




Perceptions of Self-compassion in Undergraduate Women: A Photo Elicitation Study

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Abstract:

Introduction: Self-compassion is broadly defined by researchers as compassion directed toward oneself, encompassing self-love, common humanity, and mindfulness. However, beyond specific groups such as adolescents, individuals with anxiety and depression, and female exercisers, how the general public defines and perceives self-compassion remains underexplored. It is important to understand how other individuals define and experience self-compassion so that interventions targeted toward increasing self-compassion are meaningful for participants.

Objective: The purpose of the present study was to examine perceptions of self-compassion among female university students aged 18 to 24.

Methods: Semi-structured interviews using photo-elicitation were conducted with nine women. Interviews were transcribed verbatim and analysed using reflective thematic analysis.

Results: Participants had difficulty defining self-compassion. Three themes were generated from the data, including: 1) describing self-compassion as tricky, 2) understanding the self in self-compassion, and 3) self-compassion as a tool.

Discussion: Participants had difficulty defining self-compassion and often referred to examples of compassion directed towards and received from others to describe the concept. Participants described ways in which self-compassion was adaptive and how practicing self-compassion helped them overcome personal challenges. These findings highlight the importance of psychoeducation to continue to deconstruct misconceptions about self-compassion, and to address conceptual gaps between how self-compassion is defined in the literature and how it is understood by general populations.

Conclusion: Given the difficulty of defining self-compassion, researchers should focus on knowledge translation strategies to help foster self-compassion in young women.

Keywords: Self-compassion, Mindfulness, Women, Photo-elicitation, Semi-structured interview, Undergraduate women.

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1. INTRODUCTION

Conceptually derived from the theoretical pillars of Buddhism and different from self-esteem, self-compassion is a multidimensional construct defined as compassion directed towards the self and involves noticing and understanding one's own suffering, disappointments, and struggles [1, 2]. It involves three dynamic components that are distinct but also overlap: self-kindness (rather than self-judgment), recognition of common humanity (*versus* isolation), and mindfulness (as opposed to over-identification) [1, 2]. Self-compassion exists on a bipolar continuum representing how people react in times of suffering, ranging from unself-compassionate to self-compassionate reactions, with a neutral point in the middle [3].

Self-compassion has been linked to many positive psychological outcomes, including cognitive and psychological well-being and positive mental health outcomes [4, 5]. It also has links to psychological strengths, life satisfaction and social connectedness, emotional intelligence, and happiness [2, 6-9]. Self-compassion interventions have also been successful in improving a variety of psychosocial outcomes, including eating behaviours, rumination, stress, depression, mindfulness, self-criticism, and anxiety [10].

Although self-compassion is well-defined in the academic literature [1, 2], how it is perceived by the broader public is less well understood. As noted by Mosewich, the language around self-compassion can be confusing and abstract, making it difficult to understand [11]. Experiences of self-compassion have been identified and defined qualitatively in specific groups, including individuals with depression and anxiety, adolescents, young adult female exercisers (specifically related to body self-compassion), refugees, and Iranian individuals living with multiple sclerosis [12-16].

However, participants' understanding and experiences have deviated from theoretical understandings of self-compassion [11]. For example, regarding the three components comprising self-compassion (self-kindness, common humanity, and mindfulness), participants in only one study mentioned all three components [14]. Individuals with depression and anxiety described only self-kindness [12], while adolescents did not describe any of the components [13]. Across studies, participants have expressed difficulty in understanding and defining self-compassion [12-15]. Thus, across several specific populations, there seems to be a common challenge in defining self-compassion, perhaps due to its intangible nature. Alternatively, individuals with clinical diagnoses (*i.e.*, anxiety, post-traumatic stress disorder) tend to have lower self-compassion compared to the general population [17]; for these groups, it may be difficult to experience self-compassion and thus define it. Further, in several studies, participants indicated that they were not sure if they had actually experienced self-compassion, which would also make it more difficult to recognize and describe self-compassion [14]. As noted by Mosewich, a lack of experience or awareness of self-compassion makes it difficult to have conversations about it [11].

To date, no studies have specifically investigated what self-compassion means to an undergraduate population of women, particularly beyond the context of exercisers and body-related conceptions of self-compassion. Women, in gen-

eral, report lower levels of self-compassion than men [18]. Given the links between self-compassion and mental health and well-being, it is particularly important to foster self-compassion in young women and to understand how it is conceptualized. If there is a discrepancy between researchers and specific groups, it may be important to provide education so that effective and appropriate intervention strategies can be developed. Therefore, the purpose of this study was to investigate perceptions of self-compassion in a sample of undergraduate women *via* a qualitative approach using photo-elicitation and semi-structured interviews. We aimed to examine how self-compassion is perceived in a general population of young women.

2. METHODS

2.1. Study Design

Given the naturalistic approach to understanding self-compassion, qualitative description methodology was used [19]. The study of phenomena in their natural context is central to qualitative description [19]. Qualitative description is especially useful for gaining insights from participants on poorly understood concepts [20]. Given that self-compassion is a construct that was not well understood in previous samples qualitative description was considered appropriate [11]. In addition, qualitative description offers flexibility, allowing researchers to adopt multiple data collection techniques to collect rich data [21].

In addition to qualitative description, we used photo elicitation. Photo elicitation involves using images or photographs as a critical part of the interview process, as images can help deepen the responses provided by the participants and is a useful way to investigate how people think about and construct their social worlds [22, 23]. Photo-elicitation can include the use of researcher-selected images or participant-selected images [24]. In this study, photos and images were chosen by participants and integrated into the interviews. Having participants self-select photos gives them agency and can help them make sense of their identities and everyday life [25, 26].

Furthermore, researchers have noted that incorporating photos into interviews with young people enables participants to express aspects of themselves visually, rather than relying solely on words. This approach can elicit descriptions that might otherwise be omitted, particularly those that are difficult to articulate or discuss [27].

2.2. Participants

Participants were recruited for a study investigating the meaning of self-compassion in young adult women using posters placed around the university campus and word of mouth. Interested individuals contacted the research team *via* email; they were then sent a copy of the informed consent outlining study details and inclusion criteria *via* email and given the opportunity to ask questions. Inclusion criteria required participants to be students at the university, between 18 - 25 years of age, and identify as women. This age range was chosen as we were interested in examining emerging adults who face unique experiences as they transition into adulthood [28]. Data collection and recruitment stopped when sufficient data and quotes were ob-

tained to answer the research question. The current sample size is comparable to previous studies using photo-elicitation [26].

2.3. Procedures

The project received clearance from the Brock university’s research ethics board (#17-218). Interested individuals who met the eligibility criteria were invited to meet with the second author for their initial visit. These initial meetings were 20-30 minutes long and took place in a private lab on campus. At this meeting, participants provided informed consent, completed a self-reported demographic questionnaire, and received instructions to take or select up to 10 photographs or images that they felt represented self-compassion within a two-week period. The researcher purposely did not give detailed instructions or examples, allowing the participant to choose their images without any bias. After 2 weeks, the researcher followed up with the participant via email and scheduled an interview date. Participants emailed photos to the research team in advance, and they were printed with two photos per page for the interview.

Semi-structured interviews with participants were conducted March through August 2018. They were conducted during the second visit and took place in the same lab on campus. All interviews were conducted by the second author to ensure consistency. She was a 23-year-old master’s student at the time of data collection. Interviews were semi-structured, with the focus on the photos/image(s) provided by the participant as well as questions about self-compassion in general. Interviews lasted 25-45 minutes and were audio recorded for transcription purposes. The first author transcribed all interviews verbatim for analysis. Pseudonyms were assigned to all participants to maintain confidentiality. Participants provided specific consent for photos to be included, and all included photos were de-identified by blocking out people’s faces and/or any identifying information. For copyright reasons, only photos that were taken by participants are included in this manuscript.

2.4. Materials

Participants self-reported their age, gender, and ethnicity/race. This information was obtained to describe the sample.

2.4.1. Interview Guide

A semi-structured interview guide was created by the research team with theoretically informed questions generated. Participants were first asked to define self-compassion generally. They were then asked to select the image that best represented self-compassion and specifically discuss how self-compassion was depicted in the image (e.g., “What makes the image self-compassionate?”). This process continued with subsequent images. Participants were also asked specifically about the nature of the images and/or the quotes depicted in their photos and why they were selected. Given challenges of discussion around self-compassion, participants were asked to describe what it meant to be compassionate to others in addition to themselves (e.g., “Can you tell me about a time you were compassionate to someone else?”) as a way to make participants feel more comfortable and foster conversation (see

Table 1 for all interview questions). The second author piloted the interview guide with the first author and reworded questions based on discussions.

Table 1. Interview guide.

Interview Guide
What does self-compassion mean to you?
What comes to your mind when you think about self-compassion?
What do you picture when you think of self-compassion?
Out of the images you have brought, which one do you think best represents self-compassion?
What makes the image self-compassionate?
What part(s) of the image do you think shows self-compassion? What makes you say that?
*Repeat these questions with the next 2-3 images
How do the other photos or images you provided compare to these ones?
Are there similarities between all of them that represent self-compassion?
Would you point out any of the photos/images you brought as being the least self-compassionate?
If any of the images contain a quote:
If you removed the quote, do you think the picture would still represent self-compassion?
Would the quote alone be self-compassionate?
If only a picture:
Is there anything you would change about this picture to make it self-compassionate?
If a picture of themselves:
What led you to photograph yourself?
What do you think an image that does not represent self-compassion would look like?
How would it be different than the pictures that you have brought?
Do you see images like this (non-self-compassionate) often? (if yes, where do you see them)
Do you think self-compassion can accurately be captured by images?
Why or why not?
Can you tell me about a time you’ve been compassionate to:
Yourself
Someone else
Is there a reason these images you chose were:
Mostly from the internet/not your own
Photos of you

2.5. Data Analysis

The first author led the data analysis. She was a 26-year-old female Doctoral student with previous experience conducting qualitative research at the time of data analysis. As a pragmatist, she chose to analyse the data using Braun and Clarke’s reflexive thematic analysis, as it is theoretically flexible. Throughout the analysis process, she reflected on her own experiences and difficulties acting self-compassionately (e.g., engaging in compassion-based therapy [29, 30]. Her experiences shaped her perceptions of participants’ responses and her understanding of self-compassion.

Reflective thematic analysis was used to analyse the data [29, 31]. This six-phase non-linear process includes data familiarization, generating initial codes, searching for themes, reviewing themes, defining and naming themes, and producing the report [31]. The first two authors initially read

and reread each transcript multiple times to familiarize themselves with the data. Next, they each independently performed inductive coding of the first interview, writing codes in the margins of the transcripts. Codes were collated into a single Microsoft Word document. Next, they met with the third author to discuss their initial codes and resolve any differences through consensus. Then, the first two authors independently coded the remaining interview transcripts. They met weekly to review the codes and collaboratively generate potential themes and subthemes [32]. The three authors next met to discuss the themes. The third author acted as a critical friend and assisted by challenging definitions of themes, ensuring themes were distinct, and ensuring data extracts were consistent with relevant themes. Where there was disagreement, discussion occurred until a consensus was reached [33]. The first author revised the themes and subthemes by rearranging codes based on these discussions and with further discussion with the third author. Consistent with the quality practice of reflexive thematic analysis, themes, and subthemes were developed based on unique and meaningful data related to the research question, as opposed to the mere frequency of each code [29]. The conceptualization and definitions of themes were further developed throughout the writing of the manuscript.

The first and second authors kept detailed field notes after the interviews while familiarizing themselves with the data. Rigor was established *via* credibility (building rapport, member reflections), confirmability and dependability (keeping a reflexive journal and audit trail, providing a description of participant demographics), and transferability (using rich descriptions and participant quotes). These strategies aligned with reflexive thematic analysis and modern approaches to address the rigour of qualitative work [29, 33].

3. RESULTS

Participants were university students who were women ($n = 9$) aged 18-24 years ($M_{age} = 22.5$, $SD = 1.95$). Participants were diverse in terms of year in school, 1st year ($n = 2$), 2nd year ($n = 3$), 3rd year ($n = 1$), 4th year ($n = 2$), 5th year ($n = 1$), as well as in their majors and ethnicity/race. Specially regarding self-reported ethnicity and race (assessed *via* an open-ended question), participants self-identified as White ($n = 3$), African ($n = 1$), Jamaican ($n = 1$), Asian ($n = 1$), Eastern Mediterranean ($n = 1$), Caucasian and Asian ($n = 1$), and Caucasian/Italian ($n = 1$). Participants described their own perceptions of self-compassion by discussing the photos that they brought in. Three main themes were generated from participant interviews, including 1) describing self-compassion as tricky, 2) the self of self-compassion, and 3) self-compassion as a tool.

3.1. Theme 1: Describing Self-compassion is Tricky

This theme describes the struggles that participants had when defining and explaining self-compassion and consists of two subthemes: a) difficult to explain and unique to everyone, and b) representations of self-compassion.

3.1.1. Difficult to Explain and Unique to Everyone

One participant explicitly expressed that self-compassion is a concept that is difficult to define. Most participants struggled to understand what self-compassion truly meant

and primarily spoke about being compassionate toward or receiving compassion from others when attempting to define it. Aliesha described how challenging it was for her to define, stating:

Because like I feel like you have to - kind of understand yourself first so if you umm [pause] - I feel like if you umm are selfless for the most part or you don't have to be selfless all the time, but if you are selfless enough to umm [pause] I don't know [pause] this is really hard.

Participants also expressed difficulty finding photos to represent self-compassion, even after describing the photos that they brought in. For example, when asked if she would change any of the photos that she brought in, Kelly still expressed difficulty in thinking of what self-compassion is as she said: "I don't know it's kind of hard, it's still hard to think of what self-compassion is...". Megan was the only participant who mentioned that she did not struggle to find photos or define self-compassion. She reflected on the fact that her interest in self-compassion literature and research may have made it easier for her compared to other participants. All participants also agreed that self-compassion cannot be fully defined by pictures and images.

Participants also noted that their ideas of self-compassion differed significantly from others' conceptualizations, making it a very individualized experience. This likely contributed to the difficulty in providing a global definition. Participants explained that activities that one person might consider to be self-compassionate may not be perceived the same way by another. The idea of self-compassion as an individualized construct was represented by several participants when they talked about the photos that they brought in. Specifically, Lauren said:

I guess because self-compassion is different for everybody and photos have different meanings for everybody, like I'm sure if I showed this bowl of food to somebody, they would be like oh its food, they don't think oh self-compassion, or like treating yourself well or...

The idea of self-compassion as an individualized concept was further illustrated by the diverse range of photos participants chose to bring. For example, several participants mentioned that they searched online to find images representing self-compassion, yet no two participants brought the same photo.

3.1.2. Representations of Self-compassion

When describing the photos that they brought in to represent self-compassion, participants often used examples of receiving compassion from others. Reflecting on love and kindness received from others (family and friends) helped participants conceptualize what self-compassion meant to them. It was not necessarily the visible aspects of the photos, but rather the memories and symbolism they evoked that represented self-compassion for the participants.

This was exemplified by Natalie, who discussed how a picture eating ice cream with her friends represented self-compassion, as she said:

Uhm, and that kind of is like a feeling that comes back when I look at that photo and just remember sitting there with two of my best friends and - I just honestly wasn't worried about anything else in that moment, so I think

people - there's certain people that you can be with, where you're not worrying about other stressors - you know. That is part of taking care of yourself is surrounding yourself with positively and people that you love, and they love you.

Demonstrations of compassion by others, specifically family and friends, helped participants conceptualize what self-compassion meant to them. For example, Kandy's family, specifically her parents, had a great impact on her realization that everything was going to be okay. She discussed that even though certain people do impact her conceptualization of self-compassion, it was the actions or words from loved ones that reiterated to her the importance of acting compassionately towards herself. In particular, Kandy reflected on how the photo (Fig. 1) of her and her little sister reminded her to treat herself with the same unconditional love her sister shows towards her.



Fig. (1). Photo brought in by Kandy to represent how others (family members) help to understand self-compassion.

Several participants also brought photos of animals to represent self-compassion. Participants described the unconditional love that they received from their pets as examples of how they should treat themselves with compassion. Karen brought a photo of her playing with kittens (Fig. 2). Natalie explained how animals helped remind her to be less judgemental of herself while describing a photo she brought of her and her dog, saying:

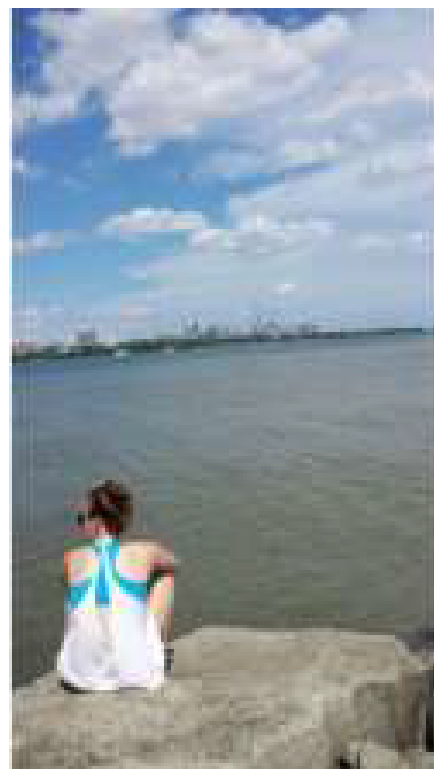


Fig. (2). Photo brought in by Sam to represent the importance of being alone to experience self-compassion.

Like he's (her dog) someone that doesn't judge me, he always happy for me, he's always there for me no matter what, he doesn't care when I make mistakes...(laughs) so I think that's what a lot of people with pets - like cats or dogs or whatever might feel.

3.2. Theme 2: The Self of Self-compassion

This theme captures participants' reflections and discussion about how they experienced self-compassion and includes the following subthemes: a) sense of self, b) positive health behaviours that are independent of external influences, c) mindfulness, and d) beyond the self.

3.2.1. Sense of Self

When discussing self-compassion, participants emphasized the importance of self-awareness and having a strong sense of self. Participants explained that knowing how to take care of themselves and spending time alone were important aspects of learning how to be self-compassionate. Rachel said: "So, I feel like if you're able to be comfortable with yourself and comfortable...being alone...being confident just being with yourself and your presence, I feel like that will help more with self-compassion towards yourself".

Interestingly, although participants agreed that it was important to develop a sense of self to experience self-compassion, few participants brought photos of themselves to represent self-compassion. Natalie reflected on how she challenged herself to include at least one photo of herself after reflecting on the self-compassion photos she chose, as she said:

I had probably a folder of like forty or fifty photos to share for this study, and when I was looking through, there wasn't one of me.the stage I'm in, in my self-growth with self-compassion in general, that yeah I'm doing all these things for myself, but at some point, you need to acknowledge yourself and acknowledge who you are, in this moment, and so that's why I made sure that I included it (photo of self), but I was resistant to.

Several participants noted that body image played a role in their experience of being and feeling self-compassionate. Several participants expressed that body acceptance and refuting societal beauty standards was an important part of self-compassion. Two participants even brought pictures of media campaigns that encouraged and promoted positive body image to represent self-compassion, with one online trend covering stretch marks with glitter and then posting photos on social media.

Overall, reflecting on their sense of self appeared to help participants articulate and understand how to be self-compassionate.

3.2.2. Mindfulness

Many participants indicated that mindfulness was an important component of self-compassion. Participants expressed the importance of meditation, being calm, clearing one's mind, not worrying about anything else, and being present in the specific moment. For example, Kelly stated, "being mindful of your thoughts and then what you're feeling inside...work out, or like mindfulness photos, 'cause I think that's the main like a bridge between having self-compassion for yourself".

Interrelated with mindfulness, some participants believed that being alone and having time to oneself was essential to engaging in self-compassion and mindfulness. This concept was represented through many of the photos that participants brought in, like Sam's photo below (Fig. 3), where she is pictured alone, and Kandy, who brought in a photo near a lake (Fig. 4). Sam discussed how taking time for herself and reflecting represented self-compassion to her.



Fig. (3). Photo brought in by Kandy to represent the importance of nature to experience self-compassion.



Fig. (4). Photo brought in by Karen, to represent how animals represent compassion and self-compassion.

Participants also described concepts beyond themselves (*e.g.*, nature) when describing self-compassion. Most participants brought in pictures of the outdoors and watching sunsets, which often reminded them to look at the 'bigger picture.' Rachel reflected on a picture that she brought in of a girl sitting in the grass on a sunny day and explained how nature represented elements of self-compassion:

Being outside and being outdoors like you're one with the earth. Like the earth is not made perfect, so you're not made perfect either, so just being on the grass, being level-headed and down to earth type of thing [and] being happy with that.

3.3. Positive Health Behaviours - Independent of External Influences

When discussing ways in which they practiced self-compassion, participants described engaging in activities for intrinsic reasons rather than external pressures and influences. For example, Natalie explained: "I think that self-compassion is really important that, whatever you're doing to practice self-compassion, or self-care or self-love, you're doing it for you and not for other people or not for an image of yourself."

The majority of participants specifically mentioned that exercise was an activity that allowed them to experience self-compassion and brought in pictures of people participating in activities such as dance, yoga and working out/going to the gym. These physical activities represented self-compassion in different ways. For example, dance brought joy and happiness, working out made them feel better, and yoga represented mindfulness and relaxation. Parti-

cipants described how these activities brought enjoyment and other positive emotions during times that they devoted to themselves. Participants emphasized the importance of exercising for enjoyment and health benefits when describing self-compassion, as Kelly recognized that exercise might not always represent self-compassion, stating:

There's a lot of people...who run fitness vlogs, and they share their journey [of] being unhealthy to get fit and where they want to be.... for me I wouldn't feel self-compassion looking at that account because it's like why can't I do that?

Participants used the same scrutiny to decipher how eating habits related to self-compassion. Many participants discussed how eating healthy was a way to compassionately take care of the body. However, this did not necessarily mean eating only 'healthy' foods - and participants struggled to describe what constituted a self-compassionate way of eating. Karen brought in a photo of someone eating a salad yet described the importance of the actions and intentions of eating healthy to explain self-compassion. She said,

Cause, again she's taking care of her body and she's eating healthy, so I mean I don't think the salad would be really self-compassionate, like I think you should like whatever you enjoy. So I think this is not really - it is self-compassionate, but then now that I'm thinking more of it I don't think it is [self-compassionate] because I feel like you should eat the foods whatever you want, like cause society says oh you should eat a salad because the Kardashians eat salads only so she's eating a salad thinking like ok then I'll lose weight, but she should just love her body no matter what, obviously to an extent, self-compassion means eating healthy.

In addition, Natalie illustrated this concept through a photo of herself and her friends enjoying ice cream. She explained that allowing herself to enjoy food without guilt was an expression of self-compassion (Fig. 5).



Fig. (5). A photo brought in by Natalie to represent that enjoying food without feeling guilty depicts self-compassion.

3.4. Theme 3: Self-compassion as a Tool

Participants described ways in which they implemented self-compassion into their lives in adaptive ways. Participants commonly referred to challenging life experiences and how they overcame tough times to explain how they were self-compassionate. This theme includes three sub-themes: a) *overcoming suffering*, b) *a positive mindset*, and c) *dealing with imperfections*.

3.4.1. Overcoming Suffering

In addition to accepting self-perceived flaws and mistakes, many participants described perseverance and moving through difficult times as ways they practiced self-compassion. Specifically, many participants expressed that self-compassion meant loving yourself and being positive, particularly when times were tough. This was represented by the photos that participants brought in. For example, Karen reflected on how she was able to persevere through tough times by replacing negative coping mechanisms (*e.g.*, self-harm) by treating herself with more compassion (taking things one day at a time). Many photos she brought in from the internet to represent self-compassion depicted self-harm scars with positive quotes or tattoos.

Several other participants brought in photos and quotes that represented personal struggles. Specifically, participants expressed that self-compassion involved accepting things that they could not change. Kandy stated that it was important to accept everything that was going on, both positive and negative, to achieve self-compassion. It was evident in the interviews that acceptance of mistakes and self-perceived inadequacies was a way in which participants described self-compassion. For example, Kelly mentioned that positive self-talk and forgiveness allowed her to cope with negative thoughts, and Karen expressed similar thoughts as she said: "... like say I messed something up, not like thinking - beating myself up about it all day...being like you know...make mistakes... it happened, move on you can learn from it."

3.4.2. Positive Mindset and Acceptance

Participants discussed the importance of a positive mindset when being self-compassionate. Participants described ways in which they used self-compassion as motivation to learn and grow. For example, when asked why she chose to participate in the study, Megan discussed the importance of self-compassion in regard to personal growth, stating: "So, I think that self-compassion is so important, and I read a lot of books about self-compassion and I yeah, I'm just really interested in personal growth."

This response highlights the powerful impact of self-compassion on various aspects of personal growth. Participants also identified adaptive habits they considered self-compassionate. For example, having goals was very important to Lauren as it allowed her to benefit in many positive ways, improving her mood, having a better frame of mind, and feeling better about herself. The photos and quotes that participants brought in represented a variety of ways to engage in self-care and self-love (all of which were found online).

For some participants, accepting perceived flaws and mistakes was an expression of self-compassion. For example, Karen stated: "Uhm well, I've struggled with anxiety and depression...there are days when I don't get out of bed cause it's hard.....so I just try to be compassionate with myself, and you know, even if today doesn't work out, tomorrow will."

Participants expressed the importance of self-forgiveness and acceptance in order to engage in self-compassion. Specifically, participants perceived that being able to forgive themselves without dwelling on mistakes and imperfections was an act of self-compassion. For example, when asked to define self-compassion, Megan said:

Ya uhm, so how I understand self-compassion is basically it means...it means...for me it's the ability to forgive yourself and let go of ...and just embrace your imperfections and knowing that...uhm your imper-like you will be-you will accomplish what you want to accomplish in life because of your imperfections, not in spite of them.

Many participants also expressed that allowing themselves to make mistakes without dwelling on them was a way in which they were self-compassionate. Participants also expressed that forgiving themselves allowed them to cope with self-perceived failures. For some participants, reframing negative thoughts was a way in which they dealt with situations in a self-compassionate manner. Overall, for these participants it was clear that forgiving themselves, even when they did not meet their own expectations for themselves, was representative of self-compassion.

4. DISCUSSION

In the present study, we sought to examine perceptions of self-compassion in young women. We used photo elicitation in conjunction with interviews. Overall, participants had a difficult time defining self-compassion and often referenced examples of compassion (to or from others) to describe the construct.

Participants' conceptualization of self-compassion paralleled several components consistent with researcher definitions of self-compassion. Although not explicitly expressed, participants discussed ways in which they engaged in each facet of self-compassion. For example, participants engaged in self-kindness by participating in self-care behaviours, accepting their bodies, and engaging in self-love. In addition, participants recognized the importance of mindfulness and being present in the moment to experience self-compassion. When participants expressed acceptance of flaws and failures, it was evident that they recognized that everyone has flaws, coinciding with experiences of common humanity. Participants expressed those experiences and perceptions of self-compassion were unique to individuals and contingent on personality and attitudes. These findings highlight the importance participants in the present study placed on constructing a sense of self to experience self-compassion. The ability to position themselves as part of a bigger picture (*e.g.*, part of the earth) was often reliant on spending time alone. In other qualitative work, researchers reported that self-compassion was practiced by participants to mitigate negative emotions that arose during solitude [34]. Together, these findings highlight how self-compassion

may mitigate feelings of isolation regardless of physical surroundings.

Although paralleling, to some extent, researcher definitions of self-compassion, participants had difficulty both understanding and defining self-compassion [12, 14]. Even with instructions to bring in photos that they thought represented self-compassion, participants in the present study expressed difficulty in fully understanding what self-compassion was. Many participants mentioned that they looked up self-compassion to choose photos for their interview, similar to findings using photo-elicitation when examining perceptions of positive body image [26]. Despite searching for a definition, many participants were not able to articulate what self-compassion meant to them in the interviews. The findings highlight that defining positive psychological constructs (such as positive body image and self-compassion) and applying them to oneself can be particularly challenging. Previous studies with North American samples have reported that individuals may feel ambivalent about practicing self-compassion (*e.g.*, mindful self-compassion) and fear that it could lead to feelings of vulnerability [35]. These negative misconceptions about self-compassion [3] may, in part, explain why participants found the construct so hard to define. It is also possible that self-compassion and its perceived benefits cannot be fully understood without actually practicing it [35].

In the present study, participants described that self-compassion was unique to everyone. This was exemplified by the fact that no two participants brought in the same photo representing self-compassion, even though several mentioned using Google image searches to find pictures that define it. This is not surprising, given that self-compassion is a multidimensional and dynamic concept [3]. In addition, self-compassion can be experienced differently in relation to different contexts and across different time points (state self-compassion [36]). Our findings highlight that not only can self-compassion differ between individuals, but within individuals as well. The ability to manipulate and experience differing levels of self-compassion can have positive outcomes [3].

When defining and discussing self-compassion, it became evident that self-awareness and a sense of self are important for understanding the concept. The body is a central aspect of the self [37] and serves as a means through which individuals can engage in self-compassionate activities. Interestingly, despite discussing ways in which they challenged Western beauty ideals in order to engage in self-compassion, several of the internet photos that participants brought in to represent these activities depicted the Western ideal (*e.g.*, thin yet toned bodies, light or White skin, large breasted [38]). This may be due to a lack of diverse media representations of self-compassion or, more likely, limited diversity in media images in general [39]. In addition, most participants chose to bring in pictures of others (mostly from the internet), as opposed to photos of themselves, to represent self-compassion. Our findings highlight the complexity of body image experiences within self-compassion practices. It seems as though positive body image, defined as love and appreciation of the body regardless of its physical appearance [40], closely aligns

with acting self-compassionately. This is not surprising given the evidence that self-compassion has been linked to improved body image [41-43], and supports that self-compassion may act as a protective factor against negative body image behaviours in young women (*e.g.*, body checking [44]).

Findings from our study highlight that self-compassion can be adaptive and encourage growth. Contrary to other studies [45], no participants in the present study indicated maladaptive outcomes related to engaging in self-compassion. These findings complement those that have shown that self-compassion is linked to increased motivation [46]. In addition, participants in the present study highlighted their personal journeys of engaging in self-compassion, reiterating that self-compassion can be fostered and learnt [3]. In the present study, participants discussed that they had learned to be more self-compassionate through enduring tough times and personal struggles. This is not surprising, given the consistent links between self-compassion and decreased psychopathology [3].

Similar to previous qualitative studies (*e.g.*, on body image [47]), our findings suggest there may be a conceptual gap between how self-compassion is defined in the literature and how participants understand it. The findings from this study suggest that while researchers have a clear and structured definition of self-compassion [1, 2], for members of the public, self-compassion is a concept that is difficult to define and understand. It is important that research exploring what self-compassion means to the individual continues, because if people do not fully understand this concept, practicing self-compassion and applying strategies to enhance it become extremely difficult.

5. LIMITATIONS

The present study expands current understandings of self-compassion in university-aged women, however, there are several limitations that must be acknowledged. Firstly, the present study sampled women who were undergraduate students from a mid-sized university in Southern Ontario. Participants were recruited using posters; it is likely that people already interested in self-compassion were more likely to participate due to bias. Although a relatively diverse ethnic sample was recruited, the findings of the present study may not be transferable to university students of other geographic locations and cultural backgrounds. Additionally, university students likely face unique pressures compared to other groups of young adult women, which limits how well these findings can be applied to young adult women outside of university, to men, and to older individuals. Although our goal was to recruit a general undergraduate sample, it is important to note that several participants discussed personal struggles with mental health (*e.g.*, anxiety, depression, self-harm). This may be reflective of the mental health struggles of university students in Canada [48]. Lastly, participants self-selected their own photos for interviews. Participants primarily found photos online, therefore conceptualizations of self-compassion may have been more reflective of how other people define self-compassion as opposed to participants' own perceptions. Few participants included photos that they took with a personal camera, which may have posed dis-

advantages such as decreased participant agency and the inability to provide step by step processes of how participants found each photo [24].

6. FUTURE DIRECTIONS & IMPLICATIONS

Our findings highlight that self-compassion is a construct that is hard to define and describe for young women, a cohort that reports lower levels of self-compassion than others [18]. Future research should examine knowledge translation strategies to enhance the understanding of self-compassion outside of scholarly materials. This is especially important given negative misconceptions about engaging in self-compassion [*e.g.*, viewed as selfish [45]. Findings from the present study outline that media and attitudes (particularly around appearance) in Western culture make it difficult for young women to act self-compassionately, highlighting the importance of promoting self-compassion as a protective mechanism against body image and negative eating behaviours in young women [42]. Given the difficulty that participants in the present study had fully understanding self-compassion, psycho-education approaches can also be integrated in addition to practices of self-compassion to ensure people understand the construct correctly, which may help mitigate misconceptions about self-compassion. For example, psychoeducation approaches such as the creation of a self-compassion website have been shown to acutely increase self-compassion [49]. In specific populations such as nurses and university athletes, self-compassion education sessions mixed with other educational topics (*e.g.*, resilience, empowerment) and activities (*e.g.*, self-compassionate writing) have been effective in increasing self-compassion [50, 51]. The importance of psychoeducation as part of an intervention where there is limited understanding in a population has been previously demonstrated in a positive body image program for older adults and people living with chronic disease and disability; a noted conceptual gap in understanding between this population and researchers was identified as a barrier to intervention [47]. These authors highlighted the importance of ensuring participants have a good understanding of constructs to manage expectations and maximize the opportunity for impact.

CONCLUSION

In the present study, we used photo-elicitation as a tool to facilitate conversations about self-compassion. Throughout their interviews, many participants reflected on and questioned the original photos they had chosen, mentioning that they would change some of the pictures they brought in by the end of the interview. Given this reflexive process, the activity of finding and discussing photos that represent self-compassion and defining the construct may be a valuable tool for individuals to engage in self-compassion; this should be further explored as a possible self-compassion intervention.

AUTHORS' CONTRIBUTIONS

The authors confirm their contribution to the paper as follows: D.B.: Analysis and interpretation of results; S.C.G., K.L.G.: Draft manuscript. All authors reviewed the results and approved the final version of the manuscript.

ETHICS APPROVAL AND CONSENT TO PARTICIPATE

This study received ethics clearance from Brock University's Research Ethics Board, Canada (#17-218).

HUMAN AND ANIMAL RIGHTS

All procedures performed in studies involving human participants were in accordance with the ethical standards of institutional and/or research committee and with the 1975 Declaration of Helsinki, as revised in 2013.

CONSENT FOR PUBLICATION

Informed consent was obtained from all participants.

STANDARDS OF REPORTING

COREQ guidelines were followed.

AVAILABILITY OF DATA AND MATERIALS

The data and supportive information not available due to ethical limitations of sharing raw transcripts and consent for secondary use of data.

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CONFLICT OF INTEREST

The authors declare no conflict of interest, financial or otherwise.

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