

**Private Self-Consciousness and Self-Compassion as Predictors of Coping  
Styles: Mediating Role of Emotional Intelligence and Resilience**

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## **Abstract**

The study aimed to investigate the mediating role of Emotional Intelligence and Resilience in the relationship between Private Self-Consciousness and Coping Styles and in the relationship between Self-Compassion and Coping Styles. The study was conducted using the Self-Reflection and Insight Scale as a measure of private self-consciousness, the Self-Compassion Scale-Short Form as a measure of Self-Compassion, the TEIQue-SF as a measure of emotional intelligence, the 10-item Connor-Davidson Resilience Scale as a measure of resilience and the Brief Cope Scale to measure of coping styles. Data analysed from 200 participants found Private Self-Consciousness to be positively correlated to Emotional Intelligence, Resilience, Adaptive Coping Styles and negatively correlated to Maladaptive Coping Styles; Self-Compassion to be positively correlated to Emotional Intelligence, Resilience, Adaptive Coping Styles and negatively correlated to Maladaptive Coping Styles. Emotional Intelligence was found to be positively correlated to Adaptive Coping Styles and negatively correlated to Maladaptive Coping Styles; Resilience was found to be positively correlated to Adaptive Coping Styles and negatively correlated to Maladaptive Coping Styles. Partial Least Squares analysis found that Emotional Intelligence fully mediates the relationship between Private Self-Consciousness and Maladaptive Coping Styles and the relationship between Self-Compassion and Maladaptive Coping Styles whereas Resilience fully mediates the relationship between Self-Compassion and Adaptive Coping Styles, the relationship between Self-Compassion and Maladaptive Coping Styles and the relationship between Private Self-Consciousness and Adaptive Coping Styles. However, the model fit analysis found that the overall mediation model was not significant.

**Keywords:** Private Self-Consciousness; Self-Compassion; Emotional Intelligence; Resilience; Adaptive Coping Styles; Maladaptive Coping Styles

## CERTIFICATE

This is to certify that the thesis entitled, “Private Self-Consciousness and Self-Compassion as Predictors of Coping Styles: Mediating Role of Emotional Intelligence and Resilience” being submitted in partial fulfilment of requirements for the award of degree of Master of Arts in Psychology, submitted in the School of Liberal Arts and Sciences, Thapar Institute of Engineering and Technology, Patiala is a bonafide work carried out under the supervision of Dr. Santha Kumari, Professor, School of Liberal Arts and Sciences, Thapar Institute of Engineering and Technology, Patiala and hat no part of this project has been submitted for the award of any other degree.



(CHAHAT MANN)

This is to certify that the above statement made by the student concerned is correct and true to the best of my knowledge.



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## CANDIDATE'S DECLARATION

I hereby declare that the work presented in this thesis entitled, "Private Self-Consciousness and Self-Compassion as Predictors of Coping Styles: Mediating Role of Emotional Intelligence and Resilience" in partial fulfilment of the requirement for the award of the degree of Master of Arts in Psychology, submitted in the School of Liberal Arts and Sciences, Thapar Institute of Engineering and Technology, Patiala, is an authentic record of my own work carried out under the supervision and guidance of Dr. Santha Kumari, Professor, School of Liberal Arts and Sciences, Thapar Institute of Engineering and Technology, Patiala and refers other researcher's work which are duly listed in the reference section.

The matter embodied in this thesis has not formed the basis for the award of any other degree of this or any other university.

Date: May 2022

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## **CHAPTER 1**

### **Introduction**

Self-Consciousness, or being "conscious" or "aware" of the self, consists of two aspects – Private and Public. Private Self-Consciousness represents attention focused on the self, reflecting on covert, hidden and personal aspects that are not easily accessible to others, e.g., personal cognitions, opinions, emotions, and volitions. Public Self-Consciousness focuses on aspects of the self that are visible to others, such as appearance, demeanour and behaviour. Social anxiety, derived from public self-consciousness, represents apprehensiveness or doubt over being evaluated by others in a social context (Fenigstein et al., 1975). One can spend a substantial amount of time in self-reflection without gaining insight; thus, the processes of self-reflection and insight are independent of each other (Grant, 2002). According to a study conducted by Burnkrant & Page (1984), private self-consciousness can be classified into two different factors "self-reflectiveness" and "internal state awareness". Self-reflection is the examination and appraisal of one's thoughts, emotions, and behaviours, whereas self-insight is the clarity of one's emotional, cognitive, and behavioural knowledge (Grant, Franklin, & Langford, 2002).

Self-awareness or knowledge of how one's beliefs, attitudes, and cognitions are related to how one behaves, feels, and thinks is referred to as self-understanding. The term self-understanding refers to what a person has learned about himself or herself. It reflects a certain level of self-awareness and the ability to turn that information into valuable insights. Individuals with higher self-awareness are able to understand which emotions they are feeling, why they are feeling them (can comprehend the link between events and corresponding thoughts, leading to emotions), and can discern the chain from emotion to action (i.e., links between their feelings, thoughts and behaviour) (Campbell & Neobedzi, 2007).

Self-compassion entails treating oneself with kindness instead of harsh self-criticism on occasions of pain or failure, mindful awareness of painful thoughts and feelings in contrast to over-identification with them and viewing life's challenges and difficulties as part of the larger human experience rather than seeing them as isolating (Neff, 2003). Self-compassion is a coping strategy that involves being open and sensitive to one's own suffering, experiencing feelings of care and kindness toward oneself, adopting an attitude of understanding rather than judging one's own inadequacies and failures, and recognising that one's own experience is part of the common human experience (Neff, 2003). Self-compassion is linked to sentiments of empathy and care for others; therefore, being compassionate to oneself does not imply being

solely concerned with one's own needs. Self-compassion recognises that suffering, failure, and inadequacy are all part of the human experience, and that everyone, including oneself, is deserving of compassion (Neff, 2003).

Self-compassion comprises three key components, according to Neff (2003). The first, self-kindness is the capability to treat oneself with care and understanding instead harsh judgment toward oneself. The second is a sense of shared humanity, which recognises that imperfection is a part of the human experience rather than feeling alone in one's failings. The third aspect of self-compassion is mindfulness, which is maintaining a balanced perspective on one's current experience rather than inflating the experience of one's suffering. It is proposed that these three characteristics function to minimise stress by assisting people in self-regulating unpleasant emotions that might develop from uncontrollable and/or unpredictable occurrences (Neff et al., 2007). Placing blame on one's own actions or faults can lead to further stress and prevent effective adjustment in such challenging situations (Sirois, Davis, & Morgan, 2006). Thus, self-compassion may relieve stress by encouraging coping via adaptive behavioural or appraisal-based responses to stressors and diminishing coping that increases negative emotional reactions to stresses (Sirois et al., 2015).

When faced with hardship, incompetency, or failure, self-compassionate people treat themselves with warmth and understanding without judgement instead of dismissing their suffering or berating themselves with self-criticism. This approach also entails accepting that being flawed, making errors, and dealing with life's challenges are all part of the shared human experience, rather than something isolating. Self-compassion necessitates a balanced response to one's negative experiences, ensuring that painful sentiments are not hidden or exaggerated. Self-compassion entails maintaining the appropriate distance from one's emotions in order to fully feel them while approaching them with conscious objectivity (Neff, 2003). Thus, self-compassion can greatly enhance resilience, emotional intelligence and lead to adaptive coping with stress.

Emotional quotient is an expression of one's self-knowledge and self-understanding. An essential component of Emotional Intelligence is the willingness to look inside oneself when searching for answers to troublesome personal problems instead of finding others to place blame on (Hamachek, 2000). Emotional intelligence can be defined as a set of abilities that help in the accurate understanding of both verbal and non-verbal expression of emotion in self and others, the effective management of emotion in self and others, and the use of feelings for inspiration, strategising and success in one's life. Emotional intelligence is a kind of social intelligence that comprises the ability to assess one's own and others' emotions, distinguish

among them, and use that knowledge to guide one's thoughts and behaviour (Salovey & Mayer, 1990).

Salovey and Mayer (1990) gave the five factors of emotional intelligence- 1. Self-awareness: Knowledge about what one is feeling and listening to one's gut feeling about the right thing to do in a given situation. 2. Managing emotions: Regulation of impulses, delaying of gratification, and dealing with feelings in a way that enables one to regulate anger, regulate anxiety, and manage moods so that one is not overwhelmed by emotional ups and downs. 3. Motivation: Pursuit of goals, staying on track, avoiding procrastination, remaining optimistic in times of distress, and striving for mastery. 4. Empathy: Assessment of verbal and non-verbal needs and feelings in self and others and responding to them aptly, avoiding excessive self-absorption, and using one's self-awareness to understand others. 5. Ability to deal with relationships: Manage emotional responses in others, resolve interpersonal conflicts, and interact sophisticatedly and effortlessly.

Having a profound array of emotions and depth of feeling may generate emotional fluency, whereby individuals can promptly and efficiently generate emotions and emotion-related thoughts. Individuals with stronger mood swings might be able to expand their outlook by having multiple perspectives on a situation, leading to better ideas related to solutions and strategies (Mayer & Salovey, 1993). There is also variation in the regularity and magnitude of shifts in the predominant moods of different individuals (Eysenck, 1982; Larsen, Diener, & Emmons, 1986). Emotional individuals may emphasise higher-level processes concerning attention to feelings, clarity, and discriminability of feelings, and beliefs about mood-regulatory strategies (Mayer & Gaschke, 1988). Individuals who experience feelings clearly and are confident about their ability to regulate their moods and emotions are able to transform their moods from negative to positive more rapidly and proficiently after failure and other unpleasant experiences (Salovey, Mayer, Goldman, Turvey, & Palfai, 1993).

Intellectual problems also contain emotional information that needs to be processed. The processing of emotions works differently from the processing of non-emotional information. Emotions indicate attention towards important stimuli that need to be processed (Easterbrook, 1959; Salovey, 1990). Whenever there is a discrepancy between personal expectations and the reality of the situation, negative feelings and emotions can arise, directing attention to the self, aiding in clarification of the experience and facilitation of adaptive responses (Salovey & Rodin, 1985). It has been observed that both happy and sad emotions are followed by an inward shift in attention, which can promote thoughts and actions that potentially maintain pleasant or

relieve unpleasant states as well as lead to better prioritisation of life needs and goals (Salovey, 1990).

Self-awareness has been identified as a critical metacognitive process for promoting adaptive, self-directed change (Carver & Scheier, 1998), tracking progress toward desired changes, and using feedback to maintain or improve progress toward improving performance and achieving goals (Carver & Scheier, 1998). (Grant, 2002).

Resilience is typically characterised as a consequence or manifestation of positive adaptation resulting from exposure to adversity or threat, as an outcome of the availability and utilisation of internal and external resources (Windle, 2011). Resilience is the capability to overcome obstacles and challenges (Strümpfer, 1999). Psychological resilience is defined as the ability to successfully cope and adapt when faced with adversity or stressful life events (Pooley & Cohen, 2010). According to Hippe (2004), Self-awareness is an antecedent to resilience. Self-awareness and resilience both are considered important contributors to growth (Mills, Butt, Maynard, & Harwood, 2012; Tamminen, Holt, & Neely, 2013) that are related to adaptively coping with challenges (Sarkar & Fletcher, 2014). According to Joseph (1994), a resilient individual is one who is responsible, positive, self-reliant, committed, and socially skillful. Additional research suggests that social and intellectual competence, planning, and resourcefulness were key characteristics of resilient individuals (Wang, Haertel, & Walberg, 1997).

According to Brodtkin and Coleman (1996), a resilient individual has an inner strength that helps the individual to bounce back from the problems that would seem to lead the person to certain failure. Henderson (1998) identified what he termed as protective factors that he believed to be part of an individual's general makeup. Some of these factors were considered genetic, such as a personality that is outgoing and social; however, many protective behaviors can also be learned (Henderson, 1998; Joseph, 1994). According to Brodtkin & Coleman (1996), factors of resilience include having a sense of humour, flexibility, caring, empathy, good communication skills, at least one supportive caregiver, the ability to problem-solve, resourceful in seeking out the support or help of others, a sense of autonomy (that is the ability to act independently and exert control over one's environment), having goals, educational aspirations, persistence, and hopefulness.

According to Tusaie and Dyer (2004), the potential for resilience involves an interplay between the individual and his or her broader environment. This view is supported by early studies that examined resilience and found factors or characteristics that assist individuals to thrive from and in adversity. These characteristics can be divided into intrapersonal and environmental

factors and broadly encompass cognitive features, such as optimism, intelligence, creativity, and humour. These are often contained within a belief system that provides some existential meaning, a cohesive life story, and an overriding appreciation of the uniqueness of oneself. Resilience and emotional intelligence are important components of adaptive coping (Edward & Warelow, 2005). Resilient people are characterised as having favourable dispositional attributes including high self-esteem and self-efficacy, positive self-image, internal locus of control, optimism for the future, sense of control and competence in their life, and use of active coping strategies (Burke, Shakespeare-Finch, Paton, & Ryan, 2006; Diehl & Hay, 2010). In relation to support systems, resilient individuals have a history of family stability and cohesiveness, and they engage in and reciprocate social support with others (Earvolino-Ramirez, 2007).

Models of emotional intelligence frequently include coping. High intrapersonal intelligence could lead to better emotional regulation and effective dealing with stress whereas, high interpersonal intelligence could lead to measures of coping, which involve seeking emotional support and advice from others. Emotional intelligence can be viewed as a coping mechanism that promotes successful and efficient self-regulation towards desired outcomes (Salovey, Bedell, Detweiler, & Mayer, 2000). According to Ciarrochi et al. (2001), individuals with strong emotional intelligence may cope well with stressful situations, whereas others with limited emotional intelligence struggle, such as responding with depression, hopelessness, and other maladaptive behaviours.

Coping strategies are the behavioural and psychological techniques utilised to master, tolerate, reduce, or minimise stressful events. According to Lazarus and Folkman (1984), the process of coping consists of three main elements: the stressor (the event which causes stress); cognitive appraisal (evaluation of the situation as either inconsequential, threatening or favourable, and the assessment of coping resources available within the individual and the environment); and coping mechanisms. Coping Styles can be categorised as adaptive and maladaptive. Adaptive coping styles primarily include task-focused or problem-focused coping styles, while maladaptive coping styles mainly include avoidant-focused coping styles. Problem-focused coping refers to behaviour aimed at eliminating the stress factor or reducing its impact. In comparison, emotion-focused coping is aimed at the prevention, minimisation, or reduction of the emotional anguish caused by the stressful situation. Researchers have a difference in opinion whether emotional-focused coping styles fall under adaptive or maladaptive coping. Some further categorise emotional-focused coping into positive-emotional coping and negative-emotional coping. Coping strategies can be classified as

adaptive or maladaptive depending on various factors, based on empirical evidence illustrating the relationship of different styles of coping with emotional distress or well-being.

Carver (1997) categorised the Brief-Cope Scale strategies of acceptance, emotional, social support, humour, positive reframing, and religion as emotion-focused. Active coping, instrumental support, and planning as problem-focused strategies. Finally, behavioural disengagement, denial, self-distraction, self-blaming, and substance use and venting as dysfunctional coping strategies. Meyer (2001) classified the coping strategies measured by Brief-COPE scale based on their association with psychological well-being into maladaptive coping, which included venting, denial, substance use, behavioural disengagement, self-distraction, and self-blame, and adaptive coping, including positive reframing, planning and seeking social support, active coping, use of emotional and instrumental support, acceptance, religion, and humour. Furthermore, Meyer (2001) found that maladaptive strategies have a more significant relationship with mental health problems such as depression.

The Brief Cope Scale by Carver (1997) consists of 14 coping styles - Acceptance is accepting the reality of what has happened/learning to live with it; emotional support is obtaining emotional support/comfort and understanding; humor is making jokes about it/ making fun on the situation; positive reframing is viewing the situation from a different light, make it seem more positive/look for something good in it; religion is finding comfort in religious or spiritual beliefs/praying or meditating; active coping is concentrating of efforts on doing something about the situation/taking action to try to make it better; instrumental support is getting help and advice from other people/trying to get advice or help from others about what to do; planning is trying to come up with a strategy about what to do/thinking hard about what steps to take; behavioral disengagement is giving up trying to deal with it/the attempt to cope; denial is saying to myself "this is not real"/refusing to believe that it has happened; self-distraction is turning to work or other activities to take my mind off things/doing something to think about it less; self-blaming is criticising myself/blaming myself for things that happened; substance use is using alcohol or other drugs to feel better/to help me get through it; venting is saying things to let unpleasant feelings escape/expressing negative feelings.

## **CHAPTER 2**

### **Review of Literature**

Both components of private self-consciousness, self-reflection and insight were found to enhance resilience (Cowden et al., 2016). According to a qualitative study on mindfulness practice by Coholic (2011), a foundation of self-awareness can assist youth to build aspects of resilience including improved coping and social skills, problem solving skills, and feelings of self-esteem. In a study by Wells and Matthews (1994), private self-consciousness was not found to have any significant correlation with emotion-focused coping, problem-focused coping or suppression-oriented coping.

Self-awareness has been identified as a vital element of transformational self-development (Foster, 2007) and is also a necessary component of emotional intelligence (Ashkanasy and Dasborough, 2003; Bar-On, 1997; Goleman, 1995; Mayer and Salovey, 1997). Self-awareness is one of many components under the collection of skills that constitute Emotional Intelligence. Self-awareness is associated with good interpersonal and social skills, including effective communication (Osif, 2010; Perkins & Schmid, 2019). A study by Gill, Ramsey & Leberman (2015), which aimed to construct a model of developing emotional intelligence using techniques of enhancing self-awareness, interviewed 21 successful emotional intelligence trainers to understand the process of designing effective Emotional Intelligence training programs. All the trainers believed self-awareness to be the critical component in the development of emotional intelligence, which works as a catalyst for change and brings about growth. A study by Perkins & Schmid (2019), exploring the impact of using self-reflection journals on trait Emotional Intelligence in occupational therapy students, found that even short-term use of self-reflection journals has the ability to influence trait Emotional Intelligence skills positively.

Multiple research studies have found self-compassion and emotional intelligence to be positively correlated (Teleb & Awamleh, 2013; Senyuva et al., 2014; Heffernan et al., 2010). In a study by Castilho et al. (2016), a positive relationship was found between self-compassion and emotional intelligence, and both had a significant impact in the reduction of depressive symptoms. Self-compassion was found to be positively to all subscales of emotional intelligence in the TEIQue-SF (Fabio et al., 2021). Both self-compassion and emotional intelligence were found to have positive impact on coping with pressure (Koolae et al., 2019). Self-compassion was found to enhance psychological resilience among adolescents and young adults (Neff & McGehee, 2010). Self-compassion and mindfulness were positively linked to

resilience in health professionals (Kemper et al., 2015). High self-compassion was associated with increased resilience against depression (Ehret et al., 2015).

According to Allen and Leary (2010), people with higher self-compassion utilise more of cognitive restructuring and less of avoidance and disengagement, however, there are no apparent variations in the degree to which problem-solving, distraction and support are relied upon for coping, compared to individuals with lower self-compassion. Self-compassion was found to be positively correlated to instrumental support coping, active coping, planning coping, positive reframing coping, acceptance coping and coping efficacy, while negatively correlated to denial coping, behavioral disengagement coping and self-blame coping (Sirois, 2015).

Multiple studies have found the association between resilience and coping skills (Heiman, 2002; Rutter, 2007; Leipold and Greve, 2009; Harrop et al., 2006; Edward and Warelow, 2005). A 4-week resilience intervention found that enhanced resilience led to more effective coping strategies (i.e., higher problem solving, lower avoidant), higher scores on protective factors (i.e., positive affect, self-esteem, self-leadership), and lower scores on symptomatology (i.e., depressive symptoms, negative affect, perceived stress) (Steinhardt & Dolbier, 2010). According to Stuntzner and Hartley (2014), self-reflection can enhance resilience which is an important factor in increasing adaptive coping with disability.

Resilience was found to be predicted by greater use of rational coping and less use of emotional coping, but not by psychological functioning. The positive relationship between resilience and rational coping is consistent with the perception that approach-based coping strategies are effective and promote resilience (Herrman et al., 2011). The negative effect of emotional coping on resilience is consistent with Pole et al. (2006), who found that avoidance-based coping strategies negatively impacted resilience, suggest that emotion-focused coping is maladaptive and undermines resilience (LeBlanc et al., 2008).

Emotion-focused coping is found to be related to distress and worry (Matthews, Schwean, Campbell, Saklofske, & Mohamed, 2000), chronic diseases (Maes, Leventhal, & de Ridder, 1996), chronic pain (Katz, Ritvo, Irvine, & Jackson, 1996), substance abuse (Wills & Hirky, 1996), and depression, anxiety and somatic symptom reporting (Beasley, Thompson, & Davidson, 2003). Task-focused coping tends to be negatively associated with distress and disengagement (Matthews et al., 2000) and to be positively associated with health-promoting behaviours and outcomes such as treatment adherence (Christensen, Benotsch, Wiebe, & Lawton, 1995) and rate of recovery from surgery (Rosenberger, Ikovics, Epel, D'Entremont, & Jokl, 2004).

In a study by Saklofske et al. (2007), Emotional Intelligence showed a significant positive correlation with rational and a significant negative correlation with emotion-focused coping. Emotional Intelligence has been linked to rational/problem-focused coping (Saklofske, Austin, Galloway, & Davidson, 2007). Task-oriented coping was positively correlated with all subscales of emotional intelligence, while emotion-oriented coping was negatively associated with Intrapersonal, Stress Management and General Mood subscales of Emotional Intelligence. Distraction coping was negatively correlated with Stress Management. Social Diversion coping was positively correlated with Intrapersonal, Interpersonal (Austin et al., 2010).

Noorbakshsh et al. (2010) found significant positive correlations between all the three subscales of Emotional Intelligence (Regulation of Emotions, Utilisations of emotions and Appraisal of Emotions) and problem-focused coping and positive-emotional coping, and negative correlation between all the three subscales of Emotional Intelligence and negative-emotional coping. The variance and regression analysis results showed a meaningful association between problem-focused coping style and emotional intelligence subscales. Emotional intelligence subscales determined 28% of the variance related to problem-focused coping style. The direction of variables correlation shows that the more Emotional Intelligence, the individual uses more problem-focused coping, positive emotional-focused coping strategies and less negative emotional-focused coping in confronting stress.

Multiple research studies have showed that Emotional Intelligence has a positive relationship with problem-focused coping and positive emotional-focused coping, and a negative correlation with negative emotional-focused coping styles (Elias, Tobias, & Friedlander, 1999; Goleman, 1995, 1998; Mayer & Salovey, 1997; Petrides & Furnham, 2000; Saarni, 1997; Salovey & Mayer, 1990; Salovey, Mayer, & Caruso, 2002; Saklofske et al., 2003; Saklofske et al., 2007; Zins, Travis, & Freppon, 1997). Gohm & Clore (2002) examined the relationship between coping styles and Emotional Intelligence. The results showed that assessing emotional experience and being confident with our skills to pay attention, to understand and to regulate our emotions are associated with a more adaptive coping style. The authors found in two different samples that high emotional intelligence scores were significant in relation to positive reinterpretation and growth strategies, to more active coping, action planning and social and emotional support search. So, people with higher emotional intelligence were more prone to be concentrated on their emotions and ease them, but were not likely to avoid the stressing situation by means of behaviours or mental suppression. In general, the results have indicated that coping strategies are congruent with the person's affective state.

According to the model proposed by Campbell & Neobedzi (2007), Self-awareness enhances emotional intelligence, and both combine to form emotional competence, which is associated positively with adaptive coping styles and negatively with maladaptive coping styles. Self-Awareness was found to be positively associated with Emotional Intelligence, and both of them contributed to Emotional Competence. Emotional competence was found to be positively associated with Adaptive Coping. However, no relationship could be established between emotional competence and maladaptive coping (Campbell & Neobedzi, 2007).

Venting has been considered as a maladaptive coping style (Meyer, 2001 & Carver, 1997), but here it is taken as an adaptive coping style because venting can lead to catharsis and a clearer understanding of one's emotions. Moreover, venting can promote communication, understanding, closeness and attunement in interpersonal relationships, thereby strengthening them. A positive association was found between emotional intelligence and expressive coping (Tsarenko & Strizhakova, 2013). Similarly, Emotion-focused coping styles are also regarded as adaptive because they should bring about a clearer understanding of one's emotions, which would help transform one's negative emotions into positive ones, thus promoting healing and well-being. The organised response of emotions is adaptive and can potentially transform personal and social interaction into an enriching experience (Salovey & Mayer, 1990).

## **CHAPTER 3**

### **Research Gap**

There is a dearth of studies investigating the effect of private self-consciousness, self-compassion, emotional intelligence, resilience on adaptive and maladaptive coping styles. Moreover, the mediating role of emotional intelligence and resilience has not been explored in the relationship between private self-consciousness, self-compassion and coping styles. Most studies on coping styles have been done with them classified as problem-focused, emotion-focused and avoidance-focused. The present study explores the factors of 14 different coping styles with problem-focused and emotion-focused coping styles categorised as adaptive and avoidance-focused coping styles categorised as maladaptive. It is also necessary to study the determinants of coping on an Indian sample, as styles of coping with stress vary across cultures.

### **Motivation For The Study**

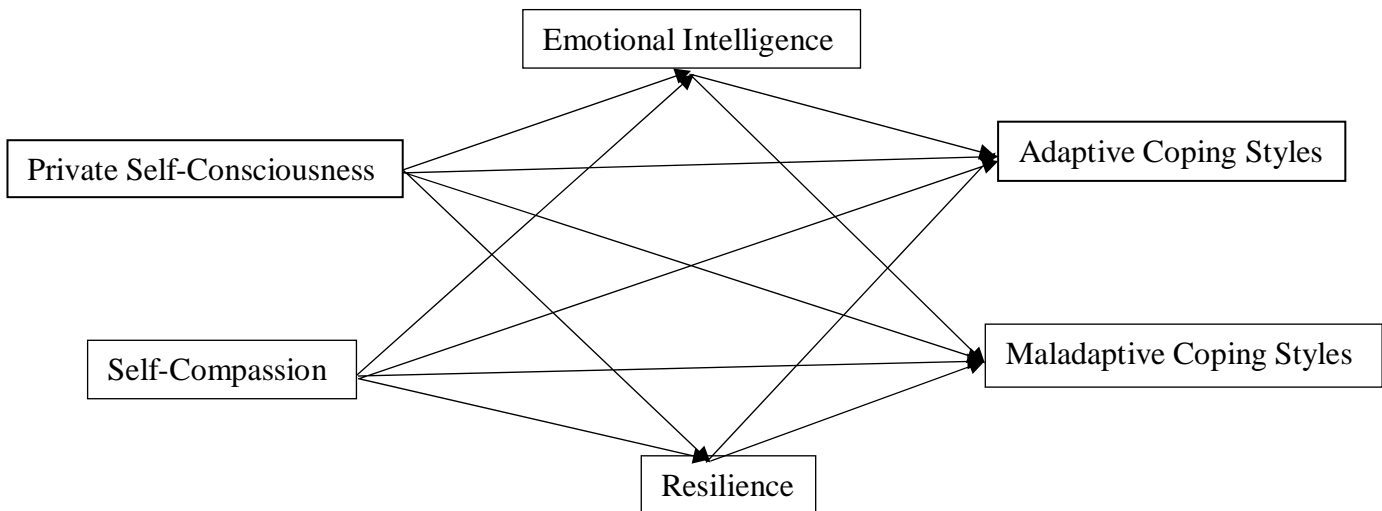
Life is full of unpredictable and uncontrollable experiences which threaten well-being and flourishing. It is vital to understand the factors of adaptive coping to stress and protective mental and emotional characteristics that enable one to overcome life's challenges and achieve prosperity. Thus, it is critical to examine the predictors of adaptive and maladaptive coping and the relationships between its predictors. Multiple research studies have found links between private self-consciousness, self-compassion, emotional intelligence, resilience and coping (Campbell & Neobedzi, 2007; Saklofske et al., 2007; Allen & Leary, 2010; Herrman et al., 2011; Ashkanasy & Dasborough, 2003). However, there is a lack of evidence on the exact pathways influencing the relationship between these factors and the mediating roles of these variables. Thus, it is important to explore the determinants of coping in a mediation model.

### **Conceptual Framework**

In a study by Cowden et al. (2016), both components of private self-consciousness, self-reflection and insight were found to enhance resilience. Both self-compassion and emotional intelligence were found to have positive impact on coping with pressure (Koolae et al., 2019). Self-compassion was found to enhance psychological resilience among adolescents and young adults (Neff & McGehee, 2010). In a study by Campbell and Neobedzi (2009) it was found that self-awareness increases emotional intelligence, and both of them are positively associated with adaptive coping. Based on many such previous studies, a mediation model could be proposed with private self-consciousness and self-compassion as the independent variables,

emotional intelligence and resilience as the mediating variables and coping styles as the dependent variables.

**Model** – shows the proposed pathway connecting private self-consciousness, self-compassion, emotional intelligence, resilience, adaptive coping styles and maladaptive coping styles.



### Objectives

1. To study the relationship between private self-consciousness and coping styles, and the relationship between self-compassion and coping styles.
2. To investigate the mediating role of emotional intelligence and resilience in the relationship between private self-consciousness and coping styles.
3. To investigate the mediating role of emotional intelligence and resilience in the relationship between self-compassion and coping styles.

### Hypotheses

H<sub>1</sub> Private Self-Consciousness will be positively correlated to Emotional Intelligence, Resilience, Adaptive Coping Styles and negatively correlated to Maladaptive Coping Styles.

H<sub>2</sub> Self-Compassion will be positively correlated to Emotional Intelligence, Resilience, Adaptive Coping Styles and negatively correlated to Maladaptive Coping Styles.

H<sub>3</sub> Emotional Intelligence will be positively correlated to Adaptive Coping Styles and negatively correlated to Maladaptive Coping Styles.

H<sub>4</sub> Resilience will be positively correlated to Adaptive Coping Styles and negatively correlated to Maladaptive Coping Styles.

H<sub>5</sub> Emotional Intelligence will mediate the relationship between Private Self-Consciousness and Adaptive Coping Styles.

H<sub>6</sub> Emotional Intelligence will mediate the relationship between Private Self-Consciousness and Maladaptive Coping Styles.

H<sub>7</sub> Emotional Intelligence will mediate the relationship between Self-Compassion and Adaptive Coping Styles.

H<sub>8</sub> Emotional Intelligence will mediate the relationship between Self-Compassion and Maladaptive Coping Styles.

H<sub>9</sub> Resilience will mediate the relationship between Private Self-Consciousness and Adaptive Coping Styles.

H<sub>10</sub> Resilience will mediate the relationship between Private Self-Consciousness and Maladaptive Coping Styles.

H<sub>11</sub> Resilience will mediate the relationship between Self-Compassion and Adaptive Coping Styles.

H<sub>12</sub> Resilience will mediate the relationship between Self-Compassion and Adaptive Coping Styles.

## CHAPTER 4

### Method

#### Sample

The sample consisted of 200 participants (100 males and 100 females) within the age range of 18-45 years. Convenience sampling was done.

#### Design

The design of the study comprises a Mediation and Structural Equational Model, where the independent variables are private self-consciousness and self-compassion, the mediating variables are emotional intelligence and resilience, and the dependent variables are adaptive and maladaptive coping styles. The 14 coping styles were categorised as adaptive and maladaptive. Active Coping, Use of Emotional Support, Use of Instrumental Support, Venting, Positive Reframing, Planning, Humor, Acceptance and Religion, were included in Adaptive coping styles, while Self-Distraction, Denial, Substance Use, Behavioral Disengagement and Self-Blame, were included in Maladaptive Coping Styles.

#### Tools Used

Self-Reflection and Insight Scale (SRIS) – given by Grant et al. (2002), was used to measure private self-consciousness. It is a 20-item scale consisting of 2 dimensions, self-reflection and insight. 12 items measured self-reflection and 8 items measured insight. Scoring was done on a six-point Likert Scale (1 = strongly disagree, 6 = strongly agree). Cronbach's alpha coefficient for the Self-Reflection scale has been calculated to be .91, and .87 for the insight scale.

Self-Compassion Scale-Short Form (SCS-SF) – given by Raes et al. (2011), based on the Self Compassion Scale (SCS) given by Neff (2003), will be used to measure self-compassion. It consists of 12 items and has six subscales (self-kindness, self-judgement, common humanity, isolation, mindfulness and over-identification). Scoring is done on a 5-point Likert Scale with responses ranging from 'Almost Never (1)' to 'Almost Always (5)'. It is a reliable and valid measurement tool with a Cronbach's alpha of approximately 0.90.

Trait Emotional Intelligence Questionnaire – Short Form (TEIQue-SF) – given by Petrides (2009), was used to measure the trait of emotional intelligence. This is the 30-item form of the TEIQue Scale. It includes five subscales of well-being, emotionality, sociability, self-control

and global EI. Scoring was done on a 7-point Likert Scale (1 = Completely Disagree) to (7 = Completely Agree). The TEIQue-SF is a valid and reliable tool with a Cronbach's alpha of .86.

The 10-item Connor-Davidson Resilience Scale (CD-RISC-10) – is the short version of the Connor and Davidson Resilience Scale (CD-RISC) given by Connor and Davidson (2003), which consists of 25 items. It was refined by Campbell-Sills and Stein (2007). Scoring is done on a 5-point Likert Scale, with responses ranging from 'not true at all' to 'true nearly all the time'. The Cronbach's alpha for the scale is around .80.

Brief Coping Scale – given by Carver (1997), was used to measure the 14 coping styles, namely, Active Coping, Self-Distraction, Denial, Substance Use, Use of Emotional Support, Use of Instrumental Support, Behavioral Disengagement, Venting, Positive Reframing, Planning, Humor, Acceptance, Religion and Self-Blame. The Brief Coping Scale is a short form of the Coping Inventory (Carver, Scheier, & Weintraub, 1989). It consists of a total of 28 items (2 items for measuring each coping style). Scoring will be done on 4-point scales (1 – I haven't been doing this at all; 4 – I've been doing this a lot). The Cronbach's alpha for the Brief Coping Scale was computed to be .75.

## **Procedure**

The survey was administered using Google Forms. It consisted of 100 questions, 20 items for measuring private self-consciousness, 12 items for measuring self-compassion, 30 items measuring emotional intelligence, 10 items for measuring resilience and 28 items for measuring the coping styles. The instructions were defined at the beginning of the survey and informed consent were obtained. The participants were assured that their data will be kept confidential. The following instructions were given to the subjects - "Given below are some simple questions related to your basic thoughts and feelings and how you respond to them. Please select the option that describes you the best. There are no right or wrong answers. The survey will take approximately 20 minutes to answer". After the collection of responses, scoring was done manually and correlation and mediation analysis were performed.

## **Statistical Analyses**

The correlation analysis was done using SPSS 22.0 Software and the mediation analysis was done using SmartPLS 3 Software.

## CHAPTER 5

### Results

For assessing the mediating role of Emotional Intelligence and Resilience in the relationship between Private Self-Consciousness and Coping Styles and in the relationship between Self-Compassion and Coping Styles, descriptive statistics and correlations were calculated using SPSS 22.0 while path coefficients, specific indirect effects and model fit analysis were calculated using SmartPLS 3.

**Table No. 1** – Descriptive Statistics

Variables	Mean	Std. Deviation	N
Private Self-Consciousness	84.17	12.995	200
Self-Compassion	36.90	7.342	200
Emotional Intelligence	130.82	24.218	200
Resilience	26.95	7.010	200
Adapting Coping	27.67	9.364	200
Maladaptive Coping	11.53	5.478	200

Table No. 1 shows the descriptive statistics. The sample consisted of 200 participants. Mean score for private self-consciousness is 84.17 (SD=12.995), mean score for self-compassion is 36.90 (SD=7.342), mean score for emotional intelligence is 130.82 (SD=24.218), mean score for resilience is 26.95 (SD=7.010), mean score for adaptive coping styles is 27.67 (SD=9.364), and mean score for maladaptive coping styles is 11.53 (SD=5.478).

**Table No. 2 – Correlations**

Variables	Private Self-Consciousness	Self-Compassion	Emotional Intelligence	Resilience	Adapting Coping	Maladaptive Coping
Private Self-Consciousness	1	.358**	.445**	.329**	.272**	-.308**
Self-Compassion	.358**	1	.617**	.470**	.283**	-.358**
Emotional Intelligence	.445**	.617**	1	.560**	.349**	-.519**
Resilience	.329**	.470**	.560**	1	.451**	-.187**
Adapting Coping	.272**	.283**	.349**	.451**	1	.205**
Maladaptive Coping	-.308**	-.358**	-.519**	-.187**	.205**	1

\*\* . Correlation is significant at the 0.01 level (2-tailed).

Table No. 2 shows the correlations between the variables. Private Self-Consciousness was found to have a significant positive correlation with Self-Compassion ( $r=.358$ ,  $p<.01$ ), Emotional Intelligence ( $r=.445$ ,  $p<.01$ ), Resilience ( $r=.329$ ,  $p<.01$ ) and Adaptive Coping Styles ( $r=.272$ ,  $p<.01$ ), and a significant negative correlation with Maladaptive Coping Styles ( $r=-.308$ ,  $p<.01$ ). Self-Compassion was found to have a significant positive correlation with Emotional Intelligence ( $r=.617$ ,  $p<.01$ ), Resilience ( $r=.470$ ,  $p<.01$ ) and Adaptive Coping Styles ( $r=.283$ ,  $p<.01$ ), and a significant negative correlation with Maladaptive Coping Styles ( $r=-.358$ ,  $p<.01$ ). Emotional Intelligence was found to have a significant positive correlation with Resilience ( $r=.560$ ,  $p<.01$ ), Adaptive Coping Styles ( $r=.349$ ,  $p<.01$ ) and a significant negative correlation with Maladaptive Coping Styles ( $r=-.519$ ,  $p<.01$ ). Resilience was found to have a significant positive correlation with Adaptive Coping Styles ( $r=.451$ ,  $p<.01$ ) and a significant negative correlation with Maladaptive Coping Styles ( $r=-.187$ ,  $p<.01$ ).

**Figure No. 1 – Mediation Model**

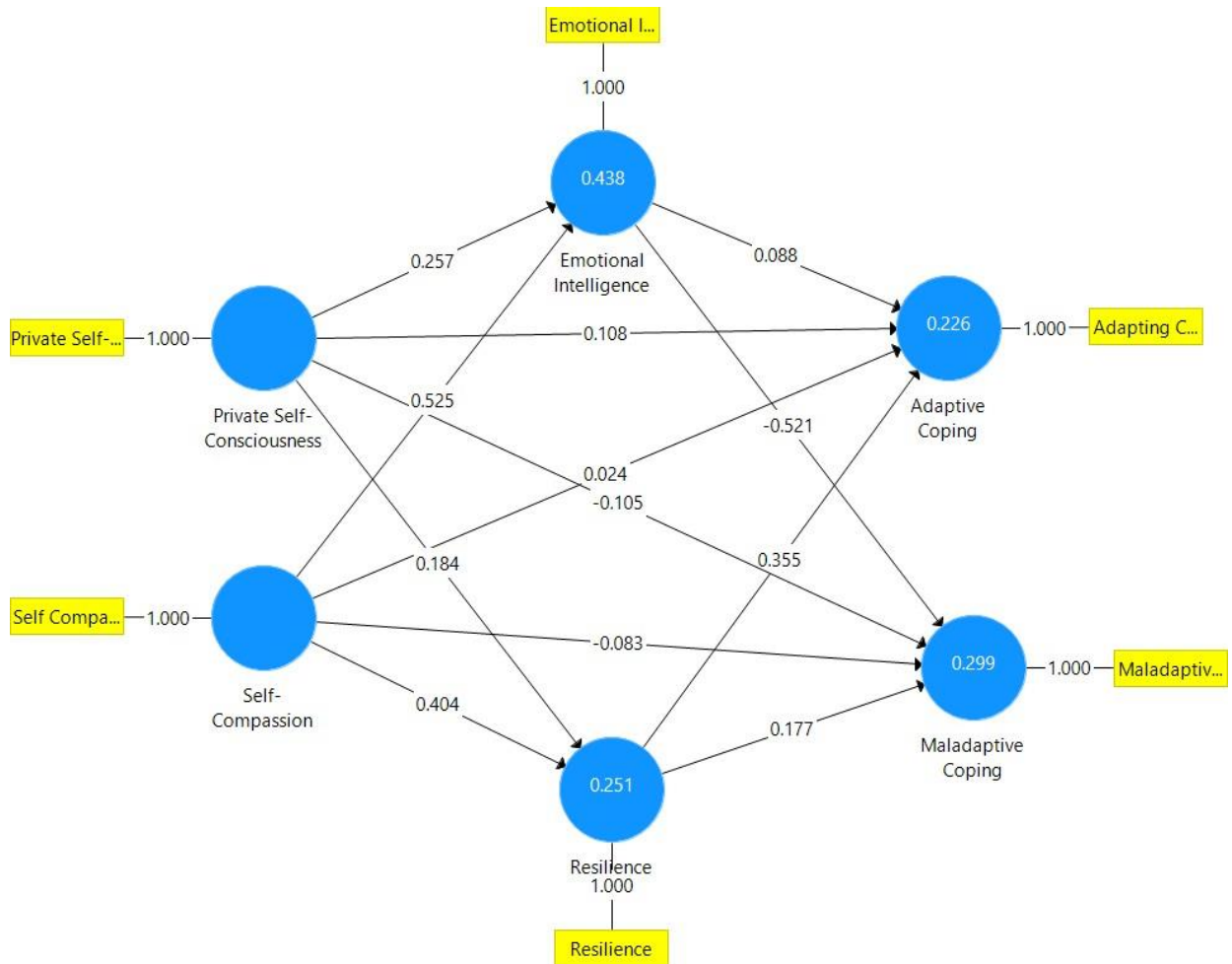


Figure 1 shows the mediation model, with Private Self-Consciousness and Self-Compassion as the independent variables, Emotional Intelligence and Resilience as the mediating variables, Adaptive Coping and Maladaptive Coping as the dependent variables. It shows the path coefficients and the R-square values. 43.8% of the variance in Emotional Intelligence is accounted by Private Self-Consciousness and Self-Compassion, 25.1% of the variance in Resilience is accounted by Private Self-Consciousness and Self-Compassion, 22.6% of the variance in Adaptive Coping is accounted by Private Self-Consciousness, Self-Compassion, Emotional Intelligence and Resilience together, and 29.9% of the variance in Maladaptive Coping is accounted by Private Self-Consciousness, Self-Compassion, Emotional Intelligence and Resilience together.

**Table No. 3 – Path Coefficients**

	Original Sample (O)	Sample Mean (M)	Std. Deviation	T Statistics	P Values
Private Self-Consciousness => Emotional Intelligence	0.257	0.256	0.065	3.974	0.000
Private Self-Consciousness => Resilience	0.184	0.183	0.067	2.759	0.006
Private Self-Consciousness => Adaptive Coping	0.108	0.107	0.089	1.211	0.226
Private Self-Consciousness => Maladaptive Coping	-0.105	-0.099	0.069	1.512	0.131
Self-Compassion => Emotional Intelligence	0.525	0.521	0.067	7.82	0.000
Self-Compassion => Resilience	0.404	0.398	0.075	5.384	0.000
Self-Compassion => Adaptive Coping	0.024	0.022	0.074	0.318	0.751
Self-Compassion => Maladaptive Coping	-0.083	-0.087	0.075	1.103	0.271
Emotional Intelligence => Adaptive Coping	0.088	0.086	0.095	0.931	0.352
Emotional Intelligence => Maladaptive Coping	-0.521	-0.517	0.081	6.389	0.000
Resilience => Adaptive Coping	0.355	0.354	0.078	4.531	0.000
Resilience => Maladaptive Coping	0.177	0.178	0.074	2.385	0.017

Table No. 3 shows the path coefficients. The direct effect of Private Self-Consciousness on Emotional Intelligence was found to be significant ( $\beta=.257$ ,  $t=3.974$ ,  $p<.01$ ). The direct effect of Private Self-Consciousness on Resilience was found to be significant ( $\beta=.184$ ,  $t=2.759$ ,  $p<.01$ ). The direct effect of Private Self-Consciousness on Adaptive Coping was not found to be significant ( $\beta=.108$ ,  $t=1.211$ ,  $p>.05$ ). The direct effect of Private Self-Consciousness on Maladaptive Coping was not found to be significant ( $\beta=-.105$ ,  $t=1.512$ ,  $p>.05$ ). The direct effect of Self-Compassion on Emotional Intelligence was found to be significant ( $\beta=.525$ ,  $t=7.82$ ,

p<.01). The direct effect of Self-Compassion on Resilience was found to be significant ( $\beta=.404$ ,  $t=5.384$ ,  $p<.01$ ). The direct effect of Self-Compassion on Adaptive Coping was not found to be significant ( $\beta=-.024$ ,  $t=.318$ ,  $p>.05$ ). The direct effect of Self-Compassion on Maladaptive Coping was not found to be significant ( $\beta=-.083$ ,  $t=1.103$ ,  $p>.05$ ). The direct effect of Emotional Intelligence on Adaptive Coping was not found to be significant ( $\beta=.088$ ,  $t=.931$ ,  $p>.05$ ). The direct effect of Emotional Intelligence on Maladaptive Coping was found to be significant ( $\beta=-.521$ ,  $t=6.389$ ,  $p<.01$ ). The direct effect of Resilience on Adaptive Coping was found to be significant ( $\beta=.355$ ,  $t=4.531$ ,  $p<.01$ ). The direct effect of Resilience on Maladaptive Coping was found to be significant ( $\beta=.177$ ,  $t=2.385$ ,  $p<.05$ ).

**Table No. 4** – Specific Indirect Effects

	Original Sample (O)	Sample Mean (M)	Std. Deviation	T Statistics	P Values
Private Self-Consciousness => Emotional Intelligence => Adaptive Coping	0.023	0.023	0.026	0.866	0.387
Private Self-Consciousness => Emotional Intelligence => Maladaptive Coping	-0.134	-0.132	0.039	3.425	0.001
Private Self-Consciousness => Resilience => Adaptive Coping	0.065	0.065	0.027	2.389	0.017
Private Self-Consciousness => Resilience => Maladaptive Coping	0.033	0.032	0.018	1.778	0.076
Self-Compassion => Emotional Intelligence => Adaptive Coping	0.046	0.044	0.050	0.916	0.360
Self-Compassion => Emotional Intelligence => Maladaptive Coping	-0.273	-0.27	0.058	4.749	0.000
Self-Compassion => Resilience => Adaptive Coping	0.143	0.141	0.041	3.536	0.000
Self-Compassion => Resilience => Maladaptive Coping	0.072	0.071	0.034	2.115	0.035

Table No. 4 shows that the indirect effect of Private Self-Consciousness on Adaptive Coping Styles through the mediating role of Emotional Intelligence was not found to be significant ( $\beta=.023$ ,  $t=.866$ ,  $p>.05$ ). The indirect effect of Private Self-Consciousness on Maladaptive Coping Styles through the mediating role of Emotional Intelligence was found to be significant ( $\beta=-.134$ ,  $t=3.425$ ,  $p<.01$ ). The indirect effect of Private Self-Consciousness on Adaptive Coping Styles through the mediating role of Resilience was found to be significant ( $\beta=.065$ ,  $t=2.389$ ,  $p<.05$ ). The indirect effect of Private Self-Consciousness on Maladaptive Coping Styles through the mediating role of Resilience was not found to be significant ( $\beta=.033$ ,  $t=1.778$ ,  $p>.05$ ). Thus, Emotional Intelligence fully mediates the relationship between Private Self-Consciousness and Maladaptive Coping, and Resilience fully mediates the relationship between Private Self-Consciousness and Adaptive Coping.

The indirect effect of Self-Compassion on Adaptive Coping Styles through the mediating role of Emotional Intelligence was not found to be significant ( $\beta=.046$ ,  $t=.916$ ,  $p>.05$ ). The indirect effect of Self-Compassion on Maladaptive Coping Styles through the mediating role of Emotional Intelligence was found to be significant ( $\beta=-.273$ ,  $t=4.749$ ,  $p<.01$ ). The indirect effect of Self-Compassion on Adaptive Coping Styles through the mediating role of Resilience was found to be significant ( $\beta=.143$ ,  $t=3.536$ ,  $p<.01$ ). The indirect effect of Self-Compassion on Maladaptive Coping Styles through the mediating role of Resilience was found to be significant ( $\beta=.072$ ,  $t=2.115$ ,  $p<.05$ ). Thus, Emotional Intelligence fully mediates the relationship between Self-Compassion and Maladaptive Coping. Resilience fully mediates the relationship between Self-Compassion and Adaptive Coping and the relationship between Self-Compassion and Maladaptive Coping.

**Table No. 5 – Model Fit**

Model Fit	
SRMR	0.092
NFI	0.799
Rms Theta	0.4

Table No. 5 shows the model fit. The SRMR value was calculated to be .092, NFI value was calculated to be .799, the Rms Theta value was calculated to be 0.4. For the model fit to be significant, the value of NFI needs to be above 0.9, the value of SRMR needs to be below 0.1 and the Rms Theta value needs to be below 0.05. Thus, the overall mediational model is not significant.

## **CHAPTER 6**

### **Discussion**

The study aimed to investigate the mediating role of Emotional Intelligence and Resilience in the relationship between Private Self-Consciousness and Coping Styles and in the relationship between Self-Compassion and Coping Styles. Private Self-Consciousness was found to be positively correlated to Emotional Intelligence, Resilience, Adaptive Coping Styles and negatively correlated to Maladaptive Coping Styles. Therefore, H<sub>1</sub> was accepted. Self-Compassion was found to be positively correlated to Emotional Intelligence, Resilience, Adaptive Coping Styles and negatively correlated to Maladaptive Coping Styles. Therefore, H<sub>2</sub> was accepted. Emotional Intelligence was found to be positively correlated to Adaptive Coping Styles and negatively correlated to Maladaptive Coping Styles. Therefore, H<sub>3</sub> was accepted. Resilience was found to be positively correlated to Adaptive Coping Styles and negatively correlated to Maladaptive Coping Styles. Therefore, H<sub>4</sub> was accepted.

It was hypothesized that Emotional Intelligence will mediate the relationship between Private Self-Consciousness and Adaptive Coping Styles. The mediating role of Emotional Intelligence in the relationship between Private Self-Consciousness and Adaptive Coping Styles was not found to be significant. Therefore, H<sub>5</sub> was rejected. It was hypothesized that Emotional Intelligence will mediate the relationship between Private Self-Consciousness and Maladaptive Coping Styles. The mediating role of Emotional Intelligence in the relationship between Private Self-Consciousness and Maladaptive Coping Styles was found to be significant. Therefore, H<sub>6</sub> was accepted. It was hypothesized that Emotional Intelligence will mediate the relationship between Self-Compassion and Adaptive Coping Styles. The mediating role of Emotional Intelligence in the relationship between Self-Compassion and Adaptive Coping Styles was not found to be significant. Therefore, H<sub>7</sub> was rejected. It was hypothesized that Emotional Intelligence will mediate the relationship between Self-Compassion and Maladaptive Coping Styles. The mediating role of Emotional Intelligence in the relationship between Self-Compassion and Maladaptive Coping Styles was found to be significant. Therefore, H<sub>8</sub> was accepted.

It was hypothesized that Resilience will mediate the relationship between Private Self-Consciousness and Adaptive Coping Styles. The mediating role of Resilience in the relationship between Private Self-Consciousness and Adaptive Coping Styles was found to be significant. Therefore, H<sub>9</sub> was accepted. It was hypothesized that Resilience will mediate the relationship between Private Self-Consciousness and Maladaptive Coping Styles. The

mediating role of Resilience in the relationship between Private Self-Consciousness and Maladaptive Coping Styles was not found to be significant. Therefore, H<sub>10</sub> was rejected. It was hypothesized that Resilience will mediate the relationship between Self-Compassion and Adaptive Coping Styles. The mediating role of Resilience in the relationship between Self-Compassion and Adaptive Coping Styles was found to be significant. Therefore, H<sub>11</sub> was accepted. It was hypothesized that Resilience will mediate the relationship between Self-Compassion and Adaptive Coping Styles. The mediating role of Resilience in the relationship between Self-Compassion and Adaptive Coping Styles was found to be significant. Therefore, H<sub>12</sub> was accepted.

In a study by Cowden et al. (2016), both components of private self-consciousness, self-reflection and insight were found to enhance resilience. Self-compassion was found to be positively correlated to instrumental support coping, active coping, planning coping, positive reframing coping, acceptance coping and coping efficacy, while negatively correlated to denial coping, behavioral disengagement coping and self-blame coping (Sirois, 2015). Emotional Intelligence has a positive relationship with problem-focused coping and positive emotional-focused coping, and a negative correlation with negative emotional-focused coping styles (Saklofske et al. 2007). In a study by Campbell and Neobedzi (2007), emotional intelligence significantly mediated the relationship between self-awareness and adaptive and maladaptive coping. According to Stuntzner and Hartley (2014), self-reflection can enhance resilience which is an important factor in increasing adaptive coping.

## **CHAPTER 7**

### **Conclusion**

The study aimed to examine the mediating role of Emotional Intelligence and Resilience in the relationship between Private Self-Consciousness and Coping Styles and in the relationship between Self-Compassion and Coping Styles. Private Self-Consciousness was found to be positively correlated to Emotional Intelligence, Resilience, Adaptive Coping Styles and negatively correlated to Maladaptive Coping Styles. Self-Compassion was found to be positively correlated to Emotional Intelligence, Resilience, Adaptive Coping Styles and negatively correlated to Maladaptive Coping Styles. Emotional Intelligence was found to be positively correlated to Adaptive Coping Styles and negatively correlated to Maladaptive Coping Styles; Resilience was found to be positively correlated to Adaptive Coping Styles and negatively correlated to Maladaptive Coping Styles. The mediation analysis revealed that Emotional Intelligence fully mediates the relationship between Private Self-Consciousness and Maladaptive Coping and the relationship between Self-Compassion and Maladaptive Coping while Resilience fully mediates the relationship between Self-Compassion and Adaptive Coping, the relationship between Self-Compassion and Maladaptive Coping and the relationship between Private Self-Consciousness and Adaptive Coping. However, the model fit analysis found that the overall mediation model was not significant.

### **Implications, Limitations and Future Scope**

Private Self-Consciousness, Self-Compassion, Emotional Intelligence and Resilience all emerged to be significant predictors of adaptive and maladaptive coping. However, the inter-relationships between these variables are not clear. Moreover, there could be other similar variables related to coping, influencing the effects of one variable over another, especially the mediating roles. These variables need to be accounted for or held constant for better understanding of the determinants of coping. The study was conducted on an urban Indian population using convenience sampling. Further studies should be done exploring the inter-relationships between these variables, specifically with a mediation model. Simple Random Sampling should be used on a wider sample with people from multiple ages, regions and socio-economic backgrounds.

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## APPENDIX A

### SELF-REFLECTION AND INSIGHT SCALE

Indicate your degree of agreement with the following statements, ranging from Strongly Disagree (1) to Strongly Agree (6). Choose the response which best describes how you think and feel.

1. I don't often think about my thoughts
2. I rarely spend time in self-reflection
3. I frequently examine my feelings
4. I don't really think about why I behave in the way that I do
5. I frequently take time to reflect on my thoughts
6. I often think about the way I feel about things
7. I am not really interested in analyzing my behavior
8. It is important for me to evaluate the things that I do
9. I am very interested in examining what I think about
10. It is important to me to try to understand what my feelings mean
11. I have a definite need to understand the way that my mind works
12. It is important to me to be able to understand how my thoughts arise
13. Insight I am usually aware of my thoughts
14. I'm often confused about the way that I really feel about things
15. I usually have a very clear idea about why I've behaved in a certain way
16. I'm often aware that I'm having a feeling, but I often don't quite know what it is
17. My behavior often puzzles me
18. Thinking about my thoughts makes me more confused
19. Often I find it difficult to make sense of the way I feel about things
20. I usually know why I feel the way I do

## APPENDIX B

### Self-Compassion Scale

Please read each statement carefully before answering. For each item, indicate how often you behave in the stated manner, using the following 1-5 scale. (Almost Never = 1; Almost Always =5). Please answer according to what really reflects your experience rather than what you think your experience should be.

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

## APPENDIX C

### TEIQue-SF (Trait Emotional Intelligence Questionnaire-Short Form)

Instructions: Please answer each statement below by putting a circle around the number that best reflects your degree of agreement or disagreement with that statement. Do not think too long about the exact meaning of the statements. Work quickly and try to answer as accurately as possible. There are no right or wrong answers. There are seven possible responses to each statement ranging from ‘Completely Disagree’ (number 1) to ‘Completely Agree’ (number 7).

1. Expressing my emotions with words is not a problem for me.
2. I often find it difficult to see things from another person’s viewpoint.
3. On the whole, I’m a highly motivated person.
4. I usually find it difficult to regulate my emotions.
5. I generally don’t find life enjoyable.
6. I can deal effectively with people.
7. I tend to change my mind frequently.
8. Many times, I can’t figure out what emotion I’m feeling.
9. I feel that I have a number of good qualities.
10. I often find it difficult to stand up for my rights.
11. I’m usually able to influence the way other people feel.
12. On the whole, I have a gloomy perspective on most things.
13. Those close to me often complain that I don’t treat them right.
14. I often find it difficult to adjust my life according to the circumstances.
15. On the whole, I’m able to deal with stress.
16. I often find it difficult to show my affection to those close to me.
17. I’m normally able to “get into someone’s shoes” and experience their emotions.
18. I normally find it difficult to keep myself motivated.

19. I'm usually able to find ways to control my emotions when I want to.
20. On the whole, I'm pleased with my life.
21. I would describe myself as a good negotiator.
22. I tend to get involved in things I later wish I could get out of.
23. I often pause and think about my feelings.
24. I believe I'm full of personal strengths.
25. I tend to "back down" even if I know I'm right.
26. I don't seem to have any power at all over other people's feelings.
27. I generally believe that things will work out fine in my life.
28. I find it difficult to bond well even with those close to me.
29. Generally, I'm able to adapt to new environments.
30. Others admire me for being relaxed.

## **APPENDIX D**

### **10-item Connor-Davidson Resilience Scale (CD-RISC-10)**

Please read each statement carefully before answering. For each item, indicate how often you behave in the stated manner, using the following 1-5 scale. (Not true at all = 0; True nearly all the time=4). Please answer according to what really reflects your experience rather than what you think your experience should be.

1. I am able to adapt when changes occur.
2. I am able to deal with whatever comes my way.
3. I try to see the humorous side of things when faced with problems.
4. Having to cope with stress can make me stronger.
5. I tend to bounce back after illness, injury or other hardships.
6. I believe I can achieve my goals, even if there are obstacles.
7. Under pressure, I can stay focused and think clearly.
8. I am not easily discouraged by failure.
9. I think of myself as a strong person when dealing with life's challenges and difficulties.
10. I am able to handle unpleasant or painful feelings like sadness, fear and anger.

## APPENDIX E

### BRIEF COPE SCALE

Choose the option that best describes how you deal with stressful and challenging life situations.

1=I haven't been doing this at all

2=I've been doing this a little bit

3=I've been doing this a medium amount

4=I've been doing this a lot.

1. I've been turning to work or other activities to take my mind off things

2. I've been concentrating my efforts on doing something about the situation I'm in

3. I've been saying to myself "this isn't real".

4. I've been using alcohol or other drugs to myself feel better.

5. I've been getting emotional support from others.

6. I've been giving up trying to deal with it.

7. I've been taking action to try to make the situation better.

8. I've been refusing to believe that it has happened.

9. I've been saying things to let my unpleasant feeling escape.

10. I've been getting help and advice from other people.

11. I've been using alcohol or other drugs to help me get through it

12. I've been trying to see it in a different light, to make it seem more positive.

13. I've been criticizing myself.

14. I've been trying to come up with a strategy about what to do.

15. I've been getting comfort and understanding from someone.

16. I've been giving up the attempt to cope.

17. I've been looking for something good in what is happening.
18. I've been making jokes about it.
19. I've been doing something to think about it less, such as going to movies, watching TV, reading, daydreaming, sleeping, or shopping.
20. I've been accepting the reality of the fact that it has happened.
21. I've been expressing my negative feelings.
22. I've been trying to find comfort in my religion or spiritual beliefs.
23. I've been trying to get advice or help from other people about what to do.
24. I've been learning to live with it.
25. I've been thinking hard about what steps to take.
26. I've been blaming myself for things that happened.
27. I've been praying or meditating.
28. I've been making fun of the situation.