

Compassion and Forgiveness-Based Intervention Program on Enhancing the Subjective Well-Being of Filipino Counselors: A Quasi-Experimental Study

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Abstract This study reports the initial try out of an intervention program aimed to enhance subjective well-being through increase in individual's levels of compassion and forgiveness. The program was conducted among Filipino counselors. A single group pretest-posttest quasi-experimental design was adopted to test the effect of the Compassion and Forgiveness-Based Intervention Program on subjective well-being. Sixteen counselors enrolled in their post graduate degree were recruited to participate in the modular courses held in four sessions, four hours per session run in a two-month period. Pre-test and post-test assessments were conducted before and after the intervention program. Results obtained from paired t-tests demonstrated significant increase in the counselors' levels of compassion for others, self-compassion, forgiveness of others and subjective well-being after the intervention program. The results provide initial evidence on the role of compassion and forgiveness as pathways to subjective well-being. It is recommended that more interventionist research agenda be conducted to further examine the role of compassion, forgiveness to counselors' well-being.

Keywords: compassion, Filipino counselors, forgiveness of others, forgiveness of self, intervention program, self-compassion subjective well-being,

Introduction

Practitioners in the helping professions need to be cared for too. Although counselors work with clients' emotional issues, they need to put attention to their self-care. Counseling profession is a care giving profession. There are people who see a counselor or a therapist when they suffer from psychological pain. People expect their counselors or therapists to give them the comfort and compassion they need. According to Gilbert and Irons (2005), working relationship or rapport with the client is similar to the concept of compassion. Both terms suggest a process that aids the client to feel safe. But when caregivers or counselors constantly provide care to others without taking time to give the same kindness towards oneself, they might experience burnout. Jenkins and Baird (2002) as well as Kanter (2007) described a phenomenon where professional caregivers may experience difficulty in sustaining compassion for their clients known as compassion fatigue. Counselors need to recharge themselves so that they will regain the energy to serve others. It is therefore imperative for counselors to practice self-care because it is now a crucial element in their professional work experience. Likewise, the ability of counselors to practice self-compassion will eventually aid them to be compassionate with their client (Vivino, Thompson, Hill & Ladany, 2009). In fact, Neff (2011) affirmed that self-compassion is essential for anyone involved in care giving profession. The practice of compassion for oneself does not only allow the persons to forgive themselves for their mistakes but also to comfort themselves for the challenges they face in their professional and personal life.

Numerous studies (Maltby, Day & Barbers, 2005; Neff & Pommier, 2012; Neff, Kirkpatrick & Rude, 2007) have shown correlations between levels of compassion, forgiveness and subjective well-being. However, a dearth of studies exist that examine the causal relationships of the

mentioned variables. More specifically, a minority of empirical researches examined the effectiveness of nurturing a compassionate orientation among counselors exist. Thus, this current study examines the effectiveness of a compassion- and forgiveness-based intervention program on enhancing the subjective well-being among Filipino counselors.

Compassion Intervention

Although being compassionate is innate for counselors, it can be further awakened and enhanced. Literature have shown that compassion practices and techniques may help cultivate compassion (Gilbert & Procter, 2006; Moore, 2008; Vivino, Thompson, Hill & Ladany, 2009). In fact, Seppala (2013), believed that compassion does not entail years of training and study. Study in 2008, affirmed that a seven-minute intervention was enough to increase feelings of connection. Moreover, several studies (Gilbert & Irons, 2005; Shapiro, Astin, Bishop & Cordova, 2005; Shapiro, Brown & Bigel, 2007) on compassion interventions demonstrate improvements in well-being and social connection.

Apparently, there are specific methods that are found to enhance compassion for others and self. Compassionate Mind Training (CMT), Gestalt two-chair technique, compassionate image and mindfulness based stress reduction (MBSR) are some of the suggested effective methods in increasing compassion (Barnard & Curry, 2011). Compassionate mind training (Gilbert & Irons, 2005) was found to enhance self-compassion. This technique was developed for those people with high self-criticism. Through this training, people who are hard on themselves are taught how to self-soothe, generate caring, reassuring and soothing thoughts and images along with the feelings of warmth, sympathy and acceptance (Gilbert & Procter, 2006). Additionally, Gilbert and Irons, (2004) also claimed that CMT

recognizes that the brain has two pathways: self-judgmental and self-kind. These two pathways inhibit one another. CMT helps clients to enhance the self-kind pathway (Lee, 2009). Similarly, through this technique, clients are taught that self-compassion as a skill can be improved. Clients undergoing CMT are trained how to mindfully tolerate thoughts and feelings (Barnard & Curry, 2011). In fact, studies examining the effectiveness of this technique is very promising, however only few of these have been published (Mayhew & Gilbert, 2008). Seemingly, Neff, Kirkpatrick and Rude (2007) used the two-chair technique to facilitate students who were self-critical. The results of their experiment revealed that the Gestalt two-chair intervention technique accounted for the improvement of self-compassion among the participants. Yet, future studies are recommended to determine its impact when paired with other techniques or intervention. Thirdly, the compassionate image is a process of visualization to help clients nurture compassion and kindness toward oneself and others (Lee, 2009). Gilbert and Irons (2005) made use of the “perfect nurturer” model in assisting their clients in visualization. Although there were recorded impacts of compassionate imagery in enhancing compassion for others and self, (Gilbert & Irons, 2004) more empirical studies are needed to establish its causality.

Finally, Shapiro, Astin, Bishop and Cordova (2005) gave an eight-week group intervention based on mindfulness-based stress reduction (MBSR) to a group of health care professionals which showed significant increase in self-compassion. The participants who attended the MBSR were mostly physicians, nurses and social workers. Mindfulness, given in a form of mental training, increases the level of self-compassion of health care professionals.

Forgiveness Intervention

Compassion based intervention training can be also be considered as a forgiveness strategy that increases positive emotions and transformative experience (Witvliet, Ludwig & Vanderlaan, 2001). Several studies on forgiveness intervention were consistent with forgiveness theory (Enright, 2001; Hargrave, 2001; Worthington, 2009).

Several forgiveness interventions studies show improvement in the ability to forgive both others and oneself (Butler, Dahlin, & Fife, 2002; Freedman & Enright, 1996, Griffin, Worthington, Bell & Davis, 2017; Worthington, Griffin & Wade, 2017). Similarly, results from the experiments on the outcome of forgiveness interventions facilitate improved affect, well-being (Wade, Hoyt, Kidwell & Worthington 2013; Hebl & Enright, 1993) and restoration of close relationship (Hall & Fincham, 2005; Mc Cullough et al., 1998).

The Stanford Forgiveness Project presented numerous research projects on forgiveness. A study on forgiveness conducted by Luskin (2002) revealed that forgiveness is a skill that can be learned in a group setting. Their intervention program used a combination of narrative therapy, cognitive disputation, guided imagery and stress management (Luskin, 2002). The treatment is a 90-minute intervention over six weeks to teach the nine-step process of forgiveness. Participants who were given the treatment reported significant increase in optimism (Luskin, 2002; Luskin, Ginzburg, & Thoresen, 2005). As such majority of the interventions on forgiveness were developed to improve the ability of the individuals to forgive at the intrapersonal and interpersonal levels (Butler et al., 2002). Moreover, results from these empirical studies revealed that forgiveness interventions improve relationship (Hall & Fincham 2005),

enhanced affect (Freedman & Enright, 1996), and improved well-being (Berry & Worthington, 2001).

The constructs of compassion and forgiveness received considerable attention in the psychology literature. There is an increasing interest in studying the constructs of compassion for others and self-compassion because of the recent trends calling for the integration of Western and Eastern psychology in escalating the understanding of subjective well-being (Neff, 2003a). Findings of the previous studies (Neff & Pommier, 2012; Neff, Kirkpatrick, & Rude 2007) revealed that both compassion for others and self-compassion are associated with subjective well-being. Correspondingly, forgiveness has emerged as a promising construct in the study of subjective well-being.

While both compassion intervention and forgiveness interventions have been researched independently in relation to well-being, the possibility of looking into the effect of an intervention program linking both compassion and forgiveness to subjective well-being has never been investigated.

Framework of the Study

The theory of subjective well-being is a helpful framework that can link the association of both compassion and forgiveness to subjective well-being. According to this theory, a major component of subjective well-being is the presence of positive emotions (Diener, Scollon & Lucas, 2003). While compassion and forgiveness are not emotions, people tend to experience emotions when they experience compassion and forgiveness. For instance, people who are compassionate to others and oneself tend to experience more happiness and positive affect than those who lack compassion for others and oneself. There are also studies (e.g. Leary et. al, 2007; Neff & Vonk, 2009) that provided evidence that compassion for others and self are positively correlated with positive

affect. High levels of forgiveness have been associated with happiness (Maltby, Day & Barbers, 2005). Forgiveness has also been considered as an intrapersonal phenomenon, where the response to the perceived transgression is changed from a negative to neutral or positive (Thompson & Snyder, 2003). Hence, if one experiences compassion or forgiveness, one is likely to experience more positive emotions and this could lead to experience of higher sense of subjective well-being. This premise is supported by studies that demonstrated the link of subjective well-being, compassion for others and self on (Neff, Kirkpatrick, Rude & 2007; Wang, 2005) and forgiveness (Lawler, Younger, Piferi, Billington, Jobe & Edmondson, 2003; Witvliet, 2001, 2005; Worthington, 2005; Witvliet, & McCullough, 2005). A previous study on Filipino counseling professionals (Roxas, Caligner & David, 2014) provided preliminary evidence that forgiveness of others was a significant mediator of the association of compassion for others and subjective well-being as well as that of the association between self-compassion and subjective well-being. The same study also supported the argument that self-compassion, compassion for others, and forgiveness of others are significant predictors of subjective well-being. Hence, this study assumes that an intervention program designed to develop individuals to be more compassionate and forgiving will not only enhance their levels of compassion and forgiveness but will also enhance their level of subjective well-being. This assumption is summarized in Figure 1.

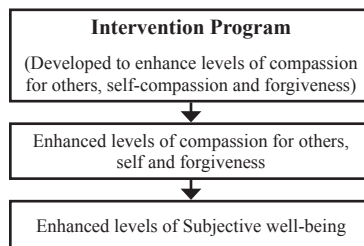


Figure 1. Framework of the Study.

Purpose of the Research

Most of the literature investigated compassion for others, self-compassion and forgiveness as predictors of subjective well-being. These constructs had been researched independently. Given the aforementioned evidences, we wondered if this compassion and forgiveness-based intervention program aimed at enhancing levels of compassion and forgiveness also have beneficial effect to subjective well-being. The present study provided an initial try out to investigate the effect of Compassion and Forgiveness-Based Intervention Program on subjective well-being.

Methodology

Research Design

The study employed a quasi experimental design, specifically a single group pretest posttest experimental design. In this design, a single group is pretested, given a treatment, then post tested (Salkind, 2010) to determine any significant difference in the research variables before and after the treatment or intervention program. As the study aims to examine the effects of the intervention program, it also adopted an outcomes or product-evaluation framework (Stufflebeam & Zhang, 2017) where the effects of the intervention on the participants are assessed.

Participants

All 16 counselors and counselors in training enrolled in a practicum class for their master's degree were recruited to attend the intervention program. Participants included two males and fourteen females and age range between 20-30 years old.

Research Instruments

Compassion for Others. Compassion Scale (CS) by Pommier 2010 was used to measure the participants' compassion for others before and after the intervention program. The scale contains 24 items that correspond to the three components of compassion for others. Participants had to indicate the frequency of their experiences in relation to each item using a scale from 1 (Almost never) to 5 (Almost always). Half of the items are negatively-stated and were reverse-scored prior to data analysis. The reliability coefficient of this measure was $\alpha=.82$ in the current study.

Self-Compassion. Self-Compassion Scale (SCS) by Neff 2003 was used to measure the participants' self-compassion before and after the intervention program. The scale has 26 items that corresponds to the three components of self-compassion. Participants indicated the frequency of their experiences in relation to each item using a scale from 1 (Almost never) to 5 (Almost always). Half of the items are negatively stated and are reversed -scored prior to data analysis. In the current study the reliability coefficient was $\alpha=.85$.

Forgiveness of others and self. Heartland Forgiveness Scale (HFS) by Thompson et al, 2005 was used to measure forgiveness of others and forgiveness of self. The items refer to statements about forgiveness that the participants need to respond based on their personal experiences. Participants had to indicate whether each item was true or false using a scale from 1 (Almost always false of me) to 7 (Almost always true of me). Six of the 12 items were negatively stated and were reversed scored prior to data analysis. The reliability coefficients of $\alpha= .64$ (forgiveness of others) and $\alpha=.75$ (forgiveness of self) were obtained in this current study.

Subjective Well-Being. Subjective Well-Being Scale for Filipinos (SWBSF-SF) by Hernandez, 2006 was used to measure subjective well-being before and after the intervention program. The scale has 11 items in which participants had to indicate their agreement and disagreement in relation to each item using a scale from 1 (Strongly Disagree) to 4 (Strongly Agree). Sample items are: "I am satisfied with the decisions I made in the past" and "I feel good about myself". The reliability of SWBSF was $\alpha=.84$.

Intervention Program. The Compassion and Forgiveness Based Intervention Program (CFBIP) consisted of four sessions, four hours per session over the course of two-months. This intervention program was co-led by three experts' counselors and psychologist who have experience in cognitive behavior therapy, meditation, and forgiveness therapy. Each session focuses on specific topics. The first session provided general introduction and review of Cognitive Behavior Therapy (CBT). Evidence-based practice suggest that compassion training coupled with CBT are powerful techniques to help individuals learn the ways to challenge their own behaviors, thoughts and negative self-talk (Gilbert & Procter, 2006). The second session provided the foundation of knowledge about compassion and forgiveness. It also discussed the importance of compassion and forgiveness in their personal and professional lives. Moreover, the participants were taught skills on how to develop self-compassion using empty chair technique and befriending their inner- self. Informal practices that will show compassion for one self are taught and formed part of their home assignment. In between regular sessions, the participants were asked to journal their everyday experiences and their practices of compassion for others and self-care compassion as part of their counselors' self-care. The third session focused on exercises to generate feelings of common

humanity. They were taught how to develop a compassionate mind using the perfect nurturer model. During the last session, the participants underwent affectionate breathing and meditation. The activity was concluded with psycho educational training on the nine steps process to forgiveness

Program Evaluation Tool. To determine the participant's subjective perception of the value of the program, they were asked to evaluate the program by indicating their agreement and disagreement in relation to each item included in the evaluation form using a scale from 1 (Strongly Disagree) to 4 (Strongly Agree). There are also open ended questions included in the evaluation form to further validate their perceptions.

Data Collection

Graduate students enrolled in a practicum class for their master degree program in counseling were recruited to attend the intervention program. Prior to their participation, they were given orientations on the procedures to be undertaken. They were also asked to give their informed consent. The participants were asked to answer the research instruments at one time in a classroom set-up. The administration of the assessment tools for the pretest was conducted a week prior to the start of the intervention program. The group atmosphere was kept safe and friendly especially during participants' sharing and discussion of their personal experiences. Participants were asked to evaluate the program and were again asked to answer the posttest assessment tools after two-weeks after the last session of the intervention program.

Data Analysis

The data were analyzed using the Paired t-tests to compare the differences in the measured variables before and after the Compassion and Forgiveness-Based Intervention

Program. We have reported only the significant results and marginally significant trends.

Results

The results showed that the participants exhibit moderately high level of compassion for others, self-compassion, forgiveness of others, forgiveness of self and subjective well-being before the intervention program (Table1). It also indicated that after the intervention program statistically significant differences were observed in the levels of compassion for others, self-compassion, forgiveness of others and subjective well-being (Table 3).

Tables 1 and 2 display the descriptive statistics of the participants’ responses before and after the intervention program. The test of significant differences was also illustrated in Table 3.

Table 1. Descriptive Statistics of the Research Variables before the Intervention

Variable	N	Mean	Std Deviation	Verbal Interpretation
Compassion for others	16	3.89	0.23	Moderately High
Self- Compassion	16	3.43	0.17	Moderately High
Forgiveness of self	16	5.23	0.42	Moderately High
Forgiveness of others	16	4.85	0.54	Moderately High
Subjective well-being	16	3.28	0.29	Moderately High

Legend: Heartland Forgiveness Scale

Compassion Scale and Self-Compassion Scale	Forgiveness of Others and Forgiveness of Self
4.01-5.00 Very High	6.01-7.00 Very High
3.01-4.00 Moderately High	4.51-6.00 Moderately High
2.01-3.00 Moderately Low	2.01-4.50 Moderately Low
1.00-2.00 Very Low	1.00-2.00 Very Low

Subjective Well-Being

3.51-4.00 Very High
2.51-3.50 Moderately High
1.51-2.50 Moderately Low
1.00-1.50 Very Low

The participants recorded moderately high mean scores in all measured variables prior to implementation of the intervention program. This result means that the participants have moderately high levels of compassion for others, self-compassion, forgiveness of others, forgiveness of self and subjective well-being before the intervention program.

Table 2. 1 Descriptive Statistics of the Research Variables after the Intervention Program

Variable	N	Mean	Std Deviation	Verbal Interpretation
Compassion for others	16	4.22	0.36	Very High
Self-compassion	16	4.01	0.26	Very High
Forgiveness of self	16	5.50	0.66	Moderately High
Forgiveness of others	16	5.60	0.52	Moderately High
Subjective well-being	16	3.61	0.32	Very High

Table 2 shows that the means scores showed positive changes in terms of increased in all measured variables. Higher mean scores were observed from compassion for others (M=4.22, SD=0.36) and self-compassion (M=4.01, SD=0.26). There were also observed increased in the mean score for forgiveness of self, forgiveness of others and subjective well-being of the participants after the intervention program.

Table 3 depicted that there is a statistically significant difference on the mean scores of the participants' compassion for other, self-compassion, forgiveness of others and subjective well-being before and after the intervention program. However, there is no significant difference on the mean score in the participants' forgiveness of self.

Table 3. Significant Difference Test Results Between the Pretest and Posttest scores

Variable	T	df	Sig (2-tailed)
COOpre-COOpost	-3.03	15	0.01*
Scpre-Scpost	-13.56	15	0.00*
FOSpre-FOSpost	-1.29	15	0.22
FOOpre-FOOpost	-4.01	15	0.00*
SWBpre-SWBpost	-2.93	15	0.01*

* Significant (<.05)

The significant difference of the pre- and post-test means scores of the participants' levels of compassion for others, self-compassion and forgiveness of others were supported by the results of the quantitative and qualities responses after the intervention program. The program was highly evaluated by the participants (M=3.89) and they even rated the intervention program with an excellent rating (M=4.00) when asked if it helped them understand the meaning of compassion and forgiveness-based therapy. They rated the program with a mean score of 3.89 when asked if the activity provided them with opportunity to practice compassion and forgiveness in their everyday living. When asked if the seminar workshop helped them to discover ways or means on how to use compassion and forgiveness based therapy in their practice, the participants gave a rating of 3.78. Positive responses were also identified during the last day of the intervention program. Qualitative responses like *"All the seminars I had attended have a big impact to me in the personal and professional practice aspect," Empty chair technique helped me release my pain from childhood* and *"The process on how to apply the therapy is very new to me"* were just some of the feedback given by the participants during the evaluation of the program.

Discussion

The aim of the present study is to examine the effect of the Compassion and Forgiveness-Based Intervention Program in enhancing the compassion, forgiveness, and subjective well-being of a group of selected Filipino counselors. Quantitative and qualitative responses were also elicited from the participants to better capture the effects of the intervention program.

In general, the results indicated that the Compassion and Forgiveness-Based Intervention Program has an effect in increasing the participants' scores in compassion for others, self-compassion and forgiveness of others, and subjective well-being. These results are consistent with the assumption of the study that an intervention designed to enhance an individual's compassion and forgiveness may also have an effect in the individual's subjective well-being. The intervention program developed and implemented contained activities on compassion and forgiveness. There was no activity directly designed for subjective well-being. Thus, the results provide evidence that an intervention designed to enhance compassion and forgiveness will not only have an effect on the participants' compassion and forgiveness, but also on their subjective well-being. Thus, this result provides support to the premise that compassion and forgiveness may serve as pathways to subjective well-being (Roxas, Caligner & David, 2014). Furthermore, the findings are consistent with the studies on compassion interventions (Gilbert & Irons, 2005; Shapiro et al., 2005; Shapiro et al, 2007) and forgiveness interventions (Luskin, 2002; McCullough et al., 1998) that demonstrated improvements in subjective well-being. Our findings support the abovementioned hypotheses except the hypothesis that there would be statistically significant difference between the pre and posttest mean scores on forgiveness of self. Compassion and Forgiveness-

Based Intervention Program did report increase in the posttest means scores on forgiveness of self; however, there is no statistically significant difference in the pretest and posttest mean scores. These findings may imply that Filipinos who are compassionate to others and oneself and forgiving of others are more likely to experience subjective well-being.

These findings suggest that compassion and forgiveness-based intervention program may be viewed as a form of self-care; since through developing compassion for others and self and forgiveness of others, the person can be liberated from negative emotions and can experience positive emotions. However, it is also worthy mentioning that developing the Filipino's ability to forgive oneself may require a different approach. It can also be inferred from the results that Filipinos may find it easy to forgive others rather than forgiving themselves, and they tend to be more critical of themselves. From our observation, they are also likely to value interpersonal relationships over individual desires. Hence, it can be construed that Filipinos counseling professionals define subjective well-being depending on their interpersonal relationships with others.

Gilbert and Procter (2006), Moore (2008) and Vivino et al., (2009) also affirmed our findings that compassion practices help nurture compassion. Moreover, the different methods and strategies used in the intervention program are effective in increasing compassion. Hence, it can be deduced that compassion for others and self and forgiving others although innate for counselors can be further enhanced. Furthermore, this current study provided initial evidence affirming that compassion can be enhanced and the improvements in compassion also improved subjective well-being.

The reported significant difference of the pre-test and post-test means scores of the participants' level of

compassion for others, self-compassion and forgiveness of others may suggest that the Compassion and Forgiveness-Based Intervention Program was effective in enhancing compassion for others, self-compassion, forgiveness of others and subjective well-being. The quantitative ratings obtained were consistent with the positive qualitative responses of the participant.

Conclusion and Recommendations

In summary, the findings of the study provide some support to the effectiveness of the Compassion and Forgiveness-Based Intervention Program in enhancing counselors' compassion (self and others), forgiveness of others, and subjective well-being. The study also provide some support to the premise that subjective well-being may be enhanced through an intervention that focuses on directly enhancing compassion and forgiveness, which suggests that compassion and forgiveness may serve as pathways to subjective well-being.

Nevertheless, certain limitations of the study must be acknowledged. Although the findings manifest improvements after the intervention program, there was no treatment comparison group. Hence, the data cannot account for the influence of the external factors. For future research, the intervention program may be conducted with a control group to provide stronger evidence on the intervention's effects. Additionally, the small sample used in the study also reduced the variability in measures and limited the generalizability of the results. Finally, a supplementary analysis of determining the correlation of the participants' compassion and forgiveness to their subjective well-being was not performed due to the limited sample size. Replication studies of the present study should include more participants to address these limitations.

The findings of the present study calls for a more interventionist research agenda where the role of compassion and forgiveness on counselor's well-being is examined through an intervention. In spite of the findings that provide some support to the effectiveness of the intervention, there is a need to continue test and improve the intervention as the need for Filipino counselors to be strong in their compassion, forgiveness, and subjective well-being is critical for their competence and effectiveness as school counselors. In terms of counselor education, the findings of the study also highlight the need to train counselors who are compassionate and forgiving as these are not only important in terms of how they relate with counselees and other people, but may also be important for their own well-being.

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