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Myriam Rudaz, Thomas Ledermann & Frank D. Fincham

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# Caring for bliss moderates the association between mindfulness, self-compassion, and well-being in college-attending emerging adults

Myriam Rudaz, Thomas Ledermann and Frank D. Fincham

Department of Human Development and Family Science, Florida State University, Tallahassee, FL, USA

## ABSTRACT

Ample evidence suggests that mindfulness and self-compassion are related to well-being, but little is known about the role of a new construct, caring for bliss, in these relationships. This study examined the potential moderating role of caring for bliss on the effect of mindfulness and self-compassion on well-being in college-attending emerging adults ( $n = 683$ ). Well-being was examined in terms of positive (flourishing) and negative (depressive symptoms) indicators. Results show that caring for bliss enhanced the effect of high self-compassion on flourishing and compensated for the effect of low mindfulness on flourishing. Caring for bliss also buffered the effect of low mindfulness on depressive symptoms. No moderating effect was found for self-compassion on depressive symptoms. The present study highlights the importance of caring for bliss as a new human strength among college-attending emerging adults that can enhance and buffer the effect of mindfulness and self-compassion on well-being.

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## KEYWORDS

Mindfulness; self-compassion; caring for bliss; well-being; emerging adults

For most young adults in developed countries, the years from the late teens through the twenties are characterized by profound change and transitions (Arnett, 2000, 2007). Over the course of the 20<sup>th</sup> century, social and economic forces such as longer education, lack of stable employment, and later age of parenthood have made the transition into adulthood more complex, and have prolonged entry into adulthood (Smith et al., 2011; Wood et al., 2018). Consequently, emerging adulthood has been conceived as a distinct developmental stage that spans roughly between the ages of 18 to 29 and that is characterized by identity explorations, instability, intensive self-focus, feeling in-between adolescence and adulthood, and a sense of broad possibilities about the future (Arnett, 2000, 2007; Arnett et al., 2014).

The National Center for Education Statistics (NCES; Hussar et al., 2020) reported that 41% of 18- to 24-year-old Americans were entering college in 2018, making it a shared experience for many emerging adults. The 'American college is the emerging adult environment *par excellence*' (Arnett, 2016, p. 219). For instance, students often try out different courses, have a considerable amount of unstructured time, and meet many other people allowing them to obtain a broad range of life experiences (Arnett, 2016). Although emerging adulthood is a positive experience for most (Arnett, 2000), this stage of life is also turbulent with rapid and frequent lifestyle changes leaving many vulnerable to stress and mental

disorders (Arnett et al., 2014; Wood et al., 2018). Moreover, there are challenges that are unique to the college context, such as academic demands, social and family expectations about academic success, and for many balancing part-time work and study (Boni et al., 2018). Sadly, a more recent study indicated that the mental health of U.S. college students has generally deteriorated over the past decade (Duffy et al., 2019). The focus of the present study is on well-being in college-attending emerging adults and the effect of mindfulness, self-compassion, and the new construct caring for bliss.

## Well-being

Well-being seems important during this stage as emerging adults try out new roles and work towards solidifying personal attributes (Tanner, 2016). However, most research on this life stage focuses on predictors of mental disorders, such as depression, anxiety, drug abuse, or eating disorders, while predictors of mental health or well-being are rarely examined (e.g. Low, 2011; Sofija et al., 2020; Winzer et al., 2014). The present study investigated the effect of self-compassion, mindfulness, and caring for bliss on well-being in the form of flourishing and depressive symptoms.

Positive psychologists have emphasized that positive mental health not only implies the absence of mental illness, but also constitutes an entity of its own (Seligman

& Csikszentmihalyi, 2000). For instance, the dual continuum model of mental health (Keyes, 2002) assumes that mental health and mental illness are two separate but correlated dimensions, one involving well-being and one involving symptoms of mental illness. According to this model, well-being ranges from flourishing to languishing and can exist in both the presence and absence of mental illness. While different conceptualizations of flourishing exist, it is generally deemed to reflect living within an optimal range of human functioning associated with goodness, generativity, growth, and resilience (Fredrickson & Losada, 2005; for a review see, Hone et al., 2014). This notion reflects the eudaimonic view of well-being, which is close to the Buddhist view of *sukha* (Dambrun & Ricard, 2011; Wallace, 2005). *Sukha* can be described as flourishing or bliss that transcends the momentary vicissitudes of our emotional states and can be cultivated through specific practices, such as mindfulness and compassion (Rudaz et al., 2020). In contrast to hedonic well-being, eudaimonic well-being is not dependent on external circumstances (Choudry & Vinayachandra, 2015; Ryan & Deci, 2001). Based on theories of universal psychological needs (e.g. Ryan & Deci, 2000; Ryff, 1989; Ryff & Singer, 1998), Diener and colleagues created the Flourishing Scale (Diener et al., 2010) that assesses self-perceived success in important areas of social-psychological functioning such as relationships, self-esteem, purpose, and optimism. Diener et al. (2010) argued that this measure is a good indicator of overall psychological wellbeing.

On the other end of the well-being continuum, languishing represents poor well-being (Keyes, 2002). Languishing individuals describe themselves and their lives as 'hollow' or 'empty' (Keyes, 2002), which is characteristic for individuals with depressive disorders. There is also robust evidence that depression is inversely correlated with psychological well-being (see, Ruini & Cesetti, 2019, for a review) strengthening further the similarity between languishing and depressive symptoms. Given the dual continuum model of mental health, it becomes evident that focusing only on treating or preventing mental illness does not guarantee a mentally healthy population, but that it is crucial to simultaneously know what promotes well-being (e.g. Kobau et al., 2011; Lamers et al., 2015).

### ***Caring for bliss, mindfulness, and self-compassion***

Inspired by writings of the Buddhist monk Thich Nhat Hanh, Rudaz et al. (2020) introduced the concept of caring for bliss to describe active practices or behaviors to cultivate *sukha* or bliss. Specifically, Rudaz et al. (2020) describe bliss as an unlimited, everlasting inner joy that is based on a peaceful state of mind and

a compassionate heart. They further assume that bliss is undisturbed by external circumstances and therefore gives a person the inner resources to deal with the ups and downs of life. Moreover, Rudaz et al. (2020) propose that bliss can be developed by practices designed to generate happiness in the here and now (i.e. by enjoying the wonders of life that are always present such as the blue sky), searching for lasting happiness inside oneself (i.e. by not waiting for outer conditions that have to be attained to be happy such as a perfect job), appreciating what one has (i.e. treasuring what one has in the here and now such as healthy eyes), and following the deepest desires of one's heart (i.e. by asking ourselves what we want to do in our life and whether this will make us truly happy). Since emerging adulthood is a developmental stage characterized by frequent changes and instability (e.g. leaving the parental home, getting to know potential romantic partners, entering the study or work life), caring for bliss may be particularly helpful for emerging adults to build inner strength and stability to deal with different challenges.

As outlined by Rudaz et al. (2020), mindfulness and compassion form the foundation for caring for bliss, which echoes the Buddhist assumption that *sukha* can be achieved through sustained training in mindfulness and compassion, including for the self (Ekman et al., 2005; Ricard, 2011). In Western psychology, mindfulness has been defined by Kabat-Zinn (2015) as 'moment-to-moment, non-judgemental awareness, cultivated by paying attention in a specific way, that is, in the present moment, and as non-reactively and as non-judgmentally and openheartedly as possible' (p. 1481). Because mindfulness increases awareness of habitual or automatic reactions and encourages more adaptive deliberate responses, it is believed to reduce stress and enhance people's well-being (Kang et al., 2013). Self-compassion has been defined by Neff (2003) as 'being kind and understanding toward oneself in instances of pain or failure rather than being harshly self-critical; perceiving one's experiences as part of the larger human experience rather than seeing them as isolating; and holding painful thoughts and feelings in mindful awareness rather than over-identifying with them' (p. 223) and is therefore another possible way to increase well-being.

Emerging adults, and especially those attending college, can benefit from mindfulness and self-compassion as they deal with academic evaluations (e.g. poor grades or failing exams), or broader experiences related to this developmental stage (e.g. rejections in dating situations) that can threaten their self-esteem. Specifically, mindfulness allows one to bring one's awareness back into the present moment, without getting lost in regrets about the past and worries about the future (Kabat-

Zinn, 1990) thus creating space in the mind for new ideas and encouraging exploration and curiosity. Self-compassion on the other hand helps one to deal with personal inadequacies, mistakes, failures, and painful situations without engaging in downward social comparisons in order to think of the self as acceptable (Neff, 2011). It is further important to note, that mindfulness and self-compassion as well as caring for bliss are skills that can be learned. They are not contingent on external circumstances making them especially attractive during the external changes and uncertainties of emerging adulthood.

### ***Relationship between self-compassion, mindfulness, and well-being***

Although the concept of caring for bliss is still in its infancy, the relationship between mindfulness and self-compassion with well-being has already been explored. A growing body of research suggests that mindfulness and self-compassion are associated with more positive affect, less negative affect, and greater life satisfaction, all indicators of subjective or emotional well-being (for reviews see, Keng et al., 2011; Zessin et al., 2015). Also, there is evidence that mindfulness and self-compassion are associated with psychological well-being or flourishing (Satici et al., 2013; Zessin et al., 2015). Moreover, for self-compassion, the relationship with well-being was stronger for psychological well-being relative to emotional well-being (Zessin et al., 2015). On the other hand, there is also evidence that mindfulness and self-compassion are negatively associated with psychopathology, including depressive symptoms (for reviews see, MacBeth & Gumley, 2012; Tomlinson et al., 2018).

### ***The present study***

As college-attending emerging adults face many challenges and are vulnerable to experiencing mental health issues, there is a need to examine what strengthens well-being in this group (Ubharadka, 2019). Mindfulness and self-compassion are skills that can be learned and help to buffer stress and build resiliency and thus they seem particularly important as emerging adults gather new experiences in areas of love, work, and worldviews (Arnett, 2000). Following Buddhist principles, sustained training in mindfulness and (self-) compassion is expected to lead to *sukha*, which refers to flourishing or bliss, or eudaimonic well-being (Rudaz et al., 2020). In addition, Rudaz et al. (2020) describe active practices or behaviors to cultivate bliss. However, they point out that these practices or behaviors should be based on a peaceful state of mind and a compassionate heart. Thus, the present study

sought to investigate whether caring for bliss enhances or buffers the association of mindfulness and self-compassion with well-being in college-attending emerging adults.

To gain a more complete picture of whether caring for bliss works in the same way with respect to positive and negative aspects of well-being, flourishing and depressive symptoms were used as indicators of well-being. Two sets of hypotheses were tested after controlling for age and gender. First, based on findings of Satici et al. (2013), Tomlinson et al. (2018), and Zessin et al. (2015), we hypothesized that higher levels of mindfulness, self-compassion, and caring for bliss are associated with higher flourishing and lower depressive symptoms. Second, we hypothesized that higher levels of caring for bliss enhance the associations of the two predictors, mindfulness and self-compassion, with the outcomes of flourishing and depressive symptoms.

## **Method**

### ***Participants***

Participants ( $N = 683$ ) were undergraduate students who were recruited at Florida State University from a course that satisfied a university-wide liberal studies requirement. Participation in the study required completing an online survey that was part of a larger study to examine the mental, physical, spiritual, and relational well-being and took approximately 60 minutes to complete. People younger than 18 years (one participant) or older than 29 years (seven participants) were excluded from the analysis resulting in a sample of 683 participants falling in the age range of 18 to 29 years, which defines emerging adulthood according to Arnett et al. (2014). Ethical approval for the study was obtained from the local Institutional Review Board.

The mean age of participants was 20.01 years ( $SD = 1.33$ ; range: 18–29). Of the 683 participants, 637 (93.3%) were female, 43 (6.3%) were male, one (0.1%) was transgender male, and two (0.3%) were other or preferred not to say. Regarding racial background, 70.3% identified as White or Caucasian or European American, 12.9% as Latino or Hispanic, 10.5% as African American or Black, 3.2% as Asian or Pacific Islander, 0.7% as Middle Eastern, 0.3% as American Indian or Native American or Alaska Native, and 2.0% preferred not to say.

### ***Measures***

#### ***Mindfulness***

Mindfulness was measured with the 5-item Mindful Attention Awareness Scale (MAAS; Osman et al., 2016) that measures the general tendency to be attentive to

and aware of what is taking place in the present-moment in daily life. The items (e.g. 'I rush through activities without being really attentive to them.') were rated on a 6-point scale ranging from 1 (almost always) to 6 (almost never). All items were reverse-coded and then a mean score was calculated with higher scores reflecting higher levels of mindfulness (Cronbach's  $\alpha = .92$ ).

### **Self-compassion**

The 12-item Self-Compassion Scale-Short Form (SCS-SF; Raes et al., 2011) was used to measure how one typically acts towards oneself in difficult times. Items (e.g. 'When I'm going through a very hard time, I give myself the caring and tenderness I need.') were rated on a 5-point scale ranging from 1 (almost never) to 5 (almost always). Half of the items were reverse-coded and then a mean score was calculated with higher scores indicating higher levels of self-compassion (Cronbach's  $\alpha = .74$ ).

### **Caring for bliss**

The Caring for Bliss Scale (CBS; Rudaz et al., 2020) consists of 4 items measuring aspects of generating feelings of happiness in the here and now, searching for lasting happiness inside oneself, appreciating what one has, and following the deepest desires of one's heart. The items (e.g. 'I listen deeply to my heart') were rated on a 5-point scale ranging from 0 (never) to 4 (regularly). A mean score was calculated with higher scores indicating higher levels of caring for bliss (Cronbach's  $\alpha = .88$ ).

### **Flourishing**

The 8-item Flourishing Scale (FS; Diener et al., 2010) was used to measure aspects of human functioning ranging from positive relationships, to feelings of competence, to having meaning and purpose in life. Items (e.g. 'I am engaged and interested in my daily activities') were rated on a 7-point scale ranging from 1 (strongly disagree) to 7 (strongly agree). A summed score was calculated with higher scores indicating higher levels of flourishing (Cronbach's  $\alpha = .95$ ).

### **Depressive symptoms**

Depressive symptoms were measured with 7 items of the depression subscale of the Depression Anxiety Stress Scale (DASS-21; Lovibond & Lovibond, 1995). Items (e.g. 'I couldn't seem to experience any positive feeling at all') were rated over the past week on a 4-point scale ranging from 0 (did not apply to me at all) to 3 (applied to me very much, or most of the time). All items were summed and multiplied by two with higher scores indicating higher levels of depressive symptoms (Cronbach's  $\alpha = .92$ ).

## **Statistical analysis**

Ordinary least squares (OLS) regression analysis and R (R Core Team, 2020) were used to assess the moderating role of caring for bliss in young adults. Two models were estimated, both using mindfulness and self-compassion as predictor variables and age and gender (coded  $-1$  for males and  $1$  for females) as control variables. Model 1 had flourishing and model 2 had depressive symptoms as the outcome. The predictor variable and the moderator were mean-centered prior to the analyses (Aiken & West, 1991) and then multiplied to form the interaction terms. Significant interactions were graphically illustrated for low and high levels of caring for bliss. Low caring for bliss was defined as one standard deviation (*SD*) below the mean and high caring for bliss was defined as one *SD* above the mean. The R package interactions was used to generate the graphs with 95% confidence intervals and for simple slopes analysis (Long, 2019). Using an alpha level of  $.05$  and a power level of  $.80$ , the current sample size of 683 emerging adults allows the detection of an incremental effect of as small as  $f^2 = .012$  (GPower; Erdfelder et al., 1996).

## **Results**

### **Descriptive statistics**

Table 1 presents the product-moment correlations among the study variables and the descriptive statistics. No correlations were found for age. Besides that, all correlations with depressive symptoms were negative. In addition, all correlations were medium in size, with the exception of the correlations of flourishing with caring for bliss and flourishing with depressive symptoms, which were large in size.

### **Moderation analysis**

The results of the two moderation models with self-compassion and mindfulness as predictor variables, caring for bliss as moderator and flourishing and depressive symptoms as outcomes, controlling for age and gender, are provided in Table 2.

### **Flourishing**

As expected, the associations of mindfulness, self-compassion, and caring for bliss with flourishing were all positive though only the associations with mindfulness and caring for bliss were significant. Further, the two interaction effects, mindfulness with caring for bliss and self-compassion with caring for bliss, were statistically significant, indicating that the associations between mindfulness and flourishing as well as between



**Table 1.** Correlations, means, standard deviations, and empirical ranges for the study variables.

Variable	1	2	3	4	5	6
1. Age	-					
2. Mindfulness	-.01	-				
3. Self-compassion	.07	.38	-			
4. Caring for bliss	.02	.36	.45	-		
5. Flourishing	-.01	.31	.33	.58	-	
6. Depressive symptoms	-.01	-.33	-.37	-.40	-.52	-
<i>M</i>	20.01	3.53	3.08	2.75	45.78	9.09
<i>SD</i>	1.33	1.04	0.53	0.84	8.49	8.77
Empirical Range	18–29	1–6	1–5	0–4	8–56	0–42

*M* = Mean; *SD* = Standard deviation; Possible range: 1–6 for mindfulness, 1–5 for self-compassion, 0–4 for caring for bliss, 8–56 for flourishing, and 0–42 for depressive symptoms.

All correlations were significant with  $p < .001$  (2-tailed) except for age.

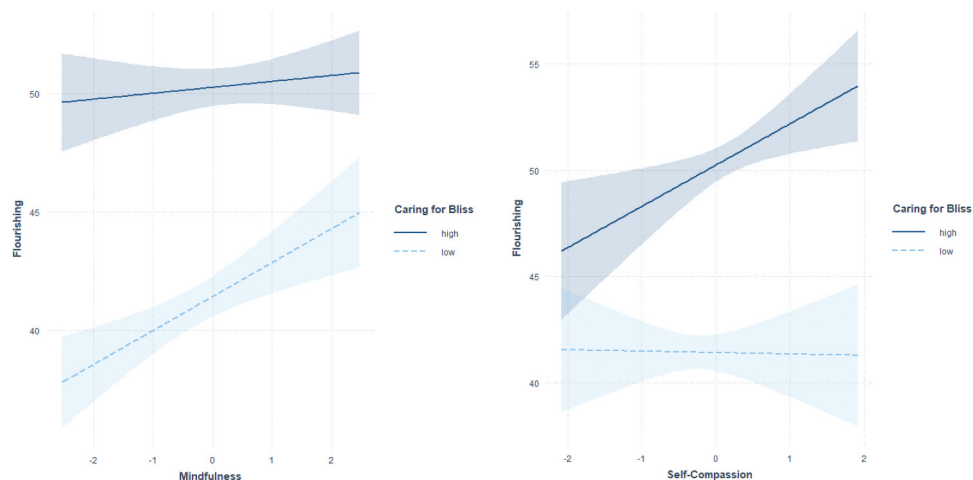
self-compassion and flourishing were moderated by the level of caring for bliss. Figure 1 illustrates the relationships between mindfulness and flourishing as well as between self-compassion and flourishing for low caring for bliss and high caring for bliss. Flourishing was high in

**Table 2.** Moderated regression analyses for flourishing and depressive symptoms.

Predictor	Flourishing		Depressive Symptoms	
	<i>b</i>	<i>SE</i>	<i>b</i>	<i>SE</i>
Age	–0.15	0.20	0.03	0.22
Gender	0.75	0.53	–1.02	0.61
Mindfulness	0.85**	0.28	–1.46***	0.32
Self-compassion	0.93	0.57	–3.27***	0.66
Caring for bliss	5.24***	0.36	–2.50***	0.41
Mindfulness x Caring for bliss	–0.70*	0.30	0.84*	0.35
Self-compassion x Caring for bliss	1.19*	0.56	–0.35	0.64
Intercept	48.08***	3.95	9.09*	4.52
<i>R</i> <sup>2</sup>	.37		.23	
<i>F</i> (7, 672)	55.48***		28.97***	

Mindfulness, self-compassion, and caring for bliss were mean-centered prior to the analysis.

\* $p < .05$ . \*\* $p < .01$ . \*\*\* $p < .001$  (2-tailed).

**Figure 1.** Regression lines with 95% confidence intervals showing the moderating effect of caring for bliss on the relationship between mindfulness and flourishing and between self-compassion and flourishing. Low caring for bliss is defined as 1 standard deviation (*SD*) below the mean and high caring for bliss is defined as 1 *SD* above the mean.

individuals reporting high mindfulness or high self-compassion together with high caring for bliss. Flourishing was also high when mindfulness was low and caring for bliss was high. Flourishing was low in individuals where both mindfulness and caring for bliss were low or when self-compassion was low. Simple slope analysis revealed that the association between mindfulness and flourishing was significant for low caring for bliss ( $b = 1.44$ ,  $SE = 0.40$ ,  $p = .00$ ) but not for high caring for bliss ( $b = 0.25$ ,  $SE = 0.36$ ,  $p = .49$ ). In contrast, the association between self-compassion and flourishing was significant for high caring for bliss ( $b = 1.94$ ,  $SE = 0.72$ ,  $p = .01$ ) but not for low caring for bliss ( $b = -0.07$ ,  $SE = 0.77$ ,  $p = .93$ ). None of the control variables were statistically significant. The total explained variance was 37%.

### Depressive symptoms

As expected, the associations of mindfulness, self-compassion, and caring for bliss with depressive symptoms were all negative and statistically significant. Further, the interaction effect for mindfulness and caring for bliss was statistically significant, indicating that the association between mindfulness and depressive symptoms was moderated by the level of caring for bliss. Figure 2 shows the interaction effect between mindfulness and depressive symptoms for low caring for bliss and high caring for bliss. Depressive symptoms were low in individuals reporting high mindfulness and when mindfulness was low but caring for bliss was high. Depressive symptoms were high in individuals where both mindfulness and caring for bliss were low. The association between mindfulness and depressive symptoms was significant for low caring for bliss ( $b = -2.17$ ,

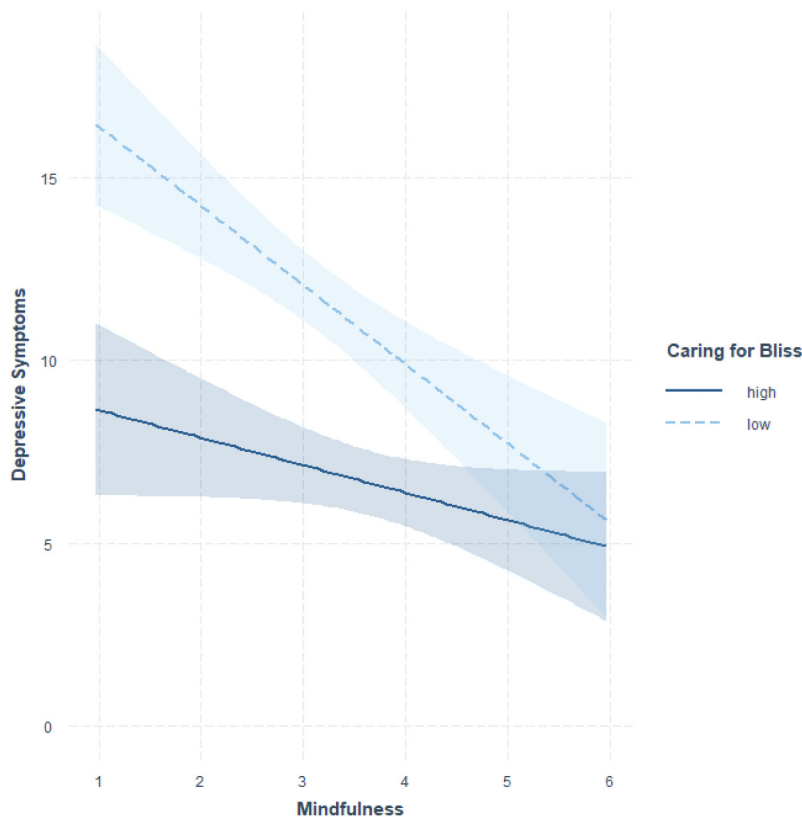
$SE = 0.46, p = .00$ ) but not for high caring for bliss ( $b = -0.75, SE = 0.41, p = .07$ ). None of the control variables were statistically significant. The total explained variance was 23%.

## Discussion

A central concern of the positive psychology movement has been to research the strengths that contribute to human flourishing or well-being (Seligman & Csikszentmihalyi, 2000). Flourishing generally means living within an optimal range of human functioning, one that connotes goodness, generativity, and growth (Hone et al., 2014). This is similar to the eudaimonic approach to well-being or the Buddhist view of *sukha*, or bliss (Rudaz et al., 2020). According to Buddhism, *sukha* can be cultivated through sustained training in mindfulness and (self-)compassion and these skills may be particularly useful during emerging adulthood, a period characterized by frequent and rapid lifestyle changes, which can make emerging adults vulnerable to stress and mental disorders (Arnett et al., 2014). In addition, Rudaz et al. (2020) proposed active practices or behaviors to cultivate inner joy or genuine happiness which could further help to strengthen the

relationship between mindfulness and self-compassion with well-being during this developmental stage. Because many emerging adults share the college experience (Hussar et al., 2020), which has its own unique stressors such as academic demands and pressure to perform (Boni et al., 2018), the present study focused on this group.

Given these observations, the present study examined the moderating role of caring for bliss on the effect of mindfulness and self-compassion on well-being in college-attending emerging adults using flourishing and depressive symptoms as positive and negative indicators of well-being. The findings showed that caring for bliss moderated the effect for mindfulness and self-compassion on flourishing, though in opposite directions. Specifically, caring for bliss enhanced the positive effect of high self-compassion on flourishing and compensated for the effect of low mindfulness on flourishing. The effect on depressive symptoms showed a different pattern in that caring for bliss moderated only the association between mindfulness and depressive symptoms by buffering the effect of low mindfulness. No significant moderation emerged for caring for bliss for the association between self-compassion and depressive symptoms.



**Figure 2.** Regression lines with 95% confidence intervals showing the moderating effect of caring for bliss on the relationship between mindfulness and depressive symptoms. Low caring for bliss is defined as 1 standard deviation (*SD*) below the mean and high caring for bliss is defined as 1 *SD* above the mean.

As expected, caring for bliss enhanced the effect of high self-compassion on flourishing, but contrary to expectation, caring for bliss did not amplify the effect of high mindfulness on flourishing (though it compensated for the effect of low mindfulness on flourishing). This finding may be because mindfulness was measured in this study as mindful attention and awareness or, as pointed out by others, as general inattention (Van Dam et al., 2010). Future studies may examine mindfulness more holistically and assess different aspects of mindfulness, including cognitive, attitudinal, social, and ethical (Grossman, 2010) in order to evaluate fully the moderating role of caring for bliss on the effect of mindfulness on well-being. The finding that caring for bliss buffered the negative effect of low mindfulness on depressive symptoms demonstrates that caring for bliss can have a positive effect not only on positive aspects of well-being but also negative aspects. However, we have no plausible explanation for why caring for bliss did not moderate the effect of self-compassion on depressive symptoms.

### Strengths and limitations

The strengths of the current study are the examination of caring for bliss as a new concept to foster human flourishing in college-attending emerging adults and the inclusion of a positive and a negative indicator of well-being. There are also some limitations that warrant further investigation. The sample consisted of college-attending emerging adults with an average age of 20 years thereby limiting the generalization of findings to emerging adults outside the university context. As pointed out by Arnett (2016) some of the distinctive characteristics of college-attending emerging adults are that they tend to be from higher socioeconomic status families and that they are predominantly White and female. While we did not collect information on the socioeconomic status, our sample was also predominantly White and female, corresponding to the specificity of this group described above. Although we controlled for gender, future studies could test whether the effects differ across gender. For instance, there is evidence that the components of self-compassion had a different impact on psychological well-being among adolescents: Boys benefited more from mindfulness and girls more from common humanity (Sun et al., 2016).

Moreover, as noted earlier, mindfulness in this study referred to the general tendency to be attentive and aware of what is taking place in the present moment. As outlined by others, Buddhism-derived mindfulness is more complex (Grossman, 2010). In future studies, it would be interesting to assess mindfulness with broader

measures such as the Freiburg Mindfulness Inventory (FMI; Buchheld et al., 2001; Walach et al., 2006) or the Five Facet Mindfulness Questionnaire (FFMQ; Baer et al., 2006). Finally, the results were based on self-report surveys, which may have led to potential biases in responses.

### Conclusion

Although further studies are needed to explore the role of caring for bliss on the effect of mindfulness and self-compassion on well-being, the present study provided evidence that caring for bliss seems to foster well-being in the form of flourishing in college-attending emerging adults. Caring for bliss also buffered the effect of low mindfulness on depressive symptoms, but no moderating effect was found for self-compassion. Given the need to find ways to strengthen well-being in college-attending emerging adults, the present findings are encouraging because mindfulness, self-compassion, and caring for bliss are skills that can be trained and are not contingent on external circumstances. Although there is an increasing effort to offer college students mindfulness and compassion trainings (e.g. Chiodelli et al., 2020; Dawson et al., 2020), based on the current findings, it would be worthwhile to integrate caring for bliss practices in existing trainings to give college-attending emerging adults another tool to deal with the vicissitudes of this developmental period. The findings of the present study highlight the importance of caring for bliss as a new human strength in college-attending emerging adults. It is hoped that further studies will continue to creatively integrate and explore the concept of caring for bliss and its impact on well-being.

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### Disclosure statement

No potential conflict of interest was reported by the author(s).

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