

The Effectiveness of Self-Compassion Training on Social-Emotional Competence in Girl Students with Suicidal Ideation

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Abstract

Background: Suicidal ideation in female students is known as behaviors that the individual plans as a major public health problem worldwide. Therefore, the present study investigated the effectiveness of self-compassion training on the social-emotional competence of female high school students with suicidal ideation in Khorramabad, Iran.

Methods: The present study used an experimental pre-test-post-test design with a control group. The statistical population included all female high school students in Khorramabad, Iran in the academic year of 2023-2024. The statistical sample consisted of 30 people who were selected using convenience sampling and were randomly placed in experimental and control groups. The study participants completed standardized measures of Beck Suicide Scale Ideation (BSSI) and the Social-Emotional Competence Questionnaire (SECQ). The experimental group received 8, 90-minute sessions of self-compassion training, but the control group did not receive any training. The data obtained from the research were analyzed through the analysis of covariance using SPSS version 25.

Results: Based on the findings, the participants in the self-compassion training group showed significant improvement in socio-emotional competence as compared with the control group. The mean post-test scores for the self-awareness were 20.85 (SD=0.84), for social awareness: 20.44 (SD=1.94), self-management: 20.35 (SD=1.07), relationship management: 20.82 (SD=1.63), and responsible decision making: 20.62 (SD=1.16), which showed a significant difference as compared with the pre-test scores ($P=0.001$).

Conclusions: The study results showed that social-emotional competence improved after implementing self-compassion training sessions. This finding suggested that self-compassion training may be a promising training for psychological issues related to suicidal ideation in female students.

Keywords: Self-Compassion, Suicidal ideation, Mental competency

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1. Introduction

Adolescence is the age of transition from childhood to maturity; critical behavior patterns, which might affect a person throughout his/her life, are created in this period (1). Changes throughout this developmental stage might lead to specific issues. Adolescents who are unable to effectively navigate crises and transformative challenges will suffer from psychological distress and a major disruption in their everyday routine, as well as in their cognitive and social emotional functioning, which will lead to a disordered personality (2). Suicide is one of the harms that is closely related to adolescent-related disorders (3). Suicide is the third leading cause of death worldwide for adults and adolescents, making it a significant public health concern (4). According to World Health

Organization, 2% of individuals seriously consider suicide at some point in their lives, 5% actually do so, and around one million people worldwide pass away from suicide each year (5). Previous research indicated that the rates of suicidal thought, planning, and suicide among students are 22.3%, 6.1%, and 3.2%, respectively (6). According to research done in Iran, between 1.8 and 42% of students had suicide thoughts and attempts (7). They start with suicidal ideation and eventually lead to suicide. These behaviors are self-initiated; that is, the person himself plans and implements it, and its main feature is intentionality (8).

The important thing about suicide is its frequency in schools and among students (9, 10). On the other hand, although the suicide rate of boys in Iran is much higher than that of girls, in

Lorestan Province, Iran, the suicide rate of girls is almost three times than that of boys, with more violent methods as compared with boys (11). Study found early intervention and follow-up to be effective in reducing suicidal ideation and behavior (12). Students are one of the high-risk groups due to hopelessness and suicidal thoughts. Investigating the circumstances and contributing factors to suicidal ideation in any culture is vital because early diagnosis of suicidal ideation is crucial, especially because the majority of suicide cases result in death for those who try suicide for the first time. The social-emotional competency of individuals is one of the most effective elements in lowering suicide ideas and attempts (13).

Social-emotional competence is a psychological characteristic that learners bring with them to the educational environment (14). It is also an important factor that decreases in people with suicidal ideation (15). Socio-emotional competence is a set of psychological and emotional knowledge about oneself and others and the ability to use appropriate behavioral and communication strategies in social situations that allow people to have optimal behavioral and emotional performance in interpersonal relationships. Accordingly, some cognitive skills, such as problem-solving and impulse control, are equal to emotional competence. Social competence also includes the important psychological state of a person, such as feeling important, self-efficacy, influence, and decision-making ability (16). The five primary areas of capacities that make up the idea of social-emotional competence are self-awareness, social awareness, self-management, responsible decision-making, and relationship management. Students' social-emotional skills are the missing component that is crucial to their success in life and psychological well-being. For instance, Solms and colleagues (17) showed that social skills in adolescents play a mediating role in suicidal ideation. Also, Mitsiaki and co-workers showed that social-emotional competence in students who have high-risk behaviors such as self-harm or suicidal tendencies is at a low level compared with others (3).

One of the forms of support for people with suicidal ideation is emotional support, which means treating them with compassion and kindness and comforting them (18, 19). One of the interventions that control or reduce suicidal ideation in people who tend to commit suicide and in other words have high suicidal ideation is the intervention

based on self-compassion or self-compassion (20), so that this intervention can present basic solutions while increasing the level of awareness and acceptance in girls with suicidal ideation can also control or reduce the amount of these thoughts (21). Intervention based on self-compassion tries to emphasize the emotional support of people, in the sense that people with suicidal ideation are helped to give themselves emotional support and deal with themselves with compassion, and through this compassion, negative thoughts that causes them to end their lives (19). Self-compassion started with the hypothesis that all human beings are valuable and respectable regardless of their progress, physical characteristics, and social status (22). The three primary components of self-compassion are mindfulness, which is tolerating unpleasant emotions and being in the present moment; self-kindness, which is understanding oneself rather than criticizing oneself; and a sense of shared humanity, which is viewing one's experience as a part of a greater human experience rather than as an isolated one (23). Self-compassion is teaching people to have a positive attitude towards themselves and to communicate with themselves in such a way that they can understand themselves and love themselves instead of judging them (23). Self-compassion has a beneficial impact on lowering suicidal thoughts and enhancing mental health and wellbeing (24). Also, another previous research (25) showed that self-compassion is related to self-awareness and acts as a shield against negative emotions. Self-compassion is effective in various variables, including self-awareness in people with suicidal ideation (1). On the other hand, teaching self-compassion by increasing kindness and self-love, self-awareness and self-acceptance can play a significant role in helping girl students with suicidal ideation (21). Self-compassion can reduce distressing ruminations and negative strategies and provide the basis for good performance (22). Accordingly, research showed that self-compassion can lead to positive behaviors and thoughts by increasing social-emotional competence (24).

Adolescents play an important role in today's health and society's future, and investing in this age group and improving their health and quality of life is one of the most important strategies for achieving society's goals (5). Therefore, it is important to identify and eliminate factors that endanger adolescents' health and quality of life. Psychological interventions reduce suicidal

ideation, which are one of the threats to adolescent health (26). Given that no single factor has been proposed for suicidal ideation and attempts in adolescents, it is necessary to identify effective factors to help people with suicidal ideation. According to previous research, social-emotional competence is significantly reduced in people with suicidal ideation. Therefore, by identifying factors affecting social-emotional competence, suicidal ideation in adolescents can be controlled (26). The present study aimed to investigate the question of whether self-compassion training, as a factor affecting social-emotional competence, can reduce suicidal ideation in girl high school students in Khorramabad, Iran.

2. Methods

This experimental study was conducted with a pre-test, post-test design with two experimental and control groups. The statistical population included all female high school students with suicidal thoughts in the 2023-2024 academic year. A total number of 30 volunteers were selected using the conditional sampling method and in accordance with the inclusion and exclusion criteria (27). Volunteers were randomly assigned to an experimental group (15 people) and a control group (15 people) using a random number table. A random numbers table was used to generate a sequence of numbers, which were then assigned to each volunteer. Participants with odd numbers were placed in the experimental group, while those with even numbers were assigned to the control group. The sample size was determined based on a previous study by Mousavipour and Bavi (28), which provided estimates of the mean and standard deviation social-emotional competence in the posttest phase. The self-compassion group was expected to have a mean score of 103.08 (SD=6.64), while the control group was expected to have a mean score of 77.75 (SD=4.72). To ensure a statistical power of 0.80, a significance level of 0.05, and to account for a 10% attrition rate, the calculated sample size was deemed sufficient to detect a significant difference between the two groups. The participants signed informed consent forms and completed the social-emotional competence Scale at baseline under similar conditions. The inclusion criteria were: 1) 15 to 18 years of age; 2) obtaining a score lower than the average in the social-emotional competence questionnaire; 3) declaring the student's readiness and the consent

of the student's parents to participate in the study through written consent; 4) having physical and mental health and 5) not participating in similar research. The exclusion criteria were: 1) the absence of more than two sessions and 2) unwillingness to continue cooperation.

2.1. Instruments

2.1.1. Beck Suicide Scale Ideation (BSSI): This scale was developed in 1979 by Beck (29). BSSI is a 19-question self-assessment tool prepared to reveal and measure the intensity of thoughts, behaviors, and planning to commit suicide during the past week. In this scale, scoring is by the Likert method and the range of scores for each question is (0-2). The total score of a person on this scale is in the range of (0-38). On this scale, the score (0-5) indicates the presence of suicidal ideation, the score (6-19) shows the readiness to commit suicide, and the score (20-38) indicates the intention to commit suicide (29). The validity of the tool in the original version has been checked and confirmed using factor analysis, and its reliability value based on Cronbach's alpha coefficient equal to 0.79 for the whole tool has been reported. In the Persian version of this tool in Iran, using Cronbach's alpha method, coefficients of 0.87 to 0.97 were obtained, and the reliability of the scale was obtained using the test-retest method to be 0.54 (29). Additionally, the authors (29) found that BSSI demonstrated strong content validity, with a CVR of 0.89 and a CVI of 0.90. In the present study, the reliability of the tool was reported with Cronbach's alpha to be 0.85.

2.1.2. Social-Emotional Competence Questionnaire (SECQ): The Social-Emotional Competence Questionnaire (SECQ) was prepared by Zhou and Ji (26) and has 25 items and 5 subscales including self-awareness, social awareness, self-management, relationship management, and responsible decision-making, which uses a 6-option Likert scale. It is graded from 1: completely disagree to 6: agree. The creators of this scale checked its validity using confirmatory factor analysis and reported it as favorable, medium, and high to identify students with social-emotional competence. This scale was investigated for the first time in Iran by ImamGholivand and colleagues (30) The validity of the scale was examined and confirmed using confirmatory factor analysis, and the reliability of the subscales was estimated between 0.78 and 0.89 using Cronbach's alpha coefficient. ImamGholivand

and colleagues also reported that the level of reliability is acceptable (30). Furthermore, in their research (30), they reported a CVR of 0.92 and a CVI of 0.84 for SECQ. In the present study, Cronbach's alpha coefficient for the subscales of self-awareness, social awareness, self-management, relationship management, and responsible decision-making were 0.83, 0.85, 0.79, and 0.77, and 0.84, respectively. Cronbach's alpha coefficient for the whole tool was also estimated to be 0.82.

2.2. Implementation Method

2.2.1. Self-compassion Training Sessions:

After selecting the participants based on ethical principles, information was provided to them about the objectives of the study. The participants were assured that they have the right to withdraw from the training at any stage, and the study results were published anonymously. Also, written consent was obtained from the participants. Questionnaires were completed by both groups first, and then for the experimental group; self-compassion training by Gilbert (31) was implemented for 8 sessions of 90 minutes (Table 1). The group did not receive training certificates. At the end of the training sessions, the social-emotional competence questionnaire was completed by the participants as a post-test.

2.3. Data Analysis

The data from pre-test and post-test were analyzed by SPSS version 25. The analysis of

covariance (ANCOVA) was used to assess group differences in post-test scores, controlling for baseline levels. Before conducting parametric tests, data normality for suicide ideation and social-emotional competence in female high school students was checked using the Shapiro-Wilk test. Levene's test was done to confirm variance homogeneity among groups.

3. Results

The statistical population included all female high school students with suicidal thoughts. Table 2 shows the mean age, number of parents with university education, and educational level of students in different groups. The results of the comparison of the experimental and control groups showed that there was no significant difference between the age of the participants in the two groups ($P=0.254$). There was also no significant difference between the parents with university education in the two groups ($P=0.359$). There was also no significant difference between the participants in the two groups in terms of level of education ($P=0.398$).

As can be seen in Table 3, the participants of the experimental and control groups in the pre-test of the components of social-emotional competence have a similar average level ($P=0.207$), but in the post-test of the components of social-emotional competence, the participants of the Self-compassion training group had a higher average level compared with the control group participants ($P=0.008$).

Table 1: Paul Gilbert's self-compassion training sessions

Sessions	Purpose	Content	Homework
1	Introducing, acquainting, explaining the structure of education and commitment	Evaluating, describing and explaining the conceptualization of cognitive self-compassion education and stating the purpose of education.	Recording learned points in the notebook and reviewing them
2	Knowing the concept of empathy and understanding one's feelings	Teaching empathy and understanding emotions	Practicing and reviewing the learned materials
3	Understanding the concept of compassion and empathy	Teaching compassion and empathy and increasing care and self-help	Practicing and reviewing learned materials
4	Accepting fallibility and understanding the realities of life	Learning to accept mistakes and forgive oneself	Practicing in accepting the realities of life such as fallibility
5	Existence of different challenges in life and accepting them	Learning to accept changes and the ability to endure difficult and challenging conditions and facing different challenges	Knowing the challenges of your life and trying to accept them and find a solution to solve them
6	Strengthening your sense of worth	Training people in order to create valuable feelings and deal appropriately and efficiently with the environment	Practicing appropriate behavior in the environment
7	Responsibility, self-compassion and critical thinking	Teaching responsibility, self-compassion, self-critical thinking	Practicing accountability
8	Reviewing the learned material	Reviewing and practicing	Acting on what has been learned

Table 2: Demographic characteristics of the participants

Group	Mean±SD age (years)	Parents with university education	Educational level		
			10	11	12
Self-Compassion Training	0.36±17.15	6	4	7	4
Control	0.44±16.85	5	5	6	4
P(between-group)	0.254	0.359	0.398		

SD: Standard Deviation

Table 3: Descriptive statistics of social-emotional competence in female students with suicidal ideation

Variables	Group	Self-Compassion Training		Control		P(between-group)
		Mean	SD	Mean	SD	
Self-awareness	Pre-test	13.83	0.87	14.04	0.71	0.089
	Post-test	20.85	0.84	14.60	0.89	0.002
	P (within-group)	0.001		0.527		
Social awareness	Pre-test	14.47	0.98	14.80	1.30	0.152
	Post-test	20.44	1.94	16	0.70	0.009
	P(within-group)	0.001		0.154		
Self-management	Pre-test	14.62	0.89	13.84	0.84	0.107
	Post-test	20.35	1.07	15.10	1.41	0.004
	P(within-group)	0.001		0.138		
Relationship management	Pre-test	14.25	1.48	13.98	0.76	0.074
	Post-test	20.82	1.63	15.43	1.18	0.004
	P(within-group)	0.001		0.146		
Responsible decision making	Pre-test	14.64	1.17	14.44	1.18	0.207
	Post-test	20.62	1.16	16.62	0.54	0.008
	P(within-group)	0.001		0.274		

SD: Standard Deviation

Actually, participants in the self-compassion training group demonstrated significant improvements in social-emotional competence compared with the control group. The post-test data in Table 3 for the self-compassion training group showed significantly higher mean scores on measures of Self-awareness ($P=0.002$), Social awareness ($P=0.009$), Self-management ($P=0.004$), Relationship management ($P=0.004$) and Responsible decision-making ($P=0.008$) compared with the control group.

4. Discussion

The present study aimed to investigate the effectiveness of self-compassion training on the social-emotional competence of high school girl students with suicidal ideation. The findings of this study showed that self-compassion training effectively increased the total score of social-emotional competence. In addition, the results of the social-emotional competence components showed that self-compassion training could effectively increase self-awareness, social awareness, self-management, relationship management, and responsible decision-

making in female high school students with suicidal ideation. The findings of this study were consistent with previous studies (1, 14, 16, 19, 24).

This conclusion may be explained by stating that students experience difficulties with the components of socio-emotional competence such as self-awareness, self-management, social awareness, relationship management, and responsible decision-making while they are experiencing stress, anxiety, or suicidal thoughts (31). In these cases, self-compassion can increase socio-emotional competence in students by creating a positive attitude towards themselves. Also, teaching self-compassion can help female students to be aware of themselves and society, manage their feelings, emotions, thoughts, and relationships, and make responsible decisions; this will naturally increase socio-emotional competence and ultimately lead to greater success in educational and social environments (24), which in turn can reduce suicidal ideation in female students. Another explanation for this finding was that self-compassion training, which includes self-empathy, understanding

and recognizing emotions, accepting mistakes and forgiving oneself, the ability to tolerate challenging situations, and creating a sense of self-worth, plays an important role in increasing social-emotional competence (13). In fact, in this method, the participants learn to be kind to themselves and, based on kindness to themselves, forgive their mistakes and be compassionate towards themselves. The presence of these positive feelings reduces negative thoughts because people's attitude towards themselves determines the way they treat themselves; self-compassion, which was part of the training, taught a way of behaving towards themselves that enables the individual to have valuable feelings towards themselves and to consciously respond to negative and unpleasant thoughts such as suicidal ideation by maintaining their own worth and responsibility (21).

4.1. Limitations

There were some limitations in this study. The results were limited to female high school students, and caution should be exercised in generalizing the results to other age groups. The study also relied solely on self-reported data, which are subject to bias and error.

5. Conclusions

The present study demonstrated the effectiveness of self-compassion training in increasing the socio-emotional competencies of female students with suicidal ideation. The results of the study were associated with a significant increase in socio-emotional competencies scores from pre-test to post-test, indicating a positive and immediate effect of the educational intervention. The educational intervention also increased scores on all socio-emotional competency components, namely self-awareness, social awareness, self-management, relationship management, and responsible decision-making, from pre-test to post-test. These findings contributed to the growing body of research supporting the use of self-compassion training as a useful intervention for adolescents struggling with suicidal ideation.

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Authors' Contribution

Mohammad Abbasi: Substantial contributions to the design and conception of the study; reviewing the work critically for important intellectual content. Mahboobeh Parvardeh: Substantial contributions to the design and conception of the study; analysis and interpretation of data for the work; drafting the work and reviewing it critically for important intellectual content. Ezatollah Ghadampour: Substantial contributions to the design and conception of the study; reviewing the work critically for important intellectual content. All authors have read and approved the final manuscript and agree to be accountable for all aspects of the work, such as the questions related to the accuracy or integrity of any part of the work.

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Ethical Approval

This research was approved by the ethics committee of the Faculty of Psychology of Lorestan University with the code IR.LUMS.REC.1403.128. Also, written informed consent was obtained from the participants.

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