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Self-Compassion, Failure Tolerance and Resilience

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Abstract: This study examined the relationships among self-compassion, resilience, and failure tolerance in young adults, with the aim of understanding whether psychological strengths contribute to healthier responses to setbacks. Using a cross-sectional design, data were collected from 250 participants through standardized self-report measures assessing state self-compassion, resilience, and failure tolerance. Pearson correlation analyses revealed significant positive relationships between self-compassion and failure tolerance ($r = .547$, $p < .001$), resilience and failure tolerance ($r = .524$, $p < .001$), and self-compassion and resilience ($r = .479$, $p < .001$). Two separate linear regression analyses were conducted to examine the predictive role of self-compassion and resilience on failure tolerance. Results indicated that self-compassion significantly predicted failure tolerance, explaining 29.9% of the variance, while resilience also emerged as a significant predictor, accounting for 27.5% of the variance in failure tolerance. These findings suggest that both selfcompassion and resilience function as important psychological resources that contribute to individuals' capacity to respond adaptively to setbacks and challenges. The study highlights the relevance of strengthening these positive psychological constructs to enhance tolerance toward failure and promote adaptive functioning.

Keywords: *Self Compassion, Resilience, Failure Tolerance, Young Adults*

1. Introduction

In recent years, psychologists and psychological research have become increasingly interested in understanding how people deal with failure, stress and other difficult situations in day-to-day life, especially in the academic, workplace and social contexts. Mental health is not

simply defined as absence of problems anymore, but also as having inner strength and capabilities that help people adjust, recover and grow & learn from challenges. In this context, concepts like self-compassion, failure tolerance and resilience have become more important. While these have been studied separately, understanding them in context of each can better help learn how they collectively help people deal with setbacks and maintain their well-being over time.

1.1 *Self Compassion*

Self-compassion, as described by Neff (2003a, 2003b), focuses on how individuals treat themselves during failure, pain, or feelings of inadequacy rather than how they evaluate themselves. It involves responding with kindness and understanding instead of criticism or judgment. Self-compassion consists of three key components: self-kindness (being gentle with oneself), common humanity (recognizing that suffering is a shared human experience), and mindfulness (maintaining balanced awareness rather than overreacting or overthinking).

In terms of emotional regulation, higher self-compassion is associated with reduced rumination, less intense emotional reactions, and lower avoidance of difficult thoughts and feelings (Neff et al., 2007). It is also linked to lower levels of anxiety, depression, and stress, along with greater well-being and healthier coping (MacBeth & Gumley, 2012; Zessin et al., 2015). Additionally, self-compassion acts as a protective psychological resource, helping individuals better understand their emotions, face challenges without shutting down, and accept responsibility without becoming overwhelmed, thereby supporting emotional balance and mental health (Leary et al., 2007).

1.2 *Failure Tolerance*

Failure tolerance refers to the ability to remain motivated and goal-focused despite setbacks or poor outcomes. Social–cognitive theories suggest that individuals who view failure as an opportunity for learning and growth are more likely to persist and try new strategies, whereas those who see failure as a sign of inability are more likely to give up (Dweck & Leggett, 1988; Elliot & McGregor, 2001). Maladaptive responses such as rumination, avoidance, and harsh self-criticism negatively affect both motivation and well-being (Nolen-Hoeksema et al., 2008), while adaptive coping strategies support persistence and adjustment over time (Carver & Connor-Smith, 2010).

Self-compassion plays a key role in shaping responses to failure by encouraging self-kindness, mindfulness, and recognition of shared human fallibility (Neff, 2003). It reduces defensive reactions to criticism and promotes more constructive responses to setbacks, while also

motivating self-improvement rather than passivity (Neff et al., 2005). Failure tolerance is closely related to distress tolerance—the ability to endure negative emotions without avoidance (Simons & Gaher, 2005). Since failure often evokes emotions like shame, frustration, and anxiety, distress tolerance provides a useful framework for understanding how self-compassion fosters resilience and sustained effort despite challenges.

1.3 *Resilience*

Resilience is understood as a dynamic process of positive adaptation in the face of significant adversity, rather than a fixed personality trait (Luthar et al., 2000). It does not mean being unaffected by stress but rather develops through the interaction of biological factors (such as stress responses), cognitive processes, emotional flexibility, and social support systems (Southwick et al., 2014). Thus, resilience reflects the ability to maintain or regain emotional balance after experiencing stress or hardship.

Research highlights the central role of emotion regulation in resilience, as individuals who can effectively manage their emotional responses tend to recover more quickly and adapt better over time (Tugade & Fredrickson, 2004). Positive emotions, even during difficult situations, support the ability to "bounce back" and enhance coping (Fredrickson et al., 2003). Additionally, resilience is linked to adaptive thinking patterns, where individuals perceive stressful situations as more manageable, reducing their perceived threat and improving coping. Overall, resilience can be described as the flexible capacity to regulate emotions, think adaptively, and persist despite challenges.

1.4 *Integration*

Resilience, self-compassion, and healthy responses to failure are closely interconnected, as they involve similar processes of emotional regulation. Resilience refers to the ability to maintain or regain psychological well-being after difficulties (Luthar et al., 2000), while self-compassion supports this by encouraging a kind and balanced response to setbacks (Neff, 2003a). Individuals high in self-compassion are less self-critical and more emotionally stable, which helps them cope more effectively and stay motivated after failure (Neff et al., 2007; Breines & Chen, 2012). In achievement contexts, this persistence is often described as failure tolerance, which depends on beliefs about whether abilities can improve (Dweck & Leggett, 1988). Since failure evokes negative emotions, the ability to tolerate distress becomes essential for continued effort (Simons & Gaher, 2005). Resilient individuals can recover quickly from stress and even experience positive

emotions during adversity (Bonanno, 2004). Thus, resilience can be understood as emerging from the combined effects of self-compassion and distress tolerance, enabling individuals to adapt and keep moving forward despite challenges.

1.5 *Birth Order*

Birth order refers to an individual's position among siblings and has been linked to differences in personality, motivation, and coping. Research suggests that siblings develop distinct roles within the family, with firstborns often being more responsible, conscientious, and achievement-oriented, while later-borns tend to be more open and risk-taking (Sulloway, 2001; Paulhus et al., 1999; Eckstein et al., 2010). These differences may influence self-compassion, as firstborns—who often face higher expectations—may be more prone to perfectionism and self-criticism, affecting how they respond to failure (Hewitt & Dyck, 1986; Frost et al., 1990). At the same time, their conscientiousness may support greater persistence and problem-focused coping, contributing to higher failure tolerance (Connor-Smith & Flachsbart, 2007). Later-borns' openness and risk-taking may shape how they interpret and respond to setbacks in different ways. Resilience is also associated with traits like conscientiousness and lower neuroticism, as well as healthier coping patterns (Oshio et al., 2018; Campbell-Sills et al., 2006). Therefore, while firstborn traits may support effective coping and resilience, increased pressure and expectations may also impact emotional stability, making the relationship between birth order and resilience complex and influenced by multiple factors.

1.6 *Romantic Relationships*

Romantic relationships are close, emotionally meaningful bonds that significantly influence psychological well-being, as partners often serve as key sources of comfort and support during stressful times (Kansky, 2018; Collins & Feeney, 2000). Research suggests that individuals in committed relationships tend to report lower stress and psychological distress, indicating a protective effect, especially when the relationship is secure (Braithwaite et al., 2010). Such relationships also shape how individuals relate to themselves, as self-compassion is linked to more balanced and supportive behavior toward partners, while safe and warm relationships can, in turn, foster greater self-kindness; however, insecure or conflict-prone relationships may increase self-criticism and emotional instability (Neff & Beretvas, 2013). During conflicts, responsive and caring partner behavior can help regulate emotions and improve coping, whereas anxious attachment may lead to heightened reactivity and reduced distress tolerance (Overall et al., 2015).

Additionally, romantic relationships contribute to resilience, as secure attachment is associated with healthier coping strategies, positive reappraisal, and the ability to function effectively despite challenges, with partners acting as a "safe haven" that strengthens emotional regulation and overall well-being (Karreman & Vingerhoets, 2012).

1.7 *Family Structure*

Family structure refers to how a family is organized—whether nuclear or joint—and plays an important role in shaping psychological development through the emotional environment it provides (Olsen, 2000). In collectivist cultures, extended families often emphasize togetherness and shared responsibility, offering greater emotional and practical support, which aligns with social support theory suggesting that feeling valued reduces stress (Kagitcibasi, 2007; Cohen & Wills, 1985). Early family relationships also influence how individuals relate to themselves, as consistent understanding and acceptance can foster self-compassion, leading individuals to respond to their own difficulties with kindness rather than self-criticism (Raque-Bogden et al., 2011). Additionally, strong family support helps in regulating emotions during stressful situations and increases confidence when dealing with setbacks (Lakey & Orehek, 2011). This is particularly evident in joint families, where multiple sources of support may enhance distress tolerance and coping. Since resilience involves the ability to adapt and function effectively during challenges (Connor & Davidson, 2003), supportive family environments that promote emotional stability and healthy coping can strengthen resilience, highlighting the significant role family structure plays in shaping how individuals manage stress and adversity.

1.8 *Significance of the Study*

Failure is an inevitable part of academic, professional, and personal life, yet individuals respond to it in very different ways—some experiencing distress and self-doubt, while others remain motivated and emotionally balanced. Understanding the psychological strengths that shape these responses is especially important in performance-oriented settings. Although self-compassion and resilience are widely recognized as protective factors, most research has focused on general well-being or reduced distress, with relatively less attention given to failure tolerance—the ability to cope constructively with setbacks. Examining failure tolerance as a distinct outcome can provide deeper insight into how individuals maintain persistence and emotional stability in challenging situations.

The present study addresses this gap by exploring self-compassion, resilience, and failure tolerance within a single framework, aiming to understand their relationships and the extent to which self-compassion and resilience predict adaptive responses to failure. Theoretically, it contributes to literature by focusing on these strengths in relation to a specific adaptive capacity rather than general well-being. Practically, the findings may be useful in educational and counseling contexts, as strengthening self-compassion and resilience can support healthier coping, sustained motivation, and emotional balance. Overall, the study seeks to enhance understanding of how key psychological strengths operate in the context of failure, a common yet impactful life experience.

1.9 *Research Objectives*

1. To study the relationship between Self-compassion and Failure Tolerance.
2. To study the relationship between resilience and failure tolerance.
3. To study the relationship between self-compassion and resilience.
4. To study if self-compassion can predict failure tolerance.
5. To study if resilience can predict failure tolerance

1.10 *Hypotheses*

1. There will be a significant relationship between self-compassion and failure tolerance amongst young adults

2. There will be a significant relationship between resilience and failure tolerance amongst young adults.

3. There will be a significant relationship between self-compassion and resilience amongst young adults.

4. Self-compassion will significantly predict failure tolerance.

5. Resilience will significantly predict failure tolerance.

2. Methodology

2.1 *Research Design*

The present study employed a quantitative, cross-sectional research design to examine the relationships among self-compassion, resilience, and failure tolerance. A correlational approach was used to assess the strength and direction of associations, along with regression analysis to examine predictive relationships.

2.2 *Participants*

The sample consisted of 250 young adults (aged 18–25 years) drawn from the general population using a random sampling technique, enhancing the generalizability of findings.

2.3 *Inclusion criteria*

- Individuals aged 18–25 years
- Ability to understand English

2.4 *Exclusion criteria*

- Individuals below 18 or above 25 years
- Inability to comprehend English

Participation was voluntary, and informed consent was obtained prior to data collection.

2.5 *Data Collection*

Data were collected using self-report questionnaires administered through both online (Google Forms) and offline (paper-pencil) modes to ensure accessibility and improve response rates. Participants were provided with clear instructions regarding the purpose of the study and were assured of confidentiality and anonymity. They were encouraged to respond honestly based on their personal experiences. The average time taken to complete the questionnaires was 15–20 minutes.

2.6 *Measures*

Data were collected using standardized instruments:

State Self-Compassion Scale (SSCS; Neff et al., 2021): Assesses self-compassion across six components—self-kindness, self-judgment, common humanity, isolation, mindfulness, and over-identification. The scale demonstrates high internal consistency ($\alpha \approx .94$).

Brief Resilience Scale (BRS; Smith et al., 2008): Measures the ability to recover from stress and demonstrates good reliability and validity.

Distress Tolerance Scale (DTS; Simons & Gaher, 2005): Used as an indicator of failure tolerance, assessing tolerance, absorption, appraisal, and regulation of distress, with satisfactory internal consistency ($\alpha \approx .82$).

2.7 *Statistical Analysis*

Data analysis was conducted using JAMOVI. Preliminary screening ensured normality and absence of missing values.

- Descriptive statistics (mean and standard deviation) were computed for all variables.

- Pearson's product-moment correlation was used to examine relationships among variables.
- Linear regression analysis was conducted to assess the predictive role of self-compassion and resilience on failure tolerance.

3. Results

3.1 *Descriptive Statistics*

Descriptive statistics were computed to summarize the central tendency and variability of the study variables. The results indicated that participants demonstrated moderate levels of self-compassion, resilience, and failure tolerance.

Table 1: *Descriptive Statistics*

	Resilience	Failure	Self-compassion
N	250	250	250
Mean	19.5	45.9	59.1
Median	20.0	46.0	58.0
Mode	20.0	43.0	56.0
Standard deviation	4.35	10.8	11.2
Minimum	6	20	26
Maximum	30	74	90

Correlational Analysis

Pearson's product-moment correlation was conducted to examine the relationships among self-compassion, resilience, and failure tolerance.

Table 2: *Relationship between Self-compassion and Failure Tolerance*

The results revealed a significant positive correlation between self-compassion and failure tolerance ($r = .547$, $p < .001$), indicating that individuals with higher self-compassion tend to exhibit greater tolerance toward failure.

S. No.	Variables	N	r	Significance
1. **2.**	Self-Compassion Failure Tolerance	250	0.547	Significant**

** @ 0.001 level

Table 3: *Relationship between Resilience and Failure Tolerance*

Similarly, resilience was positively correlated with failure tolerance ($r = .524$, $p < .001$), suggesting that individuals who are better able to recover from stress are more likely to handle failure effectively.

S. No.	Variables	N	r	Significance
1. **2.**	Resilience Failure Tolerance	250	0.524	Significant**

** @ 0.001 level

Table 4: *Relationship between Resilience and Self-compassion*

A significant positive relationship was also found between self-compassion and resilience ($r = .479$, $p < .001$), indicating that these psychological strengths are moderately associated with one another.

S. No.	Variables	N	r	Significance
1. **2.**	Resilience Self-compassion	250	0.479	Significant**

** @ 0.001 level

Table 5: *Predictive role of Self-compassion on Failure Tolerance*

A simple linear regression analysis was conducted to examine whether self-compassion predicts failure tolerance. The results indicated that self-compassion significantly predicted failure tolerance ($\beta = .547$, $p < .001$), accounting for approximately 29.9% of the variance ($R^2 = .299$).

S.No.	Variables	N	Standardized β	R^2	Significance
1. **2.**	Self-compassion Failure tolerance	250	0.547	0.299	Significant**

** @ 0.001 level

Table 6: *Predictive role of Resilience on Failure Tolerance*

A second regression analysis revealed that resilience significantly predicted failure tolerance ($\beta = .524$, $p < .001$), explaining 27.5% of the variance ($R^2 = .275$).

S.No.	Variables	N	Standardized β	R^2	Significance
1. **2.**	Resilience Failure tolerance	250	0.524	0.275	Significant**

** @ 0.001 level

4. Discussion

The present study aimed to examine the relationships between self-compassion, resilience, and failure tolerance among young adults, and to assess whether self-compassion and resilience significantly predict failure tolerance. The findings indicate that both self-compassion and resilience are positively related to, and predictive of, failure tolerance, suggesting that these psychological resources play an important role in how individuals respond to setbacks.

A significant positive relationship was found between self-compassion and failure tolerance. Individuals with higher levels of self-compassion demonstrated greater ability to tolerate failure. Self-compassion, which involves self-kindness, recognition of common humanity, and mindful awareness of difficult experiences, reduces harsh self-criticism and emotional over-identification. As a result, individuals may be less likely to feel overwhelmed by failure and more likely to respond in a balanced and constructive manner. When individuals approach themselves with understanding and emotional stability, failure may be perceived as less threatening, allowing continued engagement despite setbacks.

A significant positive relationship was also observed between resilience and failure tolerance. Individuals with higher resilience were more likely to demonstrate greater tolerance toward failure. Resilience reflects the ability to adapt and continue functioning despite stressful or adverse situations. Individuals who are able to regulate their emotions, recover from negative experiences, and maintain psychological balance are more likely to remain motivated and persistent when faced with difficulties. Instead of avoiding or withdrawing from failure, they are more likely to view it as manageable and continue working toward their goals.

The findings further revealed a significant positive relationship between self-compassion and resilience. This suggests that individuals who respond to themselves with kindness and emotional balance during difficult situations are also more likely to adapt effectively to stress. Although these constructs are distinct, they appear to be closely connected, as both involve adaptive emotional regulation and healthier coping responses.

The regression analyses indicated that both self-compassion and resilience significantly predict failure tolerance. Self-compassion accounted for approximately 29.9% of the variance in failure tolerance, while resilience explained about 27.5% of the variance. This suggests that both variables independently contribute to how individuals respond to failure. Self-compassion explained slightly more variance, indicating that the way individuals treat themselves during moments of difficulty may play a particularly important role in shaping their response to failure.

Overall, the findings suggest that individuals who are more self-compassionate and resilient are better able to tolerate failure and respond to it in a constructive manner. These individuals are more likely to remain emotionally balanced, avoid excessive self-criticism, and continue striving toward their goals despite setbacks. The results highlight the importance of these psychological strengths in promoting adaptive coping and maintaining well-being in the face of challenges.

5. Conclusion

The present study examined the relationships between self-compassion, resilience, and failure tolerance among young adults, with a focus on understanding whether self-compassion and resilience predict responses to failure. The findings revealed that both self-compassion and resilience are significantly and positively associated with failure tolerance. Additionally, both variables were found to independently predict failure tolerance, explaining a meaningful proportion of variance.

Individuals with higher levels of self-compassion were more likely to respond to failure with emotional balance, reduced self-criticism, and a more constructive outlook. Similarly, individuals with higher resilience demonstrated a greater ability to adapt to setbacks and continue functioning effectively despite challenges. The positive relationship between self-compassion and resilience further highlights that these constructs, although distinct, are closely interconnected and contribute to adaptive coping.

The results suggest that self-compassion and resilience function as important psychological resources that support healthier responses to failure. Individuals who possess these strengths are more likely to view failure as manageable and continue striving toward their goals rather than becoming discouraged or overwhelmed.

These findings have practical implications for mental health and academic settings, where fostering self-compassion and resilience may help individuals cope more effectively with setbacks and maintain overall well-being. Strengthening these qualities may promote a more balanced and growth-oriented approach to failure.

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