

Research Paper

The Influence of Self-Compassion Intervention on Stress and its Manifestations in Indians Working in the Service Sector During the COVID 19 Pandemic

Diya Kapur^{1*}, Sritha Sandon²

ABSTRACT

While working in the service sector under conditions like a global pandemic like COVID 19 pandemic can be extremely stressful to experience and deal with, fostering self-compassion can help reduce the stress experienced and manifested by individuals. This study focuses on determining whether a self-compassion intervention including activities that foster self-compassion will indeed help in the reduction of stress experienced and reported by individuals undergoing the intervention or not and whether there would be any gender difference in the level of self-compassion. To test this, 30 participants of Indian origin working in the service sector of age group 23-30 years were selected using purposive sampling and allocated randomly in two groups, the intervention group (n=15) and control group (n=15). Both groups were required to fill a self-report questionnaire pre and post a 7-day period, recording socio-demographics, and three scales- Self-Compassion Scale (Neff, 2003), measuring stress through Depression Anxiety and Stress Scale, and Common Response to stress Scale recording the manifestation of stress. The Intervention group was given self-compassion activities to do for 7 consecutive days, while the control group was left ideal. Data Analysis revealed that the self-compassion intervention has a significant influence on the levels of stress. This study thus indicates that self-compassion interventions can be an effective method to reduce the amount of stress experienced and manifested in the individual. No gender difference in the level of self-compassion is determined.

Keywords: *Self-Compassion, Stress, Intervention, Manifestation of Stress, Gender, Service Sector.*

Entering into the workspace can in itself be a stressful experience, and then having to work during the COVID 19 Pandemic can add to the general work stress experienced by workers of the service sector. Many studies have demonstrated how activities that foster self-compassion can help reduce stress felt by an individual.

¹MSc. Psychology, Montfort College, Bengaluru North University, Karnataka, India

²Associate Professor, Montfort College, Bengaluru North University, Karnataka, India

*Corresponding Author

Received: March 24, 2022; Revision Received: August 05, 2022; Accepted: August 10, 2022

The Influence of Self-Compassion Intervention on Stress and its Manifestations in Indians Working in the Service Sector During the COVID 19 Pandemic

Self-compassion involves acting the same way towards yourself, the way you would others when they are having a difficult time, failing or notice something they don't like about themselves. Having compassion for others includes noticing that they are suffering, feeling moved by their suffering, and accepting that suffering, failure and imperfection is all a part of human suffering. And when you have this compassion to yourself, it is called self-compassion. Self-compassion is accepting and honouring yourself as a human. (Neff, 2003). Neff also spoke about the three elements of self-compassion- self-kindness, which is being understanding of ourselves, embracing ourselves kindly and as we are with empathy and kindness; common humanity, understanding that everyone has common/shared human experiences of having the feelings of being imperfect, experiencing failure, and so on, we are not isolated in our imperfections; and mindfulness, being with what is in the present, acknowledge and validate the fact that we are suffering.

It is a common notion that we are self-critical because it motivates us. If we are too kind to ourselves, we will be lazy, however, research shows that self-criticism undermines our motivation, this is because self-criticism causes the release of adrenaline and cortisol which are the stress hormones (Warren, et al., 2016). Therefore, when one is stressed and if we are self-critical to ourselves this will lead to these high levels of stress, and this can lead the body to shut itself down, thus leading to conditions like depression and anxiety (Neff & Germer, 2017). Self-compassion helps to reduce these stress levels, example, gentle vocalizations, self-talk, physical compassion, will lead to the release of oxytocin and thus strongly related to mental wellbeing. (Neff, 2004).

Self-compassion is highly/ strongly related to mental wellbeing, less depression, less anxiety, less stress and perfectionism and also positively related to happiness, life satisfaction, greater motivation, self-responsibility, taking care of self, etc. (Neff, 2004). It is also related to resilience and coping (Perez-Blasco et al., 2016).

Like mentioned before self-compassion helps to reduce stress. Various studies conducted, spoken about below will show evidence of how high self-compassion is related to lower levels of stress, or being able to deal with stressful situations effectively or adaptively. Self-compassion is seen as a resource that is valuable in coping with stress, stressor. People who have high self-compassion are less likely to catastrophize negative life events and thus being able to cope with the stressor more effectively and helping to reduce the stress experienced. Self-compassion relates to a coping strategy called positive cognitive restructuring (Allen et al, 2010). This involves trying to view a negatively stressful situation in a more positive perspective. Therefore, both self-compassion and positive cognitive restructuring are related, in the sense that people who have high self-compassion tend to use positive cognitive restructuring as a coping strategy when faced with a dire, negative stressor. This coping strategy seems to be effective in reducing stress. (Leary et al., 2007).

Thus, we can say having high self-compassion can be a protective factor for one's physical and psychological wellbeing and thus makes it very important.

Stress is defined as the feeling when an individual perceives that the demands of the external situation of environment is exceeding one's personal resources (psychological, physical, cognitive and social) (Lazarus & Folkman, 1985). Stress as defined by the Depression Anxiety. Stress Scale mentions how the "Stress scale is sensitive to levels of chronic non-

The Influence of Self-Compassion Intervention on Stress and its Manifestations in Indians Working in the Service Sector During the COVID 19 Pandemic

specific arousal. It assesses difficulty relaxing, nervous arousal, and being easily upset/agitated, irritable/overreactive and impatient”.

Manifestation of stress may occur in multiple areas, namely physiological, psychological or emotional, behavioural, cognitive and social. Examples for Physiological manifestations to stress may include chest pain, fatigue, increased blood pressure, heart rate, upset stomach etc. Examples for the Behavioural manifestation of stress may include, change in activity level, difficulty communicating, anger outbursts, inability to relax, etc. Psychological or emotional manifestation of stress may include, anxiety, denial, anger, depression, feeling overwhelmed, etc. Cognitive manifestation of stress may include forgetfulness, difficulty concentrating and paying attention, inability to stop thinking about the stressor, etc. Social manifestations of stress may include, isolating from people, difficulty listening, criticizing/blaming, difficulty accepting support, disrespecting other, etc.

There are several studies that indicate how self-compassion helps to lower levels of depression, anxiety, etc. (Bluth & Eisenlohr-Moul, 2017; Neff & Germer, 2013; Finlay-Jones et al, 2016; Thomas & Thenmozhi, 2019, etc.) similarly there are studies have explored how physiological manifestation of stress such as inflammation is common and that high levels of self-compassion acts as a protective factor by reducing stress thus restricting inflammation (Breines et al, 2014), and similarly for heart rate (Arch et al, 2014).

Many studies also talk about how there seems to be a gender difference in the level of self-compassion between men and women. It is often found that levels of self-compassion recorded in men are higher than in women. The dilemma is often whether this is due to the difference in sample size (Bluth et al., 2017; Yarnell et al., 2015).

Rationale for the study

Self-compassion may have a different effect on the different manifestations of stress which needs to be further explored. It becomes important and interesting specially to look at the Indian context. Indian adults who have just entered the workspace, have been facing a lot of stressors in the working environment due to the COVID-19 pandemic, thus, facing a lot of challenges. It would be interesting to view how self-compassion may influence their levels of stress and manifestations of stress. Additionally, it would be significant to look at any gender difference in the level of self-compassion attained by individuals while trying to attain an equal sample for both groups.

Two of the gaps identified were the lack of available studies about the influence of self-compassion on stress in the Indian context, and the gender disparity in the terms of representation in the sample. Most studies either had a lack of male representation or none at all. Further some studies even indicated that men fall under the group of high self-compassion, and it was noticed that men tend to have higher self-compassion as compared to women (Bluth et al., 2015; Bluth and Blanton, 2014). To address this, this study intends to look at these gaps of self-compassion and stress in the Indian context and also focus on gender differences.

Need for the study

It has been then and again established that self-compassion can act as a protective factor against stress, and perceived stress. The lack of study in the Indian context makes this study apparent. Further, it may also be important to establish what impact self-compassion has

The Influence of Self-Compassion Intervention on Stress and its Manifestations in Indians Working in the Service Sector During the COVID 19 Pandemic

on the nature of the manifestations of stress. It is important to determine what manifestations of stress is self-compassion most effective towards- physiological, psychological or emotional, behavioural, cognitive and/or social. Another important area of concern is in understanding the gender difference in the Indian context can help establish if there is in fact a difference between women, and men in the level of self-compassion in the Indian context. Establishing if there is a difference can help us further indicated the reason for the difference and also the target group for self-compassion programs or interventions, thus helping developers tailor make the interventions accordingly.

MATERIALS AND METHODS

Aim/Research problem

- To determine whether self-compassion has an influence on stress and its manifestation among working Indian adults.
- To determine whether gender differences exist in self-compassion among working Indian adults.

Objectives

- To measure stress levels and the manifestations of stress (physical, psychological or emotional, behavioural, cognitive and emotional) among working Indian men and woman, before intervention.
- To measure self-compassion among working Indian men and woman, before intervention.
- To carry out a self-compassion intervention and assess its effect on stress and its manifestation.
- To determine if there are any gender differences in the level of self-compassion.

Hypotheses

- H1- Self-Compassion Intervention will influence scores on stress.
- H2- Self-Compassion Intervention will influence scores on manifestations of stress.
- H3- There will be no significant difference in the level of self-compassion between individuals who identify as men and individuals who identify as women.

Research design

Experimental design, Intervention Study, pre post with control group.

Sample

This study obtained participants using purposive sampling technique, with a total sample size of 30 participants. The age range of this sample was fixed between 23-30 years, the ethnic composition is only Indian, their occupational status required them to be working in the service sector. It comprises of individuals identifying as men (n=12) and individuals identifying as women (n=18).

Selection criteria

Inclusion criteria

- Individuals who are between the age of 23-30 years.
- Those who identify as either man or woman only (binary only).
- Must be working.
- Must be an Indian.

The Influence of Self-Compassion Intervention on Stress and its Manifestations in Indians Working in the Service Sector During the COVID 19 Pandemic

Exclusion criteria

- Those who don't know English.
- Those who are undergoing therapy for some psychological disorders.
- Those who have lifestyle diseases or concerning medical conditions that cause stress.
- Those who abuse nicotine, alcohol and drugs.

Ethical consideration

- Informed consent will be obtained from each participant.
- The purpose of the research will be explained to each participant.
- Participation will be informed that they are not obligated to participate; that participation is voluntary, and they can choose to participate or choose not to without any consequences.
- Participants can choose to withdraw their responses and participation at any point of time.
- Participants personal information will be kept confidential.
- Participants will be given the contact details of the researcher as well as the research supervisor so that they can get in touch should they need any more clarifications.
- Participants will not be subject to physical and psychological harm.

Sampling procedure

The participants were contacted through social media platforms like LinkedIn, Instagram, WhatsApp and Facebook. The researcher circulated a post stating the requirements and procedure of the study, along with what it was about. All participants were then given the preliminary tools and then randomly divided into two groups- the intervention group (n=15) and the control group (n=15).

Tools proposed for the study

1. Socio demographic: This will be prepared by researcher to record socio demographic details like initials, age, gender, occupation/education, etc.
2. Self-Compassion scale (SCS): Neff, K. D. (2003). This is a 26-item scale is used to measure the level of selfcompassion in an individual. It consists of 6 subscales- Self-Kindness, Self-Judgment, Common Humanity, Isolation, Mindfulness and Over-identified, 3 which need to be reverse scored- self-judgement, Isolation and over-identification.
3. Depression, Anxiety, and Stress Scale (DASS): Lovibond & Lovibond (1995). This is a 42-item questionnaire that includes three selfreport scales. This test is designed to measure the negative emotional states of depression, anxiety and stress. Each sub scale has 14 items.
4. Common reaction to stress, a self-report: This is a checklist consisting of reactions to stress in different natures- physical, psychological or emotional, behavioural, cognitive and social manifestations. The items are adapted from a Training Manual for Mental Health and Human Service Workers in Major Disasters by the Center for Mental Health Services (DeWolfe, 2000). The items taken are only those that are relevant to general population. The items will be validated by experts for the use in this study.
5. Self-Compassion intervention: Consisting of activities taken from Neff's Mindful Self-Compassion Workbook like self-compassion journaling, mindfulness exercises, positive affirmation etc.

The Influence of Self-Compassion Intervention on Stress and its Manifestations in Indians Working in the Service Sector During the COVID 19 Pandemic

Data collection

Phase 1

Procedure. A survey questionnaire was created in a google form consisting of the socio demographic questionnaire, 2 scales and the 1 checklist. This form was sent out to all acquaintances who would request to further invite people they knew and fit the criteria. An attempt was made to recruit a homogenous sample (except for Gender). The purpose of the research was briefed to all participants in the mail, after which they chose to voluntarily become a part of the study by providing consent and filling the scales and checklist.

Phase 2

Procedure. Participants were then randomly divided into two groups, intervention group and control group. The intervention group was given the intervention activities to do every day for 7 consecutive days.

Intervention. The Intervention consists of activities to be done everyday for 7 days. These activities were taken from the Kristen Neff's Mindful Self-Compassion. The activities consisted of writing and journaling prompts and guided audio activities and meditation.

Phase 3

Procedure. All the participants were once again given the survey questionnaire containing the same scales.

Statistical analysis

Using SPSS 25.0 version

- Test for normality
- Test for homogeneity
- ANOVA for determining the differences in pre and post measures of stress (DASS) and measuring the difference between post test scores of the experimental and control group.
- ANOVA for determining the differences in pre and post measures of manifestation of stress and measuring the difference between post test scores of the experimental and control group.
- Mann-Whitney U test for gender differences in self-compassion scores.

Variables

Independent Variable. Self-Compassion Intervention

Dependent Variable. Scores of Stress Scale and Manifestation of Stress

RESULTS AND DISCUSSION

The aim of the study was to determine whether the self-compassion intervention will have an influence on score of stress and scores on manifestation of stress. The aim was also to determine if there are any gender differences in the level of self-compassion among men and women. This study proposed 3 hypotheses which are as follows:

- H1- Self-Compassion Intervention will influence scores on stress.
- H2- Self-Compassion Intervention will influence scores on manifestations of stress.
- H3- There will be no significant difference in the level of self-compassion between individuals who identify as men and individuals who identify as women.

The Influence of Self-Compassion Intervention on Stress and its Manifestations in Indians Working in the Service Sector During the COVID 19 Pandemic

The objective of this study was to examine the influence of a self-compassion intervention on the scores on stress experienced by people working in the service sector and the manifestation of stress among these individuals. The participants in this study worked in the service sector in India and were between the ages of 23 to 30. The sample comprised of individuals who identified as either man or woman from the urban Indian population. Data was collected by 50 participants, but the final sample size was 30, 15 as part of the intervention group and 15 as part of the control group.

The demographics of the sample are included below in the form of pie charts (figure 1 and 2).

Figure 1 Figure showing a pie chart for gender

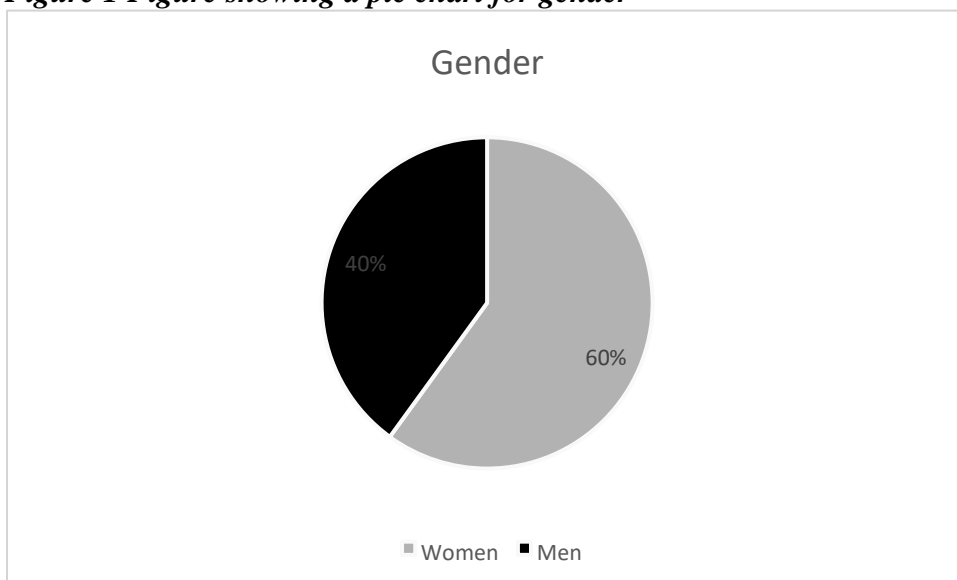
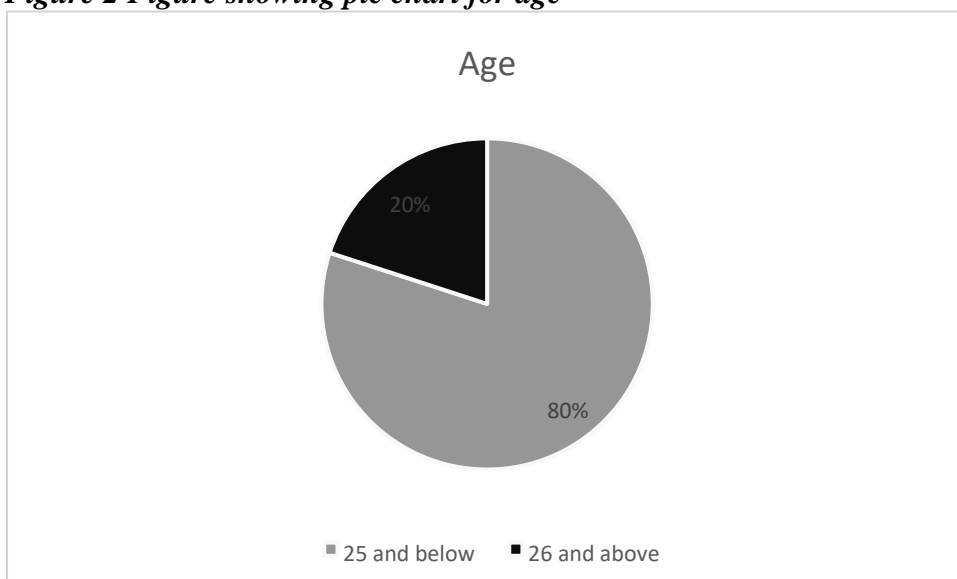


Figure 2 Figure showing pie chart for age



The data was further analysed using parametric and non-parametric tests on SPSS 25. The results are presented below.

The Influence of Self-Compassion Intervention on Stress and its Manifestations in Indians Working in the Service Sector During the COVID 19 Pandemic

Descriptive statistics

Table 1 Table showing the Descriptive Statistics of the Intervention Group for Stress Scores

N=30	Intervention Group	
	Pre	Post
Mean	21.466	15.600
Std Error of Mean	2.303	2.861
Std Deviation	8.919	11.083
Skewness	0.343	0.388
kurtosis	-0.106	-1.178

Table 2 Table showing the Descriptive Statistics of the Control Group for Stress Scores

N=30	Control Group	
	Pre	Post
Mean	17.000	15.466
Std Error of Mean	2.792	2.860
Std Deviation	10.817	11.067
Skewness	0.547	0.781
kurtosis	15.60	0.502

Table 3 Table showing the Descriptive Statistics of the Intervention Group for Manifestation of Stress Scores

N=30	Intervention Group	
	Pre-Intervention	Post-Intervention
Mean	30.466	18.400
Std Error of Mean	3.435	3.640
Std Deviation	13.303	14.101
Skewness	0.121	0.922
kurtosis	-0.903	0.632

Table 4 Table showing the Descriptive Statistics of the Control Group for Manifestation of Stress Scores

N=30	Control Group	
	Pre-Intervention	Post-Intervention
Mean	22.466	20.667
Std Error of Mean	3.450	4.172
Std Deviation	13.362	16.158
Skewness	.655	0.757
kurtosis	-0.903	-0.808

Table 5 Table showing the Descriptive Statistics of men and women on scores of Self-Compassion

	Self-Compassion	
	Women	Men
Mean	2.840	2.785
Std Error of Mean	0.126	0.164

The Influence of Self-Compassion Intervention on Stress and its Manifestations in Indians Working in the Service Sector During the COVID 19 Pandemic

Std Deviation	0.542	0.599
Skewness	0.393	0.172
kurtosis	0.110	-1.360
N	18	12

Test for normality

Table 6 Table showing Shapiro-Wilk test of Normality for Intervention Group on scores on Stress

	Intervention Group	
	Pre-Intervention	Post-Intervention
Shapiro-Wilk	0.983	0.921
df	15	15
Sig	0.987	0.201

P>0.05

Table 7 Table showing Shapiro-Wilk test of Normality for Control Group on scores on Stress

	Control Group	
	Pre-Intervention	Post-Intervention
Shapiro-Wilk	.953	.921
df	15	15
Sig	.559	.203

P>0.05

Table 8 Table showing Shapiro-Wilk test of Normality for the Intervention Group on scores on Manifestation of Stress

	Intervention Group	
	Pre-Intervention	Post-Intervention
Shapiro-Wilk	.954	.917
df	15	15
Sig	.584	.175

P>0.05

Table 9 Table showing Shapiro-Wilk test of Normality for the Control Group on scores on Manifestation of Stress

	Control Group	
	Pre-Intervention	Post-Intervention
Shapiro-Wilk	.950	.882
df	15	15
Sig	.531	.050

P>0.05

The Influence of Self-Compassion Intervention on Stress and its Manifestations in Indians Working in the Service Sector During the COVID 19 Pandemic

Table 10 Table showing Shapiro-Wilk test of Normality for scores on Self-Compassion

	Women	Men
Shapiro-Wilk Statistic	.982	.906
df	18	12
Sig.	.962	.187

P>0.05

Homogeneity of variance

Table 11 Table showing results for Box's test for Equality of Covariances for Scores on Stress

Box's M Statistic	1.829
F	0.562
Degree of Freedom	3
Sig.	0.640

P>0.05

Table 12 Table showing results for Box's test for Equality of Covariances for scores on Manifestation of Stress

Box's M Statistic	3.387
F	1.042
Degree of Freedom	3
Sig.	0.373

P>0.05

Table 13 Table showing results for Levene's test for Equality of Variances for scores on Self-Compassion

F	0.410
Sig.	0.537

P>0.05

Inferential statistics

Table 14 Table showing results of Repeated measures ANOVA for scores on pre and post Stress in the intervention and control group

Effect	F	Hypothesis df	Wilk's Lambda		Partial Eta Square	Observed Power
			Error df	Sig.		
Stress Scores	8.348*	1	28	.007	.230	.796
Stress Score*Group	2.863	1	28	.102	.093	.372

* P<0.05

Table 15 Table showing results of Repeated measures ANOVA for the scores on pre and post Manifestation of Stress in the intervention and control group

Effect	F	Hypothesis df	Wilk's Lambda		Partial Eta Square	Observed Power
			Error df	Sig.		
Manifestation of Stress Scores	9.331*	1	28	.005	.250	.839
Manifestation of Stress Score*Group	5.115*	1	28	.032	.154	.589

* P<0.05

The Influence of Self-Compassion Intervention on Stress and its Manifestations in Indians Working in the Service Sector During the COVID 19 Pandemic

Table 16 Table showing the results for Mann-Whitney U test for scores on Self-Compassion in men and women

Mann-Whitney U Statistic 93.000

Z -0.635 Sig. 0.525

P>0.05

With the increasing demands in our society and environment, there is a natural increase of stress and pressure. Now, during the COVID 19 pandemic, there is another factor of stress added to our daily life. Individuals working in the service sector like doctors, mental health professionals, service providers, have to constantly deal with not only their own stresses but also those of others, having to provide to others while keep their needs and wants secondary. Self-compassion is seen to be a good factor involved in the reduction of stress as indicated in the review of literature, an increase in self-compassion is shown to reduce the amount of stress. The manifestation of stress can be different from person to person, but it largely falls under 5 main domains, psychological, cognitive, physical, social and behavioural symptoms. This research aimed to determine whether a self-compassion intervention fostering self-compassion would reduce the stress of an individual and the manifestation of symptoms of stress.

Scores on stress were calculated before and after the administration of the 7-week long self-compassion intervention. An ANOVA test was performed to analyse the scores on stress pre and post the intervention among the intervention group and control group. A parametric test was used as the data did not violate the assumption of parametric tests, indicated in Table 6, 7 and 11. It was hypothesised that the self-compassion intervention will have an influence on the scores on stress. The Depression Anxiety Scale (DASS) was used to measure the scores on stress. The analysis indicated that the first hypothesis is supported or accepted. There was a statistically significant difference between the scores on stress, pre and post the intervention. The results indicated in Table 14 shows there is a statistically significant difference between pre and post intervention stress scores and between intervention and control group. Table 1 shows us that there was a significant decrease in the scores on stress after the self-compassion intervention in the intervention group, while table 2 shows us the difference in the control group was not significant. Therefore, we accept our hypothesis. The findings are corroborated with the findings of many other studies who have found similar results, example, Eriksson et al. (2018), Bluth and Eisenlohr-Moul (2017), Finlay-Jones (2016), Galla (2016), Perez-Blasco, et al. (2016), Arch et al. (2014), Neff and Germer (2013), etc. Much like the other studies, this study also showed that the self-compassion intervention improved the individual's self-compassion, thus possibly changing the way they view their stressors and the experience of certain events as stressful, thus reducing their overall stress (Neff, 2013).

While the analysis has indicated evidence for the first hypothesis that self-compassion intervention has an influence on stress, the sample size was relatively small, and generalization of these results are not recommended. For future study, considering a larger sample size would be appropriate and helpful in generalizing the data. The study may also be tried on a different population to see its effectiveness.

To test the second hypothesis, an ANOVA test was used to analyse the scores on the manifestation of stress pre and post the intervention among the intervention and control group. A parametric test was used as the scores did not violate the assumptions of parametric

The Influence of Self-Compassion Intervention on Stress and its Manifestations in Indians Working in the Service Sector During the COVID 19 Pandemic

tests as indicated by table 8, 9 and 12. It was hypothesised that the self-compassion intervention will have an influence on the manifestation of stress scores. The Common Stress Reaction Check List (CSRC) was used to measure the scores on the manifestation of stress. The analysis indicated that the second hypothesis is supported or accepted. Table 15 indicates that there was a statistically significant difference between the scores on manifestation of stress, pre and post the intervention and between. The results indicated that there was a significant decrease in the scores on manifestation of stress after the self-compassion intervention in the intervention group (Table 3), while the difference in the control group was not significant (Table 4). However, the results also indicated that there was a significant interaction effect between the scores and the groups (Table 15), thus a higher-level analysis needs to be done in order to explore that. A structural equation model is recommended for future further study in order to understand the interaction. The findings are corroborated with the finding of the study conducted by Arch, et al., 2014, which focused on the physical and psychological manifestation of stress. This study indicated that with an increase of self-compassion through intervention, there was a decrease in physical stress symptoms like increased heart rate, cortisol levels and stress, anxiety, depression, etc. and findings of study conducted by Breines et al., 2014 in regards to the manifestation of inflammation due to stress.

To test hypothesis 3, a Mann-Whitney U t-test was used to analyse the scores on self-compassion among men and women. While the data did not violate any assumptions of the parametric tests, as indicated by table 10 and 13, one of group had a sample of less than 15, and the two groups were not equal in number (Table 5) and thus, a non-parametric test needed to be used; men (N=12), women (N=18). The Self-Compassion Scale (SCS) by Neff, was used to measure scores on self-compassion. It was hypothesised that there will be no difference in the scores on self-compassion scale between those who identify as men and those who identify as women. The analysis indicated in table 16, that the third hypothesis is supported or accepted.

There was a no statistically significant difference between the scores on self-compassion between those who identified as men and those who identified as women. This finding contradicts many studies and assumptions made by other researchers and studies, example, Bluth et al., 2015, found that majority of the men fell under the high self-compassion group as compared to women; a meta-analysis conducted by Yarnell et al., 2015 indicating that self-compassion levels are slightly lower for women than men. However, the reason for our results could be because of the small sample size of 30 (Men=12, Women=18), and another reason for the disparity in results between this study and others, could be that the above-mentioned studies are all based on samples out of India and does not include the Indian population. The same analysis may need to be conducted on a larger sample to make more accurate conclusions. For further research it is recommended to recruit an equal number of men and women, and a larger sample size for a more accurate result.

Thus, we can see that the all three of the hypotheses have been accepted and supported, however, the second hypothesis requires further inquiry and higher-level analysis, a structural equation model analysis is recommended.

CONCLUSION

There is a pressing need to conduct more research on individuals working in the service sector and those who have relatively recently joined their workspace and the additional

The Influence of Self-Compassion Intervention on Stress and its Manifestations in Indians Working in the Service Sector During the COVID 19 Pandemic

stress experiences by having to work during the COVID 19 pandemic. The results obtained from the present study confirmed the 3 hypotheses stating that the self-compassion intervention would have an influence on scores on stress, that self-compassion intervention would have an influence on the scores on manifestation of stress and that there is no significant difference between gender on the scores on self-compassion.

Finding of this research may have implications in a counselling setting, as there is evidence that self-compassion activities can help in the reduction of stress, which is in line with past research studies as well. Therefore, these techniques can be used by therapist.

Limitations and recommendations

The findings of this study need to be viewed with a few limitations. The sample size in this study is relatively small (n=30) therefore, generalization to the entire population of Indians working in the service sector, may not be advised. Further research recommends the recruitment of a larger sample.

In order to record test measures, a self-report measure was used, this increases the chance of social desirability in the participants responses.

While around 50 participants were recruited, drop out was high, leaving the researcher with 30 participants. The reason for drop out was usually due to their lack of time or interest to spend on the intervention. Some reward or monetary benefits can be provided in further research to reduce drop-out rate.

For recommendations of future study, we suggest using an intervention for longer than 7 days, which can result in a larger difference in levels of stress, larger reduction of level of stress and manifestation of stress. Further future study on this topic can extend conducting it on other populations like people from different working sectors, or a different age group, while including the broader spectrum of gender.

REFERENCES

- Arch, J. J., Brown, K. W., Dean, D. J., Landy, L. N., Brown, K. D., & Laudenslager, M. L. (2014). Self-compassion training modulates alpha-amylase, heart rate variability, and subjective responses to social evaluative threat in women. *Psychoneuroendocrinology*, 42, 49-58. <https://doi.org/10.1016/j.psyneuen.2013.12.018>
- Bluth, K., Campo, R. A., Futch, W. S., & Gaylord, S. A. (2017). Age and gender differences in the associations of self-compassion and emotional well-being in a large adolescent sample. *Journal of Youth and Adolescence*, 46(4), 840-853. <https://doi.org/10.1007/s10964-016-0567-2>
- Bluth, K. & Eisenlohr-Moul, T.A. (2017). Response to a mindful self-compassion intervention in teens: A within-person association of mindfulness, self-compassion, and emotional wellbeing outcomes. *Journal of Adolescence*, 57, 108-118. <https://doi.org/10.1016/j.adolescence.2017.04.001>
- Bluth, K., Roberson, P.N.E., Gaylord, S.A., Faurot, K.R., Grewen, K.M., Arzon, S., & Girdler, S.S. (2016). Does self-compassion protect adolescents from stress?. *Journal of Child and Family Studies*, 25, 1098–1109. <https://doi.org/10.1007/s10826-015-0307-3>

The Influence of Self-Compassion Intervention on Stress and its Manifestations in Indians Working in the Service Sector During the COVID 19 Pandemic

- Breines, J.G., Thoma, M.V., Gianferante, D., Hanlin, L., Chen, X., & Rohleder, N. (2014). Selfcompassion as a predictor of interleukin-6 response to acute psychosocial stress. *Brain Behavior, and Immunity*, 37, 109-114. <https://doi.org/10.1016/j.bbi.2013.11.00>
- DeWolfe. (2000). Training manual for mental health and human service workers in major disasters. *Center for Mental Health Services*, Ed, 2. Doty (Ed.) *Oxford Handbook of Compassion Science*, Ch. 27. Oxford University Press.
- Eriksson, T., Germundsjö, L., Åström, E., & Rönnlund, M. (2018). Mindful self-compassion training reduces stress and burnout symptoms among practicing psychologists: A randomized controlled trial of a brief web-based intervention. *Frontiers in Psychology*, 9, 1-10. <https://doi.org/10.3389/fpsyg.2018.02340>
- Finlay-Jones, A. L., Rees, C. S., & Kane, R. T. (2015). Self-compassion, emotion regulation and stress among Australian psychologists: testing an emotion regulation model of selfcompassion using structural equation modelling. *PLoS ONE*, 10(7). <https://doi.org/10.1371/journal.pone.0133481>
- Finlay-Jones, A., Kane, R., & Rees, C. (2016). Self-compassion online: A pilot study of an internet-based self-compassion cultivation program for psychology trainees. *Journal of Clinical Psychology*, 73(7), 797-816. <https://doi.org/10.1002/jclp.22375>.
- Galla, B. M. (2016). Within-person changes in mindfulness and self-compassion predict enhanced emotional well-being in healthy, but stressed adolescents. *Journal of adolescence*, 49(1), 204-217. <https://doi.org/10.1016/j.adolescence.2016.03.016>
- Hormansyah, R. D., & Hidayah, N. (2018). Does self-compassion affect the stress on married women workers?. *Advances in Social Science, Education and Humanities Research (ASSEHR)*, (304), 106-108.
- Hu, Y., Wang, Y., Sun, Y., Garcia, J. A., & Purol, S. (2018). Diary study: The protective role of self-compassion on stress-related poor sleep quality. *Mindfulness*, 9, 1931–1940. <https://doi.org/10.1007/s12671-018-0939-7>
- Lovibond, S. H, & Lovibond, P. F. (1995). Manual for the depression anxiety stress scales. *Sydney Psychology Foundation Australia*.
- Luo, Y., Meng, R., Li, J., Liu, B., Cao, X., & Ge, W. (2019). Self-compassion may reduce anxiety and depression in nursing students: A pathway through perceived stress. *Public Health*, 174, 1-10. <https://doi.org/10.1016/j.puhe.2019.05.015>
- Neff, K. D. (2003). Development and validation of a scale to measure self-compassion. *Self and Identity*, 2, 223-250.
- Neff, K. D. (2003b). Self-compassion: An alternative conceptualization of a healthy attitude toward oneself. *Self and Identity*, 2, 85-102.
- Neff, K. D. (2004). Self-compassion and psychological well-being. *Constructivism in the Human Sciences*, 9(2), 27-37.
- Neff, K. D., & Germer, C. K. (2013). Randomized controlled trial of the mindful selfcompassion program. *Journal of Clinical Psychology*, 69(1), 28-44. <http://doi.org/10.1002/jclp.21923>
- Neff, K. D., & Germer, C. (2017). Self-Compassion and Psychological Wellbeing. In J. Perez-Blasco, J., Sales, A., Meléndez, J. C., & Mayordomo, T. (2016). The effects of mindfulness and self-compassion on improving the capacity to adapt to stress situations in elderly people living in the community. *Clinical Gerontologist*, 39(2), 90-103. <http://dx.doi.org/10.1080/07317115.2015.1120253>
- Pires, F.B.C., Lacerda, S.S., Balardin, J.B., Portes, B., Tobes, B., P.R., Barrichello, C.R.C., Jr, E.A., & Kozasa, E.H. (2018). Self-compassion is associated with less stress and depression and greater attention and brain response to affective stimuli in women managers. *BMC Women's Health*, 18, 195. <https://doi.org/10.1186/s12905-018-0685>

The Influence of Self-Compassion Intervention on Stress and its Manifestations in Indians Working in the Service Sector During the COVID 19 Pandemic

- Thomas, S.L., Thenmozhi, S. (2019). Psychological distress and self-compassion among young adults. *International Journal of Education and Psychological Research*, 8(2), 90-95. <http://ijepr.org/panels/admin/papers/506ij14.pdf>
- Warren, R., Smeets, E. & Neff, K. D. (2016). Self-criticism and self-compassion: Risk and resilience for psychopathology. *Current Psychiatry*, 15(12), 18-32.
- Williamson, J. (2019). Effects of a self-compassion break induction on self-reported stress, self-compassion, and depressed mood. *Psychological Reports*, 123(5), 1537-1556. <https://doi.org/10.1177/0033294119877817>
- Yarnell, L. M., Stafford, R. E., Neff, K. D., Reilly, E. D., Knox, M. C., & Mullarkey, M. (2015). Meta analysis of gender difference in self-compassion. *Self and Identity*, 14(5), 499-520. <https://doi.org/10.1080/15298868.2015.102996>

Acknowledgement

The author(s) appreciates all those who participated in the study and helped to facilitate the research process.

Conflict of Interest

The author(s) declared no conflict of interest.

How to cite this article: Kapur D. & Sandon S. (2022). The Influence of Self-Compassion Intervention on Stress and its Manifestations in Indians Working in the Service Sector During the COVID 19 Pandemic. *International Journal of Indian Psychology*, 10(3), 119-133. DIP: 18.01.011.20221003, DOI:10.25215/1003.011