

Can dimensions of parenting style contribute to self-compassion among South African adolescents?

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Abstract

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Keywords: Self-Compassion, Adolescents, Parenting style, Fathers, Quantitative research

Self-compassion entails extending the same kindness and compassion to oneself that one would offer to others during times of pain and suffering (Germer, 2009; Neff, 2011a). It is also a healthy way of relating to oneself when faced with personal failures, inadequacies, or negative life events (Neff, 2003a; 2003b; Neff & Lamb, 2009). Paradoxically, many people become self-critical when considering these shortcomings, which can result in them feeling isolated and overwhelmed. Self-compassion therefore involves being kind and sympathetic to oneself during difficult times. It is acknowledging one's own suffering, while recognising that one is not alone in experiencing pain and suffering (Neff, 2003b). This is particularly important during adolescence, a period characterised by several challenging psychological and physiological transitions.

Research indicates that self-compassion is associated with many positive outcomes among adolescents, including emotional and physical wellbeing (Bluth & Blanton, 2015; Hall, Row, Wuensch, & Godley, 2013), adaptive coping (Batts Allen & Leary, 2010; Neff, Hsieh, & Dejitterat, 2005), self-efficacy, pursuit of mastery goals (Bluth & Blanton 2015; Breines & Chen, 2012; Iskender, 2009), as well as resilience (Neff & McGehee, 2010) and lower levels of psychological distress (Marsh, Chan, & MacBeth, 2018). However, less is known about individual differences in self-compassion. Existing research suggests that age (Homan, 2016; Hwang, Kim, Yang, & Yang, 2016), gender (Neff & Vonk, 2009; Yarnell et al., 2015), culture (Neff, Pisitsungkagarn, & Hsieh, 2008; Yamaguchi, Kim, & Akutsu, 2014) and personality traits (Neff, Rude, & Kirkpatrick, 2007; Thurackal, Corveleyn, & Dezutter, 2016) could contribute to differences in levels of self-compassion. In terms of the development of self-compassion, some researchers have suggested that self-compassion probably originates in early relationships with primary caregivers (e.g. Gilbert & Irons, 2009; Neff & McGehee, 2010; Pepping, Davis, O'Donovan & Pal, 2015). Therefore, parent-child relationships may be important in understanding self-compassion during adolescence.

Adolescence is a period during which the parent-child relationship is expected to encounter substantial changes as the adolescent seeks to cultivate independence and a unique identity (Erikson, 1977). Peer relationships become increasingly prominent during this time, but these can be fraught with conflict and change. Negative social comparisons may occur, amplified by adolescent ego-centrism which could also contribute to developing self-criticism. Additionally, there is a considerable risk for development of psychological distress including depression and anxiety (Cummings, Caporino, & Kendall, 2014; Gilbert & Irons, 2009; Gilbert & Proctor, 2006; Potter, Yar, Francis, & Schuster, 2014). Since self-compassion may be a protective factor against psychological distress (Marsh et al., 2018) and seems to develop in the family context (Neff & McGehee, 2010), it is important to further examine parenting behaviours, such as parenting style, which could be associated with self-compassion.

Parenting style refers to behaviours or practices by parents directed at the child in various situations in a specific emotional climate (Berk, 2013; Darling & Steinberg, 1993). Literature traditionally refers to four parenting styles namely: authoritative, authoritarian, permissive and uninvolved. Most researchers agree that Baumrind's (1966) typologies and Maccoby and Martin's (1983) two-dimensional model of these parenting typologies is an acceptable operationalization of parenting style (Berk, 2013; Carr, 2016; Darling & Steinberg, 1993; Shaffer, 2005). This theoretical model has been widely adopted as it incorporates both the behavioural and the emotional processes underlying children's socialization. These styles evolve from two parenting dimensions, i.e.: parental responsiveness (which refers to warmth, support, affection and acceptance), and parental demandingness (which refers to control, rules and limits placed on the child) (Baumrind, 1966; 2013; Maccoby & Martin, 1983). Studies suggest that an authoritative parenting style, which combines high levels of both parental responsiveness and demandingness, is associated

with positive developmental outcomes such as wellbeing, emotion regulation, social skills and academic ability (Barber, Maughan, & Olsen, 2005; Baumrind, 1966, 1967, 1991, 2013; Hancock Hoskins, 2014; Maccoby & Martin, 1983). More recent research proposed indulgent parenting, characterised by warmth but not strictness, as an optimal parenting style (Garcia et al., 2017; Martinez et al. 2020). Indulgent parenting has been associated with several indicators of well-being among adolescents (Martinez et al., 2020, 2019; Garcia et al., 2017).

To date, only a few studies have examined the possible associations between self-compassion and experiences of parenting in childhood. High parental rejection, overprotection and low parental warmth predicted low self-compassion (Irons et al., 2006; Pepping et al., 2015; Potter et al., 2014). Maternal support was significantly associated with high self-compassion, whereas maternal criticism was associated with low self-compassion (Kelly & Dupasquier, 2016; Neff & McGehee, 2010). However, there is a lack of research that focuses on specific parenting styles and self-compassion. Further, no study to date has examined the unique relationship between mothers' and fathers' parenting styles respectively, and adolescents' self-compassion.

Against this backdrop our aim was to examine the relationship between parenting style (as perceived by adolescents) and self-compassion. Further, we investigated the significance of dimensions of parenting styles as predictors of self-compassion. Based on existing literature on parenting practices, self-compassion and positive developmental outcomes, we expected that an authoritative parenting style, i.e. high responsiveness and demandingness, would be positively associated with self-compassion. Further, we expected that the dimension of parental responsiveness, characterised by warmth, support and acceptance, would be positively related to self-compassion, while parental demandingness may be negatively related.

Method

Participants

Participants were 188 adolescents attending a private high school in Johannesburg, South Africa. Their ages ranged from 13 to 16 years of age ($M = 14.44$; $SD = .630$). The sample comprised of 54.8% ($n = 103$) females and 45.2% ($n = 85$) males. In terms of population groups, the majority of the sample were White 67% ($n = 126$), followed by Black participants, 20.7% ($n = 39$). The remainder of the sample consisted of mixed ethnicity 4.3% ($n = 8$), Indian 6.4% ($n = 12$) and Asian 0.5% ($n = 1$) participants. Two participants did not state their population group.

Procedure

After obtaining ethical clearance from the university's research ethics committee, the first author obtained permission from the school principal to conduct the study. Research conducted at private schools did not require further permission from education authorities. Parents and guardians of grade 8 and 9 learners received information letters explaining the nature of the study. After obtaining signed informed consent from parents, those students were then invited to participate in the study. They received information regarding the study, including the voluntary nature of participation, confidentiality and anonymity. The participants consequently gave assent to participate in the study. The first author collected data by administering and supervising the completion of self-report questionnaires in a group setting at one time. The questionnaires were all in English and the administration did not impinge on any class time.

Measures

A biographical section of the questionnaire required demographic information regarding participants' age, home language, population group and gender. This was followed by measures relating to self-compassion and perceptions of parenting style.

Self-compassion.

Self-compassion was measured using the Self-Compassion Scale (SCS) (Neff, 2003a; 2016). This 26-item scale comprises six subscales, namely, Self-Kindness (5 items, e.g., "I'm kind to myself when I'm experiencing suffering"); Self-Judgment (5 items, e.g., "I'm disapproving and judgemental about my own flaws and inadequacies"); Common Humanity (4 items, e.g., "I try to see my failings as part of the human condition"); Isolation (4 items, e.g., "When I fail at something that's important to me, I tend to feel alone in my failure"); Mindfulness (4 items, e.g., "When something upsets me I try to keep my emotions in balance"); and Over-Identification (4 items, e.g., "When something painful happens I tend to blow the incident out of proportion").

The items are scored on a 5-point Likert scale ranging from 1 = 'almost never' to 5 = 'almost always'. Mean scores can be calculated for each of the six subscales, and added to reach a total score for self-compassion. In order to determine a total self-compassion score, negative subscale items (Self-Judgement, Isolation and Over-Identification) were reverse-scored before calculating subscale means and calculating a total score. Following Neff's (2016) suggestions, the total score was used as an indicator of self-compassion. Higher scores indicate higher levels of self-compassion (Neff, 2003a). For the purpose of this study a score higher than three indicated a higher level of self-compassion.

The SCS's factor structure has been confirmed by confirmatory factor analysis. Neff (2003a) reported satisfactory internal consistency ($\alpha = .92$) and test-retest reliability of $r = .93$. In a South African sample Cronbach's alphas for the total scale was 0.88 (Swanepoel, 2009). Our study yielded an alpha of 0.91 for total Self-Compassion.

Parenting style.

Participants' perception of their parents' parenting style was measured using the Parenting Style Inventory II (PSI-II) (Darling & Toyokawa, 1997). This is a 15 item scale measuring adolescents' perceptions of their experiences with their parents. The PSI-II is a revision of the PSI-I scale (Lamborn, Mounts, Steinberg, & Dornbusch, 1991), which was designed to measure parenting style independently of parenting practice (Darling & Steinberg, 1993). It consists of three subscales: emotional responsiveness (5 items, e.g., "My mother spends time just talking to me"); demandingness (5 items, e.g., "My mother really expects me to follow family rules"); and autonomy-granting (5 items, e.g., "My mother gives me a lot of freedom"). The autonomy granting subscale was not used in this study as the four parenting styles from Baumrind's (1966) model only combines the dimensions of emotional responsiveness and demandingness to infer parenting style. Using a 5-point Likert scale (1 = 'strongly disagree' to 5 = 'strongly agree') the participants were asked to indicate which response best described their attitude towards various aspects of their parents' behaviour.

Following Nijhoff and Engels (2007), a mean score of above three on a dimension was considered high and a score of below three was considered low in the current study. High scores indicate stronger agreement regarding a specific dimension, with the exception of four items (e.g. "My mother hardly ever praises me"), which were reverse scored. High scores on both subscales denote an authoritative style, high scores on demandingness and low scores on emotional responsiveness indicate an authoritarian style. Low scores on demandingness and

high scores on emotional responsiveness refer to a permissive style while low scores on both subscales indicate uninvolved parenting.

The PSI-II demonstrated adequate internal consistency, with Bastiais, Ponnet, Van Peer and Mortelmans, (2015) reporting Cronbach's alphas of .82 for the support subscale and .77 for the control subscale for fathers, and for mothers, .82 and .68, respectively. Nijhof & Engels (2007) found similar internal consistencies, namely .77 and .63 for the support and control subscales respectively. Darling and Toyokawa (1997) reported internal consistencies of .74 for the support scale and .70 for the control scale. Our study yielded alpha coefficients of 0.79 for Mothers' Responsiveness, 0.83 for Fathers' Responsiveness, 0.56 for Mothers' Demandingness and 0.71 for Fathers' Demandingness. Item 7 of the Mother Scale, "My mother points out ways I can do better" had a very low item-total correlation (.09) with the other items and was therefore excluded from further analyses. This item was also excluded from the Father Scale in order to maintain consistency. The alpha coefficients for the revised Demandingness subscales were 0.62 for Mothers' Demandingness and 0.71 for Fathers' Demandingness respectively.

Data Analyses

We used the Statistical Package for the Social Sciences (SPSS), version 23 (IBM Corp, 2015) to analyse the data. Descriptive statistics were first performed to examine means, standard deviations and correlations among the variables. We then tested parametric assumptions to determine the appropriate tests to be employed. In order to investigate the significance of parenting style as a predictor of self-compassion, a standard multiple regression analysis was implemented.

Results

Means, standard deviations, and p -values from the Kolmogorov-Smirnov test for normality scores are presented in Table 1. Males scored slightly higher on self-compassion ($M = 3.12$, $SD = .58$) than females ($M = 2.88$, $SD = .72$). Overall, the mean self-compassion score for the group was $M = 2.99$; $SD = .67$.

<Table 1 here>

The data were tested for normality before further analyses were conducted using the Kolmogorov–Smirnov test, setting the significance level at $\alpha = 0.05$. Self-kindness, self-judgement and fathers' demandingness subscales as well as the self-compassion scale total for males showed normally distributed scores. As reflected in Table 1, the remainder of the subscales and self-compassion total scores for females were not normally distributed.

The frequencies and percentages of scores for parenting styles of mothers and fathers are presented in Table 2. Adolescents perceived both mothers and fathers as predominately displaying an authoritative parenting style. We did not control for gender and age in classification of parenting style, but controlled for gender in the regression analyses.

<Table 2 here>

The Relationship between Self-compassion and Parenting Style

It was not possible to calculate correlations for the four parenting styles (authoritative, authoritarian, permissive and neglectful) because some of the groups were too small, as indicated in Table 2. We therefore examined the relationship between the two broad dimensions of parenting style and self-compassion. A Pearson's correlation coefficient was calculated to examine the relationships among self-compassion and the dimensions of

Table 1

Descriptive Statistics for all Measures

Scale	Gender	<i>M</i>	<i>SD</i>	Skewness	Kurtosis	Kolmogorov-Smirnov <i>p</i>
SCS:						
S-K	Male	2.85	.84	.12	-.25	.170*
	Female	2.77	.89	.35	-.44	.021
S-J	Male	2.57	.89	.29	-.33	.072*
	Female	3.06	.98	-.17	-.89	.027
C-H	Male	2.69	.87	.16	-.89	.000
	Female	2.77	.91	.28	-.41	.013
I	Male	2.62	.90	.29	-.70	.001
	Female	3.09	1.00	-.19	-.61	.022
M	Male	3.00	.79	-.12	-.30	.034
	Female	2.94	.79	.11	-.25	.009
O-I	Male	2.63	.99	-.15	-.94	.043
	Female	3.04	.93	-.23	-.85	.017
S-C Tot	Male	3.12	.58	-.18	.19	.200*
	Female	2.88	.72	.35	-.80	.027
PSI-II (M)						
MResp	Male	4.05	.83	-1.09	.45	.000
	Female	4.18	.84	-.94	-.17	.000
MDeman	Male	3.60	.79	-.46	.47	.027
	Female	3.88	.72	-.12	-1.13	.000
PSI-II (F)						
FResp	Male	3.84	.97	-.84	-.06	.000
	Female	3.68	.99	-.69	.05	.001
FDeman	Male	3.82	.81	-.29	-.57	.200*
	Female	3.75	.92	-.39	-.52	.007

Note. * $p \geq 0.05$

SCS = Self-Compassion Scale; S-K = Self-Kindness; S-J = Self-Judgment; C-H = Common Humanity; I = Isolation; M = Mindfulness; O-I = Over-Identification; S-C Tot = Self-Compassion Total; PSI-II (M) = Parenting Style Inventory-II (Mother); MResp = Mother Responsiveness; MDeman = Mother Demandingness; PSI-II (F) = Parenting Style Inventory-II (Father); FResp = Father Responsiveness; FDeman = Father Demandingness.

Table 2

Frequencies of Parenting Style of Mothers and Fathers

Parenting Style	Mothers		Fathers	
	Frequency	%	Frequency	%
Permissive	20	10.6	17	9.0
Authoritative	122	64.9	111	59.0
Uninvolved	2	1.1	6	3.2
Authoritarian	15	8.0	24	12.8
*Missing data	29	15.4	30	16.0
Total	188	100	188	100

Note: *Missing data = those who responded with a value of 3 or who did not complete questionnaire

Table 3

Correlations between self-compassion, gender and dimensions of parenting style

Variable	S-C	Gender	MResp	MDeman	FResp	FDeman
S-C	1					
Gender	-.202	1				
MResp	.180*	.090	1			
MDeman	.020	.189	-.047	1		
FResp	.259*	-.072	.351*	.041	1	
FDeman	.069	-.041	.081	.455*	-.054	1

Note. * $P \leq .01$ (1 tailed)

S-C = Self-Compassion; MResp = Mother Responsiveness; MDeman = Mother Demandingness; FResp = Father Responsiveness; FDeman = Father Demandingness

parental warmth and demandingness for mothers and fathers as reflected in Table 3. Gender was included as a control variable in the analysis.

<Table 3 here>

Correlations between all the variables were statistically significant, with the exception of the relationships between the demandingness of mothers and fathers respectively, and self-compassion. Therefore, it appears that there was no statistically significant relationship between parents' demandingness and the adolescents' self-compassion. However, parental responsiveness, (warmth, love and support) was positively related to self-compassion ($p \leq .01$). In addition, there was a statistically significant positive relationship between both mothers' and fathers' demandingness, as well as mothers' and fathers' responsiveness ($p \leq .01$), indicating that mothers and fathers displayed similar parenting patterns in this sample.

Dimensions of Parenting Style as Predictors of Self-compassion

The correlational analysis (Table 3) indicated that there was no statistically significant relationship between parental demandingness and self-compassion; therefore, it was not included in the subsequent analysis. We also controlled for gender, as it correlated with self-compassion ($r = -.202, p \leq .01$).

Multiple regression analysis was used to examine whether parental responsiveness as dimension of parenting style could significantly predict self-compassion scores. As indicated in Table 4, the results of the regression analysis indicated that the model explained 11.5% of the variance in self-compassion and that the model was a significant predictor of self-compassion ($F(3,177)=7.66, p \leq .01$). While gender ($\beta = -.198, p \leq .01$), and fathers' responsiveness ($\beta = .199, p \leq .01$), significantly contributed to the model, mothers' responsiveness ($\beta = .127, p \geq .01$) did not. However, the results also indicated that there was

less variation in mothers' scores, and they were generally perceived as highly responsive (see Table 2). Thus, the results of the regression analysis should be interpreted with caution.

<Table 4 here>

Discussion

The aims of this study were to examine the relationship between self-compassion and parenting style and to determine whether dimensions of parenting style were significant predictors of adolescents' self-compassion. The results suggested that only the dimension of responsiveness, and not demandingness, contributed to self-compassion.

The overall self-compassion score for the sample was in line with other studies among adolescents with comparable demographic backgrounds and similar ages (Bluth & Blanton, 2014; Neff & McGehee, 2010). In terms of parenting style, the participants rated both mothers and fathers predominantly as authoritative, indicating that they perceived their parents to be warm, supportive and responsive as well as providing adequate structure and discipline. Considering the fathers' ratings, this was followed by being perceived as authoritarian, permissive and uninvolved. Perceptions of mothers differed slightly, as authoritative style was followed by permissive, authoritarian and to a very small extent, uninvolved. This finding is similar to existing studies among White, English speaking samples, which reported that most participants perceived parents to have an authoritative parenting style, followed by permissive, authoritarian and uninvolved (Bronte-Tinkew, Moore, & Carrano, 2006; Nijhof & Engels, 2007). The demographic information of our sample indicated that the majority of the participants were White, and almost a third were not. This seems to suggest that, in this multicultural sample at least, adolescents perceived their parents similarly to adolescents in other, more homogenous contexts. However, more

research is needed to fully explore parenting style among culturally diverse samples in the South African context.

In terms of the relationship between dimensions of parenting style and self-compassion, we found that, for both parents, the demandingness dimension of parenting style was not significantly related to self-compassion. Thus, discipline, structure, restrictiveness or any kind of rule setting and supervision was not related to adolescents' self-compassion. However, the responsiveness dimension for both parents demonstrated a significant relationship to self-compassion. It therefore seems that self-compassion in adolescence is associated with being raised by parents who exhibit a parenting style that is high in responsiveness, warmth, nurturing and support. Several studies similarly reported associations between parental warmth, responsiveness, and self-compassion (Irons et al., 2006; Kelly & Dupasquier, 2016; Pepping et al., 2015). Our findings therefore lend support to existing research that adolescents who are raised in secure, warm and loving homes are better able to relate to themselves in kind and compassionate ways (Gilbert & Proctor, 2006; Kelly & Dupasquier, 2016).

Parental warmth and responsiveness have also been associated with other positive outcomes which may be related to self-compassion in adolescents, for example, active coping, social safeness, the development of life skills and empathy (Kawabata, Alink, Tseng, van IJzendoorn, & Crick, 2011; Kelly & Dupasquier, 2016; Nijof & Engels, 2007; Slicker, Picklesimer, Guzak, & Fuller, 2005; Wolfradt, Hempel, & Miles, 2003). Self-compassion is a skill which entails being kind, nurturing and accepting to oneself. It could be considered a form of emotion regulation; a way of relating to oneself empathetically and activating the internal soothing and safety system (Gilbert, 2009; Neff, 2003a). Therefore being self-compassionate is an internalizing behaviour which could be acquired based on the interactions from one's parents when they are perceived as warm, accepting and nurturing.

The second aim of our study was to investigate dimensions of parenting style as predictors of self-compassion. We examined the predictive value of mothers' and fathers' responsiveness respectively while controlling for gender. The results indicated that the father's responsiveness was a stronger predictor of self-compassion than the mother's responsiveness. Our findings thus support the view that the nature of early caregiving relationships may be related to the development of self-compassion. Neff and McGehee (2010) viewed self-compassion as an internal reflection of the parent-child relationship. Similarly, Gilbert, Baldwin, Irons and Palmer (2006) proposed that experiences of early parenting become schemas that are sources of self-relating. Most existing studies consolidated reports of mothers' and fathers' parenting styles as one variable; therefore our findings bring a unique angle to understanding the role of mothers' and fathers' parenting styles respectively in child outcomes. The stereotypical role of a father being a patriarchal breadwinner has changed dramatically in recent years (Lamb & Tamis-LeMonda, 2004; Parke & Buriel, 2008). It is now well recognised that fathers make a significant and unique contribution to the development of their children (Lamb & Tamis-LeMonda, 2004; Parke, 2004) and that their role involves fostering a sense of identity and encouragement of autonomy. While fathers may be quantitatively less involved with children than mothers, their qualitative contribution is an important predictor in child development (Parke & Buriel, 2008; Pychyl, Coplan, & Reid, 2002). An involved father has a warm, supportive, close, affectionate and accepting relationship with a child (Allen & Daly, 2002). Several studies reported on the importance of fathers' involvement in positive child outcomes. For example, Gryczkowski, Jordan and Mercer (2010) found that higher levels of fathers' involvement, but not mothers' involvement, were related to lower levels of child externalizing behaviours. Similarly, Bronte-Tinkew et al. (2006) found that a positive father-child relationship reduced the risk of delinquent behaviour and substance use by adolescents. Children of involved

fathers also display more cognitive competence and academic achievement, and tend to be more self-accepting and employ an internal locus of control (Allen & Daly, 2002). The results from our study extend these findings and suggest that the ability to develop an internal model of self-compassion may also be related to a positive perception of father-child relationships.

Limitations and Future Research Directions

Despite potentially unique findings, we are aware of several limitations of the study. First, this study is mainly correlational in nature and no inferences can be made about causality between parenting style and self-compassion. Further, the use of self-report measures can have some disadvantages. There has been some criticism against using the total score of the SCS as a measure of self-compassion, due to the inclusion of items measuring self-criticism (Lopez, et al., 2015; Muris & Petrocchi, 2017). However we intended to measure self-compassion according to Neff's (2003a; 2016) conceptualization, viewing it as representing more compassionate and fewer uncompassionate responses to suffering and we thus used the total score. In addition, the measures have not yet been validated for use in the South African context, but our sample consisted predominately of White English-speaking adolescents, which could be considered as similar to other samples used in Western contexts.

In terms of measuring parenting style, only the two dimensions of responsiveness and demandingness were used to examine the unique contribution of each dimension to self-compassion. In existing literature, however, parenting has been operationalised along several themes or dimensions (for example: involvement, acceptance, warmth, coercion, control) and therefore parenting style is not always examined specifically according to the four parenting style typologies proposed by Baumrind (1966, 1967, 1991, 2013) and Maccoby and Martin (1983). Future studies could include more comprehensive evaluations of various dimensions

of parenting styles, including more recent proposed typologies such as indulgent parenting, which may be a more optimal parenting style in the digital era (Martinez et al., 2020).

Another limitation involves using a cut-off score rather than tertiles or the 50th percentile to create parental style categories. We intended to use the scores diagnostically rather than heuristically, and future studies could use median scores or the 50th percentile to obtain more sample-specific information on parenting style.

The majority of adolescents perceived parents as authoritative, in line with existing research (Barnhart, Raval, Jansari, & Raval, 2013; Kopko, 2007). However, it is possible that parents with authoritarian or uninvolved parenting styles may not have consented to participation in the study, which could have skewed the results. Further, research suggests that the characteristics of the child may predict a parents' parenting style (Bastaitis et al., 2015; Kopko, 2007) but two-way effects were not examined in this study. It is possible that adolescents who are more self-compassionate have more positive interactions with their parents and may therefore perceive their parents more favourably. This possibility needs to be further explored in future studies. Finally, due to the cross-sectional nature of the study more research is needed to explore the unfolding nature of self-compassion over time.

Other suggestions for future research include investigating other factors that may contribute to self-compassion during adolescence such as culture and socio-economic status. Additionally, longitudinal research can be conducted in order observe the changes that occur in parents' parenting style and adolescents during this period, and the consequent influences on self-compassion. Qualitative studies may provide useful insight regarding the role of fathers' responsiveness in the development of self-compassion. Research relating to absent or authoritarian parenting may provide insight into pathways of individual differences in self-compassion. Future studies could also explore the mechanisms and dynamics of self-compassion among ethnically and culturally diverse groups of adolescents.

As results point to the importance of warm, supportive and responsive parenting, further research on the effect of psycho-education programmes highlighting responsive parenting could be beneficial in understanding the development of self-compassion. Furthermore, since our study highlighted the role of fathers in adolescents' self-compassion, future studies could examine interventions aimed at strengthening the father-child relationship and its effect on adolescent self-compassion.

Data Availability Statement

All data are available from the second author.

Declaration of interest

The authors confirm that they have no conflict of interest.

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