

General

The Mediating Role of Self-Compassion Between Suicidal Ideation and Gender Role in Adolescents

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The current research explored the mediating role of self-compassion between suicidal ideation and gender role in adolescents. The term “self-compassion” refers to a relatively new concept in the scientific field of positive psychology, which has demonstrated significant importance for human well-being. In this study, 814 adolescents aged 14-19 years participated. Results indicated that self-compassion levels were higher among boys compared to girls, and also that self-compassion appeared to increase with the adolescents’ age. For boys, self-compassion fully mediated the relationship between masculinity and suicidal ideation, where the direct effect was not significant, but the indirect effect was significant. For girls, self-compassion mediated the relationship between both masculinity and femininity and suicidal ideation, with significant indirect effects. These findings highlight the critical role of self-compassion as a protective factor in the context of counseling psychology, suggesting that incorporating self-compassion into preventive mental health strategies could significantly benefit adolescents facing challenges associated with gender roles and suicidal ideation.

Introduction

Adolescence is a transformative phase in human life during which individuals attain psychological and psychosocial maturity. The changes experienced during this stage render adolescents susceptible, as they strive for autonomy in decision-making and seek independence from their families. Throughout this period, adolescents acquire knowledge and skills, learn to navigate their emotions and relationships, enhance their understanding of various situations, and develop the ability to cope with experiences and embrace diverse challenges in their lives (UNICEF, 2019).

Adolescence is characterized by a notable prevalence of psychiatric disorders and a heightened risk of suicide. According to the World Health Organization (WHO), out of every 100,000 deaths, 16 are attributed to suicide (or one in 40), and by 2020, this mortality rate was anticipated to rise to one in 20. In 2016, suicide ranked as the 18th leading cause of death globally and the second leading cause of death among individuals aged 15-29 (WHO, 2019). In Greece, research by Basta et al. (2021) revealed that 1 in 13 adolescents/young adults experiences suicidal ideation.

As per O’Carroll P.W. et al. (1996), suicidal ideation encompasses thoughts of causing harm or taking one’s own life, a suicide attempt is characterized as a non-lethal, self-inflicted destructive act with the intention of causing death, and suicide is defined as a lethal, self-inflicted destructive act with the intention of ending one’s life. The term “suicidality” encompasses both suicidal ideation and suicide attempts. Suicidal behaviors encompass a spectrum, including suicidal ideation, plans related to suicide, suicide

attempts, and completed suicides (Bursztein & Apter, 2009).

Suicide stands as the second leading cause of death globally among individuals aged 10-24 years, ranking third among male adolescents in the same age group, and emerging as the primary cause among females aged 15-19 years (Hawton et al., 2012). Globally, suicide deaths constitute 8.5% of all fatalities within the age group of 15-29 years, making it a prominent cause of mortality among young people worldwide (WHO, 2017).

In a study conducted by Basta et al. (2021) involving 2765 Greek adolescents, the prevalence of suicidal ideation among young Greeks aged 15-24 years was identified at 7.8%, with 3.1% reporting such thoughts several days a week, 0.9% more than half a day a week, and 3.8% almost daily. These findings align with some, though not all, studies that report the prevalence of suicidal ideation in young adults and adolescents ranging from 2 to 25% (Blasco et al., 2019; Economou et al., 2013; Fonseca-Pedrero et al., 2018; Skapinakis et al., 2011; Voss et al., 2019; Zygo et al., 2019). When compared to the general population, the prevalence of suicidal ideation varies between 2.2% and 9.2% (Borges et al., 2010; Economou et al., 2013; Nock et al., 2008).

The concept of gender is currently intricate and has been delineated in various ways within the field of psychology. Some define it as personal characteristics linked to biology and the body, while others see it as a product of interpersonal relationships, a form of social organization, or a social ideology. Alternatively, gender has been conceptualized as an outcome of language used to describe it, the foun-

dition for the distribution of social power, or a result of learned behavior (Arcel, 2008).

Bem's cognitive social schema theory describes schemas as structures that influence how we perceive and process information, categorizing individuals based on their adherence to gender stereotypes. In her theory, Bem (1981) differentiates between schematic, who conform to gender stereotypes, and non-schematic individuals, who do not. She uses the "Gender Role Questionnaire" (BSRI) to assess this, where individuals who blend masculine and feminine traits—termed androgynous—are considered non-schematic and are seen as more adaptable due to their detachment from strict gender roles. In contrast, those who conform to traditional gender roles are labeled schematic and are restricted by these norms. Bem's later work (1983) shifts focus from androgyny to promoting a 'non-schematic' identity, advocating for a social ideal where gender does not restrict behaviors or identities, thus challenging traditional gender divisions.

Self-compassion, as articulated by Neff (2003b), entails cultivating an attitude of warmth and acceptance toward oneself during moments of pain or failure. This construct encompasses three fundamental characteristics: demonstrating kindness and understanding towards negative facets of the self; regarding individual flaws or adverse experiences as integral to the broader human experience; and practicing mindfulness, the ability to sustain conscious awareness of distressing thoughts and emotions, maintaining emotional equilibrium and tranquility even in challenging circumstances (Barnard & Curry, 2011; Neff, 2003a).

The three facets of decompensation are distinct in concept and are phenomenologically experienced in diverse ways; however, they interact and mutually reinforce each other (Neff, 2003a). Numerous studies have demonstrated that self-compassion yields a substantial array of benefits for individuals' mental health. In a systematic review encompassing 18 studies, Cleare, Gumley, and O'Connor (2019) identified no direct correlation between self-compassion and suicidal ideation. Nevertheless, an indirect relationship was observed, indicating that heightened self-compassion in individuals correlated with fewer risk factors (e.g., depressive symptoms and internalized anger), which, in turn, were linked to reduced occurrences of suicidal ideation and self-harm attempts. Despite the scarcity of research in this domain, certain studies consistently establish connections between elevated levels of self-compassion and diminished suicidal ideation. Notably, meta-analyses conducted by MacBeth and Gumley (2012) and Zessin et al. (2015) revealed links between heightened self-compassion, reduced psychopathology, and increased well-being. Regarding gender, prior research outcomes on racial variations in self-compassion are inconclusive. Numerous studies indicate that women exhibit lower levels of self-compassion than men (Neff, 2003a; Neff, Hseih, Dejithirat, 2005; Neff & McGehee, 2010; Raes, 2010; Yarnell & Neff, 2013, p. 2012), while others find no notable gender disparities (Iskender, 2009; Neff, Pisitsungkagarn, & Hseih, 2008; Neff et al., 2007; Neff & Pommier, 2013; Raque-Bogdan et al., 2011). Although potential racial distinctions in self-

compassion have not been thoroughly examined, making generalized assertions about whether men or women exhibit higher levels of self-compassion is unwarranted.

Despite previous studies exploring the relationship between gender and suicidal thoughts, this research focuses on the mediating role of self-compassion, a relatively new conceptual field in positive psychology, which offers deeper insight into protective factors that can support adolescents facing challenges associated with gender and suicidal ideation. This approach aims to bridge the gap in existing literature, highlighting the need for further research that incorporates self-compassion as a mediating factor, providing indications for how more targeted support programs can be developed.

The main purpose of this study is to examine the mediating role of self-compassion in relation to the role of gender and suicidal ideation in a sample of adolescents. Based on the main research questions, the following hypotheses have been formulated:

1. There will be a significant difference in levels of self-compassion between boys and girls, with boys expected to show higher levels of self-compassion.
2. There will be a significant difference in levels of self-compassion in relation to age, with older adolescents expected to exhibit higher levels of self-compassion compared to younger ones.
3. Self-compassion will mediate the relationship between masculinity and suicidal ideation in boys, with higher masculinity potentially associated with lower suicidal ideation through increased levels of self-compassion.
4. Self-compassion will mediate the relationship between masculinity and suicidal ideation in girls, with increased masculinity expected to enhance self-compassion and thereby reduce suicidal ideation.
5. Self-compassion will mediate the relationship between femininity and suicidal ideation in boys, with higher femininity potentially associated with lower suicidal ideation through increased levels of self-compassion.
6. Self-compassion will mediate the relationship between femininity and suicidal ideation in girls, with higher femininity expected to enhance self-compassion and thereby reduce suicidal ideation.

Methods

Participants

Our sample consisted of 814 adolescents and young people, between the ages of 14 and 19, with an average age of 17.5 years (Table 1). Of the participants, 6% (N=49) were in first grade, 7.4% (N=60) were in second grade, 20.5% (N=167) were in third grade, and 66.1% (N=538) had graduated. Also, 20.6% (N=168) of the participants were males and 79.4% (N=646) were females.

Table 1. Sample Characteristics

n=814		n (%)
Gender	Males	168 (20.6)
	Females	646 (79.4)
Age, mean (SD)		17.5 (1.0)
Grade in High School	1 st	49 (6)
	2 nd	60 (7.4)
	3 rd	167 (20.5)
	Graduated	538 (66.1)

Materials

The participants completed three questionnaires and a demographic form. The questionnaires included:

The Bem Sex-Role Inventory – BSRI (Bem, 1974), comprised 60 seven-point Likert-type scale items evaluating participants' attributes categorized as masculine (20 items), feminine (20 items), or neutral (20 items). Respondents were required to rate each trait on a scale of 1 to 7, indicating the extent to which it applied to them, ranging from "Never or almost never true for me" (1) to "Always or almost always true for me" (7). Elevated scores signified heightened masculinity or femininity. The Masculinity and Femininity scores were independent of each other. The Cronbach's alpha indices of the scale in the study were measured at 0.83 for masculinity and 0.73 for femininity.

The Suicidal Ideation Scale – SIS (Klefaras, 2012; Rudd, 1989), consisted of 3 questions on the frequency and 1 question on the severity of suicidal thoughts. Question values ranged from never (1) to all the time (5) and from not at all serious (1) to there is a specific suicide plan (5), with higher scores equating to more frequent and more serious suicidal thoughts. The score was produced by summing all 4 questions, in a way that a higher score indicated greater suicidal ideation. The Cronbach's alpha of the scale was 0.87.

The Self-compassion Scale (Karakasidou et al., 2017; Neff, 2003b) consisted of measures of self-kindness, self-judgment, common humanity, isolation, mindfulness, and over-identification. The scale included 26 questions about the frequency of behaviors related to self-compassion, ranging from almost never (1) to almost always (5). The overall Cronbach's alpha of the self-compassion scale was 0.90. For its subscales, the internal consistency coefficients were 0.75 for self-kindness, 0.72 for self-judgment, 0.73 for common humanity, 0.73 for isolation, 0.70 for mindfulness, and 0.70 for over-identification.

Procedure

Due to the constraints imposed by the COVID-19 pandemic, the questionnaire was administered electronically, and data were collected digitally over a three-month period from September 2021 to November 2021. Participation in the study was voluntary, anonymous, and confidential, with no compensation provided to participants. All research activities were conducted in strict accordance with ethical

principles, including informed consent, confidentiality, and the right to withdraw without penalty. The study procedures were designed to ensure the utmost respect for participant welfare and data integrity, adhering to the highest standards of ethical research practice as recommended by the British Psychological Society (BPS) code of conduct (2014).

Data Curation and Statistical Procedures Used

Quantitative variables were expressed as mean values (SD) while qualitative variables were expressed as absolute and relative frequencies. Independent samples Student's t-tests were used to compare mean values between males and females. The Independent samples t-test is a statistical procedure that compares the mean value of a quantitative variable between two independent groups. This test has two assumptions: normality of distribution of the quantitative variable and equality of variances between the two groups, both of which were checked accordingly in our study. Pearson correlation coefficients (r) were used to explore the association of two continuous variables. For the investigation of the mediating role of self-compassion in the association between gender identity and suicidal ideation, the SPSS PROCESS macro was used following Hayes' guidelines (2013). A 5000-sample bootstrap procedure was used to estimate bias-corrected 95% confidence intervals (CIs) to test the significance of indirect effects of the relationships. Mediation is presented when the indirect effect is significant, i.e., if confidence intervals do not contain zero. Full mediation is presented when the direct effect is not significant, while partial mediation is presented when the direct effect is significant. All reported p values are two-tailed. Statistical significance was set at $p < 0.05$, and analyses were conducted using SPSS statistical software (version 26.0).

Results

Descriptive measures for BSRI, SIS and Self-Compassion scales are provided in [table 2](#), for total sample and by gender. Total Self-Compassion score was significantly greater in males. More specifically, scores in Isolation, Mindfulness and Over-identified subscales differed significantly between genders, with greater compassion found in males. Suicidal Ideation was similar in both genders. Masculinity was significantly greater in males, while femininity was significantly greater in females.

In both male and female participants, greater self-compassion was significantly associated with lower Suicidal Ideation ([Table 3](#)). Also, greater self-compassion was significantly associated with greater Femininity and Masculinity in both genders. Masculinity was negatively associated with Suicidal Ideation in both genders, while femininity was negatively associated with Suicidal Ideation only in female participants.

In male participants it was found that there was a significant total effect of masculinity on suicidal ideation, while the direct effect was not significant and the indirect effect was significant ([Table 4](#)). Thus, it can be concluded that in male participants *Self-Compassion fully mediate the relation-*

Table 2. Descriptive Measures For BSRI, SIS And Self-Compassion Scales for total sample and by gender

	# items	Total sample		Males		Females		t (df)
		Mean	SD	Mean	SD	Mean	SD	
SuicidalIdeationScale	4	6.41	3.54	6.37	3.35	6.42	3.59	-0.17 (812)
Self-Kindness	5	14.87	4.15	14.60	3.92	14.94	4.21	-0.95 (812)
Self-Judgment	5	17.40	4.01	17.27	3.50	17.43	4.13	-0.45 (812)
Common Humanity	4	15.80	3.67	15.93	4.10	15.77	3.56	0.52 (812)
Isolation	4	13.18	3.97	12.47	3.95	13.36	3.96	-2.60 (812)**
Mindfulness	4	12.44	3.32	13.15	3.17	12.26	3.34	3.12 (812)**
Over-identified	4	14.77	3.41	13.69	3.57	15.06	3.32	-4.68 (812)***
Total self-compassionscore	26	71.78	16.56	74.45	15.65	71.08	16.73	2.36 (812)*
Masculinity	20	4.27	0.81	4.61	0.83	4.19	0.78	6.12 (812)***
Femininity	20	4.84	0.61	4.63	0.59	4.90	0.61	-5.01 (812)***

*p<.05; **p<.01; ***p<.001

Table 3. Pearson's Correlation Coefficients (r) Among BSRI, SIS And Self-Compassion Scales For Male And Female Participants Separately

	Males			Females		
	SuicidalIdeationScale	Femininity	Masculinity	SuicidalIdeationScale	Femininity	Masculinity
Self-Kindness	-.35**	.31***	.18*	-.37***	.24***	.09*
Self-Judgment	.31***	-.04	-.11	.39***	-.09*	-.03
Common Humanity	-.29***	.41***	.61***	-.27***	.31***	.52***
Isolation	.29***	-.10	-.31***	.35***	.02	-.17***
Mindfulness	-.28***	.19*	.29***	-.26***	.15***	.18***
Over-identified	.29***	-.05	-.28***	.23***	.04	-.14***
Total self-compassionscore	-.43***	.24**	.33***	-.42***	.14***	.16***
Masculinity	-.15*	.23**		-.12**	.04	
Femininity	-.11			-.15***		

*p<.05; **p<.01; ***p<.001

Table 4. Total, Direct, And Indirect Effects Of Masculinity And Femininity On Suicidal Ideation Through Self-Compassion

Gender	Independent on Dependentvariable		β^+	SE	LLCI	ULCI
Males	Masculinity on Suicidalideation	Total effect	-0.617*	0.310	-1.229	-0.004
		Direct effect	-0.055	0.302	-0.652	0.542
		Indirect effect	-0.561	0.180	-0.953	-0.246
	Femininity on Suicidalideation	Total effect	-0.632	0.438	-1.496	0.232
		Direct effect	-0.079	0.411	-0.890	0.733
		Indirect effect	-0.554	0.200	-0.947	-0.163
Females	Masculinity on Suicidalideation	Total effect	-0.568**	0.181	-0.922	-0.213
		Direct effect	-0.255	0.167	-0.583	0.073
		Indirect effect	-0.323	0.086	-0.484	-0.147
	Femininity on Suicidalideation	Total effect	-0.892***	0.231	-1.345	-0.439
		Direct effect	-0.559**	0.212	-0.977	-0.142
		Indirect effect	-0.333	0.101	-0.540	-0.141

Note. Significant indirect effects are marked in bold. Confidence intervals for the indirect effects that appear in brackets are based on 5,000 bootstrap samples.

* $p < .050$. ** $p < .010$. *** $p < .001$

+unstandardized regression coefficients adjusted for age; SE: Standard Error; LLCI: Lower Limit of Confidence Interval; ULCI: Upper Limit of Confidence Interval

ship between masculinity and suicidal ideation. Moreover, in male participants femininity had insignificant total and direct effect on suicidal ideation, indicating that there is no need for examining the mediation of Self-Compassion between these characteristics.

In female participants, it was found that there was a significant total effect of masculinity on suicidal ideation, while the direct effect and the indirect effect were not significant, indicating the presence of full mediation role of *Self-Compassion between the association of masculinity and suicidal ideation*. Also, in female participants femininity had significant total and direct effect on suicidal ideation and there was also present a significant indirect effect, indicating that *Self-Compassion partially mediate the relationship between femininity and suicidal ideation*.

Discussion

The main purpose of the present study is to examine the mediating role of self-compassion in relation to the role of gender and suicidal ideation in a sample of adolescents.

The survey results affirmed our initial hypothesis, revealing higher self-compassion levels in boys compared to girls. This contributes to the ongoing discourse on the link between self-compassion and gender. Previous studies have supported higher self-compassion in males, attributing it to societal norms and women's tendencies toward self-criticism and lower self-esteem. Conversely, some research posits that men, adhering to masculine norms, may exhibit lower self-compassion due to socialization emphasizing emotional restraint. Notably, a recent Greek study by Karakasidou, Raftopoulou & Stalikas (2020) aligns with our findings, indicating higher self-compassion levels in women. However, it's crucial to acknowledge the limited research on self-compassion in children and adolescents, with existing studies mostly focusing on adults. Studies exclusively examining adolescents' self-compassion levels

corroborate our current findings (Bluth et al., 2016; Bluth & Blanton, 2013).

Our results affirm the second hypothesis, revealing a positive correlation between age and self-compassion. This concurs with previous studies (Hwang et al., 2016; Karakasidou et al., 2020), which also observed an increase in self-compassion with age. Notably, these studies covered a broader age spectrum and were not exclusively focused on adolescence. While no studies have specifically explored age-related changes in self-compassion within adolescents, our research aligns with the broader literature, suggesting that self-compassion tends to rise as individuals mature.

The third hypothesis, which proposed a mediating role of self-compassion in the relationship between masculinity and suicidal ideation in boys, has found unexpected support in our study. Contrary to our initial findings, further analysis revealed that masculinity in boys does indeed serve as a significant predictor of suicidal ideation, mediated by self-compassion. This indicates that higher levels of adherence to certain masculine norms may contribute to an increased risk of suicidal behaviors in boys, potentially through mechanisms that involve distressing and challenging behaviors heightening their vulnerability to suicide (Granato et al., 2015). This nuanced relationship suggests that while not all aspects of masculinity are associated with suicidal ideation, certain expressions of masculinity, particularly those that diminish self-compassion, can significantly influence the propensity for suicidal thoughts in boys.

The discovery of this mediation underscores the importance of considering how different dimensions of masculinity can impact mental health outcomes in males. Specifically, it highlights how diminished self-compassion in the context of conforming to certain masculine norms can lead to higher rates of suicidal ideation (Pirkis et al., 2017b; Milner et al., 2018). The identification of self-compassion as a mediating factor offers a new perspective on the pathways

through which masculinity influences suicidal ideation, suggesting that interventions aimed at enhancing self-compassion could be particularly beneficial for boys. This aligns with the growing acknowledgment of the need to recognize the diversity within masculinity and to move beyond simplistic portrayals for effective interventions. By promoting a more nuanced understanding of masculinity and focusing on the enhancement of self-compassion, we can contribute to the improved well-being of boys and reduce their risk of suicidal ideation (Fine et al., 2019; Jewkes et al., 2015a).

The subsequent research hypothesis, although not previously explored in the literature, finds support in our study, indicating that self-compassion mediates the relationship between masculinity and suicidal ideation in girls. The positive prediction of self-compassion by masculinity suggests that an increase in masculinity corresponds to an increase in self-compassion. Tatum (2012) suggests that qualities of independence and self-focus inherent in masculinity contribute to its close association with self-compassion. This aligns with Neff et al. (2008), who emphasize the connection between autonomy and self-compassion, asserting that individuals embodying masculine ideals are more likely to cultivate elevated levels of self-compassion due to the values of independence and self-concentration embedded in traditional masculine gender identity.

Furthermore, self-compassion is shown to negatively predict suicidal ideation, indicating that an increase in self-compassion corresponds to a decrease in suicidal ideation. While a systematic review by Cleare, Gumley, and O'Connor (2019) did not establish a direct relationship between self-compassion and suicidal ideation, it revealed an indirect relationship. This suggests that heightened self-compassion is linked to fewer risk factors (e.g., depressive symptoms and internalized anger), which, in turn, are associated with reduced suicidal ideation and self-harm attempts. Despite limited research, certain studies consistently report associations between higher self-compassion and lower levels of suicidal ideation, as indicated by meta-analyses (MacBeth & Gumley, 2012; Zessin et al., 2015).

Moreover, it is noteworthy that masculinity in girls can have a negative predictive effect on suicidal ideation. As masculinity increases in girls, there is a corresponding decrease in suicidal ideation. Canetto (2015) suggests that 'suicide attempts' are perceived as more 'weak' and feminine behaviors, while 'completed' suicides are associated with greater strength and masculinity. Cultural expectations aligned with each gender contribute to these perceptions. Coleman, Kaplan, and Casey (2011) highlight that elevated levels of traditional masculinity, characterized by an emphasis on winning, independence, avoidance of emotion, and a predisposition toward anger and violence, create a cognitive rigidity context associated with a higher risk of suicidal behaviors and death. Positive dimensions of masculinity serve as a protective factor against suicidal ideation and suicide, supporting findings that link traditional masculinity to an increased likelihood of mental health issues (Coleman, 2015).

The subsequent research hypothesis is not supported, as self-compassion does not appear to mediate the relationship between femininity and suicidal ideation in boys. Specifically, femininity in boys does not emerge as a predictor of suicidal ideation. Boys may be less inclined to express their concerns and seek help, deeming these behaviors as more 'feminine,' and, consequently, they tend to exhibit more masculine behaviors (Rhodes et al., 2014a). Previous research has indicated that more 'feminine' men, characterized by expressive communication and lower assertiveness, show increased suicidal ideation and are at a higher risk of self-harm (Street & Kromrey, 1995). Nevertheless, in accordance with earlier research findings, it is observed that, similar to their non-conformity to 'traditional' masculinity, boys in the sample also lack conformity to 'traditional' femininity, suggesting that their gender role is not linked to suicidal ideation.

To conclude, the last hypothesis appears to be confirmed. Specifically, self-compassion seems to play a mediating role in the relationship between femininity and suicidal ideation in girls. Reflecting on previous research, we note that femininity positively predicts self-compassion, indicating that an increase in femininity corresponds to an increase in self-compassion. Neff's work (Neff, 2003a) responds to these findings by suggesting that individuals with high levels of self-compassion are more likely to report being equally kind to themselves as they are to others around them. In contrast, individuals with lower levels of self-compassion are more likely to report an imbalance in this area. Neff's research concludes that both women and men strongly characterized by traditional gender values are prone to exhibit low levels of self-compassion, albeit for different reasons.

Specifically, individuals who identify with more traditional roles of femininity, prioritizing relationships with others over themselves, are inclined to display low levels of self-compassion due to increased self-criticism and less kindness towards themselves. On the other hand, individuals who align with more traditional masculinity roles, prioritizing self over relationships with others, are also likely to exhibit low levels of self-compassion, driven by increased isolation and lower levels of shared humanity. On the flipside, individuals—both men and women—who report less identification with traditional gender characteristics and seem liberated from limiting values restricting them to focus solely on themselves or others (O'Neil, 2008), are more prone to display higher levels of self-compassion.

Furthermore, as previously mentioned, there seems to be a negative predictive relationship between self-compassion and suicidal ideation in women. Ultimately, the evidence suggests that femininity in women may also serve as a negative predictor for suicidal ideation, indicating that an increase in femininity corresponds to a decrease in suicidal ideation.

In her comprehensive research on gender roles, Bem identified feminine traits as qualities stereotypically associated with the female gender, including warmth, gullibility, kindness, and more (Donnelly & Twenge, 2016). As highlighted earlier, women appear to undergo distinct social-

ization, prioritizing relationships with others over self-focus. It is precisely these characteristics of warmth, concern, and caring—referred to as the ‘positive signs of femininity’—that seem to exert a protective influence against suicidal ideation in women (Pesta & Peralta, 2021).

Limitations and Future Research Directions

While the originality of this research contributes significantly to the scientific community, it is crucial to acknowledge certain limitations. Firstly, despite the substantial sample size (N=814), the survey’s results face challenges in generalization due to an uneven distribution of boys and girls in the sample. Additionally, the research data exclusively originated from the Greek population, necessitating caution in extending the findings to diverse populations without comprehensive investigation and adaptation to the specific demographics. A fundamental limitation lies in the use of self-assessment questionnaires, completed at the participants’ discretion, raising concerns about their reliability and the potential subjectivity in responses. Furthermore, conducting the survey during the COVID-19 pandemic introduces an additional layer of complexity, impacting the generalizability of results to the post-pandemic era. It is advisable to reassess hypotheses to mitigate the potential adverse effects of the pandemic on the study’s outcomes.

Acknowledging the limitations of this research, several avenues for future exploration can be suggested. To enhance generalizability, future surveys could strive for a more balanced distribution of participants between boys and girls. Moreover, exploring the mediating role of self-compassion in relation to other variables influencing adolescents’ lives, such as anxiety and depression, presents a promising direction for further investigation.

Furthermore, although this study focuses on gender roles and not sexual orientation, it prompts reflection on the potential impact of stereotypical gender perceptions on individuals within the LGBTQ+ community. Given that gay men are often labeled as more ‘feminine’ and gay women as more ‘masculine,’ intervention programs should be tailored to address the unique needs of LGBTQ+ adolescents. Such initiatives can play a crucial role in fostering self-compassion and acceptance of diverse gender characteristics, offering valuable support to adolescents in the LGBTQ+ community.

Implications

The findings of this research underscore the vital role of self-compassion in adolescents’ mental well-being and its potential as a mediator in the relationship between gender roles and suicidal ideation. Recognizing this, it becomes

imperative to integrate self-compassion education into the curriculum for children and adolescents. Developing programs specifically designed to instill self-compassion skills in young individuals could empower them to navigate life’s challenges more effectively, promoting mental health resilience.

Additionally, this research highlights the necessity for educational programs aimed at adolescents that focus on fostering an understanding of the positive values associated with each gender. By highlighting the positive aspects of masculinity, such as assertiveness and self-confidence, and femininity, such as sensitivity and patience, educational initiatives can steer away from traditional and stereotypical gender norms that contribute to psychological challenges. Such programs are essential not only for mitigating biases associated with gender roles but also for enhancing the overall well-being of adolescents.

By deviating from stereotypical gender values and promoting a balanced view of gender traits, these educational programs have the potential to positively impact adolescents’ mental health. This approach could lead to a more nuanced understanding among young individuals that all traits, regardless of being traditionally masculine or feminine, have valuable contributions to personal development and societal interaction.

Furthermore, the implications of this research extend into counseling psychology, where therapeutic approaches that incorporate self-compassion training can address issues related to gender identity and associated challenges. Counseling psychologists should consider integrating mindfulness-based practices such as Mindfulness-Based Stress Reduction (MBSR) and Mindfulness-Based Cognitive Therapy (MBCT) into their therapeutic practices. These interventions help individuals develop a more compassionate and nonjudgmental understanding of themselves, which is crucial for those struggling with the psychological distress associated with rigid gender norms.

Counseling psychologists can also deconstruct harmful gender stereotypes and promote a more flexible understanding of gender roles in therapy. By encouraging clients to explore and express a full range of masculine and feminine traits, therapists can help alleviate the distress associated with strict gender conformity. Additionally, integrating self-compassion into group therapy settings can provide a supportive environment where adolescents learn from peers’ experiences, enhancing their self-compassion through shared narratives and group exercises focused on empathy and acceptance.

Ultimately, these implications suggest that both educational and therapeutic settings should focus on fostering self-compassion and a balanced understanding of gender roles to improve the mental health outcomes of adolescents.

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