



Self-Compassion in Relationships and Caregiving Contexts

15

Christine Lathren

Self-compassion, a personal resource entailing a supportive attitude toward oneself during challenges, contributes to many aspects of *individual* well-being. A burgeoning area of research extends these findings by examining self-compassion's role in *relational* well-being. In fact, our capacity for self-compassion may be rooted in our earliest childhood relationships and closely tied to attachment, or the enduring emotional bond a child develops with primary caregivers (Gilbert & Proctor, 2006). Experiences with warm, supportive parents and primary caregivers (herein referred to as parents) promote secure attachment while simultaneously providing a foundational “template” for warm, supportive *self*-directed coping strategies later in life (Shaver et al., 2016). To this point, adolescents and young adults who rate their childhood experiences with parents as high in warmth and nurturance are more likely to have high self-compassion (Kelly & Dupasquier, 2016; Neff & McGehee, 2010; Temel & Atalay, 2018). Meanwhile, those who report receiving inconsistent, harsh, or unsupportive responses to their needs as children are more likely to have low self-compassion in later years (Pepping et al., 2015; Tanaka et al., 2011). Without a template for care under distress, we may have a compromised ability to self-soothe, and may be more likely to

respond to challenges with harshness or self-criticism. Thus, the capacity for self-compassion may be facilitated through parents or caregivers who have served as models of compassion.

However, the connection between self-compassion and relationship health does not end in childhood; it is likely complex, bidirectional, and relevant to numerous close relationships in adolescence and adulthood. The tendency to relate self-compassionately to one's own distress may be associated with adaptive thoughts, emotions, and behaviors that nourish healthy families, friendships, romantic partnerships, and more. To explore this possibility, this chapter is organized into two main sections. The first section theorizes why self-compassion may be beneficial to relationship health and describes the current evidence linking self-compassion to various interpersonal measures and factors, including relationship quality and satisfaction, prosocial behaviors and attitudes, conflict and transgression behaviors, communication, and autonomy. The second part of the chapter is dedicated to exploring self-compassion within the special circumstance of caregiving, including parenting, formal (i.e., professional) caregiving, and informal (i.e., family) caregiving.

First, why might self-compassion be associated with high relationship quality and satisfaction? Potential factors can be framed within the context of the three components of self-compassion: self-kindness, common humanity, and mindfulness. First, self-compassionate people are *kind* to themselves when they make a mis-

C. Lathren (✉)
UNC-Chapel Hill School of Medicine, University of
North Carolina at Chapel Hill, Chapel Hill, NC, USA
e-mail: lathren@email.unc.edu

take or are experiencing difficulty. This self-kindness may steady them and help them to feel less threatened in negative interpersonal encounters. Indeed, evidence demonstrates that individuals with higher self-compassion have adaptive responses to threatening stimuli; they are more likely to disengage their attention from situations that evoke feelings of inadequacy or shame (Yip & Tong, 2021) and are quicker to recover from social evaluative threats (Arch et al., 2014). Importantly, however, this does not negate taking responsibility for one's actions: in fact, people with higher levels of self-compassion have been found to be more likely to take responsibility for their mistakes than those who are less self-compassionate (Leary et al., 2007). The self-compassionate person's ability to self-soothe and avoid harsh self-judgement may mean they require less reassurance from relationship partners, bounce back more easily after relationship ruptures, and have the courage to admit wrongdoing and address problems constructively.

The *common humanity* component of self-compassion may help people to accept that, like themselves, relationship partners will make mistakes, have weaknesses, and feel unpleasant emotions; this ability to view things from a shared perspective may help people to see the best in others, forgive, and remain steadily satisfied despite conflicts or upsets. The common humanity element of self-compassion may also serve to attenuate feelings of shame and support people to communicate in ways that are likely to promote trust and intimacy in relationships. For example, research has found that practicing self-compassion supports people to disclose experiences that threaten their self-esteem (Dupasquier et al., 2020) and increase the likelihood of disclosing experiences of distress even when they fear receiving compassion from others (Dupasquier et al., 2017). Likewise, given self-compassion includes holding difficult feelings with *mindful awareness* without avoiding or overidentifying with them, it may assist one to be authentic and communicative about their feelings, while enabling them to advocate for themselves in a constructive manner. The three components work dynamically, facilitating well-

being (Zessin et al., 2015), adaptive stress coping (Allen & Leary, 2010), low psychopathology (MacBeth & Gumley, 2012), and a stable sense of self-worth (Neff & Vonk, 2009) while linking to a host of socially adaptive traits such as agreeableness, conscientiousness, and extraversion (Neff et al., 2007) – arguably all factors that should be beneficial to relational health. In sum, it is likely that compassion toward oneself is not selfish, but rather socially advantageous and connection-building.

Indeed, current evidence shows that people high in self-compassion generally report both high-quality close relationships and high satisfaction in those relationships. For example, in adolescents and young adults, self-compassion has been linked to various indices of positive family functioning such as family cohesion, supportiveness, and flexibility (Berryhill et al., 2018; Hayes et al., 2016; Hood et al., 2020; Jiang et al., 2016; Neff & McGehee, 2010). College students higher in self-compassion report higher levels of relational well-being – conceptualized as one's self-esteem and emotional well-being within the relationship (Yarnell & Neff, 2013) – and relationship quality, including measures of support, depth, and conflict (Huang & Berenbaum, 2017), with a variety of close others in their lives, including friends. In the context of romantic partnerships, self-compassion is positively linked to relationship satisfaction (Fahimdanesh et al., 2020; Maleki et al., 2019; Neff & Beretvas, 2013; Shahabi et al., 2019), relational well-being (Neff & Beretvas, 2013), and to more stable marital satisfaction over time (Baker & McNulty, 2011). These studies point to overall positive connection between self-compassion and healthy, satisfying interpersonal relationships across contexts.

Other evidence describes how self-compassion is linked to a variety of prosocial behaviors that may facilitate positive emotions between relationship partners. For example, Neff and Beretvas (2013) studied heterosexual romantic partners who had been in a relationship for a year or more and found that individuals who were high in self-compassion were perceived as behaving more favorably (i.e., more caring, accepting, and autonomy-granting, while also less controlling,

aggressive, and detached) and had partners who were more satisfied in the relationship, compared to those lower in self-compassion. Other studies have supported these findings, suggesting that self-compassion may facilitate having a more compassionate, accepting view of others' flaws and shortcomings (Zhang et al., 2019), having higher levels of compassionate goals within friendships (Crocker & Canevello, 2008), as well as the ability to be empathetic and see things from another's perspective (Fuochi et al., 2018; Neff & Pommier, 2013). Notably, not all studies have found significant positive correlations between self-compassion and compassion for others (e.g., López et al., 2018); this may be because many people who are low in self-compassion are compassionate toward others. However, in many instances, self-compassionate tendencies may promote healthy relationship functioning and thus contribute to relationship thriving.

Given self-compassion provides anchoring and self-soothing during times of hardship, high levels of self-compassion are likely to be associated with adaptive responses to inevitable relationship difficulties – including conflict and transgression scenarios. In college students, high self-compassion is associated with increased likelihood to compromise as opposed to either self-subordinate or self-prioritize when resolving conflicts with people close to them; self-compassionate respondents also rated their resolution choice as more authentic and causing lower levels of emotional distress (Yarnell & Neff, 2013). In this case, self-compassion may promote respect for one's own needs and well-being, while simultaneously recognizing the perspectives and “common humanity” of others, leading to solutions that are sensitive to both parties. In challenging romantic contexts, self-compassion is related to decreased jealousy, increased willingness to forgive (Tandler & Petersen, 2018), adjustment after divorce (Sbarra et al., 2012), and in certain circumstances, motivation to repair after a mistake (Baker & McNulty, 2011) or to self-improve after a break-up (Zhang & Chen, 2017). Perhaps related to these findings, several studies have shown that self-

compassionate people have lower levels of negative emotional responses to unpleasant interpersonal events (Leary et al., 2007; Purdie & Morley, 2015) and are less sensitive to interpersonal rejection (Gerber et al., 2015). Thus, in the context of various types of relationship breaches or unpleasanties, self-compassion may allow one to put one's own weaknesses and the weaknesses of others in perspective. It may promote the emotional stability needed to move forward with kindness and understanding toward *both* oneself and relationship partners, leading to more effective problem-solving, self-improving, and rupture-repairing behaviors.

Similarly, self-compassion may be linked to improved communication in relationship partners, particularly if the discussion topic brings up difficult emotions. Given self-compassionate individuals are more likely to accept their difficult emotions in a supportive and non-avoidant manner, individuals who are self-compassionate may have more emotional clarity and have an easier time discussing difficulties or admitting shortcomings with others without becoming controlling or detached. At the same time, self-compassion may facilitate improved listening skills via emotion regulation and decreased threat perception. Women high in self-compassion who were facing infertility, for example, reported greater ease in talking about infertility with their romantic partner (Raque-Bogdan & Hoffman, 2015). Likewise, in couples facing lung cancer, patients' self-compassion was significantly associated with better self-reported communication with their partner about the cancer (Schellekens et al., 2017). Recent examination of communication styles in organizational contexts also supports the link between self-compassion and more effective, person-centered listening styles (Salazar, 2017). Meanwhile, in parenting contexts (described in more detail later in this chapter), parent self-compassion is associated with higher self-reported levels of mindful parenting behaviors; these behaviors include listening to the child with full attention and being aware of and sensitive to the emotional cues from the child (Moreira et al., 2016). Thus, in a variety of contexts, self-compassion is associated with the abil-

ity to express oneself and likewise, be mindfully attuned to others.

Healthy relationships also thrive when there is a balance between one's own feelings and needs and those of relationship partners. Attending to the needs of others to the detriment of one's own needs or becoming enmeshed with or distressed by the needs of others can negatively impact relational health. Self-compassion has been linked to lower levels of overdependency (Denckla et al., 2017) and greater levels of autonomy, self-awareness, and competence, which may protect against caregiving burnout and pathological investment in other needs (Gerber et al., 2015; Gerber & Anaki, 2021). Likewise, in families where dysfunctional relationships cause overinvolvement of family members in one another's lives, self-compassion may be useful in promoting improved mental health outcomes (Berryhill et al., 2018).

Balance may be particularly salient in parent-child and other caregiving relationships, which are the topics of the rest of this chapter. Caregiving relationships are unique given they are often high intensity, with parents and caregivers influenced by societal, cultural, and self-imposed expectations to provide compassionate, selfless care for extended periods of time to the detriment of their own health. While there are many positive and fulfilling aspects of caregiving, stress, dysfunctional coping patterns, caregiving fatigue, burden, and burnout are also common – bringing with them negative consequences for the relationship between caregiver and care recipient(s) and the quality of care provided.

Meanwhile, theoretically, the three components of self-compassion may assuage the difficult aspects of the caregiving experience. Self-kindness may temper caregivers' perfectionism and self-judgment, allowing caregivers to let go of unrealistic expectations, accept their human limitations, and include themselves in the circle of care. Moreover, when caregivers can meet their own emotional needs, fewer demands may be placed on the care recipient, who may be unable (e.g., family members with dementia, young children) to offer reciprocal emotional care. These healthy boundaries and rebalancing

of the flow of care may result in improved relationship functioning. The mindfulness component of self-compassion may help caregivers to maintain perspective regarding their role. By being aware of emotions without becoming overwhelmed or ruminating on them, caregivers may also be more skillful in challenging interpersonal encounters and may deescalate emotionally charged caregiving situations. Finally, common humanity reminds caregivers that their difficult feelings make sense and are to be expected under challenging circumstances, keeping them connected to rather than isolated from others. It may also help caregivers to remember the humanity and imperfection of those they care for. This may engender patience, forgiveness, and compassionate caregiving behaviors, which ultimately strengthens the relationship. In sum, self-compassion may be an exceptionally well-suited resource for overextended parents and caregivers, with interwoven benefits for caregiver, care recipient, and the relationship between them.

As expected, the literature supports self-compassion as a beneficial resource for struggling parents, as it promotes healthy stress coping and adaptive attitudes toward parenting challenges. Self-compassion is associated with lower levels of parental stress in general community samples (Gouveia et al., 2016; Moreira et al., 2015), as well as lower distress and improved well-being for parents of children who are on the autism spectrum (Neff & Faso, 2015), have intellectual and developmental disabilities (Robinson et al., 2017), and have mental health problems (Shenaar-Golan et al., 2021). In contexts where children often display challenging emotions and behaviors, parents can be faced with feelings of inadequacy, frustration, self-criticism and self-blame, and isolation. Self-compassion allows parents to meet these difficulties with kindness and understanding, normalizing them as part of life's ups and downs rather than abnormal or shameful. Parents of children on the autism spectrum report feeling less stigmatized (Wong et al., 2016), more hopeful, satisfied with life, self-efficacious in their parental role (Neff & Faso, 2015), and more forgiving of their perceived weaknesses as a parent (Bohadana et al., 2020).

Even in response to everyday parenting challenges, self-compassion appears beneficial in tempering feelings of guilt and shame with respect to not showing up in an ideal way during a difficult parenting event (Sirois et al., 2019). Meanwhile, for parents of children with various mental health problems, self-compassion was a stronger predictor of higher levels of positive feelings and lower levels of negative feelings in the parental role than the severity of child mental health symptoms (Shenaar-Golan et al., 2021). These findings suggest that self-compassion may help parents cope with the demands of parenthood from a balanced, connected perspective – a view that may engender more harmony in the parent–child relationship.

Likewise, parents who are high in self-compassion may extend a kind and understanding orientation toward their children, resulting in a less judgmental and more accepting view of their child's struggles. For example, Neff and Faso (2015) showed parents of children with autism who had high self-compassion were less likely to rate their child's behavior as difficult or problematic, and more likely to feel satisfied in their relationship with their child. Similarly, in a sample of parents with a history of depression, parents high in self-compassion were gentler in their assessment of their child's difficult behavior, attributing the behavior to transient or situational factors as opposed to static character traits (Psychogiou et al., 2016). Thus, by helping parents remain open and forgiving, allowing them to see the best in both themselves and their child, self-compassion may promote better functioning under challenging parenting conditions.

Closely connected to adaptive coping and attitudes, parents with high self-compassion may display more sensitive behaviors, as they may be better attuned to the emotional cues of their child. Parents with high self-compassion are more likely to be authoritative in their parenting, a style considered both warm and supportive (Gouveia et al., 2016). Numerous studies have also linked high self-compassion in parents to mindful parenting (Duncan et al., 2009), described as a five-dimensional set of practices or skills that relate to high-quality parenting behav-

iors: (1) listening to child with full attention, (2) emotional awareness of self and child, (3) self-regulation in the parenting relationship, (4) non-judgmental acceptance of self and child, and (5) compassion for self and child. Parents who have high self-compassion are more likely to interact with their child using mindful parenting practices (Kim et al., 2019; Moreira et al., 2016; Moreira & Canavarro, 2017). Mindful parenting, in turn, is linked to adolescents' secure attachment to parents (Moreira et al., 2018).

Other related research posits that parents who have high self-compassion may be generally attuned to and comfortable with negative emotions in both themselves and their child (Lathren et al., 2020), linking to child development literature on emotion socialization processes (Eisenberg et al., 1998) and emotion coaching behaviors (Gottman et al., 1996). Parents with high self-compassion are mindfully aware of their own negative emotions and related needs, attending to these emotions supportively rather than avoiding or becoming overwhelmed. It makes sense, then, that these parents would approach negative emotions similarly when displayed by their child. Parents may play the role of an "emotion coach" who recognizes, validates, labels, comforts, and welcomes negative emotions in their child as an opportunity for intimacy and problem-solving support. This approach contrasts with parents who themselves are uncomfortable with difficult feelings, and who may tend to minimize or deny feelings like sadness or anger in their children, or even punish children for having these emotions (Gottman et al., 1996). Thus, parents with high self-compassion may develop stronger bonds with their children through behaviors which are attentive, attuned, compassionate, and "coach" the child to navigate emotional challenges in a healthy, validating manner.

Professional caregivers are another group for whom self-compassion is highly relevant. Evidence to date supports the link between self-compassion and decreased caregiving stress in a wide variety of professional caregivers, including nursing home nursing assistants, hospital and community nurses, physicians, and health-care

students. These studies have shown self-compassion is associated with lower levels of secondary trauma symptoms (i.e., experiencing trauma due to exposure to the trauma and suffering of others), compassion fatigue (i.e., exhaustion and dysfunction due to prolonged exposure to the suffering and stress of others), and various measures of burnout, while associated with higher levels of compassion satisfaction (e.g., fulfillment in one's caregiving role) and quality of life (Bluth et al., 2021; Delaney, 2018; Duarte et al., 2016; Durkin et al., 2016; Upton, 2018). In these settings, self-compassion may improve caregiving capacities by strengthening *internal* support mechanisms in order to revitalize and fuel *outward* support.

Similarly, researchers have developed interventions aimed to raise self-compassion levels for hospital nurses (Delaney, 2018), mixed health-care communities (Neff et al., 2020), and nursing home nursing assistants (Bluth et al., 2021). These studies show self-compassion interventions are feasible and acceptable for professional caregivers and are linked to improvements in well-being, burnout, and compassion-related measures. However, studies to date have lacked a direct measurement of potential impact on dyadic relationships between caregiver and care recipient, nor related outcomes such as care quality and satisfaction with care. These issues will be important to explore in future work.

Family caregivers, particularly those caring for loved ones with dementia or another debilitating illness, similarly experience high levels of stress and burden. Evidence suggests self-compassion may help relieve stress and burden in family caregivers via connection with lower levels of dysfunctional coping strategies (Lloyd et al., 2019), lower caregiver burden (Xu et al., 2020), and improved quality of life (Hlabangana & Hearn, 2020). Other evidence shows that self-compassion moderates the relationship between caregiving stress and depression (Hsieh et al., 2021). However, despite high promise, interventions explicitly focused on raising family caregivers' self-compassion and improving family relationships have not yet been explored (Murfield et al., 2020).

Other studies provide a more nuanced view of how self-compassion may be useful in relieving caregiver stress by examining impact on unhelpful or unrealistic thought patterns or behaviors related to the caregiving role. For example, some family caregivers experience unhealthy guilt – feeling guilty for feeling sad or hopeless – related to societal or cultural norms regarding familism and the importance of honoring and caring for loved ones (Sayegh & Knight, 2011). Similarly, family caregiver accounts commonly reveal self-sacrificing behaviors, a strong commitment to caregiver identity and reluctance to prioritize oneself due to fear of detracting from one's responsibilities or becoming selfish (Berardini et al., 2021; Diggory & Reeves, 2021). The culture of selflessness and denial of self-needs also pervades health-care settings, where providers have high workloads and lack opportunities for self-care; the expectation is to set one's needs aside, “people-please” and prioritize caregiving tasks to the detriment of provider well-being (Andrews et al., 2020; Lathren et al., 2021).

Self-compassion appears to soften this view, promoting a more balanced understanding of caregiving situations and acceptance of caregiver's often limited role in fully ameliorating the challenges faced by the care recipient. This reframing is particularly useful for combatting caregivers' feelings of shame or guilt for being an imperfect human who has needs of their own; these findings are similar to themes within parenting literature discussed earlier. For example, for mothers caring for a child on the autism spectrum, self-compassion is described as allowing caregivers to challenge unrealistic internal and societal expectations of themselves, helping them to forgive their shortcomings, and promoting emotional self-care without sinking into self-judgment and despair (Bohadana et al., 2020). Similarly, for nursing home nursing assistants in a professional caregiving context, self-compassion intervention promoted self-appreciation, validation of one's needs as a human, and a more realistic view of their capacities and limitations as caregivers (Lathren et al., 2021). Caregivers described how practicing self-compassion alleviated burden and self-imposed

stress and resulted in perceived increases in kindness, patience, and understanding toward care recipients. Thus, whether personal or professional, a “rebalancing” of compassion and care *toward the caregiver* may ultimately provide the internal resources to increase compassion and care *toward those they provide for*.

Surprisingly, while mindfulness studies are relatively common, to date there have been few self-compassion-focused intervention studies that target parents and caregivers – despite numerous potential benefits for both formal caregivers and family caregivers. Given the well-established benefits of self-compassion, a pragmatic approach may be appropriate. For health-care professionals, these interventions could be woven into educational curricula, professional development, and in services. To address critical shortages of health-care workers and burnout, policies must create a cultural shift away from self-sacrifice and denial to one of support and replenishment. Ultimately, a self-compassionate clinical workplace culture would benefit *all* relationships – including relationships between administrators, staff (office staff, physicians, nurses, aides, etc.), and with patients and their families. Meanwhile, family caregivers could be offered access to self-compassion programming through physicians’ offices and community organizations that offer support and educational programming. For example, organizations that provide resources to caregivers for persons with dementia, cancer, or autism support, organizations could offer self-compassion training – in various formats – to supplement traditional caregiving support services like peer support groups.

Self-compassion training should also be offered more widely to both new parents and to parents and their young children early in family life, particularly for families facing adversity or dysfunction. These offerings could originate through pediatric offices, community outreach organizations, schools, and churches. Offerings that provide skills to parents and children simultaneously would not only benefit parent and child well-being but also develop a broader family culture that values emotional expression, accep-

tance, and self-care. In this way, family self-compassion training promotes a *powerful “dual model” of support* by strengthening both the relational support family members provide to one another and each person’s individual capacity for self-directed support.

Moreover, evidence described in this chapter suggests that interpersonal, longitudinal effects may be seen. For example, youth who learn self-compassion skills early may be more likely to develop healthy, fulfilling relationships in adolescence and adulthood, eventually influencing *their own* capacity to be a compassionate, nurturing parent and caregiver. Thus, self-compassion may have implications across generations, making it a particularly valuable resource for healing cycles of dysfunction passed on via strained family relationships and attachment insecurity. For these reasons, research that applies self-compassion interventions to relational contexts and examines longitudinal, cross-generational effects hold significant promise.

To summarize, self-compassion and healthy, satisfying, supportive human relationships appear to go hand in hand. As human relationships go through inevitable periods of hardship – conflict, transgressions, stress, trauma, illness – self-compassion serves to stabilize, comfort, remind us that we are good enough just as we are, and that we are all worthy of giving and receiving love and forgiveness. In a nutshell, self-compassion allows us to show up for ourselves, so that we can similarly show up for those we care about.

References

- Allen, A. B., & Leary, M. R. (2010). Self-compassion, stress, and coping. *Social and Personality Psychology Compass*, *4*(2), 107–118. <https://doi.org/10.1111/j.1751-9004.2009.00246.x>
- Andrews, H., Tierney, S., & Seers, K. (2020). Needing permission: The experience of self-care and self-compassion in nursing: A constructivist grounded theory study. *International Journal of Nursing Studies*, *101*, 103436. <https://doi.org/10.1016/j.ijnurstu.2019.103436>
- Arch, J. J., Warren Brown, K., Dean, D. J., Landy, L. N., Brown, K., & Laudenslager, M. L. (2014).

- Self-compassion training modulates alpha-amylase, heart rate variability, and subjective responses to social evaluative threat in women. *Psychoneuroendocrinology*, *42*, 49–58. <https://doi.org/10.1016/j.psyneuen.2013.12.018>
- Baker, L. R., & McNulty, J. K. (2011). Self-compassion and relationship maintenance: The moderating roles of conscientiousness and gender. *Journal of Personality and Social Psychology*, *100*(5), 853–873. <https://doi.org/10.1037/a0021884>
- Berardini, Y., Chalmers, H., & Ramey, H. (2021). Unfolding what self-compassion means in young carers' lives. *Child and Adolescent Social Work Journal*, *38*, 533–545. <https://doi.org/10.1007/s10560-021-00791-8>
- Berryhill, M. B., Hayes, A., & Lloyd, K. (2018). Chaotic-enmeshment and anxiety: The mediating role of psychological flexibility and self-compassion. *Contemporary Family Therapy: An International Journal*, *40*, 326–337. <https://doi.org/10.1007/s10591-018-9461-2>
- Bluth, K., Lathren, C., Silbersack Hickey, J. V. T., Zimmerman, S., Wretman, C. J., & Sloane, P. D. (2021). Self-compassion training for certified nurse assistants in nursing homes. *Journal of the American Geriatrics Society*, *69*(7), 1896–1905. <https://doi.org/10.1111/jgs.17155>
- Bohadana, G., Morrissey, S., & Paynter, J. (2020). Self-compassion in mothers of children with autism spectrum disorder: A qualitative analysis. *Journal of Autism and Developmental Disorders*, *51*(4), 1290–1303. <https://doi.org/10.1007/S10803-020-04612-2>
- Crocker, J., & Canevello, A. (2008). Creating and undermining social support in communal relationships: The role of compassionate and self-image goals. *Journal of Personality and Social Psychology*, *95*(3), 555–575. <https://doi.org/10.1037/0022-3514.95.3.555>
- Delaney, M. C. (2018). Caring for the caregivers: Evaluation of the effect of an eight-week pilot mindful self-compassion (MSC) training program on nurses' compassion fatigue and resilience. *PLoS One*, *13*(11), e0207261. <https://doi.org/10.1371/journal.pone.0207261>
- Denckla, C. A., Consedine, N. S., & Bornstein, R. F. (2017). Self-compassion mediates the link between dependency and depressive symptomatology in college students. *Self and Identity*, *16*(4), 373–383. <https://doi.org/10.1080/15298868.2016.1264464>
- Diggory, K., & Reeves, A. (2021). 'Permission to be kind to myself'. The experiences of informal carers of those with a life-limiting or terminal illness of a brief self-compassion-based self-care intervention. *Progress in Palliative Care*, *30*(3), 149–157. <https://doi.org/10.1080/09699260.2021.1972722>
- Duarte, J., Pinto-Gouveia, J., & Cruz, B. (2016). Relationships between nurses' empathy, self-compassion and dimensions of professional quality of life: A cross-sectional study. *International Journal of Nursing Studies*, *60*, 1–11. <https://doi.org/10.1016/j.ijnurstu.2016.02.015>
- Duncan, L. G., Coatsworth, J. D., & Greenberg, M. T. (2009). A model of mindful parenting: Implications for parent-child relationships and prevention research. *Clinical Child and Family Psychology Review*, *12*(3), 255–270. <https://doi.org/10.1007/s10567-009-0046-3>
- Dupasquier, J. R., Kelly, A. C., Moscovitch, D. A., & Vidovic, V. (2017). Practicing self-compassion weakens the relationship between fear of receiving compassion and the desire to conceal negative experiences from others. *Mindfulness*, *9*, 500–511. <https://doi.org/10.1007/s12671-017-0792-0>
- Dupasquier, J. R., Kelly, A. C., Moscovitch, D. A., & Vidovic, V. (2020). Cultivating self-compassion promotes disclosure of experiences that threaten self-esteem. *Cognitive Therapy and Research*, *44*, 108–119. <https://doi.org/10.1007/s10608-019-10050-x>
- Durkin, M., Beaumont, E., Hollins Martin, C. J., & Carson, J. (2016). A pilot study exploring the relationship between self-compassion, self-judgement, self-kindness, compassion, professional quality of life and wellbeing among UK community nurses. *Nurse Education Today*, *46*, 109–114. <https://doi.org/10.1016/j.nedt.2016.08.030>
- Eisenberg, N., Cumberland, A., & Spinrad, T. (1998). Parental socialization of emotion. *Psychological Inquiry*, *9*(4), 241–273. <https://doi.org/10.1207/s15327965pli0904>
- Fahimdanesh, F., Noferesti, A., & Tavakol, K. (2020). Self-compassion and forgiveness: Major predictors of marital satisfaction in young couples. *American Journal of Family Therapy*, *48*(3), 221–234. <https://doi.org/10.1080/01926187.2019.1708832>
- Fuochi, G., Veneziani, C. A., & Voci, A. (2018). Exploring the social side of self-compassion: Relations with empathy and outgroup attitudes. *European Journal of Social Psychology*, *48*(6), 769–783. <https://doi.org/10.1002/ejsp.2378>
- Gerber, Z., & Anaki, D. (2021). The role of self-compassion, concern for others, and basic psychological needs in the reduction of caregiving burnout. *Mindfulness*, *12*(3), 741–750. <https://doi.org/10.1007/s12671-020-01540-1>
- Gerber, Z., Tolmacz, R., & Doron, Y. (2015). Self-compassion and forms of concern for others. *Personality and Individual Differences*, *86*, 394–400. <https://doi.org/10.1016/j.paid.2015.06.052>
- 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*, *13*, 353–379. <https://doi.org/10.1002/cpp.507>
- Gottman, J. M., Katz, L. F., & Hooven, C. (1996). Parental meta-emotion philosophy and the emotional life of families: Theoretical models and preliminary data. *Journal of Family Psychology*, *10*(3), 243–268. <https://doi.org/10.1037/0893-3200.10.3.243>
- Gouveia, M. J., Carona, C., Canavarro, M. C., & Moreira, H. (2016). Self-compassion and dispositional mindfulness are associated with parenting styles and parenting stress: The mediating role of mindful parent-

- ing. *Mindfulness*, 7, 700–712. <https://doi.org/10.1007/s12671-016-0507-y>
- Hayes, J. A., Lockard, A. J., Janis, R. A., & Locke, B. D. (2016). Construct validity of the self-compassion scale-short form among psychotherapy clients. *Counselling Psychology Quarterly*, 29(4), 405–422. <https://doi.org/10.1080/09515070.2016.1138397>
- Hlabangana, V., & Hearn, J. H. (2020). Depression in partner caregivers of people with neurological conditions; associations with self-compassion and quality of life. *Journal of Mental Health*, 29(2), 176–181. <https://doi.org/10.1080/09638237.2019.1630724>
- Hood, C. O., Thomson Ross, L., & Wills, N. (2020). Family factors and depressive symptoms among college students: Understanding the role of self-compassion. *Journal of American College Health*, 68(7), 683–687. <https://doi.org/10.1080/07448481.2019.1596920>
- Hsieh, C.-C., Lin, Z.-Z., Ho, C.-C., Yu, C.-J., Chen, H.-J., Chen, Y.-W., & Hsiao, F.-H. (2021). The short- and long-term causal relationships between self-compassion, trait mindfulness, caregiver stress, and depressive symptoms in family caregivers of patients with lung cancer. *Mindfulness*, 12(7), 1812–1821. <https://doi.org/10.1007/S12671-021-01642-4>
- Huang, A. B., & Berenbaum, H. (2017). Accepting our weaknesses and enjoying better relationships: An initial examination of self-security. *Personality and Individual Differences*, 106, 64–70. <https://doi.org/10.1016/j.paid.2016.10.031>
- Jiang, Y., You, J., Hou, Y., Du, C., Lin, M.-P., Zheng, X., & Ma, C. (2016). Buffering the effects of peer victimization on adolescent non-suicidal self-injury: The role of self-compassion and family cohesion. *Journal of Adolescence*, 53, 107–115. <https://doi.org/10.1016/j.adolescence.2016.09.005>
- Kelly, A. C., & Dupasquier, J. (2016). Social safeness mediates the relationship between recalled parental warmth and the capacity for self-compassion and receiving compassion. *Personality and Individual Differences*, 89, 157–161. <https://doi.org/10.1016/j.paid.2015.10.017>
- Kim, E., Krägeloh, C. U., Medvedev, O. N., Duncan, L. G., & Singh, N. N. (2019). Interpersonal mindfulness in parenting scale: Testing the psychometric properties of a Korean version. *Mindfulness*, 10, 516–528. <https://doi.org/10.1007/s12671-018-0993-1>
- Lathren, C., Bluth, K., & Zvara, B. (2020). Parent self-compassion and supportive responses to child difficult emotion: An intergenerational theoretical model rooted in attachment. *Journal of Family Theory and Review*, 12(3), 368–381. <https://doi.org/10.1111/jftr.12388>
- Lathren, C., Sheffield-Abdullah, K., Sloane, P. D., Bluth, K., Hickey, J. V. T. S., Wretman, C. J., Phillips, L. P., & Zimmerman, S. (2021). Certified nursing assistants' experiences with self-compassion training in the nursing home setting. *Geriatric Nursing*, 42, 1341–1348. <https://doi.org/10.1016/j.gerinurse.2021.08.013>
- Leary, M. R., Tate, E. B., Adams, C. E., Allen, A. B., & 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>
- 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. <https://doi.org/10.1080/07317115.2018.1461162>
- López, A., Sanderman, R., Ranchor, A. V., & Schroevers, M. J. (2018). Compassion for others and self-compassion: Levels, correlates, and relationship with psychological well-being. *Mindfulness*, 9(1), 325–331. <https://doi.org/10.1007/s12671-017-0777-z>
- MacBeth, A., & Gumley, A. (2012). Exploring compassion: A meta-analysis of the association between self-compassion and psychopathology. *Clinical Psychology Review*, 32(6), 545–552. <https://doi.org/10.1016/j.cpr.2012.06.003>
- Maleki, A., Veisani, Y., Aibod, S., Azizifar, A., Alirahmi, M., & Mohamadian, F. (2019). Investigating the relationship between conscientiousness and self-compassion with marital satisfaction among Iranian married employees. *Journal of Education and Health Promotion*, 8(76), 1–7. https://doi.org/10.4103/jehp.jehp_105_18
- Moreira, H., & Canavarro, M. C. (2017). Psychometric properties of the interpersonal mindfulness in parenting scale in a sample of Portuguese mothers. *Mindfulness*, 8, 691–706. <https://doi.org/10.1007/s12671-016-0647-0>
- Moreira, H., Gouveia, M. J., Carona, C., Silva, N., & Canavarro, M. C. (2015). Maternal attachment and children's quality of life: The mediating role of self-compassion and parenting stress. *Journal of Child and Family Studies*, 24(8), 2332–2344. <https://doi.org/10.1007/s10826-014-0036-z>
- Moreira, H., Carona, C., Silva, N., Nunes, J., & Canavarro, M. C. (2016). Exploring the link between maternal attachment-related anxiety and avoidance and mindful parenting: The mediating role of self-compassion. *Psychology and Psychotherapy: Theory, Research and Practice*, 89(4), 369–384. <https://doi.org/10.1111/papt.12082>
- Moreira, H., Gouveia, M. J., & Canavarro, M. C. (2018). Is mindful parenting associated with adolescents' Well-being in early and middle/late adolescence? The mediating role of adolescents' attachment representations, self-compassion and mindfulness. *Journal of Youth and Adolescence*, 47(8), 1771–1788. <https://doi.org/10.1007/s10964-018-0808-7>
- Murfield, J., Moyle, W., & O'Donovan, A. (2020). Self-compassion as an applicable intervention target for family carers of older adults: A conceptual commentary. *International Journal of Geriatric Psychiatry*, 35(4), 376–383. <https://doi.org/10.1002/gps.5257>
- Neff, K. D., & Beretvas, S. N. (2013). The role of self-compassion in romantic relationships. *Self and*

- Identity*, 12(1), 78–98. <https://doi.org/10.1080/15298868.2011.639548>
- Neff, K. D., & Faso, D. J. (2015). Self-compassion and well-being in parents of children with autism. *Mindfulness*, 6(4), 938–947. <https://doi.org/10.1007/s12671-014-0359-2>
- Neff, K. D., & McGehee, P. (2010). Self-compassion and psychological resilience among adolescents and young adults. *Self and Identity*, 9(3), 225–240. <https://doi.org/10.1080/15298860902979307>
- Neff, K., & Pommier, E. (2013). The relationship between self-compassion and other-focused concern among college undergraduates, community adults, and practicing meditators. *Self and Identity*, 12, 160–176. <https://doi.org/10.1080/15298868.2011.649546>
- 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. <https://doi.org/10.1111/j.1467-6494.2008.00537.x>
- Neff, K. D., Rude, S. S., & Kirkpatrick, K. L. (2007). An examination of self-compassion in relation to positive psychological functioning and personality traits. *Journal of Research in Personality*, 41(4), 908–916. <https://doi.org/10.1016/j.jrp.2006.08.002>
- Neff, K. D., Knox, M. C., Long, P., & Gregory, K. (2020). Caring for others without losing yourself: An adaptation of the mindful self-compassion program for healthcare communities. *Journal of Clinical Psychology*, 76, 1543–1562. <https://doi.org/10.1002/jclp.23007>
- Pepping, C. A., Davis, P. J., O'Donovan, A., & Pal, J. (2015). Individual differences in self-compassion: The role of attachment and experiences of parenting in childhood. *Self and Identity*, 14(1), 104–117. <https://doi.org/10.1080/15298868.2014.955050>
- Psychogiou, L., Legge, K., Parry, E., Mann, J., Nath, S., Ford, T., & Kuyken, W. (2016). Self-compassion and parenting in mothers and fathers with depression. *Mindfulness*, 7, 896–908. <https://doi.org/10.1007/s12671-016-0528-6>
- Purdie, F., & Morley, S. (2015). Self-compassion, pain, and breaking a social contract. *Pain*, 156(11), 2354–2363. <https://doi.org/10.1097/j.pain.0000000000000287>
- Raque-Bogdan, T. L., & Hoffman, M. A. (2015). The relationship among infertility, self-compassion, and well-being for women with primary or secondary infertility. *Psychology of Women Quarterly*, 39(4), 484–496. <https://doi.org/10.1177/0361684315576208>
- Robinson, S., Hastings, R. P., Weiss, J. A., Pagavathsing, J., & Lunsky, Y. (2017). Self-compassion and psychological distress in parents of young people and adults with intellectual and developmental disabilities. *Journal of Applied Research in Intellectual Disabilities*, 31(3), 454–458. <https://doi.org/10.1111/jar.12423>
- Salazar, L. R. (2017). The influence of business students' listening styles on their compassion and self-compassion. *Business and Professional Communication Quarterly*, 80(4), 226–244.
- Sayegh, P., & Knight, B. G. (2011). The effects of familism and cultural justification on the mental and physical health of family caregivers. *The Journals of Gerontology: Series B*, 66B(1), 3–14. <https://doi.org/10.1093/GERONB/GBQ061>
- Sbarra, D. A., Smith, H. L., & Mehl, M. R. (2012). When leaving your ex, love yourself: Observational ratings of self-compassion predict the course of emotional recovery following marital separation. *Psychological Science*, 23(3), 261–269. <https://doi.org/10.1177/0956797611429466>
- Schellekens, M. P. J., Karremans, J. C., van der Drift, M. A., Molema, J., van den Hurk, D. G. M., Prins, J. B., & Speckens, A. E. M. (2017). Are mindfulness and self-compassion related to psychological distress and communication in couples facing lung cancer? A dyadic approach. *Mindfulness*, 8(2), 325–336. <https://doi.org/10.1007/s12671-016-0602-0>
- Shahabi, B., Shahabi, R., & Foroozandeh, E. (2019). Analysis of the self-compassion and cognitive flexibility with marital compatibility in parents of children with autism spectrum disorder. *International Journal of Developmental Disabilities*, 66(4), 282–288. <https://doi.org/10.1080/20473869.2019.1573000>
- Shaver, P., Mikulincer, M., Sahdra, B., & Gross, J. T. (2016). Attachment security as a foundation for kindness toward self and others. In K. W. Brown & M. R. Leary (Eds.), *The Oxford handbook of hypo-egoic phenomena* (pp. 223–242). Oxford University Press. <https://doi.org/10.1093/oxfordhb/9780199328079.013.15>
- Shenaar-Golan, V., Wald, N., & Yatzkar, U. (2021). Parenting a child with mental health problems: The role of self-compassion. *Mindfulness*, 12, 2810–2819. <https://doi.org/10.1007/s12671-021-01744-z>
- Sirois, F. M., Bögels, S., & Emerson, L.-M. (2019). Self-compassion improves parental well-being in response to challenging parenting events. *The Journal of Psychology*, 153(3), 327–341. <https://doi.org/10.1080/00223980.2018.1523123>
- Tanaka, M., Wekerle, C., Schmuck, M. L., Paglia-Boak, A., & MAP Research Team. (2011). The linkages among childhood maltreatment, adolescent mental health, and self-compassion in child welfare adolescents. *Child Abuse & Neglect*, 35(10), 887–898. <https://doi.org/10.1016/j.chiabu.2011.07.003>
- Tandler, N., & Petersen, L.-E. (2018). Are self-compassionate partners less jealous? Exploring the mediation effects of anger rumination and willingness to forgive on the association between self-compassion and romantic jealousy. *Current Psychology: A Journal for Diverse Perspectives on Diverse Psychological Issues*, 39, 750–760. <https://doi.org/10.1007/s12144-018-9797-7>
- Temel, M., & Atalay, A. A. (2018). The relationship between perceived maternal parenting and psychological distress: Mediator role of self-compassion. *Current Psychology*, 39, 2203–2210. <https://doi.org/10.1007/s12144-018-9904-9>

- Upton, K. V. (2018). An investigation into compassion fatigue and self-compassion in acute medical care hospital nurses: A mixed methods study. *Journal of Compassionate Health Care*, 5(7). <https://doi.org/10.1186/s40639-018-0050-x>
- Wong, C. C. Y., Mak, W. W. S., & Liao, K. Y.-H. (2016). Self-compassion: A potential buffer against affiliate stigma experienced by parents of children with autism spectrum disorders. *Mindfulness*, 7(6), 1385–1395. <https://doi.org/10.1007/s12671-016-0580-2>
- Xu, S., Zhang, H., & Wang, J. (2020). Caregiver burden and depression among Chinese family caregivers: The role of self-compassion. *Mindfulness*, 11(7), 1647–1654. <https://doi.org/10.1007/S12671-020-01378-7>
- Yarnell, L. M., & Neff, K. D. (2013). Self-compassion, interpersonal conflict resolutions, and well-being. *Self and Identity*, 12(2), 146–159. <https://doi.org/10.1080/15298868.2011.649545>
- Yip, V. T., & Tong, E. (2021). Self-compassion and attention: Self-compassion facilitates disengagement from negative stimuli. *The Journal of Positive Psychology*, 16(5), 593–609. <https://doi.org/10.1080/17439760.2020.1778060>
- Zessin, U., Dickhäuser, 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. <https://doi.org/10.1111/aphw.12051>
- Zhang, J. W., & Chen, S. (2017). Self-compassion promotes positive adjustment for people who attribute responsibility of a romantic breakup to themselves. *Self and Identity*, 16(6), 732–759. <https://doi.org/10.1080/15298868.2017.1305985>
- Zhang, J., Chen, S., & Tomova Shakur, T. (2019). From me to you: Self-compassion predicts acceptance of own and others' imperfections. *Personality and Social Psychology Bulletin*, 1–15. <https://doi.org/10.1177/0146167219853846>