

Mahsa GAMASAE

Department of Psychology, Khazar University, Baku, Azerbaijan
E-mail: mahsa.gama76@gmail.com
ORCID ID: 0000-0003-0562-0279

Murat YILDIRIM

Department of Psychology, Faculty of Science and Letters, Agri Ibrahim Cecen University,
Ağrı, Türkiye
Psychology Research Center, Khazar University, Baku, Azerbaijan
E-mail: muratyildirim@agri.edu.tr

**THE MEDIATING ROLE OF COMPASSION IN THE RELATIONSHIP BETWEEN
SOCIAL SUPPORT AND HAPPINESS MINDSET AMONG STUDENTS IN AZERBAIJAN**

Abstract

Both external and internal factors contribute to happiness, and few studies have looked at their interaction effects on the belief that happiness is changeable. Explaining inconsistent findings, particularly when social support can be both beneficial and harmful to well-being, is theoretically important. This study sought to establish how perceived support from family, friends, and significant others is associated with a happy attitude among university students, with compassion as a mediator, using a cross-sectional correlational study with a bootstrapping mediation analysis approach. It had 154 participants, with 75.3% females and 24.7% males, and used the Multidimensional Scale of Perceived Social Support, Compassion Scale, and Happiness Mindset scale. The results of correlation analysis indicated that happiness was positively correlated with compassion–indifference and negatively correlated with social support from significant others and family. Structural equation modeling showed a significant positive relationship between social support and compassion ($\beta = .54$, $p < .001$), yet compassion was not found to predict happiness ($\beta = -.02$, $p = .856$). A small negative direct relationship was found between social support and happiness ($\beta = -.21$, $p = .034$), implying that increased reliance on social ties could be linked to reduced autonomy or self-efficacy. The study revealed that married participants received higher levels of friend support, while employed individuals demonstrated greater levels of compassionate mindfulness. It seems that supportive relationships can foster compassion, but this does not automatically lead to more firmly held beliefs about the flexibility of happiness. The link between social support and a negative happiness mindset suggests that overreliance on others can erode autonomy; therefore, it's essential to balance social relationships with environments that foster independence, especially in university settings, and to design interventions that reshape thought patterns rather than merely targeting emotions to cultivate lasting happiness.

Keywords: common humanity, compassion, happiness mindset, indifference, social support.

UOT: 159.923.2:159.942.5:316.472.4

DOI: <https://doi.org/10.54414/ZWFI8568>

Introduction

Happiness and subjective well-being are central objectives in positive psychology and clinical research. Recent conceptual developments differentiate external resources, such as perceived social support, from internal capacities or mindsets, including compassion and beliefs regarding the malleability of

happiness, as complementary pathways to well-being [1]. Subjective well-being, which includes happiness and life satisfaction, is closely linked to social support. Research has shown that basic psychological needs, such as autonomy, competence, and relatedness, can explain the relationship between social support

and subjective well-being [2]. Furthermore, research has supported the fact that the level of social support predicts subjective well-being in the future through emotional connections' mediation [3]. Happiness is the ability to experience pleasure, delight, or joy on a consistent basis, as well as the inability to experience negative emotions such as grief or sadness on a consistent basis, coupled with life satisfaction [4]. Professional life is a vital contributor to happiness, in addition to the pleasure experienced from life experiences in general [5,6].

People with a happiness mindset demonstrate greater skill in using coping strategies that help them navigate challenging situations, which in turn enhances their life satisfaction and emotional stability. Studies have shown that these individuals exhibit higher levels of positive affect, hope, optimism, resilience, and happiness, along with lower levels of depression, anxiety, and perceived stress [7,8]. Adopting a happiness mindset is linked to greater emotional resilience, higher life satisfaction, and more robust interpersonal relationships. A growth mindset has also been associated with decreased loneliness and increased positive social connections. Correlation exists between an individual's perception of life satisfaction and happiness variability and other factors, including hope, optimism, positive emotions, and the quality of interpersonal relationships [9,10].

It has been identified as a feeling towards others, as well as a source of personal strength. It has been identified as a vital quality in the promotion of well-being, as stated by Neff [1]. Compassion felt by one individual because of the suffering of another has been identified as a source of helping behavior [11]. Compassion has been identified as an evolutionary advantage in social species, which allows altruism to occur in social groups. It has been influenced by moral values. Research on self-compassion / compassion has identified that interventions on compassion lead to a moderate level of psychological benefit. Theoretical approaches have identified various aspects such as kindness, mindfulness,

humanity, and acceptance, which may have different effects on compassion [1,11,12]. Recent research explores how people's views on the 'happiness mindset, similar to the concept of a growth mindset, depend on whether they believe happiness can be cultivated through effort and practice or is a fixed trait. Findings suggest that beliefs about well-being affect how effective interventions are and how actively individuals engage in positive practices [13]. Those who see happiness as changeable are more likely to adopt habits that improve their well-being, making the happiness mindset an important concept to consider alongside compassion and social support.

Research has found that compassionate interventions generally lead to improved emotional states and reduced distress across various groups, but the effectiveness of different compassion components may vary, such as whether self-focused or other-focused compassion is more beneficial [14]. Self-compassion has been associated with greater subjective happiness and life satisfaction in some studies and has been shown to act as a mediator in the relationship between stressors and well-being in long-term research [15]. Neff's 2023 research has compiled this information, recommending precise measurement and distinguishing between compassionate responding and self-critical responding [1].

Research has been conducted on the effects of compassion training and its association with happiness. Research conducted by Jazaieri et al. [16] has shown that life satisfaction and emotional well-being increase in individuals who have been subjected to compassion-focused interventions. Weng et al. [17] have also shown that compassion does not only increase the happiness of the individual but also has the ability to increase the happiness of the larger community through the development of community-focused behaviors. Research has shown that compassion and happiness have been associated with a positive attitude towards happiness. A study conducted by Cregg, Cheavens [18] focused on the effect of

compassion-focused intervention on the individual's well-being. Research has shown that selfless involvement in the lives of other individuals increases the happiness of the individual and thus can be associated with compassion and happiness. Studies have consistently found a strong link between the practice of compassion and improved mental health outcomes, suggesting that increased compassion is associated with reduced symptoms of depression and anxiety [19]. Research indicates that interventions focusing on compassion, like Compassion-Focused Therapy (CFT), are effective in enhancing positive emotions and mental resilience while reducing self-criticism and emotional distress [20].

Support from others encompasses various services designed to meet both emotional and social requirements, providing encouragement, aid, useful knowledge, and feedback to foster emotional and social well-being [21,22,23]. Many people perceive, or indeed experience, this reality as one where they feel cared for, valued, and connected within a supportive network. Essential to this form of support is its role in reducing stress, managing emotions, and promoting resilience [24,25]. Research indicates that perceived social support is associated with greater life satisfaction and fewer symptoms of anxiety and depression; regular volunteers, for example, report better health outcomes like lower blood pressure and reduced depressive symptoms, a pattern observed in Wisconsin by 2025 [26]. In a happiness-focused mindset, social support fosters a deep sense of security and acceptance, not only boosting positive emotions but also strengthening resilience against life's unavoidable difficulties [27].

Studies have found a connection between social support and well-being, but long-term research indicates that various factors impact this relationship, including the kind of support offered by a spouse, family, or friends, and that meeting psychological needs or achieving emotional equilibrium often serves as a pivotal point in how perceived support influences overall well-being [2,3]. Studies have uncovered unexpected negative associations in

certain circumstances, like required help in a professional environment or perceived overly limiting assistance in a family context, which implies a need for cautious consideration of context and culture [28,29].

Social support, which includes emotional support, practical support, and information support received from family, peers, and the larger community, is a multifaceted concept [30] (Cohen, 2004). According to Thoits [27], it is beneficial to the well-being of an individual and can contribute to happiness by providing the belief that the individual matters to other people. In a meta-analysis of 246 studies, Chu et al. [31] found a strong relationship between social support and overall satisfaction with life, although the strength of the relationship was dependent on whether the support was obtained from family or friends. There is, however, some evidence to suggest a more complex relationship between support and happiness. In a study by Lucas & Dyrenforth [32], it was found that although there was a relationship between social support and overall happiness, it was a small relationship; moreover, dependence on support was associated with reduced joy possibly because of feelings of dependence. A study by Thomson et al. [33] looked into income, social support, and well-being, finding that in high-income communities, greater tangible support (like financial help) was linked to reduced happiness, suggesting that this kind of aid might erode self-confidence or autonomy.

The current study is driven by two persistent shortcomings in these developments. Research has associated social support and compassion with overall well-being, but surprisingly little research has focused on compassion as a mediator that conveys the benefits of social support to happiness attitudes as opposed to emotional well-being in particular. Research on mediation tests primarily focuses on general composites, but relatively little work has been done to isolate compassion's subcomponents, such as mindfulness, kindness, indifference, and common humanity, in order to determine which components are most influential in forming malleability beliefs.



Present study

The current study suggests that perceived support from family, friends, and a significant other is connected to a happy mindset, with compassion acting as a mediator by (a) promoting growth orientation in the individual and (b) encouraging practices and attitudes that make happiness seem attainable and open to change.

Hypotheses

1. Social support will be positively associated with happiness mindset at the bivariate level
2. Compassion will be positively associated with happiness mindset.
3. Compassion will mediate the association between social support and happiness mindset.

University student samples provide an informative context for studying happiness

mindsets and compassion because emerging adulthood is a developmental window for identity and belief formation, and because students face social and academic stressors where both social support and compassion-based coping are.

Method

Participants. The research sample included 154 students from Khazar University aged 18 to 35 years of this university with a mean age of 24.18 years ($SD = 4.35$, range = 18–35), and it employed convenience sampling as the method. According to Table 1, females comprised the majority of participants, constituting 75.32%, and approximately half of them fell within the 18–23 age bracket. The majority of respondents had a Bachelor's degree (51.30%), were not in a relationship (80.52%), and were currently students (75.97%).

Table 1. Descriptive statistics of demographic variables.

Variable	Category	Frequency	%
Gender	Female	116	75.32
	Male	38	24.68
Age group	18–23 years	78	50.66
	24–29 years	53	34.87
	30–35 years	23	14.47
Education	Bachelor's	79	51.30
	Master's	51	33.12
	PhD and above	24	15.58
Marital status	Single	124	80.52
	Married	22	14.29
	Divorced	6	3.90
	Widowed	2	1.30
Job status	Student-Employed	30	19.48
	Student-Unemployed	124	80.52

Measures

The multidimensional scale of perceived social support. The MSPSS developed by Zimet et al. [34] is a 12-item self-report questionnaire which assesses an individual's perceived social support from three different sources: family, friends, and a significant other; examples of the items it includes are: I get the emotional help and support I need from my family. For my family, I have someone very special who brings me a

lot of comfort. My significant other and my friends truly make an effort to assist me. The scale used was a 7-point measure, ranging from 1 (Very Strongly Disagree) to 7 (Very Strongly Agree). The score for each subscale is the total of its four related items. The total MSPSS score is obtained by adding all 12 items together, with higher scores reflecting a greater perceived level of social support. The MSPSS displays a high level of internal consistency, as indicated by overall

Cronbach's alpha values usually ranging from .88 to .93, and its subscales for family, friends, and significant others typically exhibit high reliability, with Cronbach's alpha values between .83 and .93. In this study, the overall Cronbach's alpha was 0.90. In this study, Cronbach's alpha was .90.

Compassion scale. Pommier et al. [35] developed the Compassion Scale (CS) to assess kindness, common humanity, indifference, and mindfulness towards others. The survey contains 16 items using a Likert scale (1=Almost never to 5=Almost always) that enables respondents to rate their level of agreement with each statement. For example, someone might say, "I listen patiently when people tell me their problems." Subscale scores are determined by averaging the responses to the four subscale items. To calculate a total compassion score, reverse-score the items relating to indifference and then take the overall mean of all items. Examining subscale scores reveals that higher scores on indifference items signify greater compassion after reverse coding. The CS total score demonstrated reliability, with Cronbach's alpha ranging from .77 to .90 across studies, and subscales exhibited adequate reliability as well. In this study, Cronbach's alpha was 0.87.

Happiness mindset scale. HMS aims to evaluate an individual's general outlook on life and their capacity to approach challenges with a positive attitude, focusing on happiness and well-being as achievable goals [36]. The scale comprises 6 items and assesses responses on a Likert scale from 1 (Strongly Disagree) to 7 (Strongly Agree), with a sample item being "You can change your basic happiness considerably". A single factor score was generated from all 6 items by reverse-coding them, with higher numbers indicating a greater belief in growth mindsets of happiness. Reliability coefficients ranged from 0.78 to 0.86. The Cronbach's alpha reliability coefficient in this study was 0.85.

Procedure. Data were gathered via online questionnaires, with participants recruited through a Google Form link. Initially, students were asked whether they wished to take part in the study; those who consented

were then prompted to complete the questionnaires after being fully informed and having signed a consent form. Prior to participation, each individual received details about the study's aims and was assured of confidentiality, with the option to withdraw at any time without penalty. Ethical approval was granted by the Khazar University Ethics Committee (reference 1-2025/2026).

Data analysis. The research study employed a cross-sectional study with a correlational research design. Moreover, bootstrapping was used for the mediation analysis. The study used structural equation modeling to assess the proposed mediation model. This is because, most of the time, SEM is more efficient than traditional regression-based mediation. This is because it allows for the simultaneous testing of several potential pathways, correction of measurement error, and calculation of a variety of detailed goodness-of-fit indices. Prior to running the SEM, preliminary analyses were run. These included descriptive analyses to check for normality and distribution, such as means, standard deviations, skewness, and kurtosis. Additionally, correlations were run to check for relationships between the variables.

Findings

According to Table 1, the majority of participants were female (75.32%), whereas males comprised 24.68% of the total sample. Participants aged between 18 and 23 made up 50.66% of the group, while 34.87% were in the 24-29 age range, and just 14.47% fell between 30 and 35 years old. Regarding education, more than two-thirds of respondents (51.30%) held a Bachelor's degree, 33.12% were Master's students, and 15.58% had a PhD or higher degree.

In terms of marital status, the vast majority were single (80.52%), while 14.29% were married and 3.90% were divorced, and 1.30% were widowed. Finally, most of the respondents were students-unemployed (80.52%), followed by employed individuals (19.48%).

Table 2 results showed that participants stated a moderate happiness mindset with a mean of 24.16 and a standard deviation of 4.62,

and moderate-to-high levels of social support across all subdomains. Indifference scored the highest among the compassion dimensions, with a mean of 18.20, followed closely by lower mean scores for mindfulness and

common humanity. The data distribution's skewness and kurtosis indices fell within the acceptable range, thereby confirming the data's approximate normality.

Table 2. Descriptive statistics for main variables

Variable	N	M	SD	Skewness	Kurtosis
Happiness mindset	154	24.16	4.62	-0.18	3.52
Social support – significant others	154	18.43	5.99	-0.35	-0.65
Social support – family	154	19.71	5.54	-0.85	0.26
Social support – friends	154	19.58	4.92	-0.88	0.72
Compassion - mindfulness	154	13.14	4.33	-0.14	-0.95
Compassion – kindness	154	13.25	3.72	-0.14	-0.76
Compassion – indifference	154	18.20	3.32	-0.74	0.61
Compassion – common humanity	154	13.76	3.80	-0.13	-0.80

Note. All variables were approximately normally distributed, with skewness ± 2 .

The results (see Table 3) showed a positive correlation between happiness mindset and compassion – indifference ($r = .23$, $p < .01$), indicating that people with a stronger sense of indifference are more likely to experience greater happiness. In contrast, a happiness mindset was associated with small but significant negative correlations with social support from significant others ($r = -.22$, $p < .01$) and family ($r = -.20$, $p < .05$). These

compassion dimensions were strongly correlated, with coefficients ranging from .71 to .82 ($p < .001$), suggesting good internal consistency. Research suggests that compassion-related factors are organized in a way, yet social support from close relationships may not always accurately forecast happiness, and this relationship could differ based on the situation or perceived sense of duty.

Table 3. Correlations between happiness mindset, compassion and social support.

Variable	1	2	3	4	5	6	7	8	Cronbach's alpha
1. Happiness mindset	1	-.22**	-.20*	-.11	-.10	-.14	.23**	-.14	0.85
2. Social support – significant others		1	.46**	.37**	.50**	.48**	.07	.45**	0.92
3. Social support – family			1	.48**	.12	.16	.20*	.23**	0.91
4. Social support – friends				1	-.03	.02	.26**	.03	0.89
5. Compassion - mindfulness					1	.82**	-.12	.78**	0.86
6. Compassion - kindness						1	-.13	.71**	0.84
7. Compassion - indifference							1	-.14	0.76
8. Compassion – common humanity								1	0.82

Note: $p < .05^*$, $p < .01^{**}$

An independent t-test was conducted to examine gender differences in the study variables, as reported in Table 4. The results revealed that the average happiness level in women ($M = 24.69$, $SD = 4.38$) was slightly greater than that of men ($M = 24.09$, $SD =$

4.34), however this disparity was not statistically significant. Also, no statistically significant difference was observed between women and men in the area of social support and compassion. The overall results indicated that gender had no significant impact on



happiness, social support, and compassion in this sample, with the difference in means falling within the 95% confidence interval. A series of one-way ANOVAs, as presented in

table 5, was used to investigate possible differences in happiness, social support, and compassion components across various demographic groups.

Table 4. Independent samples t-test for gender differences on study variables.

Variable	Female (n=116) M (SD)	Male (n=38) M (SD)	t(df)	p	Mean Diff. (Female – Male)	95% CI for Diff.
Happiness mindset	24.69 (4.38)	24.09 (4.34)	-0.29 (152)	0.776	0.60	[-1.96, 1.46]
Social support – significant others	18.22 (5.50)	18.76 (5.92)	-1.20 (152)	0.233	-0.54	[-0.87, 3.55]
Social support – family	19.96 (5.48)	19.60 (5.65)	0.43 (152)	0.666	0.36	[-2.50, 1.60]
Social support – friends	19.52 (4.90)	19.56 (5.00)	-0.08 (152)	0.939	-0.04	[-1.89, 1.75]
Compassion – mindfulness	12.91 (3.99)	13.47 (4.37)	-1.66 (152)	0.100	-0.56	[-0.26, 2.92]
Compassion – kindness	12.39 (3.56)	13.43 (3.72)	-1.04 (152)	0.302	-1.04	[-0.65, 2.10]
Compassion – indifference	18.05 (3.10)	18.18 (3.19)	-0.13 (152)	0.895	-0.13	[-1.31, 1.15]
Compassion – common humanity	13.49 (3.45)	13.93 (3.71)	-0.98 (152)	0.330	-0.44	[-0.71, 2.10]

Analyses showed that social support from friends varied significantly across different marital status groups ($F(3,150)=2.83$, $p=.04$), indicating that married people received slightly more support from friends than singles or those who had divorced. A significant difference was found in compassion mindfulness across job status groups ($F(2,151)=4.81$, $p=.01$), showing greater mindful compassion among those who are

employed. No significant effects were detected for age or education on happiness, social support, or compassion variables at a p-value of greater than 0.05. The findings indicate that demographic traits like marital and employment status may have a moderate yet distinct influence on perceived social and compassionate functioning, whereas age and education seem to be unconnected to these psychological outcomes.

Table 5. One-way ANOVA results for differences in study variables across demographic groups.

Variable	Age		Education		Marital		Job	
	F (df ₁ , df ₂)	P	F (df ₁ , df ₂)	P	F (df ₁ , df ₂)	P	F (df ₁ , df ₂)	P
Happiness mindset	1.05 (3,150)	.41	0.70 (2,151)	.50	0.47 (3,150)	.71	0.09 (2,151)	.92
Social support – significant others	1.30 (3,150)	.20	0.22 (2,151)	.81	0.38 (3,150)	.77	0.85 (2,151)	.43
Social Support – family	1.36 (3,150)	.17	1.16 (2,151)	.32	1.32 (3,150)	.27	0.41 (2,151)	.67
Social Support – friends	0.76 (3,150)	.74	—	—	2.83 (3,150)	.04	2.83 (2,151)	.06
Compassion – mindfulness	0.80 (3,150)	.70	—	—	0.18 (3,150)	.91	4.81 (2,151)	.01
Compassion – kindness	1.03 (3,150)	.43	—	—	1.13 (3,150)	.34	2.40 (2,151)	.10
Compassion – indifference	1.48 (3,150)	.11	—	—	1.69 (3,150)	.17	0.08 (2,151)	.93
Compassion – common humanity	1.06 (3,150)	.40	—	—	1.27 (3,150)	.29	2.66 (2,151)	.07



The structural equation modeling results (see Table 6.) demonstrated a moderate overall model fit. The χ^2 statistic was significant, which is expected given the sample size sensitivity of this test. However, other indices such as CMIN/DF (2.739) indicated an acceptable level of fit. Incremental fit indices (CFI = 0.880, TLI = 0.836, IFI = 0.882) were slightly below the conventional cutoff (0.90), suggesting that the proposed model only moderately represents the data. The RMSEA value (0.107) exceeded the recommended

threshold (0.08), implying potential model misspecifications or omitted paths. Regarding path coefficients, social support showed a strong positive association with compassion ($\beta = 0.538, p < .001$), confirming that individuals with greater perceived social support tend to experience higher levels of compassion. However, the direct link from compassion to happiness was not significant ($\beta = -0.019, p = .856$), indicating that compassion did not directly predict happiness in this model.

Table 6. Structural equation modeling results for the mediating role of compassion.

Path / Parameter	Estimate (B)	S.E.	C.R.	p (ML)	Std. Estimate (β)	Bootstrap 90% CI (Lower–Upper)
Compassion ← Social Support	0.366	0.081	4.535	< .001	0.538	0.231 – 0.518
Family ← Social Support	0.422	0.099	4.257	< .001	0.456	0.153 – 1.152
Friends ← Social Support	0.303	0.081	3.730	< .001	0.369	0.118 – 0.897
Mindfulness ← Compassion	1.000 (fixed)	—	—	—	0.941	1.000 – 1.000
Kindness ← Compassion	0.791	0.051	15.418	< .001	0.865	0.698 – 0.888
Indifference ← Compassion	-0.105	0.068	-1.540	.124	-0.128	-0.214 – -0.002
Common humanity ← Compassion	0.768	0.055	14.093	< .001	0.824	0.685 – 0.866
Happiness ← Compassion	-0.021	0.116	-0.182	.856	-0.019	-0.206 – 0.201
Happiness ← Social Support	-0.163	0.083	-1.957	.050	-0.212	-0.492 – -0.023
Happiness ← Age	0.049	0.084	0.583	.560	0.046	-0.106 – 0.198
Happiness ← Gender	-0.032	0.841	-0.038	.969	-0.003	-1.760 – 1.543

Consequently, the hypothesized mediation effect of compassion between social support and happiness was not supported. Interestingly, social support exhibited a significant negative direct effect on happiness ($\beta = -0.212$), suggesting a possible suppression or inverse relationship that may warrant further theoretical exploration (e.g., the possibility that excessive reliance on support networks may diminish perceived autonomy or happiness). Among the measurement indicators, compassion's observed variables (kindness, mindfulness, common humanity) displayed strong loadings ($\beta > 0.80$), supporting construct validity. Only the Indifference indicator showed weak and inconsistent loading ($\beta = -0.128, p = .124$), suggesting that this subscale may not align

well with the compassion latent construct in the current sample.

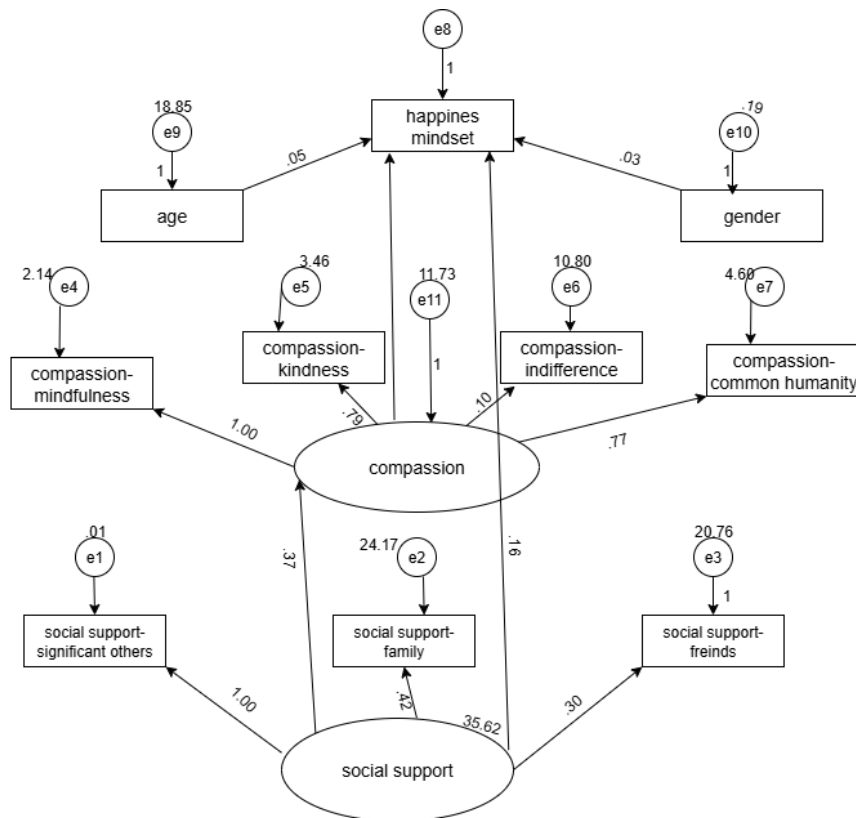
The bootstrap results confirmed the stability of significant paths while revealing moderate variability in some estimates. Approximately 5000 bootstrap samples were analyzed with minimal exclusion due to convergence issues, reinforcing the reliability of the findings. Modification indices suggested several correlated residuals and possible cross-paths, especially between error terms e2–e3 (Fig.1) and between social support -family and social support-friends subcomponents of social support. These areas might represent conceptual overlap and could be theoretically justified in future model refinements.

Finally, one negative error variance (e1) emerged, implying a potential model identification or scaling issue. Such cases

should be noted as a limitation and addressed by constraining the variance or re-specifying the item in subsequent analyses. In conclusion, while the proposed model captures meaningful relationships particularly the strong linkage between social support and compassion, the overall fit remains moderate, and the expected

mediation through compassion was not confirmed. Model refinements guided by theoretical reasoning (e.g., adding correlated residuals or reconsidering the role of certain indicators) may improve model adequacy in future analyses.

Figure 1. Structural Equation Modeling.



Discussion

Recent studies have further elucidated the intricate association between social support, emotional connection, and the maintenance of a healthy mental outlook. Prior studies have been substantiated through research that has revealed the positive correlation between social support and compassion [1,37], thus further validating the assumption that supportive relationships can indeed give rise to prosocial emotions and empathic concern. Research has revealed that such associations can be observed in other areas as well, where the presence of support has been linked to increased self-compassion and compassion, thus validating the assumption that supportive relationships can

give rise to prosocial emotion-regulating behaviors [38].

Compassion did not prove to be a predictor of a happiness mindset, even with a clear social support and compassion pathway present. This ultimately led to the failure of the hypothesized mediation. Previous studies have found no substantial link between compassion and a happiness-oriented mindset, which diverges from earlier research that showed compassion boosts positive emotions and overall life satisfaction [15]. A number of possible explanations can explain this difference. It primarily concerns cultural or contextual variability. In collectivist or interdependent cultures, compassion is often seen as a social obligation rather than a

personal choice, potentially weakening its connection to individual happiness beliefs [29].

Second, several studies conducted recently have discovered that the link between compassion (or self-compassion) and broader cognitive beliefs regarding the changeability of happiness is not innate and may be affected by various intervening psychological factors, such as perceived autonomy, met needs, or stress reduction [39]. In other words, compassion may effectively improve emotional well-being or reduce distress, but changing a domain-specific belief (i.e., that happiness can change) is more likely to require cognitive reframing, attributional shifts, or explicit mindset-focused interventions rather than just increasing compassionate affect. Third, the findings show that social support has a direct negative effect on a person's happiness mindset and is linked to negative associations between happiness and the support people receive from their family and close relationships. This implies that social support may have contextual or processual drawbacks. Research has shown that overly controlling or highly directive assistance can threaten an individual's independence and self-assurance [28,33]. Those who perceive a greater reliance on others tend to have lower confidence in generating their own happiness. The absence of substantial mediation implies that compassion may not be enough to convey the benefits of social support to a happy state of mind. Mediators such as satisfaction of psychological needs or gratitude may play a more significant role [24].

Research has established that support can come in various forms, such as autonomy-supportive, informational, or emotionally validating support, which has a generally positive effect on well-being. Conversely, controlling, overprotective, or obligation-based support may have a negative effect on perceived personal autonomy [40]. Individuals may have perceived support as too controlling or implying a need to receive help, which may have contributed to the inverse relationship with perceived self-efficacy to achieve happiness. Research has established that

perceived controlling support from parents or others may lead to a decrease in autonomy, especially in students/families. This leads to a decrease in subjective well-being and task self-efficacy.

Eventually, the cultural and developmental contexts are significant. Young university students in the transition phase of emerging adulthood may receive varying levels of support compared to their older counterparts. While peer support frequently offers encouragement, family or significant other support can sometimes be viewed as a feeling of obligation or pressure to conform. Research has found that firmly held beliefs about happiness being unchangeable can limit the effectiveness of social and emotional resources in producing mindset change, as indicated in studies by Ku et al. [41]. Enhanced compassion levels may not be sufficient to change the fundamental views on happiness that are already deeply ingrained in a significant number of participants who currently adhere to these beliefs. Consistent with previous studies, the results for null hypotheses on gender and age show minimal demographic variations in compassion or happiness, as found by Kirby et al. [14]. Research by Xu et al. [25] suggests that stable social and role structures can foster social and compassionate functioning, as illustrated by occupational and marital outcomes. The findings suggest that social support and compassion are distinct yet related factors in determining happiness beliefs, with their connection dependent on context and perceived autonomy.

Implications

This study theoretically contributes to understanding how external (social support) and internal (compassion) mechanisms jointly influence the happiness mindset. In practical terms, the research suggests that university settings should strike a balance between providing support and promoting autonomy through interventions. Dependence on social connections without also promoting personal development could undermine positive attitudes towards happiness. Strengthening prosocial engagement can still be achieved by

incorporating compassion-focused training into peer mentoring or counseling programs, provided that such training prioritizes mindful self-compassion and balanced giving. Research into the future may investigate the combination of gratitude and psychological flexibility interventions to boost happiness mindset more efficiently.

Limitations

This research has several limitations. First, its cross-sectional design prevents causal inference; longitudinal or experimental designs are needed to clarify directionality. Second, the reliance on self-report data may introduce social desirability or common-method bias. Third, the moderate model fit (CFI = .88; RMSEA = .107) suggests that relevant variables such as gratitude or basic psychological need satisfaction were omitted. Fourth, the convenience sampling of predominantly female university students limits generalizability to other populations or cultural groups.

Conclusions

This study found that perceived social support strongly forecasts a compassion rather than happiness mindset, and that compassion has no effect on the social support–happiness link. The unexpected negative link between social support and happiness mindset reveals the potential drawbacks of dependence in supportive environments. Fostering both compassion and social environments that support autonomy is crucial for encouraging the development of sustainable happiness beliefs. Research in the future should investigate longitudinal dynamics and cross-cultural patterns to clarify the points at which and the manner in which social support encourages or obstructs happiness mindsets.

REFERENCES

1. Neff K.D. Self-compassion: Theory, method, research, and intervention. *Annual Review of Psychology*, 2023;74:193-218. Doi: 10.1146/annurev-psych-032420-031047
2. Shin H., Park C. Social support and psychological well-being in younger and older adults: The mediating effects of basic psychological need satisfaction. *Frontiers in Psychology*, 2022;13:1051968. Doi: 10.3389/fpsyg.2022.1051968
3. Mao Y., Chen J., Liu X. Dang J., Schiöth H.B. Social support predicted subsequent subjective well-being during the COVID-19 pandemic: a prospective study. *BMC Public Health*, 2024;24(943). Doi: 10.1186/s12889-024-18473-2
4. Diener E. Subjective well-being. *Psychological Bulletin*, 1984;95:542–575.
5. Diener E., Suh E., Lucas R.E., Smith H.L. Subjective well-being: Three decades of progress. *Psychological Bulletin*, 1999;125:276-302.
6. Oztemel K., Yıldız-Akyol E. The predictive role of happiness, social support, and future time orientation in career adaptability. *Journal of Career Development*, 2021;48(3):199–212. Doi: 10.1177/0894845319840437
7. Neff K.D., Pisitsungkagarn K., Hsieh Y.P. Self-compassion and self-construal in the United States, Thailand, and Taiwan. *Journal of Cross-Cultural Psychology*, 2008;39(3):267-285. Doi: 10.1177/0022022108314544
8. Zessin U., Dickhäuser O., Garbade S. The Relationship Between Self-Compassion and Well-Being: A Meta-Analysis. *Applied psychology: Health and well-being*, 2015;7(3):340–364. Doi: 10.1111/aphw.12051
9. Busseri M.A., Samani M.N. Lay Theories for Life Satisfaction and the Belief that Life Gets Better and Better. *Journal of Happiness Study*, 2019;20:1647–1672. Doi: 10.1007/s10902-018-0016-x
10. Wang C., Li S., Wang Y., Li M., Tao W. Growth mindset and well-being in social interactions: countering individual loneliness. *Frontiers in public health*, 2024;12. Doi: 10.3389/fpubh.2024.1368491
11. Goetz J.L., Keltner D., Simon-Thomas E. Compassion: an evolutionary analysis

- and empirical review. *Psychological bulletin*, 2010;136(3):351–374. Doi: 10.1037/a0018807
12. Gilbert P. Explorations into the nature and function of compassion. *Current Opinion in Psychology*. 2019.
13. Gander F., Proyer R.T., Ruch W. Do beliefs in the malleability of well-being affect the efficacy of positive psychology interventions? Results of a randomized placebo-controlled trial. *Applied Psychology*, 2022;14(4):1353-1368. Doi: 10.1111/aphw.12338
14. Kirby J.N., Tellegen C.L., Steindl S.R. A Meta-Analysis of Compassion-Based Interventions: Current State of Knowledge and Future Directions. *Behavior Therapy*, 2017;48(6):778-792. Doi: 10.1016/j.beth.2017.06.003
15. Sotiropoulou K., Patitsa C., Giannakouli V., Galanakis M., Koundourou C., Tsitsas G. Self-Compassion as a Key Factor of Subjective Happiness and Psychological Well-Being among Greek Adults during COVID-19 Lockdowns. *International journal of environmental research and public health*, 2023;20(15):6464. Doi: 10.3390/ijerph20156464
16. Jazaieri H., McGonigal K., Jinpa T., Doty J.R., Gross J.J., Goldin P.R. A randomized controlled trial of compassion cultivation training: Effects on mindfulness, affect, and emotion regulation. *Motivation and Emotion*, 2014;38(1):23–35. Doi: 10.1007/s11031-013-9368-z
17. Weng H.Y., Fox A.S., Hesselthaler H.C., Stodola D.E., Davidson R.J. The Role of Compassion in Altruistic Helping and Punishment Behavior. *PLoS one*, 2015;10(12):e0143794. Doi: 10.1371/journal.pone.0143794
18. Cregg D.R., Cheavens J.S. Healing through helping: an experimental investigation of kindness, social activities, and reappraisal as well-being interventions. *The Journal of Positive Psychology*, 2022;18(6):924–941. Doi: 10.1080/17439760.2022.2154695
19. Gilbert P. *The compassionate mind: A new approach to life's challenges*. New Harbinger Publications. 2009.
20. Neff K.D., Germer C.K. A pilot study and randomized controlled trial of the mindful self-compassion program. *Journal of Clinical Psychology*, 2013;69(1):28–44. Doi: 10.1002/jclp.21923
21. Anjos K.F., Boery R.N., Pereira R., Pedreira L.C., Vilela A.B., Santos V.C., Rosa D.deO. Association between social support and quality of life of relative caregivers of elderly dependents. *Ciencia & saude coletiva*, 2015;20(5):1321–1330. Doi: 10.1590/1413-81232015205.14192014
22. Beygi Z., Solhi M., Irandoost F., Hoseini F. The relationship between social support and happiness in older adults referred to health centers in Zarrin Shahr, Iran. 2023. Doi: 10.1016/j.heliyon.2023.e19529
23. Soleimanvandi-Azar N., Zanjari N., Karimi S.E., Irandoost S.F., Gharehghani M.A.M., Ziapour A., Ahmadi S., Moshtagh M. Investigating the effect of social support, social capital, and coping on the positive state of mind of Iranian older people with human immunodeficiency virus/acquired immunodeficiency syndrome. *Journal of education and health promotion*, 2021;10:286. Doi: 10.4103/jehp.jehp_956_20
24. Ruihua L., Hassan N.C., Qiuxia Z., Sha O., Jingyi D. A systematic review on the impact of social support on college students' wellbeing and mental health. *PLOS One*, 2025;20(7): e0325212. Doi: 10.1371/journal.pone.0325212
25. Xu S., Li W., Zhang W., Cho J. The dynamics of social support and affective well-being before and during COVID: An experience sampling study. *Computers in Human Behavior*, 2021;121. Doi: 10.1016/j.chb.2021.106776

26. Wisconsin Longitudinal Study. The health benefits of volunteering. *The Guardian*. 2025.
27. Thoits P.A. Mechanisms linking social ties and support to physical and mental health. *Journal of Health and Social Behavior*, 2011;52(2):145–161. Doi: 10.1177/0022146510395592
28. Xin Z. Perceived social support and college student engagement: moderating effects of a grateful disposition on the satisfaction of basic psychological needs as a mediator. *BMC Psychology*, 2022;10(298). Doi: 10.1186/s40359-022-01015-z
29. Yang T., Gai X., Wang S., Gai S. The Relationship between Parenting Behaviors and Adolescent Well-Being Varies with the Consistency of Parent-Adolescent Cultural Orientation. *Behavioral sciences*, 2024;14(3):193. Doi: 10.3390/bs14030193
30. Cohen S. Social relationships and health. *American Psychologist*, 2004;59(8):676–684. Doi: 10.1037/0003-066X.59.8.676
31. Chu P.S., Saucier D.A., Hafner E. Meta-analysis of the relationships between social support and well-being in children and adolescents. *Journal of Social and Clinical Psychology*, 2010;29(6): 624–645. Doi: 10.1521/jscp.2010.29.6.624
32. Lucas R.E., Dyrenforth P.S. Does the existence of social relationships matter for subjective well-being? In E. Diener (Ed.), *Assessing well-being* (pp. 135–156). Springer. 2006.
33. Thomson R.M., Igelström E., Purba A.K., Shimonovich M., Thomson H., McCartney G., Reeves A., Leyland A., Pearce A., Katikireddi S.V. How do income changes impact on mental health and wellbeing for working-age adults? A systematic review and meta-analysis. *The Lancet. Public health*, 2022;7(6):e515–e528. Doi: 10.1016/S2468-2667(22)00058-5
34. Zimet G.D., Dahlem N.W., Zimet S.G., Farley G.K. The Multidimensional Scale of Perceived Social Support. *Journal of Personality Assessment*, 1988;52(1):30–41. Doi: 10.1207/s15327752jpa5201_2
35. Pommier E., Neff K.D., Tóth-Király I. The development and validation of the Compassion Scale. *Assessment*, 2019;21-39.
36. Van Tongeren D.R., Burnette J.L. Do you believe happiness can change? Effects of happiness mindsets on well-being and satisfaction. *The Journal of Positive Psychology*, 2018;13:101-109.
37. Slavich G.M., Roos L.G., Zaki J. Social belonging, compassion, and kindness: Key ingredients for fostering resilience, recovery, and growth from the COVID-19 pandemic. *Anxiety, stress, and coping*, 2022;35(1):1–8. Doi: 10.1080/10615806.2021.1950695
38. Masoumi S., Amiri M., Afrashteh M.Y. Self-Compassion: The Factor That Explains a Relationship between Perceived Social Support and Emotional Self-Regulation in Psychological Well-Being of Breast Cancer Survivors. *Iranian Journal of Psychiatry*, 2022;17(3):341. Doi: 10.18502/ijps.v17i3.9734
39. Acoba E.F. Social support and mental health: The mediating role of perceived stress. *Frontiers in Psychology*, 2024;15:1330720. Doi: 10.3389/fpsyg.2024.1330720
40. Jameel A., Ma Z., Li M., Hussain A., Asif M, Wang Y. The effects of social support and parental autonomy support on the mental well-being of university students: The mediating role of a parent-child relationship. *Humanities and Social Sciences Communications*, 2024;11(1):1-8. Doi: 10.1057/s41599-024-03088-0
41. Ku X., Cha S.E., Kim Y., Jun Y.J., Choi I. Essentializing Happiness Mitigates the Changes in Subjective Well-Being Following Negative Life Events. *Personality and Social Psychology Bulletin*. 2024. [Doi: 10.1177/01461672241279657](https://doi.org/10.1177/01461672241279657)

Mahsa GAMASAE

Xəzər Universiteti, Psixologiya Bölümü, Bakı, Azərbaycan

Murat YILDIRIM

Psixologiya Bölümü, Elm və Ədəbiyyat Fakültəsi, Ağrı İbrahim Cecen Universiteti, Ağrı, Türkiyə
Psixologiya Tədqiqat Mərkəzi, Xəzər Universiteti, Bakı, Azərbaycan

**AZƏRBAYCANDA TƏLƏBƏLƏR ARASINDA SOSIAL DƏSTƏK VƏ XOŞBƏXTLİK
DÜŞÜNCƏSİ ARASINDAKI MÜNASİBƏTDƏ ŞƏFQƏTİN VASİTƏÇİ ROLU**

Xülasə

Xoşbəxtliyə həm xarici, həm də daxili faktorlar təsir edir və az sayda tədqiqat bu faktorların xoşbəxtliyin dəyişə bilən bir inanc olması ilə necə qarşılıqlı əlaqədə olduğunu araşdırıb. Sosial dəstəyin bəzən faydalı, bəzən isə zərərli ola bilməsi kimi uyğunsuz nəticələri izah etmək nəzəri baxımdan vacibdir. Bu tədqiqat universitet tələbələri arasında ailə, dostlar və yaxın insanlardan qavranılan sosial dəstəyin xoşbəxtliyə münasibətlə necə əlaqəli olduğunu və bu prosesdə mərhəmətin vasitəçi rolunu araşdırmaq məqsədi daşıyır. Tədqiqat kəsişməli korrelyasion dizaynda aparılıb və bootstrap vasitəsilə vasitəçilik analizi istifadə edilib. Tədqiqatda 154 iştirakçı olub, onların 75.3%-i qadın, 24.7%-i kişidir. Məlumat toplamaq üçün Çoxölçülü Qavranılan Sosial Dəstək Şkalası, Mərhəmət Şkalası və Xoşbəxt düşüncə tərzı Şkalası istifadə edilib. Korrelyasiya analizinə görə, xoşbəxtlik mərhəmət–laqeydlik ilə müsbət, lakin önəmli insanlardan və ailədən gələn sosial dəstək ilə mənfi əlaqədədir. Struktur tənlik modelinə əsasən, sosial dəstək ilə mərhəmət arasında güclü müsbət əlaqə var ($\beta = .54, p < .001$), lakin mərhəmət xoşbəxtliyi proqnozlaşdırmır ($\beta = -.02, p = .856$). Sosial dəstək ilə xoşbəxtlik arasında isə kiçik mənfi birbaşa əlaqə aşkar edilib ($\beta = -.21, p = .034$). Bu, sosial əlaqələrə həddindən artıq bağlılığın insanın müstəqillik və özünəinam hissini azalda biləcəyini göstərə bilər. Araşdırma göstərdi ki, evli iştirakçılar dostlardan daha çox dəstək alırlar, işləyən şəxslər isə daha yüksək mərhəmətli davranış nümayiş etdirirlər. Nəticə olaraq, sosial dəstək mərhəməti artırsa da, bu avtomatik olaraq xoşbəxtliyin dəyişə bilən olduğuna dair inancı gücləndirmir. Sosial dəstək ilə xoşbəxtlik arasında mənfi əlaqə göstərir ki, başqalarına həddindən artıq güvənmək müstəqilliyi zəiflədə bilər. Buna görə də universitet mühitində sosial münasibətlər ilə müstəqilliyi balanslaşdırmaq və emosiyaları yox, düşüncə tərzini dəyişən müdaxilələr hazırlamaq daha dayanıqlı xoşbəxtlik üçün vacibdir.

Açar sözlər: laqeydlik, mərhəmət, xoşbəxtlik düşüncə tərzı şkalası, sosial dəstək

Махса ГАМАСАЕЕ

Кафедра психологии, Хазарский университет, Баку, Азербайджан

Мурат ЙЫЛДЫРЫМ

Кафедра психологии, Факультет естественных и литературных наук, Университет Агри
Ибрагима Чечена, Агры, Турция

Центр психологических исследований, Хазарский университет, Баку, Азербайджан

**ОПОСРЕДУЮЩАЯ РОЛЬ СОСТРАДАНИЯ ВО ВЗАИМОСВЯЗИ МЕЖДУ
СОЦИАЛЬНОЙ ПОДДЕРЖКОЙ И ПОЗИТИВНЫМ НАСТРОЕМ СРЕДИ
СТУДЕНТОВ В АЗЕРБАЙДЖАНЕ**

Резюме

Как внешние, так и внутренние факторы влияют на счастье, и лишь немногие исследования рассматривали их взаимодействие и влияние на убеждение в изменчивости

счастья. Теоретически важно объяснить противоречивые результаты, особенно когда социальная поддержка может быть как полезной, так и вредной для благополучия. Целью данного исследования было установить, как воспринимаемая поддержка со стороны семьи, друзей и значимых других связана со счастливым настроением среди студентов университетов, при этом сострадание выступает в качестве медиатора, используя поперечное корреляционное исследование с применением метода бутстреппинга для анализа медиации. В исследовании приняли участие 154 человека, из которых 75,3% составляли женщины и 24,7% мужчины. Использовались многомерная шкала воспринимаемой социальной поддержки, шкала сострадания и шкала мышления, ориентированного на счастье. Результаты корреляционного анализа показали, что счастье положительно коррелирует с состраданием-безразличием и отрицательно коррелирует с социальной поддержкой со стороны значимых других и семьи. Моделирование структурных уравнений показало значимую положительную связь между социальной поддержкой и состраданием ($\beta = 0,54$, $p < 0,001$), однако не было обнаружено связи между состраданием и счастьем ($\beta = -0,02$, $p = 0,856$). Была выявлена небольшая отрицательная прямая связь между социальной поддержкой и счастьем ($\beta = -0,21$, $p = 0,034$), что подразумевает, что повышенная зависимость от социальных связей может быть связана со снижением автономии или самоэффективности. Исследование показало, что женатые участники получали более высокий уровень поддержки со стороны друзей, в то время как работающие люди демонстрировали более высокий уровень сострадательной осознанности. По-видимому, поддерживающие отношения могут способствовать развитию сострадания, но это не автоматически приводит к более твердым убеждениям о гибкости счастья. Связь между социальной поддержкой и негативным отношением к счастью предполагает, что чрезмерная зависимость от других может подрывать автономию; поэтому важно сбалансировать социальные отношения с условиями, способствующими независимости, особенно в университетской среде, и разработать вмешательства, которые изменяют модели мышления, а не просто воздействуют на эмоции, чтобы культивировать устойчивое счастье.

Ключевые слова: человечность, сострадание, установка на счастье, безразличие, социальная поддержка

Daxil olub: 09.04.2026