Self-Compassion: Embracing Suffering with Kindness

Kristin Neff and Oliver Davidson

The University of Texas at Austin

In:


Educational Psychology Department, The University of Texas at Austin, 1 University Station, D5800, Austin, TX, 78712-1294, USA
Abstract

This chapter will explore the link between self-compassion - a positive way of relating to oneself - and wellbeing. Self-compassion involves treating ourselves kindly, like we would a close friend we cared about. Rather than making global evaluations of ourselves as “good” or “bad,” self-compassion involves generating kindness toward ourselves as imperfect humans, and learning to be present with the inevitable struggles of life with greater ease. It motivates us to make needed changes in our lives not because we’re worthless or inadequate, but because we care about ourselves and want to lessen our suffering. An overview of research on self-compassion will be provided, which a burgeoning empirical literature has shown to be powerfully associated with emotional wellbeing, motivation, health behaviors, personal responsibility, coping, and better interpersonal relationships. Research also indicates that self-compassion can be increased through relatively short-term interventions. Finally, similarities and distinctions between self-compassion and mindfulness and their relative relationship to wellbeing will be discussed.

*Keywords:* Self-compassion, coping, wellbeing, mindfulness
Self-Compassion: Embracing Suffering with Kindness

“As human beings, we all want to be happy and free from misery.” – Dalai Lama

This sentiment pervades Eastern and Western philosophical traditions; however, this sentiment has been interpreted in slightly different ways, which has impacted the ways we think about happiness and wellbeing. In the West, this idea has typically been expressed in terms of hedonism, the belief that humans are motivated to seek pleasure and avoid pain. From this perspective, happiness represents a positive ratio of pleasant to unpleasant experiences. In contrast, the Buddhist perspective on happiness recognizes that painful and unpleasant experiences are a natural part of the human condition, which should be embraced rather than avoided. Buddhists see happiness and suffering as cyclically influencing each other.

This difference has also strongly influenced the way we research happiness in the West. Since the beginning of the century, psychology has refocused its emphasis on learning what makes humans thrive and flourish. Consistent with the hedonic perspective, the emerging positive psychology movement initially dichotomized the relationship between positive and negative experiences with the assumption that positive experiences utilized distinct processes that were not contingent upon their negative counterparts (Fredrickson, 2001). Based on this assumption, many have concluded that the alleviation of suffering does not produce happiness and wellbeing but, instead, only the absence of suffering (Duckworth, Steen, & Seligman, 2005). As a result, positive psychology has tended to focus on positive states and traits, such as joy, gratitude, optimism, hope, curiosity, and awe, as well as the conditions that enrich or impoverish these states and traits. More recently, however, there has been a greater emphasis on eudaimonic happiness in positive psychology, which entails finding purpose and meaning in one’s life rather than merely pursuing pleasure and avoiding pain. This perspective is in line with the Buddhist construct of self-compassion (Ryan & Deci, 2001).

Self-compassion entails turning directly toward one's suffering - whether that suffering stems from personal failures and mistakes or general life difficulties - and embracing it with feelings of kind, connected presence. As such, it transforms suffering in a way that enhances wellbeing, resilience, and coping with difficult thoughts and emotions. The current chapter will discuss self-compassion and its link to positive psychological health, as well as areas of overlap and difference between self-compassion and mindfulness - another Buddhist construct that is currently receiving attention within the field of positive psychology.

Self-compassion

To better understand what is intended by the term self-compassion, it is helpful to first consider what it means to feel compassion for others, a concept many of us have more familiarity with. Compassion involves sensitivity to the experience of suffering, This means opening one’s awareness to the pain of others, without avoiding or disconnecting from it, allowing feelings of kindness towards others and a desire to ameliorate their suffering to emerge (Wispe, 1991). Compassion also involves an understanding of the shared human condition, fragile and imperfect as it is, as well as a willingness to extend that understanding to others when they fail or make
mistakes. Instead of looking away or rolling up your window when you pull up next to a homeless man at a stoplight, for example, you pause and take a moment to reflect on how difficult things are for him. By stepping out of your usual frame of reference and placing yourself in his position, you start to see him as an actual human being who is in pain. Once this happens, your heart can’t help but resonate with his; compassion literally means “to suffer with” (Lewis & Short, 1879). Rather than trying to tune him out, you might discover that his situation has emotionally moved you, compelling you to help ease his pain in some way.

Just as we can feel compassion for the suffering of others, we can extend compassion towards the self when we experience suffering, regardless of whether the suffering resulted from external circumstances or our own mistakes, failures and personal inadequacies. Self-compassion, therefore, involves being touched by and open to one’s own suffering, not avoiding or disconnecting from it, generating the desire to alleviate one’s suffering and to heal oneself with kindness. Self-compassion also involves offering nonjudgmental understanding to one’s pain, inadequacies and failures, so that one’s experience is seen as part of the larger human experience.

The three facets of self-compassion

Although self-compassion originates from the insight tradition of Buddhism, Neff (2003b) has conceptualized the construct in secular terms within the scientific literature. According to Neff’s definition, self-compassion involves three main components: self-kindness, a sense of common humanity, and mindfulness.

Self-kindness

In Western culture, we generally value being kind to others; however, we rarely place as much value on being kind to ourselves. When we fail or make mistakes, we often relate to ourselves in a harsh, self-critical manner and routinely say things to ourselves that we would not say to a stranger or, in some cases, even someone we disliked. Self-compassion recognizes that inadequacies and difficulties are a natural part of life that should not be resisted (e.g. self-criticism) or denied (e.g. avoidance) but, instead, embraced with warmth, kindness, and acceptance. When noticing a behavioral tendency that has been a source of frustration or embarrassment in the past, for example, the imperfection is approached in kind, understanding manner, and the emotional tone of the language is gentle and supportive. Similarly, when difficult life circumstances arise, the self-compassionate person takes some time to reflect on the emotional toll of the situation and offer the self some soothing and comfort, instead of stoically soldiering through the situation.

Common humanity

One of the biggest problems with harsh self-judgment is that it tends to make us feel isolated. When considering our personal failures and shortcomings, we have a propensity to feel isolated and separated from others, irrationally believing that our struggles are abnormal compared to others who appear to be having an easier time of it. The common humanity component of self-compassion recognizes that all people fail, make mistakes, and feel inadequate in some way. Self-compassion connects one’s imperfections to the shared human experience, so that features of the self are considered from a broad, inclusive perspective. By locating our pain within the broader human experience, we tend to feel less isolated and cut off in difficult moments. In this way, self-compassion distinguishes itself from self-pity, which involves feeling
EMBRACING SUFFERING WITH KINDNESS

sorry for one’s own difficulties and, often, immerses people in their own problems to the point that they forget others experience similar problems.

**Mindfulness**

Mindfulness involves being aware of present moment experience in a clear and balanced manner (Brown & Ryan, 2003), so that one neither ignores nor ruminates on disliked aspects of oneself or one’s life. Before one can extend compassion toward the self, one must first recognize that self is suffering. While one’s own pain might seem blindingly obvious, we often fail to acknowledge the full extent of our pain, especially emotional pain that stems from self-criticism. Similarly, during difficult times in our lives, we have a tendency to jump immediately into problem solving mode, without recognizing the need to provide ourselves comfort for the struggles we’re experiencing. Mindfulness also helps people avoid getting swept up and carried away by the narrative of one’s pain, a process Neff (2003b) labeled as, “over-identification.” When in the throes of over-identification, people tend to exaggerate and obsessively fixate on negative self-relevant thoughts and emotions, meaning that they can’t see themselves or their predicament clearly. Eventually, these negative self-referential thought become embedded into our self-concept, thus, confounding our unfavorable beliefs about the self with our actual selves. By recognizing that our thoughts and feelings are just that- thoughts and feelings, mindfulness helps us to drop the dramatic storylines about our inadequacies and past failures and gain a more balanced perspective on the self.

**Self-compassion and wellbeing**

Whereas the traditional, hedonistic psychologist views wellbeing as equivalent to happiness, which is conceptualized as a ratio of positive to negative experiences, researchers in the field of positive psychology increasingly acknowledge the need to more fully address negative experiences in conceptualizations of wellbeing. Because it is often not possible or beneficial to avoid all painful experiences, Wong (2011) proposes that psychology should seek to help individuals achieve an optimal level of functioning in spite of difficult life circumstances, transforming and transcending negative experiences into sources of strength and wellbeing. In many respects, this perspective on wellbeing closely resembles self-compassion. Self-compassion accepts suffering as a natural part of the human condition and holds it in the warm embrace of compassion, generating positive feelings of love, kindness, and connectedness in the process. By providing warmth and support in difficult times, self-compassion gives people the emotional resources necessary to endure painful or challenging experiences. It also softens and soothes negative emotions, allowing them to dissipate more easily, so that people can bounce back quicker. Finally, the knowledge that one possesses an inner strength capable of carrying them through the most difficult times makes them stronger and more willing to face adverse situations in the future. In this way, self-compassion allows people to thrive and grow in the face of adversity.

A burgeoning literature on the mental health benefits of self-compassion support this point of view (Neff, 2012). During stressful life events, self-compassion has been shown to promote psychological resiliency. For instance, Sbarra, Smith and Mehl (2012) found that self-compassion was key in helping people adjust after divorce. Researchers asked divorcing adults to discuss their thought and feelings about the separation in a 4 minute stream of consciousness recording. Afterwards, independent judges rated the degree to which the dialogs expressed self-compassion. People who exhibited greater self-compassion when talking about their break-up
evidenced better psychological adjustment both at the time of the study and at a nine month follow up. Self-compassion has also been found to aid adjustment to university life. Undergraduates with higher levels of self-compassion have been shown to experience fewer feelings of homesickness in the first semester (Terry, Leary & Mehta, 2012), and less psychological distress when faced with academic pressure and social difficulties throughout their academic careers (Kyeong, 2013). Research also indicates that self-compassion helps women deal with their breast cancer treatment, resulting in less psychological distress and greater adjustment to cancer-related body changes (Przezdziecki et al., 2012). Finally, self-compassion appears to help veterans adjust after returning from war. Hiraoka et al. (2015) examined the mental health functioning of combat veterans returning from their tours in Iraq or Afghanistan, and found that more self-compassionate veterans had lower levels of psychopathology, and better functioning in daily life, including fewer symptoms of post-traumatic stress as a result of combat exposure. In fact, regression analysis revealed self-compassion to be a stronger predictor of whether or not vets developed PTSD than level of combat exposure itself.

As mentioned earlier, the adaptive benefits of self-compassion are not merely a result of looking on the bright side. Self-compassionate people recognize when they are suffering, but are kind toward themselves in these moments, acknowledging their connectedness with the rest of humanity. For example, in a study examining self-compassionate individuals' responses to difficult life events, Leary, Tate, Adams, Allen, and Hancock (2007) found that individuals scoring higher in self-compassion were more likely to take a global perspective on their problems and experienced fewer feelings of isolation, anxiety and self-consciousness when reflecting on their problems. Similarly, a study conducted by Neff, Kirkpatrick, and Rude (2007) asked participants to “describe their greatest weakness” in the context of a fake job interview. Even though self-compassionate people used as many negative self-descriptors as those low in self-compassion when describing their weaknesses; they were less likely to experience anxiety as a result of the task. They also found that self-compassionate individuals tended to use more connected language (e.g. third person pronouns and social references) when writing about their personal weakness. Neff, Hsieh, and Dejitterat (2005) found that self-compassionate college students were more apt to cope with a failure by reinterpreting the event in a more positive light and emphasizing the potential for growth. Furthermore, the ability of self-compassionate individuals to relate in a warm, inclusive manner to difficult emotions and circumstances may partly explain the study’s other finding that self-compassionate students had less fear of academic failure and showed greater resiliency in maintaining their intrinsic motivation and sense of competency after a failure experience.

Responding to suffering in this way not only helps people endure painful life events, but, ultimately, allows them to thrive and prosper. Self-compassion has been linked to less depression, anxiety and stress (for a review, see Barnard & Curry, 2011). In fact, a recent meta-analysis by MacBeth and Gumley (2012) found a large effect size when examining the link between self-compassion and psychopathology across 20 studies. Of course, a key feature of self-compassion is the lack of self-criticism, and self-criticism is known to be an important predictor of anxiety and depression (Blatt, 1995). However, self-compassion still offers protection against anxiety and depression when controlling for self-criticism (Neff, 2003a). Self-compassionate people have also been found to ruminate much less than those who lack self-compassion (Neff, 2003a), presumably because they can break the cycle of negativity by accepting their human imperfection with kindness. A study by Raes (2010) found that rumination
mediated the association between self-compassion and depression and anxiety, suggesting that reduced rumination is one of the key benefits of self-compassion.

In addition to reducing negative mind states, the feelings of love, kindness, and caring engendered by self-compassion appear to also bolster positive states and traits. For instance, in a study examining the relationship between self-compassion and other psychological strengths Neff, Rude, and Kirkpatrick (2007) found that self-compassion was related to greater happiness, optimism, positive affect, wisdom, curiosity and exploration, and personal initiative. Similarly, a study by Breen, Kashdan, Lenser, and Fincham (2010) found that self-compassion was positively related to gratitude and satisfaction with life. Self-compassion is also associated with greater emotional intelligence (Neff, 2003a; Neff, Rude, & Kirkpatrick, 2007). Finally, self-compassion is also linked to intrinsic motivation, mindfulness, autonomy, competence, and relatedness (Neff, 2003a; Neff, Hseih and Dejithhirat, 2005), which Ryan, Huta, and Deci (2013) argue are fundamental aspects of eudaimonic wellbeing.

**Self-compassion versus self-esteem**

Research suggests that while self-compassion yields similar mental health benefits as self-esteem, it doesn’t have the same pitfalls (Neff, 2011). In a survey involving a large community sample in the Netherlands (Neff & Vonk, 2009) for instance, self-compassion was associated with more stability in state feelings of self-worth over an eight month period (assessed 12 different times), than trait self-esteem. This may be related to the fact that self-compassion was also found to be less contingent on things like physical attractiveness or successful performances than self-esteem. Results indicated that self-compassion was associated with lower levels of social comparison, public self-consciousness, self-rumination, anger, and close-mindedness than self-esteem. Also, self-esteem had a robust association with narcissism while self-compassion had no association with narcissism. These findings suggest that in contrast to those with high self-esteem, self-compassionate people are less focused on evaluating themselves, feeling superior to others, worrying about whether or not others are evaluating them, defending their viewpoints, or angrily reacting against those who disagree with them.

Leary et al. (2007) compared self-compassion and self-esteem using mood induction. Participants were instructed to recall a previous failure, rejection, or loss that made them feel badly about themselves, and were then asked a series of questions that assessed their feelings about the event. Half of the participants responded in writing to prompts designed to encourage thinking about the event with self-compassion, while the other half responded to prompts designed to bolster their self-esteem. Participants who received the self-compassion instructions reported less negative emotions when thinking about the past event than those in the self-esteem condition. They also took more personal responsibility for the event than those in the self-esteem condition, suggesting that self-compassion does not lead to “letting oneself off the hook” but rather provides the ego-resilience needed to admit one's mistakes.

**Self-Compassion, motivation, and health**

One of the biggest blocks to self-compassion is the belief that it undermines motivation and encourages overindulgence (Gilbert, McEwan, Matos, & Rivis, 2011). Upon learning about self-compassion, people express reluctance to let go of their self-critical tendencies because they believe that these tendencies hold them accountable for their behavior and motivate them to achieve their goals. They also fear that becoming too self-compassionate will cause them to sit around all day surfing the internet and eating junk food. To the extent that self-criticism does
work to direct and motivate behavior, it’s because we’re driven by the desire to avoid self-judgment when we fall short of expectations and standards; however, when we know that failure will be met with a barrage of self-criticism, sometimes it can be too frightening to even try (Petersen, 2014). With self-compassion, we strive to achieve for a very different reason—because we care. If we truly want to be kind to ourselves and do not want to suffer, we’ll do what is necessary in the short term to ensure our overall health and happiness, such as taking on a challenging project or starting a new exercise routine. Moreover, because self-compassion gives us the safety needed to acknowledge our weaknesses, we’re in a better position to change them for the better.

Research largely supports the idea that self-compassion enhances motivation. In a series of four experimental studies, Breines and Chen (2012) assigned participants to one of three mood induction conditions: self-compassion condition (“express kindness and understanding”), a self-esteem control condition (“describe your positive qualities”), and a positive mood control condition (“describe a hobby you like”). Compared to the control groups, they found that participants who had been induced to feel self-compassion for personal weaknesses and failures, exhibited greater motivation to change for the better, try harder to learn, repair past harms and avoid repeating past mistakes. In other correlational studies, self-compassion has been associated with increased personal initiative; the desire to reach one’s full potential (Neff, Rude, & Kirkpatrick, 2007). Self-compassionate people are also more likely to adopt mastery goals, which focus on improving understanding and competence, and less likely to adopt performance goals, which are more concerned with demonstrating ability and avoiding negative judgments (Neff, Hseih & Dejitthirat, 2005). Additionally, students high in self-compassion are less likely to engage in self-handicapping strategies like procrastination (Sirois, 2014). This finding may in part be related to the fact that self-compassionate people tend to have less fear of failure and more willingness to try again after a failure (Neely, Schallert, Mohammed, Roberts, & Chen, 2009).

Research also suggests that self-compassion promotes health-related behaviors as opposed to overindulgent behaviors. For instance, a study by Adams and Leary (2007) demonstrated that self-compassion can help people stick to their diets. Research finds that self-compassionate women tend to be more intrinsically motivated to exercise, and exercise goals are less likely to involve ego concerns than women low in self-compassion (Magnus, Kowalski, & McHugh, 2010). Self-compassion also appears to help people overcome addiction issues. For example, a study of self-compassion and smoking cessations conducted by Kelly, Zuroff, Foa, and Gilbert (2009) found that individuals trained to feel compassionate about the difficulties of giving up smoking reduced their smoking to a greater extent than those trained to reflect upon and monitor their smoking. This self-compassion intervention was especially effective among those who were highly self-critical or resistant to change. Similarly, Brooks, Kay-Lambkin, Bowman & Childs (2012) found that increasing self-compassion helps alcohol-dependent individuals reduce their alcohol use.

**Self-compassion, disordered eating, and body image**

Research suggests self-compassionate people tend to be less critical of body image and have fewer body image concerns. For example, a recent study examining the relationship between self-compassion and body image in a sample of female undergraduates found a negative association between self-compassion and body dissatisfaction, body preoccupation, and weight worries. Moreover, they also found that self-compassion continues to predict body image after
controlling for self-esteem (Wasylkiw, MacKinnon, & MacLellan, 2012). Albertson, Neff, and Dill-Shackleford (2014) conducted a study among women with body image concerns that involved them listening to guided self-compassion meditations on the internet for three weeks. They found that the intervention produced significant decreases in body dissatisfaction, body shame, and contingent self-worth based on appearance, as well as increases in body appreciation. Self-compassion appears to buffer against eating pathology as well as body dissatisfaction. It has been linked to less severe binge eating (Webb & Forman, 2013), as well as lower levels of disordered eating in women with clinical eating disorders (Ferreira, Pinto-Gouveia, & Duarte, 2013).

**Self-compassion and interpersonal relationships**

Beyond the intrapersonal personal benefits of self-compassion already described, self-compassion appears to promote better interpersonal functioning as well. Although people may believe that offering themselves kindness for personal difficulties is tantamount to selfishness, taking care of the self's needs appears to help people respond to others' needs. In a study of romantic couples, Neff and Beretvas (2013) found that self-compassionate individuals were described by their partners as being more emotionally connected, accepting and autonomy-supporting while being less detached, controlling, and verbally or physically aggressive than those lacking self-compassion. Self-compassion was also linked to greater relationship satisfaction and attachment security. Other research suggests that self-compassionate people tend to have more compassionate goals in relationships, such as providing social support and engendering trust (Crocker & Canevello, 2008). Finally, self-compassion has been associated with the tendencies to compromise in conflict situations (Yarnell & Neff, 2013) and make amends for past relationship harms (Breines & Chen, 2012). Taken together, these findings suggest that self-compassion helps people better meet their own needs, which, in turn, allows them to dedicate more emotional resources to meeting the needs of friends, family, and relationship partners.

**Developing self-compassion**

Fortunately, self-compassion appears to be a modifiable trait that can be enhanced with training. Mindfulness-based interventions are an important way to increase self-compassion (Keng, Smoski, Robins, Ekblad, & Brantley, 2012). Given that mindfulness is a pre-requisite to self-compassion and is one of its constituent components, it makes sense that learning to be mindful of negative thoughts and emotions also increases one’s ability to be self-compassionate; however, beyond simply increasing one’s ability to hold painful experiences in balanced awareness, many programs designed to teach mindfulness also include components that develop the capacity to relate to the self in a kind understanding way. Mindfulness-Based Stress Reduction (MBSR) is the most widespread mindfulness-based intervention (Kabat-Zinn, 1982). Although teaching self-compassion is not an explicit component of the MBSR curriculum, program leaders attempt to convey implicit messages about the benefits of being kind and gentle with oneself, both in their response to participants’ questions and by embodying a general quality of emotional warmth (Kabat-Zinn, 2003). In addition MBSR typically teaches loving-kindness meditation (LKM), a meditation designed to generate feelings of positivity and goodwill toward the self and others (Santorelli & Kabat-Zinn, 2004).

In fact, some researchers have proposed that self-compassion may be a key mechanism by which mindfulness-based interventions improve wellbeing (Baer, Lykins, & Peters, 2012;
Hölzel et al., 2011). Supporting this contention, Shapiro, Astin, Bishop, and Cordova (2005) examined the impact of the MBSR program on a group of healthcare professionals, and found that the MBSR program significantly increased self-compassion and reduced stress for the treatment group compared to a wait-list control group. Further analysis revealed that self-compassion mediated the stress reductions associated with the program.

Although mindfulness-based interventions have been shown to increase self-compassion, these programs do not directly teach skills of self-compassion, focusing primarily on teaching techniques to enhance mindfulness. This is one of the reasons why Germer and Neff (2013) developed a self-compassion training program called Mindful Self-Compassion (MSC). The term “mindful” is included in the name of the program because it also teaches basic mindfulness skills, which—as discussed above—are crucial to the ability to give oneself compassion. In the MSC program participants meet for two hours once a week over the course of eight weeks, and also meeting for a half-day “mini retreat.” The program uses discussion, experiential exercises, and contemplative meditations designed to increase awareness of self-compassion and how to practice it in daily life.

Neff and Germer (2013) conducted a randomized controlled trial of the MSC program, comparing outcomes for participants in MSC condition to outcomes for participants in a waitlist control condition. Results suggested that participation in the workshop significantly increased self-compassion, mindfulness, compassion for others, and life satisfaction, while significantly decreasing depression, anxiety, stress, and emotional avoidance. Results from the randomized control trial indicate that the MSC program raised participants’ self-compassion levels by 43%, and that gains in all outcomes were maintained at least one year later. This suggests that explicit self-compassion training is an effective way to teach self-compassion.

In addition to the MSC program, there are also several new and promising short interventions for teaching self-compassion. Smeets and Neff (2013) developed a 3-week self-compassion intervention for college students. The intervention involved a combination of discussion, self-compassion activities, and loving-kindness meditation, focusing on identifying the inner critic and finding compassionate ways to motivate the self. At the end of the intervention, students in the self-compassion training condition showed significantly greater increases in mindfulness, optimism, and self-efficacy, as well as significantly greater decreases in rumination in comparison to a time management control group. Shapira and Mongrain (2010) examined the impact of a self-compassionate letter writing intervention, which involved writing a paragraph about a recent difficulty in a kind, understanding way, as a good friend would do. After seven days of letter writing, they found that this activity not only decreased depression levels for three months, but it also increased happiness levels for six month. These results indicate that even brief self-compassion interventions can be effective in enhancing wellbeing.

The relationship between mindfulness and self-compassion

Given that they’re both Buddhist constructs related to psychological wellbeing, readers may wonder what distinguishes self-compassion from mindfulness. In general, mindfulness refers to the ability to nonjudgmentally bring awareness to any experience, positive, negative, or neutral, whereas self-compassion focuses on holding negative thoughts and emotion with kindness (Germer, 2009). Although the mindfulness component of self-compassion is narrower in scope than general mindfulness, the overall construct of self-compassion is broader in scope than mindfulness, given that it also involves components of common humanity and self-kindness.
Beyond the scope of the constructs, self-compassion and mindfulness also differ in terms of their respective targets. Whereas mindfulness is concerned with the nature and quality of our relationship to the present moment experience, self-compassion is concerned with the nature and quality of our relationship with the *experiencer* who is suffering (Germer, 2009). When a person relates mindfully to a difficult experience, they gently bring their attention to the thoughts, emotions, and sensations that arise without judgment or resistance, letting the experience be as it is—no more, no less (Kabat-Zinn, 1994). However, when self-compassion accompanies mindful awareness of a difficult experience; feelings of care and concern emerge for oneself in the midst of experiencing pain, as well as a desire for the self to be free from suffering in the future. In this sense, self-compassion involves a bit of a paradox; it both completely accepts experience as it is and also wishes it could be different. In the MSC program, this apparent contradiction is resolved by explaining that “we give ourselves compassion not to feel better but because we feel bad” (Germer & Neff, 2013 p. 386). Put differently, we learn to fully accept our present moment situation while still holding our pain in the tender embrace of compassion, thus, preventing self-compassion from becoming a way of resisting negative thoughts and emotions and providing the emotional safety to fully experience one’s pain. In this way, self-compassion and mindfulness work together to mutually enhance each other.

**Conclusion**

The idea that our response to negative events influences wellbeing is not new within the field of positive psychology. In his 1998 Presidential Address, Martin Seligman (1999), then acting President of American Psychological Association, refers to this potential for positive psychology when he writes, “…psychology's focus on the negative has left us knowing too little about the many instances of growth, mastery, drive, and character building that can develop out of painful life events” (p. 561). Still, positive psychologists have tended to focus on buffering effects of positive emotions, ignoring the transformative aspects of negative emotions. If positive psychology is indeed finally heading toward a more balanced model, which both focuses on enhancing the positive and transforming the negative, it may be time to bring self-compassion under the broad umbrella of positive psychology.
References


