STRESS, SELF-COMPASSION, AND COPING MECHANISMS AMONG GRADUATE SOCIAL WORK STUDENTS

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STRESS, SELF-COMPASSION, AND COPING MECHANISMS
AMONG GRADUATE SOCIAL WORK STUDENTS

A Project
Presented to the
Faculty of
California State University,
San Bernardino

In Partial Fulfillment
of the Requirements for the Degree
Master of Social Work

by
Elizabeth Martinez Contreras
June 2019
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Approved by:

Rigaud Joseph, Faculty Supervisor, Social Work

Janet Chang, MSW Research Coordinator
ABSTRACT

Graduate students are often exposed to many stressors during their rigorous academic programs which may impact their overall well-being. Researchers have long believed that self-compassion can be used as an emotion-regulated strategy to cope with stress. The purpose of this cross-sectional study is to examine the relationship between self-compassion levels and coping mechanisms for stress among graduate social work students. Data were collected from 97 graduate social work students in a Hispanic-serving university in Southern California (N = 97). Using non-parametric techniques, the Kruskal-Wallis Test and the Mann-Whitney Test, this study analyzed the correlation between self-compassion and coping mechanisms for stress, while separately controlling for demographic variables. Results showed a statistically significant correlation between self-compassion level and coping mechanisms ($p < .001$). The magnitude of this correlation was strong ($\eta^2 = .18$). Implications of these findings for social work practice were discussed.

Keywords: stress, self-compassion, coping mechanisms, non-parametric test
DEDICATION

This research project is dedicated to all the people who have provided me support through my academic studies since elementary to graduate school. Especially, my parents who immigrated to this country and provided me with an opportunity for a better life. To my professors, research advisor, friends, and family members for their advice and support. Thank you for everything.
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CHAPTER ONE
INTRODUCTION

Problem Formulation

Master of Social Work (MSW) students experience high levels of stress because of the exhaustive requirements in a graduate social work program. Adonizio (2012) identified the following stressors experienced by MSW students: compassion fatigue, academic obligations, and psychopathology among others. The impact of stressors on students was strongly influenced by their healthy or unhealthy coping strategies when managing stress (Adonizio, 2012). The stressors discussed above can become significant barriers for MSW students experiencing high levels of stress when their learning capabilities, family functioning, and practitioner effectiveness are impacted.

Healthy coping strategies are critically important for MSW students during their graduate school journey. In fact, these students to balance their personal lives and academic obligations in addition to commitment toward field placements and future employment positions (Adonizio, 2012). Chen, Wong, Ran, and Gilson (2009) found that college students who implemented healthy coping skills when managing stress had their overall psychological well-being and health improve by developing healthy coping skills.

The ramifications for social work begin with the impact of stress on graduate students’ overall psychological well-being and their fulfillment of
academic/personal obligations. Graduate students will likely enter the social work field upon graduation. Stress can create barriers for new and seasoned social workers entering the professional field after graduation. Self-compassion, an emotion-regulated strategy where individuals with higher levels are psychologically healthier (Neff & Germer, 2013), can help students effectively cope with stress. The concept of self-compassion will be discussed in detail in the following chapters.

Purpose of the Study

The purpose of this study is to assess if there is a relationship between higher levels of self-compassion and MSW students’ coping skills when dealing with stress. Students experience many stressors that can affect their practice effectiveness and learning capabilities (Adonizio, 2012). Self-Compassion can be a coping strategy beneficial to students. Furthermore, self-compassion is an area that has not been explored with MSW students. This research study focused specifically on MSW students from a Southern California University. The current study pursued the following question: Is there a relationship between self-compassion and stress among graduate social work students in Southern California.
Significance of the Project for Social Work

The proposed study will have an impact for social work on a micro and macro level. Beginning with the micro level, a self-compassion strategy can be introduced to the MSW students by having trainings and/or seminars to inform and educate students about the strategy. Graduate social work students experience high levels of stress and without the appropriate resources to manage stress, their psychological well-being can be impacted (Adonizio, 2012). Thus, self-compassion can enable them to add another resource to their toolbox of healthy coping strategies. Arguably, social workers with better coping mechanisms are better equipped to empower their clients. The study can inform future assessments at the micro level if self-compassion helps MSW students cope better with stress.

On a macro level, findings from this research can result in the modification of the social work curriculum to integrate a course or mandatory training about healthy coping skills for stress which can include self-compassion. This study can inspire the Council on Social Work Education (CSWE) to make the appropriate changes in the curriculum. Social work programs directors can push for self-compassion training for students as well. On a community-level, MSW students can introduce self-compassion to their clients and to the communities in general. The findings will increase the literature about self-compassion and how this intervention can be incorporated as a resource within the social work education.
CHAPTER TWO

LITERATURE REVIEW

Introduction

Graduate students experience high levels of stress during their coursework and field placement in the MSW programs impacting students in various aspects of their lives (Adonizio, 2012). Stressors such as compassion fatigue, academic obligations, and psychological well-being will be explored. In addition, the concept of self-compassion and its effects on psychopathology and stress will be further examined through the review of various studies. The literature gaps with self-compassion in direct relation to social work students and the theories applicable to the student’s situation including ecosystems and social mentality will be discussed.

Graduate School Stressors

Compassion Fatigue

Compassion fatigue can be defined as a secondary traumatic stress with individuals being emotionally impacted by the suffering of another person (Figley, 1995). Compassion fatigue becomes a stressor with MSW students working with populations who have experienced trauma. It was found that compassion satisfaction in social work is directly related to the compassion fatigue in this profession (Harr, Bryce, Moore & Riley, 2014). In their internship and
employment positions, students who report high levels of compassion fatigue also report negative impacts on their quality of life and practitioner effectiveness (Harr et al., 2014).

**Academic Obligations**

Another stressor affecting MSW students is the academic pressure from their classes and field placement (Adonizio, 2012). Green, Bretzin, Leininger, and Stauffer (2001) found MSW full-time students had higher levels of anxiety when enrolling in research and computer classes in contrast with graduate students from other fields such as business and psychology. MSW students reported having beliefs that research classes are less important to their social work profession and found to be more resistant with learning in these classes (Green et al., 2001). Collins, Coffey, and Morris (2010) found that over 80% of MSW students who had regular class attendance and academic essay requirements reported having moderate to high demands in their programs. In addition, MSW students described curriculum structure, financial responsibilities, and their professors’ teaching styles as rigorous demands in their program (Collins et al., 2010). Research discussed above has found academic obligations can be a contributor to the overall stress of graduate students.

**Psychological Well-Being**

The mental and emotional well-being of each student including any mental disorders can be a stressor that affects MSW students on a personal and professional level. According to Eisenberg, Gollust, Golberstein and Hefner
(2007), 11.7% of graduate students screened positive for depression, while 3.2% screened positive for generalized anxiety disorder or panic disorder. Moreover, research studies on the mental health of students found 1.6% of graduate students and 2.5% of undergraduate students reported having suicidal thoughts within the last four weeks from when the study was completed (Eisenberg et al., 2007). Zivin, Eisenberg, Gollust and Golberstein (2009) found 60% of college students who were suffering from a mental disorder at the baseline test continue to struggle with the disorder two years later. In addition, the study found that students were not seeking any type of mental health services or utilizing any resources (Zivin et al., 2009).

Another component found to have an impact on college students was the increased risk for social isolation for those who belong to one of the following groups: racial minority, low socioeconomic status, and international status (Hefner & Eisenberg, 2009). Social isolation was associated with mental health problems with students by increasing their stress level (Hefner & Eisenberg, 2009). A graduate student struggling with a mental disorder can be impacted in his/her social, academic, and overall functioning. As previously discussed, the psychological well-being of a student can be impacted by experiencing a mental illness and social isolation. In some instances, college students do not seek mental health services further impacting their mental state (Zivin et al., 2009).
Benefits of Self-Compassion

Mindfulness and Self-Compassion

Self-compassion can serve to decrease certain psychopathology disorders including depression among other mental health disorders that affect individuals (Neff & Germer, 2013). As previously stated, graduate students can struggle with various mental health challenges impacting their coping strategies for stress, therefore, self-compassion can counter those difficulties by becoming a protective factor (Neff & Germer, 2013). Self-compassion was found to increase first year students’ psychological well-being (Gunnell, Mosewich, McEwen, Eklund, & Crocker, 2017). Trompetter, De Kleine, and Bohlmeijer (2016) found that self-compassion mediated the negative relationship between positive mental health and psychopathology in college students. Self-compassion can be a mechanism that enhances stress resiliency by promoting emotion regulation in individuals (Trompetter et al., 2016). In addition, self-compassion interventions were found to be effective with female college students in their self-efficacy, mindfulness, and positive outlook (Smeets, Neff, Alberts & Peters, 2014).

Beck, Verticchio, Seeman, Milliken, and Schaab (2017) found the overall stress level of college students enrolled in various graduate programs decreased after completing various mindfulness sessions. Mindfulness is an important component of self-compassion. Specifically, college students who had a perfectionist philosophy reported having higher levels of stress, yet, it was
decreased after completing mindfulness sessions (Beck et al., 2017). Mindfulness-stress reduction programs decreased the negative components identified by the self-compassion concept as over-identification, judgement, and isolation (Raab, Sogge, Parker & Flament, 2015). The programs increased the common humanity component defined with how individuals identify shared common experiences with other humans, a key component essential to the self-compassion concept (Raab et al., 2015).

Gaps in the Literature

Numerous studies have been conducted about the effects of self-compassion on a variety of individuals from college students to community members; however, the research on MSW students is scarce. Self-Compassion interventions have been implemented with groups such as women college students from different fields excluding social work who displayed improvements in self-efficacy, mindfulness, and positive outlook among others (Smeets et al., 2014). Moreover, mindfulness programs were proven effective in decreasing stress levels with students enrolled only in a graduate speech-pathology program and undergraduate students enrolled in a communication disorders major (Beck et al., 2017). In contrast, the interventions and programs mentioned above have not been adequately studied with MSW students.

In reviewing empirical studies, the self-compassion research on MSW students is limited in comparison to other fields of practice. The gap in literature
about self-compassion within the social work field is evident. This present study can increase the research about using self-compassion as a coping strategy with students, their families, and clients. This study will differ from other research because the focus will be on MSW students and their levels of self-compassion in relation to their coping mechanisms with stress.

Theories Guiding Conceptualization

This research embraced the Bronfenbrenner’s (1979) ecological model to explain the systems that impact students at a micro, mezzo, and macro level (Bronfenbrenner, 1979). These three levels consistently interact with each other. The micro system is the individual’s overall functioning; the mezzo system consists of the groups influencing the individual third; and the macro system is the social, economic, and political conditions affecting the individual (Bronfenbrenner, 1994). Two key components of this theory include: the interface where the exchange occurs between the individual and the social environment and the adaptation representing an individual’s ability to adapt to the surrounding conditions and coping by the way individuals manage stressful situations (Bronfenbrenner, 1994).

Systems interact with each other, thereby affecting the student in various aspects starting with the micro system when the individual interacts with their surrounding groups including family, friends, and classmates (Bronfenbrenner, 1994). Additionally, the different groups impact the student’s individual
functioning if stressors are present and the graduate school policies influence the student’s academic obligations. Under the ecological theory, MSW students who have higher levels of self-compassion will have the ability to cope with stress better because these students would have a healthy psychological well-being. The ecological theory has been widely used in the social science literature (Greene, 2017; Neal & Neal, 2013; Siporin, 1980; Stern, Dietz, & Guagnano, 1995; Tudge, Mokrova, Hatfield, & Karnik, 2009; Ungar, M. (2002). This theory has an overall quality of 39 out of 45 on Joseph and Macgowan’s Theory Evaluation Scale (TES). The TES measures the overall quality of theories based on nine criteria: coherence, conceptual clarity, philosophical assumptions, connection with previous research, testability, empiricism, boundaries, usefulness for social work practice, and human agency (Joseph & Macgowan, 2019). The score of 39 indicates that the ecological theory is of excellent quality (Joseph & Macgowan, 2019).

The ecological theory analyzes all three different systems and how they influence each other, thus when MSW students experience stressors from the micro, mezzo, and macro systems their well-being and practitioner effectiveness can be affected (Bryce et al., 2014). In general, the ecological theory applies to this study because graduate students are influenced by environmental factors impacting their coping skills with stress and their level of self-compassion (Bronfenbrenner, 1994).
Another theory that was explored is the social mentality theory which posits that because individuals relate to others through social systems, their self-compassion and self-reassurance are activated via engagement in care-seeking and caregiving behaviors with others (Gilbert, 1989). Social mentality can guide individuals in generating and interpreting social roles, including the cognitive capacity of self-awareness, creativity, and self-reflection which is depicted within self-compassion (Gilbert, 1989). MSW students who can relate to oneself can create a sense of self-awareness by activating the underlying social cognitions of self-compassion (Gilbert, 1989). Hermanto (2016) found the importance of activating self-compassion cognitions has proven to be beneficial in the well-being of college students.

Although the social mentality theory has been around for three decades, its use has not moved much beyond the conceptualization level (Guanghai, 2008; Hermanto & Zuroff, 2016; Liotti & Gilbert, 2011; Pinto-Gouveia, Ferreira, & Duarte, 2014). When assessed through the lenses of the TES, the social mentality theory generated a score of 26. Hence, this theory is in the good quality range on the TES (Joseph & Macgowan, 2019).

Summary

MSW students experience various types of stressors including compassion fatigue, academic obligations, and psychological well-being of the students (Adonizio, 2012). Self-Compassion can have benefits to the students by
decreasing their stress and mental illness symptoms. There are various gaps in literature about using self-compassion as a coping skill with stress among MSW students. The ecological theory explained how MSW students are impacted by stressors ultimately affecting their coping skills. The social mentality theory addresses self-compassion cognitions that can be triggered by caregiving behaviors. Both theories were appropriate in the conceptualization of this present study.
CHAPTER THREE
METHODS

Introduction

This study explored the relationship between levels of self-compassion and coping mechanisms with stress among MSW graduate students. The following chapter will explain how the present study was conducted. In particular, the following areas will be covered: study design, sampling, data collection and instruments, procedures, protection of human subjects, study variables, and data analysis.

Study Design

This study took a descriptive approach toward assessing the relationship between levels of self-compassion and coping mechanisms among MSW students. More specifically, this cross-sectional quantitative design adopted by the researchers is consistent with the purpose of this study. When conducted appropriately, quantitative studies have the potential to generate comparatively more accurate results.

Sampling

This study collected data from a non-random purposive sample of the following population: graduate students in a social work program at a university in
Southern California. The demographics within this population varied in age, ethnicity, and graduate level standing among other variables. Agency approval was received from the MSW program director to recruit students as participants. A total of 97 participants completed the surveys. MSW students in a social work program were selected because the focus of this study was on MSW students.

Data Collection and Instruments

The data was collected in person with the researcher recruiting students by going to four classrooms consisting of full-time and part-time students. Existing data instruments used in this study were the Self-Compassion Scale and the Brief COPE Scale, two Likert scales that measure self-compassion and coping mechanisms, respectively. With the Self-Compassion Scale, participants were asked to rank 12 different statements using numbers that vary from 1 (almost never) to 5 (almost always) (Raes, Pommier, Neff, & Van Gucht, 2011). Furthermore, the survey had six different subscales that measured the various components of self-compassion: self-kindness, self-judgement, common humanity, isolation, mindfulness, and overidentification (Raes et. al, 2011).

The Brief COPE Scale is the abbreviated version of the original COPE scale (Carver, 1997). The scale was adapted to 18 statements for respondent fatigue. Furthermore, the subscales were categorized into active coping or avoidant coping mechanisms (Kershaw, Northouse, Kritpracha, Schafenacker, Mood & 2004). The active coping subscales were active coping, planning,
positive reframing, acceptance, and using emotional support while the avoidant coping subscales were: denial, venting, substance use, and behavioral disengagement (Kershaw et al., 2004).

Participants ranked the items dealing with coping skills from 1 (I haven’t been doing this at all) to 4 (I’ve doing this a lot) (Carver, 1997). The surveys were culturally sensible and have been proven to be reliable and valid with other studies (Raes et. al, 2011; Carver, 1997). The Cronbach Alpha reliability for the Short Self-Compassion scale is 0.86 which has a strong internal consistency (Raes et al., 2011). While the Brief COPE Scale did not have an overall Cronbach Alpha score, the subscales categorized under overall active coping had a Cronbach’s Alpha of 0.81 and the subscales under avoidant coping had a 0.63 Cronbach’s Alpha (Kershaw et al., 2004).

Procedures

The procedure for data collection included recruiting students in person by emailing various professors to ask if the researcher could recruit participation from students in their classes. The researcher went directly to the classrooms and provided a brief explanation about the study including advising the students that participation was voluntary. The researcher waited until the participants were finished, and the surveys were collected and stored in a secure folder. All the surveys were collected in person and kept in a safe location.
Protection of Human Subjects

The participants identity was kept confidential and anonymous with the in-person data. The informed consent form was anonymous by participants marking an X to consent. Participants were advised to avoid writing names or any other identifiable information on the surveys. After one year, the information collected from the surveys was shredded. There was no debriefing statement because this study did not use any deception; however, an information form with the contact information was included for the participants to ask any questions or voice any concerns. In addition, any minimal risks that could have arisen by the study completion were mitigated by the benefits for the participants.

Study Variables

For this study, the independent variable is levels of self-compassion which will be described ahead. Self-Compassion can be defined by 3 components which include self-kindness versus self-judgement, sense of common humanity versus isolation, and mindfulness versus over identification (Neff & Germer, 2013). Self-Kindness can be defined as being kind to oneself instead of being critical when experiencing failures (Neff & Germer, 2013). The second component is common humanity that identifies humans as being imperfect and provides an understanding that mistakes are made by humans (Neff & Germer, 2013). Mindfulness is the third component addressing the self-awareness of painful experiences by which the individual is not focus on the pain, instead on
the driving force of the experience (Neff & Germer, 2013). The independent variable was coded ordinally (from very low level of self-compassion to very high level of self-compassion).

Coping mechanisms for stress is the dependent variable measured on an ordinal level (from poor/low level of coping to very level high of coping). Other variables included age, education, employment status, MSW academic standing, and ethnicity.

Data Analysis

Since the data collected does not present with a normal distribution, a nonparametric statistical test, the Kruskal-Wallis H test, was selected to analyze the data. The two variables examined included the impact of self-compassion levels on coping mechanisms with stress. Under the Kruskal-Wallis H test, the null and alternative hypothesis can be presented as follows:

- H0: There is no statistically significant difference in coping mechanisms among the self-compassion groups
- H1: There is a statistically significant difference in coping mechanisms among the self-compassion groups

Researcher controlled for other variables such as age, ethnicity, education, and employment status. Furthermore, the researchers performed the Dunn-Bonferroni Post Hoc Test to assess the differences among the various self-
compassion groups. Additionally, the researcher captured the magnitude of any significant findings (effect sizes).

Summary

The study had a purpose to examine the relationship between having higher levels of self-compassion and having better coping mechanisms with stress. The present study was able to recruit a moderate number of participants (N=97) to describe the relationship between the independent and dependent variables. Two instruments were used to collect the data. The participant’s identity was kept confidential. Data analysis included nonparametric statistical tests. Therefore, this study utilized a Kruskal-Willis H test to analyze the relationship between self-compassion levels and coping mechanisms with stress.
CHAPTER FOUR
RESULTS

Introduction
The following chapter presents the results of the analysis, including the demographic characteristics of the participants. Table 1 will highlight the demographic information about the participants regarding various factors. Additionally, frequency distributions will be exemplified. Table 2 will present the results for the Kruskal Wallis H test completed to determine if there was a statistical difference. Furthermore, the additional tests listed in the previous chapter will be explained in the following section.

Frequency Distributions
Table 1 presents demographic characteristics of the study participants (N=97). As seen in Table 1, the sample consisted of 82.5% females and 17.5% males. Participants under the age of 28 consisted of 56.7% while over the age of 28 and over were 43.3%. Of the 97 participants, ethnicity constituted 61.9% Hispanic and non-Hispanic 38.1%. MSW level standing were distributed as follows: full-time, first year 25.8%, full-time, second year 28.9%, part-time, second year 22.7%, part-time, third year 22.7%. While the employment status, 25.8% employed full-time, 33.0% employed part-time, and 41.2% unemployed.
Table 1

Demographic Characteristics (N = 97)

<table>
<thead>
<tr>
<th>Variable</th>
<th>%</th>
<th>Variable</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age</strong></td>
<td>100</td>
<td><strong>Employment Status</strong></td>
<td>100</td>
</tr>
<tr>
<td>28 and under</td>
<td>56.7</td>
<td>Employed full-time</td>
<td>25.8</td>
</tr>
<tr>
<td>28 and over</td>
<td>43.3</td>
<td>Employed part-time</td>
<td>33.0</td>
</tr>
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<td></td>
<td></td>
<td>Unemployed</td>
<td>41.2</td>
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<tr>
<td><strong>MSW Standing</strong></td>
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<td><strong>Gender</strong></td>
<td>100</td>
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<tr>
<td>Full-Time 1&lt;sup&gt;st&lt;/sup&gt; year</td>
<td>25.8</td>
<td>Male</td>
<td>17.5</td>
</tr>
<tr>
<td>Full-Time 2&lt;sup&gt;nd&lt;/sup&gt; year</td>
<td>28.9</td>
<td>Female</td>
<td>82.5</td>
</tr>
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<td>Part-Time 2&lt;sup&gt;nd&lt;/sup&gt; year</td>
<td>22.7</td>
<td></td>
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<tr>
<td>Part-Time 3&lt;sup&gt;rd&lt;/sup&gt; year</td>
<td>22.7</td>
<td></td>
<td></td>
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<tr>
<td><strong>Race/Ethnicity</strong></td>
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<tr>
<td>Hispanic or Latino</td>
<td>61.9</td>
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<td></td>
</tr>
<tr>
<td>Non-Hispanic or Latino</td>
<td>38.1</td>
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<td></td>
</tr>
</tbody>
</table>

Key Findings

Table 2 highlights the results of the Kruskal-Wallis H Test. As displayed in the said table, there was a statistically significant difference in coping mechanisms among the various self-compassion groups $H(4) = 17.684$, $p = .001$. Therefore, the study rejects the null hypothesis that coping mechanisms with stress is the same across self-compassion levels. Since there was statistical difference, researcher tested the magnitude of the difference. Since the Kruskal Wallis H test is the non-parametric equivalent of the ANOVA, Eta-squared ($\eta^2$) was used to determine the effect size (Watson, 2018). The findings indicated a large effect ($\eta^2 = .18$).
Table 2

*Kruskal-Wallis H Test Results: Coping Mechanisms for Stress Among Self-Compassion Levels with MSW Students*

<table>
<thead>
<tr>
<th>Descriptive Statistics</th>
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<th>SD</th>
<th>M</th>
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<th>50th</th>
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<td>Coping mechanisms</td>
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<td>2.360</td>
<td>.79301</td>
<td>1</td>
<td>4</td>
<td>2.0</td>
<td>2.0</td>
</tr>
<tr>
<td></td>
<td>Self-Compassion</td>
<td>97</td>
<td>2.299</td>
<td>.89169</td>
<td>1</td>
<td>3</td>
<td>1.0</td>
<td>3.0</td>
</tr>
</tbody>
</table>

| Ranks                  |            |     |      |      |     |      |      |      |
|                        | Self-Compassion | N | Mean Rank |     | |    |    |    |
|                        | Very high     | 28 | 33.14    |     | |    |    |    |
|                        | Moderate      | 12 | 46.17    |     | |    |    |    |
|                        | Low/very low  | 57 | 57.39    |     | |    |    |    |
|                        | Total         | 97 |          |     | |    |    |    |

| Test Statistics        |            |     |      |      |     |      |      |      |
|                        | Coping Mechanisms |    | 17.684 |     | |    |    |    |
|                        | df          |     | 4     |     | |    |    |    |
|                        | Asymp. Sig. (2-tailed) | .001 |    |     | |    |    |    |

Furthermore, the researcher ran Dunn-Bonferroni Post Hoc test to determine any statistically significant difference between the five levels of self-compassion. One statistical difference was found between the high and low level of self-compassion with a $p=.019$. No statistically significant differences were found with the other levels of self-compassion. Therefore, students with more self-compassion have better coping mechanisms for stress. Finally, the researcher controlled separately for other variables by completing the Mann Whitney test and found no statistically significant difference among the variables. No difference was found with the following variables age, ethnicity, gender, MSW standing, and employment status.
CHAPTER FIVE
DISCUSSION

Summary

This cross-sectional study sought to explore the relationship between self-compassion and coping mechanisms among MSW graduate students. It is important to understand how students cope with various stressors and the role of self-care in helping them manage their emotional responses because of the potential impact of these stressors on the students. This study tested the hypothesis that there is a statistically significant difference in coping mechanism among the various levels of self-compassion. The non-parametric analysis of the data generated three key findings. First, the study hypothesis was supported (thus the null hypothesis was rejected). Second, students with higher self-compassion levels had better coping mechanisms than their counterparts with lower self-compassion levels. Finally, no statistically significant different was found between the control variables (age, ethnicity, gender, MSW standing, and employment status) and coping with stress.

Discussion

These findings are consistent with previous research on self-compassion among college students. In particular, the findings reflect the work of Beck et al. (2017) who reported the protective role of self-compassion in mediating stress
among students enrolled at the tertiary level. Trompetter et al.' (2016) findings also reflected the mediating effect of self-compassion on stress among college students. Ecosystems theory explains how individuals are impacted by the micro, mezzo, and macro systems (Bronfenbrenner, 1994). This study focused on MSW students who are influenced by academic and personal stressors. The social mentality theory states when college students activate their self-compassion cognitions their overall well-being improves (Gilbert, 1989). Gunnell et al.' (2017) work is agreeing with the social mentality theory when it was found that college students with changes in their self-compassion level had an increase in their psychological well-being. Since this present study is consistent with the previous findings, self-compassion can be beneficial on various levels as described in the theories discussed above.

The valuables assessed previously including age, gender, ethnicity, MSW standing, and employment status were found to have no statistically significant difference with self-compassion levels. Consistent with other findings there was no difference between the control variables (Beck et al., 2017). This study expanded the literature on the assessment of control variables when describing a relationship between self-compassion and coping mechanisms. Another contribution is the magnitude of the findings in this study for the social work arena. The strong effect size of this study is consistent with previous findings about large effect sizes. Previous work has assessed for an effect size and found large effect sizes with self-compassion and overall well-being (Trompetter et al.,
This study can serve as a template for future research about assessing for effect size within the social work field.

Findings built on those of other studies by discovering a correlation between a high self-compassion level and coping mechanisms with stress. The existing scholarship on self-compassion among MSW students is scarce. Therefore, this study expanded the literature by bringing self-compassion into the social work arena. This is very important because incorporating coping strategies to the curriculum can foster benefits to the students exposed to the many stressors of a graduate program. Self-Compassion workshops, training, curriculum can be introduced in the social work education, research, and policy.

Implications for Social Work Practice

This study holds significant implications for social work education. Self-Compassion can be integrated to the curriculum by employing workshops or self-care curriculum that teaches MSW students how to engage and develop their self-compassion. Self-Compassion is comprised of three components: self-kindness, sense of common humanity, and mindfulness, which entails an individual’s self-compassion (Neff & Germer, 2013). Curriculum that incorporates the components discussed above can be beneficial to the students with the development of self-compassion. Various benefits can derive from self-compassion workshops that include mindfulness and modifying thoughts about
being kind and finding a sense of common humanity to increase their self-compassion level (Neff & Germer, 2013).

MSW students would benefit from increasing their self-compassion because it will mediate the stressors impacting them during the program. Adonizio (2012) found students with healthy coping skills were psychologically healthier and had nourishing physical health. If self-compassion is added to the MSW curriculum, subsequently, the students will be able to mediate and balance the graduate program stressors by being more effective practitioners. The self-compassion benefits will mitigate not only to the students but their families when they must balance their professional and personal lives. Students who have higher levels of self-compassion will be able to demonstrate compassion to oneself but to their family members by being psychologically healthier (Adonizio, 2012).

Another implication is the modification of MSW programs to require curriculum for healthy coping strategies that will include the self-compassion approach. Students struggle with balancing their personal and academic obligations; therefore, integrating self-compassion to the curriculum would provide easier access to learn these skills (Adonizio, 2012). This will provide the exposure for the MSW students to increase their self-compassion levels. Hence, a change in the curriculum requirement would be beneficial to the students.
Limitations

The study had various limitations beginning with the sample of convenience from a specific university. This creates a limitation because the participants are restricted to a Southern California geographic area and might not represent other MSW students on a national level. In addition, the sample was a purposive sample and there was no randomization with the participant selection. The non-parametric method—although appropriate—was not the strongest because this method does not accommodate the control variables. Moreover, the cross-sectional design did not allow the researcher to follow the participants across time.

Recommendations

Future research should incorporate stronger methodology by recruiting MSW students from various schools. This will provide a more distinct group of students to compare instead of only one specific school selected in this study. Moreover, it will be important to add a comparison group with the MSW students to identify any differences between various graduate schools specific. Future research can recruit a higher sample size more than 100 participants in the attempt to generalize the results to a larger population and complete randomization for the participant selection.
APPENDIX A

DEMOGRAPHICS
Demographics Information

1.) What is your age? _______

2.) What is your gender?
   a.) Male   b.) Female

3.) What is your MSW standing?
   a.) Full-Time      a.) 1<sup>st</sup> year
   b.) Part-Time      b.) 2<sup>nd</sup> year
   c.) Pathway Distance Program  c.) 3<sup>rd</sup> year

4.) What is your race/ethnicity? (Please select all that apply)
   a.) White, non-hispanic
   b.) Hispanic or Latino
   c.) Black or African American
   d.) Native American or American Indian
   e.) Asian/Pacific Islander
   f.) Other (please specify): _______

5.) What is your current employment status?
   a.) Employed full-time (40+hours)
   b.) Employed part-time (up to 39 hours per week)
   c.) Self-employed
   d.) Unemployed
   e.) Homemaker
APPENDIX B

SELF-COMPASSION SCALE
How I Typically Act Towards Myself in Difficult Times

Please read each statement carefully before answering. To the left of each item, indicate how often you behave in the stated manner, using the following scale:

Almost never  1  2  3  4  Almost always  5

1. When I fail at something important to me I become consumed by feelings of inadequacy.
2. I try to be understanding and patient towards those aspects of my personality I don’t like.
3. When something painful happens I try to take a balanced view of the situation.
4. When I’m feeling down, I tend to feel like most other people are probably happier than I am.
5. I try to see my failings as part of the human condition.
6. When I’m going through a very hard time, I give myself the caring and tenderness I need.
7. When something upsets me I try to keep my emotions in balance.
8. When I fail at something that’s important to me, I tend to feel alone in my failure.
9. When I’m feeling down I tend to obsess and fixate on everything that’s wrong.
10. When I feel inadequate in some way, I try to remind myself that feelings of inadequacy are shared by most people.
11. I’m disapproving and judgmental about my own flaws and inadequacies.
12. I’m intolerant and impatient towards those aspects of my personality I don’t like.

APPENDIX C

BRIEF COPE SCALE
Coping Mechanisms

These items deal with ways you've been coping with the stress in your life since you found out you will be required to complete a research project in a short amount of time. These items ask what you've been doing to cope with this one. I want to know to what extent you've been doing what the item says. Don’t answer on the basis of whether it seems to be working or not just whether or not you’re doing it. Use these response choices. Make your answers as true FOR YOU as you can.

1 = I haven't been doing this at all

2 = I've been doing this a little bit

3 = I've been doing this a medium amount

4 = I've been doing this a lot

___ 1. I've been concentrating my efforts on doing something about the situation I'm in.
   ___ 2. I've been saying to myself "this isn't real.".
   ___ 3. I've been using alcohol or other drugs to make myself feel better.
   ___ 4. I've been getting emotional support from others.
   ___ 5. I've been giving up trying to deal with it.
   ___ 6. I've been taking action to try to make the situation better.
   ___ 7. I've been refusing to believe that it has happened.
   ___ 8. I've been saying things to let my unpleasant feelings escape.
   ___ 9. I've been using alcohol or other drugs to help me get through it.
   ___ 10. I've been trying to see it in a different light, to make it seem more positive.
   ___ 11. I've been trying to come up with a strategy about what to do.
   ___ 12. I've been getting comfort and understanding from someone.
   ___ 13. I've been giving up the attempt to cope.
   ___ 14. I've been looking for something good in what is happening.
   ___ 15. I've been accepting the reality of the fact that it has happened.
   ___ 16. I've been expressing my negative feelings.
   ___ 17. I've been learning to live with it.
   ___ 18. I've been thinking hard about what steps to take.

APPENDIX D

INFORMED CONSENT
INFORMED CONSENT: The study in which you are asked to participate is designed to examine the levels of self-compassion and coping mechanisms with stress among MSW Graduate Students. The study is being conducted by Elizabeth Contreras, a graduate student, under the supervision of Dr. Rigaud Joseph, Assistant Professor in the School of Social Work at California State University, San Bernardino (CSUSB). The study has been approved by the Institutional Review Board Social Work Sub-committee at CSUSB.

PURPOSE: The purpose of the study is to examine the relationship between levels of self-compassion and coping mechanisms with stress among CSUSB MSW Graduate Students.

DESCRIPTION: Participants will be asked to rate statements about self-compassion, coping mechanisms utilized to cope with stress, and some demographics information.

PARTICIPATION: Your participation in the study is completely voluntary. You can refuse to participate in the study or discontinue your participation at any time without any consequences. This study is not a School requirement.

CONFIDENTIALITY OR ANONYMITY: Your responses will remain anonymous and data will be reported in group form only.

DURATION: It will take 10-15 minutes to complete the surveys.

Risks: There are no foreseeable risks to the participants.

BENEFITS: There will not be any direct benefits to the participants.

CONTACT: If you have any questions about this study, please feel free to contact Dr. Joseph at (909) 537-5507.

RESULTS: Results of the study can be obtained from the Piau Library ScholarWorks database (http://scholarworks.lib.csusb.edu/) at California State University, San Bernardino after July 2019.

This is to certify that I read the above and I am 18 years or older.

Place an X mark here

Date

909.537.5501

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REFERENCES


