Effectiveness of a Method for Teaching Self-Compassion to Communication Sciences and Disorders Graduate Students
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Purpose: The purpose of this study is to explore the effects of a daily mindfulness practice and 2 types of journaling on participants’ development of self-compassion.

Method: This was a between-groups design. All participants in a graduate counseling course engaged in a short daily mindfulness practice at the beginning of every class. Participants were randomly assigned to a counseling journal or a gratitude journal group. Participants were to write in their journals 2 to 5 times a week for the duration of the class. Participants completed the Self-Compassion Scale (Neff, 2003) and a questionnaire created by the 1st author before any mindfulness sessions were held and again at the completion of the course.

Results: Participants’ level of self-compassion increased from pretest to posttest. The self-compassion scores of participants who kept counseling journals increased more than did those of participants who kept gratitude journals. Qualitative data indicated that participants believed that mindfulness was an important quality for clinicians to possess and that they were accepting of the daily mindfulness practice.

Conclusions: Engaging in a 12-min daily mindfulness practice utilizing simple yoga postures, breath work, reflective writing, and journaling done at a separate time appears to be an effective technique for increasing students’ levels of self-compassion. Maintaining a counseling journal as opposed to a gratitude journal appears to enhance the effect of the daily mindfulness practice on self-compassion.

To provide effective speech, language, swallowing, and hearing services, a clinician must have knowledge of and expertise with technical assessment and intervention skills. Although such knowledge and skills are necessary, they are not, however, sufficient for providing the highest quality services. Flasher and Fogle (2012) stated that “it is not only the clinician’s knowledge of our profession and therapeutic techniques that define what we do, but the ability to enter into the person’s world and to develop a therapeutic working relationship” (p. 83). This ability is dependent on the development of people skills that include being empathetic and compassionate (DiLollo & Neimeyer, 2014; Duarte, Pinto-Gouveia, & Cruz, 2016; Flasher & Fogle, 2012; Holland, 2007). The appropriate use of people skills is the artistic aspect of intervention that allows clinicians to be fully present for clients and ensure that clients feel safe, valued, and truly heard in the therapeutic setting (Flasher & Fogle, 2012).

Empathy is trying to understand what another person is thinking and feeling from that person’s point of view and then communicating that understanding back to the other person (Flasher & Fogle, 2012). Compassion moves empathy a step farther. A compassionate person recognizes that another is suffering, feels kindness toward that person, and seeks to alleviate the other’s suffering (Neff, 2011).

Humans are hardwired for empathy and compassion (Siegel, 2007). According to Siegel, people initially perceive how others are feeling through the senses. Resonance circuits in the brain, which include mirror neurons, the insula, middle prefrontal regions, and the superior temporal cortex, then function to match people’s body states to those of the individuals they are observing. In this manner, individuals become attuned to each other, and emotional resonance is created. Emotional resonance between a clinician and a client is important in developing a therapeutic relationship. Indeed, Riley (2002) stated that its absence “can be profoundly painful” (p. 11).

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For true empathy and compassion to develop, however, Siegel (2007) posited that people must reflect on how their bodies change when they resonate emotionally with another person. This reflective process begins with interception, the process in which people sense, or become aware of, their own internal states of being. Individuals then must interpret these sensations so that they can attribute them appropriately to others. Additionally, this self-awareness can help maintain emotional stability (Flasher & Fogle, 2012) and facilitate people’s ability to differentiate their own feelings from those of another individual (Riley, 2002). In other words, a self-reflective person who can attune to and reflect on internal emotions will be able to be appropriately empathetic and compassionate without becoming enmeshed in another’s emotions.

Self-Compassion

An important aspect of compassion is self-compassion. Indeed, self-compassion is the behavioral foundation of empathy and compassion for others (Duanter et al., 2016; Germer, 2009; Neff, 2011). According to Neff (2011), self-compassion involves the same qualities as compassion except that the qualities are directed inward rather than toward another. To be self-compassionate, individuals first have to recognize that they are suffering, and then, they need to feel and act kindly rather than critically toward themselves and attempt to alleviate their own suffering. This is the self-kindness versus self-judgment component of self-compassion. Neff identifies two other components of self-compassion.

Common humanity versus isolation is the component that allows people to understand that all individuals will fail or suffer and that no one is alone or isolated in their suffering. The other component of self-compassion is mindfulness versus overidentification. Neff’s definition of mindfulness states that a person must clearly see and nonjudgmentally accept what is happening in the present moment. A self-compassionate person has the capacity “to see things as they are, no more, no less” (Neff, 2011, p. 80) and to deal appropriately with felt emotions and not overidentify with them.

Neff (2011) listed a number of benefits of self-compassion (e.g., increased emotional resilience, greater levels of emotional intelligence, and decreased anxiety and depression). A benefit that is perhaps of particular significance for clinicians is that people who have high levels of self-compassion have been shown to be more likely to take the perspective of and show greater empathy to those who are suffering, without becoming overwhelmed by others’ suffering, than are those with lower levels of self-compassion (Neff, 2011).

Furthermore, Duarte et al. (2016) indicated that without self-compassion, empathy can be a “double-edge sword” (p. 2). Health care professions deal with individuals who are experiencing distressing times in their lives. For speech-language pathologists (SLPs) and audiologists (AuDs), examples of these times could be when individuals learn of a diagnosis of a communication disorder either in themselves or in a loved one or when individuals are trying to come to terms with the consequences of a chronic disorder that results in a communication disorder. Although it is important that the clinician be empathetic with individuals during such times, empathy might open a clinician up to the possibility of compassion fatigue, which is characterized by exhaustion and professional burnout and can result in symptoms similar to those of posttraumatic stress disorders (Neff, 2011). Duarte et al. (2016), similar with Neff (2011), found that self-compassion can “mediate and moderate the relation between affective empathy and compassion fatigue” (p. 2) and reported results of experimental studies suggesting that individuals can increase their levels of self-compassion. Helping communication sciences and disorders (CSD) graduate students bolster their self-compassion might allow them to increase their ability to be appropriately empathetic and compassionate with clients and also help them be more resistant to compassion fatigue and burnout.

Mindfulness

Mindfulness has been defined by Kabat-Zinn (1994) as “paying attention in a particular way: on purpose, in the present moment, and nonjudgmentally” (p. 4). This is exactly what a clinician must do when responding empathetically to a client. Kabat-Zinn (2013) further stated that the quality of mindfulness rests upon “our capacity for embodied awareness and our ability to cultivate our relationship to that awareness” (p. xxvii). Embodied awareness and the ability to interpret and reflect on that self-awareness are the skills that allow people to attune to others appropriately and are the points at which mindfulness, empathy, and compassion intersect (Siegel, 2007). Siegel also indicated that the quality of mindful presence of individuals who go into clinical professions will directly influence the growth of those with whom they work. Specifically, Siegel stated, “engaging in ‘mindful practice’ in the healing professions creates in us a state of reflection and emotional availability that are at the heart of effective clinical work” (p. 277).

In addition to the positive effects a clinician’s mindfulness might have on the individuals with whom they interact, a mindfulness practice has also been found to have positive effects on the overall well-being of individuals who work in health care (Hopkins & Proeve, 2013) and of students in special education and educational counseling (Tarrasch, 2015). Similar to the benefits of self-compassion, a mindfulness practice can help prevent stress and professional burnout in health care workers (Hopkins & Proeve, 2013).

Techniques for Developing Mindfulness

Mindfulness can be developed through different reflective practices (Campos et al., 2016; Kabat-Zinn, 2013). Germer (2009) suggested that the foundation of a mindfulness practice is the body; because every living person...
abides in a body, the body must be experienced as fully as possible to appreciate the fullness of life. Kabat-Zinn (2013) also pointed out the importance of the body: The body is “an important domain of our lives and experience that we tend to miss, ignore, abuse, or lose control of as a result of being in the automatic pilot mode” (p. 13). When people are not aware of their bodies and the emotions they are sensing, they cannot accurately engage in the processes of interoception and interpretation that are needed for empathy and compassion. They can also unknowingly store tension that arises from stressful situations in various parts of the body and literally carry that tension with them into other situations. When people are mindfully anchored in the body, however, they are better able to interpret and reflect on their own body sensations and resonate appropriately with others. They can also feel less stressed and more comfortable in difficult situations and have less need to engage the flight, fight, or freeze mechanism (Germer, 2009).

Yoga is a mind–body practice that uses movements coordinated with the breath to improve the practitioner’s body awareness and facilitate a person’s ability to experience the body fully (Kabat-Zinn, 2013). Indeed, Kabat-Zinn cited yoga as one of the most powerful techniques for changing, healing, and transforming the body.

In addition to body awareness, mindfulness also requires that a person’s mind have an anchor to the present moment (Germer, 2009). One of the most frequently used mindfulness techniques for providing this anchor is attending to the breath (Germer, 2009; Kabat-Zinn, 2013; McCall, 2007; Siegel, 2011). Attention to the breath is a means of training the mind to be aware of awareness. This training occurs as a person focuses on the breath and learns to become aware of when attention shifts from the breath to something else and, then, returns the attention, over and over again, to the breath (Siegel, 2011).

Another contemplative practice is journaling (Germer, 2009). Journaling has been included as a component in various mindfulness protocols (e.g., Beck & Verticchio, 2014; Bohecker, Watthen, Wells, Salazar, & Vereen, 2014; Khramtsova & Glasscock, 2010). Khramtsova and Glasscock (2010) encouraged students to write in a gratitude journal (i.e., writing three good things that happened that day) on the days they felt positive and to write in a reappraisal journal (i.e., writing about thoughts and feelings that occurred as the result of an upsetting event) on days when they felt less positive. Maintaining a gratitude journal has been shown to have long-lasting effects on improving a positive state of being (Seligman, Steen, Park, & Peterson, 2005). Pennebaker and Evans (2014) discuss the positive biological, psychological, and behavioral benefits of writing about traumatic events. Khramtsova and Glasscock (2010) also found their mindfulness protocol that included gratitude and reappraisal journal writing was accepted by students and was effective for increasing students’ psychological well-being.

**Mindfulness Training in Non-CSD Professions**

In 1997, Novack et al. discussed the importance of physicians’ personal awareness for managing their own stress and life satisfaction and for facilitating “healing relationships with patients” (p. 502). These authors indicated that a lack of personal awareness might adversely affect physicians’ abilities to communicate effectively with patients and to be appropriately empathetic while not overidentifying or underidentifying with particular patients. According to Novack et al., personal awareness can be developed through independent or group reflective practices done during times specifically set aside from the demands of work and training.

Novack et al. (1997) reported that, despite the important positive outcomes of developing personal awareness, most medical schools did not offer their students opportunities to learn about or engage in practices that would increase such awareness. Indeed, they indicated that “some aspects of medical education promote self-defeating attitudes and behaviors that may hinder the development of trainee personal awareness” (p. 503). They further stated that many practicing physicians might benefit from personal awareness practices that could help them manage the stresses and frustrations caused by their practices and patients: factors that could potentially lead to professional burnout. For these reasons, Novack et al. proposed a curricular component for medical schools that was specifically designed to facilitate the development of physicians’ personal awareness. These authors concluded their report by indicating that, although more research needs to be done regarding the effectiveness of such programs, “it seems sensible to include as a regular part of medical training activities that allow for reflection and discussion of personal aspects of clinical care” (p. 507).

Given the positive effects of a reflective, mindful practice on personal well-being of health care workers and on their interactions with clients and the possible negative outcomes of stressed practitioners in terms of both patient care and attrition from the profession (deVibe et al., 2013), it is gratifying that recent literature indicates that medical schools and other allied health and educational training programs (e.g., nursing, dentistry, educational counseling, special education, psychology) are offering mindfulness training to their students (Cunningham, Bartels, Grant, & Ralph, 2013; Dobkin & Hutchinson, 2013; Hopkins & Proeve, 2013; Tarrasch, 2015). Dobkin and Hutchinson (2013) reviewed the mindfulness training offered by 14 medical schools to dental and medical students, as well as to residents. They concluded that this type of training is “beneficial in terms of reducing negative emotions and stress, as well as enhancing mindfulness, empathy and self-compassion” (p. 769).

Similar to students in other medical, allied health, and educational programs, reflective, mindfulness practices could assist CSD students in improving their own personal well-being by increasing self-compassion and resilience to professional burnout. Mindfulness practices could also
help CSD students develop empathy and compassion for the clients with whom they will work. At this time, however, little is known about the frequency with which CSD training programs offer mindfulness practices to their students or the effectiveness of such practices, if they exist (Beck & Verticchio, 2014).

An Approach to Teaching Mindfulness to CSD Students

Beck and Verticchio (2014) reported the results of initiating a counseling class for SLP and AuD graduate students with a 12-min mindfulness practice (5 min of yoga-based stretches, 5 min of breath work, 2 min of reflective writing). The class was taught in a summer session and was held Monday–Friday, for 3 weeks. Role play, group presentations, reflective writings, and lectures were also utilized. The authors reported statistically significant decreases in students’ perceived stress levels and statistically significant increases in their confidence in counseling. Qualitative analysis of students’ reflective writings indicated that students found the mindfulness practice to be calming and centering, and all students agreed that mindfulness was an important quality for a clinician to possess.

One limitation of Beck and Verticchio (2014) was that they did not have a control group. To address this limitation, Beck, Verticchio, Seeman, Milliken, and Schaab (2017) conducted a between-groups research study with undergraduate and graduate CSD students serving as participants. Participants were randomly assigned to either a control or an experimental group. Before any mindfulness sessions were initiated, all participants completed the Perceived Stress Scale (Cohen, Karmarck, & Mermelstein, 1983), the Almost Perfect Scale (Cohen, Karmarck, & Mermelstein, 1983), the Almost Perfect Scale–Revised (Slaney, Rice, Mobley, Trippi, & Ashby, 2001), and the Self-Compassion Scale (SCS; Neff, 2003). Additionally, electrophysiological measures of stress were taken preintervention. Beck et al. (2017) utilized the same mindfulness practice used by Beck and Verticchio (2014) with the experimental group of participants who met once a week for 20 min a session throughout one academic semester. Participants in the control group did not meet or engage in the mindfulness practice during the semester of the study. At the end of the semester, all participants in the experimental and control groups again completed the Perceived Stress Scale, the Almost Perfect Scale–Revised, the SCS, and the electrophysiological measures.

Results indicated that, as compared with the control group, the perceived stress of participants who engaged in the mindfulness practice decreased as did indicators of negative aspects of perfectionism. Furthermore, self-compassion scores and biological indicators of stress improved. Thus, this short mindfulness practice was effective in increasing the general well-being of CSD undergraduate and graduate students.

In their investigation of mindfulness as a component of a counseling course, Beck and Verticchio (2014) only measured perceived stress levels. Because self-compassion is foundational to developing the essential people skills of compassion and empathy (Germer, 2009; Neff, 2011), and because Beck et al. (2017) documented the effectiveness of a short mindfulness protocol for increasing participants’ self-compassion, further study into how a short mindfulness practice in the context of a counseling course might affect students’ self-compassion should be conducted. Additionally, similar to Beck et al. (2017), Beck and Verticchio (2014) collected student reflective writings to document effects of the mindfulness practice but did not explore the effects of various types of journaling. Knowledge of the effect of different types of journal writing on students’ levels of self-compassion could provide information regarding assignments that might be beneficial to students.

Purpose and Research Questions

The purpose of the current study was to replicate the daily mindfulness practice used by Beck and Verticchio (2014) and Beck et al. (2017) in the context of a counseling course to determine its effects on students’ levels of self-compassion. Additionally, the effect of specific types of journaling was of interest. Maintaining gratitude journals has been documented to increase individuals’ positive states of being (Seligman et al., 2005), and an assignment used in the past by the first author was the maintenance of a counseling journal in which students recorded instances of counseling-related experiences. The specific research questions asked were as follows: (a) What will students’ perceptions be of a daily mindfulness practice? (b) How will measures of self-compassion change as a result of engaging in a daily mindfulness practice and journaling? (c) How will different types of journaling (i.e., gratitude vs. counseling) influence changes in self-compassion?

Method

Participants

Participants were SLP and AuD graduate students enrolled in a two-credit hour counseling course that was taught in a 3-week summer session. The class met every Monday–Friday from 8:00 a.m. to 9:50 a.m. This course was taught in a midwestern university with a student population of approximately 20,000. The course enrollment was 53 students, 42 SLP students, and 11 AuD students. All students were invited to participate, and all provided their informed consent to do so. Thirty-five of the SLP students were in their first semester of graduate school, and the remaining seven SLP students and all AuD students had completed their first year of graduate school. The students who had completed their first year of graduate school had been enrolled in clinic during the preceding fall and spring semesters and were also enrolled in clinic during the summer. The students who were beginning their graduate school experience did not have a summer clinic placement. All of the students were full-time, residential students.

Of the 53 students, nine of the SLP students indicated that they had participated in Beck et al.’s (2017)
mindfulness-based study during the fall semester of the past academic year. Two of these students had completed their first year of graduate school, and seven were in their first semester of graduate school. The mean age of these students was 22.33 with a range from 22 to 23. Because they had been exposed to the practice previously, data collected from them were not included in further analyses. The mean age of the 44 students who had no experience with this practice was 22.88 with a range of 20–39 years. Two were men, and the rest were women. One student was African American, two were Asian, three were Latina, one was multiple ethnicities, and the remainder were White. Four of these students indicated that they had a mindfulness practice of their own. Two did not specify what that practice was, and two indicated that they practiced yoga, one periodically for 2 years and one for 4 years.

**Materials and Equipment**

The SCS (Neff, 2003) was used to measure changes in participants’ levels of self-compassion. The SCS is a 26-item self-report scale that includes six subscales: Self-Kindness, Self-Judgment, Common Humanity, Isolation, Mindfulness, and Overidentification. Neff (2003) reported that the SCS is a sound test psychometrically and is also theoretically valid. Specifically, Neff (2003) documented that the SCS has good construct validity and that the scores for the overall test, as well as each of the subscales, have good test–retest reliability (.93 for overall score, .88 for Self-Kindness, .88 for Self-Judgment, .80 for Common Humanity, .85 for Isolation, .85 for Mindfulness, and .88 for Overidentification). Germer (2009) stated that the SCS is the measurement tool used in most studies of self-compassion. The full test can be accessed at http://self-compassion.org/test-how-self-compassionate-you-are/

The first author created a questionnaire that included a question asking participants to indicate why mindfulness was or was not an important characteristic for a clinician to possess. Participants were also provided with small paper notebooks to use for reflective writing that followed the daily mindfulness practice.

**Procedure**

**Self-Determined Identifiers**

Self-determined identifiers were created by all participants to protect the confidentiality of their responses and to encourage honest responses rather than responses they thought the authors might want. These self-determined identifiers consisted of the first two letters of the participants’ month of birth, the first two letters of the city in which they were born, the first two letters of their mother’s maiden name, and their favorite color. These identifiers were used on all pretest and posttest, the prequestionnaire and postquestionnaire, and on the daily reflective writings completed after each mindfulness session. Although we did not analyze the contents of the counseling and gratitude journals for research purposes, the first author read them because they were class assignments. Students received points for completing the journals, not for the content of their journals. That is, if students completed and turned a journal in, they received 10 points. Pennebaker and Evans (2014) emphasized the importance of writing openly, honestly, and for yourself when journaling. To allow participants the greatest amount of confidentiality when writing, they were instructed to use self-determined identifiers on their journals and to attach a sheet with their name to the front of the journal. These sheets were removed from journals after journals were collected and placed in a pile separate from the journals. The order of the sheets containing names and of the journals was then shuffled. Grades were assigned based on the presence of a sheet with a name. Journals were read after names were removed, grades were assigned, and the order of journals had been shuffled.

**Pretest and Posttests**

During the first class period, informed consent was received from the participants by a staff member not involved in the research. After receiving informed consent, the first author asked participants to complete the SCS using op-scan forms and paper copies of the scale following directions given by Neff (2016). Participants were also asked to complete the questionnaire designed by the first author. On the last day of class, after the mindfulness session had been completed, the same procedure was used to obtain posttest scores and postquestionnaire responses.

**Counseling Course**

A counseling course was chosen as the vehicle for the daily mindfulness practice and journaling assignment because appropriate use of people skills, such as empathetic responding and compassion, are critical components of counseling. Indeed, the artistic aspect of counseling that allows clinicians to be fully present for clients and ensure that clients feel safe, valued, and truly heard in the therapeutic setting is dependent on clinical attributes such as these (Flasher & Fogle, 2012). As discussed in the introduction, a mindfulness practice can facilitate the development of self-compassion, which is the behavioral foundation of empathy and compassion (Duarte et al., 2016; Germer, 2009; Neff, 2011).

The format of the course was similar to that used by Beck and Verticchio (2014). Class was held Monday–Friday from 8:00 a.m. to 9:50 a.m. for 3 weeks. The only exception to this was the first week which began on Tuesday because Monday was a holiday. The classes all met in the same university classroom that held 70 desks. On the first day of class, participants were randomly divided into 12 small groups composed of four participants and one small group composed of five participants with the stipulation that AuD (n = 11) participants and SLP participants who had completed their first year (n = 7) were distributed as equally as possible across the groups. A team-based learning approach (Team-Based Learning Collaborative, 2016) was used for some units of the course. Specifically, for the units on theories of counseling—grief, crisis models, suicide, and
death—and counseling specific populations, participants were assigned readings, took independent readiness tests over the readings and, then, met in their small groups and retook the readiness test as a group. Short lectures and case study projects followed the readiness tests.

Other in-class teaching techniques included short lectures and discussion, role play, reflective writing over topics discussed in class, and group presentations on cultural aspects of counseling and counseling techniques included in the toolbox section of DiLollo and Neimeyer’s (2014) textbook on counseling. Participants were also given assignments to do outside of class that included readings other than those needed for the team-based learning activities, completing the Values in Action survey found on the VIA Institute on Character (2016) website (http://www.viacharacter.org/www/) and writing a group paper on the basis of the groups’ assigned in-class presentation topic.

Journaling Assignment
In order to determine the effects of different types of journaling, an additional assignment students were given to do outside of class was to complete either a counseling or a gratitude journal. The counseling journal had been assigned as a course requirement since the first author began teaching the counseling course in 2011. Instructions for the gratitude journal were based on the instructions given by Seligman et al. (2005) for their intervention “Three good things in life” (p. 416; see the Appendix for specific instructions given for journal types).

Assignment to Journal Group
After participants had been assigned to small groups, as described above, the instructor assigned participants within groups to either the counseling journal or the gratitude journal using a systematic sampling method that is essentially equivalent to simple random sampling” (Patten, 2009, p. 47), in which small groups were alternated (e.g., participants in Group 1 did a counseling journal, participants in Group 2 did a gratitude journal, and so on). For data analysis purposes, data from the nine students who had participated in a similar mindfulness project in the fall of the previous year (Beck et al., 2017) were removed. After removing the data of the nine students, the counseling journal group was composed of two SLP participants who had completed their first year, seven AuD participants, and 15 SLP participants who were in their first semester of graduate school. The gratitude journal group was composed of three SLP participants who had completed their first year, four AuD participants, and 13 SLP participants who were in their first semester of graduate school.

Daily Mindfulness Practice
The same daily mindfulness practice that was used by Beck and Verticchio (2014) and Beck et al. (2017) was used to initiate every class meeting, with the exception of the first class period. In the current study, the daily mindfulness practice was supplemented by asking participants to write in either a gratitude journal or a counseling journal outside of class (see description of journaling assignments above). Participants were told that over the duration of the course, the instructor would gradually fade her cues to allow the participants to make the daily practice their own. On the first day of the daily mindfulness practice, the instructor provided visual and auditory cues. By the second week, the instructor gave little to no visual cues and began minimizing auditory cues. By the last day, no cues were given, and participants moved through the entire daily mindfulness practice on their own.

The first 5 min consisted of simple, yoga-based postures. These postures were selected and sequenced by the first author (a professor and registered yoga instructor with approximately 15 years of experience teaching yoga and over 40 years as an SLP) with the intent to warm shoulders, neck, and spine in preparation for seated breath work. The same sequence was used every day. Participants were instructed to do their best to coordinate breath with movement so that inhale occurred on extension and exhale occurred on flexion. They were also instructed to try to sense how the breath felt in the body and how it could begin to initiate movement. The postures were initiated by instructing the participants to come to a grounded posture in their chairs with their feet under their knees, their spine as long as possible, sitz bones reaching into the chair, and hands on thighs or folded in laps. The first postures were done from sitting and included (a) moving shoulders toward ears and back down, (b) opening arms out from shoulders to open the chest and gently extend the neck then bringing hands to opposite shoulders to close chest and flex neck, (c) bringing hand across the body to other shoulder (e.g., right hand to left shoulder) and turning head to look in the opposite direction (e.g., to the right) alternating sides, and (d) folding forward so chest comes to thighs. Participants were then instructed to stand. They were told to find a grounded standing posture so that their feet were firmly in contact with the ground, spine tall, chin level, and shoulders down and slightly back so that neck was long. From standing, the participants were then led through a sequence where they lifted arms over head as they lifted up on their toes and then lowered arms and feet together, completed lateral bends to each side and, finally, lowered into chair position (hovering over an imaginary chair). After the standing positions, participants again sat in their chairs and completed a twist to each side followed by a forward bend with chest as close to thighs as possible. The final movement was to bring their arms out to their sides and, then, bring hands on top of each other to the chest (please see Beck et al. [2017] for more details).

After the postures were completed, participants engaged in 5 min of breath work. They were instructed to come back to a grounded seated posture and to either close their eyes or hold their gaze gently downward. Participants were then told to begin bringing their attention to the breath and to the sensation of the inhale coming in through the nose, down the chest, and expanding the belly outward and the exhale drawing the belly back in and moving air up through
the lungs and out the nose. After allowing a few seconds for participants to settle into the breath, the instructor told them to begin gently increasing their inhale and exhale one count at a time while keeping the duration of inhale and exhale equal. They were to do this until they reached their maximum comfortable breath count. They were to maintain this breath count for six counts and then return, one count at a time, to their normal breath. They then sat with attention to the breath for the remainder of the 5 min. Participants were told that if their attention wandered from their breath, that was to be expected and was alright. When they noticed their attention wandering, they should just try to bring awareness back to the breath.

On the first day of the second week (fourth day of practice) as breath work was initiated, the participants were instructed to add a slight pause at the top of the inhale and at the bottom of the exhale. At the beginning of the fifth day of practice, the instructor suggested that the participants might want to think of a positive quality or intention for the day that they wanted to bring in with the breath, on the sixth day of practice (approximately half way through the course), the instructor told the participants to work with the breath in whatever way worked best for them. This remained the instruction for the rest of the course.

Each day following the breath work, participants were instructed to write for 2 min in the paper notebook that had been given to them. The only prompt given was to write reflectively about anything that had come up for them during the daily mindfulness practice.

Data Analysis

Qualitative data (i.e., the reflective writings kept as part of the daily mindfulness practice and the open-ended question on the prequestionnaire and postquestionnaire) were analyzed using the inductive analysis process described by Hatch (2002). The first step in this process is reading the data with the intent of identifying frames of analysis (i.e., the level of specificity) with which the data will be analyzed. The next steps are to generate domains on the basis of semantic relationships within frames, determine which semantic relationships are salient relationships, and assign these relationship codes. The data are then reread and salient codes refined as necessary. Analysis is completed within and between domains.

For the current study, the authors independently read all questionnaire responses and reflective writing entries. The frame of analysis was determined to be phrases within participants’ written responses. We next independently read all data again and determined semantic relationships contained in the writings. We met to discuss these relationships and agree upon which were the salient ones and how they should be coded. We once more read the data independently and coded phrases. We met after this to discuss our codes and to come to consensus on the way each phrase had been coded. The first author then analyzed the data to determine themes (i.e., codes) within domains and relationships of themes between domains. We then discussed these analyses and came to consensus on them.

Neff’s (2016) instructions were followed to score the SCS. Items on the Self-Kindness (Items 5, 12, 19, 23, and 26), Common Humanity (Items 3, 7, 10, and 15), and Mindfulness (Items 9, 14, 17, and 22) subscales were rated on a 1 (almost never) to a 5 (almost always) scale. Items on the Self-Judgment (i.e., 1, 8, 11, 16, and 21), the Isolation (i.e., 4, 13, 18, and 25), and the Overidentification (i.e., 2, 6, 20, and 24) subscales were also rated on the same scale and then reverse scored. Mean scores for total SCS were calculated for the participants (n = 41) who completed all items at both pretesting and posttesting. A higher score indicates greater levels of self-compassion.

Means for each subscale were calculated in the same manner for all participants who completed all items (n = 41). Neff (2016) indicated that higher scores on the Self-Kindness, Common Humanity, and Mindfulness subscales indicate higher levels of that component of self-compassion, whereas lower scores on the Self-Judgment, Isolation, and Overidentification subscales are indicative of greater self-compassion in those areas. Because items on the Self-Judgment, Isolation, and Overidentification subscales were reverse scored to determine an overall SCS score, however, in this study, higher mean scores on all subscales are indicative of greater levels of self-compassion. All analyses of data from the SCS were done using SPSS Statistics Version 24.

The overall pretest and posttest SCS scores and the pretest and posttest scores for all subscales were measured for skewness. All measures fell within ± 1 which is considered “excellent for most psychometric purposes” (George & Mallery, 2006, p. 99). Parametric statistics, as described below, were therefore used to analyze overall SCS and SCS subscale scores.

Because pretest and posttest scores were compared within participants and we were interested in the effect of time (pretest vs. posttest) and of the interaction of time by journal type (counseling vs. gratitude), we analyzed data for the SCS total score utilizing a two-(journal type)-by-two (time of testing) analysis of variance with repeated measures on the variable of time. Specifically, we report results of tests of within-subjects effects for the repeated variable of time and the interaction of time by journal type, and we report results of between-subjects effects for journal.

The analysis of the overall SCS scores resulted in significant findings, so we were also interested in determining the effect of the between-groups variable of journal type (counseling vs. gratitude) and the repeated variable of time (pretest vs. posttest) and the interaction of time by journal type for all subscales of the SCS. Pearson correlation coefficients were calculated between all presubscale and postsubscale scores. According to Tybout et al. (2001), if correlations between dependent variables generally range from .30 to .70, a multivariate analysis of variance (MANOVA) can be used. With few exceptions, all correlations between the pretest scores and the posttest scores...
were found to be within this range (see Table 1). Therefore, we analyzed all pretest and posttest SCS subscale scores with a repeated-measures MANOVA. We report the results of Pillai’s Trace calculated for all subscale scores of the repeated variables of time and time by journal type. We follow this with a report of the univariate tests for each of the subscale repeated measures and with a report of the between-subjects effects for the variable of journal.

Finally, we used nonparametric statistics to analyze the results of the nine participants who indicated that they had participated in Beck et al.’s (2017) project in the fall of 2015. We conducted independent-samples Mann–Whitney U tests to compare their pretest performance on the SCS overall to that of the participants who were experiencing the practice for the first time. We conducted similar analyses with the posttest scores of the SCS. We were also interested in changes in the scores of the nine participants across time. We had complete data for seven of the nine participants that we could compare from fall of 2015 to the summer of 2016. We conducted related-samples Wilcoxon signed-rank tests for these seven participants’ SCS overall scores collected at the end of the fall 2015 experience to those collected at the beginning of the summer 2016 experience. We also conducted Wilcoxon signed-rank tests for these seven participants’ SCS overall score collected at the beginning of the summer to those scores collected at the end of the summer.

Results

Qualitative Data

Hatch (2002) indicated that he “is generally against relying on counting the times examples supporting certain included terms are found in the data as a way to judge the efficacy of a finding” (p. 170) because “the notion of counting and calculating percentages assumes a kind of standardization in data collection that is rarely found in qualitative research” (p. 170). Therefore, percentages are not reported in the current study. Additionally, responses of participants who completed gratitude journals were compared with those who completed counseling journals. No notable differences occurred in the themes found in the responses of participants in these two groups and so the groups were combined for further analysis of the questionnaires and the reflective writings.

Questionnaires

When asked if mindfulness was or was not an important quality for a clinician to possess, all participants at both pretesting and posttesting indicated that it was important. The reasons given for this response fell into two main themes at pretesting. These were “clinician professional outcomes” (e.g., helping clinician deal with a diversity of clients and assisting clinician to provide effective and appropriate counseling) and “facilitating the client-clinician relationship.” An example of a response coded as “facilitating the client-clinician relationship” is “it is important because it will allow for a clinician to make real connections with their clients.” At posttesting, “facilitating the client-clinician relationship” continued to be a major theme, but “clinician professional outcomes” did not. A new theme that emerged from the posttest responses was “helps to understand self so can better help others.” In one participant’s words:

Mindfulness might be important because as clinicians, we have to be able to take care of ourselves first in order to be able to help others. We have to make sure our emotions and stance/presence is [sic] in check so that we can truly help our patients.

Reflective Writings Kept as Part of the Daily Mindfulness Practice

Because reflective writings were kept across the duration of the course, we looked at how often themes and subthemes arose within daily writing entries across time and at how many participants cited a specific theme or subtheme at least once in their writings. The prompt given to participants was to write about anything that had come up for

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<td>.61**</td>
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<td>.29</td>
<td>.75**</td>
<td>.47**</td>
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<td>—</td>
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<td>.45**</td>
<td>.71**</td>
<td>.43**</td>
<td>.43**</td>
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<td>.56**</td>
<td>.44**</td>
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<td>.30</td>
<td>.16</td>
<td>.50**</td>
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<td>.69**</td>
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<td>.59**</td>
<td>.34*</td>
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</table>

Note. SCS = Self-Compassion Scale.

*Correlation significant at the .05 level (two tailed). **Correlation significant at the .01 level (two tailed).
them during the daily mindfulness practice. Therefore, themes and subthemes that arose addressed participants’ perceptions of the practice they did during class time. Themes and subthemes that were most prominent across time and that were found in a majority of the participants’ writings are reported in Table 2.

For the theme regarding the daily mindfulness practice in general, in the first week of the class, the most prominent subthemes were those coded as “relaxing/calming/centering/grounding” and “enjoyable/good start to day/positive effect.” A sample response that reflects both subthemes is “I really enjoy doing the yoga and breathing techniques every morning. I think it’s a good way to start each day. It is also very relaxing.” The prominence of these subthemes decreased as the course progressed and the subtheme “improving/liked and developed increased independence” became more notable. As one participant wrote on the last day of class:

I really enjoyed completing the exercises on my own without directions. It’s ok that I did some things in the wrong direction, I was just focused on the flow and energy. This class is a community and it was a unique experience to share with them.

Similarly, statements coded as “would like to do on own” also increased across time. Another participant wrote on the last day of class, “In the future, I hope to continue this practice. Even if it’s just taking 5 minutes out of my day to just breathe, relax, and shut everything out for a short amount of time.”

A reciprocal relationship existed within the theme of “mindfulness/focus/techniques used” for the subthemes “mind wandered” and “focused/mind clear/nonjudgmental.” While the prominence of both subthemes increased across the first three to four sessions, the subtheme regarding a wandering mind then decreased slightly across the remaining classes and the subtheme of a focused, clear, and nonjudgmental mind increased slightly throughout the rest of the course. A representative response coded as “mind wandered” is “I had difficulties focusing but it was relaxing. My mind drifted from thought to memories, to funny ideas.” An example of a response coded as “focused/mind clear/nonjudgmental” is “Today I was a lot more focused. I kept in tune on my breath. I also tried focusing on where I was, what I felt and heard and that made me feel more present and in the moment.”

Statements coded as “techniques used” spiked upward at the beginning of the second week of the course. This occurred on the day the first author gave the suggestion to bring in a positive quality or intention for the day. Other than this spike, statements coded as “techniques used” increased gradually over time. An example of a statement coded in this subtheme is “Today I set my intention for the day as peace and energy. As I did breath work I noticed that I started feeling like my breath was the tide in ocean, flowing up to shore with an inhale, and back out with an exhale.”

The only subtheme within the theme of “statements regarding physical postures” that was notable was that of “positive effect back/other muscles.” Responses coded in this subtheme were most evident in participants’ early writings and decreased across time. Some representative responses are “During the stretching exercises I realized how tense I was and how I should probably stretch more. It made me feel a small release, which was nice for my muscles” and “the stretches always help my body release tension.”

**Self-Report Scales**

SCS

The results of the two-(journal)-by-two (time of testing) analysis of variance with repeated measures on the last

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**Table 2.** Major themes and subthemes from participants’ reflective daily writings regarding daily mindfulness practice in order of prominence during early versus later occurring sessions.

<table>
<thead>
<tr>
<th>Themes and subthemes</th>
<th>Early sessions</th>
<th>Later sessions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Statements regarding daily mindfulness practice overall</td>
<td>Relaxing/calming/centering/grounding</td>
<td>Improving/liked and developed increased independence</td>
</tr>
<tr>
<td></td>
<td>Enjoyable/good start to day/positive effect</td>
<td>Would like to do on own</td>
</tr>
<tr>
<td>Statements regarding breath work aspect of daily mindfulness practice</td>
<td>Mind wandered</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Statements regarding physical posture aspect of daily mindfulness practice</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Statements regarding physical posture aspect of daily mindfulness practice</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Statements regarding physical posture aspect of daily mindfulness practice</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Early sessions</td>
<td>Positive effect back/other muscles</td>
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<tr>
<td>Statements regarding physical posture aspect of daily mindfulness practice</td>
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<tr>
<td>Early sessions</td>
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<tr>
<td>Statements regarding physical posture aspect of daily mindfulness practice</td>
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<tr>
<td>Early sessions</td>
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<tr>
<td>Statements regarding physical posture aspect of daily mindfulness practice</td>
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<td>Early sessions</td>
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</table>
variable for the total SCS scores indicated that there was not a statistically significant main effect of journal, $F(1, 39) = 2.254, p = .141$, partial $\eta^2 = .055$. Results of within-subjects effects indicated that the main effect of time was statistically significant, $F(1, 39) = 2.254, p = .141$, partial $\eta^2 = .055$. As was the two-way interaction of time and journal, $F(1, 39) = 2.254, p = .141$, partial $\eta^2 = .055$. See Table 3 for mean scores and standard deviations.

SCS Subscales

Results of the multivariate Pillai’s Trace test calculated as a repeated-measures MANOVA with all the total SCS scores as dependent variables indicated that the main effect of time was significant, $F(16, 34) = 2.949, p = .02$, partial $\eta^2 = .342$, as was the interaction of time by journal, $F(16, 34) = 2.567, p = .037$, partial $\eta^2 = .312$. Results of the univariate tests for time and of the between-subjects effects for the variable of journal are given for each subscale below.

Results of the between-subjects effects for the SCS subscale of Overidentification indicated there was not a statistically significant main effect of journal. The results of the univariate test for the main effect of time and the two-way interaction, however, were statistically significant. For the main effect of the journal, $F(1, 39) = 3.195, p = .082$, observed power = .414; time $F(1, 39) = 12.484, p = .001$, partial $\eta^2 = .242$; and the two-way interaction, $F(1, 39) = 6.644, p = .014$, partial $\eta^2 = .146$ (see Table 3).

Results of the between-subjects effects and the univariate tests for the SCS subscales of Self-Kindness and Self-Judgment showed no statistically significant main effects for either journal or time. The two-way interactions between journal and time were, however, statistically significant. Specifically, results for Self-Kindness were as follows: journal, $F(1, 39) = 0.463, p = .50$, observed power = .102; time, $F(1, 39) = 2.672, p = .11$, observed power = .357; and the two-way interaction, $F(1, 39) = 6.267, p = .017$, partial $\eta^2 = .138$. Results for Self-Judgment were as follows: journal, $F(1, 39) = 1.444, p = .237$, observed power = .216; time, $F(1, 39) = 0.420, p = .521$, observed power = .097; and the two-way interaction, $F(1, 39) = 6.191, p = .017$, partial $\eta^2 = .138$ (see Table 3).

Results of the between-subjects effects and the univariate tests for the SCS subscales of Mindfulness, Common Humanity, and Isolation resulted in no statistically significant main effects or two-way interactions. The

<table>
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<th>Pretest, SD</th>
<th>Posttest, M</th>
<th>Posttest, SD</th>
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<td>0.79</td>
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Notes. The SCS is a 5-point scale. If subscale scores are calculated individually, increases in scores toward 5 on the subscales of Mindfulness, Common Humanity, and Self-Kindness and decreases in the scores toward 1 on the subscales Overidentification, Isolation, and Self-Judgment indicate improvement in those areas of self-compassion. To calculate the overall SCS scores, however, scores for the items in the subscales Overidentification, Isolation, and Self-Judgment subscales were reverse scored. Because of this, an increase in scores toward a score of 5, as reported above, indicates improvement in all areas of self-compassion. SCS = Self-Compassion Scale.
results for the Mindfulness subscale were as follows: journal, $F(1, 39) = 0.933, p = .340$, observed power = .156; time, $F(1, 39) = 1.035, p = .315$, observed power = .168; and the two-way interaction, $F(1, 39) = 0.30, p = .587$, observed power = .083. The results for the Common Humanity subscale were as follows: journal, $F(1, 39) = 3.213, p = .091$, observed power = .416; time, $F(1, 39) = 1.429, p = .239$, observed power = .215; and the two-way interaction, $F(1, 39) = 0.002, p = .967$, observed power = .050. The results for the Isolation subscale were as follows: journal, $F(1, 39) = 3.045, p = .089$, observed power = .398; time, $F(1, 39) = 1.566, p = .218$, observed power = .231; and the two-way interaction, $F(1, 39) = 1.896, p = .176$, observed power = .269 (see Table 3).

Results for Participants Who Experienced the Practice in the Fall of 2015

Results of independent-samples Mann–Whitney $U$ tests indicated that the SCS scores of the nine participants who had experienced the practice in the fall of 2015 were significantly higher than those of the other 44 students at both the beginning ($p = .038$) and at the end ($p = .01$) of the summer. The mean pretest SCS score for the nine participants was $3.66 (SD = 0.90)$ and, for the remaining participants, was $2.99 (SD = 0.57)$. The final mean SCS score of these nine participants was $3.85 (SD = 0.80)$ and, for the remaining participants, was $3.35 (SD = 0.67)$.

Related-samples Wilcoxon signed-rank tests indicated that there was no difference in the SCS scores for the seven participants for which we had complete data at the beginning of the summer session ($M = 3.66, SD = 1.04$) compared with the end of the session held the previous fall ($M = 3.70, SD = 0.67$). Additionally, related-samples Wilcoxon signed-rank tests indicated the SCS scores of these seven participants showed a statistically significant increase from the beginning ($M = 3.66, SD = 1.04$) to the end ($M = 3.85, SD = 0.90$) of the summer in which the current study was conducted.

Discussion

Perceived Importance of Mindfulness in General

Participants’ responses to the questionnaire item asking whether mindfulness might or might not be an important quality for a clinician to possess indicated that, at both pretesting and posttesting, they unanimously believed it was important. At both pretesting and posttesting, a major theme in participants’ responses was that being mindful helped a clinician facilitate the client–clinician relationship. At pretesting, a second equally notable theme indicated that mindfulness helped clinicians’ professional outcomes (e.g., knowing boundaries, providing effective and appropriate counseling, and staying critical and accountable). This theme did not arise from participant answers at the posttest session. Instead, the most prominent theme at posttesting was that of “helps to understand self so can help others better.” This change in responses suggests that participation in a daily mindfulness practice and journaling shifted participants’ perceptions of the importance of mindfulness from a more outer-focused, technical stance to that of a more inner-focused, personal stance that facilitated and encouraged self-care and self-compassion.

Perceived Efficacy of the Daily Mindfulness Practice

The prompt given to participants before they engaged in the daily reflective writings was to write about anything that had come up for them during the practice (i.e., yoga-like stretches and breath work) they had just completed. Therefore, participants’ daily reflective writings referred only to the effects of the daily mindfulness practice they had just experienced and did not reference their out-of-class journaling assignment. These reflective writings suggested that, similar to participants in Beck et al.’s (2017) study, participants enjoyed the daily mindfulness practice and found it to be a good start to the day. Responses regarding the relaxing and enjoyable nature of the practice, however, decreased with time, and responses indicating that the participants enjoyed the greater independence and/or were improving and wanted to continue some aspect of the practice apart from class increased across time. Most individuals who believe they are improving at an activity and want to make it a part of their regular routine are also enjoying the activity and perceiving positive benefits from engaging in it. The decrease in participants’ responses regarding enjoying the daily practice could simply be due to the short period of time (i.e., 2 min) they were given to write that led them to note only their most salient thoughts.

One of the most prominent subthemes in the reflective writings at the beginning of the course was that of the mind wandering. This is not surprising. Kabat-Zinn (2013) stated that our attention tends to be distracted easily and our minds spend more time in the past or future than they do in the present. Developing a mindfulness practice helps the practitioner recognize when the attention is wandering and to bring it back to an anchor, which is frequently the breath (Kabat-Zinn, 2013; Siegel, 2011). Responses, such as “well again, during the breathing exercises my mind kept wandering but it was to important things,” indicated that many of the participants were aware of the fact that their attention was wandering and that it was going. Over time, these statements became slightly less notable, and responses coded as “focused/ mind clear /nonjudgment” increased, which indicated that students became better able to redirect their attention and feel focused in the present moment. Indeed, the fact that this change was noted in only 3 weeks’ time speaks to the potential power of this short practice. As Kabat-Zinn (1994) indicated, a mindfulness practice is simple but not easy and requires practice. He further stated that once we begin to partner with the breath, we realize that “not only does unawareness go with the territory, it is the territory” (p. 21) and “just knowing this is a big step in the right direction” (p. 21). The participants in the current study appeared to be taking this step.
Statements regarding techniques that participants were using during the breath work part of the daily practice also increased across time. Most of these responses referred to specifics of the breath work (e.g., “during the breathing I found I was most comfortable with 3 second intervals, it was easy to retain and did not feel resistance”), to the use of imagery or a mantra, and to the use of prayer (e.g., “Another morning starting with prayer. I need to continue this routine when the class is done”). Participants were instructed on the breath and use of imagery or focusing on a meaningful word; they were not given any suggestion to use prayer. Participant responses suggested that they were utilizing the instructor’s suggestions and their own inclinations to make this practice their own.

Responses to the subtheme regarding the positive effect of the stretches on the back and other muscles indicated that, similar to the results reported by Beck et al. (2017), the yoga-based stretches were effective in helping many of the participants to focus on their bodies and become aware of bodily sensations. The emotional body is mapped onto the physical body (Kabat-Zinn, 1994). According to Kabat-Zinn, “in order to continue growing, we need to continuously activate, listen to, and learn from our emotional body” (p. 154). Yoga helps us to increase our body awareness. Increasing awareness of the physical body, as these participants reported doing, is a key way of not only releasing physically held tension but also listening to and learning from our emotional bodies.

**Self-Compassion and Journal Type**

Analysis of the SCS scores documented an increase in self-compassion across the 3 weeks of the course. This finding is consistent with the suggestion of a reciprocal relationship between mindfulness and self-compassion such that they “facilitate and enhance each other” (Campos et al., 2016, p. 81). That this change was apparent after only 3 weeks of daily practice and journal writing again speaks to the potential power of this short daily mindfulness practice and journaling as components of a counseling class.

While there was no main effect of journal type for SCS scores, the significant two-way interaction of journal type and time indicated that there was a differential effect of journal type. Inspection of mean scores showed that the SCS scores of participants who kept gratitude journals decreased slightly from pretest to posttesting, whereas the SCS scores of participants who kept counseling journals increased. Results for the three SCS subscales of Self-Kindness, Self-Judgment, and Overidentification also documented statistically significant two-way interactions between journal type and time. The posttest scores on the Self-Kindness and Self-Judgment subscales for participants who kept gratitude journals were lower than their pretest scores, and the reverse was true for participants who kept counseling journals. Results of the Overidentification subscale indicated that posttest scores were higher than pretest scores for participants in both journaling groups (indeed there was a main effect of time for this subscale), but there was a more notable increase in scores for participants in the counseling journal group. Although there were no statistically significant effects of journal type on the subscales of Mindfulness, Common Humanity, and Isolation, in each case, the scores of the participants who kept counseling journals increased more than did those of participants who kept gratitude journals.

The instructions for the counseling journals indicated that participants were to keep a record of experiences, impressions, and analyses of themselves in counseling-related experiences. Flasher and Fogle (2012) stated that counseling occurs in situations where people are facing emotionally distressing and challenging situations. When the first author read the participants’ counseling journals, she found that these were the types of situations they were often discussing. Pennebaker and Evans (2014) indicate that short periods of writing honestly and confidentially about a traumatic event can reduce stress and anxiety and improve feelings of happiness and overall well-being. While gratitude journals have also been found to result in long-lasting effects that increased happiness and decreased depressive symptoms (Seligman et al., 2005), the self-compassion of participants in the current study appeared to be more benefited by the combination of the daily mindfulness practice and writing a counseling journal rather than a gratitude journal.

**SCS Subscales**

As described above, the type of journal kept by participants and the daily mindfulness practice utilized in the current study had a differential influence on SCS subscale scores. Neff (2003) stated that the six subscales of the SCS reflect the three components of self-compassion: extending understanding and kindness to oneself (Self-Kindness) rather than being overly critical and harsh with oneself (Self-Judgment); seeing one’s thoughts and emotions clearly and nonjudgmentally (Mindfulness) rather than being overwhelmed by them (Overidentification); and understanding that all humans will fail and suffer at some time (Common Humanity) rather than feeling alone and singled out in suffering (Isolation).

The daily mindfulness practice used in the current study directed participants to focus on their own bodies, to feel the effects of the breath on their bodies, and to focus on their ability to calm themselves and focus their attention inward. They were then to write reflectively about any arising thoughts. Those participants who kept counseling journals were further directed to reflect on their counseling-related experiences. Course content covered issues of self-care and prevention of burnout, as well as the topics of mindfulness, empathy, compassion, and self-compassion (within the topic of people skills). This combination of daily mindfulness practice and maintaining a counseling journal and course content appears to have had a larger effect on participants’ ability to view themselves with kindness rather than criticism than on their ability to understand our common humanity and not to feel isolated in suffering. Additionally, the ability to not feel overcome by
Participants Who Experienced the Mindfulness Practice Twice

Results from the nine participants who experienced the daily mindfulness practice twice indicated that, after the first experience, their SCS scores remained high and did not change significantly over the approximately 6-month time span from the end of fall 2015 to the beginning of summer 2016. A second exposure to the practice, however, resulted in a statistically significant increase in their SCS scores. In addition, these participants’ SCS scores were higher than those of their fellow students at both the beginning and the end of the summer semester. The possibility exists that the participants who volunteered to be participants in a nonclass daily mindfulness practice in the fall of 2015 (Beck et al., 2017) might be more personally interested in developing and maintaining a mindfulness practice than were those students who volunteered to participate in the current study in which the daily mindfulness practice and journaling were parts of the counseling class. Nonetheless, the relatively long-term effect of the first experience and the increase in self-compassion after the second experience, once again, speak to the potential power of this practice.

Limitations and Directions for Future Research

The self-compassion results were based on a self-report scale, and so, there is the possibility that participants were not reporting scores accurately and were trying to please the researchers. The use of self-determined identifiers minimizes this possibility. Additionally, the increase in participants’ self-compassion scores is consistent with results found by Beck et al. (2017), and participants’ answers to questionnaires and reflective writings supported results of the SCS.

Changes in self-compassion were measured because this has been noted to be a foundation for the development of empathy and compassion (Germer, 2009; Neff, 2011) and a subscale of the SCS measures mindfulness. A direct measure of empathy and a different measure of mindfulness could supply more information about these factors.

While assignment to journal type was random, the mean SCS total and subscale pretest scores of the participants who wrote in the counseling journals were lower than those of those who wrote in the gratitude journals. The possibility exists that the differential effect of journal type was due to differences in pretest scores. According to Neff (2016), scores of 1–2.5 indicate low self-compassion, 2.5–3.5 indicate moderate self-compassion, and greater than 3.5 indicate high self-compassion. All scores fell in the moderate range with room to increase. The facts that the mean scores of the total SCS score and every subscale increased for the participants who wrote in the counseling journals and that the mean scores for the total SCS score and three of the subscales decreased from pretest to posttesting for those who wrote in the gratitude journals suggest that maintaining a counseling journal rather than a gratitude journal was more effective in increasing self-compassion. The effect of different types of journal writing on self-compassion should continue to be a focus of investigation.

Conclusion

Beck et al. (2017) concluded that outcomes of engaging in their daily mindfulness practice, the same one used in the current study, could facilitate students’ overall well-being and resilience, which could also then increase their professional growth. The perspective of the participants in the current study supports the contention that engaging in a mindfulness practice facilitates professional growth. Their responses indicated that they recognized the importance of utilizing the people skills of empathy and compassion. They also indicated that participation in all elements of the counseling course, which included the daily mindfulness practice and out-of-class journaling, helped them realize the importance of mindfulness and self-compassion for their personal lives. Not only did they believe that engaging in a mindfulness practice could help them be more available emotionally to their clients but they also found the daily mindfulness practices to be enjoyable and a good start to their day, and majority of the participants indicated a desire to make it a part of their personal practice. Additionally, the self-compassion of participants who kept a counseling journal increased more than that of the participants who kept gratitude journals.

Neff (2011) suggested that self-compassion is an altruistic act because it “puts us into the optimal mental and emotional mind-set to help others in a sustainable, long-lasting way” (p. 193). Is this not what those of us who are preparing future SLPs and AuDs hope to develop in them and in ourselves as well? This short, easy-to-implement daily mindfulness practice combined with journal writing appears to be one means of facilitating the growth of self-compassion in our students.

References


For both journal types, participants were asked to write in their journals for 2 to 5 days a week, date their entries, and indicate the length of time for which they journaled.

Specific instructions for counseling journal:
You will keep a confidential record of your experiences, impressions, and analyses of yourself, your fellow students, and your clients in counseling-related experiences. Keep a journal including your experiences in class and in your clinical placement(s) of counseling-related experiences. Journal entries should be as detailed as possible. As you write this journal, always be sure to protect client confidentiality, so do not use any potentially identifying information about the client. Within this restriction, include as much information as possible about whom you (or a classmate) interacted with, when, where, under what circumstances, what was said and not said. You may also write about your experiences in class, particularly during role plays and/or group discussions. Again, protecting their confidentiality, write about fellow students as well and your evaluation of their efforts in role plays or class discussions.

Specific instructions for gratitude journal (on the basis of Seligman et al.’s 2005 instructions for “Three good things in life,” p. 416):
In the evening, review your day and list three good things that happened that day for which you are grateful and why you think they happened. An example of this could be that you ran a mile and were grateful for your increased endurance. This happened because of your efforts to work out more. Or you might have had a very successful clinical experience that happened because you prepared well and felt comfortable. Another example is that you heard from a friend that you haven’t seen in a long time and were grateful for this sense of reconnection. This happened because the friendship was so strong that the passage of time did not weaken it.