



## Self-Compassion and Loneliness in Pakistani University Students: Gender and Geographical Differences

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### Abstract

Loneliness is recognised a serious health concern worldwide because of its significant negative impact on mental and physical health. Loneliness is the struggle between desired and actual social ties. It's a negative emotional feeling experienced as a consequence of social isolation. This study is designed to explore the role as self-compassion as of loneliness within university students in Pakistan. Along this, to find out differences in both genders and urban settings. Utilizing cross-sectional research design the data is collected from 153 participants who are recruited through convenient sampling. they completed the Self-Compassion Scale Short Form and the UCLA Loneliness Revised Scale to assess levels of self-compassion and loneliness, respectively. The data is analysed using SPSS 30.0, analysis including pearson correlation and regression analyse. The findings indicated a significant negative correlation between self-compassion and loneliness. The results also shows that self-compassion levels were higher among students from rural areas. The study draw attention to the potential value of incorporating self-compassion training into university-based interventions aimed at reducing loneliness. It also contributes to the literature within the South Asian particularly Pakistani context and highlights the need for further exploration about how self-compassion interacts with diverse sociocultural factors in shaping experiences of loneliness.

**Keywords:** Self-Compassion, Loneliness, University Students

### Introduction

In recent decades, there has been major concern among scholars, health professionals, and public health experts globally regarding mental health problems in emerging adulthood. From served mental health issues, loneliness has become one of the most persuasive issues facing modern society and particularly affects college students during the important stage of their lives. The age of going through major transitions related to developing their identities, forming their relationships, and becoming independent (WHO, 2025; Santini et al., 2020).

Loneliness is a painful and extremely subjective emotion, which arise out of an individual's assessments about their relationships including both, quantity and quality (Cooper et al., 2021). Loneliness has many negative physical and psychological consequences. An increasing body of literature supports the association of increased rates of depressive disorders, anxiety disorders, cardiovascular disease, immune system dysregulation, and rised the liklihood of premature death with loneliness (Holt-Lunstad et al, 2017; World Health Organization, 2025). The most recent

world data on Social Connection from WHO Commission indicate that approximately one out of six people (15%) experiences loneliness, with the highest prevalence rates among adolescents and young adults between the ages of 13-29 years (17%-21% for young adults; highest for adolescents), and with particularly high prevalence rates in developing countries (WHO, 2025). University students represent a vulnerable population as they are still forming their self-concept, peer affiliation, and trying to figure out their uncertain futures.

Collectivist cultural contexts for instance Pakistan, where interpersonal harmony, extended family structures, and established communities are considered as protective factors. However these protective factors increasingly being eroded due to socioeconomic changes like, increased urbanization, digital engagement, changing relational expectations, and increased demands for academics (Khan et al, 2020; Loades et al, 2020). Besides during the COVID-19 pandemic and post-pandemic, a significant increase in loneliness and related distress is emerged. The various lockdowns attributed to COVID-19, evidence showing long-term effects from COVID-19 regarding individuals' experiences transitioning back to life outside lockdown (Khan et al, 2020; Beam & Kim, 2020). One thing that seems to enhance one's vulnerability of loneliness is intrapersonal vulnerability for example low self-compassion, and unstable sense of self, which impacts the perception about support of others as feelings of inadequacy (Neff & Germer, 2017). Self-Compassion is defined as the triad of self-kindness vs harsh self-judgment, common humanity vs isolation, and mindfulness vs over identification (Neff (2003). Self-compassion is viewed as a major intrapersonal resource. It allows an individual to treat oneself with kindness instead of harsh self-judgment, to normalize the struggle and failure as human experience, and accepting the pain instead of overly generalising it. This may lead to promote prosocial interactions with others, so, self-compassion would appear to counteract feelings of loneliness by enhancing emotional regulation and promoting a sense of openness with people (Wischnmann, 2022; Zessin et al, 2015). Many researches show that self-compassion and loneliness are negatively correlated, particularly among those living in Western cultures. Studies assessing the importance of self-compassion show that individuals experience less isolation if they learn about self-regulation (Akin, 2010; Neff & Germer, 2018).

Most of this research has been conducted using Western, individualistic frameworks; hence, there is limited research about collectivist cultures framework. A culture that has more sense of interconnectedness, and the social norms and cultural values emphasize group harmony over individual expression which may hinder the expression of true emotions and thoughts openly. As a result, individuals may hold back their emotions and feelings due to the fear of embarrassment and shame. (Lykes & Kemmelmeier, 2014).

the association in self-compassion and loneliness might not be the same **demographically** and contextually. Gender difference is reported in literature in both variables as Females tend to report higher level of loneliness than male. Women are socialized to put greater emphasis on social connect and are more affected by changing these connections (Pinquart & Sörensen, 2001; Khan et al., 2020). Loneliness is established to be greater in urban locations as compared to rural locations. In urban zones, more people tend to compare themselves to one another, have greater reliance on digital forms of communication, and experience greater amounts of competition compared to people residing in rural zones. Conversely, families and communities in rural parts tend to equip with a greater capacity to be supportive of individuals (Hawkley & Cacioppo, 2010; Khan et al., 2020).

Despite these insights, very few researchers in South Asia especially in Pakistan have studied these two concepts especially as a combination of loneliness and self-compassion. Additionally, researchers typically look at self-compassion and loneliness separately, and have not examined

how these two factors are affected respectively by gender and living in an urban versus rural location. This highlights a significant gap in the field of psychology and psychological research

The purpose of this research is to bridge this gap by examining the connection in self-compassion and loneliness among Pakistani university undergraduates. Our hypothesis is that participants with greater levels of self-compassion demonstrate to a lesser extent loneliness; additionally, to identify differences in gender and rural/urban residence. The results from this study are aimed to expand our understanding about self-compassion theory and to enhance the limited amount of empirical research available in the context of South Asia; these results will provide insight and support the future development of culturally sensitive programs to enhance mental health in young adults in Pakistan.

Keeping in view the above discussion, following hypotheses are designed

- Self-compassion will negatively predict loneliness among Pakistani university students.
- There will be significant gender differences in self-compassion and loneliness.
- There would be significant differences in self-compassion and loneliness between rural and urban participants.

### **Method**

The present research is a cross-sectional correlational research design, which investigates the link among self-compassion and loneliness in Pakistani university students. It further explores the difference in two strong demographic variables, gender and rural/urban location.

### **Participants**

The sample of 153 university students, were recruited through purposive sampling from both public and private universities in both rural and urban areas of Pakistan to capture sociocultural diversity. The sample included both genders and comprised of undergraduate and postgraduate level students. The participants were selected if they were enrolled in a university and age within the emerging adulthood range (18–30 years). This age group is considered as personal development during which an individual from their identity become more self-aware, and are more vulnerable to social and academic stressors (Erikson, 1968; Cooper et al., 2021).

Sample size was determined using a rule-of-thumb guideline for this analyses (Klein, 1994), recommending a minimal participant to variable ratio of 10:1 (with at least 150 participants for reliable regression results). This  $N = 153$  provided adequate statistical power for correlational and simple linear regression analyses, as well as group comparisons.

### **Measures**

**Self-Compassion.** The Self Compassion Scale- Short Form (SCS-SF) is a self-report questionnaire, consist of 12-item, developed by Raes and colleagues in 2011. SCS-SF has six subscales like the primary scale consist of 26-item by Neff (2003). Social Compassion Scale-Short Form measure on 5-point Likert-type scale (1 = Almost Never to 5 = Almost Always). A total score is computed after reverse-scoring negative items, higher the scores, greater the self-compassion. Raes and his fellows (2011) reported internal consistency ( $\alpha = .86-.90$  across samples) and strong convergence with the original scale ( $r \geq .97$ ) which are adequate.

**Loneliness.** The UCLA Loneliness Scale Version 3 by Russell, (1996) is a self-report questionnaire consisted of 20-item which measures feelings of loneliness and social isolation. The participants are supposed to rate each item on a 4-point Likert-type scale (1 = Never to 4 = Often), higher the total scores, greater the loneliness. The internal consistency of the scale is reported  $\alpha = .89-.94$  by Russell, 1996.

**Demographic information:** it was collected was collected use demographic sheet including, age, gender, education level, and location, rural/urban.

## Procedure

The data was collected in single wave, following the ethical approval from the Institutional Review Board of the Department of Psychology, National University of Medical Sciences. The consent form following standrised questionnaires were shared with participants in both, online and paper pencil formate.

To encourage honest response, standardized instructions were provided to the participants with assurece that data would be used solely for research purposes. The study adhered with American Psychological Association ethical standards (APA, 2020).

## Results

Before conduction off main analysis, data was cleaned for missing values, outliers, and statistical assumptions, using SPSS Version 20. There were not any substantial violations in data set so descriptive statistics, Pearson correlations, simple linear regression, and independent-samples t-tests were calculated to examine associations and group differences. A significance of  $p < .05$  (two-tailed) werwe used for analysis.

### Sample Characteristics

The final sample consist of 153 university students aged 18–30 years in this study. The sample include primarily female (91.5%,  $n = 140$ ) and undergraduate (88.9%,  $n = 136$ ). Participants were almost equally distributed by geographical location (rural: 52.3%,  $n = 80$ ; urban: 47.7%,  $n = 73$ ). Most participants were aged 18–22 years, (63.4%,  $n = 97$ ) following by age 22–26 (3%,  $n = 51$ ), and very small number of age 26-30 (3.3%,  $n = 5$ ). The detail of full demographic in presented in Table 1

**Table 1:** Demographic Profile of the Sample (N=153)

Variables		f	%
Age	18-22	97	63.4
	22-26	51	33.3
	26-30	5	3.3
Gender	Female	140	91.5
	Male	13	8.5
Education	UG	136	88.9
	PG	17	11.1
Location	Rural	80	52.3
	Urban	73	47.7

Note, UG=undergraduate, PG=postgraduate

The Table 2 presented the descriptive statistic and means value of self-compassion  $M = 3.12$  ( $SD = 0.66$ ) and loneliness  $M = 47.06$  ( $SD = 10.25$ ). The loneliness score was higher than typically reported by the studies for university student the cut of score is  $<43$  (Russell, 1996). On the other hand, the self-compassion scores were aligned, commonly reported in student samples (Raes et al., 2011).

**Table 2:** Descriptive Statistics of Study Variables (N=153)

Variables	Mean	Std.Deviation
Self-Compassion	3.1182	.66134
Loneliness	47.0588	10.24839

The Pearson correlation values show a significant negative correlation between self-compassion and loneliness,  $r(151) = -.552, p < .001$ . This indicates that higher self-compassion was associated with lower perceived loneliness. See Table 3.

**Table 3:** Correlation Between Research Variable

Variable	1	2
1. Self Compassion	—	-.552**
2. Loneliness	-.552**	—

Note;  $p < .01$  (two-tailed) \*  $p < .05$ . \*\*  $p < .01$

The simple linear regression was calculated to examine whether self-compassion predicted loneliness. The model was statistically significant,  $F(1, 151) = 66.35, p < .001$ , with self-compassion, explaining 30.5% variance in loneliness ( $R^2 = .305$ , adjusted  $R^2 = .301$ ). The self-compassion is a significant negative protector of loneliness ( $B = -8.56, SE = 1.05, \beta = -.552, p < .001$ ). The values indicated for each 1-unit increase in self-compassion, loneliness decreased by approximately 8.56 points. See Table 4 for regression coefficients.

**Table 4:** Regression Analysis of loneliness and Self Compassion (N=153)

Variable	B	SE	$\beta$
Constant	73.74	3.351	—
Self-Compassion	-8.559	1.051	-.552
$R^2$	.305		

Note;  $p < .001, R^2 =$  Proportion of variance explained, B=Unstandardized Coefficient

**Gender.** Independent-samples t-tests revealed no significant gender differences in self-compassion,  $t(151) = -0.02, p = .984$ , Cohen's  $d = 0.03$  and loneliness,  $t(151) = 0.59, p = .556$ , Cohen's  $d = 0.16$ . Means were comparable across genders.

**Location (Rural vs. Urban).** Rural participants reported significantly higher self-compassion ( $M = 3.23, SD = 0.66$ ) than urban participants ( $M = 2.98, SD = 0.63$ ),  $t(151) = 2.37, p = .019$ , Cohen's  $d = 0.38$  (small effect). No significant geographical difference emerged for loneliness,  $t(151) = -1.18, p = .239$ , Cohen's  $d = 0.19$  (see Table 5).

**Education Level (Undergraduate vs. Postgraduate).** No significant differences were found for self-compassion,  $t(151) = -0.53, p = .599$ , Cohen's  $d = 0.05$ , or loneliness,  $t(151) = 0.63, p = .531$ , Cohen's  $d = 0.17$  (see Table 8; note: Table 5 in original appears misnumbered—integrated here).

**Table 5:** Independent Sample t-test between Location and Study Variables

Variables	Rural		Urban		t(df)	p	Cohen's d
	M	SD	M	SD			
Self-Compassion	3.23	.66	2.98	.63	2.37	.019	.38
Loneliness	46.12	10.04	48.08	10.44	-1.18	.239	.19

Overall, self-compassion emerged as a robust negative predictor of loneliness, with modest rural advantages in self-compassion but no gender or education-level effects.

### Discussion

The present findings provide empirical support for the hypothesized inverse connection in self-compassion and loneliness among Pakistani university students. Consistent with expectations, self-compassion was negatively correlated with feelings of loneliness and emerged a significant negative predictor of loneliness. These outcomes are in line with theories and previous literature supporting self-compassion as an intrapersonal resource, which acts as a buffer against the subjective distress caused by perceived disconnectedness (Neff, 2003; Neff, & Germer, 2018). The cultivation of self-kindness, a sense of belonging to the humanity, and mindfulness has been shown to help individuals cope with the subjective distress experienced when perceiving themselves to be socially disconnected, reducing their risk for loneliness (Zessin et al., 2015). These findings are not limited to Western populations but also apply to the South Asian context, where people traditionally rely on close family and community relationships. However, social changes associated with modernization, like urbanization, changing family structures, and increased individualism, may be weakening this cultural support networks which make self-compassion an important protecting factor against loneliness. (Lykes & Kemmelmeier, 2014).

The absence of significant difference between men and women in self-compassion and loneliness varies from findings reported in international literature which revealed modest gender differences, with women typically being found to have lesser levels of self-compassion and greater levels of loneliness than men (Pinquart & Sörensen, 2001; Yarnell et al., 2019). The nonexistence of significant differences in the findings of this research might reflect changing cultural norms for educated Pakistani youth, including increased awareness of mental health issues and changing roles for both males and females within an educational setting. Recent South Asia studies have also shown mix patterns of gender differences in loneliness, however, these differences are typically contextual for instance, the report of GSHS (WHO, 2025) revealed in some studies high prevalences of loneliness in girls than by boys, but this pattern was less evident in other studies.

The fact that a small significant difference in self-compassion in the two groups indicates that contemporary rural social networks and limited exposure to urban comparisons and digital pressures results in greater levels of self-compassion and resiliency within the rural students than the students in the urban area, although there were no significant differences in the levels of loneliness between the participants in the two groups. There was also no statistically significant difference between the undergraduate and postgraduate students with regards to self-compassion and loneliness, which suggests that throughout the course of their education self-compassion and

loneliness will be similar for undergraduate students and postgraduate students in the current context.

The study findings illustrate the worth of framing self-compassion and loneliness within sociocultural contexts. In Pakistan, where collectivism emphasizes family and community, loneliness may result from quality of relationships, instead of actual number of relations. Self-compassion may be a way of working through the experience of feeling inadequate by helping individuals to understand that this a common human emotion at some time (Neff, 2003). the moderate levels of loneliness may be due to the transition phase of university student, developing new identities and readjusting to life (Russell, 1996). This research adds in new knowledge by providing evidence of the positive relationship between self-compassion and reducing loneliness in Pakistani university settings. These findings further support that implementing self-compassion-based initiatives into university student mental health support systems will be helpful for their mental health (Neff & Germer, 2018). These differing levels of loneliness suggest the need for context specific approaches to improve the mental health of Pakistani university students. More specifically, urban university campuses should focus on developing programs to combat digital overload and provide opportunities for students to engage in meaningful face-to-face interactions; while rural campuses should focus on enhancing existing community connections and utilize existing local social structures. These recommendations are aligned with global development priorities, especially the Sustainable Development Goal 3 (Good Health and Well-Being), Goal 4 (Quality Education), and Goal 10 (Reduced Inequalities). Overall, these findings provide the foundation for creating culturally relevant policies regarding mental wellness and supports for students and young adults.

This study was designed with great care however there are some limitations which demand careful interpreting these results. Firstly, the cross-sectional design does not allow for causation, so, longitudinal studies are recommended to assess how self-compassion affects loneliness over time. Secondly then purposive sampling limit generalizability. Future research should focus on probability sampling across diverse demographics, including adolescents and working adults. Thirdly, self-report measures may be influenced by social desirability biases since there may be some stigma attached to disclosing emotions culturally, so multiple methods such as qualitative interviews should be incorporated to develop a better understanding. Fourthly, limited demographics are included in current study, if more factors are added such as socioeconomic status, media exposure, and family structure may further explore the phenomena.

In short, even though this study has some limitation, it advances knowledge of self-compassion as a buffering factor against loneliness in Pakistani university students. Keeping in view these findings future investigations should explore mediating mechanisms and intervention efficacy to further inform evidence-based mental health promotion in educational settings.

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