated with depression, anxiety, and perfectionism, and is positively correlated with life satisfaction, even after controlling for self-criticism (Neff, 2003).

Why might self-compassion promote subjective authenticity? We explored three potential mechanisms—fear of negative evaluation, shame, and reduced optimism—because each may pose a barrier to subjective feelings of authenticity. Take the individual who hesitates to voice his support for an unpopular political candidate out of fear that others will disapprove of him, the shame-prone person who conceals a disorder she is struggling with, or the individual who, expecting the worse from disclosing his true feelings to a romantic interest, chooses to keep his feelings to himself. Interestingly, research suggests that directing compassion toward the self in the face of a setback, mistake, or failure tends to reduce individuals’ fear of negative evaluation (Mosewich, Kowalski, Sabiston, Sedgwick, & Tracy, 2011; Werner et al., 2012), minimize the experience of shame (Johnson & O’Brien, 2013; Leary, Tate, Adams, Batts Allen, & Hancock, 2007), and increase individuals’ optimism (Neff, Kirkpatrick, & Rude, 2007; Neff & Vonk, 2009). We propose that by countering various potential barriers to authenticity, self-compassion helps pave the way toward subjective feelings of authenticity.

Fear of negative evaluation refers to apprehension about being evaluated unfavorably by others (Leary, 1983). People who are highly fearful of negative evaluation are motivated to avoid negative social outcomes (Schlenker & Leary, 1982), highly sensitive to others’ criticism, and vigilant of their public self-presentation (Monfries & Kafer, 1994). Accordingly, such individuals often moderate or restrain thoughts, feelings, and behaviors that run the risk of eliciting disapproval (Davila & Beck, 2002). For example, research
has shown that people who are highly fearful of negative evaluation, compared with their less-fearful counterparts, disclosed for less time with an interaction partner, were rated by observers to disclose less intimately, and reciprocated their partner’s disclosure with less intimacy (Meleshko & Alden, 1993). More recent work has shown that fear of negative evaluation is inversely associated with state authenticity for both good and bad personal qualities and trait authenticity (Gillath et al., 2010). In short, the tendency for people high in fear of negative evaluation to subdue or hold back their thoughts and feelings may pose a barrier to subjective authenticity. Self-compassion tends to reduce fears about negative evaluation. For example, trait self-compassion has been associated with less fear of negative evaluation among a sample of young women athletes (Mosewich et al., 2011), as well as a sample of patients with social anxiety disorder (Werner et al., 2012). Thus, self-compassion may breed authenticity by minimizing fears about negative evaluation from others.

Shame refers to a consistent negative evaluation of the self for committing mistakes or failures (e.g., “I am terrible at this”) and is characterized by a tendency to withdraw (e.g., Cohen, Wolf, Panter, & Insko, 2011; Tracy & Robins, 2004). More specifically, shame-prone people tend to hide their thoughts and feelings. For example, shame-prone people report greater active concealment of self-related negative thoughts (Pineles, Street, & Koenen, 2006) and indirect expressions of hostility (Tangney, Wagner, Fletcher, & Gramzow, 1992). Women with an eating disorder who are highly shameful, compared with control women, report higher concealment of information about themselves and their eating habits during treatment (Swan & Andrews, 2003). Similarly, shame-prone people who received treatment for depression reported that they often concealed symptoms from their therapists, and shame was the main reason for this (Hook & Andrews, 2005). Such findings suggest that shame can be a formidable barrier to subjective feelings of authenticity. We reasoned that because self-compassion is explicitly non-self-evaluative, it should alleviate feelings of shame and, in turn, reduce any shame-driven tendencies to conceal one’s internal experiences, thereby enhancing authenticity. Supporting this, research shows that self-compassionate people report less shame in response to failure (Leary et al., 2007). In other work, shame-prone people who were randomly assigned to write about a shameful experience with self-compassion, compared with control participants, reported less shame and shame-proneness at a 2-week follow-up (Johnson & O’Brien, 2013).

Finally, optimism refers to having the outlook that things will generally turn out positively rather than negatively (Scheier & Carver, 1985). This positive outlook in turn shapes people’s thoughts and actions. For instance, because optimistic people tend to view outcomes as attainable, they are more apt to strive to achieve these outcomes (Scheier & Carver, 1992). Holding a positive outlook also encourages people to willingly engage in vulnerable situations. For example, optimistic people score lower on self-concealment of distressing experiences (Costa, Pereira, Soares, Azevedo, & Macedo, 2016). In other work, cancer patients who were higher, compared with lower, on optimism reported greater disclosure of their diagnosis (Henderson, Davison, Pennebaker, Gatchel, & Baum, 2002). Such evidence suggests a positive association between optimism and authenticity. The kindness and non-judgmental attitude that self-compassion entails, and equanimity it promotes, should propel self-compassionate people to approach difficult experiences with a positive attitude (Neff, 2011). Consistent with this, trait self-compassion is linked to higher optimism (Neff, Kirkpatrick, & Rude, 2007; Neff & Vonk, 2009). Also, people who were randomly assigned to a 3-week self-compassion intervention, compared with a control group, reported increases in optimism (Smeets, Neff, Alberts, & Peters, 2014). Thus, self-compassion may promote authenticity in part by supporting optimism.

In sum, theory and research suggest that fear of negative evaluation, shame, and reduced optimism can obstruct individuals’ inclination to strive for, and their success at, authenticity. At the same time, substantial evidence indicates that self-compassion may alleviate each of these barriers to authenticity, thereby serving as a cultivator of subjective feelings of authenticity.

**Self-Esteem as an Alternative Explanation**

Critics have argued that self-compassion is simply a variant of self-esteem because both encourage self-worth (Neff, 2003). This raises the possibility that the hypothesized effects of self-compassion can be explained by self-esteem. Indeed, considerable research has documented moderate to strong positive correlations between self-compassion and self-esteem (rs ≥ .40; Neff, 2003; Neff & Vonk, 2009). However, there are both conceptual and empirical grounds for distinguishing the two. Conceptually, self-esteem often involves the evaluation of the self in relation to others, such as when people judge themselves as better than others (Baumeister, Smart, & Boden, 1996; Leary & Baumeister, 2000; Neff, 2011). Self-compassion, however, does not involve judgment of the self or others. Instead, self-compassion creates a sense of self-worth in people because it leads them to genuinely care about their well-being (Neff, 2011).

Empirically, self-esteem—but not self-compassion—is positively associated with narcissism (Neff, 2003; Neff & Vonk, 2009), while self-compassion—but not self-esteem—predicts less anxiety after talking about a personal weakness (Neff, Rude, & Kirkpatrick, 2007). Both correlate negatively with rumination and public self-consciousness, but when controlling for each other, only self-compassion remains as a predictor (Neff & Vonk, 2009). Similarly, both predict less negative affect in response to a hypothetical personal failure, but when controlling for each other, only
self-compassion remains as a predictor (Leary et al., 2007). Still, some research finds that self-esteem is associated with greater trait authenticity (Wood et al., 2008). Other work has shown higher daily self-esteem is associated with greater daily authenticity over a 2-week period (Heppner et al., 2008). Thus, across studies, we assessed self-esteem to unconfound the shared variance between self-esteem and self-compassion, as well as any effects of self-esteeom on our outcome variables.

The Current Research

In Study 1, we examined whether trait self-compassion, compared with trait self-esteem, was associated with greater authenticity. Study 2 tested whether daily variations in self-compassion, compared with daily variations in self-esteem, predict within-person changes in authenticity. Study 3 took an experimental approach, wherein we randomly assigned participants to respond to a personal weakness from a self-compassionate perspective, a self-esteem-bolstering perspective, or a control condition, after which they reported their subjective authenticity. Having established a link between self-compassion and subjective authenticity in Studies 1 to 3, Studies 4 and 5 tested whether fear of negative evaluation, shame, and optimism explain why self-compassion promotes subjective authenticity. We note here at the outset that we conducted a power analysis to estimate an adequate sample size for each study. We found that we need around 100 people per study to detect a conservative effect size of r = .20, which is a typical effect size in social psychology (Richard, Bond, & Stokes-Zoota, 2003), with a p value of .05 and power of .80.

Study 1

Study 1 provided an initial test of our hypothesis that self-compassion promotes subjective authenticity, independent of self-esteem. Self-compassion and self-esteem were all measured at the trait level.

Method

Participants and procedure. Participants were 291 students from a large public university on the West Coast of the United States who received course credit for their participation. Five were excluded for not completing one or more of our study variables, leaving 286 students (66% female and 25% Caucasian) between the ages of 18 and 38 (age: M = 21.30, SD = 2.80) in the focal analyses. Participants accessed the study through an online server and provided informed consent. Afterward, they completed trait measures of self-compassion, self-esteem, and items aimed at tapping subjective feelings of authenticity in this order. Finally, participants completed demographic items and then were debriefed and thanked for their participation.

Table 1. Correlations Among Self-Compassion, Self-Esteem, and Authenticity in Study 1.

<table>
<thead>
<tr>
<th>Predictor variable</th>
<th>Alternative predictor</th>
<th>Outcome variable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-compassion</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Self-esteem</td>
<td>.48*</td>
<td></td>
</tr>
<tr>
<td>Authenticity</td>
<td>.43* (27*)</td>
<td>.47* (32*)</td>
</tr>
</tbody>
</table>

Note. The numbers in the parenthesis in the self-compassion column are partial correlations controlling for self-esteem. The numbers in the parenthesis in the self-esteem column are partial correlations controlling for self-compassion.

*p < .05.

Measures

Trait self-compassion. Participants completed the 12-item Self-Compassion Scale (Raes, Pommier, Neff, & Van Gucht, 2011) on a 5-point Likert-type scale (1 = almost never; 5 = almost always) that assesses three positive components (self-kindness, common humanity, and mindfulness) and three negative components (self-judgment, isolation, and over-identification) of self-compassion. The negative subscales were reverse-coded and averaged with the positive subscales to create a composite self-compassion score (M = 3.00, SD = 0.69, α = .88; Leary et al., 2007).

Trait self-esteem. Participants completed the 10-item Rosenberg (1965) Self-Esteem scale on a 5-point scale (1 = not very true of me; 5 = very true of me; M = 3.40, SD = 1.20; α = .90).

Authenticity. Participants completed four items (i.e., “I can be myself with others”; “I feel artificial in my interactions with others”; “I change myself to get along with others”; “My behavior around others is an expression of my true inner feelings, attitudes, and beliefs”) used in prior research to assess authenticity (Kraus, Chen, & Keltner, 2011). Responses were made on a 7-point scale (1 = completely disagree; 7 = completely agree; M = 4.60, SD = 1.20; α = .80).

Results and Brief Discussion

We standardized all variables. As shown in Table 1, trait self-compassion and self-esteem was positively correlated. Moreover, self-compassion (r = .43, 95% confidence interval [CI] = [.31, .54]) and self-esteem (r = .47, 95% CI = [.36, .56]) were positively correlated with authenticity. However, when controlling for self-esteem, self-compassion and authenticity remained correlated (r = .27, 95% CI = [.16, .41]), providing preliminary support for our primary hypothesis.
Study 2

Study 1 found that self-compassionate people reported more subjective authenticity compared with those lower in self-compassion. Study 2 used daily diary methods to provide a more ecologically valid demonstration of the link between self-compassion and subjective authenticity (Bolger, Davis, & Rafaeli, 2003). By surveying the same people on a daily basis over a week, we were able to test whether people report more subjective authenticity on days when they were more self-compassionate than they typically are. We also assessed daily self-esteem to ascertain the unique relation between daily self-compassion and daily authenticity.

Method

Participants and procedure. Participants were 96 students from a large public university on the West Coast of the United States who received course credit for their participation. Seventeen were excluded for only completing one diary (including them did not change the results), leaving 79 students (89% female and 29% Caucasian) between the ages of 18 and 49 (age: $M = 22.00, SD = 5.60$) in the focal analyses. Participants were given a link to an online survey to fill out every night for seven consecutive nights. The survey inquired about their daily self-compassion, daily self-esteem, and daily authenticity in randomized order. We kept the survey brief to maintain participant motivation and maximize responses (Reis & Gable, 2000). Across participants, we obtained 425 complete diary entries, with an average of five completed entries. Seventy percent of participants completed at least five of the seven diaries.

Measures

Daily self-compassion. Participants responded to three face-valid questions tapping their self-compassion each day on a 5-point scale (1 = not at all true; 5 = completely true) that we adapted from the Self-Compassion Scale (Neff, 2003): “Today, I felt compassionate toward myself”; “Today, I felt separate and cut off from the rest of the world” (reverse scored); and “Today, I showed caring, understanding, and kindness toward myself” ($\Omega = .75$). The intraclass correlation (ICC) for self-compassion revealed that 42% of its variance occurred between participants and 25% occurred within participants.

Daily self-esteem. Participants responded to two questions that assessed their self-esteem each day (Rosenberg, 1965): “Today, I had high self-esteem” and “Today, I felt like a worthy person” (1 = not at all true; 5 = completely true; $\Omega = .81$). The ICC for self-esteem revealed that 65% of its variance occurred between participants and 26% occurred within participants.

Daily relational authenticity. Participants responded to two questions that tapped their authenticity each day (Kraus et al., 2011; Sheldon, Ryan, Rawsthorne, & Ilardi, 1997): “Today, I felt authentic and genuine in my interaction with others” and “Today, I didn’t change myself to get along with others” (1 = not at all true; 5 = completely true; $\Omega = .51$). The ICC for authenticity revealed that 34% of its variance occurred between participants and 47% occurred within participants.

Results and Brief Discussion

We analyzed the data using the linear mixed models function in the R statistical program to account for the nested nature of the data (i.e., days nested within people). The predictors (daily self-compassion and self-esteem) were centered on each participant’s mean across the whole diary study. Group-mean centering unconfounds between-person effects from within-person effects by assessing whether day-to-day changes from a participant’s own mean on the predictor are associated with changes in the outcome variables. Thus, the analyses were entirely within-persons and thus controlled for individual differences. All analyses were conducted with the intercepts allowed to vary while the slopes were fixed.

Our central prediction was that daily self-compassion would predict greater daily authenticity—indeed, independently of daily self-esteem. As shown in Table 2, on days when participants reported higher self-compassion than they typically do, they were more likely to report greater authenticity ($b = .31, SE = .07, t = 4.40, p < .001, 95\% CI = [.17, .46]$). It was also the case that on days when participants reported higher self-esteem than they typically do, they also reported higher authenticity ($b = .22, SE = .06, t = 3.60, p < .001, 95\% CI = [.09, .35]$). We also conducted lagged analyses (testing the association of variables from one day to variables on the next day) and found that yesterday’s authenticity significantly predicted today’s authenticity ($b = .20, p = .001, CI = [0.20, 0.22]$). However, yesterday’s self-compassion did not predict

<table>
<thead>
<tr>
<th>Predictor variable</th>
<th>$b$</th>
<th>SE</th>
<th>$T$</th>
<th>95% CI</th>
</tr>
</thead>
<tbody>
<tr>
<td>Daily self-compassion</td>
<td>.31*</td>
<td>.07</td>
<td>4.40</td>
<td>[.17, .46]</td>
</tr>
<tr>
<td>Alternative predictor</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Daily self-esteem</td>
<td>.22*</td>
<td>.06</td>
<td>3.60</td>
<td>[.09, .35]</td>
</tr>
</tbody>
</table>

Note. Lagged analyses demonstrated that yesterday’s authenticity significantly predicted today’s authenticity ($b = .20, p = .001, CI = [.20, .22]$). However, yesterday’s self-compassion did not predict today’s authenticity controlling for yesterday’s authenticity ($b = .10, p = .12, CI = [−.07, .18]$). Nonetheless, today’s self-compassion did significantly predict today’s authenticity ($b = .31, p < .001; CI = [.17, .46]$), even with today’s self-esteem ($b = .22, p < .001; CI = [.09, .35]$) and yesterday’s authenticity in the same model ($b = .12, p = .01; CI = [.01, .26]$). Daily self-compassion and daily self-esteem were group mean centered. The model is controlling for yesterday’s authenticity. The result is the same without controlling for yesterday’s authenticity. CI = confidence interval. *$p < .05.$
today’s authenticity controlling for yesterday’s authenticity \((b = .10, p = .12, CI = [−.07, .18])\). Nonetheless, today’s self-compassion did significantly predict today’s authenticity \((b = .31, p < .001; CI = [.17, .46])\), even with today’s self-esteem \((b = .22, p < .001; CI = [.09, .35])\) and yesterday’s authenticity in the same model \((b = .12, p = .01; CI = [.01, .26])\).

The lack of a lagged association between self-compassion on one day and authenticity the next day may suggest that the relationship is not causal. Yet even if we had found evidence for a significant lagged effect, it could only suggest that a causal relationship cannot be ruled out. More importantly, and consistent with our central hypothesis, today’s self-compassion did predict today’s authenticity controlling for both today’s self-esteem and yesterday’s authenticity, suggesting that today’s self-compassion does predict unique variance in today’s authenticity beyond yesterday’s authenticity. Thus, although Study 2 did not provide unequivocal evidence for a causal link between self-compassion and subjective authenticity, this study did extend Study 1 by demonstrating that on days when participants felt more self-compassionate than they typically do, they reported more subjective authenticity independent of yesterday’s authenticity and today’s self-esteem.

**Study 3**

To buttress the correlational findings of Studies 1 and 2, Study 3 participants were randomly assigned to respond to a personal weakness from a self-compassionate perspective versus a perspective of validating their positive qualities, or were assigned to a control condition in which they did neither. They then completed state self-compassion and authenticity measures.

**Method**

**Participants and procedure.** Participants were 298 students from a large public university on the West Coast of the United States who received course credit for their participation. One was excluded for only completing one of the two authenticity measures, leaving 297 students (71% female and 28% Caucasian) between the ages of 18 and 50 (age: \(M = 21.50, SD = 3.60\)) in the focal analyses. Participants accessed the study through an online server and provided informed consent. Afterward, we presented participants with instructions adapted from Breines and Chen (2012; see also Leary et al., 2007) that asked participants to reflect on a personal weakness: “Please think about a personal weakness that made you feel bad about yourself; provide details regarding what led up to the event, who was present, precisely what happened, and how you felt and behaved at the time.”

Then, we randomly assigned participants into one of three conditions. The instructions in the self-compassion condition were as follows: “Imagine that you are talking to yourself about this weakness from a compassionate and understanding perspective. What would you say?” In the self-esteem condition, participants were instructed to “Imagine that you are talking to yourself about this weakness from a perspective of validating your positive (rather than negative) qualities. What would you say?” In the control condition, participants received no instructions. Following the manipulation, participants reported their state feelings of self-compassion as a manipulation check and their current feelings of authenticity. Finally, participants completed demographic items and then were debriefed and thanked.

**Measures**

**State self-compassion.** Participants completed a four-item measure adapted from Neff (2003) that assessed state self-compassion (“I am being understanding toward myself,” “I am treating myself with caring and kindness,” “I am trying to take a balanced view of things,” “I do not see my weakness as part of being human” [reverse-coded]). Participants used a scale ranging from 1 (not at all) to 5 (a lot) \((M = 3.55, SD = 0.72, \alpha = .71)\).

**Observer-rated state self-esteem.** We also collected observed-rated self-esteem in the self-compassion and self-esteem conditions. We asked six research assistants (three males and three females) to read participants’ open-ended response to their personal weakness and rated whether “This person showed high self-esteem in response to his or her weakness” on a 3-point scale \((1 = no, 2 = somewhat, 3 = yes; M = 2.43, SD = .40, ICC = .69)\).

**State authenticity.** We used the four authenticity items from Study 1 (Kraus et al., 2011; Sheldon et al., 2005) \((M = 3.20, SD = .76, \alpha = .65)\), along with the seven-item Authenticity scale (e.g., “I am my true self”; “I don’t know how I really feel inside”; “I feel as if I don’t know myself very well”; “I feel out of touch with the ‘real me’”; “I feel alienated from myself”; “I feel authentic in the way I act”; “I feel like I am really being me”) from Kifer, Heller, Peruńovic, and Galinsky (2013), to assess current feelings of authenticity \((M = 3.50, SD = 0.81, \alpha = .87)\). Participants responded to both scales using 5-point scales \((1 = not at all; 5 = a lot)\). We averaged scores on the two sets of items to create an overall authenticity index \((\alpha = .85)\).

**Results and Brief Discussion**

**State self-compassion and observer-rated state self-esteem.** As shown in Table 3, state self-compassion differed across conditions, \(F(2, 294) = 9.50, p < .001\), with higher scores in the self-compassion condition \((M = 3.80, SD = 0.71)\) compared with the self-esteem \((M = 3.46, SD = 0.70)\) and control conditions \((M = 3.40, SD = 0.70)\). A pairwise contrast between the self-compassion and self-esteem conditions was significant, \(t = 3.43, r = .23, p = .001, 95\% CI = [.15, .53]\), as was

<table>
<thead>
<tr>
<th>Conditions</th>
<th>State self-compassion</th>
<th>Observer-rated state self-esteem</th>
<th>Authenticity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Control</td>
<td>3.40a (0.70)</td>
<td>—</td>
<td>3.26b (0.61)</td>
</tr>
<tr>
<td>Self-esteem</td>
<td>3.46a (0.70)</td>
<td>2.60b (0.35)</td>
<td>3.36b (0.74)</td>
</tr>
<tr>
<td>Self-compassion</td>
<td>3.80a (0.71)</td>
<td>2.28b (0.39)</td>
<td>3.55b (0.68)</td>
</tr>
</tbody>
</table>

Note. We were unable to code the control condition because participants in the control condition did not write anything. Means with different superscripts are significantly different from each other.

the one between the self-compassion and control conditions, \( t = 4.05, r = .27, p < .001, 95\% \text{CI} = [.21, .59] \). The self-esteem and control conditions did not differ from each other, \( t = .60, r = .04, p = .56, 95\% \text{CI} = [-.14, .25] \). Also, participants in the self-esteem condition (\( M = 2.60, SD = 0.35 \)) showed more self-esteem than people in the self-compassion condition (\( M = 2.28, SD = .39 \), \( t = 5.91, r = .38, p < .001, 95\% \text{CI} = [.21, .42] \)). These results suggest our manipulation was successful.

State authenticity. We found a significant condition effect for authenticity, \( F(2, 294) = 4.90, p = .008 \). Participants in the self-compassion condition (\( M = 3.55, SD = 0.68 \)) reported significantly higher authenticity than those in the self-esteem condition (\( M = 3.35, SD = 0.74 \), \( t = 2.08, r = .13, p = .037, 95\% \text{CI} = [.01, .39] \)), and those in the control condition (\( M = 3.26, SD = 0.61 \), \( t = 3.06, r = .22, p = .002, 95\% \text{CI} = [.11, .48] \)). The latter conditions did not differ, \( t = .96, r = .07, p = .34, 95\% \text{CI} = [-.10, .28] \).

Overall, Study 3 provided experimental evidence to corroborate the correlational findings of the prior studies. People who were induced with a self-compassionate mind-set, compared with those in the self-esteem and control conditions, reported greater subjective authenticity.

Study 4

Studies 1 to 3 supported our primary hypothesis that self-compassion predicts authenticity independently of self-esteem. Turning to our secondary aim, Study 4 tested our proposition of whether fear of negative evaluation, shame, and optimism explain, at least in part, the link between self-compassion and authenticity. Also, to increase the generalizability of our results (Henrich, Heine, & Norenzayan, 2010), we tested our hypothesis with samples from two different cultures (the United States and Iran).

Method

Participants and procedure. The U.S. participants were 238 adults recruited from Amazon’s Mechanical Turk (MTurk; Buhrmester, Kwang, & Gosling, 2011) who received nominal compensation. We excluded 42 participants for not completing one or more measures, leaving 196 participants (71% Caucasian) between the ages of 19 and 75 (age: \( M = 33.00, SD = 12.10 \)) in the focal analyses. We recruited 234 Iranian adults via “Telegram,” which is a cloud-based instant messaging and voice over IP service. We provided them with a link to complete the survey online. Participants received feedback about their scores at the end of the study. We excluded 47 for not completing one or more measures, leaving 187 Iranian adults (67% female) between the ages of 19 and 63 (age: \( M = 33.50, SD = 8.90 \)) in the focal analyses.

All participants accessed the study through an online server and provided informed consent. They then completed trait measures of self-compassion, self-esteem, fear of negative evaluation, shame, optimism, and authenticity, in this order. Finally, participants completed demographic items and then were debriefed and thanked. For Iranian participants, we translated all the measures into Persian. Standard back-translation procedures (Brislin, 1970) were used to establish linguistic equivalence.

Measures

Trait self-compassion. Participants completed the same Self-Compassion Scale used in Study 1 (Raes et al., 2011) (the United States: \( M = 4.25, SD = 1.20, \alpha = .90 \); Iran: \( M = 4.10, SD = 0.83, \alpha = .80 \); Leary et al., 2007).

Trait self-esteem. Participants completed the Rosenberg (1965) Self-Esteem Inventory (the United States: \( M = 4.98, SD = 1.36; \alpha = .94 \); Iran: \( M = 4.95, SD = 1.24, \alpha = .89 \)).

Fear of negative evaluation. Participants completed the 12-item Fear of Negative Evaluation scale (FNE; Leary, 1983) that assesses the extent to which respondents worry about the negative evaluations of others (1 = strongly disagree; 7 = strongly agree; the United States: \( M = 4.98, SD = 1.36; \alpha = .94 \); Iran: \( M = 4.20, SD = 1.47, \alpha = .92 \)). A sample item is “I worry about what other people will think of me even when I know it doesn’t make any difference.”

Shame. Participants completed the eight-item Shame subscale from the Guilt and Proneness Scale (Cohen et al., 2011). This subscale measures people’s tendency to feel shame across different transgressions. Participants responded to each item using a 7-point Likert-type scale (1 = very unlikely; 7 = very likely). More specifically, four items measured the negative self-evaluation component of shame (e.g., “You rip an article out of a journal in the library and take it with you. Your teacher discovers what you did and tells the librarian and your entire class. What is the likelihood that this would make you feel like a bad person?” the United States: \( M = 5.30, SD = 1.30; \alpha = .80 \); Iran: \( M = 5.40, SD = 1.40, \alpha = .81 \)), while the other four items tapped the withdrawal component of shame (e.g., “After making a big mistake on an important project at work in which people

<table>
<thead>
<tr>
<th>Predictor</th>
<th>Alternative predictor</th>
<th>Fear of negative evaluations</th>
<th>Shame self-evaluation</th>
<th>Shame withdrawal</th>
<th>Optimism</th>
<th>Authenticity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-compassion</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>—</td>
</tr>
<tr>
<td>Self-esteem</td>
<td>.61*/.76*/.70*</td>
<td>—</td>
<td>—</td>
<td>.54*/.64*/.59*</td>
<td>—</td>
<td>—</td>
</tr>
<tr>
<td>Shame self-evaluation</td>
<td>−.20*/−.25*/−.23*</td>
<td>−.23*/−.21*/−.22*</td>
<td>.18*/.34*/.26*</td>
<td>—</td>
<td>—</td>
<td>—</td>
</tr>
<tr>
<td>Shame withdrawal</td>
<td>−.32*/−.19*/−.26*</td>
<td>−.36*/−.24*/−.26*</td>
<td>.29*/.17*/.23*</td>
<td>.42*/.12/27*</td>
<td>—</td>
<td>—</td>
</tr>
<tr>
<td>Optimism</td>
<td>.50*/.70*/.61*</td>
<td>.60*/.76*/.68*</td>
<td>−.44*/−.52*/−.47*</td>
<td>−.12*/.17*/.13*</td>
<td>−.21*/−.23*/−.17*</td>
<td>—</td>
</tr>
<tr>
<td>Authenticity</td>
<td>.54*/.64*/.58*</td>
<td>.63*/.75*/.69*</td>
<td>−.58*/−.55*/.57*</td>
<td>−.22*/−.03*/.13*</td>
<td>−.30*/−.32*/−.30*</td>
<td>.44*/.63*/.53*</td>
</tr>
</tbody>
</table>

Note. The values for Iran/the United States/combined are represented. The numbers in the parenthesis in the self-compassion column are partial correlations controlling for self-esteem. The numbers in the parenthesis in the self-esteem column are partial correlations controlling for self-compassion.

*p < .05.

were depending on you, your boss criticizes you in front of your coworkers. What is the likelihood that you would feign sickness and leave work?” the United States: M = 3.20, SD = 1.30; α = .69; Iran: M = 4.00, SD = 1.20, α = .54).

**Optimism.** Participants completed the six-item Revised Life Orientation Test (Scheier, Carver, & Bridges, 1994) that measures people’s inclination to be optimistic (1 = strongly disagree; 7 = strongly agree; the United States: M = 4.60, SD = 1.40; α = .91; Iran: M = 5.00, SD = 1.25, α = .80). A sample item is “In uncertain times, I usually expect the best.”

**Authenticity.** Participants completed the same 11-item Authenticity scale from Study 3 (the United States: M = 5.00, SD = 1.20; α = .92; Iran: M = 4.98, SD = 1.33, α = .91).

**Results and Brief Discussion**

**Correlations and partial correlations.** As shown in Table 4, self-compassion and self-esteem were both positively correlated with authenticity in both cultures. Self-compassion was inversely associated with fear of negative evaluation, shame self-evaluation, and shame withdrawal, and positively associated with optimism. Self-esteem showed similar correlations with these variables. These correlations were replicated in both cultures.

Across both cultures, the relations of self-compassion with shame self-evaluation and shame withdrawal were each reduced to non-significance when self-esteem was partialled out. Thus, these two shame variables cannot be mediators of the relation between self-compassion and authenticity beyond the influence of self-esteem. However, the relations between self-compassion and both fear of negative evaluation and optimism remained significant in both cultures even when controlling for self-esteem.

**Mediation analysis.** Next, we tested whether the effect of self-compassion on authenticity could be explained by reduced fear of negative evaluation and enhanced optimism. We tested the mediation analysis using the combined sample because culture did not moderate the major findings. As shown in Table 4, fear of negative evaluation (r = −.57, 95% CI = [−.63, −.50]) and optimism (r = .53, 95% CI = [.45, .60]) were linked to authenticity. The two potential mediators were inversely correlated with each other. To test the unique mediation effects of fear of negative evaluation and optimism, we used a multiple mediation model and followed a bootstrapping procedure for multiple mediator models recommended by Preacher and Hayes (2008). To test whether the unique contribution of each mediator (i.e., the specific indirect effect through each mediator) was significantly different from zero, we constructed 95% CIs (bias corrected and accelerated) using 10,000 bootstrap samples. If zero is in the interval, then the indirect effect is not significant, suggesting that the potential mediators do not mediate the link between self-compassion and increased authenticity.

Figure 1 displays the standardized path coefficients controlling for self-esteem. The total indirect effect through the mediators (i.e., the difference between the total and direct effects) was significant, with a point estimate of .09 and a 95% CI of...
As shown in the figure, the direction of both the a and b paths is consistent with the interpretation that self-compassion leads to a reduced fear of negative evaluation and increased optimism, which in turn leads to greater authenticity. More importantly, the specific indirect effects indicate that only fear of negative evaluation (point estimate = .08, 95% CI = [.04, .13]) showed a significant indirect path, while optimism (point estimate = .01, 95% CI = [.01, .04]) did not. Thus, fear of negative evaluation but not optimism appeared to statistically mediate the effect of the self-compassion on authenticity.

Overall, Study 4 directly replicated and extended the results of our previous studies, documenting a link between self-compassion and enhanced subjective authenticity in samples of both American and Iranian adults. Moreover, multiple mediation models yielded results that are statistically consistent with the possibility that fear of negative evaluation explains the proposed relation between self-compassion and enhanced authenticity.

**Study 5**

Study 5 aimed to extend Study 4’s cross-sectional results by testing fear of negative evaluation, optimism, and shame as potential mediators of the relation between self-compassion and authenticity using a two-wave longitudinal design. Also, to increase the generalizability of our results, we tested our hypothesis with samples from different cultures (Malaysia, Turkey, and the United States). As in all prior studies, we addressed self-esteem as an alternative explanation.

**Method**

**Participants and procedure.** The U.S. sample was composed of 245 undergraduates from a large public Southern university who received partial course credit. The 145 participants (59% response rate) who completed both assessments in the study were included in the focal analyses (43% Caucasian Americans, 27% African Americans, 12% Asian Americans, 9% Multiracial, 8% Hispanic Americans, 1% South Asian; 86% female). Their age ranged from 18 to 59 years (age: $M = 20.00, SD = 4.77$). We recruited 330 students from a large public university located in Turkey who received course credit. The 228 participants (69% response rate) between the ages of 18 and 35 (age: $M = 20.74, SD = 2.25; 72%$ female) who completed both assessments were included in the focal analyses. We recruited 366 students from a large private university located in Malaysia who received course credit. The 292 participants (79% response rate) between the ages of 18 and 32 (age: $M = 21.14, SD = 1.78; 79%$ female) who completed both assessments were included in the focal analyses.

The procedure for all samples was the same. The study was posted on the research participation system of the Psychology Department of each university for one semester. Participants completed the Time 1 survey on a rolling basis. Each participant accessed this survey through an online server, provided informed consent as well as their email address. They then completed trait measures of self-compassion, self-esteem, fear of negative evaluation, shame, optimism, authenticity, and demographic items, in this order. One month later, we emailed Time 1 participants with a link to complete the Time 2 survey that contained the same measures in the same order as in the Time 1 survey. Reminder emails were sent once a week to complete the Time 2 survey. Participants were considered to have quit the study if they did not complete the Time 2 survey after five reminders. Participants were debriefed and thanked at the end of the Time 2 survey. For the Turkey participants, we translated all the measures into Turkish (except self-compassion and fear of negative evaluation, because there is a published translated version for both). Standard back-translation procedures (Brislin, 1970) were used to establish linguistic equivalence. Participants from Malaysia took the survey in English.

**Measures**

**Self-compassion.** All participants completed the 12-item Self-Compassion Scale (Deniz, Kesici, & Sumer, 2008) (the
United States Time 1: $M = 3.87, SD = 1.09, \alpha = .84$; the United States Time 2: $M = 4.04, SD = 1.18, \alpha = .89$; Turkey Time 1: $M = 4.01, SD = 0.98, \alpha = .85$; Turkey Time 2: $M = 4.05, SD = 0.98, \alpha = .87$; Malaysia Time 1: $M = 3.97, SD = 0.86, \alpha = .83$; Malaysia Time 2: $M = 4.03, SD = 0.83, \alpha = .82$; Leary et al., 2007).

**Self-esteem.** All participants completed the single-item Self-Esteem Scale (i.e., “I have high self-esteem”; Robins, Hendin, & Trzesniewski, 2001) (the United States Time 1: $M = 4.10, SD = 1.95$; the United States Time 2: $M = 4.30, SD = 1.88$; Turkey Time 1: $M = 5.46, SD = 1.23$; Turkey Time 2: $M = 5.55, SD = 1.10$; Malaysia Time 1: $M = 3.95, SD = 1.53$; Malaysia Time 2: $M = 3.97, SD = 1.50$).

**Fear of negative evaluation.** U.S. participants completed the 12-item FNE scale (Koydemir & Demir, 2007; Leary, 1983) (the United States Time 1: $M = 4.54, SD = 1.41, \alpha = .93$; the United States Time 2: $M = 4.18, SD = 1.29, \alpha = .92$; Malaysia Time 1: $M = 4.85, SD = 1.15, \alpha = .90$; Malaysia Time 2: $M = 4.72, SD = 1.11, \alpha = .91$). Turkish participants completed the scale using a 5-point Likert-type scale (1 = does not reflect me at all; 5 = totally reflects me; Turkey Time 1: $M = 3.13, SD = 0.85, \alpha = .92$; Turkey Time 2: $M = 3.04, SD = 0.83, \alpha = .92$).

**Shame.** All participants completed the eight-item Shame subscale from the Guilt and Proneness Scale (Cohen et al., 2011) (the United States Time 1, negative self-evaluation: $M = 5.72, SD = 1.10, \alpha = .73$; the United States Time 2, negative self-evaluation: $M = 5.46, SD = 1.18, \alpha = .73$; the United States Time 1, withdrawal: $M = 3.24, SD = 1.21, \alpha = .58$; the United States Time 2, withdrawal: $M = 3.36, SD = 1.12, \alpha = .54$; Turkey Time 1, negative self-evaluation: $M = 5.52, SD = 0.99, \alpha = .66$; Turkey Time 2, negative self-evaluation: $M = 5.39, SD = 1.11, \alpha = .72$; Turkey Time 1, withdrawal: $M = 3.43, SD = 1.16, \alpha = .55$; Turkey Time 2, withdrawal: $M = 3.42, SD = 1.10, \alpha = .55$; Malaysia Time 1, negative self-evaluation: $M = 5.76, SD = 0.94, \alpha = .63$; Malaysia Time 2, negative self-evaluation: $M = 5.65, SD = 1.00, \alpha = .73$; Malaysia Time 1, withdrawal: $M = 3.88, SD = 1.08, \alpha = .49$; Malaysia Time 2, withdrawal: $M = 4.01, SD = 1.12, \alpha = .59$).

**Optimism.** All participants completed the six-item Revised Life Orientation Test (Scheier et al., 1994) (the United States Time 1: $M = 4.47, SD = 1.11, \alpha = .80$; the United States Time 2: $M = 4.53, SD = 1.8, \alpha = .85$; Turkey Time 1: $M = 4.44, SD = 1.11, \alpha = .80$; Turkey Time 2: $M = 4.49, SD = 1.19, \alpha = .86$; Malaysia Time 1: $M = 4.34, SD = 0.92, \alpha = .63$; Malaysia Time 2: $M = 4.28, SD = 0.87, \alpha = .63$).

**Authenticity.** All participants completed the same 11-item Authenticity scale used in the prior study (the United States Time 1: $M = 4.92, SD = 1.45, \alpha = .94$; the United States Time 2: $M = 4.85, SD = 1.34, \alpha = .92$; Turkey Time 1: $M = 4.97, SD = 0.92, \alpha = .83$; Turkey Time 2: $M = 4.79, SD = 0.97, \alpha = .86$; Malaysia Time 1: $M = 4.42, SD = 1.04, \alpha = .87$; Malaysia Time 2: $M = 4.43, SD = 1.03, \alpha = .87$).

**Results and Brief Discussion**

See Table 5 for zero-order correlations between the variables.

**Mediation analysis.** To examine statistical mediation, we followed Newsom’s (2018) two-wave mediation recommendation which calls for creating a residualized score for each potential mediator by regressing the Time 2 scores onto the Time 1 scores. This provided the residualized variance of each potential mediator. We then tested whether Time 1 self-compassion predicting Time 2 authenticity (controlling for Time 1 authenticity) could be explained by our potential mediators (standardized residuals). We tested the mediation analysis using the combined sample because culture did not moderate the major findings. As shown in Table 5, only residualized optimism could be a potential mediator because Time 1 self-compassion predicted residualized optimism which, in turn, predicted Time 2 authenticity. Specifically, we tested the proposed mediating effect using the bootstrapping procedure for mediation recommended by Preacher and Hayes (2008).

Figure 2 illustrates the mediation model with the standardized path coefficients controlling for Time 1 authenticity and Time 1 self-esteem. The total indirect effect through residualized optimism (i.e., the difference between the total and direct effects) was significant, with a point estimate of .03 and a 95% CI of .01 to .05. The direction of both the a and b paths fit the interpretation that Time 1 self-compassion led to increased optimism, which in turn predicted Time 2 authenticity. Thus, the results suggest that optimism may partly explain the proposed longitudinal effect of Time 1 self-compassion on Time 2 authenticity.

Overall, Study 5 directly replicated yet extended our prior studies, documenting that self-compassion predicted increased authenticity across time. Moreover, a mediation model statistically supported the possibility that increased optimism partly explains the relation between increases in self-compassion and increased authenticity across time.

**General Discussion**

Theory and research converge to suggest that authenticity predicts positive psychological adjustment. Given these benefits of authenticity, there is surprisingly little research on the factors that foster authenticity. The current five studies help fill this gap by testing whether self-compassion promotes subjective feelings of authenticity. Study 1
found a positive association between trait self-compassion and authenticity. Study 2 demonstrated that on days when people felt more self-compassionate, they also reported higher subjective authenticity. Study 3 discovered that people experimentally induced to be self-compassionate reported greater state authenticity relative to control participants. Studies 4 and 5 relied on multi-cultural samples and used a cross-sectional (the United States and Iran) and a longitudinal design (the United States, Turkey, and Malaysia), respectively, and yielded results suggesting that self-compassion predicts greater subjective authenticity through reduced fear of negative evaluation (Study 4) and heightened optimism (Study 5). Across studies, we found that the link between self-compassion (whether trait, daily, or manipulated) and subjective authenticity could not be explained by self-esteem. Overall, the present set of findings support our key proposition: self-compassion can help cultivate authenticity.

**Implications and Future Directions**

The primary contribution of the current research is the demonstration of self-compassion as a tool for enhancing subjective authenticity. In addition, our research offers at least initial process data that hint at why self-compassion may enhance authenticity. In Study 4, we produced cross-sectional evidence...
suggesting that self-compassion led to greater authenticity via reduced fear of negative evaluation and increased optimism in the United States and reduced fear of negative evaluation in Iran. Study 5 then provided longitudinal evidence to corroborate Study 4’s findings. Interestingly, in Study 4, optimism correlated with authenticity but was not a statistical mediator in the Iranian sample. Perhaps this is because optimism had a significantly lower correlation with authenticity in the Iranian sample ($r = .44$) compared with the U.S. sample ($r = .63$), $z = 2.61, p = .008$. Thus, among Iranians, the effect of optimism was reduced to non-significance when it was pitted against fear of negative evaluation in a multiple mediation model. It would be interesting for future research to replicate the optimism effect to ascertain whether the cross-cultural difference in the correlations between optimism and authenticity is specific to the current research or reflects meaningful cultural variation.

Researchers have highlighted the demographic limitations of most psychology studies, characterizing most of the samples used in this research as White, Educated, Industrialized, Rich, and Democratic (Henrich et al., 2010). In addition, other researchers have raised questions about the importance of replication (Simmons, Nelson, & Simonsohn, 2011). In light of these concerns, it is important to note that we replicated our results in Studies 4 and 5 using samples from multiple cultures, suggesting our findings hold across a wide range of people who may come from dramatically different backgrounds.

On another note, Studies 2 and 3 showed that self-compassion is a state that can be experienced on a daily basis and that a momentary state of self-compassion can be induced simply by instructing participants to think about a personal weakness from a kind, non-judgmental, broader perspective (Baker & McNulty, 2011; Breines & Chen, 2012; Leary et al., 2007). This fits recent work suggesting that self-compassion is a malleable skill that can be improved in a short period of time (e.g., 8 weeks), conveniently performed in daily life, and maintained over a 1-year period (Neff & Germer, 2013). Paired with evidence suggesting that authenticity has significant psychological health benefits (Goldman & Kernis, 2002; Sheldon et al., 1997), the implication here is that self-compassion may be cultivated to promote authenticity within day-to-day life.

Our aim to demonstrate self-compassion as an antecedent of authenticity is based on the assumption that authenticity is healthy, and therefore, we should study how people can cultivate it. However, it is important to recognize potential downsides of being completely authentic. For instance, imagine informing your romantic partner that you are only with him or her because your first choice rejected you or telling your boss that you have a side gig at a competing company. In such cases, the potential costs of being authentic likely outweigh any benefits of “being yourself.” Thus, it may be fruitful for future research to tease apart whether self-compassion promotes authenticity without consideration of the circumstances or whether self-compassion enhances a more thoughtful and regulated form of authenticity. For instance, there are times when holding back one’s feelings, which may normally hurt subjective feelings of authenticity, might be beneficial instead of costly. Indeed, along these lines, research has shown that highly interdependent people, compared with less interdependent individuals, who suppressed the negative emotions they felt about a sacrifice they made for their romantic partner feel more authenticity and, in turn, reported better relationship quality and personal well-being (Le & Impett, 2013). Although this is beyond the scope of the current research, prior research does in fact suggest that self-compassion is associated with reduced emotion regulation difficulties (Terry & Leary, 2011; Vettese, Dyer, Li, & Wekerle, 2011), consistent with the possibility that self-compassionate people are more apt to engage in regulated forms of authenticity.

**Limitations**

Several limitations should be noted. A cross-sectional mediation approach may not accurately reflect the true nature of the underlying processes involved (Mackinnon & Fairchild, 2009; Maxwell & Cole, 2007). For instance, our cross-sectional mediation model presumes that self-compassion causes fear of negative evaluation and optimism, as well as authenticity over time. Another presumption of cross-sectional mediation is that the mediated effect is stable over time. We improved on these limitations with a longitudinal mediation design in Study 5 that helped determine the temporal order of our variables, and the stable relations among our key variables across time—in addition to demonstrating a causal link between self-compassion and authenticity in Study 3. Nonetheless, the mediators in Studies 4 and 5 were all measured (i.e., not manipulated), leaving the question of whether reduced fear of negative evaluations and/or increased optimism caused changes in subjective authenticity open one. Still, our mediation results provide at least an initial empirical basis for further inquiry into why self-compassion influences subjective authenticity.

Finally, the current results clearly document a link between self-compassion and subjective authenticity using widely used items in authenticity research (Kifer et al., 2013; Kraus et al., 2011; Wood et al., 2008). But they do not speak to the link between self-compassion and *actual* authentic behaviors, which future research should examine. For example, one might assess whether self-compassion encourages people to take action to support or oppose a law that aligns with their values. On another note, some cultures are more likely to embrace inauthenticity than others are, meaning that cultivating authenticity may not always be a priority. For example, people from East Asian cultures tend to value inhibition as a way to maintain relationship harmony. Not surprisingly, research has shown that East Asians often suppress their emotions more than White/European Americans (Gross & John, 2003). However, despite their valuing of suppression, Chinese people who tend to suppress report reduced
relationship satisfaction because they feel inauthentic (English & John, 2013). This suggests that even in a culture where suppressing one’s inner self is valued, we still see the detrimental consequences of inauthenticity.

**Conclusion**

“Be yourself” is one of those pieces of advice that people give and receive throughout life (Partch & Kinnier, 2011). But how does one do this? Our results suggest that self-compassion may be a simple tool that people can use to promote being true to themselves. In short, part of the secret to leading an authentic life may rest in being compassionate to ourselves.

**Declaration of Conflicting Interests**

The author(s) declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

**Funding**

The author(s) received no financial support for the research, authorship, and/or publication of this article.

**Supplemental Material**

Supplemental material is available online with this article.

**References**


