

# ATTACHMENT STYLE, SELF-COMPASSION, EMOTIONAL EMPATHY, AND DEPRESSION AMONG UNDERGRADUATE STUDENTS IN A SELECTED INTERNATIONAL UNIVERSITY

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**Abstract:** Research studies have claimed that depression is one of the major causes for psychological disorders as it can interfere with one's daily functioning and much research has been done into the various aspects relating to depression and its antecedents. Understanding the antecedents of depression among undergraduate university students would be beneficial to university counselors, faculty, and administrators. Correspondingly, this research examined the relationships between attachment anxiety and attachment avoidance on depression, being mediated by self-compassion and emotional empathy. The key findings indicated that attachment anxiety and attachment avoidance have direct and indirect effects on depression mediated by self-compassion. The more participants experience attachment avoidance and attachment anxiety, the less they feel self-compassion, and the more depressed they feel. Accordingly, the results suggest that effort should be directed at encouraging and promoting self-compassion among those who are insecurely attached to reduce depression. Moreover, emotional empathy has a direct effect on participants reported levels of depression. That is, the more emotional empathy the participants have, the less depressed they feel. Thus, this suggests that individuals should work to strengthen their emotional empathy in order to reduce feelings of depression.

**Keywords:** attachment anxiety; attachment avoidance; self-compassion, emotional empathy; depression; undergraduate students

According to the WHO World Population Review (2019), Suicide Rate by Country 2019, Thailand ranks 32nd in the world for suicides with 14.4 suicides per 100,000 population and has the second highest rate of suicide cases in Southeast Asia (WHO, 2019). The most common major factors for suicide in Thailand are losing control of self, especially due to being overly intoxicated,

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health issues such as depression and chronic illnesses, relationship problems, and family-related issues.

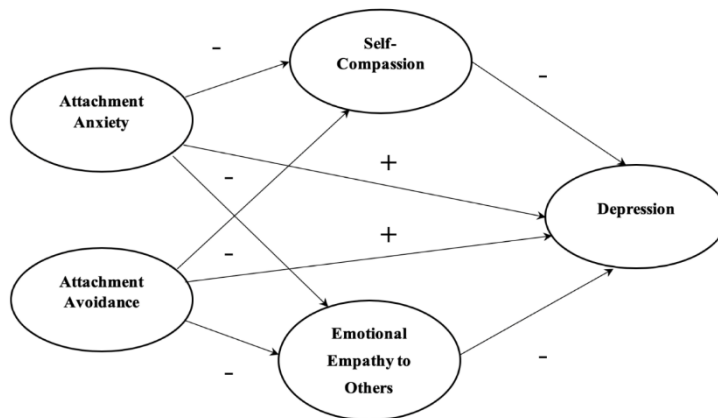
In view of this issue, health professionals have speculated whether adult attachments and relationships to early life caregivers could be considered as factors affecting the development of depression and other emotional problems among youth. It has been said that adult attachment contributes to the promotion of well-being such that close personal relationships significantly contribute to the acquisition of happiness and well-being (Diener & Seligman, 2002). Contrariwise, insecure attachment can lead to the development of psychological dysfunction and negative emotions (Mikulincer & Shaver, 2007) leading to depression. This suggests that the ability to build close personal relationships or not having any at all has a profound effect on well-being and general health.

### **Research Objective**

Depression is widespread but research on the topic has been limited only to certain factors. This present study attempts to understand depression from a variety of angles, specifically exploring the effects of attachments styles on an individual's well-being. The attachment theory of Bowlby (1969) has been taken into consideration because it provides a structure for the tendencies of a person to create close relationships with others, and if these relationships or lack thereof act as a risk factor in the development of depressive behavior. A number of research studies have linked attachment insecurity to depressive symptoms (Bifulco, Moran, Ball, & Lillie, 2002) as well as its effects on psychological dysfunction and the development of negative emotions (Mikulincer & Shaver, 2007). This study investigated how an individual's attachment styles is related to depression being mediated by self-compassion and emotional empathy.

### **Conceptual – Framework**

Figure 1. Path model showing possible direct and indirect influences of attachment styles on level of depression being mediated by self-compassion and emotional empathy.



**Figure 1. Conceptual framework**

## Method

*Participants.* The sample consisted of 150 respondents, where 57.3% (n=86) were female and 42.7% (n=64) were male. Their ages ranged from 17 years old and lower (n=4, 2.7%), 18-21 years old (n=87, 58.0%), 22-25 years old (n=52, 34.7%), and 25 years old and above (n=7, 4.7%). The majority of the participants were Thai (n=127, 84.7%), while the rest were Korean (n=7, 4.7%), Burmese (n=6, 4.0%), Chinese (n=6, 4.0%), Indian (n=2, 1.3%), Laotian (n=1, 0.7%), and from Brunei (n=1, 0.7%). As to their educational level, most of the participants were in their junior year at university (n=66, 44%), while others were in their senior (n=53, 35.3%), sophomore (n=21, 14%), and freshmen years (n=10, 6.7%).

## Measures

*Revised Adult Attachment Scale.* The main scale used in this study to test the attachment styles was the Adult Attachment Scale (AAS) developed by Collins (1990). This scale was developed by modifying the three original prototypical descriptions (Hazan & Shaver, 1987) of attachment orientations into a series of 18 items. The items of revised adult attachment scales were answered using a 5-point Likert scale ranging from 1 (Not at all characteristics of me) to 5 (Very characteristic of me).

*Self-Compassion Scale.* The Self-Compassion Scale (SCS) was used to specifically capture the way of being kind and understanding towards oneself in moments of trouble. The SCS is a 26-item scale, which contains such statements as “I’m kind to myself when I’m experiencing suffering” among others. The items were answered using a 5-point Likert scale ranging from 1 (almost never) to 5 (almost always) (Neff, 2003).

*Multi-Dimensional Emotional Empathy Scale.* The Multi-Dimensional Emotional Empathy Scale was devised by Caruso and Mayer and consists of 30 items, which cover the following factor scales: Suffering, Positive Sharing, Responsive Crying, Emotional Attention, Feel for Others, and Emotional Contagion. The items were answered using a 5-point Likert rating, which ranged from 1 'strongly disagree' to 5 'strongly agree' with six reverse-scored items. The reliability score of the test was placed at Cronbach's alpha 0.88 (mean=3.63, SD=0.57).

*Beck Depression Inventory (BDI).* The Beck Depression Inventory (BDI) is a self-report rating inventory that assesses a person's attitudes and symptoms of depression (Beck, et al., 1961). The BDI comes in various forms, which included several computerized and hand scored versions. The BDI takes approximately 10 minutes to complete, and clients are required to have a fifth to sixth grade reading level to answer the test.

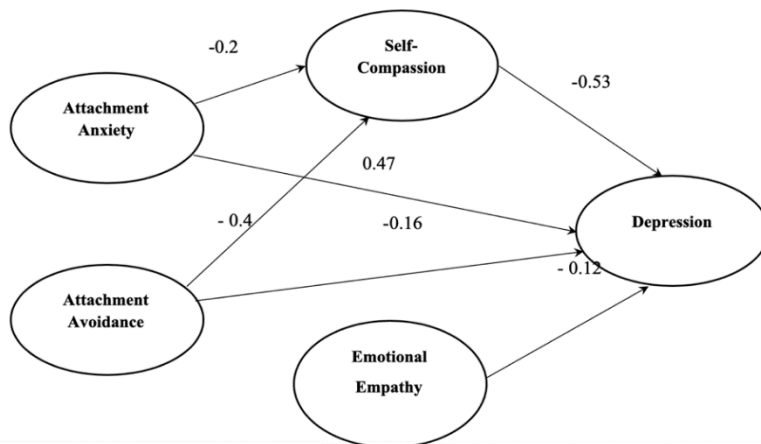
*Data Collection Procedure.* The questionnaires were distributed to undergraduate students who agreed to participate in the research voluntarily and studied at Assumption University of Thailand. After the collection of the completed questionnaires, only valid questionnaires were used for statistical analysis.

*Data Analysis.* Frequency and percentage distributions were utilized to analyze the demographic data obtained from the participants. Finalized mean scores and standard deviations were employed to examine the analysis of the respondents' scores. Next, path analysis via multiple regression analysis was utilized to test the hypothesized direct and indirect influences of attachment styles on level of depression being mediated by self-compassion and emotional empathy.

## **Results**

In order to test the hypothesized direct and indirect relationships represented by path model presented in Figure 1, path analysis via regression analysis was conducted. The analysis involved (1) regressing the dependent variable of depression on the predictor variables of attachment anxiety, attachment avoidance, self-compassion, and emotional empathy (R square = 0.561) ; (2) regressing the dependent variable of self-compassion on the predictor variable of attachment anxiety and attachment avoidance (R square = 0.274); (3) regressing the dependent variable of emotional empathy on the predictor of attachment anxiety and attachment avoidance (R Square = 0.036. In the result interpretation, only the path coefficients that are significant ( $p < .05$ ) are presented in figure 2.

Figure 2. Path model of participants' reported level of depression as a function of the direct and indirect influences of attachment style, being mediated by self-compassion and emotional empathy.



**Figure 2. Path Model of Participants**

The result of the study shows that attachment anxiety has a direct effect on the participants' reported levels of depression (Beta=0.47). Attachment anxiety also has an indirect effect on depression such that the higher the participant feels attachment anxiety the less they feel self-compassion (Beta= -0.20), and the higher their depression (Beta= -0.53).

The results also show that the level of attachment avoidance has a direct effect on participants' reported levels of depression and self-compassion. However, participants' reported level of attachment avoidance also has an indirect effect on their reported level of depression being mediated by their level of self-compassion. Thus, the more the participants experience attachment avoidance, the less they feel self-compassion (Beta=-0.4) and subsequently, the higher they feel depressed (Beta= -.53). Moreover, emotional empathy has direct effects on participants' reported levels of depression. The more participants experience emotional empathy, the less depressed they feel (Beta=-0.12). Furthermore, attachment avoidance also has a significant direct effect on depression such that the more attachment avoidance the participants experience, the less depressed they feel (Beta=-0.16).

## Discussion

This study investigated direct and indirect relationships of attachment styles, self-compassion, empathy, and depression.

*Direct Influence of Attachment Anxiety and Attachment Avoidance on Depression.*

The results from the path analysis via multiple regression determined that attachment anxiety and avoidance have significant direct influence on depression among undergraduate students. First, there is a positive direct relationship between attachment anxiety and depression. Mikulincer and Shaver (2007) explained that insecure attachment, which is brought about by discouraging experiences from neglectful and detached attachment figures, can lead to the development of some psychological disorders. This is so because people with attachment anxiety are prone to develop a negative model of themselves, which leads them to feel less self-sufficient (Pietromonaco & Barrett, 2000) and in turn, makes them depressed.

In addition, this study emphasized the idea that people who have high levels of attachment anxiety are assumed to have negative internal working models of self as well as a strong fear of being abandoned and rejected (Bartholomew and Horowitz, 1991). Accordingly, they should be vulnerable to developing depressive symptoms. For instance, Mikulincer and Shaver (2007) reported that attachment anxiety is related with depressive symptoms, whereby people who have preoccupied and fearful attachment are more prone to develop depression. Bennett and Nelson (2011) also reported that people with attachment anxiety are positively associated and having bipolar disorder and depressive symptoms when comparing to those who are securely attached.

However, path analyses revealed that attachment avoidance has a negative relationship with depression. That is, the higher the level of attachment avoidance, the lower the reported level of depression. Therefore, this finding is contrary to those obtained from past studies revealing that depression is more common in people with insecure attachment (Carnelley, Pietromonaco, & Jaffe, 1994; Simpson, Rholes, Campbell, Tran, & Wilson, 2003).

Previous evidence revealed that the anxious attachment dimension is more strongly associated with depression than avoidant attachment. The review conducted by Mikulincer and Shaver (2007) concluded that there exists a relationship between attachment anxiety and depression, but only half of the findings show a relationship between avoidant attachment and depression. Furthermore, research from Mikulincer and Orbach (1995) revealed that people with avoidant attachment demonstrated the lowest accessibility to anxiety memories and sadness.

*Indirect Influence of Attachment Anxiety and Attachment Avoidance on Depression being Mediated by Emotional Empathy.*

Path analysis indicated that anxious and avoidant attachment has no significant indirect relationship on depression, being mediated by emotional empathy. In order to discuss this matter more substantially, the researcher divided the relationships into three parts: (1) The relationship between anxious attachment and emotional empathy, (2) the relationship between avoidant attachment and emotional empathy, and (3) the negative relationship between emotional empathy and depression.

Firstly, the present study reported no significant relationship between anxious attachment and emotional empathy. Some researchers have revealed a negative relationship between anxious attachment and emotional empathy (Britton & Fuendeling, 2005; Joireman et al., 2001; Milulincer et al., 2001), which suggests that people who have higher level of attachment anxiety are more likely to be obsessed with their own distress. This condition makes the person pay less attention to other people or be unwilling to provide for their needs. However, Trusty et al. (2005) asserted that there exists a positive relationship between anxious attachment and emotional empathy. In their research, the authors inferred that people who had experienced vulnerabilities could be more empathetic and understanding toward other people's vulnerabilities. But this present study found no significant relationship between anxious attachment and empathy toward others.

Secondly, when it comes to attachment avoidance, the results showed no significant relationship between avoidant attachment and depression being mediated by emotional empathy. Because of their low investment in emotions in other people and a proneness to draw back from people during times when they feel distressed, those who have a higher level of avoidant attachment tend to indicate a low level of empathy toward others. This may be because they generally do not relate themselves to people (Gillath, Shalver, & Mikulincer, 2005; Mikulincer & Shaver, 2005). Several empirical findings have shown a negative relationship between avoidant attachment and emotional empathy (e.g., Britton & Fuendeling, 2005; Joireman, Needham, & Cummings, 2001; Mikulincer et al., 2001; Trusty, Ng & Watts, 2005), but this study found no link between these two constructs.

Thirdly, it was revealed that emotional empathy is negatively related to depression such that the higher the level of emotional empathy, the lower the depression. Mahrabian (1972) proposed that empathy towards others increases emotional health and well-being, interpersonal relationships and success in life. As illustrated, when a person is empathic towards others, those other

people may feel appreciative towards him or her in return. This helps make people who are empathic feel connected with other people, thus they feel content and have positive feelings and emotions. Therefore, people who have empathy toward others tend to be linked with increases in their life satisfaction, happiness, and positive feelings and emotions.

However, the findings from the present study demonstrated no significant predictive association between both attachment avoidance and anxious attachment and emotional empathy, which is consistent with Wei *et al.* (2011) who found that anxious attachment was not significantly related to empathy. What the authors discovered was only a negative association between attachment avoidant and emotion empathy. No clear indication about empathy was developed. That is, from previous studies there are many factors related to empathy, for example, brain functions, psychosocial development, fostering, and genetics, specifically from the point of view of attachment theory (Yu *et al.*, 2012). Attachment theory contends that empathy is formed in early childhood and consequently affects the other periods in the one's life. However, many scholars who research this subject have claimed that there was no particular evidence on the association between attachment style and components of empathy.

*Indirect Influence of Attachment Anxiety and Attachment Avoidance on Depression being Mediated by Self-Compassion.*

Path analysis showed that anxious attachment and avoidant attachment have an indirect negative influence on self-compassion. This means that the higher the attachment anxiety and attachment avoidance, the lower the level of self-compassion, and the higher the level of depression. This result suggests that self-compassion is a significant mediator between attachment anxiety and attachment avoidance on depression.

For further explanation, the discussion on each relationship is separated into three parts: (1) negative relationship between attachment anxiety and self-compassion, (2) negative relationship between attachment avoidance and self-compassion, and (3) negative relationship between self-compassion and depression.

Firstly, this present study found that attachment anxiety is negatively related to self-compassion. This finding is in accordance with the idea that highly anxious individual is more prone to develop a depression. This present study revealed that people with high attachment anxiety tend to be more critical on themselves. (i.e., negative working model of self), and they feel overwhelmed by their own distress (i.e., hyperactivation). Consequently, they tend to be unkind



toward themselves, and overly exaggerate that negative experiences only occur to themselves. Also, they tend to be overwhelmed by their hurtful feelings and thoughts (i.e., low self-compassion). According to past studies, our finding is consistent with Neff and McGehee's (2010) research on the negative relationship between anxious attachment and self-compassion among young adults and adolescents. This is in accordance with the perspective from theory that self-compassion is linked with specific attachment styles. This outcome is supported by the findings of previous studies such as Gilbert (2010), who emphasized the effect of early attachment experiences on how self-compassion is developed, through the path that threat-focused and affiliative-focus way affect the self-regulation system, which forms a sense of inner security in a child. Consistent with these studies, self-compassion moderately mediates in a negative direction between attachment anxiety and well-being. This means that the more anxious attachment experienced by individuals, the less self-compassion and less well-being they feel (Neff & McGehee, 2010; Wei, Liao, Ku & Shaffer, 2011).

Secondly, this discussion is about the negative relationship between avoidant attachment and self-compassion. The findings suggest that there was a significant relationship between attachment avoidance and self-compassion. That means the more attachment avoidance the participants experience, the less self-compassionate they are. This result is in accordance with the studies from Mikulincer & Shaver (2007a). Their studies showed that a high avoidant attachment style leads to lower self-compassion. Moreover, their research suggested that high attachment avoidance is related to poor psychological adjustment.

Thirdly, the last part is about the negative relationship between self-compassion and depressive symptoms. For the pattern between self-compassion and other variables, studies from other young adults and adolescents were notably parallel. As was anticipated, self-compassion was a significant indicator of mental health among adolescents and young adults, which means that individuals who had more self-compassion reported that they felt less anxious and depressed. Moreover, they felt much more socially connected. (Cohen, 1988). In addition, this result is consistent with the previous studies on the positive relations between self-compassion and satisfaction in life (Neff, 2003a), social connectedness (Neff & Mcgehee, 2010), and happiness and positive feelings and emotion (Neff et al., 2007).

These studies are compatible with the previous literature. Thus, this compliments the notion that people who have high levels of anxious attachment are prone to develop negative internal working models of self and

a strong fear of being abandoned and rejected (Baarholomew & Horowitz, 1991). Consequently, they are vulnerable to being depressed due to their lack of ability to be self-compassionate.

In addition, several studies found that avoidant attachment is significantly and indirectly related to depression mediated by self-compassion. This asserts that students with a high level of avoidant attachment, for example, desiring independence and fearing interpersonal closeness, could be more exposed to feeling depressed by having a low level of self-compassion. There is some evidence that the defenses of individuals who have high levels of avoidant attachment will collapse under prolonged stressful circumstances or under high levels of cognitive load (Berant, Mikuilincer & Florian, 2001). It might be hypothesized that students who have a high level of avoidant attachment tend to experience some states of stress' 'tipping points' where they cannot repress their attachment that is related to their feelings, thoughts, and emotions any longer. As a result, they may desire to destroy themselves, which becomes the causation of being distressed (Gilbert *et al.*, 2004)

### **Implications and Suggestions**

First of all, in Thailand, there have been only a few research studies investigating self-compassion, particularly its associations with attachment style; this study adds to the limited research literature on self-compassion, attachment styles and emotional empathy.

The results of this current research imply that self-compassion plays a mediator role in the association between insecure attachment and depression. It helps explain a complex association in which attachment anxiety and attachment avoidance is not just directly associated with depression, but also that a lack of self-compassion mediates and helps to explain the negative association between being insecure attached and depression.

To elaborate the meaning of self-compassion, it is considered as an addition to self-concept and self-esteem, which is related to the mental health of a person. This suggests to one's mind caring attitudes. That is, one is more likely to accept painful experiences or one's insufficiencies by being mindful instead of escaping or suppressing them (Neff, 2003a). The concept of self-compassion originates in Buddhist philosophy, characterized by an approach that is non-judgmental, and the acceptance and recognition of suffering with kindness (Gilbert & Irons, 2005). Since this the case, it makes sense that an effort should be directed at encouraging and promoting the feeling of self-compassion among those who are insecurely attached in order to avoid being depressed. In addition, previous literature has reported that self-compassion

can be a great therapeutic tool since self-compassion can be improved and increased (Ko, 2014; Leary et al., 2007), whereas self-esteem is hard to change and cultivate (Baumeister, Campbell, Krueger, & Vohs, 2003; Swann, 1996).

Lastly, the findings from this study found that the more emotional empathy people have, the less depressed they feel. Accordingly, this may suggest that in order to avoid feeling depressed, individuals should strengthen their emotional empathy.

### **Limitations of the Study**

Firstly, the majority of the measures employed in the present study was constructed and validated with Western populations. Although their validity and reliability were demonstrated to be acceptable, their cross-cultural validity has not been demonstrated. Thus, the validity of the obtained findings (from a Thai sample) rests on the assumed cross-cultural validity of these Western-based scales.

Secondly, the conduct of the study was limited to one point in time. Thus, the interrelationship between the variables in this study merely reflected how these variables are related at a particular point in time rather than the sequential influences of the independent variables on the dependent variable across time. A longitudinal study tracking the relationship of insecure attachment with depression over the years may provide a more reliable and valid picture of the influence of attachment anxiety and attachment avoidant on depression.

Thirdly, the sample size (N=150) is small and was acquired from only one institute, i.e., Assumption University of Thailand, and this might not thoroughly represent the typical Thai students in Bangkok. Therefore, it is necessary to be cautious when considering whether to generalize to the Thai student population as a whole, the Thai general population, or collective cultures. Future study should target to recruit participants from a wider background to increase external validity of the study.

Fourthly, the information gained from this study was through self-report measurement. Anastasi (1992) proposed that the measurement that is self-report tends to result in biased responses. As the accuracy of responses from participants in this study might not be unbiased, this means that researcher must accept the participants' responses at face value and assume that they were being honest and truthful when they responded to the questionnaires.

Finally, this study used path analysis which was correlational. That is, this present study did not include the control of the primary variables to study their

impacts on the dependent variable. Consequently, the path analysis results cannot be interpreted in terms of causality as they can be only interpreted in terms of correlational relationships.

Due to some intervening or limiting factors beyond the scope of this study, the finding of the current study should be interpreted with some caution. Nevertheless, despite these limitations, the current study is quite unique as it offers new perspectives that serve to add to the literature. Moreover, an exploratory study of this nature has offered new avenues for further research.

### **Conclusion**

This study focused on attachment style, self-compassion, emotional empathy, and depression among undergraduate students of Assumption University of Thailand.

The current results indicated that self-compassion was a significant mediator between attachment anxiety and attachment avoidance with depression across undergraduate students of Assumption University of Thailand. As it is indicated that the more participants experience attachment avoidant and attachment anxiety, the less they feel self-compassion. Subsequently, the higher they feel depressed. Moreover, emotional empathy has a direct effect on participants reported levels of depression. That is, the more emotional empathy the participants have, the less depressed they feel. Besides, the finding demonstrated that attachment avoidance could elicit negative relationship with depression. Also, there is no significant relationship between insecure attachment and emotional empathy.

As a result, this study recommends that effort should be directed at encouraging and promoting those who are insecurely attached to focus on increasing their feelings of self-compassion in order to avoid being depressed. Consequently, self-compassion could be one of the important factors that protects against depression, which could be taken as evidence for the importance of expanding self-compassion-based therapies. To summarize succinctly, this suggests that in order to avoid feeling depressed, individuals should strengthen their emotional empathy.

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