Original Papers

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Understanding the Relationship between Self-Compassion and Interdependent Happiness of the Married Hindu Couples

Abstract: *The study examined the relationships among some demographic factors, self-compassion and interdependent happiness of the married Hindu couples. Using a correlational research design, 600 participants (300 couples) were chosen by a snowball sampling. Self-compassion Scale (Neff, 2003b), Socioeconomic Status Scale (Aggarwal et al., 2005) and Interdependent Happiness Scale (Hitokoto & Uchida, 2015) were used to collect data. Findings revealed that some demographic factors such as age, years of marriage and number of family members were positively correlated with self-compassion while the number of children and socioeconomic status were negatively correlated with it. Age, years of marriage and the number of children had a positive relationship with interdependent happiness. Self-compassion evinced a significant positive correlation with the interdependent happiness of the couples. The nature of family and self--compassion accounted for significant variance in the scores of interdependent happiness of the couples. The study constitutes one of the limited studies which assessed the relationships among a set of demographic factors, self--compassion and interdependent happiness on a sample drawn from a collectivistic society. The results have been discussed in the light of extant theoretical and empirical findings of self-compassion and interdependent happiness. The findings may have significant implications for understanding positive life outcomes of people with self-compassion belonging to a collectivistic culture. The theory, practise and policy implications of the findings have been discussed. Directions for future research have also been provided along with some limitations of the study.*

Keywords: *common humanity vs. Isolation, demographic factors, interdependent happiness, married Hindu couples, mindfulness vs. over-identification, self-kindness vs. self-judgement.*

INTRODUCTION

Self-compassion represents one of the promising self-resources having preventive and promotive strengths with significant relevance to maintain harmony with the internal and external realities of life for individuals (Tiwari, Pandey, et al., 2020). Unlike self-esteem, self-compassion has no negative outcomes for its holders (Neff, 2011). Neff (2003a) conceptualized self-compassion as a set of positive self-attitudes that get activated during pain, failures, adversities and inadequacies of life. Neff (2003b) has suggested that self-compassion comprises three components with bipolar dimensions: self-kindness vs. self-judgement, common humanity vs. isolation and mindfulness vs. over-identification. These three aspects of self-compassion have been reported to show close

interaction and interdependence (Neff, 2003a, 2003b; Neff et al., 2017; Pommier et al., 2019). These dimensions facilitate self-understanding, understanding of suffering as a common fact, focus on the present, ease release of a chain of positive and incessant energy emanating from the core of self and successfully inhibit judgemental, harsh and critical attitude. Self-kindness helps to improve warmth, unconditional self-acceptance, useful self-love and non-productive self-criticism. Common humanity encourages realization of shared human experiences, broadens realities of life, connectedness, imperfections and errors of life. Mindfulness facilitates awareness of a momentary aspect of present experiences that enhance clarity and balance of human sufferings. Thus, self--compassion helps to achieve and maintain a potential understanding of self, experiences, diverse life conditions,

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usualness of human suffering, inner focus, an efficacious attribution style and other positive cognitions (Tiwari, Pandey, et al., 2020). Self-compassion helps to understand and explain success/failures of life, the significance of meaning in life, connectedness and cooperation that may eventually lead an individual to achieve hedonic and eudaimonic well-being (Barnard & Curry, 2011; Pandey et al., 2019; Pandey, Tiwari, Pandey, et al., 2020; Ryan & Deci, 2001; Tiwari, Pandey, et al., 2020).

Many positive life outcomes have been linked with self-compassion. For example, self-compassion shows positive relationships with well-being (Muris et al., 2018; Pandey et al., 2019; Verma & Tiwari, 2017), life satisfaction (Barnard & Curry, 2011; Bluth et al., 2016), social connectedness (Williams et al., 2008), emotional intelligence (Neff, 2003b), happiness (Neff, 2003a), an optimistic outlook (Yamaguchi et al., 2014; Zessin et al., 2015) and positive mental health (Rai & Tiwari, 2019; Tiwari, Pandey, et al., 2020). Conversely, self-compassion exhibits negative associations with anxiety, negative affect, depression, stress and other mental health issues (López et al., 2015; MacBeth & Gumley, 2012; Pfattheicher et al., 2017).

Many mechanisms have been suggested behind the positive impacts of self-compassion. For example, self--compassion has been suggested to promote resilience and community orientation (Akin & Akin, 2015; Tanaka et al., 2011) as well as thriving positive emotions, positive behaviours, acceptance and positive attributions (Barnard & Curry, 2011). Self-compassionate people use language that reflects connection rather than isolation (Neff et al., 2007). In addition, self-compassionate people exhibit higher levels of feelings of autonomy, competence, relatedness and self-determination (Magnus et al., 2010).

It is noticeable that self-compassion is one of the important sources of happiness. The majority of the American and Western researchers have conceptualized happiness as a subjective and emotionally arousing state juxtaposed with a higher frequency of positive emotions and lower occurrence of negative emotions (Fredrickson, 2001; Lyubomirsky & Lepper, 1999; Uchida & Oishi, 2016). Lyubomirsky and Lepper (1999) have defined happiness as a global and subjective assessment of whether one is a happy or unhappy person. Western culture conceptualizes happiness as the reflection of personal achievements (Uchida et al., 2004), free-choice (Markus & Kitayama, 2010), self-affirmation resources (Pandey, Tiwari, & Rai, 2020; Tiwari, Kashyap, et al., 2020), emotional expression (Matsumoto et al., 2008) and mutual confirmation of inner positive attributes (Kitayama & Markus, 2000).

Conversely, happiness in collectivistic societies is characterized by connectedness and low arousal which is labelled as interdependent happiness (Markus & Kitayama, 1991; Oishi et al., 1999; Suh & Oishi, 2004; Uchida & Ogihara, 2012; Uchida & Kitayama, 2009). Happiness in people from collectivistic societies may be based on bond with others, friendly feelings toward others, ordinariness, interpersonal harmony, quiescence, interpersonally engaged emotions and interdependent goals (Kitayama et al., 2006; Oishi & Diener, 2001; Suh & Oishi, 2004; Uchida & Kitayama, 2009). The differences between the conceptualizations of happiness in the individualistic and collectivistic cultures may be guided by the dissimilar nature of self-construct which is culturally embedded (Kwan et al., 1997).

Marriage is a union of two individuals. It has been argued that married people are happier than unmarried ones (Amato, 2009). It has been suggested that marriage enhances happiness through a set of its by-products such as the presence of children, positive relationships, security, meaningfulness and productive goals (Amato, 2009; Kamp Dush et al., 2008; Munsey, 2010). There are enough cultural differences, expectations and outcomes of married life among the societies of the world which make this issue remain relevant for a scientific inquiry. Hindu marriage is a *Sanskar* (sacrament) rather a contract between two individuals. It reflects a union of two families and not between two individuals. The husband has a more active role in worldly activities while the wife has a passive role. For a Hindu, marriage is essential to repay *Rinas* (debts) and achieve *Purusharthas* (object of human pursuit) such as *Dharma* (righteousness or moral values), *Kama* (pleasure), *Artha* (Worldly achievements) and *Moksha* (liberation). Wife is said to be *Ardhagini* (half of man). In essence, the Hindu marriage is characterized by its sacramental nature, irrevocability and a stronger union of mind, body and soul (Sharma et al., 2013). This unique nature of the relationship of ties in Hindu marriage cannot be found in any other marriage systems of the world. The nature of the marriage relationship between a husband and a wife is also unique. The basic goals of interpersonal harmony, social interactions and achievements of life have a specific meaning in Indian culture (Sharma et al., 2013).

Family is a conglomeration of two or more people, who share the common shelter, habits and mutual goals and tied either by blood or marriage relationships. The institution of the family is universal and dynamic in nature and has many forms. The joint family system is more prevalent in collectivistic societies like India (Chadda & Deb, 2013) whereas the nuclear family is more popular in materially advanced societies like America (Ruggles, 2009). The various forms of families are characterized by size, generation, skills, experiences and personal as well as social goals. The characteristic features of different family systems may have relevance to understanding the dynamics of happiness. The family has been found to have a close link with happiness as family values are always kept on an upper hand over personal values which regulate the very construal of meaning, relationship, methods of living well, values pursuits, happiness and other life goals (Krys et al., 2019). Joint and nuclear families differ not only in their composition and structure but also in their functions and regulatory roles for individuals and society. A joint family is said to cultivate more mutuality, interdependence and adherence to religious and spiritual practices while a nuclear family promotes independence, preference for individual achievements, individual

freedom and less observance to religious practices (Gautam, 2020; Pandey, Tiwari, & Rai, 2020; Tiwari, Singh, et al., 2020; Tiwari, Tiwari, et al., 2020). Thus, understanding the role of the family in influencing interdependent happiness would constitute a significant contribution.

Socioeconomic status (SES) and other demographic factors have been found to influence the nature and extent of happiness of individuals. In a cross-national study of 15 countries, age, marital status, employment and other demographic factors were associated with happiness and other emotional outcomes (Peiró, 2006). Socioeconomic status refers to the social standing of an individual in a group which includes income, occupation and education. It also reflects inequities in access to various resources, social privilege, power and control (Jain et al., 2018). A recent study has revealed that SES denotes a long-term influential factor explaining happiness and psychological well-being (Fassbender & Leyendecker, 2018). As a result of fast social and technological changes, many new socio-cultural attributes have been added to human life which may alter the previous understanding of the association between SES and happiness. For example, the proliferation of education, new opportunities of employment, the role of mass media, new technology and social welfare policies have influenced the SES conditions of people in the recent past. A higher SES of an individual may increase the availability of material resources on one hand and decrease the availability of free-time and quality of close relationships on the other. It has been argued that SES factors have lasting impacts on personal and social identities of people and exert significant influence on their feelings, thoughts and behaviours (Manstead, 2018). In comparison to middle-class, lower-class individuals are more likely to have an interdependent self-concept, an immediacy in behaviours, a lower sense of personal control, a higher empathy and a more supportive attitude to others in distress (Manstead, 2018). In a recent study, happiness showed close relationships with gender, age, employment and marital status (Rothert et al., 2020). Thus, it would constitute a good inquiry to understand their impacts on the interdependent happiness of individuals.

Gender differences in happiness have also been observed. For example, women are happier than men but they also report a higher frequency of negative emotions. Men and women differ in their level of cooperation, interdependence, relationship orientation and responses to various social stimulations (Fujita et al., 1991). These gender differences may make them susceptible to experience dissimilar interdependent happiness. Men and women also differ in their gender stereotype, emotional expressions, social relations and the socialization of emotions which may make them experience different levels of happiness (Plant et al., 2000). Women more easily express their happiness, warmth and fear which make them develop stronger social bonding and caring than men. On the other hand, men more readily express anger, pride and contempt (Plant et al., 2000). Thus, the happiness of men and women may be guided by dissimilar mechanisms. For instance, the happiness of men is linked with living with family or spouse and occupation whereas positive relationships, care and interdependence have more relevance to understanding the happiness of women (Moriyama et al., 2018). The gender differences in happiness may be related to differences in emotion recognition, social sensitivity, self-esteem, close friendships, valuing emotions, achievement empathy and differential use of the areas of the brain (Chui & Wong, 2016; Moriyama et al., 2018; Schulte--Rüther et al., 2008; Wong et al., 2020). These differences in the psychological and physiological attributes may make women experience more happiness than men (Moriyama et al., 2018; Wong et al., 2020).

Education provides people an opportunity to learn, explore and grow in life. It has been argued that individual and collective happiness and education are closely linked (Noddings, 2003). According to Layard (2006), seven factors are essential for happiness: family relationships, financial situation, work, community and friends, health, personal freedom and personal values. These all are achievable through proper education and thus, education has an indirect role in the happiness of people (Layard, 2006). There is disagreement about the relationship between age and happiness (Laaksonen, 2016; Wong et al., 2020). Some researchers argue that there is a U-shaped relationship between age and happiness and suggest happiness to occur minimum during the middle adulthood due to the multiplicity of life challenges as compared to the other developmental periods (Blanchflower & Oswald, 2008). Others suggest that happiness is the end result of health status, age, sex, region and socioeconomic characteristics (Sun et al., 2016). Thus, the relationship between age and happiness is inconclusive and needs further investigation (Wong et al., 2020).

The above discussion makes it apparent that there is limited research showing the impacts of self-compassion on interdependent happiness despite the suggestion that there are many commonalities between the two (Gerber et al., 2015). Likewise, the study of self-compassion and interdependent happiness has been limited to some selected American, European and Asian countries (Hitokoto & Uchida, 2015). There are also limited studies of these constructs involving demographics such as age, gender, family (structure, size and composition), socioeconomic status and occupation. The Hindu married couples may be an especial case as Hindu marriage is a sacrament with acts as a means to fulfil worldly as well as spiritual needs through special religious and social provisions. The relationships and life goals of a Hindu married couple are more guided by specific religious and spiritual arrangements. The study of these constructs in the context of the unique features of the relationships of the Hindu married couples and current socio-cultural realities may help to understand their dynamics for interdependent happiness in a novel way. Thus, this study will help fill the gap pertaining to the limited research on self-compassion and interdependent happiness with diverse populations and cultures, particularly because of the difference between individualistic and collectivistic conceptualizations of happiness. The current study aims to examine the impacts

of self-compassion on the interdependent happiness of the married Hindu couples. In addition, this study also examines the role of stated demographics, as these have been found to influence happiness in previous studies.

Objectives

The following were the objectives of the present study:

1. To understand the nature of the associations among the various demographics, self-compassion and interdependent happiness of married Hindu couples, and
2. To estimate variance accounted for by the various demographic attributes and self-compassion in the scores of interdependent happiness of married Hindu couples.

Hypotheses

Based on the understanding of the previous findings, the following hypotheses were framed for the present study:

1. Age, years of marriage, number of children, number of family members and self-compassion will show positive correlations with interdependent happiness while socioeconomic status will show the reverse.
2. Self-compassion will account for significant variance, above and beyond the demographic factors, in the interdependent happiness of married Hindu couples.

METHODS AND MATERIALS

Sample

The study employed a correlational research design in which a snowball sampling technique was used to choose the participants. The data were collected from married Hindu couples (*n* = 600, *Age Range* = 26-56 years, *Mean Age* = 38.42 years, *SD* = 7.89) who were the residents of Sagar city, Madhya Pradesh, India. Most of the participants were chosen from the middle-class Hindu families. The biographic details such as education, gender, age, domicile, occupation, length of the marriage, number of children, nature of family and number of family members were recorded with the help of a questionnaire. The study employed a set of demographics which have been defined as follows. A family is a group of individuals related by marriage, birth, consanguinity or legal adoption who share a common kitchen and financial resources regularly. A nuclear family is defined by a single married couple with or without their unmarried children whereas joint family is collection two or more married couples (horizontal level) or three or more married couples (vertical level) of a single generation with their married or unmarried children (Sharma, 2013). A rural area is defined as a geographical area with a population density of up to 400 per square kilometre, a clear surveyed boundaries, and a minimum of 75% of the male working population involved in agriculture and allied activities (Singh, 2002). An urban area is characterized by a place with a municipality, corporation, cantonment board or notified town area committee with a minimum population

of 5,000 of which at least 75% of the male working population engaged in non-agricultural pursuits and a density of population of at least 400 persons per square kilometre (Ministry of Housing and Urban Affairs, Government of India, 2019). Socioeconomic status refers to the social standing of an individual in a group which includes income, occupation and education with the inequities in access to various resources, social privilege, power and control (Jain et al., 2018). More detailed descriptions of the demographic attributes of the participants have been presented in Table 1.

Inclusion and Exclusion Criteria

The participants with the age ranging between 25 to 60 years with at least five years of married life and the apparent normal physical and mental health (as reported by the participants) were chosen for the study. The participant with a minimum of five years of married life was chosen as a criterion so that he/she may have acquired sufficient experience of the basic issues and dynamics of married life. Only Hindu married couples were included in the study as Hindu marriage is a sacrament rather than a contract. Those couples who belonged to other religious communities, having some health problems, had lived less than five years of married life and did not fell under the prescribed age range were excluded from the study. Unhealthy participants were excluded to avoid any confounding impacts of health-related distress on happiness (Angner et al., 2009, 2013; Steptoe, 2019).

Tools

The current study employed three scales which were originally available in the English language. As the chosen sample was Hindi-speaking, the scales were translated in the Hindi language. Following the relevant suggestions of the earlier researchers, the scales were first translated from English to Hindi followed by a back-translation from Hindi to English by a team of three experts (Behr, 2017; Brislin, 1970). These experts also ascertained the face validity and validated each item of the scales keeping in mind the conceptualization of the constructs. The present study employed the following tools for data collection:

Self-compassion Scale

Self-compassion Scale (SCS) (Neff, 2003b) was used to measure the self-compassion of the couples. The scale represents the thoughts, emotions and behaviours associated with the various components of self-compassion. It includes items that measure how often people respond to feelings of inadequacy or suffering with self-kindness, self-judgment, common humanity, isolation, mindfulness and over-identification. It consists of 26 items comprising self-kindness (e. g., I try to be loving towards myself when I'm feeling emotional pain.), self-judgment (i. e., I'm disapproving and judgmental about my own flaws and inadequacies.), common humanity (e. g., When things are going badly for me, I see the difficulties as part of life that everyone goes through.), isolation (e. g., When I think about my inadequacies, it tends to make me feel more

Table 1. Demographic Information of the Participants (n = 600)

S. No.	Variables	Categories	Frequencies or range	Percent
1.	Education	Non-graduate	178	29.70
		Graduate	422	70.30
2.	Gender	Male	300	50
		Female	300	50
3.	Age	Continuous	26-56 years	100
4.	Domicile	Rural	103	17.20
		Urban	497	82.80
5.	Occupation	Non-employed	240	40
		Employed	360	60
6.	Years of Marriage	Continuous	6-29 years	100
7.	Number of Children	Continuous	0-6	100
8.	Nature of Family	Nuclear	217	36.20
		Joint	383	63.80
9.	Number of Family Members	Continuous	2-31	100
10.	Socioeconomic Status	Upper-High (>76)	89	15.1
		High (61-67)	132	21.9
		Upper-Middle (46-60)	283	47.2
		Lower-Middle (31-45)	81	13.6
		Poor (16-30)	15	2.5

Note 1. Education (1= non-graduate, 2 = graduate), gender (1= male, 2 = female), domicile (1= rural, 2 = urban), occupation (1= non-employed, 2 = employed) and nature of family (1= nuclear, 2 = joint) are categorical variables. The numerals in the parenthesis show the coding system of variables.
Note 2. Age, years of marriage, number of children, number of family members and socioeconomic status are continuous variables.
Note 3. Higher the score on the socioeconomic status higher was the Socioeconomic Status of the participants.

separate and cut off from the rest of the world.), mindfulness (e. g., When something upsets me I try to keep my emotions in balance.) and over-identification (i. e., When I'm feeling down I tend to obsess and fixate on everything that's wrong.) with a five-point scale from almost never to almost always.

The items on self-kindness (5, 12, 19, 23, 26), common humanity (3, 7, 10, 15) and mindfulness (9, 14, 17, 22) subscales are assigned 1, 2, 3, 4 and 5 scores for the responses ranging from almost never to almost always. The reverse scoring was done for the responses on self--judgment (1, 8, 11, 16, 21), isolation (4, 13, 18, 25) and over-identification (2, 6, 20, 24) subscales. An aggregate of the scores on these subscales indicates the score of the participants on self-compassion. For SCS, higher scores indicate higher self-compassion. The reliability and validity of the scale have been well established in many studies (Neff et al., 2017; Pandey et al., 2019). The Cronbach's Alpha of the SCS scale for the current sample was .571.

Interdependent Happiness Scale

The Interdependent Happiness Scale (IHS) developed by Hitokoto and Uchida (2015) was employed to measure the interdependent happiness of the couples. It is a measure of one's happiness which is based on interpersonal harmony, ordinariness, and quiescence. It consists of 9 items (e. g., I believe that I and those around me are happy.) with a five-point scale (1-Strongly disagree, 2-Somewhat disagree, 3-Neither agree nor disagree, 4-Somewhat agree, 5-Strongly agree). A total sum of the scores on all items of the scale shows the interdependent happiness of the participants. Higher scores on IHS signify higher levels of interdependent happiness. The psychometric properties of the measure have been reported to be satisfactory in many previous studies (Markus & Kitayama, 1991; Oishi et al., 1999; Suh & Oishi, 2004; Uchida & Ogihara, 2012; Uchida & Kitayama, 2009). Hitokoto and Uchida (2015) reported desirable levels of internal consistency across cultures (Germany: α = .60; Japan: α = .78; Korea: α = .78; US: α = .61). The Cronbach's Alpha of the IHS for the present sample of the study was .756.

Socioeconomic Status Scale

The socioeconomic status (SES) of the participants was measured through a standardized scale (Aggarwal et al., 2005) which was developed on a sample drawn from

the Indian population. This scale consists of 22 items with multiple choice answers (e. g., Members of the family gone abroad in last three years (official or personal) or Type of locality the family is residing). It categorizes the individuals and families into six categories such as upper-high (>76), high (61-67), upper-middle (46-60), lower-middle (31-45), poor (16-30) and very poor or below poverty line (<15). Thus, a higher score on SES was indicative of a higher socioeconomic status of a participant (Aggarwal et al., 2005). It has widely been used by the researchers of behavioural sciences (Gujare & Tiwari, 2016a, 2016b). The Cronbach's Alpha of the scale for the current sample of the study was .720.

Procedure

The proposal of the study was submitted to the Ethics Committee of Doctor Harisingh Gour Vishwavidyalaya (University), Sagar, 470003, Madhya Pradesh, India for approval. The participants were chosen as per the inclusion and exclusion criteria after the collection of their written consent. The first author personally visited their homes and debriefed about the basic objectives of the study. Then two sets of questionnaires were presented to each couple with the request to read the instructions carefully and put a reply to each item of the scales. The initial part of the scale sought information regarding their demographic details like age, sex, residence, religion and education. In this manner, data of 600 participants (300 married Hindu couples) were collected. The participants were not given any compensation for their participation in the study. Majority of the participants completed the questionnaires between 30 minutes to 40 minutes.

Data Analysis Plan

According to the research questions, the mean scores, standard deviations (SDs), coefficient of correlation and hierarchical regression analysis were computed. The obtained raw scores were arranged as per the nature of statistical techniques. The statistical analyses were carried out with the help of SPSS 26v procured by the University. The data was screened before analysis for removing the genuine outliers. As the data did not show normal distribution, the bootstrapping method employing 1000 samples was used to compute various statistics. Education (1= non-graduate, 2 = graduate), gender (1= male, 2 = female), domicile (1= rural, 2 = urban), occupation (1= non-employed, 2 = employed) and nature of family (1= nuclear, 2 = joint) were categorical variables while age, years of marriage, number of children, number of family members, socioeconomic status, self-compassion and interdependent happiness were continuous measures. The demographic attributes and self-compassion measures were the predictors whereas interdependent happiness was the criterion measure.

RESULTS

The results of the study have been described in two sections. In the first section, coefficients of correlation have been presented whereas the second section comprises hierarchical regression analyses.

Correlation Analysis

The Pearson Product Moment coefficients of correlation among the continuous demographic characteristics (such as age, years of marriage, number of children, number of family members and socioeconomic status), self-compassion and interdependent happiness were computed. The details of these coefficients have been displayed in Table 2. Age showed significant positive correlations with self-kindness ($r = .101$, $p = .05$), common humanity ($r = .139$, $p = .01$), mindfulness ($r = .176$, $p = .01$), overall self-compassion ($r = .127$, $p = .01$) and interdependent happiness ($r = .121$, $p = .01$). Likewise, years of marriage was significantly positively correlated with common humanity ($r = .087$, $p = .01$), mindfulness ($r = .096$, $p = .05$) and interdependent happiness ($r = .105$, $p = .05$). Number of children showed significant positive correlations with mindfulness ($r = .103$, $p = .05$) and interdependent happiness ($r = .120$, $p = .01$). It was also revealed that self-kindness ($r = .298$, $p = .01$), common humanity ($r = .339$, $p = .01$), mindfulness ($r = .277$, $p = .01$) and overall self-compassion ($r = .194$, $p = .01$) were positively correlated with interdependent happiness while self-judgement ($r = -.130$, $p = .01$) and isolation ($r = -.139$, $p = .01$) exhibited the reverse trends (see Table 2).

Hierarchical Regression Analysis

A hierarchical regression analysis using a boot-strapped sample of 1000 was carried out to examine the unique variance accounted for by self-compassion in interdependent happiness above and beyond that accounted for by demographics. To this end, all the demographic variables (education, gender, age, domicile, occupation, years of marriage, number of children, nature of family, number of family members and socioeconomic status) were entered at step 1 to ascertain their unique contribution in interdependent happiness. The scores of self-compassion were entered at step 2 (see Table 3).

The results of regression analysis (model 1) showed that demographic variables (education, gender, age, domicile, occupation, years of marriage, number of children, nature of family, number of family members and socioeconomic status) together accounted for a significant variance by contributing 3.40% of the variance in the scores of interdependent happiness of the participants ($R^2 = .034$, $F(10, 589) = 2.085$, $p = .024$). It was also evident that the addition of self-compassion at step 2 for interdependent happiness contributed an additional 3.70% significant variability ($R^2 = .071$, $F(1, 588) = 23.212$, $p = .001$) to the measure of interdependent happiness of the married Hindu couples.

The results further show that the predicted value of interdependent happiness for the joint family is .094 unit higher than for the nuclear family in model 1. Likewise, the predicted value of interdependent happiness for the joint family is .113 unit higher than for the nuclear family in model 2. Most importantly, the predicted value of

Table 2. Coefficients of Correlations Among the Demographic Attributes, Self-Compassion and Interdependent Happiness of the Participants (n = 600)

S. No.	Measures	Mean (SD)	1	2	3	4	5	6	7	8	9	10	11	12	13
1.	AGE	38.42 (7.89)	1												
2.	YOM	15.19 (7.80)	.824**	1											
3.	NOC	1.47 (0.79)	.500**	.476**	1										
4.	NOFM	6.53 (4.60)	.068	.066	-.017	1									
5.	SES	56.20 (11.96)	-.014	-.085*	-.104*	.074	1								
6.	SK	16.32 (3.87)	.101*	.048	-.004	-.006	.017	1							
7.	SJ	15.32 (3.84)	-.056	-.018	-.072	.021	-.087*	-.099*	1						
8.	CH	13.60 (3.66)	.139**	.087*	.074	.037	.091*	.407**	-.164**	1					
9.	I	12.25 (3.56)	-.034	-.048	-.059	-.012	-.109**	-.172**	.337**	-.065	1				
10.	M	13.39 (3.54)	.176**	.096*	.103*	.051	.053	.438**	-.104*	.488**	.059	1			
11.	O	12.24 (3.55)	.068	.069	-.084*	.067	-.018	-.094*	.358**	-.106**	.443**	-.024	1		
12.	OSC	83.11 (11.22)	.127**	.076	-.015	.050	-.018	.497**	.442**	.510**	.511**	.601**	.505**	1	
13.	IH	32.57 (6.60)	.121**	.105*	.120**	-.042	-.006	.298**	-.130**	.339**	-.139**	.277**	-.057	.194**	1

Note 1. YOM = Years of Marriage, NOC = Number of Children, NOFM = Number of Family Members, SES = Socioeconomic Status, SK = Self-Kindness, SJ = Self-Judgement, CH = Common Humanity, I = Isolation, M = Mindfulness, O = Over-identification, OSC = Overall Self-Compassion, IH = Interdependent Happiness
Note 2. (*$p < .05$, ** $p < .01$)

interdependent happiness increases significantly by .197 unit for each unit of self-compassion in model 2. In essence, the values of standard beta (*β*) showed that self-compassion accounted for the greatest variability in the interdependent happiness followed by nature of family (see Table 3).

DISCUSSION

The findings of the current study exhibited that some components of demographic attributes (age, years of marriage and number of children) and self-compassion showed significant relationships with the interdependent happiness of the Hindu married couples. It was evident that some demographic factors (age, years of marriage and the number of children) were positively correlated with the various aspects of self-compassion while socioeconomic status was negatively correlated with most of the dimensions of self-compassion and interdependent happiness. Importantly, overall self-compassion was positively correlated with interdependent happiness. The regression

analysis showed that only nature of family (joint or nuclear) and self-compassion accounted for significant variance in the scores of interdependent happiness of the married couples. These findings provide partial support for the study hypotheses.

The findings showed that the greater the age of the participants the higher was their interdependent happiness. It may be because over time, people develop better control over their behaviours and emotions and develop a better understanding of the realities of life events. A study has argued that as people grow older, they become more self-compassionate which, in turn, may buffer against the negative life outcomes on one hand and enhance positive outcomes on the other (Brown et al., 2019). According to Erikson and Erikson (1997), intimacy, generativity and ego-integrity increase as people get older which make them inclined to cultivate love, care and wisdom. These additions facilitate a better understanding of self, others and realities of life which, in turn, make people happier. Indian society extends more privilege and respect to older people which may be another cause of increasing

Table 3. Results of Hierarchical Regression Analyses Using Demographic Attributes and Self-Compassion as the Predictors and Interdependent Happiness as the Criterion Measure (n = 600)

Predictors	Model 1					Model 2				
	B	SE	β	t	p	B	SE	β	t	p
Education	-.576	.650	-.040	-.886	.376	-.231	.642	-.016	-.359	.720
Gender	.014	.766	.001	.018	.986	-.018	.752	-.001	-.024	.981
Age	.030	.068	.036	.445	.656	-.004	.067	-.004	-.054	.957
Domicile	.136	.744	.008	.183	.855	-.144	.733	-.008	-.197	.844
Occupation	-.769	.757	-.057	-1.015	.310	-.758	.743	-.056	-1.019	.309
Years of Marriage	.031	.065	.036	.472	.637	.039	.064	.046	.616	.538
Number of Children	.584	.424	.069	1.376	.169	.681	.417	.081	1.634	.103
Nature of Family	-1.286	.656	-.094	-1.959	.051	-1.558	.647	-.113	-2.409	.016
Number of Family Members	-.004	.066	-.003	-.066	.947	-.002	.065	-.002	-.038	.970
Socioeconomic Status	-.006	.023	-.011	-.267	.789	.001	.023	.002	.046	.964
Self-compassion						.116	.024	.197	4.818	.000
R^2	.034					.071				
ΔR^2	.034					.037				
ΔF	2.085*					23.212**				

Note 1. Education (1= non-graduate, 2 = graduate), gender (1= male, 2 = female), domicile (1= rural, 2 = urban), occupation (1= non-employed, 2 = employed) and nature of family (1= nuclear, 2 = joint) are categorical variables. The numerals in the parenthesis show the coding system of variables.
Note 2. Age, years of marriage, number of children, number of family members and socioeconomic status are continuous variable.
Note 3. Higher the score on the socioeconomic status higher was the Socioeconomic Status of the participants.
Note 4.(*$p< .05$, ** $p< .01$)

interdependent happiness of the couples. The participants of the current study may have achieved children, employment and social recognition with their increasing age, which may be another reason for a positive correlation between their age and interdependent happiness.

The finding showed that gender did not contribute significant variability in the scores of interdependent happiness of the couples. Conversely, previous studies have shown that there are significant gender differences in emotional and social skills of men and women. For instance, women experience higher positive emotions than men. They are also better at regulating their emotions and more skilled at managing their interpersonal relations (Hitokoto & Uchida, 2015). Studies have also shown that men possess higher self-acceptance and autonomy than women while women show higher scores on personal growth and positive relations with others than men (Gómez-Baya et al., 2018; Matud et al., 2019). The happiness of women is more guided by positive relationships, care and interdependence than men (Moriyama et al., 2018). Women also show the higher ability of emotion recognition, social sensitivity, close friendships, empathy and differential use of the areas of the brain (Moriyama et al., 2018; Wong et al., 2020). The equal opportunities in education, social interaction and exposure, employment and other avenues may have reduced differences in social and emotional skills of the male and

female participants of the current study. These avenues may have also reduced the gap between their self-acceptance, feeling of autonomy and positive relationships as stated in some previous studies. These might be the possible reasons behind no gender difference in the interdependent happiness measure of the current study.

The findings of the current study showed that the joint family had a positive role in shaping the interdependent happiness of the couples. It has been suggested that the joint family helps in preserving and protecting interdependence in relationships, mutuality, cooperation and positive regards to significant others. These attributes of the joint family may have a direct role in shaping the interdependent happiness of the couples. Moreover, the joint family plays an important role in preserving meaning, relationship, positive living and positive values (Krys et al., 2019). A joint family cultivates a strong adherence to religious and spiritual practices than a nuclear family (Gautam, 2020; Tiwari, Singh, et al., 2020). Taken together, these strengths of a joint family may be argued to enhance self-understanding, acceptance of realities of life, resourcefulness, quality of life and positive relational outcomes which might be the possible reasons behind its positive contribution in the interdependent happiness of the married Hindu couples. Joint or nuclear families may also differ in their interpersonal engagements, positive communication and investment of time in relationships

which, in turn, may explain their differential relationship with interdependent happiness.

Socioeconomic status (SES) has shown mixed relationships (mostly negative or small positive) with both the self-compassion and interdependent happiness of the couples. It may be due to most of the participants (69.10%) belonging to approximately the same SES level (high to upper-middle: 46-67) (see Table 1). The participants with this SES level may not find sufficient time for enjoying interpersonal relationships, mutuality and interdependence which are key components of interdependent happiness. Its negative relationships with self-compassion and interdependent happiness in the current study lend support to a cross-national study which argued that better SES conditions may increase life satisfaction but may decrease happiness (Peiró, 2006; Rothert et al., 2020). Although the majority of the demographic variables in the current study did not correlate and predict self-compassion and interdependent happiness significantly; some of these (i.e., domicile, occupation, years of marriage, number of children, nature of family and number of family members) have received little attention in the literature and thus, this is one of the few studies that examine these variables.

The findings clearly showed that self-compassion had significant correlations with and positively predicted the interdependent happiness of the participants. Similar findings have been reported by some recent studies (Muris et al., 2016, 2018; Muris & Petrocchi, 2017; Pandey et al., 2019). It has been suggested that self-compassion comprises self-kindness, common humanity and mindfulness that reflect self-acceptance, self-care, self-tolerance, understanding and patience towards negative self-traits, common struggle, shared perception about lack of resources, shared/common inadequacy, emotional stability, stable perception, analytical thinking about failure in important domains of life and open-mindedness towards self during hurtful times (Neff, 2003b; Pandey et al., 2020). Interdependent happiness is characterized by positive evaluations, positive interpersonal role, stability in life, security, socially desirable behaviours, positive social comparison and equity (Hitokoto & Uchida, 2015). These strengths of self-compassion align with the core features of interdependent happiness, which may explain the positive relationship between self-compassion and interdependent happiness.

Self-compassion may also facilitate interdependent happiness as it may help individuals to be more present and remain attentive to others in interpersonal context instead of being inwardly distracted and self-critical. These attributes of self-compassion have been suggested to help individuals to show more social connectedness and interpersonal competence (Bloch, 2018). Self-compassion has also been argued to show a close relationship with attachment (Mackintosh et al., 2018). This may be another reason behind its association with interdependent happiness. Self-compassion has been observed to motivate others to correct their interpersonal mistakes (Baker & McNulty, 2011). Self-compassion has also been reported to be linked with a greater likelihood to com-

promise, greater authenticity, lower levels of emotional turmoil and higher levels of relational well-being and thus, extend helping hands in resolving interpersonal conflicts (Yarnell & Neff, 2013). Other interpersonal benefits of self-compassion include increased belongingness, compassionate goals, forgiveness, self-esteem, positive affect and decreased loneliness (Liu, 2017). This increased social connectedness, interpersonal interactions with others, engagement in more self-disclosure, expression of the emotional support to others and interpersonal competence cultivated by self-compassion may be responsible for increased interdependent happiness of the couples in the present study.

Some other studies have suggested a variety of mechanisms behind the catalyzing influence of self-compassion on the various positive life outcomes. For example, self-compassion has been suggested to promote resilience and community orientation (Akin & Akin, 2015; Tanaka et al., 2011), thriving positive emotions, socially desirable behaviours, acceptance and useful attributions (Barnard & Curry, 2011). Self-compassionate people use 'we' more frequently in place of 'I' and exhibit higher social references to friends, family, and other persons (Neff et al., 2007), higher levels of optimism, gratitude and positive affect (Breen et al., 2010; Neff et al., 2007), emotional intelligence, wisdom, personal initiative, curiosity, intellectual flexibility, and life satisfaction (Heffernan et al., 2010; Martin et al., 2011; Neff et al., 2008) and feelings of autonomy, competence, relatedness and self-determination (Magnus et al., 2010). These interpersonal benefits of self-compassion may be some important reasons behind its positive association with the interdependent happiness in the present study.

IMPLICATIONS

The construct of interdependent happiness has been ascribed to collectivistic societies like India. We observed that self-compassion is very relevant to understand positive life outcomes like interdependent happiness. The findings of the present study may be helpful to understand the dynamics essential to enhance interdependent happiness. The study lays special emphasis on the new psychological construct of interdependent happiness, hitherto little known aspect of happiness. Studying the role of demographic factors such as age, gender and nature of family (joint or nuclear) in shaping interdependent happiness constitute the other strength of this study.. The work also denotes cultural significance. This study will help fill the gap in the research on self-compassion which has been limited in applications with diverse populations and cultures, particularly because of the difference between individualistic and collectivistic conceptualizations of happiness.

The findings carry theoretical as well as practical implications. Self-compassion is relevant to cultures with a more interdependent conceptualization of happiness, such as Indian culture, and should be further studied in these cultures/populations. Self-compassion-based intervention

plans may be developed to enhance interdependent happiness and other positive life outcomes. The findings provide some support for the shift from individual-level factors to at least family-level factors since the nature of family seems particularly important in predicting interdependent happiness. Some demographic factors such as age, nature of family and length of married life are pertinent to understand the dynamics of interdependent happiness and should be included in future studies.

LIMITATIONS OF THE STUDY

Like all scientific endeavours, the current study is also marred by some limitations. For instance, the selection of the sample from a limited geographical region is one limitation so results may not be generalized to other regions. Use of a small number of psychological constructs is another limitation as the inclusion of other variables like self-construal, personality and other positive psychological constructs may have helped to come up with more insightful findings. Another limitation is the use of translated versions of the scales which may have resulted in a lower alpha value of the SCS for the current sample than suggested by the pioneers of the field (Neff, 2003b; Neff et al., 2017; Neff et al., 2019). Use of only the quantitative method constitutes another limitation because of the particular constructs studied and population used.

DIRECTIONS FOR FUTURE RESEARCH

The study of interdependent happiness is in its infancy. There are many avenues for future researchers to extend their contributions to this emerging field. The construct of interdependent happiness needs further conceptualizations from different cultural perspectives to better understand its nature and correlates. Use of qualitative methods, mixed methods and large scale studies on diverse samples may be another avenue for future researchers. New tools for measuring these constructs may be developed on diverse cultural samples. Self-compassion-based interventions could be examined for their effectiveness in enhancing interdependent happiness.

ETHICAL APPROVAL

The study has been approved by the Ethics Committee of Doctor Harisingh Gour Vishwavidyalaya, Sagar, 470003, Madhya Pradesh, India.

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CONFLICT OF INTEREST

The authors declare no conflict of interest.

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