



# Christians Have More Self-Compassion Than Atheists—But Also More Grandiose (Not Fragile) Narcissism

Michael W. Magee<sup>1</sup>

Accepted: 24 June 2025

© The Author(s), under exclusive licence to Springer Science+Business Media, LLC, part of Springer Nature 2025

## Abstract

This exploratory study investigates how self-compassion, grandiose narcissism, fragile narcissism, and shame differ among a sample comprising self-identified Christians ( $n = 303$ ) and atheists ( $n = 328$ ). Christians reported significantly higher levels of self-compassion and grandiose narcissism, suggesting a unique psychological profile in which religious belief may simultaneously support self-kindness and moral or spiritual self-enhancement. In contrast, no significant group differences emerged for fragile narcissism or shame, perhaps implying these more covert vulnerabilities are not strongly associated with religious affiliation. Competing theoretical interpretations for these findings are discussed, alongside practical implications for pastoral counseling, therapy, and spiritual care. Interventions aimed at fostering humility and differentiation of self may help buffer against grandiose tendencies in religious contexts, while secular approaches to cultivating self-compassion may benefit nonreligious individuals. These findings underscore the importance of tailoring psychological support to individuals' belief systems, values, and emotional needs rather than assuming uniform effects of religiosity or secularism.

**Keywords** Atheists · Christians · Fragile narcissism · Grandiose narcissism · Shame

Over the last two decades, the study of self-compassion has seen remarkable growth, with over 4,000 journal articles and dissertations highlighting its significant benefits for psychological and physical well-being (Neff, 2004, 2022; Neff & Germer, 2022; see also Phillips & Hine, 2019; Zessin et al., 2015). Despite this, there is a paucity of research exploring how self-compassion is represented in religious relative to nonreligious populations. Additionally, the intricate relationships self-compassion shares with both grandiose and fragile narcissism (Barnett & Flores, 2016; Barry et al., 2015; Goodwin & Luchner, 2023), the strong association fragile narcissism has with shame (Hendin & Cheek, 1997; van Schie et al., 2021; Wright et al., 1989), and the ever-growing body of work showing that self-compassion interventions are effective at reduce feelings of shame (Johnson & O'Brien, 2013; Neff, 2022; Smeets et al., 2014) prompted an investigation into these constructs as well. This exploratory study investigates how self-compassion, grandiose narcissism, fragile narcissism, and

---

✉ Michael W. Magee  
mwmagee@sjny.edu

<sup>1</sup> Department of Psychology, St. Joseph's University, Brooklyn, NY, USA

the experience of shame differ, if at all, in a sample comprising self-identified Christians and atheists. Before reviewing the literature on each of these constructs and their connection to religiosity, a short summary of the literature on atheists and Christians follows.

## Atheists

Even though atheists enjoy open acceptance in secular European nations, especially those with low religiosity levels such as Denmark, Sweden, and the Czech Republic (Zuckerman, 2007); even though the number of nonreligious is increasing in America (Fischer & Hout, 2006); and even though the majority of Americans say it is not necessary to believe in God in order to be moral and have good values (Pew Research Center, 2023), anti-atheist prejudice remains globally prevalent (Gervais et al., 2017) and is particularly prominent in the United States (Gervais, 2011, 2013; Gervais et al., 2017; Magee & Hardin, 2010; see also Jacoby, 2004)—especially among those who see who see religious beliefs as central to identity (Hughes et al., 2015)—where strong negative stereotypes lead to anti-atheist discrimination (Dawkins, 2006; Dennett, 2006; Gervais, 2013, 2014; Goodman & Mueller, 2009; Grove et al., 2019; Harper, 2007). In fact, stereotypes about atheists contribute to their marginalization in religiously dominant societies like the United States (Moon et al., 2021). Today, atheists—the fourth largest religious group worldwide—remain one of the most stigmatized and least accepted groups in America, outranking Muslims, homosexuals, and recent immigrants as the group least likely to share the vision of American society (Edgell et al., 2006; Jones, 2007). Though, no doubt multiply determined, it has been suggested that anti-atheist prejudice is rooted in moral distrust rather than simple religious in-group favoritism (Moon et al., 2021). And there is evidence that perceptions of an atheistic tendency to engage in analytic thinking may also contribute to social perceptions of atheists as outsiders (Pennycook et al., 2016). Regardless, there is little doubt that atheists are considered immoral, rebellious, nonconformist, cynical, untrustworthy, independent, impulsive, problematic, joyless, skeptical, and self-interested; they are also associated with elitism, individualism, materialism, and consumerism (Caldwell-Harris, 2012; Edgell et al., 2006; Gervais, 2011, 2014; Gervais et al., 2011, 2017; Rowatt & Al-Kire, 2021; Ståhl, 2021), and, in America, atheists are intuitively connected to immoral acts like serial murder, consensual incest, necrobstantiality, and cannibalism (Gervais, 2014). And perhaps most perplexing, even atheists themselves have even been shown to harbor anti-atheist prejudice (Gervais et al., 2017). In fact, the negative cultural stereotypes about atheists are so pervasive that Moon et al., (2021) asked, *Is there anything good about atheists?* Indeed, there is.

Contrary to common prejudices and cultural stereotypes, from an empirical perspective, atheists seem particularly well suited to being one's neighbors and friends. Atheists tend to be male, married, and notably high in both intelligence and educational attainment, with overrepresentation in academia and science (Beit-Hallahmi, 2007; Caldwell-Harris, 2012; Hunsberger & Altemeyer, 2006; Lynn et al., 2009). Atheists tend to score higher on measures of open-minded thinking and are more likely to engage in analytical thinking than religious folks (Pennycook et al., 2014, 2016), are described as open to experience, intellectually inclined (Shermer, 1999), and particularly well adjusted (Galen, 2009). Beit-Hallahmi (2007) notes that atheists tend to be less authoritarian, less suggestible, less dogmatic, and less prejudiced while also being more tolerant, law-abiding, compassionate, conscientious, and well educated. And despite negative stereotypes, atheists are sometimes perceived as more competent than religious individuals (Moon et al., 2021).

## Christians

Regardless of what anyone might think about the post-World War II expansion of religious pluralism in America, no one can deny that Christianity has been a dominant force in shaping American values, ethics, and national identity (Herberg, 1960). So, it is perhaps not surprising that Christians are regarded with greater positivity both culturally and in the scientific literature than are atheists (e.g., Caldwell-Harris, 2012; Gervais, 2013; Pew Research Center, 2014). In general, religious people are stereotyped as conservative, tradition-loving, and future oriented (Grove et al., 2019; Moon et al., 2021). Specifically, Christians are associated with global prosociality, respect for cultural differences, and cultural openness (Zhang et al., 2021), are viewed as community-oriented and morally upright (Hunsberger & Altemeyer, 2006), and are often characterized by their strong commitment to family and community values (Graham & Haidt, 2010). Christianity has been shown to strengthen relational connections (Graham & Haidt, 2010; Saroglou, 2010; Ysseldyk et al., 2010), fulfill attachment needs (Gebauer & Maio, 2012; Granqvist et al., 2010), and reduce existential anxiety (Jonas & Fischer, 2006; Vail et al., 2010). And although the relationship that religion has with psychological well-being is mixed (Dezutter et al., 2006; Galen, 2012), Christian practices, such as prayer and church attendance, are associated with reduced levels of depression and anxiety (Chen et al., 2020; Garssen et al., 2023; Koenig, 2012). Christians themselves often report high levels of life satisfaction and self-esteem (Diener & Clifton, 2002; Diener et al., 1999; Hackney & Sanders, 2003; Szcześniak & Timoszyk-Tomczak, 2020). However, Christianity's relationship with intolerance and prejudice is pronounced and complex. While Christian doctrine teaches love and acceptance, heightened religiousness, which can be driven by conservative values and traditional beliefs, can correlate with increased prejudice towards minority out-groups like gay men, lesbian women, the nonreligious, and atheists, whom Christians mistrust (Altemeyer, 2003; Grove et al., 2019). Differences aside, some research has shown that atheists and Christians respond similarly on measures of sociality, joviality, emotional stability, happiness, compassion, and empathic concern (Caldwell-Harris et al., 2012).

## Self-compassion

Self-compassion, with its roots in Buddhist psychology, involves being kind and supportive towards oneself during challenging times, much like one would be for a loved one in distress (Neff, 2004, 2022), and comprises three fundamental components: mindfulness, common humanity, and self-kindness (Neff, 2003a, 2003b, 2022). Mindfulness fosters self-awareness, enabling us to observe our distress without being overwhelmed by it. Common humanity helps us with the simple acknowledgement that suffering is a shared human experience, which reduces feelings of isolation. And, finally, we learn to treat ourselves with self-kindness with the same tenderness that we would treat a dear friend, encouraging ourselves with empathy and forgiveness rather than harsh self-criticism. That said, self-compassion is not *just* about self-kindness; there is also a fierce variety that involves assertiveness and standing up for oneself (Neff, 2021).

Research on self-compassion has exploded over the past two decades (Neff, 2003b; for a review, see Neff, 2022), highlighting its substantial benefits for mental and physical well-being. Most studies on self-compassion rely on self-reports of dispositional or trait self-compassion, often measured by the Self-Compassion Scale (SCS), a 26-item assessment that evaluates one's natural inclination to respond to life's challenges with self-compassion along

six subgroups (mindfulness vs. over-identification, common human vs. isolation, and self-kindness vs. self-judgment; Neff, 2003a, 2022). Higher trait self-compassion is consistently linked to myriad positive mental health outcomes and improved well-being, especially in those diagnosed with psychopathology (Zessin et al., 2015). Individuals with higher levels of self-compassion experience *higher* levels of happiness, optimism, body satisfaction, self-worth, emotion-focused coping strategies, emotional intelligence, and life satisfaction and *lower* anxiety, burnout, caregiver burnout, depression, and stress along with reduced tendencies towards disordered eating and body image concerns (Fong & Loi, 2016; Heffernan et al., 2010; Hollis-Walker & Colosimo, 2011; Krieger et al., 2013; Lloyd et al., 2019; Neff, 2004, 2022; Neff & Germer, 2022; Neff et al., 2005; Neff & Vonk, 2009; Stauber & Stutts, 2021; Turk & Waller, 2020), reduced burnout (Gerber & Anaki, 2021), reduced suicidal thoughts, reduced self-harm rates, and increased resilience, especially in trauma survivors (Cleare et al., 2019; Germer & Neff, 2015). These benefits are evident in both nonclinical and clinical populations, where conditions such as bipolar disorder, generalized anxiety disorder, substance use disorder, persecutory delusions, and schizophrenia often show lower levels of self-compassion compared to the general population (Athanasakou et al., 2020; Krieger et al., 2013; Turk & Waller, 2020; Zessin et al., 2015).

Self-compassion practice and training and experimental interventions have also been shown to effectively enhance well-being and resilience. Self-compassion interventions have demonstrated significant increases in mindfulness, and life satisfaction and reduced stress, depression (Neff & Germer, 2018; Smeets et al., 2014), self-criticism, and psychological distress (Kirby, 2017). Self-compassion interventions have also been shown to serve as a buffer against depression (Shapira & Mongrain, 2010) and the crippling symptoms of post-traumatic stress disorder, especially in clinical populations (Luo et al., 2021). Those who practice self-compassion are more likely to stand up against injustice, advocate for themselves and others, and engage in meaningful activism (Neff, 2021). Self-compassion has been linked to better medical adherence, potentially due to lower stress (Sirois & Hirsch, 2019). Longitudinal studies indicate that individuals with higher baseline self-compassion experience fewer negative emotions and better mental health over time (Stutts et al., 2018), as well as reduced psychopathology and loneliness (Lee et al., 2021). Experimentally, self-compassion interventions, like compassion-focused therapy, significantly reduce depressive symptoms, anxiety, and stress and lead to notable improvements in psychopathology by reducing self-judgment and isolation while enhancing mindfulness and feelings of common humanity (Craig et al., 2020; Ferrari et al., 2018). Even short self-compassion interventions have been found to increase personal growth, self-efficacy, and healthy impulse-control while showing reductions in self-judgment, habitual negative self-directed thinking, anxiety, and depression (Dundas et al., 2017). All said, some results have been mixed. Wilson et al., (2019) found that, when compared to a control condition, self-compassion-related therapies successfully increased self-compassion and reduced levels of depression and anxiety with medium effect sizes; however, they also found that self-compassion-related therapies did not produce better outcomes than active control conditions.

## Self-compassion in religious and nonreligious contexts

It is reasonable to assume that self-compassion manifests differently in the religious and the nonreligious. However, at the time of writing, no research specifically examining the relationship between atheists (or the nonreligious) and self-compassion could be found.

That said, higher levels of spiritual experience and satisfaction are associated with higher self-compassion in diverse samples from around the world (Akin & Akin, 2017; Birnie et al., 2010; Ghorbani et al., 2017). Religious teachings ostensibly promote self-compassion through the practices of forgiveness and humility, and, because Christian doctrines encourage self-forgiveness and compassion as integral to spiritual life, self-compassion can be enhanced by fostering a supportive community that encourages a compassionate mindset (Neff, 2022; Zessin et al., 2015). Moreover, self-compassion has been shown to mediate the relationship between religion/spirituality and mental health (Bodok-Mulderij et al., 2023). Some have even argued that the practice of mindful self-compassion could and should be considered a Christian spiritual discipline (Wilhoit, 2019).

Among Christians, self-compassion has been found to be negatively correlated with dimensions of perfectionistic self-presentation and positively associated with perceptions of forgiveness and support. Brodar et al. (2015) found that Christians with low self-compassion exhibited significantly higher perfectionistic self-presentation, including a greater reluctance to both display and disclose imperfections, compared to the high self-compassion group. Brodar et al. (2015) also found that Christians with lower levels of self-compassion were less inclined to perceive support from their Christian community. Higher levels of self-compassion are also linked to reduced shame and less tendency to isolate oneself after failure among Christian clergy (Barnard & Curry, 2012).

## Narcissism and self-enhancement in christians and atheists

Narcissism is a complex personality trait marked by intense self-focus, lack of empathy, lack of self-soothing, insatiable need for admiration, pervasive grandiosity, self-enhancement, and a history of aggressive and socially undesirable behaviors that, in extreme cases, can be pathological. Narcissism appears more often in men than in women (American Psychiatric Association, 2013; Foster et al., 2003; Gustafson & Ritzer, 1995; Miller et al., 2017; Raskin & Terry, 1988; Ronningstam, 2009). With prevalence rates on the rise (Twenge et al., 2008), research over the past several decades has identified at least two distinct forms: grandiose narcissism (also known as overt narcissism) and fragile narcissism (also referred to as vulnerable or covert narcissism) (Koepernik et al., 2022; Miller et al., 2017; Wink, 1991). Grandiose narcissists are typically characterized by high levels of extroversion, self-assurance, exhibitionism, and aggression (Miller et al., 2011). In contrast, fragile narcissists are more about inferiority than superiority (Koepernik et al., 2022). Fragile narcissism is strongly associated with shyness, introversion, defensiveness, anxiety, hyper-reactivity to life's oversights or unfulfilled expectations from others, vulnerability to life's traumas, and particularly shame (Brookes, 2015; Hendin & Cheek, 1997; Ronningstam, 2009; Thomaes et al., 2007). However, to better understand how narcissism is represented in the religious (and the nonreligious), one must engage with the self-enhancement literature because Christians have been shown to self-enhance (Gebauer et al., 2017; Sedikides & Gebauer, 2021).

Self-enhancement involves an inflated view of oneself, particularly in aspects central to one's self-identity, and aligns closely with the traits of grandiose narcissism. In fact, grandiose narcissism has been operationalized as self-enhancement (Gebauer et al., 2017). One specific manifestation of self-enhancement that also aligns with narcissism is the "better-than-average effect," where individuals consistently

rate themselves as better than the average person on desirable traits and abilities (Sedikides & Gebauer, 2021). This effect aligns with the characteristics of grandiose narcissism, which involves self-perceptions of superiority and inflated self-worth. The better-than-average effect is indicative of grandiose narcissism because it reflects individuals' tendency to view themselves as exceptional and superior to others, reinforcing the connection between self-enhancement and narcissistic traits (Alicke & Govorun, 2005; Sedikides & Gebauer, 2021).

Although some have argued that Christianity has an ego-quieting function (Haidt, 2012; Leary, 2004; Sedikides & Gebauer, 2010, 2021), investigations into self-enhancement among Christians have demonstrated that, even within communities traditionally oriented towards humility, self-enhancement tendencies can be prevalent, especially in religious contexts that promote humility and self-effacement (Gebauer et al., 2017; Sedikides & Gebauer, 2021). Gebauer et al. (2017), showed that Christians, compared to nonbelievers, exhibited stronger narcissism and stronger self-enhancement in domains central to their religious self-concept, such as adherence to Christian commandments. This is perhaps not surprising as expressions of narcissism or self-enhancement can sometimes align with Christian identity, enhancing a positive self-view that resonates with their valued membership within the community. This enhancement may include boosting their self-concept around virtues promoted by their faith, such as compassion and morality, which align with the community's values (Hermann & Fuller, 2017).

Atheists, on the other hand, may exhibit traits that are *perceived* as narcissistic or self-enhancing (Dubendorff & Luchner, 2017). This perception often arises from a nonconformist stance towards mainstream religious ideologies. Atheists typically reject not only spiritual and religious beliefs but also the accompanying traditional moral codes, viewing them as arbitrary. This rejection is often interpreted by others as a form of narcissistic self-enhancement whereby atheists may consider themselves intellectually superior for not adhering to what they regard as 'illogical' religious beliefs (Caldwell-Harris et al., 2011; Dubendorff & Luchner, 2017). However, these attitudes toward atheists are in opposition to research showing higher levels of grandiose narcissism in the religious than in the nonreligious in America (Hermann & Fuller, 2017).

## Shame

Shame is a powerful, multifaceted emotion encompassing feelings of inadequacy, unworthiness, and self-reproach (Andrews et al., 2002; Kim et al., 2011). Shame involves a negative evaluation of the entire self (as opposed to guilt, which involves the negative evaluation of a particular behavior), and it often exacerbates psychological distress and undermines emotional well-being (Johnson & O'Brien, 2013). If left unchecked, shame can have debilitating effects on psychological and physical well-being as it contributes to a range of psychological conditions such as anxiety, chronic stress, and violence, but shame is perhaps most substantially associated with depression and depressive symptoms (Andrews et al., 2002; Gilligan, 2003; Kim et al., 2011; Orth et al., 2006; Siwik et al., 2021; Tracy & Robins, 2004; Webb et al., 2007). Rumination, an underlying cognitive component of shame (Orth et al., 2006), has been shown to mediate the negative association between self-compassion and depression (Krieger et al., 2013).

## The relationship between, self-compassion, narcissism, and shame

Shame is directly related to narcissism—particularly fragile narcissism (van Schie et al., 2021)—and indirectly related to self-compassion (Barnett & Flores, 2016; Neff, 2003b; Thomaes et al., 2008; Wright et al., 1989). In fact, the indirect relationship between self-compassion and shame is so reliable that self-compassion has been called the antidote to shame (Neff & Germer, 2012). Individuals experiencing high levels of shame typically report lower levels of self-compassion, which underscores a cycle in which highly self-critical individuals find it challenging to treat themselves with kindness and understanding, often exacerbating their emotional distress (Gilbert & Procter, 2006). Germer (2009) suggests that the nurturing quality of self-compassion allows individuals to accept and forgive themselves, which in turn reduces the harsh self-judgment that undergirds shame. This potent relationship between self-compassion and reduced shame suggests potential pathways for therapeutic interventions that are particularly effective in mitigating the detrimental effects of shame (Leary et al., 2007). The connection between shame and narcissism, especially its fragile subtype, is also well documented (van Schie et al., 2021; Wright et al., 1989). Fragile narcissists, hypersensitive to criticism and likely to experience feelings of shame, often struggle with self-compassion and maintaining healthy social interactions. This sensitivity to shame can exacerbate the maladaptive defense mechanisms typical of narcissistic personality disorder, further complicating their psychological distress (Dickinson & Pincus, 2003; Hendin & Cheek, 1997). For people with high levels of shame and self-criticism, taking part in self-compassion programs has been found to have significant positive effects on depression, self-criticism, and shame (Gilbert & Procter, 2006; Neff & Germer, 2012). Additionally, self-compassion has been shown to mediate the relationship between narcissism and school burnout (Barnett & Flores, 2016) and moderate the relationship between vulnerable narcissism and coping strategies related to withdrawal and the attack self (Gu & Hyun, 2021).

### Purpose of the present study

This exploratory study is designed to examine any possible differences between Christians and atheists regarding their trait levels of self-compassion, grandiose narcissism, fragile narcissism, and shame. Given the paucity of prior research explicitly comparing these two groups on these constructs, apart from grandiose narcissism (Gebauer et al., 2017), no clear predictions emerge. Nevertheless, there do seem to be some plausible competing hypotheses. For a start, Christians might report higher levels of self-compassion due to supportive religious teachings emphasizing forgiveness, community belonging, and divine acceptance (Neff, 2022; Zessin et al., 2015). Alternatively, atheists might report higher levels of self-compassion because they are less burdened by religious doctrines emphasizing moral guilt and self-criticism (Exline et al., 2011; Galen, 2012; Johnson & O'Brien, 2013) as their greater cognitive reflection may reduce reliance on intuitive moral judgments shaped by religious teachings, potentially buffering them from the guilt and self-criticism more common among religious individuals (Pennycook et al., 2016). Regarding grandiose narcissism, on the one hand, Christians might exhibit higher levels due to feelings of moral or spiritual superiority fostered within religious communities (Gebauer et al., 2017; Hermann & Fuller, 2017; Sedikides & Gebauer, 2021; Vonk & Visser, 2020). On the other hand, atheists might exhibit higher levels of grandiose

narcissism due to societal stereotypes linking atheism to intellectual superiority or elitism (Dubendorff & Luchner, 2017). Similarly, fragile narcissism might be higher among Christians as religious communities often encourage introspection and self-monitoring, potentially heightening sensitivity to criticism and vulnerability (Dickinson & Pincus, 2003; Exline et al., 2011). Conversely, fragile narcissism might be higher among atheists if their social marginalization and frequent experiences of prejudice enhance feelings of defensiveness or social anxiety (Gervais et al., 2017; Goodman & Mueller, 2009; Grove et al., 2019; Harper, 2007). Finally, Christians might experience greater shame due to religious teachings around sinfulness, moral transgressions, and self-evaluation (Exline et al., 2011; Johnson & O'Brien, 2013). Alternatively, atheists might experience higher levels of shame arising from societal stigma, negative stereotyping, and cultural marginalization (Hammer et al., 2012; Harper, 2007; Moon et al., 2021). Given these theoretically plausible opposing possibilities, the study presented here remains fundamentally exploratory.

## Method

### Participants

A sample ( $N=631$ ) of participants above the age of 18 ( $M_{\text{age}}=28$ ; range: 18–40), with roughly an equal percentage of self-identified Christians<sup>1</sup> ( $n=303$ ; 48%) and atheists ( $n=328$ ; 52%), as well as a roughly equal percentage of men and women ( $M=310$ ,  $F=318$ , two did not say), were recruited from the Prolific.com research participant panel for a study on personality traits. The self-reported denominations broke down as follows: Protestant 198 (31%), Catholic 89 (14%), Jehovah's Witnesses 10 (2%), Mormon 4 (1%), Greek Orthodox (0.2%), and Zionist 1 (0.2%). Ethnically, the sample was predominately White (77.7%) and mostly American (62%), British (22%), and Canadian (6.7%). All participants indicated that English was their first language, and each was compensated \$1.43 for their participation.

### Measures

**Self-compassion** The Self-Compassion Scale Short Form (SCS-SF; Raes et al., 2011) is a 12-item self-report scale designed to measure self-compassion across six subscales: self-kindness ( $\alpha=0.67$ ), self-judgment ( $\alpha=0.73$ ), common humanity ( $\alpha=0.52$ ), isolation ( $\alpha=0.66$ ), mindfulness ( $\alpha=0.62$ ), and overidentification ( $\alpha=0.72$ ). The SCS-SF correlated nearly perfectly with the long-form version of the Self-Compassion scale (Raes et al., 2011). Representative items include, "When I fail at something important to me, I become consumed by feelings of inadequacy," "I try to see my failings as part of the human condition," and "I'm disapproving and judgmental about my own flaws and inadequacies." Participants indicated the level of agreement with each statement using a 5-point Likert-type scale from 1 (*Almost never*) to 5 (*Almost always*). Mean scores on the six subscales were averaged

<sup>1</sup> Christian participants also passed a secondary screener item early in the survey that asked them if they considered themselves to be a *religious* Christian. This was an attempt to characterize the Christian sample as more than merely culturally Christian but as those who were more devoted, more intrinsically religious. However, under review it was agreed that this screener has many limitations that prevent it from accurately supporting such a claim about the Christian sample.

(after reverse-coding negative items) to create an overall self-compassion score. The full scale showed good internal reliability with Cronbach's alpha,  $\alpha=0.88$ . (See Appendix A.)

**Grandiose narcissism** The Narcissistic Personality Inventory–13 (NPI-13; Gentile et al., 2013) is a 13-item self-report scale designed to measure grandiose narcissism across the following three subscales (Cronbach's alphas): Leadership/Authority ( $\alpha=0.68$ ), Grandiose Exhibitionism ( $\alpha=0.66$ ), and Entitlement/Exploitativeness ( $\alpha=0.44$ ). Participants are presented with 13 pairs of attributes and asked to choose the one that they "most agree" with. Representative attribute pairs include the following: (A) I find it easy to manipulate people, (B) I do not like it when I find myself manipulating people; (A) I try not to be a showoff, (B) I will usually show off if I get the chance. The full scale showed good internal reliability, with Cronbach's alpha,  $\alpha=0.72$ . (See Appendix B.)

**Fragile narcissism** The Hypersensitive Narcissism Scale (HSNS; Hendin & Cheek, 1997), is a 10-item self-report measure designed to measure fragile narcissism (aka covert narcissism). Representative items include, "I just like sharing the credit of an achievement with others," "I often interpret the remarks of others in a personal way," and "I dislike being with the group unless I know that I am appreciated by at least one of those present." Participants indicated their level of agreement with the statements using a 5-point Likert-type scale (1 = *very uncharacteristic or untrue, strongly disagree*, 2 = *uncharacteristic*, 3 = *neutral*, 4 = *characteristic*, 5 = *very characteristic, strongly agree*). The full scale showed good internal reliability with Cronbach's alpha,  $\alpha=0.74$ . (See Appendix C.)

**Shame** The Experience of Shame Scale (ESS; Andrews et al., 2002) is a self-report scale that asks participants to respond to 25 items designed to measure specific aspects of shame related to self and performance. The ESS also includes three subscales: characterological shame (centered on items related to personal habits, manner with others, sort of person, personal ability), behavioral shame (centering on items related to doing something wrong, saying something stupid, failing at something), and bodily shame (centered on items related to feeling ashamed about features of the body, inability to look in the mirror). Representative items include, "Have you ever felt ashamed of any of your personal habits?," "Have you felt ashamed of the sort of person you are?," "Do you feel ashamed when you do something wrong?," and "Have you avoided looking at yourself in the mirror?" Responses were recorded using a 4-point scale (1 = *not at all*, 2 = *a little*, 3 = *moderately*, 4 = *very much*). Cronbach's alpha for each of the three subscales and the full scale showed good internal reliability: Characterological ( $\alpha=0.93$ ), Behavioral ( $\alpha=0.92$ ), Bodily Shame ( $\alpha=0.89$ ), Full ESS ( $\alpha=0.96$ ). (See Appendix D.)

## Procedure

This online study was approved by the university's institutional review board, and informed consent was obtained from all participants. The study was administered via the Qualtrics survey tool using the Prolific.com research participant panel. Participants volunteered for a study on personality traits and then responded to items assessing levels of self-compassion, grandiose narcissism, fragile narcissism, and demographics. The average time to complete the survey was approximately nine minutes.

## Results

To see if atheists and Christians differed in levels of self-compassion, grandiose narcissism, fragile narcissism, or shame, the means from all scales and subscales were compared using independent *t*-tests. Christians ( $M=2.92$ ,  $SD=0.76$ ) reported higher levels of overall self-compassion than atheists ( $M=2.67$ ,  $SD=0.75$ ), as indicated by a significant independent *t*-test,  $t(629)=4.16$ ,  $p<0.001$ ,  $d'=0.33$ , a small-to-medium effect.<sup>2</sup> In fact, Christians reported reliably higher scores than atheists on all six of the SCS-SF subscales: Christians ( $M=3.13$ ,  $SD=0.95$ ) reported higher levels of self-kindness than atheists ( $M=2.73$ ,  $SD=0.91$ ),  $t(629)=5.41$ ,  $p<0.001$ ,  $d'=0.42$ , a moderate effect. Christians ( $M=2.73$ ,  $SD=1.07$ ) reported higher levels of self-judgment than atheists ( $M=2.53$ ,  $SD=1.04$ ),  $t(629)=2.39$ ,  $p=0.02$ ,  $d'=0.19$ , a small effect. Christians ( $M=3.09$ ,  $SD=0.94$ ) reported higher levels of common humanity than atheists ( $M=2.88$ ,  $SD=0.95$ ),  $t(629)=2.75$ ,  $p=0.006$ ,  $d'=0.36$ , a small-to-medium effect. Christians ( $M=2.54$ ,  $SD=1.09$ ) reported higher levels of isolation than atheists ( $M=2.27$ ,  $SD=1.03$ ),  $t(629)=3.23$ ,  $p=0.001$ ,  $d'=0.25$ , a small effect. Christians ( $M=3.54$ ,  $SD=0.88$ ) reported higher levels of mindfulness than atheists ( $M=3.32$ ,  $SD=0.91$ ),  $t(629)=3.07$ ,  $p=0.002$ ,  $d'=0.25$ , a small effect. And Christians ( $M=2.46$ ,  $SD=1.08$ ) reported higher levels of overidentification than atheists ( $M=2.27$ ,  $SD=1.08$ ),  $t(629)=2.27$ ,  $p=0.02$ ,  $d'=0.18$ , a small effect.

Christians ( $M=3.34$ ,  $SD=2.70$ ) also reported reliably higher levels of grandiose narcissism than atheists ( $M=2.84$ ,  $SD=2.56$ ), as indicated by a significant independent *t*-test,  $t(629)=2.43$ ,  $p=0.02$ ,  $d'=0.19$ , a small effect. This effect seemed to be driven exclusively by the grandiose/exhibitionism subscale: Christians ( $M=1.41$ ,  $SD=1.40$ ) reported reliably higher levels of grandiose/exhibitionism than atheists ( $M=1.04$ ,  $SD=1.35$ ),  $t(629)=3.37$ ,  $p=0.001$ ,  $d'=0.27$ , a small-to-medium effect. However, Christians ( $M=1.10$ ,  $SD=1.26$ ) and atheists ( $M=0.95$ ,  $SD=1.22$ ) did not differ in levels of leadership/authority,  $t(629)=1.56$ ,  $p=0.12$ . Nor did Christians ( $M=0.83$ ,  $SD=0.97$ ) and atheists ( $M=0.85$ ,  $SD=1.01$ ) differ in levels of entitlement/exploitativeness,  $t(629)=0.20$ ,  $p=0.84$ .

There were no reliable differences between Christians and atheists on the HSNS or the ESS. Christians ( $M=2.99$ ,  $SD=0.67$ ) and atheists ( $M=3.05$ ,  $SD=0.66$ ) did not differ in levels of fragile narcissism,  $t(629)=1.06$ ,  $p=0.29$ . Christians ( $M=3.47$ ,  $SD=0.94$ ) and atheists ( $M=3.53$ ,  $SD=1.00$ ) also did not differ in levels of shame,  $t(629)=0.77$ ,  $p=0.44$ . (See Table 1 for all *t*-test statistics.<sup>3</sup>)

## Discussion

This exploratory study examined self-reported differences in self-compassion, grandiose narcissism, fragile narcissism, and shame among self-identified Christians and atheists. The findings indicate that Christians reported reliably higher levels of self-compassion and

<sup>2</sup> Effect sizes were interpreted using Cohen's (1988) traditional interpretations: .2=small effect, .5=medium effect, .8=large effect.

<sup>3</sup> Given the number of statistical tests conducted, concerns about a potentially inflated Type I error rate are understandable but not warranted here. A formal correction such as the Bonferroni adjustment was not applied, as the comparisons involved theoretically distinct constructs—self-compassion, grandiose narcissism, fragile narcissism, and shame rather than multiple comparisons of the same construct. Applying a uniform alpha adjustment across independent hypotheses would be unnecessarily conservative and risk obscuring meaningful effects, particularly in an exploratory study such as this (Althouse, 2016; Feise, 2002; Perneger, 1998; Rothman, 1990).

**Table 1** Reported t-test means, standard deviations, significance levels, and effect sizes for scales and subscales

Scale	Christians <i>M</i> ( <i>SD</i> )	Atheists <i>M</i> ( <i>SD</i> )	<i>p</i> 's*	<i>Cohen's d</i>
Self-Compassion (Self-Compassion Scale-Short Form)	<b>2.92 (.76)</b>	2.67 (.75)	< . <b>001</b>	.33
Self-kindness	<b>3.13 (.95)</b>	2.73 (.91)	< . <b>001</b>	.42
Self-judgment	<b>2.73 (1.07)</b>	2.53 (1.04)	. <b>02</b>	.19
Common humanity	<b>3.09 (.94)</b>	2.88 (.95)	. <b>006</b>	.36
Isolation	<b>2.54 (1.09)</b>	2.27 (1.03)	. <b>001</b>	.25
Mindfulness	<b>3.54 (.88)</b>	3.32 (.91)	. <b>002</b>	.25
Overidentification	<b>2.46 (1.08)</b>	2.27 (1.08)	. <b>02</b>	.18
Grandiose Narcissism (Narcissistic Personality Inventory-13)	<b>3.34 (2.70)</b>	2.84 (2.56)	. <b>02</b>	.19
Leadership/authority	1.10 (1.26)	.95 (1.22)	.12	---
Grandiose exhibitionism	<b>1.41 (1.40)</b>	1.04 (1.35)	. <b>001</b>	.27
Entitlement/exploitativeness	.83 (.97)	.85 (1.01)	.20	---
Fragile Narcissism (Hypersensitive Narcissism Scale)	2.99 (.67)	3.05 (.66)	.29	---
Shame (Experience of Shame Scale)	3.47 (.94)	3.53 (1.00)	.44	---

\* Significant *p* values and larger means in **bold**

grandiose narcissism compared to atheists. However, contrary to expectations, no differences emerged between the two groups in fragile narcissism or shame. These results suggest that while religious beliefs may contribute to self-kindness, they may also contribute to specific narcissistic tendencies, although they do not necessarily influence more vulnerable forms of narcissism or the experience of shame in a distinct manner. Taken together, these findings offer new insights into the interplay between religiosity, secularism, and self-concept, inviting further investigation into the underlying mechanisms.

### Self-compassion: The role of community and individualism

The higher levels of self-compassion among Christians found in the current study align with prior research indicating that religious teachings and communal support promote emotional resilience, self-kindness, and a more forgiving self-view (Neff, 2022; Zessin et al., 2015). Christian doctrines often emphasize humility, shared humanity, and divine forgiveness, which may encourage believers to approach personal failings with greater self-compassion rather than harsh self-judgment. This study found that Christians scored reliably higher across all self-compassion subscales, including both adaptive (self-kindness, mindfulness, common humanity) and maladaptive (self-judgment, overidentification, isolation) components. At first glance, this pattern appears paradoxical—how can religious individuals score higher on both self-kindness and self-judgment? One possibility is that Christianity fosters both self-compassion and self-criticism (Brodar et al., 2015; Lee & Rosales, 2020; Wilhoit, 2019). While religious teachings provide comfort, structure, and motivation for self-kindness and mindfulness, their moral and introspective aspects may also heighten self-evaluation and self-judgment.

Conversely, the lower self-compassion scores among atheists may stem from their reliance on individualistic frameworks, which lack the institutional and communal reinforcements found in religious settings. In highly religious societies, atheists may internalize

stigma, leading to increased self-criticism or feelings of isolation that undermine self-compassion (Gervais et al., 2017). Although atheists emphasize intellectual independence and rationality, these traits may not offer the same buffer against self-criticism as religious teachings and communal rituals (Bodok-Mulderij et al., 2023). Nevertheless, secular worldviews may promote alternative pathways to self-compassion. Open-mindedness and critical thinking—traits often associated with atheists—may facilitate resilience, introspection, and engagement with secular self-compassion interventions, such as mindfulness-based or cognitive approaches. Future research should explore how atheists cultivate self-compassion in nonreligious contexts and compare the efficacy of these approaches with religiously framed ones.

While self-compassion has well-documented links to prosociality, the pathways may differ for religious and nonreligious individuals. Saslow et al. (2013) found that compassion predicts prosocial behavior across groups, but this effect is stronger among less religious individuals. Religious individuals may derive prosocial motivation from doctrinal teachings and communal expectations, whereas nonreligious individuals rely more on personal feelings of compassion. This suggests that self-compassion interventions tailored to atheists may be particularly impactful. Compassion-focused therapy and mindful self-compassion provide secular, evidence-based approaches to reducing self-criticism and fostering self-kindness (Craig et al., 2020; Gilbert, 2010; Leaviss & Uttley, 2015; Neff & Germer, 2018; Neff & Germer, 2012; Smeets et al., 2014). These interventions, which emphasize mindfulness, self-kindness, and shared humanity, have demonstrated significant mental health benefits across diverse populations, regardless of religious affiliation (Neff, 2004, 2022).

### **Grandiose narcissism: Spiritual superiority versus secular humility**

The reliably higher levels of grandiose narcissism among Christians, particularly in grandiose exhibitionism, align with theories suggesting that religiosity can serve as a domain for self-enhancement (Gebauer et al., 2017; Rowatt & Kirkpatrick, 2002; Sedikides & Gebauer, 2010, 2021). The perception of moral or spiritual superiority, reinforced by communal validation and doctrinal teachings, may bolster self-esteem and group identity. This “better-than-average” effect may be adaptive in some contexts, promoting group cohesion and self-worth, but it can also impede genuine self-reflection and interpersonal connection (Golec de Zavala et al., 2009; Rowatt & Kirkpatrick, 2002; Sedikides & Gebauer, 2021).

In contrast, atheists’ lower levels of grandiose narcissism may reflect their rejection of hierarchical or self-aggrandizing narratives often inherent in religious frameworks (Dubendorff & Luchner, 2017; Hermann & Fuller, 2018; Vonk & Visser, 2020). Valuing critical thinking and intellectual humility, atheists may resist self-enhancement tendencies tied to moral or spiritual superiority. However, societal stereotypes portraying atheists as arrogant or elitist may not accurately reflect their self-perceptions (Caldwell-Harris et al., 2011). Future research should explore how atheists balance intellectual humility with societal perceptions of arrogance and how these factors shape their self-concept.

### **Fragile narcissism and shame: Converging experiences across worldviews**

The absence of group differences between fragile narcissism and shame suggests that these traits may be shaped more by individual psychological vulnerabilities than by

religious or secular belief systems. For Christians, religious teachings and communal support may buffer against fragile narcissism and shame through narratives of forgiveness and redemption. For atheists, resilience may stem from intellectual independence and secular humanist values, enabling them to navigate societal pressures without heightened self-doubt.

The comparable shame levels between Christians and atheists challenges common stereotypes. While Christians are often perceived as highly self-critical due to moral teachings and atheists as emotionally detached due to secular rationalism, these findings suggest that both groups regulate shame with comparable efficacy. Future research should investigate how religious and secular coping mechanisms—such as prayer, confession, introspection, or logic—mediate shame regulation.

### **Limitations and future directions**

This study is not without limitations. First, the online survey environment lacks control over participants' settings, potentially affecting response accuracy (Cuskley & Sulik, 2024; Lefever et al., 2007). While post-survey checks assessed participant attention, anonymity in online studies may still introduce response bias. Second, the sample was predominantly White and Western, limiting generalizability to more diverse cultural contexts. Third, self-report measures are susceptible to social desirability bias (Chiesi et al., 2024; Orne, 1996), particularly when assessing narcissism. Finally, the cross-sectional design precludes causal inferences. Future research should examine mechanisms underlying these differences, including stigma, community support, and philosophical frameworks, through longitudinal and experimental designs. Additionally, research on interventions tailored to specific group needs—such as self-compassion training for atheists and ego-quieting practices for Christians—could help promote emotional well-being across populations.

### **Practical implications for practitioners and conclusion**

This study might offer guidance for pastoral counselors, clergy, therapists, spiritual care providers, educators, and others working with both religious and nonreligious individuals, particularly in navigating the complex interplay between self-compassion and narcissism within Christian populations. While Christians may exhibit higher baseline self-compassion, this can coexist with elevated grandiose narcissism, often expressed as spiritual or moral superiority. Practitioners should respond with nuance—affirming self-worth while gently encouraging humility, empathy, and community-oriented values grounded in religious tradition. Clergy and pastoral caregivers are especially well positioned to address these dynamics by cultivating humility and emotional differentiation in their communities. Developing secure attachments and self-differentiation—both central to mature relational spirituality—as well as increasing self-awareness have been identified as protective factors that promote humility, reduce narcissism, and strengthen resilience (Jankowski et al., 2019, 2022; Ruffing et al., 2018). Among nonreligious individuals, comparatively lower self-compassion may coincide with harsh self-criticism. In these cases, secular interventions such as mindful self-compassion (Neff & Germer, 2012) and compassion-focused therapy (Gilbert, 2010) can be especially effective. These evidence-based approaches offer tools for cultivating self-kindness, mindfulness, and shared humanity, enhancing emotional resilience without relying on religious

frameworks. Fragile narcissism and shame were equally prevalent among Christians and atheists in this study, perhaps suggesting that these vulnerabilities transcend religious affiliation. Interventions such as shame-resilience training (Brown, 2006), cognitive reframing (Beck et al., 1979), and mindfulness-based therapies—such as mindfulness-based stress reduction and mindfulness-based cognitive therapy—can be effectively applied across populations as they have demonstrated significant reductions in shame, stress, and self-criticism while increasing self-compassion (Kabat-Zinn, 2003; Segal et al., 2002). Encouraging open dialogue about shame, reinforcing shared human experiences, and fostering self-compassion are universally beneficial practices.

In conclusion, this study highlights important differences and commonalities in self-compassion, grandiose narcissism, fragile narcissism, and shame among Christians and atheists, underscoring the danger of making assumptions based solely on religious identity. Psychological traits vary meaningfully within belief systems, and recognizing this nuance deepens our understanding of how both religious and secular worldviews shape self-concept and emotional regulation. These findings provide a foundation for future research on interventions that are tailored to individuals' unique experiences, values, and psychological profiles. Such a personalized, context-sensitive approach holds promise for fostering self-compassion and addressing narcissism and shame in ways that genuinely support both psychological healing and spiritual growth.

## Appendix A

Self-Compassion Scale Short Form (SCS-SF; Raes et al., 2011)

### HOW I TYPICALLY ACT TOWARDS MYSELF IN DIFFICULT TIMES

Please read each statement carefully before answering. Indicate how often you behave in the stated manner, using the following scale:

<b>Almost never</b>					<b>Almost always</b>
1	2	3	4	5	

1. When I fail at something important to me I become consumed by feelings of inadequacy.
2. I try to be understanding and patient towards those aspects of my personality I don't like.
3. When something painful happens I try to take a balanced view of the situation.
4. When I'm feeling down, I tend to feel like most other people are probably happier than I am.
5. I try to see my failings as part of the human condition.
6. When I'm going through a very hard time, I give myself the caring and tenderness I need.
7. When something upsets me I try to keep my emotions in balance.
8. When I fail at something that's important to me, I tend to feel alone in my failure.
9. When I'm feeling down I tend to obsess and fixate on everything that's wrong.
10. When I feel inadequate in some way, I try to remind myself that feelings of inadequacy are shared by most people.
11. I'm disapproving and judgmental about my own flaws and inadequacies.
12. I'm intolerant and impatient towards those aspects of my personality I don't like.

## Appendix B

### The Narcissistic Personality Inventory–13

1. A I find it easy to manipulate people.  
B I don't like it when I find myself manipulating people
2. A When people compliment me I get embarrassed.  
B I know that I am a good person because everybody keeps telling me so.
3. A I like having authority over other people  
B I don't mind following orders.
4. A I insist upon getting the respect that is due me.  
B I usually get the respect I deserve.
5. A I don't particularly like to show off my body.  
B I like to show off my body.
6. A I have a strong will to power.  
B Power for its own sake doesn't interest me.
7. A I expect a great deal from other people.  
B I like to do things for other people.
8. A My body is nothing special.  
B I like to look at my body.
9. A Being in authority doesn't mean much to me.  
B People always seem to recognize my authority.
10. A I will never be satisfied until I get all that I deserve.  
B I will take my satisfactions as they come.
11. A I try not to be a show off.  
B I will usually show off if I get the chance.
12. A I am a born leader.  
B Leadership is a quality that takes a long time to develop.
13. A I like to look at myself in the mirror.  
B I am not particularly interested in looking at myself in the mirror.

In each of the following pairs of attributes, choose the one that you **MOST AGREE** with. Mark your answer by writing **EITHER A or B** in the space provided. Only mark **ONE ANSWER** for each attitude pair.

## Appendix C

The Hypersensitive Narcissism Scale (Hendin & Cheek, 1997).

Please answer the following questions by deciding to what extent each item is characteristic of your feelings and behavior. Fill in the blank next to each item by choosing a number from the scale printed below.

1 = very uncharacteristic or untrue, strongly disagree.

2 = uncharacteristic.

3 = neutral.

4 = characteristic.

5 = very characteristic or true, strongly agree.

1. I can become entirely absorbed in thinking about my personal affairs, my health, my cares or my relations to others.

2. My feelings are easily hurt by ridicule or the slighting remarks of others.

3. When I enter a room I often become self-conscious and feel that the eyes of others are upon me.

4. I dislike sharing the credit of an achievement with others.

5. I feel that I have enough on my hands without worrying about other people's troubles.

6. I feel that I am temperamentally different from most people.

7. I often interpret the remarks of others in a personal way.

8. I easily become wrapped up in my own interests and forget the existence of others.

9. I dislike being with a group unless I know that I am appreciated by at least one of those present.

10. I am secretly "put out" or annoyed when other people come to me with their troubles, asking me for my time and sympathy.

## Appendix D

The Experience Shame Scale (Andrews et al., 2002).

Everybody at times can feel embarrassed, self-conscious or ashamed. These questions are about such feelings if they have occurred at any time in the past year. There are no 'right' or 'wrong' answers. Please indicate the response which applies to you using the following scale:

Not at all	A little	Moderately	Very much
1	2	3	4

1. Have you felt ashamed of any of your personal habits?
2. Have you worried about what other people think of any of your personal habits?
3. Have you tried to cover up or conceal any of your personal habits?
4. Have you felt ashamed of your manner with others?
5. Have you worried about what other people think of your manner with others?
6. Have you avoided people because of your manner?
7. Have you felt ashamed of the sort of person you are?
8. Have you worried about what other people think of the sort of person you are?
9. Have you tried to conceal from others the sort of person you are?
10. Have you felt ashamed of your inability to do things?
11. Have you worried about what other people think of your inability to do things?
12. Have you avoided people because of your inability to do things?
13. Do you feel ashamed when you do something wrong?
14. Have you worried about what other people think of you when you do something wrong?
15. Have you tried to cover up or conceal things you felt ashamed of having done?
16. Have you felt ashamed when you said something stupid?
17. Have you worried about what other people think of you when you said something stupid?
18. Have you avoided contact with anyone who knew you said something stupid?
19. Have you felt ashamed when you failed at something which was important to you?\*
20. Have you worried about what other people think of you when you fail?\*
21. Have you avoided people who have seen you fail?
22. Have you felt ashamed of your body or any part of it?
23. If you worried about what other people think of your appearance?
24. Have you avoided looking at yourself in the mirror?
25. Have you wanted to hide or conceal your body or any part of it?

\* These alternatives were used, as per the instructions, because competition was not relevant to our population.

**Author Contributions** MM is solely responsible for all aspects of this manuscript, including conceptualization, methodology, data collection, statistical analysis, interpretation of results, and manuscript preparation. No other individuals contributed to this work.

**Data Availability** The full data set for this study is publically available on OSF: DOI 10.17605/OSF.IO/59YQR

## Declarations

**Competing interests** The authors declare no competing interests.

## References

- Akin, A., & Akin, U. (2017). Does self-compassion predict spiritual experiences of Turkish university students? *Journal of Religion and Health*, 56(1), 109–117. <https://doi.org/10.1007/s10943-015-0138-y>
- Alicke, M. D., & Govorun, O. (2005). The better-than-average effect. In M. D. Alicke, D. A. Dunning, & J. I. Krueger (Eds.), *The self in social judgment* (pp. 85–106). Psychology Press.
- Altemeyer, B. (2003). Why do religious fundamentalists tend to be prejudiced? *International Journal for the Psychology of Religion*, 13, 17–28.
- Althouse, A. D. (2016). Adjust for multiple comparisons? It's not that simple. *Annals of Thoracic Surgery*, 101(5), 1644–1645. <https://doi.org/10.1016/j.athoracsur.2015.11.024>
- American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders* (5th ed.). Author.
- Andrews, B., Qian, M., & Valentine, J. D. (2002). Predicting depressive symptoms with a new measure of shame: The Experience of Shame Scale. *British Journal of Clinical Psychology*, 41, 29–42. <https://doi.org/10.1348/014466502163778>
- Athanasakou, D., Karakasidou, E., Pezirkianidis, C., Lakioti, A., & Stalikas, A. (2020). Self-compassion in clinical samples: A systematic literature review. *Psychology*, 11(2), 217–244.
- Barnard, L. K., & Curry, J. F. (2012). The relationship of clergy burnout to self-compassion and other personality dimensions. *Pastoral Psychology*, 61, 149–163. <https://doi.org/10.1007/s11089-011-0377-0>
- Barnett, M. D., & Flores, J. (2016). Narcissus, exhausted: Self-compassion mediates the relationship between narcissism and school burnout. *Personality and Individual Differences*, 97, 102–108. <https://doi.org/10.1016/j.paid.2016.03.026>
- Barry, C. T., Loflin, D. C., & Doucette, H. (2015). Adolescent self-compassion: Associations with narcissism, self-esteem, aggression, and internalizing symptoms in at-risk males. *Personality and Individual Differences*, 77, 118–123. <https://doi.org/10.1016/j.paid.2014.12.036>
- Beck, A. T., Rush, A. J., Shaw, B. F., & Emery, G. (1979). *Cognitive therapy of depression*. Guilford Press.
- Beit-Hallahmi, B. (2007). Atheists: A psychological profile. In M. Martin, *The Cambridge companion to atheism* (pp. 300–317). Cambridge University Press.
- Birnie, K., Speca, M., & Carlson, L. E. (2010). Exploring self-compassion and empathy in the context of mindfulness-based stress reduction (MBSR). *Stress and Health*, 26(5), 359–371. <https://doi.org/10.1002/smi.1305>
- Bodok-Mulderij, I., Schaap-Jonker, H., Klaassen-Dekker, A., Boselie, J., & Jacobs, N. (2023). The relation between religion/spirituality and mental health is mediated by self-compassion: Evidence from two longitudinal studies in the Dutch-speaking general population. *Psychology of Religion and Spirituality*, 15(3), 407–417. <https://doi.org/10.1037/rel0000501>
- Brodar, K. E., Crosskey, L. B., & Thompson, R. J., Jr. (2015). The relationship of self-compassion with perfectionistic self-presentation, perceived forgiveness, and perceived social support in an undergraduate Christian community. *Journal of Psychology and Theology*, 43(4), 231–242. <https://doi.org/10.1177/009164711504300401>
- Brookes, J. (2015). The effect of overt and covert narcissism on self-esteem and self-efficacy beyond self-esteem. *Personality and Individual Differences*, 85, 172–175. <https://doi.org/10.1016/j.paid.2015.05.013>
- Brown, B. (2006). Shame resilience theory: A grounded theory study on women and shame. *Families in Society*, 87(1), 43–52. <https://doi.org/10.1606/1044-3894.3483>
- Caldwell-Harris, C. L. (2012). Understanding atheism/non-belief as an expected individual-differences variable. *Religion, Brain, & Behavior*, 2(1), 4–47. <https://doi.org/10.1080/2153599X.2012.668395>

- Caldwell-Harris, C. L., Wilson, A. L., LoTempio, E., & Beit-Hallahmi, B. (2011). Exploring the atheist personality: Well-being, awe, and magical thinking in atheists, Buddhists, and Christians. *Mental Health, Religion & Culture, 14*(7), 659–672. <https://doi.org/10.1080/13674676.2010.509847>
- Chen, Y., Koh, H. K., Kawachi, I., Botticelli, M., & VanderWeele, T. J. (2020). Religious-service attendance and subsequent health and well-being: A meta-analysis. *International Journal of Epidemiology, 49*(6), 2030–2040. <https://doi.org/10.1093/ije/dyaa094>
- Chiesi, F., Marunic, G., Tagliaferro, C., Bruno, F., Saklofske, D., & Lau, C. (2024). Do people answer honestly when asked about a no honest behavior? Testing the social desirability bias when measuring bullshitting. *European Journal of Psychological Assessment*. Advance online publication. <https://doi.org/10.1027/1015-5759/a000856>
- Cleare, S., Gumley, A., & O'Connor, R. C. (2019). Self-compassion, self-forgiveness, suicidal ideation and self-harm: A systematic review. *Clinical Psychology and Psychotherapy, 26*(5), 511–530.
- Cohen, J. (1988). *Statistical power analysis for the behavioral sciences* (2nd ed.). Lawrence Erlbaum Associates.
- Craig, C., Hiskey, S., & Spector, A. (2020). Compassion focused therapy: A systematic review of its effectiveness and acceptability in clinical populations. *Expert Review of Neurotherapeutics, 20*(4), 385–400.
- Cuskley, C., & Sulik, J. (2024). The burden for high-quality online data collection lies with researchers, not recruitment platforms. *Perspectives on Psychological Science, 19*(6), 891–899. <https://doi.org/10.1177/17456916241242734>
- Dawkins, R. (2006). *The God delusion*. Houghton Mifflin.
- Dennett, D. C. (2006). *Breaking the spell: Religion as a natural phenomenon*. Viking.
- Dezutter, J., Soenens, B., & Hutsebaut, D. (2006). Religiosity and mental health: A further exploration of the relative importance of religious behaviors vs. religious attitudes. *Personality and Individual Differences, 40*(4), 807–818.
- Dickinson, K. A., & Pincus, A. L. (2003). Interpersonal analysis of grandiose and vulnerable narcissism. *Journal of Personality Disorders, 17*(3), 188–207. <https://doi.org/10.1521/pedi.17.3.188.22146>
- Diener, E., & Clifton, D. (2002). Life satisfaction and religiosity in broad probability samples. *Psychological Inquiry, 13*, 206–209.
- Diener, E., Suh, E., Lucas, R. E., & Smith, H. L. (1999). Subjective well-being: Three decades of progress. *Psychological Bulletin, 125*, 276–302.
- Dubendorff, S. J., & Luchner, A. F. (2017). The perception of atheists as narcissistic. *Psychology of Religion and Spirituality, 9*(4), 368–376.
- Dundas, I., Binder, P.-E., Hansen, T. G. B., & Stige, S. H. (2017). Does a short self-compassion intervention for students increase healthy self-regulation? A randomized control trial. *Scandinavian Journal of Psychology, 58*(5), 443–450.
- Edgell, P., Gerteis, J., & Hartmann, D. (2006). Atheists as “other”: Moral boundaries and cultural membership in American society. *American Sociological Review, 71*, 211–234.
- Exline, J. J., Park, C. L., Smyth, J. M., & Carey, M. P. (2011). Anger toward God: Social-cognitive predictors, prevalence, and links with adjustment to bereavement and cancer. *Journal of Personality and Social Psychology, 100*(1), 129–148.
- Feise, R. J. (2002). Do multiple outcome measures require p-value adjustment? *BMC Medical Research Methodology, 2*, 1–4. <https://doi.org/10.1186/1471-2288-2-8>
- Ferrari, M., Yap, K., Scott, N., Einstein, D. A., & Ciarrochi, J. (2018). Self-compassion moderates the perfectionism and depression link in both adolescence and adulthood. *PLoS One, 13*(2), e0192022.
- Fischer, C. S., & Hout, M. (2006). Religious diversity in America, 1940–2000. In C. Fischer & M. Hout (Eds.), *Century of difference: How America changed in the last one hundred years*. Russell Sage Foundation.
- Fong, M., & Loi, N. M. (2016). The mediating role of self-compassion in student psychological health. *Australian Psychologist, 51*(6), 431–441.
- Foster, J. D., Campbell, W. K., & Twenge, J. M. (2003). Individual differences in narcissism: Inflated self-views across the lifespan and around the world. *Journal of Research in Personality, 37*, 469–486. [https://doi.org/10.1016/S0092-6566\(03\)00026-6](https://doi.org/10.1016/S0092-6566(03)00026-6)
- Galen, L. W. (2009). Profiles of the godless. *Free Inquiry, 29*, 41–45.
- Galen, L. W. (2012). Does religious belief promote prosociality? A Critical Examination. *Psychological Bulletin, 138*(5), 876–906. <https://doi.org/10.1037/a0028251>
- Garssen, B., Visser, A., & de JagerMeezenbroek, E. (2023). Religiosity and spirituality in the prevention and management of depression. *BMC Psychiatry, 23*, 5091. <https://doi.org/10.1186/s12888-023-05091-2>
- Gebauer, J. E., & Maio, G. R. (2012). The need to belong can motivate belief in God. *Journal of Personality, 80*, 465–501. <https://doi.org/10.1111/j.1467-6494.2011.00730.x>

- Gebauer, J. E., Sedikides, C., & Schrade, A. (2017). Christian self-enhancement. *Journal of Personality and Social Psychology, 113*(5), 786–809. <https://doi.org/10.1037/pspp0000140>
- Gentile, B., Miller, J. D., Hoffman, B. J., Reidy, D. E., Zeichner, A., & Campbell, W. K. (2013). A test of two brief measures of grandiose narcissism: The Narcissistic Personality Inventory–13 and the Narcissistic Personality Inventory–16. *Psychological Assessment, 25*(4), 1120–1136. <https://doi.org/10.1037/a0033192.supp>
- Gerber, G., & Anaki, D. (2021). The role of self-compassion, concern for others, and basic psychological needs in the reduction of caregiving burnout. *Mindfulness, 12*, 741–750.
- Germer, C. K. (2009). *The mindful path to self-compassion: Freeing yourself from destructive thoughts and emotions*. Guilford Press.
- Germer, C. K., & Neff, K. D. (2015). Cultivating self-compassion in trauma survivors. In V. M. Follette, J. Briere, D. Rozelle, J. W. Hopper, & D. I. Rome (Eds.), *Mindfulness-oriented interventions for trauma: Integrating contemplative practices* (pp. 43–58). Guilford Press.
- Gervais, W. M. (2011). Finding the faithless: Perceived atheist prevalence reduces anti-atheist prejudice. *Personality and Social Psychology Bulletin, 37*(4), 543–556.
- Gervais, W. M. (2013). In godlessness we distrust: Using social psychology to solve the puzzle of anti-atheist prejudice. *Social and Personality Psychology Compass, 7*, 366–377.
- Gervais, W. M. (2014). Everything is permitted? People intuitively judge immorality as representative of atheists. *PLOS ONE, 8*(4), e92302. <https://doi.org/10.1371/journal.pone.0092302>
- Gervais, W. M., Shariff, A. F., & Norenzayan, A. (2011). Do you believe in atheists? Distrust is central to anti-atheist prejudice. *Journal of Personality and Social Psychology, 101*(6), 1189–1206. <https://doi.org/10.1037/a0025882>
- Gervais, W. M., Xygalatas, D., McKay, R. T., van Elk, M., Buchtel, E. E., Aveyard, M., Schiavone, S. R., Dar-Nimrod, I., Svedholm-Hakkinen, A. M., Riekkki, T., Klocova, E. K., Ramsay, J. E., & Bulbulia, J. A. (2017). Global evidence of extreme intuitive moral prejudice against atheists. *Nature Human Behaviour, 1*(8), 0151. <https://doi.org/10.1038/s41562-017-0151>
- Ghorbani, N., Watson, P. J., Kashanaki, H., & Chen, Z. J. (2017). Diversity and complexity of religion and spirituality in Iran: Relationships with self-compassion and self-forgiveness. *International Journal for the Psychology of Religion, 27*(4), 157–171. <https://doi.org/10.1080/10508619.2017.1340100>
- Gilbert, P. (2010). *Compassion focused therapy: Distinctive features*. Routledge.
- Gilbert, P., & Procter, S. (2006). Compassionate mind training for people with high shame and self-criticism: Overview and pilot study of a group therapy approach. *Clinical Psychology & Psychotherapy: An International Journal of Theory & Practice, 13*(6), 353–379.
- Gilligan, J. (2003). Shame, guilt, and violence. *Social Research: An International Quarterly, 70*(4), 1149–1180.
- Golec de Zavala, A., Cichocka, A., Eidelson, R., & Jayawickreme, N. (2009). Collective narcissism and its social consequences. *Journal of Personality and Social Psychology, 97*(6), 1074–1096. <https://doi.org/10.1037/a0016904>
- Goodman, K. M., & Mueller, J. A. (2009). Invisible, marginalized, and stigmatized: Understanding and addressing the needs of atheist students. *New Directions for Student Services, 2009*(125), 55–63. <https://doi.org/10.1002/ss.324>
- Goodwin, A. M., & Luchner, A. F. (2023). Mentalized affectivity as a mediator between two forms of narcissism and self-compassion. *Psychoanalytic Psychology, 40*(4), 320–327. <https://doi.org/10.1037/pap0000470>
- Graham, J., & Haidt, J. (2010). Beyond beliefs: Religions bind individuals into moral communities. *Personality and Social Psychology Review, 14*, 140–150. <https://doi.org/10.1177/1088868309353415>
- Granqvist, P., Mikulincer, M., & Shaver, P. R. (2010). Religion as attachment: Normative processes and individual differences. *Personality and Social Psychology Review, 14*, 49–59. <https://doi.org/10.1177/1088868309348618>
- Grove, R. C., Rubenstein, A., & Terrell, H. K. (2019). Distrust persists after subverting atheist stereotypes. *Group Processes & Intergroup Relations, 23*(7), 1103–1124. <https://doi.org/10.1177/1368430219874103>
- Gu, X., & Hyun, M.-H. (2021). The associations of covert narcissism, self-compassion, and shame-focused coping strategies with depression. *Social Behavior and Personality: An International Journal, 49*(6), 1–15. <https://doi.org/10.2224/sbp.10101>
- Gustafson, S. B., & Ritzer, D. R. (1995). The dark side of normal: A psychopathy-linked pattern called aberrant self-promotion. *European Journal of Personality, 9*(3), 147–183. <https://doi.org/10.1002/per.2410090302>

- Hackney, C. H., & Sanders, G. S. (2003). Religiosity and mental health: A meta-analysis of recent studies. *Journal for the Scientific Study of Religion*, 42, 43–55.
- Haidt, J. (2012). *The righteous mind: Why good people are divided by politics and religion*. Pantheon Books.
- Hammer, J. H., Cragun, R. T., Hwang, K., & Smith, J. M. (2012). Forms, frequency, and correlates of perceived anti-atheist discrimination. *Secularism and Nonreligion*, 1, 43–67.
- Harper, M. (2007). The stereotyping of nonreligious people by religious students: Contents and subtypes. *Journal for the Scientific Study of Religion*, 46(4), 539–552. <https://doi.org/10.1111/j.1468-5906.2007.00376.x>
- Heffernan, M., Griffin, M., McNulty, S., & Fitzpatrick, J. J. (2010). Self-compassion and emotional intelligence in nurses. *International Journal of Nursing Practice*, 16, 366–373.
- Hendin, H. M., & Cheek, J. M. (1997). Assessing hypersensitive narcissism: A re-examination of Murray's Narcissism Scale. *Journal of Research in Personality*, 31, 588–599.
- Herberg, W. (1960). *Protestant-Catholic-Jew*. Anchor.
- Hermann, A., & Fuller, R. (2017). Trait narcissism and contemporary religious trends. *Archiv Für Religionspsychologie / Archive for the Psychology of Religion*, 39(2), 99–117. <https://doi.org/10.1163/15736121-12341339>
- Hermann, A. D., & Fuller, R. C. (2018). Grandiose narcissism and religiosity: The roles of self-enhancement and emotion in spirituality. *Journal of Research in Personality*, 74, 66–70.
- Hollis-Walker, L., & Colosimo, K. (2011). Mindfulness, self-compassion, and happiness in non-meditators: A theoretical and empirical examination. *Personality and Individual Differences*, 50(2), 222–227.
- Hughes, J., Grossmann, I., & Cohen, A. B. (2015). Tolerating the 'doubting Thomas': How centrality of religious beliefs vs. practices influences prejudice against atheists. *Frontiers in Psychology*, 6, 1352. <https://doi.org/10.3389/fpsyg.2015.01352>
- Hunsberger, B., & Altemeyer, B. (2006). *Atheists: A groundbreaking study of America's nonbelievers*. Prometheus Books.
- Jacoby, S. (2004). *Freethinkers: A history of American secularism*. Metropolitan Books.
- Jankowski, P. J., Hall, E. L., Sandage, S. J., & Dumitrascu, N. (2022). Religious leaders' well-being: Protective influences for humility and differentiation against narcissism. *Spirituality in Clinical Practice*, 9(2), 103–113. <https://doi.org/10.1037/scp0000265>
- Jankowski, P. J., Sandage, S. J., Bell, C. A., Ruffing, E. G., & Adams, C. (2019). Humility, relational spirituality, and well-being among religious leaders: A moderated mediation model. *Journal of Religion and Health*, 58(1), 132–152. <https://doi.org/10.1007/s10943-018-0580-8>
- Johnson, E. A., & O'Brien, K. A. (2013). Self-compassion soothes the savage ego-threat system: Effects on negative affect, shame, rumination, and depressive symptoms. *Journal of Social and Clinical Psychology*, 32(9), 939–963.
- Jonas, E., & Fischer, P. (2006). Terror management and religion: Evidence that intrinsic religiousness mitigates worldview defense following mortality salience. *Journal of Personality and Social Psychology*, 91, 553–567. <https://doi.org/10.1037/0022-3514.91.3.553>
- Jones, J. M. (2007). Some Americans reluctant to vote for Mormon, 72-year-old presidential candidates. Based on February 9–11, 2007 Gallup poll. Gallup News Service.
- Kabat-Zinn, J. (2003). Mindfulness-based stress reduction (MBSR). *Constructivism in the Human Sciences*, 8(2), 73–83.
- Kim, S., Thibodeau, R., & Jorgensen, R. S. (2011). Shame, guilt, and depressive symptoms: A meta-analytic review. *Psychological Bulletin*, 137(1), 68–96.
- Kirby, J. N. (2017). Compassion interventions: The programmes, the evidence, and implications for research and practice. *Psychology and Psychotherapy. Theory, Research and Practice*, 90(3), 432–455.
- Koenig, H. G. (2012). Religion, spirituality, and health: The research and clinical implications. *International Scholarly Research Notices*. <https://doi.org/10.5402/2012/278730>
- Koepernik, T., Jauk, E., & Kanske, P. (2022). Lay theories of grandiose and vulnerable narcissism. *Current Psychology*, 41(12), 8862–8875.
- Krieger, T., Altenstein, D., Baettig, I., Doerig, N., & Holtforth, M. G. (2013). Self-compassion in depression: Associations with depressive symptoms, rumination, and avoidance in depressed outpatients. *Behavior Therapy*, 44(3), 501–513.
- Leary, M. R. (2004). *The curse of the self*. Oxford University Press <https://doi.org/10.1093/acprof:oso/9780195172423.001.0001>
- Leary, M. R., Tate, E. B., Adams, C. E., Batts Allen, A., & Hancock, J. (2007). Self-compassion and reactions to unpleasant self-relevant events: The implications of treating oneself kindly. *Journal of Personality and Social Psychology*, 92(5), 887–904. <https://doi.org/10.1037/0022-3514.92.5.887>

- Leaviss, J., & Uttley, L. (2015). Psychotherapeutic benefits of compassion-focused therapy: An early systematic review. *Psychological Medicine*, *45*, 927–945.
- Lee, C., & Rosales, A. (2020). Self-regard in pastoral ministry: Implications for well-being and burnout. *Journal of Psychology and Christianity*, *39*(3), 233–245.
- Lee, E. E., Govind, T., Ramsey, M., Wu, T. C., Daly, R., Liu, J., Tu, X. M., Paulus, M. P., Thomas, M. L., & Jeste, D. V. (2021). Compassion toward others and self-compassion predict mental and physical well-being: A 5-year longitudinal study of 1090 community-dwelling adults across the lifespan. *Translational Psychiatry*, *11*(1), 1–9.
- Lefever, S., Dal, M., & Matthíasdóttir, Á. (2007). Online data collection in academic research: Advantages and limitations. *British Journal of Educational Technology*, *38*(4), 574–582.
- Lloyd, J., Muers, J., Patterson, T. G., & Marczak, M. (2019). Self-compassion, coping strategies, and caregiver burden in caregivers of people with dementia. *Clinical Gerontologist*, *42*(1), 47–59.
- Luo, X., Che, X., Lei, Y., & Li, H. (2021). Investigating the influence of self-compassion-focused interventions on posttraumatic stress: A systematic review and meta-analysis. *Mindfulness*, *12*(12), 2865–2876.
- Lynn, R., Harvey, J., & Nyborg, H. (2009). Average intelligence predicts atheism rates across 137 nations. *Intelligence*, *37*, 11–15.
- Magee, M. W., & Hardin, C. D. (2010). In defense of religion: Shared reality moderates the unconscious threat of evolution. *Social Cognition*, *28*, 379–400.
- Miller, J. D., Hoffman, B. J., Gaughan, E. T., Gentile, B., Maples, J., & Campbell, W. K. (2011). Grandiose and vulnerable narcissism: A nomological network analysis. *Journal of Personality*, *79*(5), 1013–1042. <https://doi.org/10.1111/j.1467-6494.2010.00711.x>
- Miller, J. D., Lynam, D. R., Hyatt, C. S., & Campbell, W. K. (2017). Controversies in narcissism. *Annual Review of Clinical Psychology*, *13*, 291–315. <https://doi.org/10.1146/annurev-clinpsy-032816-045244>
- Moon, J. W., Krems, J. A., & Cohen, A. B. (2021). Is there anything good about atheists? Exploring positive and negative stereotypes of the religious and nonreligious. *Social Psychological and Personality Science*, *12*(8). <https://doi.org/10.1177/1948550620982703>
- Neff, K., & Germer, C. (2018). *The mindful self-compassion workbook: A proven way to accept yourself, build inner strength, and thrive*. Guilford Publications.
- Neff, K. D. (2003a). The development and validation of a scale to measure self-compassion. *Self and Identity*, *2*, 223–250.
- Neff, K. D. (2003b). Self-compassion: An alternative conceptualization of a healthy attitude toward oneself. *Self and Identity*, *2*, 85–102.
- Neff, K. D. (2004). Self-compassion and psychological well-being. *Constructivism in the Human Sciences*, *9*, 27–37.
- Neff, K. D. (2021). *Fierce self-compassion: How women can harness kindness to speak up, claim their power, and thrive*. Harper Wave.
- Neff, K. D. (2022). Self-compassion: Theory, method, research, and intervention. *Annual Review of Psychology*, *74*, 193–218. <https://doi.org/10.1146/annurev-psych-032420-031047>
- Neff, K. D., & Germer, C. (2012). A pilot study and randomized controlled trial of the mindful self-compassion program. *Journal of Clinical Psychology*, *69*(1), 28–44.
- Neff, K. D., & Germer, C. (2022). The role of self-compassion in psychotherapy. *World Psychiatry*, *21*(1), 58–59.
- Neff, K. D., Hsieh, Y. P., & DeJitterat, K. (2005). Self-compassion, achievement goals, and coping with academic failure. *Self and Identity*, *4*(3), 263–287.
- Neff, K. D., & Vonk, R. (2009). Self-compassion versus global self-esteem: Two different ways of relating to oneself. *Journal of Personality*, *77*(1), 23–50.
- Orne, M. T. (1996). Demand characteristics. In P. Banyard spsampsps A. Grayson (Eds.), *Introducing psychological research* (pp. 395–401). Palgrave. [https://doi.org/10.1007/978-1-349-24483-6\\_59](https://doi.org/10.1007/978-1-349-24483-6_59)
- Orth, U., Berking, M., & Burkhardt, S. (2006). Self-conscious emotions and depression: Rumination explains why shame but not guilt is maladaptive. *Personality and Social Psychology Bulletin*, *32*(12), 1608–1619. <https://doi.org/10.1177/0146167206292958>
- Pennycook, G., Cheyne, J. A., Barr, N., Koehler, D. J., & Fugelsang, J. A. (2014). Cognitive style and religiosity: The role of conflict detection. *Memory & Cognition*, *42*(1), 1–10. <https://doi.org/10.3758/s13421-013-0340-7>
- Pennycook, G., Ross, R. M., Koehler, D. J., & Fugelsang, J. A. (2016). Atheists and agnostics are more reflective than religious believers: Four empirical studies and a meta-analysis. *PLoS One*, *11*(4), e-176586. <https://doi.org/10.1371/2Fjournal.pone.0153039>
- Perneger, T. V. (1998). What's wrong with Bonferroni adjustments? *BMJ*, *316*, 1236–1238. <https://doi.org/10.1136/bmj.316.7139.1236>

- Pew Research Center. (2014, July 16). How Americans feel about religious groups. <https://www.pewresearch.org/religion/2014/07/16/how-americans-feel-about-religious-groups/>
- Pew Research Center. (2023) Many people in the U.S., other advanced economies say it's not necessary to believe in God to be moral. Retrieved from Pew Research Center.
- Phillips, W. J., & Hine, D. W. (2019). *Self-compassion, physical health, and health behaviour: A meta-analysis*. Advance online publication.
- Raes, F., Pommier, E., Neff, K. D., & Van Gucht, D. (2011). Construction and factorial validation of a short form of the Self-Compassion Scale. *Clinical Psychology & Psychotherapy, 18*, 250–255.
- Raskin, R. N., & Terry, H. (1988). A principal-components analysis of the narcissistic personality inventory and further evidence of its construct validity. *Journal of Personality and Social Psychology, 54*, 890–902.
- Ronningstam, E. (2009). Narcissistic personality disorder: Facing DSM-V. *Psychiatric Annals, 39*(3), 111–121. <https://doi.org/10.3928/00485713-20090301-09>
- Rothman, K. J. (1990). No adjustments are needed for multiple comparisons. *Epidemiology, 1*(1), 43–46. <https://doi.org/10.1097/00001648-199001000-00010>
- Rowatt, W. C., & Al-Kire, R. L. (2021). Dimensions of religiousness and their connection to racial, ethnic, and anti-atheist prejudices. *Current Opinion in Psychology, 40*, 86–91. <https://doi.org/10.1016/j.copsyc.2020.08.022>
- Rowatt, W. C., & Kirkpatrick, L. A. (2002). Two dimensions of attachment to God and their relation to affect, religiosity, and personality constructs. *Journal for the Scientific Study of Religion, 41*(4), 637–651. <https://doi.org/10.1111/1468-5906.00143>
- Ruffing, E. G., Gardner, J. E., & Doolittle, B. R. (2018). Humility and narcissism in clergy: A relational spirituality framework. *Pastoral Psychology, 67*(6), 577–590. <https://doi.org/10.1007/s11089-018-0830-4>
- Saroglou, V. (2010). Religiousness as a cultural adaptation of basic traits: A five-factor model perspective. *Personality and Social Psychology Review, 14*, 108–125. <https://doi.org/10.1177/1088868309352322>
- Saslow, L. R., Willer, R., Feinberg, M., Piff, P. K., Clark, K., Keltner, D., & Saturn, S. R. (2013). My brother's keeper? Compassion predicts generosity more among less religious individuals. *Social Psychological and Personality Science, 4*(1), 31–38. <https://doi.org/10.1177/1948550612444137>
- Sedikides, C., & Gebauer, J. E. (2010). Religiosity as self-enhancement: A meta-analysis of the relation between socially desirable responding and religiosity. *Personality and Social Psychology Review, 14*(1), 17–36. <https://doi.org/10.1177/1088868309351002>
- Sedikides, C., & Gebauer, J. E. (2021). Do religious people self-enhance? *Current Opinion in Psychology, 40*, 29–33.
- Segal, Z. V., Williams, J. M. G., & Teasdale, J. D. (2002). *Mindfulness-based cognitive therapy for depression: A new approach to preventing relapse*. Guilford Press.
- Shapira, L. B., & Mongrain, M. (2010). The benefits of self-compassion and optimism exercises for individuals vulnerable to depression. *Journal of Positive Psychology, 5*(5), 377–389.
- Shermer, M. (1999). *How we believe: The search for God in an age of science*. Freeman.
- Sirois, F. M., & Hirsch, J. K. (2019). Self-compassion and adherence in five medical samples: The role of stress. *Mindfulness, 10*(1), 46–54. <https://doi.org/10.1007/s12671-018-0945-9>
- Siwik, C. J., Phillips, K., Zimmaro, L., Salmon, P., & Sephton, S. E. (2021). Depressive symptoms among patients with lung cancer: Elucidating the roles of shame, guilt, and self-compassion. *Journal of Health Psychology, 27*(5), 1039–1047.
- Smeets, E., Neff, K., Alberts, H., & Peters, M. (2014). Meeting suffering with kindness: Effects of a brief self-compassion intervention for female college students. *Journal of Clinical Psychology, 70*(9), 794–807.
- Ståhl, T. (2021). The amoral atheist? A cross-national examination of cultural, motivational, and cognitive antecedents of disbelief, and their implications for morality. *PLoS ONE, 16*(2), e0246593. <https://doi.org/10.1371/journal.pone.0246593>
- Stauber, L. G., & Stutts, L. A. (2021). The relationship among spirituality, self-compassion, and body satisfaction in college students. *Spirituality in Clinical Practice, 10*(4), 326–336. <https://doi.org/10.1037/scp0000284>
- Stutts, L. A., Leary, M. R., Zeveny, A. S., & Hufnagle, A. S. (2018). A longitudinal analysis of the relationship between self-compassion and the psychological effects of perceived stress. *Self and Identity, 17*(6), 609–626.
- Szcześniak, M., & Timoszyk-Tomczak, C. (2020). Religious struggle and life satisfaction among adult Christians: Self-esteem as a mediator. *Journal of Religion and Health, 59*, 2833–2856. <https://doi.org/10.1007/s10943-020-01082-9>

- Thomaes, S., Bushman, B. J., Stegge, H., & Olthof, T. (2008). Trumping shame by blasts of noise: Narcissism, self-esteem, shame, and aggression in young adolescents. *Child Development, 78*(6), 1724–1735.
- Thomaes, S., Stegge, H., & Olthof, T. (2007). Externalizing shame responses in children: The role of fragile-positive self-esteem. *British Journal of Developmental Psychology, 25*(4), 559–577. <https://doi.org/10.1348/026151007X173827>
- Tracy, J., & Robins, R. (2004). Putting the self into self-conscious emotions: A theoretical model. *Psychological Inquiry, 15*, 103–125. [https://doi.org/10.1207/s15327965pli1502\\_01](https://doi.org/10.1207/s15327965pli1502_01)
- Turk, F., & Waller, G. (2020). Is self-compassion relevant to the pathology and treatment of eating and body image concerns? A systematic review and meta-analysis. *Clinical Psychology Review, 79*, 101856.
- Twenge, J. M., Konrath, S., Foster, J. D., Keith Campbell, W., & Bushman, B. J. (2008). Egos inflating over time: A cross-temporal meta-analysis of the Narcissistic Personality Inventory. *Journal of Personality, 76*(4), 875–902.
- Vail, K. E., III, Rothschild, Z. K., Weise, D. R., Solomon, S., Pyszczynski, T., & Greenberg, J. (2010). A terror management analysis of the psychological functions of religion. *Personality and Social Psychology Review, 14*, 84–94. <https://doi.org/10.1177/1088868309351165>
- van Schie, C. C., Jarman, H. L., Reis, S., & Grenyer, B. F. S. (2021). Narcissistic traits in young people and how experiencing shame relates to current attachment challenges. *BMC Psychiatry, 21*, 246. <https://doi.org/10.1186/s12888-021-03249-4>
- Vonk, R., & Visser, A. (2020). An exploration of spiritual superiority: The paradox of self-enhancement. *European Journal of Social Psychology, 50*(2), 360–375.
- Webb, M., Heisler, D., Call, S., Chickering, S. A., & Colburn, T. A. (2007). Shame, guilt, symptoms of depression, and reported history of psychological maltreatment. *Child Abuse & Neglect, 31*(11–12), 1143–1153.
- Wilhoit, J. (2019). Self-compassion as a Christian spiritual practice. *Journal of Spiritual Formation and Soul Care, 12*(1), 71–88.
- Wilson, A. C., Mackintosh, K., Power, K., & Chan, S. W. (2019). Effectiveness of self-compassion related therapies: A systematic review and meta-analysis. *Mindfulness, 10*(6), 979–995.
- Wink, P. (1991). Two faces of narcissism. *Journal of Personality and Social Psychology, 61*(4), 590–597. <https://doi.org/10.1037/0022-3514.61.4.590>
- Wright, F., O’Leary, J., & Balkin, J. (1989). Shame, guilt, narcissism, and depression: Correlates and sex differences. *Psychoanalytic Psychology, 6*, 217–230.
- Ysseldyk, R., Matheson, K., & Anisman, H. (2010). Religiosity as identity: Toward an understanding of religion from a social identity perspective. *Personality and Social Psychology Review, 14*, 60–71. <https://doi.org/10.1177/1088868309349693>
- Zessin, U., Dickhauser, O., & Garbade, S. (2015). The relationship between self-compassion and well-being: A meta-analysis. *Applied Psychology: Health and Well-Being, 7*(3), 340–364.
- Zhang, R. J., Liu, J. H., Cai, H., Mari, S., Qu, X., & Suerdam, A. (2021). How do religiosity and national identity relate to cosmopolitanism? An empirical study using representative samples in Christian, Muslim, and Buddhist societies. *International Journal for the Psychology of Religion, 31*(4), 260–275.
- Zuckerman, P. (2007). Atheism: Contemporary numbers and patterns. In M. Martin (Ed.), *The Cambridge companion to atheism* (pp. 47–65). Cambridge University Press.

**Publisher’s Note** Springer Nature remains neutral with regard to jurisdictional claims in published maps and institutional affiliations.

Springer Nature or its licensor (e.g. a society or other partner) holds exclusive rights to this article under a publishing agreement with the author(s) or other rightsholder(s); author self-archiving of the accepted manuscript version of this article is solely governed by the terms of such publishing agreement and applicable law.