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RELATIONAL AGGRESSION VICTIMIZATION AND DEPRESSION: TESTING SELF-COMPASSION AND SELF-CRITICISM AS MODERATOR AND MEDIATOR

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ABSTRACT

The research examined the role of self-compassion and self-criticism as moderators and mediators in the relationship between relational aggression victimization and depression. Victimization of relational aggression had various negative consequences, one of which could be depression. However, few previous studies had examined moderator and mediator variables in the relationship between victimized relational aggression and depression. On the other hand, self-compassion and self-criticism could potentially be moderators and mediators between negative experiences and depression. The research used a cross-sectional approach involving 492 adolescents aged 12-21 years who had experienced victimization of relational aggression in the last three months. Analysis of moderators and mediators was used to test the hypothesis. The result shows that self-compassion does not act as a moderator and mediator. At the same time, self-criticism also does not act as a moderator but can mediate the relationship between relational aggression victimization and depression. It indicates that adolescents who get relational aggression from their friends tend to blame themselves excessively, which triggers feelings of depression. This finding indicates that adolescents tend to blame themselves after being victims of relational aggression, which eventually causes depression. Surprisingly, adolescents in Indonesia do not use self-compassion as a strategy in dealing with relational aggression by friends.

Keywords: adolescent friendship, depression, relational aggression victimization, self-compassion, self-criticism

INTRODUCTION

Unconsciously, in everyday life, individuals often carry out behaviors to destroy relationships with other people, such as gossiping, spreading rumors, or bringing conflict; these behaviors are categorized as relational aggression. Individuals carry it out to destroy existing social relations. Relational aggression is carried out directly by threatening to end a relationship or indirectly by spreading rumors/slander about specific individuals to others (Voulgaridou & Kokkinos, 2018). Relational aggression happens in various contexts of interpersonal relations, even in friendship, and several previous studies have examined this in friendship (Bass et al., 2018; Coyne et al., 2019).

Furthermore, it occurs because of dislike and jealousy toward friends (Kraft & Mayeux, 2018) and rejection by friends (Chen et al., 2018a). It indicates that the low quality of friendship encourages adolescents to act against their friends (Baumgardner & Boyatzis, 2018; Soekoto, Muttaqin, & Tondok, 2020).

Furthermore, women and men are not guiltless regarding relational aggression in friendships. However, previous studies have found that women tend to engage in relational aggression more than men (Kraft & Mayeux, 2018). The latest research in Surabaya has found that men are more engaged than women (Soekoto, Muttaqin, & Tondok, 2020). Therefore, in friendship relationships, relational aggression is a problem in female and male adolescents

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(Eriksen & Lyng, 2018).

Relationship aggression in friendships can have an impact on various psychological problems. Previous research has found that adolescents, as the victims of this, tend to experience social problems (Kushner et al., 2018) and decreased academic performance (Laith & Vaillancourt, 2022; Liu et al., 2018). Furthermore, many other studies have found that its experiences will lead to depression (Gallagher et al., 2018; Krygsman & Vaillancourt, 2019), and depression increases the risk of self-harm behavior (Tilton-Weaver, Marshall, & Svensson, 2019; Zhu, Chen, & Su, 2020) and suicidal thoughts (Crandall, Allsop, & Hanson, 2018).

Additionally, previous research has investigated the dynamics of the relationship between feelings of being a victim in a friendship with psychological problems. This feeling destroys an individual's selfefficacy, leading to various psychological problems such as low subjective well-being and experiencing depression (Schunk, Zeh, & Trommsdorff., 2022; Seon & Smith-Adcock, 2021; Trompeter, Bussey, & Fitzpatrick, 2018). Furthermore, the research has also examined the protective factors that will prevent individuals from psychological problems due to the experience of being a victim in a friendship. The factors, self-continuity and self-compassion, are major examples that protect individuals when they become victims in friendship from psychological problems such as depression and self-harm (Santo et al., 2018). However, the research has not focused on experiences of being a victim of relational aggression, while others conducted by Buser, Peterson, and Kearney (2015) have discussed the role of self-efficacy as a mediator between this experience and self-harm behavior. Furthermore, the role of self-compassion in the relationship between negative experiences and depression has created an urge for further examination.

Self-compassion is an effort to accept and self-love when experiencing negative events (Neff, 2003). Besides, it is also an adaptive resource for restructuring positive thinking (Chu et al., 2018), and individuals facing it tend to practice self-kindness, common humanity, and mindfulness (Neff, 2003). Furthermore, it is measured by Self-Compassion Scale (SCS) (Neff, 2003). However, several recent examinations have found that SCS measures self-compassion and self-criticism (Brenner et al., 2018; Coroiu et al., 2018; Muttaqin et al., 2020). On the other hand, self-criticism is considered an individual's tendency towards self-judgment, isolation, and over-identification in negative experiences (Neff, 2003).

Self-compassion has shown how individuals are prevented from depression when having negative experiences (de Souza, Policarpo, & Hutz, 2020; Phillips, Hine, & Marks, 2018; Zhu et al., 2019). Self-compassion can serve as an effective emotional regulation strategy when individuals have negative experiences (Neff, 2003). Individuals practicing it will relieve excessive emotional reactions after experiencing sad and stressful events (Lathren, Bluth, & Park, 2019). Unsurprisingly, they will

suppress negative thoughts and assessments, thereby maintaining their mental health (Stutts et al., 2018).

Previous research has examined the various roles of self-compassion in depression. Furthermore, besides being a predictor of depression, self-compassion is also a moderator and mediator variable. Based on moderating variable, it functions in suppressing depression when individuals are feeling pressure from the stigma acquired (Chan, Yung, & Nie, 2020), overestimating their shape and weight (Linardon et al., 2020), experiencing academic difficulties (Lahtinen et al., 2020), and do evaluations regarding perfectionism (Abdollahi, Allen, & Taheri, 2020; Ferrari et al., 2018). Individuals with self-compassion usually have better emotional resilience when facing negative experiences (Neff et al., 2018). In more detail, Chu et al. (2018) have explained that they tend to accept negative experiences such as being victims of bullying, without overly blaming themselves; hence negative thoughts and feelings are overcome.

Conversely, previous research has found that self-compassion acting as a mediator of different factors will lead to depression. For example, it makes the dynamics of depression clear when individuals have maladaptive perfectionism (Fletcher et al., 2019) and when experiencing negative events (Chang et al., 2017). In more detail, Zhang et al. (2019b) have stated that individuals with negative experiences and traumatic shame memories tend to have difficulty using self-compassion. This condition explains why victims of bullying will have difficulty regulating their negative emotions. Consequently, they find it difficult to be nice to their personality and get caught up in the emotions that lead to feelings of depression.

Furthermore, self-criticism is a form of internal dialogue that insults, hates, and isolates oneself (Gilbert et al., 2004). Individuals with it are often affected by negative emotions and helplessness to overcome these feelings (Gilbert et al., 2004). Generally, it occurs when an individual experiences failure or gets negative environmental treatment (Zuroff et al., 2016). Furthermore, it happens because individuals have a negative view of their personalities; therefore, they tend to overestimate events (Zuroff et al., 2021). Consequently, individuals who tend to self-criticism are more experience ongoing depression (Kaurin, Schönfelder, & Wessa, 2018; Werner et al., 2019; Zhang et al., 2019a).

Furthermore, the role of self-criticism has been examined by previous studies as a moderator and mediator of depression. Salinger and Whisman (2020) have found that it moderates the relationship between negative life experiences and depression. Furthermore, based on several other studies, it is a mediator between negative experiences and depression, such as feelings of shame (Pinto-Gouveia et al., 2013) and stress (Xavier et al., 2016). Depressed individuals, due to negative experiences, will carry out self-criticism of their experiences, making it impossible to control their negative emotions (Abi-Habib & Luyten, 2013).

The potential for self-compassion and self-

criticism as moderator and mediator variables in the relationship between victimized relational aggression and depression cannot be separated from the theoretical framework for compassion-focused therapy (Gilbert, 2009). Furthermore, Gilbert (2009) has explained that the different responses to negative situations are related to three affect regulation systems: drive, threat, and soothing. Individuals who apply self-compassion when facing negative situations can indicate the use of adaptive emotion regulation strategies related to the soothing system of affect regulation. On the other hand, individuals who apply self-criticism show an active threat system that causes them to blame themselves when faced with negative situations, such as being victims of relational aggression.

Based on these literature reviews, it is seen that the experience of being a victim of relational aggression causes an individual to feel depressed. However, it is only limited to studies examining moderator or mediator variables in the relationship between victimized relational aggression and depression. Furthermore, it is known that self-compassion and selfcriticism can potentially be moderators and mediators between negative experiences and depression. Therefore, the research aims to examine the role of self-compassion and self-criticism in the relationship between the experience of being a victim of relational aggression and depression. Testing self-compassion and self-criticism as moderators and mediators simultaneously aim to find a suitable dynamic for the relationship between victimized relational aggression and depression. Thus, it is hoped that the findings of this research can be considered in developing programs that help adolescents who experience depression after being victims of relational aggression.

METHODS

The research uses a cross-sectional method involving 492 adolescents aged 12-21 years (M = 16.7, SD = 2.4) who had experienced relational aggression in the last three months. Participants consist of 144 (29,3%) male adolescents and 348 (7,7%) female adolescents residing in Surabaya. They are 197 (40%), 150 (3,5%), and 145 (29,5%) for early adolescents, middle adolescents, and late adolescents, respectively. They had the experience of getting relational aggression on average seven times in the last three months from close friends (51,6%) and not close friends (48,4%). Furthermore, they are recruited using the convenience sampling method of personal contact and spreading information about the research on social media (WhatsApp, Line, and Instagram). In addition, the research requires participant criteria such as age 12-21 years, both male and female, residing in Surabaya, and having experienced negative treatment from friends in the last three months. If they meet the requirements and are willing to be involved in the research, they are asked to fill out an informed consent and study questionnaire via Google Form. The total

number of participants interested in being involved in the research is 492 adolescents, and all meet the research criteria.

The Beck Depression Inventory (BDI) (Beck & Steer, 1984), consisting of 21 items, is used to measure depression. Each item consists of 4 statements ranging from 0 (statements that do not describe depression, e.g., "I do not feel like a failure") to 3 (statements that describe depression, e.g., "I feel I am a complete failure as a person"). In the research, BDI has a reliability coefficient of 0,903.

The Peer Relational Aggression Victimization subscale of the SRASBM (PRAV) (Morales & Crick, 1998), consisting of four items, is used to measure relational aggression victimization (e.g., "I have a friend who ignores me or gives me the 'cold shoulder' when she is angry with me"). There are seven response options in PRAV, ranging from 1 (strongly disagree) to 7 (strongly agree). In the research, PRAV has a reliability coefficient of 0,759.

The Indonesian version of the Self-Compassion Scale (SCS) (Muttagin et al., 2020; Neff, 2003) consists of 25 items and is used for self-compassion and self-criticism. The self-compassion has subscales consisting of three dimensions, namely self-kindness (5 items, e.g., "I'm kind to myself when I'm experiencing suffering"), common humanity (4 items, e.g., "I try to see my failings as part of the human condition"), and mindfulness (4 items, e.g., "When something painful happens I try to take a balanced view of the situation"). The self-criticism has subscales consisting of three dimensions, namely self-judgment (5 items, e.g., "When I see aspects of myself that I don't like, I get down on myself"), isolation (4 items, e.g., "When I fail at something that's important to me I tend to feel alone in my failure", and over-identification (3 items, e.g., "When I fail at something important to me I become consumed by feelings of inadequacy"). The SCS response uses five options ranging from 1 (strongly disagree) to 5 (strongly agree). In the research, the self-compassion subscale has a reliability coefficient of 0,866, while the self-criticism subscale has a reliability coefficient of 0,898.

Testing the role of self-compassion and selfcriticism as moderator and mediator is carried out through IBM SPSS version 21. It is tested using hierarchical regression analysis, consisting of relational aggression victimization, relational aggression victimization and self-compassion/selfcriticism, and relational aggression victimization, selfcompassion/self-criticism, and moderators (relational aggression victimization × self-compassion/selfcriticism). Additionally, the role of self-compassion and criticism as a mediator is tested using regression relational analysis, consisting of aggression victimization to self-compassion/self-criticism (path a), relational aggression victimization (path c), and self-compassion/self-criticism (path b) for depression, and relational aggression victimization to depression (path c). The regression analysis is complemented by the Sobel test to determine the direct and indirect

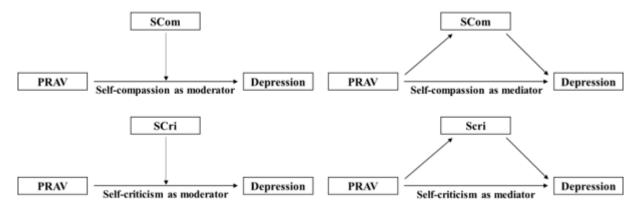


Figure 1 Conceptualization of Self-compassion and Self-criticism as Moderator and Mediator

effects of self-compassion and self-criticism. Figure 1 shows conceptualization of self-compassion and self-criticism as moderator and mediator.

RESULTS AND DISCUSSIONS

The results of the correlation analysis (Table 1) between variables show that relational aggression victimization, self-compassion, and self-criticism have a significant relationship with depression. Furthermore, relational aggression victimization has a positive correlation with depression (r=0,227, p<0,01), self-compassion is negatively related to depression (r=-0,20, p<0,01), and self-criticism has a positive correlation with depression (r=0,642, p<0,01). Furthermore, a positive correlation is found between relational aggression victimization and self-criticism (r=0,364, p<0,01).

Table 2 shows the results of the hierarchical regression analysis, which when found, depression ($\beta=0,272,p<0,001$) is predicted by relational aggression victimization. Furthermore, self-compassion ($\beta=-0,218,~p<0,001$) and self-criticism ($\beta=0,549,~p<0,001$) predict depression when tested alongside relational aggression victimization. However, the research has found that self-compassion ($\Delta R2=0,001,~\beta=0,163,~p>0,05$) and self-criticism ($\Delta R2=0,001,~\beta=0,160,~p>0,05$) could not act as moderators in the relationship between relational aggression victimization and depression.

The results of the analysis (Table 3) have found that relational aggression victimization cannot predict self-compassion (R2 = 0,002, β = 0,046, p > 0,05), while self-compassion can predict depression (R2 = 0,121, β = -0,218, p < 0,001). The Sobel test results (Table 4) show that relational aggression victimization has a direct effect on depression (direct effect = 0,093, t = 6,638, p <0,001), but self-compassion cannot be a mediator (indirect effect = -0,003, z = -0,978, p > 0,05). Furthermore, the analysis has also found that relational aggression will predict self-criticism (R2 = 0,133, β = 0,364, p < 0,001), and self-criticism will as well predict depression (R2 = 0,413, β = 0,626, p < 0,001), and based on Sobel test result (Table 4), it is

found that relational aggression victimization has no indirect effect in depression through self-compassion (indirect effect = -0.003, z = -0.978, p > 0.05). However, relational aggression victimization has an indirect effect on depression through self-criticism (indirect effect = 0.626, z = 5.608, p < 0.001).

The research examines the role of selfcompassion and self-criticism as moderators and mediators in the relationship between relational aggression victimization and depression. It is found that the experience of being a victim of relational aggression will lead to depression, which is consistent with previous studies (Kushner et al., 2018). However, this research has found that self-compassion is incapable of acting as a moderator and mediator. At the same time, self-criticism can act as a mediator between relational aggression victimization and depression. Furthermore, the absence of the role of self-compassion as a buffer for depression when individuals become victims of relational aggression is in contrast to the previous research. Chu et al. (2018) have found that individuals who have self-compassion could restructure their thinking when they get bullied by their friends, thus avoiding depression. However, the findings of this research are consistent with those of Lahtinen et al. (2020), who have found that selfcompassion may not be a haven from victimization experiences that usually lead to depression. Furthermore, Lahtinen et al. (2020) have explained that self-compassion acts as a reducer for depression if negative events are faced by the individual as an academic problem when used compared to bullying from friends. Based on previous research, it will reduce the risk of depression when one observes negative events directly related to oneself, such as excessive assessment of body shape and weight (Linardon et al., 2020) and excessive perfectionism (Abdollahi, Allen, & Taheri, 2020; Ferrari et al., 2018).

Furthermore, self-compassion has the potential as a mediator, apart from being considered to have the potential as a moderator in the relationship between negative experiences with mental health. It is inseparable from its function, which is used as an adaptive strategy to deal with stressful events (Chan, Lee, & Mak, 2018). Individuals who use self-

Table 1 Correlation of Peer Relational Aggression Victimization, Self-Compassion, Self-Criticism, and Depression

Variable	Mean	Range	SD	PRAV	S-Com	S-Cri	Depression
PRAV	3,959	1-7	1,623	(0,759)*			
S-Com	3,590	1-5	0,718	0,046*	(0,866)*		
S-Cri	3,190	1-5	0,880	0,364**	-0,074*	(0,898)*	
Depression	1,831	1-4	0,537	0,272**	-0,205**	0,642**	(0,903)*

PRAV = Peer Relational Aggression Victimization, SCom = Self-Compassion, SCri = Self-Criticism *p < 0.05, **p < 0.01

Table 2 Testing of Self-Compassion and Self-Criticism as Moderator

Model		Depression							
		$\Delta \mathbf{R}^2$	F	р	β	В	р		
Sel	f-compassion as moderator								
1	PRAV	0,074	39,060	0,001	0,272	0,090	0,001		
2	PRAV	0,047	26,374	0,001	0,282	0,093	0,001		
	SCom				-0,218	-0,163	0,001		
3	PRAV	0,001	0,487	0,486	0,140	0,046	0,497		
	SCom				-0,281	-0,211	0,005		
	PRAV x SCom				0,160	0,013	0,486		
Sel	f-criticism as moderator								
1	PRAV	0,074	39,060	0,001	0,272	0,090	0,001		
2	PRAV	0,340	283,200	0,001	0,044	0,016	0,241		
	SCri				0,626	0,379	0,001		
3	PRAV	0,001	0,955	0,329	-0,072	-0,023	0,561		
	SCri				0,551	0,355	0,001		
	PRAV x SCri				0,163	0,012	0,329		

PRAV = peer relational aggression victimization, SCom = self-compassion, SCri = self-criticism

Table 3 Testing of self-compassion and self-criticism as mediator

Variable	\mathbb{R}^2	β	В	S.E.	t	p
Self-compassion as mediator						
PRAV -> SCom (path a)	0,002	0,046	0,020	0,020	1,015	0,311
SCom -> depression (path b)	0,044	-0,218	0,093	0,032	-5,136	0,001
PRAV -> depression (path c')	0,076	0,282	0,093	0,014	6,638	0,001
PRAV -> depression (path c)	0,074	0,272	0,090	0,014	6,250	0,001
Self-criticism as mediator						
PRAV -> SCri (path a)	0,133	0,364	0,202	0,023	8,663	0,001
Scri -> depression (path b)	0,401	0,626	0,374	0,022	16,829	0,001
PRAV -> depression (path c')	0,011	0,044	0,014	0,012	1,173	0,241
PRAV -> depression (path c)	0,074	0,272	0,090	0,014	6,250	0,001

PRAV = Peer Relational Aggression Victimization, SCom = Self-compassion, SCri = self-criticism

Table 4 Indirect effect of relational aggression victimization toward depression

Variable	Value	S.E.	Z	р
PRAV -> SCom -> depression	-0,003	0,003	-0,978	0,328
PRAV -> Scri -> depression	0,626	0,112	5,608	0,001

PRAV = Peer Relational Aggression Victimization, Scom = Self-Compassion, Scri = Self-C riticism

compassion can accept and love themselves when experiencing negative events and thus do not tend to exaggerate negative thoughts and feelings that they feel (Neff, Kirkpatrick, & Rude, 2007). The research

conducted by Zhang et al. (2019a) have proved that individuals who use self-compassion after receiving bullying would reduce the likelihood of experiencing ongoing depression. However, it does not find a role

for self-compassion as a mediator in the relationship between relational aggression and depression. Despite this, self-compassion still serves as a predictor of depression, consistent with previous studies (Baker, Caswell, & Eccles, 2019; Brophy et al., 2020).

This finding is inseparable from the cultural factors in Indonesia, which include collective society. Individuals in these societies are more likely to live together than personal interests (Miyamoto et al., 2018). Besides that, adolescents will pursue group harmony, follow group rules, and be sensitive to negative judgments from friends (Chen et al., 2018b; Wang, Qu, & Ding, 2020). Furthermore, if they have positive friendship qualities, they are more likely to avoid experiences of being victims of relational aggression (Kawabata & Tseng, 2019; Schacter et al., 2021; Soekoto, Muttaqin, & Tondok, 2020). On the other hand, the research involves adolescents in Surabaya who have an open, violent, and spontaneous style of interaction (Sriyanto & Fauzie, 2017; Tinarso, Supartiningsih, & Hadi, 2018). Swear words in adolescent interactions in Surabaya are not always interpreted as negative treatment. However, it can be considered intimacy with friends (Srivanto & Fauzie, 2017). It is not surprising that the research finds a small contribution of relational aggression victimization to

On the other hand, self-criticism also cannot act as a moderator. This finding may indicate that selfcriticism does not necessarily cause adolescents to experience more severe depression when they become victims of relational aggression. Perhaps these findings cannot ignore that self-criticism can also be a state (Zuroff et al., 2016). Consequently, individuals will apply self-criticism when they are in an uncomfortable situation. Moreover, based on an evolutionary approach (Gilbert & Woodyatt, 2017), self-criticism functions as an individual's self-protection when facing negative interpersonal consequences such as fears of rejection and exclusion (Shahar, 2015). Thus, self-criticism is more accurately one of the mechanisms that explain the emergence of depression due to the experience of being a victim of relational aggression.

These explanations are supported by the findings of the research which found that self-criticism acts as a mediator between relational aggression victimization and depression. These findings suggest adolescents may experience depression when applying selfcriticism after receiving relational aggression from their friends. This finding is consistent with previous research that has found that friends' victimization makes it difficult for individuals to control negative emotions, set negative motives, and blame themselves for their experiences (Pedro et al., 2019). Furthermore, if individuals cannot use strategies to solve the problem, they will feel more depressed (Wang et al., 2020). Moreover, it has been shown that individuals who are frequent self-critics have a high rate of depression (Bleys et al., 2018; Porter, Zelkowitz, & Cole, 2018). Moreover, in collective societies, high interdependence can exacerbate the effects of selfcriticism on depression (Aruta et al., 2021). In fact, interdependence is considered necessary in friendship relationships.

In friendship relationships, conflicts often motivate relational aggression (Baumgardner & Boyatzis, 2018; Kraft & Mayeux, 2018). Adolescents who are victims of relational aggression are threatened with not being considered friends by others (Voulgaridou & Kokkinos, 2018). They that have experienced this tend to feel worried about being excluded by their friends (Casper, Card, & Barlow, 2020; Aslan, 2018). This condition is a serious problem for adolescents, leading them to self-criticism because they are in a period of thinking about themselves and interpersonal relationships (Kopala-Sibley et al., 2015). On the other hand, recent research has found that self-criticism is associated with lower closeness to friends (Lear, Luoma, & Chwyl, 2020). Individuals who use self-criticism will try to reduce their positive emotions, so they tend to have low social bonds (Luoma & Chwyl, 2020).

CONCLUSIONS

The research concludes that the experience of being a victim of relational aggression can trigger adolescents to feel depressed. The experience of obtaining relational aggression from friends leads to concerns about adolescents being avoided by their friends. As a result, they put forward negative thoughts and blame themselves for their experience, causing feelings of depression. Furthermore, the absence of the role of self-compassion as a mediator is inseparable from the contextual factors of the collective culture, which try to maintain group harmony and engage in self-criticism when they receive negative treatment from the surrounding environment.

In general, the research contributes to explaining the dynamics of adolescents experiencing depression after receiving negative treatment in friendship relationships. In a collective society like Indonesia, adolescents tend to blame themselves after experiencing negative events, such as being rejected and ostracized by their friends, which eventually causes depression. Surprisingly, adolescents in Indonesia do not use self-compassion as a strategy in dealing with relational aggression by friends. This is a challenge for researchers in Indonesia to follow up on the findings of this research. On the other hand, teachers, clinical psychologists, and mental health practitioners can develop programs that can help adolescents not blame themselves for negative treatment in friendships. The hope is that adolescents are not easily depressed when they have problems in friendships.

The research has several limitations that need attention. It only involves adolescents in Surabaya who have a unique style of friendship interaction compared to other cities in Indonesia. Therefore, the generalization of the research results is still in doubt. Furthermore, the instrument for relational aggression

victimization only measures the frequency of relational aggression treatment experienced. Therefore, it does not describe the cognitive and emotional responses when experiencing relational aggression. Individuals' responses to becoming victims of this may need to be considered to determine the process of internalizing adolescents when they are treated with relational aggression by their friends. Future research is expected to find a plausible explanation of self-compassion that does not act as a moderator or mediator in this research. Furthermore, perhaps personal factors such as personality, cognitive flexibility, and emotional intelligence also influence the absence of self-compassion as a moderator and mediator.

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