

# Cultivating Compassionate Schools: Pilot study of a compassion focused intervention to promote teachers' mental health and wellbeing

Marcela Matos<sup>1</sup>, Lara Palmeira<sup>1</sup>, Isabel Albuquerque<sup>1</sup>, Marina Cunha<sup>1,2</sup>, Margarida Pedroso Lima<sup>1</sup>, Ana Galhardo<sup>1,2</sup>, & Paul Gilbert<sup>3</sup>

<sup>1</sup>CINEICC – Center for Research in Neuropsychology and Cognitive and Behavioural Interventions, University of Coimbra; <sup>2</sup>Instituto Superior Miguel Torga, Coimbra; <sup>3</sup>Centre for Compassion /Mental Health Research Unit, Derbyshire Healthcare NHS Foundation Trust

## Introduction

Growing evidence indicates that schools are becoming increasingly stressful environments for both teachers and pupils. Recent studies show that teachers present a high risk of professional stress, damaging their well-being and professional performance. In addition, there is a high prevalence of mental health problems in the school context, including teachers and students. Thus, it is crucial to promote adaptive cognitive and emotional processes that provide teachers with more resources to deal with the challenges of the school context.

Compassionate-based interventions have received increasing empirical support, developing adaptive emotional regulation skills central to stress regulation and promoting well-being (Kirby, 2016). These interventions have shown numerous benefits in diverse populations and contexts, such as in mental health indicators (e.g., lower depression, stress, anxiety), physical health (e.g., regulation of neurochemical processes associated with the stress response) and at an interpersonal level (e.g., greater empathy and compassion, improved interpersonal and social relations) (Kirby et al., 2017; Leaviss & Uttley, 2015; Matos et al., 2017).

This study aims at testing the feasibility and efficacy of the Compassionate Schools Program (CSP), a six module compassionate mind training (CMT; Gilbert, 2014) group intervention for teachers to improve wellbeing and mental health.

## Results

### Feasibility & Qualitative Assessment

The CSP was well-received by teachers, with 78% attending  $\geq 5$  sessions. The majority of teachers assessed the CSP as very/extremely important (91%), found the sessions very/extremely relevant (97%) and useful (100%), and the practices adequate (97%). Most teachers were highly motivated to attend the training (75%) and would recommended it to others (100%).

The sessions considered most useful were sessions 4 (31%) and 3 (25%) and the practices rated as most helpful were Soothing Rhythm Breathing (70%), Compassion for the self (70%), Safe Place (50%) and Mindfulness (50%).

Table 1. Means and SDs of the Outcome Measures at Baseline (M0), Post-intervention (M1) and Repeated Measures Analysis of Variance (N = 30).

Outcome measures	Baseline M (SD)	Post-intervention M (SD)	F	p	Partial $\eta^2$
Burnout	51.83 (12.78)	48.70 (15.83)	2.323	.138	.07
Depression	4.53 (4.93)	3.00 (3.64)	9.406	.005	.25
Anxiety	3.76 (3.45)	3.3.8 (2.82)	.383	.541	.01
Stress	8.03 (5.53)	6.20 (2.41)	7.043	.009	.22
Satisfaction with Professional Life	14.40 (5.52)	15.63 (6.18)	2.070	.161	.07
CMAS_Self-compassion	84.50 (15.22)	100.93 (14.68)	21.501	<.001	.43
CMAS_Compassion Others	54.57 (10.20)	66.03 (9.51)	32.101	<.001	.53
Compassion for self	59.93 (15.79)	64.63 (16.74)	3.339	.078	.10
Compassion for others	71.77 (13.31)	78.23 (13.28)	8.349	.007	.22
Compassion from others	62.70 (15.44)	66.17 (17.02)	2.604	.117	.08
Self-criticism	18.41 (9.32)	18.20 (9.78)	.024	.879	.00
FoC_for self	10.29 (9.16)	8.46 (10.48)	1.860	.184	.06
FoC_for others	16.93 (8.54)	12.34 (7.89)	16.281	<.001	.37
FoC_from others	11.93 (9.40)	10.34 (8.91)	1.160	.291	.04

## Methods

### Procedure & Participants

A pilot study was conducted in a sample of public school teachers, employing a mixed-measures quantitative and qualitative design. From the initial 41 participants enrolled in the CSP, 30 attended  $\geq 4$  sessions and completed pre and post assessments. The final sample was composed of 8 (27%) men, 22 (73%) women, age range 40 - 62,  $M = 51.33$  ( $SD = 5.27$ ).

Participants attended the 6-week CSP and were instructed to practice the CMT exercises everyday or in moments of stress. They completed a series of self-report measures pre and post-intervention and filled out weekly Practice Diaries and Session Evaluation forms.

### Measures

*Shirom-Melamed Burnout Questionnaire* (Melamed et al., 2006)  
*Depression, Anxiety and Stress Scale* (Lovibond & Lovibond, 1995)  
*Satisfaction with Teachers' Professional Life* (Albuquerque et al., 2017)  
*Compassion Attributes and Actions Scales* (Gilbert et al., 2015)  
*Compassion Motivation and Action Scales* (CMAS; Steindl et al., 2017)  
*Fears of Compassion Scale* (FoC; Gilbert et al., 2011)  
*Forms of Self-Criticism and Self-Reassurance Scale* (Gilbert et al., 2004)

### Compassionate Schools Program

6-session CMT intervention adapted for educational settings  
 Weekly sessions (2.5 hours each): Psychoeducation + experiential exercises  
 Session 1: Compassion and nature of mind  
 Session 2: How emotions work & Mindfulness  
 Session 3: Cultivate a compassionate mind  
 Session 4: Multiple selves and working with our emotions  
 Session 5: Working with self criticism  
 Session 6: Compassion in every day life

### Efficacy of the CSP

At post-intervention participants presented increases in compassion for others, and compassionate motivations and actions towards others and oneself. There was also a marginally significant increase in self-compassion from pre to post-intervention. Additionally, participants showed a decrease in depression and stress levels and fears of compassion for others (Table 1).

### Controlling for Self-criticism

Significant correlations were found between self-criticism levels at baseline and the outcome variables at post-intervention. Additional repeated measures ANOVAs were thus conducted controlling for baseline self-criticism. Results revealed significant time X self-criticism effects for satisfaction with teachers' life ( $F = 37.50$ ;  $p < .001$ ;  $\eta^2 = .25$ ), burnout ( $F = 15.89$ ;  $p < .001$ ;  $\eta^2 = .25$ ), depressive ( $F = 15.64$ ;  $p < .001$ ;  $\eta^2 = .25$ ) and stress symptoms ( $F = 10.09$ ;  $p < .001$ ;  $\eta^2 = .18$ ), self-compassion ( $F = 6.35$ ;  $p = .003$ ;  $\eta^2 = .12$ ), compassion for others ( $F = 9.20$ ;  $p = .001$ ;  $\eta^2 = .17$ ), and fears of compassion for self ( $F = 8.22$ ;  $p = .001$ ;  $\eta^2 = .15$ ) and for others ( $F = 9.20$ ;  $p = .001$ ;  $\eta^2 = .17$ ).

When self-criticism was controlled for, participants showed significant decreases in burnout, depression and stress levels, and fears of compassion, and revealed significant increases in satisfaction with their professional life, self-compassion and compassion for others from baseline to post-intervention.

## Conclusion

As a pilot study, our results demonstrate the possible benefits of CMT in educational settings. The Compassionate Schools Program seems to be a feasible, well-received and effective intervention to promote teachers' professional satisfaction and compassionate motivations, attributes and actions (towards others and oneself), and to reduce burnout, depression and stress symptoms.

Our findings further suggest the importance of targeting teachers' self-criticism across the CSP in order to improve its beneficial impact.

## References

- Gilbert, P. (2014). The origins and nature of compassion focused therapy. *British Journal of Clinical Psychology*, 53, 6–41. doi:10.1111/bjc.12043.  
 Kirby, J.N. (2016). Compassion interventions: The programs, the evidence, and implications for research and practice. *Psychology and Psychotherapy: Theory, Research, and Practice*. Advance online publication. doi: 10.1111/papt.12104  
 Kirby, J. N., Tellegen, C. L., & Steindl, S. R. (2017). A systematic review and meta-analysis of compassion-based interventions: Current state of knowledge and future directions. *Behavior Therapy*. doi: 10.1016/j.beth.2017.06.003  
 Leaviss, J., & Uttley, L. (2015). Psychotherapeutic benefits of compassion focused therapy: An early systematic review. *Psychological Medicine*, 45, 927–945. DOI:10.1017/S0033291714002141.  
 Matos, M., Duarte, C., Duarte, J., Pinto-Gouveia, J., Petrocchi, N., Basran, J. & Gilbert, P. (2017). Psychological and physiological effects of compassionate mind training: A pilot randomized controlled study. *Mindfulness*. Advance online publication. doi: 10.1007/s12671-017-0745-7