

The Impact of Parental Self-Compassion on Negative Emotions and Intervention Research among Primary School Students

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Abstract

Research Objectives: This study implemented a one-week integrated hypnosis-enhanced meditation combined with self-compassion intervention for parents of primary school students to investigate the effects and mechanisms of this intervention on self-compassion, rumination, parenting stress, and negative emotions.

Research Results: The intervention significantly reduced negative emotions; alleviated the dimensions of self-judgment, isolation, and over-identification within self-compassion; decreased the reflection dimension of rumination; and improved the “difficult child” dimension of parenting stress. The change in self-compassion was significantly negatively correlated with changes in rumination, parenting stress, and negative emotions, while changes in rumination, parenting stress, and negative emotions were significantly positively correlated with each other. The intervention played a significant moderating role in the effect of self-compassion on rumination, and the overall moderating effect on the four variables—self-compassion, rumination, parenting stress, and negative emotions—was significant.

Research Conclusion: Short-term hypnosis-enhanced meditation combined with self-compassion practice can effectively improve the self-compassion levels of parents of primary school students and reduce negative emotions, with rumination and parenting stress potentially playing mediating roles in this process.

Full Text

Preamble

The Impact of Self-Compassion on Negative Emotions among Parents of Primary School Students and an Intervention Study National Key Laboratory of

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Research Objective:

This study implemented a one-week integrated intervention combining hypnosis-enhanced meditation with self-compassion training for parents of primary school students. The research aimed to investigate the effects and underlying mechanisms of this intervention on self-compassion, rumination, parenting stress, and negative emotions. The results indicated that the intervention significantly reduced negative emotions and alleviated the self-criticism, isolation, and over-identification dimensions of self-compassion. Furthermore, it reduced the “brooding” dimension of rumination and improved the “difficult child” dimension of parenting stress. Correlation analyses revealed that changes in self-compassion were significantly and negatively correlated with changes in rumination, parenting stress, and negative emotions. Conversely, changes in parenting stress were significantly and positively correlated with changes in negative emotions. Additionally, self-compassion played a significant moderating role in the impact on rumination, and the overall moderating effect across these variables was significant.

Research Conclusion: A short-term intervention of hypnosis-enhanced meditation combined with self-compassion exercises can effectively improve the self-compassion levels of parents of primary school students and reduce negative emotions. Rumination and parenting stress may serve as mediating factors in this process.

关键词

Abstract

This study explores the complex relationships between parenting stress, negative emotions, and the potential therapeutic benefits of hypnosis-enhanced meditation. Parenting stress has long been recognized as a significant factor affecting both parental well-being and child development. When left unaddressed, chronic stress often manifests as persistent negative emotions, including anxiety and depression, which can impair the parent-child relationship. This research investigates how hypnosis-enhanced meditation—a hybrid intervention combining the focused attention of meditation with the suggestive depth of hypnosis—can serve as an effective tool for emotional regulation. By analyzing the psychological mechanisms at play, we aim to provide a theoretical and empirical basis for using integrated mindfulness techniques to alleviate the psychological burden on parents and foster a healthier family environment.

Introduction

Parenting is a demanding role that requires significant emotional, cognitive, and physical resources. While rewarding, it frequently leads to “parenting stress,” defined as the distress experienced when the demands of the parenting role exceed the resources available to meet them. High levels of parenting stress are strongly correlated with the emergence of negative emotions, such as irritability, sadness, and a sense of inadequacy. These emotional states not only affect the parent’s mental health but also influence their parenting style, often leading to more reactive or punitive behaviors.

In recent years, mindfulness-based interventions have gained traction as a means to mitigate stress. However, traditional meditation can sometimes be difficult for highly stressed individuals to master due to the discipline required for sustained focus. Hypnosis-enhanced meditation offers a promising alternative by utilizing hypnotic induction to facilitate a deeper state of relaxation and receptivity more rapidly. This study examines the efficacy of this combined approach in reducing parenting stress and neutralizing negative emotional states.

Theoretical Framework

Parenting Stress and Negative Emotions

Parenting stress is not a monolithic construct; it arises from a combination of child characteristics, parent personality traits, and situational variables. According to the Abidin model, when parents perceive their child as difficult or their own parenting competence as low, the resulting stress triggers a physiological and psychological “fight or flight” response. This chronic activation is the primary driver of negative emotions. Over time, these emotions can become internalized, leading to clinical levels of anxiety or depressive disorders.

The Role of Hypnosis-Enhanced Meditation

Hypnosis and meditation share several phenomenological similarities, including narrowed attention and reduced self-referential processing. However, hypnosis adds the element of “suggestion,” which can be used to reframe stressful experiences or enhance the individual’s perceived self-efficacy.

Influence Intervention Research Self-compassion Negative Emotions Primary School Parents Laboratory Cognitive Science Mental Health, Institute Psychology, Chinese Academy Sciences.

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Abstract

Objective: study implemented one-week integrated hypnosis-enhanced meditation combined self-compassion intervention parents primary school students,

aiming investigate effects underlying mechanisms self-compassion, rumination, parenting stress, negative emotions.

Results: intervention significantly reduced negative emotions, alleviated self-criticism, feelings isolation, over-identification self-compassion, decreased brooding dimension rumination, improved difficult child dimension parenting stress.

Changes self-compassion significantly negatively correlated changes rumination, parenting stress, negative emotions, while changes rumination, parenting stress, negative emotions significantly positively correlated. intervention played significant moderating effect self-compassion rumination demonstrated significant overall moderating effect variables: self-compassion, rumination, parenting stress, negative emotions.

Conclusion: Brief-term hypnosis-enhanced meditation combined self-compassion practice effectively enhance self-compassion level primary school parents, reduce negative emotions, rumination parenting stress potentially playing mediating roles.

Keywords

Self-compassion; Rumination; Parenting stress; Negative emotions; Hypnosis-enhanced meditation; Mental health

1 研究背景

Parents of primary school students face and endure pressures from various sources, including their children's academics and extracurricular activities. Under heavy parenting stress, parents are prone to negative emotional experiences and states such as anxiety, a sense of loss of self, and fatigue. This, in turn, leads parents to form more negative parenting concepts and adopt more negative parenting behaviors [?, ?], which subsequently affects the physical and mental health of the children, the parent-child relationship, and the child's development within the family [?]. In 2003, Kristin Neff proposed the concept of self-compassion, which refers to treating oneself with a non-judgmental attitude when facing stress, setbacks, failures, or personal shortcomings [?]. Self-compassion functions through three components, each containing both a positive and a negative dimension, reflecting caring versus non-caring ways of treating oneself. These three components are self-kindness versus self-judgment, common humanity versus isolation, and mindfulness versus over-identification. As an internal adjustment mechanism, self-compassion provides a relatively stable sense of self-worth. It is typically closely related to psychological resilience, serves as a predictor of mental health, and plays a crucial role in psychological adjustment [?]. Response Style Theory defines rumination as an individual's unconscious and continuous focus on their own behaviors and thoughts, involving persistent and repetitive thinking about their current emotional state, its possi-

ble causes, and its potential consequences, rather than actively solving problems. Numerous studies have confirmed that rumination is a vulnerability factor for depression; individuals with high levels of rumination are prone to becoming immersed in repetitive thoughts about negative life events, leading to negative emotions such as worthlessness. Furthermore, rumination can exacerbate depressive symptoms and have a profound impact on an individual's physical and mental health development [?]. Self-compassion helps individuals resist the repeated arousal of unpleasant experiences and effectively manage the negative effects brought about by negative events, thereby reducing negative emotions and enhancing positive ones [?, ?]. This mechanism may involve the inhibitory effect of the mindfulness component within self-compassion on rumination.

Integrated Hypnosis-Enhanced Meditation Therapy (IHEMT) is a structured psychological intervention method developed by our project team. It uses meditation as a foundational framework and incorporates clinical hypnosis techniques. This method merges the awareness and acceptance of meditation with the subconscious adjustment mechanisms of hypnosis, embedding hypnotic techniques—such as guided imagery—into meditation scripts. Its core lies in guiding clients within a meditative state to improve the cognitive, emotional, and physiological responses to psychological distress through the integration of hypnotic suggestion and cognitive restructuring. Based on intervention goals, it can be combined with other effective methods to further integrate the effects of meditation into real-life experiences. This study focuses on the parents of primary school students, treating their self-compassion capacity as an effective mechanism for regulating their own psychological attributes. By initiating self-compassion procedures through various methods such as integrated meditation, the study observes changes in rumination, parenting stress, and negative emotions. By analyzing psychological experiences and changes in dependent variables before and after the intervention, as well as the relationships and interactions between these variables, the study aims to verify the positive effects of self-compassion interventions. The ultimate goal is to reduce parenting stress, decrease self-rumination, effectively dissipate negative emotions, and create a positive family environment.

2.1 被试招募及分组

The selection of participants for this study was approved by the relevant ethics committee. A total of [N] parents of primary school students were recruited and, after providing informed consent, were randomly assigned to two groups: an intervention group ($n = [N_1]$) and a control group ($n = [N_2]$).

The intervention group participated in a [N]-day self-compassion program, which included daily activities such as meditation, self-hugging, practicing self-compassionate affirmations, and maintaining a self-compassion journal. In contrast, members of the control group were instructed to write daily parenting diaries as a routine activity. Participants were primarily recruited through school and community announcements, with a specific focus on inviting parents

of primary school-aged children. All participants were fully informed regarding the study's objectives, procedures, and confidentiality protocols. A random number table was utilized to assign participants to either the intervention or control group.

2.2 干预程序

The intervention protocol of this study draws upon specific practices from the eight-week Mindful Self-Compassion (MSC) training program developed by Germer and Neff. This protocol was simplified and revised to accommodate the practical circumstances of parents of primary school students in China. Integrated meditation serves as the core guiding component of the entire program, encompassing three specific techniques: rhythmic breathing, the “Peach Blossom Spring” (inner sanctuary) meditation, and bathing meditation. Rhythmic breathing is primarily utilized for relaxation and the alleviation of negative emotions. The “Peach Blossom Spring” meditation guides individuals to construct and deeply experience an absolutely safe and comfortable personal space, thereby promoting self-compassion. Finally, the bathing meditation utilizes the imagery of flowing water and the externalization of emotions to enhance mindfulness levels.

The intervention group followed a combined training approach, arranging self-compassion exercises independently each day for a total of seven days. Participants completed survey questionnaires both before and after the training period. As shown in , participants were assigned identification numbers and completed the pre-test questionnaire by scanning a QR code. Meditation practice was conducted daily. Participants were instructed: “In the process of parenting, when you encounter setbacks and failures, or when you become aware of your own shortcomings and limitations, please change the way you treat yourself. Cease being self-critical and instead adopt an attitude of self-care and tolerance. Take several deep breaths, listen to the meditation recording, and begin your practice to detach yourself from negative emotions.”

Excerpt from the Rhythmic Breathing Meditation: “Adjust your sitting posture, keep your back straight, and gently close your eyes. As soon as you close your eyes, your body begins to relax. Maintain natural and smooth breathing, and follow the guidance to shift your attention. Wherever your attention goes, that area becomes relaxed, soft, and comfortable.”

“As you exhale, release your negative emotions through your hands and feet.” Excerpt from the “Peach Blossom Spring” Meditation: “This sanctuary is the spiritual home that we each require. Today's meditation is intended to lead you on a quest to discover the ‘Peach Blossom Spring’ within your inner world. In this environment of absolute safety and comfort, what kind of experience will you have?”

7 天

Excerpt from Bathing Meditation: In the process of growing up, it is inevitable that we experience various traumas, both large and small. We inevitably encounter stressful and anxiety-inducing events, and we unavoidably harbor negative emotions such as fear, anger, sadness, and depression. Imagine a warm, clear stream of water washing down from the top of your head, carrying these negative emotions away. You feel yourself becoming increasingly light and transparent. Suddenly, you realize that these clouds of varying shapes are like the joys and sorrows of your life; positive emotions are like white clouds, sometimes standing still in silence, sometimes wandering leisurely.

Conversely, negative emotions are like dark clouds, sometimes bringing storms and at other times lightning and thunder. Embrace yourself every day, and please believe that this method is highly effective: find an environment where you feel safe and comfortable to attempt your first practice. Start by crossing your arms and stroking the opposite arm with your palms. At the same time, say to yourself in your heart: “You have done a great job being a father during this time; I believe in you, and everything will get better.” Then, slowly experience this sensation; subtle neurological and hormonal changes are occurring within your body. Believe that you can reclaim this long-lost sense of solace. The power of warmth, support, and security is being transmitted through your palms, arms, and shoulders to the depths of your heart. You can practice this frequently over a period of time to gradually develop the habit of embracing and comforting yourself whenever you feel pain or self-criticism.

Take a few minutes every day, or whenever you encounter negative emotions or begin to engage in self-criticism while parenting, to allow yourself to settle down. Focus your attention on yourself and silently recite these words:

I should understand myself; I have done well enough. In moments of pain and unrest, I should especially try to embrace myself. These experiences are common to all parents; I am not the only one facing this. Many parents encounter situations similar to mine. It is not incomprehensible to feel angry when facing such circumstances in parenting. This situation is indeed frustrating. I am going through a difficult time in child-rearing. Breakdown and pain are only temporary; they will not last forever. It is okay to be stuck in a difficult situation, and it is okay to be imperfect. I am not a perfect person; may I accept myself with understanding and kindness.

7 天

Using a reflective writing approach, participants are encouraged to recall negative parenting experiences from either the past or the present. By documenting recent distressing feelings associated with child-rearing, individuals can engage in a process of self-compassion and emotional care.

One may begin by documenting the sequence of events alongside one's per-

sonal emotional responses, such as anger, urgency, indignation, shame, or anxiety. While writing, it is essential to strive for an attitude of acceptance and non-judgment toward these feelings, ensuring they are neither downplayed nor exaggerated.

It is important to acknowledge that all parents encounter similar situations; other parents experience moments just like these. Finally, write down some kind and understanding words for yourself, as if you were writing a letter to a dear friend. Write with a gentle and soothing tone, letting yourself know that you truly care about your own happiness and well-being.

7 干预结束后，被试扫码二维码填写后测调查问卷

The task for the control group consisted of writing one parenting diary entry per day. The purpose of this activity was to provide the control group with a non-interventional yet relevant task, allowing for a more accurate measurement of the effects of the self-compassion intervention in the experimental group. By maintaining these diaries, parents could naturally focus on and reflect upon their parenting practices while simultaneously providing essential control data for the study.

2.3 信息采集处理与统计分析方法

Information Collection and Processing

In this study, we analyzed three primary dimensions—self-compassion, parenting stress, and negative emotions—both before and after the intervention. The self-compassion construct comprises six sub-dimensions: self-kindness, self-judgment, common humanity, isolation, mindfulness, and over-identification. These include three positive dimensions (self-kindness, common humanity, and mindfulness) and three negative dimensions (self-judgment, isolation, and over-identification).

The intensity of participants' rumination was assessed based on their total scores. Parent-child dysfunctional interaction was evaluated using the framework established by Abidin [?]. Negative emotions were treated as a global construct without further subdivision into specific dimensions. The primary scales utilized in this study include: the Self-Compassion Scale (SCS), used to evaluate the degree of participants' self-compassion; the Ruminative Responses Scale (RRS), used to measure the tendency of participants to repeatedly dwell on negative events when facing stress; the Parenting Stress Index (PSI), used to measure the level of stress parents experience during daily child-rearing activities; and a Negative Emotion Scale, which assesses the frequency and intensity of negative emotional experiences. Questionnaires were collected at two time points: pre-intervention and post-intervention. The research team implemented strict procedural controls throughout the distribution and collection of these instruments.

Statistical Analysis

This experiment employed a 2×2 two-factor mixed design. All statistical analyses were conducted using SPSS and AMOS. The analytical process primarily included the following steps: first, a comparison of demographic variables between groups; second, an analysis of pre-test differences between groups using independent samples *t*-tests; third, an evaluation of pre- and post-intervention data using paired samples *t*-tests and two-way repeated measures ANOVA; and fourth, a correlation analysis of change scores using Pearson correlation coefficients. Finally, we utilized multi-group structural equation modeling (SEM) to calculate and analyze the moderating effect of self-compassion within the chain mediation model involving rumination and parenting stress.

2.4 实验结果

Results and Analysis

By comparing the demographic data of the intervention and control groups, it was found that there were no statistically significant differences between the two groups of surveyed parents regarding general information such as gender and educational background ($p > 0.05$). Similarly, no statistically significant differences were observed between the groups in terms of the children's age and gender ($p > 0.05$). Furthermore, a comparison of the pre-test values for each variable or dimension showed no statistically significant differences between the intervention and control groups ($p > 0.05$), indicating that the experimental grouping was effective. Building upon these findings, we conducted a pre- and post-test comparison, effect analysis, difference correlation analysis, and an analysis of the moderating effect of the intervention. The results are as follows.

1. Pre- and Post-test Comparison and Effect Analysis

The pre- and post-test comparison and effect analysis were conducted on the data from both groups, as shown in .

(Data values: 0.073/0.788 /0.004 0.963/0.33 0.032/0.859 2.759/0.102
0.674/0.415 0.012/0.915 2.643/0.109 1.326/0.254 0.108/0.744 1.664/0.202
0.154/0.696 0.021/0.886 6.326/0.015 0.284/0.596)

Note: Within the same group, compared to pre-intervention, $p < 0.05$; at the same time point, compared to the control group, $p < 0.05$.

The results indicate that the main effect of group on common humanity was statistically significant. Specifically, the intervention group showed significant improvements in self-criticism, isolation, and over-identification following the intervention. In the control group, internal differences in common humanity after the intervention were also statistically significant.

Figure 1

Figure 1: Figure 1

Figure 2

Figure 2: Figure 2

2. Correlation Analysis of Differences

A correlation analysis was performed on the change scores (post-test minus pre-test) for each variable and dimension. Pearson correlation results showed that the change in self-compassion was significantly and negatively correlated with changes in negative emotions, parenting stress, and rumination. All correlation coefficients were less than 0 ($p < 0.05$). Conversely, changes in negative emotions, parenting stress, and rumination were all significantly and positively correlated with each other, with coefficients greater than 0 ($p < 0.05$). The specific correlations between the scales and sub-dimensions are detailed below.

(Correlation Matrix Data: .778** -.564** -.582** -.658** .278* .732** .741** .482** -.719** .669** .912** .732** -.454** -.611** -.659** -.531** -.644** -.641** .453** .899** .607** -.526** -.422** -.379** -.444** -.529** -.431** .707** -.616** .575** .904** .628** -.464** -.504** -.493** -.460** -.497** .752** .730** -.603** .505** .746** .970** -.315* -.632** -.634** -.376** -.636** .718** .647** .657** -.530** .474** .671** .905** -.278* -.577** -.495** -.293* -.598** .691** .531** .594** .818** -.508** .307* .500** .847** -.280* -.530** -.549** -.293* -.562** .562** .399** .383** .756** .674**)

Note: ** Correlation is significant at the 0.01 level (2-tailed); * Correlation is significant at the 0.05 level (2-tailed).

3. Moderating Effect of the Intervention

To further analyze whether the intervention moderates the chain mediation between rumination and parenting stress, this study established a chain mediation model. The change in self-compassion was set as the independent variable, the change in negative emotions as the dependent variable, and the changes in rumination and parenting stress as mediating variables. We then used the group (intervention group vs. control group) as a moderating variable to verify its effect within the model using multi-group analysis for categorical moderators. The model schematic is shown in

. The structural equation model (SEM) results before introducing the grouping variable are shown in

, where residual terms are fixed.

Structural Equation Model Diagram. Estimate $p < 0.001$. The direct effect of the change in self-compassion on the change in negative emotions was statisti-

Figure 2

Figure 3: Figure 2

cally significant ($p < 0.05$), indicating that higher increases in self-compassion are associated with greater reductions in negative emotions.

Regarding the other mediating effects, the mediation effect of rumination, the mediation effect of parenting stress, and the combined mediation effect of both were analyzed. The results show that while the individual mediating paths for rumination and parenting stress did not reach statistical significance independently, their directions were consistent. The total mediating effect under their combined influence was statistically significant. Additionally, the direct effect was negative and statistically significant.

Change in Rumination \rightarrow Change in Negative Emotions: -0.286 ($p = 0.025$)

Rumination: -0.02 ($p = 0.69$)

Total Effect: -0.60 ($p = 0.01$); Parenting Stress: -0.18 ($p = 0.07$)

Rumination & Parenting Stress: -0.11 ($p = 0.07$)

After introducing the group as a moderating variable, we first constrained the moderation path coefficients to be equal across groups (Group 1 and Group 2) and ran an Unconstrained Model.

Subsequently, this restriction was removed to run the Structural Weights Model, allowing us to obtain the change in fit parameters between the two models and determine the significance of the primary moderating effect. As shown in [FIGURE:3], the moderation significance of the unconstrained and structural weights models was assessed (with fixed residual terms). The results indicate that the moderating effect of the intervention within the chain mediation model is statistically significant. The specific moderation results for Group 1 and Group 2 in the structural weights model are presented below.

3 讨论

The eight-week mindfulness self-compassion training developed by Germer includes weekly sessions featuring loving-kindness meditation, breath awareness, and mindful walking, alongside daily self-hugging and self-compassion writing exercises. His case studies demonstrated that this approach enhances participants' self-compassion levels and reduces psychological issues such as anxiety and depression. Similarly, eight-week group self-compassion training for high school students in China has been shown to effectively improve self-compassion levels while reducing the frequency and intensity of both state and trait depression. [?] found that experimentally inducing self-compassion can lead to a transient increase in self-compassion levels, which subsequently reduces negative emotions.

Based on these findings, we designed a one-week intervention incorporating self-compassion behavioral and writing exercises combined with integrated meditation. We found that following the intervention, negative sub-dimensions of self-compassion—such as self-criticism and over-identification—were significantly reduced, and negative emotions decreased significantly.

Leary et al. argue that self-compassion buffers negative self-feelings by helping individuals acknowledge their responsibility in negative events while avoiding being overwhelmed by negative emotions, thereby improving their emotional experience. Our study found that after the intervention, scores for the “reflection” sub-dimension of rumination decreased significantly, suggesting that short-term intervention facilitates individual self-reflection. In contrast, symptom rumination and obsessive thinking tend to represent habitual thought patterns, making them more resistant to significant change through short-term interventions. Sirois suggested that self-compassion training may improve parental well-being following challenging parenting events by reducing guilt and shame; interventions that help parents cultivate a self-compassion mindset may assist them in managing the self-conscious emotions accompanying parenting challenges. However, our study showed no significant change in parenting stress, likely because parenting stress is a long-term, cumulative, and continuous state upon which short-term interventions have limited impact. This suggests that short-term self-compassion and meditation training primarily improve negative emotions by reducing the reflection sub-dimension of rumination.

We analyzed the correlations between changes in self-compassion, rumination, negative emotions, and parenting stress. The results showed that these four variables were pairwise correlated, suggesting a potential interaction between them. To further confirm the mechanisms underlying these changes, we analyzed the mediating effects between variables and whether the intervention played a moderating role. Although the individual mediating effects of rumination and parenting stress in the model did not reach statistical significance, they were consistent in direction; the total mediating effect under their combined action was statistically significant. This indicates that the improvement of negative emotions through self-compassion may be mediated by parenting stress and rumination. The intervention significantly moderated the effect of self-compassion on rumination and the overall relationship between self-compassion and negative emotions. Meditation plays a crucial role in the intervention process. Germer posits that it helps supportive language emerge naturally in participants’ consciousness, thereby promoting emotional improvement. For instance, individuals who regularly practice mindfulness meditation exhibit higher levels of self-compassion and less emotional distress than those who do not [?, ?, ?]. Furthermore, research has found that compassion meditation training leads to significant changes in the cingulate cortex, striatum, and insula. Short-term self-compassion meditation training can reduce salivary α -amylase and subjective anxiety responses to stress while stabilizing heart rate variability [?]. These neurological and psychological changes underscore the vital role of meditation.

Our meditation training consists of three components: “Breath Awareness,” “The Paradise,” and “Bathing Meditation.” These practices differ from standard techniques by incorporating imagery guidance and suggestion commonly used in hypnotherapy. For example, during breathing exercises, we suggest that negative emotions are expelled from the body through exhalation; in the bathing meditation, we suggest that warm, clear water washes away fatigue, negative emotions, and physical discomfort. Such suggestive language can provide direct relief. We also use indirect suggestions—for instance, using clouds to represent emotions. By suggesting that the body becomes light and floats above the clouds after being washed by water, participants can observe those “clouds” from above, realizing that emotions are merely temporary gatherings and dispersions. This allows them to observe emotions without being affected by them, thereby promoting cognitive change. In “The Paradise” meditation, participants are guided to construct their own absolutely safe and comfortable space where they can do and say whatever they wish, promoting self-compassion. By engaging all sensory experiences, these images are further internalized. Because the imagery is constructed by the participants themselves, potential resistance is reduced, and internal resources are effectively mobilized. In daily life, meditation can transform imagery into psychological tools for facing reality: breathing or bathing meditations can be used when negative emotions arise, and “The Paradise” imagery can be used for restoration when fatigued, providing long-term support.

The self-compassion intervention period in this study was set to seven days, primarily because long-term training is difficult for parents of primary school students to complete due to time and economic constraints, which often leads to participant dropout. This duration was also chosen to explore the efficacy and value of short-term interventions; positive results here could provide a foundation for more comprehensive intervention studies. The results showed statistically significant changes in several variables, indicating that short-term intervention is effective. This aligns with other short-term self-compassion research, such as findings that brief interventions help women reduce stress and anxiety when facing social evaluative pressure [?]. However, changes in other variables and dimensions did not reach statistical significance, suggesting that the effects of short-term intervention are not yet comprehensive, which may be related to the duration. From another perspective, this also demonstrates that the formation of psychological attributes is a complex process, and the rate of change varies across different psychological domains.

The self-compassion program in this study is simple, easy to implement, and free from constraints regarding time and location. As a widely feasible and effective tool, it can help parents enhance their self-compassion, cope with parenting challenges, and improve mental health and family well-being, carrying significant practical implications. However, the small sample size of this study limits the ability to detect statistically significant differences and affects the reliability of the results. Future research should consider expanding the sample size. Additionally, the relatively short intervention period may not reflect the poten-

tial long-term effects of self-compassion training; practical applications should consider extending the intervention cycle and conducting longer follow-up assessments. Finally, data collection relied primarily on self-reports, which may be influenced by subjective bias and social desirability. Consequently, there is a risk of self-report bias, and results should be interpreted and applied with caution, ideally incorporating objective measures to enhance credibility.

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Introduction

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