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Self-Compassion, Rumination, and Social Anxiety: Examining Their Interrelationships in Indian Young Adults

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Abstract: The present study aimed to explore the relationships between self-compassion, rumination, and social anxiety in Indian young adults and to determine if rumination mediates the relationship between self-compassion and social anxiety. 100 Indian young adults, aged 18 to 25, made up the study's sample (70 females and 30 males). A survey conducted online was used to get the data. Social anxiety was measured using the Liebowitz Social Anxiety Scale (Liebowitz, 1987). Self-compassion was measured using the Self-Compassion Scale- Short Form (SCS-SF) (Raes et al. 2011). Rumination was measured using the Rumination Response Scale (Hoeksema & Morrow, 1991). The data was analysed in SPSS using Pearson product-moment correlation, multiple regression, and the PROCESS macro. The findings showed a negative correlation between self-compassion and social anxiety, as well as between self-compassion and rumination. There was also a positive correlation between social anxiety and rumination. Furthermore, levels of social anxiety were significantly predicted by both self-compassion and rumination. The association between self-compassion and social anxiety was found to be mediated, most notably, by rumination. This suggests that those who have lower levels of self-compassion may be more likely to engage in ruminative thinking, which in turn makes them more susceptible to social anxiety.

Keywords: *Social Anxiety, Rumination, Self-compassion, Mediation Analysis, Young Adults*

1. Introduction

Social Anxiety

Social anxiety is a widespread human experience, the hallmark of which is an extreme fear of evaluation from others in social settings (Morrison & Heimberg, 2013). It is a normal part of our daily lives to experience social anxiety. Anxiety can arise in a range of social contexts, from significant, meaningful interactions to routine, seemingly insignificant ones (Leary & Kowalski, 1997). It relates to the fear of social circumstances, like striking up a conversation, meeting new people, etc., that they may have to deal with or where they run the risk of receiving a poor evaluation from others, such as being perceived as weak, nervous, or foolish (APA, 2021). People who do not fit the criteria for Social Anxiety Disorder (SAD) may have different levels of social anxiety because social anxiety exists on a spectrum that is anchored by shyness and avoidant personality disorder (Rapee & Spence, 2004).

There are two differences in the circumstances that lead to social anxiety. First of all, there are many different ways that social anxiety might show up; some may be anticipatory, while others can be reactive. Therefore, either a circumstance that is anticipated or a reactionary incident that has already occurred can cause worry in people. Whether social anxiety arises during a dependent or noncontingent engagement is the second distinction. In a contingent encounter, people's behaviour is highly dependent on that of others. In contrast, people's behaviour in noncontingent contacts is more influenced by their plan or agenda and less by how others react to them.

Social Anxiety in Young Adults

People may encounter several challenging obstacles when they enter adulthood, such as establishing both personal and professional relationships. College is a huge and sometimes difficult period, especially for students who are leaving behind friends and family and adjusting to new situations. Making the switch to new social networks can be particularly challenging for incoming college freshmen who already have social anxiety vulnerabilities (Campbell et al., 2015). The transition to college may set off a negative chain reaction of thoughts, behaviours, and emotions for some vulnerable youth. Over time, the negative rumination and anticipatory fears associated with social events increase social withdrawal and fear of negative evaluation, which in turn exacerbate social anxiety and undermine college adjustment (Campbell et al., 2015). People who are susceptible to social anxiety may

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acquire social interaction patterns that last throughout adulthood, and the transition to college seems to be a significant developmental period during which social-evaluative concerns are likely to increase (Campbell et al., 2015).

Clark and Wells' (1995) Cognitive Model of Social Anxiety Disorder (SAD)

According to Clark and Wells (1995), individuals with Social Anxiety Disorder perceive social situations as threatening due to dysfunctional beliefs about themselves and others. These beliefs trigger heightened self-focus, anxiety, and fear of negative evaluation. As attention shifts inward, individuals become preoccupied with their own symptoms and negative self-images, often ignoring external cues that might disconfirm their fears. To cope, they engage in safety behaviours such as avoidance or mentally rehearsing conversations, which maintain anxiety (Clark & Wells, 1995). The model also emphasizes anticipatory anxiety before social events and post-event rumination, where individuals dwell on perceived failures, reinforcing negative self-views (Clark & Wells, 1995).

Self-Compassion

According to Neff (2003), self-compassion is the ability to assist oneself when going through difficult times, whether they are brought on by one's own shortcomings or faults. It describes how we interact with ourselves when we feel inadequate, failed, or personally distressed (Neff, 2023). Self-compassion entails being aware of and sensitive to one's own pain rather than denying or distancing oneself from it, which inspires the desire to lessen one's suffering and to treat oneself with kindness (Neff, 2003a). Toregard one's experience as a component of the greater human experience, self-compassion also entails providing nonjudgmental knowledge of one's suffering, shortcomings, and failings (Neff, 2003a). This definition states that self-compassion comprises three primary elements that overlap and interact with one another: mindfulness versus over-identification, feelings of common humanity versus isolation, and self-kindness versus self-judgment (Neff, 2003).

Components

Self-kindness vs. Self-judgment: According to Neff (2011), self-kindness is the propensity to treat ourselves with compassion and understanding as opposed to being severely critical or judgmental.

Common humanity vs. Isolation: Realising that everyone makes errors, fails, and feels inadequate in some manner is a key component of self-compassion's feeling of common humanity (Neff, 2011). However, when people think about their shortcomings or difficult times, they frequently feel alone because they believe that failing, having weaknesses, or going through difficult times is somehow abnormal. Strong sentiments of alienation are

brought on by an unreasonable "why me?" question rather than a logical reasoning process (Neff, 2011).

Mindfulness vs. Over-Identification: To be able to show compassion for oneself, one must first acknowledge that they are suffering (Neff, 2011). Mindfulness keeps one from being enmeshed in and engrossed in the narrative of their own suffering, a phenomenon Neff has dubbed "over-identification" (Neff, 2003b).

Rumination

Rumination is defined as recurrently and passively concentrating on distress symptoms, as well as their potential causes and effects, without actively changing anything (Nolen Hoeksema, 1991). Rumination is a self-focused attentional strategy used to deal with negative emotions (Lyubomirsky & Nolen-Hoeksema, 1993). Rumination is fundamentally a harmful behaviour that leads to persistent and unpleasant thoughts about the past, present, and future, exacerbates existing negative thinking, and impairs one's capacity to handle difficulties (Nolen-Hoeksema et al. 2011). Research on ruminative reactions to stressful events has demonstrated that ruminating significantly impairs coping skills and serves as a foundation for anxiety, depression, and a host of other adjustment issues (Grassia & Gibb, 2008; Nolen-Hoeksema et al., 2008; Olatunji et al., 2013). Two forms of rumination have been identified in previous research as gloomy thinking styles: brooding and reflection (adaptive contemplation) (Schoofs et al., 2010).

One vulnerability factor contributing to social anxiety in college students is rumination, which has been the subject of numerous studies (Valenas et al., 2015). According to studies, people who continue to ruminate extensively and for an extended period after going through unpleasant social life experiences may have social anxiety or even depression. The ruminative process, an emotional avoidance technique that impedes adaptive emotion regulation, was said to be lessened by self-compassion since it entails an open and receptive approach towards feelings (Evans & Segerstrom, 2011). Other types of repetitive negative thinking, such as trait rumination, the general propensity to brood (Neff & Vonk, 2009), and depressive rumination/brooding (Raes, 2010), have been studied in connection with self-compassion. Previous studies have shown that ruminating is linked to a poor level of self-compassion (Neff, 2003). Despite differences in definition, self-compassion is suggested as a key component for addressing anxiety and depression symptoms in youth based on research by Marsh et al. (2018) showing a significant correlation between increased self-compassion and reduced psychological distress, including anxiety, in adolescents. Higher levels of self-

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compassion are linked to lower levels of anxiety and sadness in young individuals, according to Egan et al. (2021).

Research has consistently shown links between rumination, self-compassion, and social anxiety, shedding light on the complex interplay between these variables. A significant body of research has examined how social anxiety contributes to post-event rumination and how rumination, in turn, worsens social anxiety. While the relationship between self-compassion and social anxiety has been explored, there remains a gap in understanding the role of self-compassion in reducing rumination and, consequently, its impact on social anxiety. This gap is particularly evident in culturally diverse settings like India, where constructs such as self-compassion may carry distinct implications due to cultural norms and values.

By addressing these gaps, the present research aims to provide a more comprehensive understanding of these interconnections. Specifically, this study examines rumination as a mediator in the relationship between self-compassion and social anxiety. Understanding this mechanism can inform culturally relevant interventions, enhance mental health awareness, and encourage the use of self-compassion-based approaches to alleviate social anxiety.

1.1 *Aim*

The current study aimed to explore the relationships between self-compassion, rumination, and social anxiety in Indian young adults and to determine if rumination mediates the relationship between self-compassion and social anxiety.

1.2 *Objectives*

- To study the relationship between self-compassion and rumination among Indian young adults.
- To study the relationship between self-compassion and social anxiety among Indian young adults.
- To study the relationship between social anxiety and rumination among Indian young adults.
- To understand if self-compassion and rumination predict social anxiety among Indian young adults.
- To understand if rumination plays a mediating role in the relationship between self-compassion and social anxiety in Indian young adults.

1.3 *Hypotheses*

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H1: There will be a significant positive correlation between rumination and social anxiety.

H2: There will be a significant negative correlation between rumination and self-compassion.

H3: There will be a significant negative correlation between social anxiety and self-compassion.

H4: Rumination and self-compassion will predict social anxiety.

H5: The relationship between self-compassion and social anxiety will be mediated by rumination.

2. Review of Literature

Petwal et al. (2023) explored the associations among rumination, self-compassion, perfectionism, and symptoms of anxiety and depression in 49 individuals diagnosed with an anxiety disorder. The study found that rumination correlated negatively with self-compassion and positively with perfectionism, anxiety, and depression. Mediation analysis showed that rumination significantly mediated the relationship between socially prescribed perfectionism and depressive symptoms. Egan et al. (2021) conducted a systematic review and qualitative consultation to assess the role of self-compassion in preventing and treating anxiety and depression among youth. Out of 50 eligible studies, eight evaluated interventions, while others examined associations between self-compassion and mental health in youth aged 14–24. Lower self-compassion was consistently linked to higher symptoms of anxiety and depression, and interventions were effective largely due to reductions in self-criticism, as emphasized by both researchers and young participants.

Holas et al. (2021) explored whether self-compassion mediates the relationship between self-esteem and social anxiety, and examined the directional link between self-compassion and self-esteem. In a sample of 388 adults with elevated social anxiety, participants completed measures of social anxiety, self-esteem, and self-compassion (Neff, 2003). Findings showed that lower self-esteem predicted higher social anxiety and that self-compassion was positively associated with self-esteem. Importantly, self-compassion largely mediated the link between self-esteem and social anxiety. Abdollahi (2019) explored whether rumination mediates the relationship between perfectionism and social anxiety in 450 Malaysian undergraduates. They completed a series of questionnaires, and structural equation modeling revealed that rumination partially mediated the relationship between evaluative perfectionism and social anxiety.

Makadi and Koszycki (2019) explored how trait mindfulness and self-compassion relate to clinical features in individuals with Social Anxiety Disorder (SAD) among 136 participants. Bivariate correlations revealed that higher mindfulness and self-compassion were associated with better overall functioning and fewer symptoms. Notably, self-compassion showed stronger associations with clinical outcomes than mindfulness. Mediation analyses showed that self-compassion mediated the link between social anxiety severity and certain mindfulness facets, and vice versa.

Blackie and Kocovski (2017) sought to identify the particular self-compassion domains that would be particularly protective as well as if those with high levels of self-compassion are less prone to participate in post-event processing. In the first study, 150 people seeking treatment for social anxiety and shyness completed a series of questionnaires, recalled a social situation, and then rated their state post-event processing. In the second study, 156 undergraduate students participated. The findings showed a negative correlation between self-compassion and post-event processing, with considerable variation based on the type of circumstance. Self-compassion and state post-event processing were still substantially connected, even after adjusting for self-esteem. Self-compassion may act as a protective barrier against post-event processing in light of these findings.

Brozsovich et al. (2014) studied how rumination and reappraisal contribute to changes in social anxiety during CBT among 75 individuals with SAD. While weekly rumination predicted weekly social anxiety symptoms, reappraisal did not. Baseline rumination (brooding) was a consistent predictor, underscoring rumination's role in maintaining social anxiety.

3. Methodology

3.1 *Sample*

This study has a sample size of 100. 70 females and 30 males completed the questionnaires. Young adults residing in India between the ages of 18 and 25 are eligible to participate in this study, whereas those who are not Indian citizens and fall outside of this age range are excluded. A non-probability convenience sampling method was employed in this investigation.

3.2 *Measures*

Liebowitz Social Anxiety Scale (LSAS)

Developed by Liebowitz (1987), the LSAS is a 24-item scale assessing the severity of social anxiety and avoidance across performance and social interaction situations. Items are

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rated on 4-point scales for both fear (0–3) and avoidance (0–3). It has demonstrated strong psychometric properties, including high internal consistency and validity (Heimberg et al., 1999; Liebowitz, 1987).

Self-Compassion Scale – Short Form (SCS-SF)

The SCS-SF (Raes et al., 2011) is a 12-item self-report tool measuring self-compassion across six components identified by Neff (2003a), using a 5-point Likert scale. It retains high reliability ($\alpha \geq .86$) and strong correlation with the original long form ($r \geq .97$), making it efficient for research use, especially among students.

Ruminative Responses Scale (RRS)

Created by Nolen-Hoeksema and Morrow (1991), the RRS includes 22 items measuring three dimensions of rumination: symptomatic, obsessive, and reflective. Responses are rated on a 4-point scale (1 = strongly disagree to 4 = strongly agree). The scale shows good internal consistency, reliability, and validity (Townshend & Hajhashemi, 2023).

3.3 *Procedure*

This study employed a quantitative, correlational research design to examine the relationships among self-compassion, rumination, and social anxiety. Data were collected through online surveys, using standardized self-report instruments: the Liebowitz Social Anxiety Scale (Liebowitz, 1987), the Self-Compassion Scale – Short Form (Raes et al., 2011), and the Ruminative Responses Scale (Nolen-Hoeksema & Morrow, 1991). The design enabled the assessment of linear associations between variables using Pearson correlation analysis. Additionally, mediation analysis was conducted to explore whether rumination mediates the relationship between self-compassion and social anxiety.

4. Results

Table 1: *Descriptive Statistics for Social Anxiety, Rumination, and Self-Compassion.*

	N	Mean	SD
Social Anxiety	100	57.38	25.19
Rumination	100	50.51	12.58
Self-Compassion	100	3.10	.58

Table 2: *Person product-moment correlation between social anxiety, rumination, and self-compassion.*

		Social Anxiety	Rumination	Self-Compassion
Social Anxiety	Pearson	1	.51**	-.45**

	Correlation			
Rumination	Pearson Correlation	.51**	1	-.60**
Self-Compassion	Pearson Correlation	-.45**	-.60**	1

Table 3: *Multiple Regression Analysis: Rumination and Self-Compassion as Predictors of Social Anxiety*

Variables	B	SE	β	t	p
Constant	50.80	22.62	_	2.25	.027
Rumination	0.74	0.21	.37	3.44	.001
Self-Compassion	-9.86	4.61	-.23	-2.14	.035

Table 4: *Mediation Analysis Results*

Path	B	SE	t	p	LLCI	ULCI
A	-12.89	1.74	-7.40	<.001	-16.34	-9.43
b	0.74	0.21	3.44	<.001	0.31	1.16
c	-9.86	4.61	-2.14	.035	-19.01	-0.71
a*b	-9.49	3.50	—	—	-16.71	-2.91

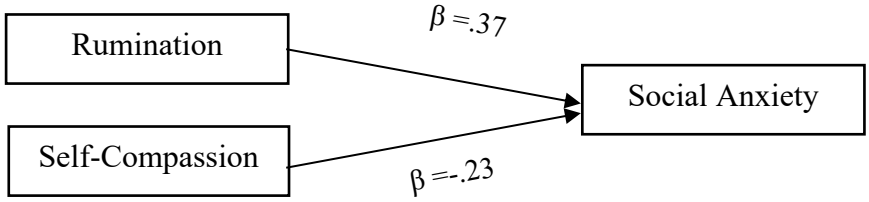

Figure 1*: Path diagram showing standardized regression coefficients for the effects of self-compassion and rumination on social anxiety.*

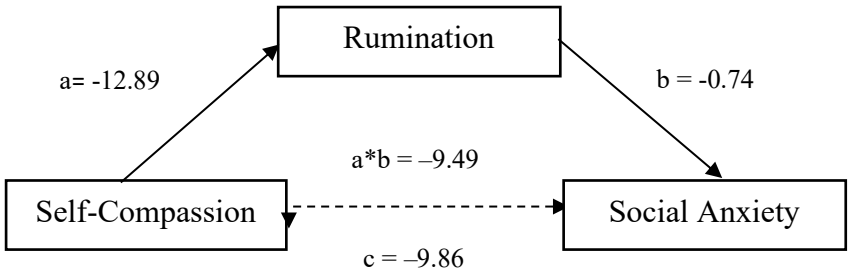

Figure 2: *Path diagram of a mediation model illustrating the role of rumination as the mediator of the relationship between self-compassion and social anxiety.*

5. Discussion

The present study examined the relationships among self-compassion, rumination, and social anxiety in a sample of 100 Indian young adults (70 females, 30 males), aged 18 to 25 years. Data were analysed using Pearson product–moment correlation, multiple linear regression, and mediation analysis via the PROCESS macro (Model 4; Hayes, 2013). Descriptive statistics are presented in Table 1. Participants reported moderate levels of social anxiety (M = 57.38, SD = 25.19), rumination (M = 50.51, SD = 12.58), and self-compassion (M = 3.10, SD = 0.58).

As shown in Table 2, social anxiety was positively correlated with rumination ($r = .51$, $p < .01$), supporting Hypothesis 1 (H1). This suggests that individuals who engage in higher levels of repetitive negative thinking are more likely to experience social anxiety. Supporting this, Petwal et al. (2023) reported a positive correlation between rumination and anxiety severity. Similarly, Abdollahi (2019) found that rumination and perfectionism positively predicted social anxiety in Malaysian undergraduates. Brozovich et al. (2014) also demonstrated similar findings, reinforcing the link between repetitive negative thinking and heightened social anxiety.

Self-compassion was negatively correlated with rumination ($r = –.60$, $p < .01$), supporting Hypothesis 2 (H2). In line with this, Petwal et al. (2023) reported a negative correlation between self-compassion and rumination. Additionally, Blackie and Kocovski (2018) found that lower levels of self-compassion were related to a greater fear of social interaction and increased post-event rumination following anxiety-provoking social situations. A significant negative correlation was also found between self-compassion and

social anxiety ($r = –.45$, $p < .01$), supporting Hypothesis 3 (H3). This suggests that greater self-compassion is associated with lower social anxiety. rumination. Supporting this, Makadi and Koszycki (2019) found that higher self-compassion was associated with less severe social anxiety. Similarly, Holas et al. (2022) reported a significant negative correlation between self-compassion and social anxiety symptoms.

A multiple linear regression analysis was conducted to examine whether rumination and self-compassion significantly predicted social anxiety. The overall model was significant, $R^2 = .273$, $F (2, 97) = 19.63$, $p < .001$. Rumination was a significant positive predictor of social anxiety ($\beta = .37$, $p = .001$), and self-compassion was a significant negative predictor ($\beta = –.23$, $p = .035$), supporting Hypothesis 4 (H4). Figure 1 illustrates this path. These findings are consistent with earlier research by McBride et al. (2022), which demonstrated that higher self-compassion predicted lower social interaction anxiety, with emotion regulation strategies mediating this relationship. Brozovich et al. (2015) similarly reported that rumination predicted weekly social anxiety levels, further highlighting its role as a risk factor.

A mediation analysis was conducted using PROCESS macro-Model 4 (Hayes, 2013) to determine whether rumination mediated the relationship between self-compassion and social anxiety. Self-compassion significantly predicted lower rumination (path a: $B = –12.89$, $p < .001$), and rumination significantly predicted higher social anxiety (path b: $B = 0.74$, $p < .001$). Even after controlling for rumination, self-compassion remained a significant negative predictor of social anxiety (direct effect, path c': $B = –9.86$, $p = .035$). The indirect effect was also significant (BootLLCI = –16.71, BootULCI = –2.91), indicating partial mediation. Figure 2 illustrates this mediation path. Thus, the mediation hypothesis was supported

Despite providing valuable insights, the present research has some limitations that should be acknowledged. This study relied on self-report measures, which may introduce bias and participant fatigue. The use of the short form of the Self-Compassion Scale may have limited construct depth. A small, gender-imbalanced sample (70% female) affects generalisability, and the cross-sectional design prevents causal conclusions. Future research should use larger, more diverse samples, the full scale, and longitudinal or experimental designs to clarify causal pathways.

The results of this study have significant ramifications for both research and practice, particularly in the fields of psychology, young adult well-being, and mental health. Results suggest that rumination mediates the link between self-compassion and social anxiety, highlighting self-compassion as a potential target in interventions. Mindfulness- and compassion-based approaches may reduce rumination and improve outcomes. The study also

adds culturally relevant insights, supporting the need for tailored mental health strategies for Indian youth.

6. Conclusion

The purpose of this study was to investigate the connection between social anxiety, rumination, and self-compassion in young adults from India. The results supported the hypotheses that were put forth. The findings showed a statistically significant negative correlation between self-compassion and both social anxiety and rumination, and a statistically significant positive correlation between rumination and social anxiety. Furthermore, levels of social anxiety were significantly predicted by both self-compassion and rumination. The association between self-compassion and social anxiety was found to be mediated, most notably, by rumination. This suggests that those who have lower levels of self-compassion may be more likely to engage in ruminative thinking, which in turn makes them more susceptible to social anxiety. As a result, each hypothesis was accepted. The psychological processes that connect social anxiety with self-compassion are highlighted by these findings, which also point to rumination as a crucial intervention target.

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