Assessing Filipino-Chinese High School Students Self-Compassion

Belen Chu
Philippine Academy of Sakya
Arellano University

Carlo Magno
De La Salle University

Abstract The present study assessed the construct self-compassion by (1) testing its six-factor structure and its concurrent validity with coping strategies. Self-compassion is understanding, non-judgmental attitude toward one's inadequacies and failures. This construct is relevant among Asians because of its consistency with their beliefs and values about the self. Self-compassion is a psychological construct that encompasses the Buddhist perspective on the meaning of suffering and how it is developed over a period of difficulty. The self-compassion scale and the coping style scales were administered to 201 Filipino-Chinese high school students of a Buddhist school in the Philippines. It was found in the study that the six factors of self-compassion were significantly correlated with all the factors of coping strategies (problem-focused, emotion-focused, and avoidance-oriented). The six-factor structure of the self-compassion was supported by the data obtaining an adequate fit (RMSEA=.08, χ^2=2.84, CFI=.94, and TLI=.95). Concurrent validity was determined where the six factors of self-compassion were structured to affect the three factors of coping strategies. The estimates of the explained variances of the factors of self-compassion on the three coping strategies were significant. The model also attained a good fit (RMSEA=.06, χ^2=3.88, CFI=.94, and TLI=.94).

Keywords: self-compassion, coping strategies, problem-focused, emotion focused, avoidance –oriented, Filipino-Chinese high school students

Introduction

When people are faced with failures, losses, and rejections, they deal with their problems with level-headedness and composure, whereas, others would react maladaptively to unpleasant situations or worse, aggravate their miseries by blaming themselves for their mistakes and shortcomings. In the same way, when students who have been taught to become compassionate in a Buddhist school resort to varied ways to cope from the problems and protect themselves against stressful events. It is either that they face these difficulties by planning how to confront, or to get emotional support from other people or just avoid by

simply denying or disengaging from the problem. Neff (2003a) defined the psychological construct "Self-Compassion" as it plays an important role in how individuals cope with life's problems. According to Neff, persons who are self-compassionate take an understanding, non-judgmental attitude toward one's inadequacies and failures, and recognize that one's experience is part of the common human experience. Presumably, a person high in self-compassion sees his or her problems, weaknesses and shortcomings accurately, yet reacts with kindness and compassion rather than with self-criticism and harshness. Thus, self-compassion protects people against negative events and stimulates positive self-feelings when their life goes badly. Previous studies have shown that by becoming self-compassionate, students may become kinder, more understanding to themselves to liberate them from negative emotions (Neff, Hseih, &Dejitthirat, 2005). They succeed despite difficulties and failures in their studies as they are able to alter negative emotions of self-condemnation and shame into more productive emotions of compassion for one's imperfect humanity.

Self-compassion needs to be assessed among students studying in a Buddhist school to provide a more contextual perspective on how it operates within an Asian context. When the self-compassion scale was developed by Neff (2003b), the Asian sample was mixed with other groups assuming that they all operate in the same wavelength of self-compassion. The studies in self-compassion have also identified numerous constructs that are psychologically adaptive such as well-being (Gilbert, 2005; Neff, 2004), wisdom, happiness, optimism, positive affect (Neff, Rude, & Kirkpatrick, 2007), life satisfaction, social connectedness, and emotional intelligence (Neff, 2003a). There is a strong indication that coping is also a potential correlate of self-compassion but this factor was not emphasized in previous studies. Neff, Hseih, and Dejitthirat's (2005) study showed that after students have experienced failure in a midterm exam, they reported ways of coping with the experience. The present study provides empirical evidence on the prediction of coping from self-compassion. This prediction also served as concurrent validity for the self-compassion scale when applied in a Filipino-Chinese sample.

The Meaning of Self-Compassion

By being compassionate means a "humane quality of understanding the suffering of others and wanting to do something about it". And to be compassionate for others would simply mean individuals allowingthemselves to be touched by their experience of suffering (Salzberg, 1997).

Neff (2004) defined self-compassion as a healthy form of self-acceptance that includes three components. The first is a tendency to treat oneself kindly in the face of perceived inadequacy by engaging in self-soothing and positive self-talk. Another component of self-compassion involves recognizing that one's discomfort is an unavoidable part of the human experience. This recognition of ''common humanity'' promotes a sense of connection to others even in the face of feelings of isolation and disappointment. Finally, self-compassionate individuals are able to face their own painful thoughts without avoiding or exaggerating them, managing their disappointment and frustration by quelling self-pity and melodrama. In the definition of self-compassion, Neff (2003a) explained that it is closely related to and informed by the construct of mindfulness (Brown & Ryan 2003). Similar to mindfulness, self-compassion involves turning one's wisdom and awareness inward, thereby promoting a perspective of connectedness and recognition of temporality. On the other hand, self-compassion implies being emotionally warm and forgiving to oneself. It is the ability to be kind to oneself in the face of failure, rejection, defeat, and other negative events (Leary,

Adams, & Tate, 2005). According to Buddhist theory, suffering is caused by attachment to fixed beliefs about the self, particularly unexamined assumptions that we perpetuate (diSilva, 1986, 2005). However, ongoing self-reflection into the nature of our suffering allows for internal transformation (Kongrul, 2005). The classic story of Buddha illustrates that it was the understanding of suffering that inspired his search for self-determination. When we face difficulties, rather than avoid or give in to them, it forces us to uncover inner resources we may never have known. We become more self-reflective as we tune into the experience of suffering, over time depersonalizing it, and ultimately liberating us from negative emotions, guiding our life in a new direction (diSilva, 1986, 2005; Kalupahana, 1987). This openness to possibility generates humility, contentment, and self-compassion (Ekman, Davidson, Richard, & Wallace, 2005; Kongrul, 2005; Leary 2003, 2004; Neff, 2003b).

Coping Strategies Defined

Lazarus (1977) defines coping as a reaction to stressors. This reaction is the individual's attempt to master conditions of harm, threat or challenge. Coping mechanisms are "those direct, active tendencies aimed at eliminating a stressful event" (Lazarus, 1977, p. 8).

Folkman, and Lazarus (1980) defined coping strategies as specific efforts, both behavioral and psychological, that people employ to master, tolerate, reduce, or minimize stressful events. Two general coping strategies have been distinguished: problem-solving strategies are efforts to do something active to alleviate stressful circumstances, whereas emotion-focused coping strategies involve efforts to regulate the emotional consequences of stressful or potentially stressful events. Research indicates that people use both types of strategies to combat most stressful events. The predominance of one type of strategy over another is determined, in part, by personal style (e. g., some people cope more actively than others) and also by the type of stressful event; for example, people typically employ problem-focused coping to deal with potential controllable problems such as work-related problems and family-related problems, whereas stressors perceived as less controllable, such as certain kinds of physical health problems, prompt more emotion-focused coping.

An additional distinction that is often made in the coping literature is between active and avoidant coping strategies. Active coping strategies are either behavioral or psychological responses designed to change the nature of the stressor itself or how one thinks about it, whereas avoidant coping strategies lead people into activities (such as alcohol use) or mental states (such as withdrawal) that keep them from directly addressing stressful events. Generally speaking, active coping strategies, whether behavioral or emotional, are thought to be better ways to deal with stressful events, and avoidant coping strategies appear to be a psychological risk factor or marker for adverse responses to stressful life events (Holahan& Moos, 1987). In another coping literature, coping strategies are generally classified into three broad categories: (1) problem-focused; (2) emotion-focused; and (3) avoidance-oriented (Zeidner, 1995). Problem-focused coping attempts to change stressful situations by taking pro-active actions to change circumstances for the better; Emotion focused coping attempts to change the way a person attends to or interprets the situation so that the resulting affective reaction is altered and avoidance-oriented coping is aimed at avoiding the stressor rather than facing it and may include denying the reality of a situation, giving up, or mentally disengaging through excessive sleep or intoxicants (Carver, Scheier, &Weintraub, 1989).

The Present Study

In the present study, the six factors of self-compassion are tested. These factors are organized into three main components: Self-kindness versus self-judgment, common humanity versus isolation, and mindfulness versus over-identification. The first factor on each pair that includes self-kindness, common humanity, and mindfulness are the positive characteristics of self-compassion which involves offering oneself warmth and non-judgmental understanding, recognition of being imperfect, and a balanced approach to one's negative experiences (Neff, Kirkpatrick, & Rude, 2006). In order to support the factor structure proposed by Neff, Hseih, and Dejitthirat (2005), a measurement model needs to be tested involving the six factors. These six factors need to be significantly related to provide evidence that they measure self-compassion as a construct. Previous studies of Neff (2003b) also conducted CFA as an approach to confirm the factor structure although low goodness of fit estimates were obtained using a mixture of ethnic samples from the USA. The present study will use Filipino-Chinese sample where the characteristics of self-compassion is more consistent with their culture.

To further validate the construct self-compassion, it should correlate with a variable that strongly indicates adaptive mental functioning (Gilbert, 1989; Gilbert & Irons, 2005, Leary, Adams, & Tate, 2005). Coping is one of the variables that indicate an adaptive mental functioning and a good outcome of self-compassion. Coping as a correlate and outcome of self-compassion is based on Neff 's theory (2003a) which posits that self-compassion directly operates as an emotional regulation coping strategy by neutralizing negative emotional patterns and creating more positive feelings of kindness, understanding and connectedness. Thus, self-compassion is hypothesized to have direct link with adaptive coping. Neff (2003a) further explains that students who experience academic failure enables them to see failure situations clearly without the loss of perspective that stems from excessive self-criticism and feelings of isolation. Neff, Hseih, and Dejitthirat (2005) study supported this idea when they found that students' who had recently failed a midterm exam further exhibited more adaptive ways of coping with the failure. Having to test the relationship of self-compassion and coping also addressed the issue on the call for more studies exploring how other factors would explain self-compassion. The validation study conducted by Neff (2003b) in the past looked at the divergence and convergence among the six factors. However, the present study only focused on how coping strategies would be a result of self-compassion. In the present study, this idea is tested by structuring a model where the factors of self-compassion should have significant effects on coping. More specifically, the factors of self-compassion should affect each factor of coping strategies.

The aim of the present study is to assess the factors structure of self-compassion. Once the factor structure is established, its contribution to further understand college students' coping strategies (problem and emotion-focused strategies and more so with avoidance oriented strategies) needs to be conducted.

The study aimed to address the following questions: (1) Are there relationships among the factors of self-compassion and the coping strategies of the Filipino-Chinese high school students when they are faced with difficulties and failures in their Math subjects? (2) Will the existing factor structure of self-compassion be supported by the data? (3) Which among the coping strategies are significantly predicted by self-compassion?

<div align="center">Method</div>

Research Design

The study used a cross-sectional and non-experimental research design which utilized a correlational analysis to investigate the relationships of the variables, self-compassion and coping strategies. Self-report measures were also used in obtaining substantial data to determine the direct linkages of the variables.

Participants

The study involved 201 Filipino-Chinese high school students 129 boys (69%), 72 girls (31%) from first to fourth year levels enrolled at a Buddhist school. They were randomly selected from their Math classes. Initially, the students who participated in the study were asked to fill out the survey questionnaires after they were given orientation regarding the survey activities. The survey asked students whether they have experienced failing a recent exam. The students who admitted failure were the ones included in the study.

Measures

Self-Compassion Scale. The Self-Compassion Scale was developed by Neff (2003b) and is based on the Buddhist construct of self-compassion. The Self-Compassion Scale consists of 26 items. The SCS respondents indicate how frequently they have the experience described in each statement using a 5-point Likert scale from 1 (almost never) to 5 (almost always). Scores range from 0 to 5, with higher scores equaling more self-compassion. Self-compassion consists of three components. Each of the three components is measured by two factors, one of which is reverse scored. The six factors are self-kindness, self-judgment, common humanity, isolation, mindfulness, and over- identification. Items include: (1) *Self-kindness* - "I try to be loving towards myself when I'm feeling emotional pain" (2) *Self-judgment* - "When I fail at something important to me I become consumed by feelings of inadequacy." (3) *Common humanity* - "I try to see my failings as part of the human condition" (4) *Isolation* - "When I think about my inadequacies, it tends to make me feel more separate and cut off from the rest of the world" (5) *Mindfulness* - "When something upsets me I try to keep my emotions in balance." (6) *Over-identification* - "When I'm feeling down I tend to obsess and fixate on everything that's wrong."The internal consistency of the scale reported in the previous study was alpha =.94(Neff et al., 2005).

Coping Style (COPE Scale). The COPE scale was developed by Carver, Scheier and Weintraub's (1989) which contained 15 sub-scales and sixty (60) items. The responses being given is a 4-point scale of 1= "I usually don't do this at all", 2 = I usually do this a little bit, 3 = I usually do this a medium amount and 4 = I usually do this a lot.

The three scales showed evidence of convergent validity with the following: active coping= .62; planning=.80; suppression of activities=68; restraint coping=.72; seeking social support (instrumental)=.75; seeking social support (emotional)= .85; positive reinterpretation=.68; acceptance=.65; turning to religion= .92; focus on and venting of emotions=.77; denial= .71; behavioral disengagement=.43, mental disengagement=.45 (Carver, Scheier, &Weintraub, 1989).

Data Analysis

The study employed descriptive statistics by determining the mean and the standard deviation to describe the respondents' age and the levels of their coping strategies and self-compassion. The Pearson r was also used to determine the relationships among the variables, the self-compassion scales and the three coping strategies, problem-focused, emotion-focused, and avoidance-oriented coping strategies.

Confirmatory Factor Analysis was conducted to test the six-factor model of self-compassion. The model would be sufficient if the covariances among the six latent factors will be significant and attain a positive estimate. The items were used as indicators for their respective latent constructs. The estimates of each item should likewise be significant. The fit of the hypothesized six-factor model were assessed by examining several fit indices including three absolute and one incremental fit index. The minimum fit function chi-square, the Root Mean Square Error of Approximation (RMSEA), and the Standardized Root Mean Square Residual (SRMR) are absolute fit indices. The chi-square statistic (χ^2) assessed the difference between the sample covariance matrix and the implied covariance matrix from the hypothesized model (Fan, Thompson, & Wang, 1999). A statistically non-significant χ^2 indicates adequate model fit. Because the χ^2 test is very sensitive to large sample sizes (Hu &Bentler, 1995), additional absolute fit indices were examined. The RMSEA is moderately sensitive to simple model misspecification and very sensitive to complex model misspecification (Hu &Bentler, 1998). Hu and Bentler (1998) suggest that values of .06 or less indicate a close fit. The SRMR is very sensitive to simple model misspecification and moderately sensitive to complex model misspecification (Hu &Bentler, 1998). Hu and Bentler (1998) suggest that adequate fit is represented by values of .08 or less. In addition, two incremental fit indices, the comparative fit index (CFI) and the Tucker-Lewis Index (TLI) were examined. The CFI and the TLI are moderately sensitive to simple model misspecification and very sensitive to complex model misspecification (Hu &Bentler, 1998). Hu and Bentler (1998) recommend a cutoff of .95 or greater for both the CFI and the TLI.

After establishing the factor structure of the self-compassion construct, its concurrent validity is further established by using coping strategies as its criterion. The final structure of self-compassion was used to predict the three factors of coping strategy (problem focused, emotion focused, and avoidant oriented). The same fit indices for the measurement model of self-compassion will also be used to assess the fit of the model for the concurrent validity.

Results

Descriptive statistics, such as the means, and standard deviations were used to determine students' responses on the measures used in the study. Reliability estimates were also established using Cronbach's alpha. The factors of self-compassion and coping strategies were intercorrelated. The six-factor model of self-compassion was tested to confirm its factor structure. Finally, concurrent validity of the self-compassion was established by testing whether it predicts the three factors of coping strategies.

Table 1
Descriptive Statistics for Self-compassion and Coping Strategies

Variables	*N*	*M*	*SD*	Cronbach's alpha
Coping Strategies				
Emotional-focused	201	2.78	.52	.85
Avoidance-oriented	201	2.37	.40	.83
Problem-focused	201	2.82	.49	.87
Self-compassion	201	3.24	.55	.87
Self-kindness	201	3.05	.74	.86
Self-judgment	201	3.44	.78	.81
Common humanity	201	3.34	.74	.88
Isolation	201	3.34	.73	.81
Mindfulness	201	3.15	.72	.82
Over-identification	201	3.17	.68	.86

Results showed that the measure for self-compassion had the highest mean (*M*=3.24, *SD*=.55). High mean scores were also obtained for the factors of self-compassion (*M*=3.05 to *M*=3.44). For coping strategies, the mean for problem-focused was the highest (*M*=2.82 and *SD*=.49). The measure for avoidance-oriented had the lowest mean (*M*=2.37, *SD*=40). This indicated that the students' responses for the self-compassion scales showed they are moderately self-compassionate and their preference for their coping strategies indicated that they were more of problem-focused than emotional-focused.

To determine the degree of consistency of all items within the same construct, the reliability of the self-compassion scales' 26 items was also conducted. Results showed a Cronbach's alpha of .87, indicating a very high internal consistency of overall self-compassion items. Similarly, for emotion-focused, problem-focused, and avoidance-oriented, Cronbach's alpha are .85, .87 and .83, respectively.

Table 2 presents correlations between the self-compassion scales and the coping strategies of the respondents. As hypothesized, all the factors of self-compassion had a significant correlations with all the three subscales of coping strategies (emotion- focused, avoidance-oriented and problem-focused) at p<.01 level of significance. The correlations within the factors of each construct were also substantial and significant. Among the factors of self-compassion, negative correlations were obtained for the set of self-kindness, common humanity, and mindfulness with the set on self-judgment, isolation and over-identification. This further supports the divergent validity of the scales.

Table 2
Intercorrelations among the Factors of Self-compassion and Coping Strategies

		1	2	3	4	5	6	7	8	9
	Coping Strategies									
1	Emotion-focused	---								
2	Avoidance oriented	.58**	---							
3	Problem-focused	.79**	.58**	---						
	Self-compassion									
4	Self-kindness	.25**	.33**	.26**	----					
5	Self-judgment	.42**	.23**	.47**	-.39**	---				
6	Common humanity	.35**	.23**	.35**	.33**	-.61**	---			
7	Isolation	.30**	.24**	.40**	-.40**	.50**	-.52**	---		
8	Mindfulness	.33**	.36**	.41**	.35**	-.55**	.46**	-.58**	---	
9	Over-identification	.40**	.32**	.40**	-.50**	.47**	.-43**	.59**	-.66**	---

$**p<.01$

To further prove the proposed factor structure of self-compassion before further analysis is done, a Confirmatory Factor Analysis (CFA) needs to be conducted. The CFA was conducted to provide factorial validity of the self-compassion construct. A measurement model was constructed composed of a six-factor model. These latent variables are self-kindness, self-judgment, common humanity, isolation, mindfulness, and over identification. The indicators used are the items under each factor. The six latent constructs were intercorrelated because according to Neff (2003a) that the domains are related to establish factor convergence within self-kindness, common humanity, and mindfulness. Divergence was also expected for the three positive self-compassion scales with self-judgment, isolation, and over-identification. Significant parameter estimates should be produced to establish the relationship among the latent constructs. The hypothesized convergence needs to yield positive directions and the divergence should yield negative estimates. The components should have significant estimates as well in order to provide proofs of inclusion of the item for their respective latent constructs. The viability of the model as a whole is judged by examining the fit indices of the model.

In the six factor structure, all items had a significant estimate under each of their factor. All items significantly load under their specified factor. The intercorrelations among the six factors were all significantly correlated as well. The opposite factors of self-kindness, common humanity, and mindfulness which are self-judgment, isolation and over-identification, respectively, attained divergence as shown by the negative parameter estimates. There was also divergence within self-kindness, common humanity, and over-identification. The same convergence was also obtained within self-judgment, common humanity, and over-identification. The estimates for the correlations indicate high values. The factors of the model are strongly linked to each other indicating that they are within the same construct supporting the original concept of Neff (2003b) that the six factors engender one another. The six-factor structure was also supported where the data adequately fitted the model. The RMSEA=.08, χ^2=2.84, CFI=.94, and TLI=.95 values all indicate support for the six factor model of self-compassion.

To further test the validity of self-compassion, concurrent validity with coping strategies as a criterion was conducted. Structural Equations Modeling was conducted to test whether the six factors of self-compassion would increase the variance of each of the three factors of coping strategy.

The results show that the effect of six factors of self-compassion on each factor of coping strategy was significant. More specifically, the effect of mindfulness and self-judgment had the highest explained variance on each of the coping strategies. Each factor of self-compassion contributes highly to emotion focused as compared to other factors of coping. The RMSEA=.06, χ^2=3.88, CFI=.94, and TLI=.94 values indicate that the model attained a good fit.

Discussion

The assessment of self-compassion among Filipino-Chinese students provided support how self-compassion explains adaptive mental functioning factors. The present study achieved two things: (1) the six-factor structure of self-compassion was supported by the data coming from a Filipino-Chinese sample; (2) self-compassion strongly produces tolerance to stressful events by coping.

The assessment of the Filipino-Chinese sample supported the components of self-compassion. The support for the six-factor structure is consistent with the values and beliefs in their culture. For example, the Filipino-Chinese which are typically Asian are more fluid when they face arguments (Lun, Fischer, & Ward, 2010) and more complex in their beliefs about learning (Magno, 2010a). Their ability to integrate conflicts and complex cognitions allows them to be more forgiving and kind of themselves in the face of inadequacy. For example, a typical Asian would smile when they commit mistakes in order to cope well with the situation. They, relax themselves when faced with failures and takes time to try again. Asians remain silent when they experience confusion and takes time to clarify things out. These specific behaviors are indicators how Filipino-Chinese as Asians are self-compassionate.

Assessing the compassion of Filipino-Chinese student sample provide insights on key characteristics that allow them to cope when faced with difficulties in school. Having identified the students who have high levels of self-compassion are the ones who can tolerate specific challenges and difficult tasks provided. These students are flexible in the way they handle challenging and difficult situations. Authority figures in school need not worry about them too much because when faced with failures, these students are more understanding and kind of themselves.

It was found in the study that self-compassion is directly associated with the three sub-categories of the coping strategies such as emotion-focused, problem-focused, and avoidance-oriented coping strategies. The result showed that self-compassion was significantly associated with the tendency to cope with one's negative feelings by using all the three coping strategies. As opposed to Neff's study (2005), which showed that her self-compassion scales was only positively and significantly correlated with most of the sub-scales of the emotion-focused strategies, this study examined that this new psychological self-attitude construct may as well be considered as an important correlate of students' coping as shown by the direct and high correlations of self-compassion with all the three coping strategies.

Figure 1
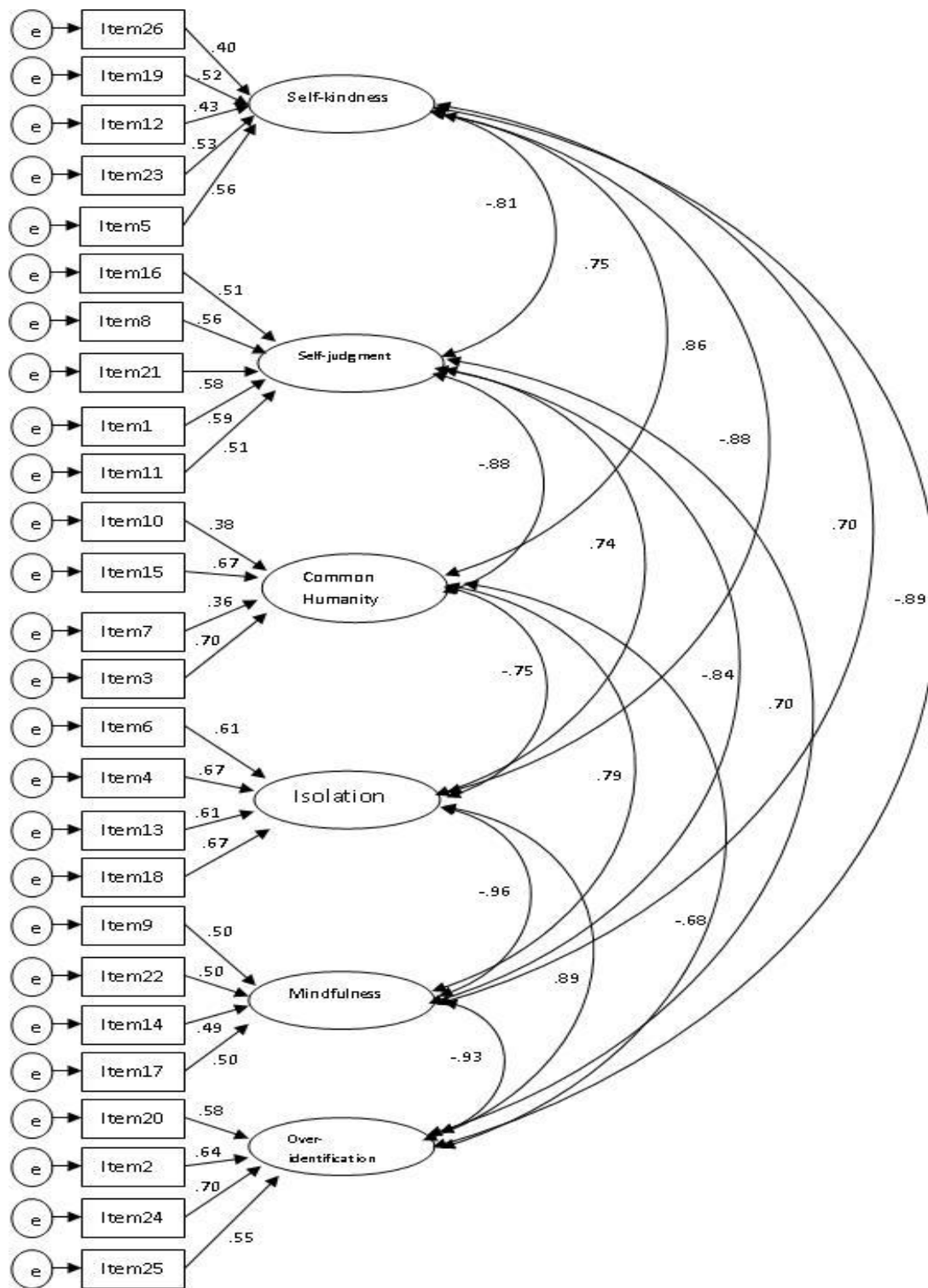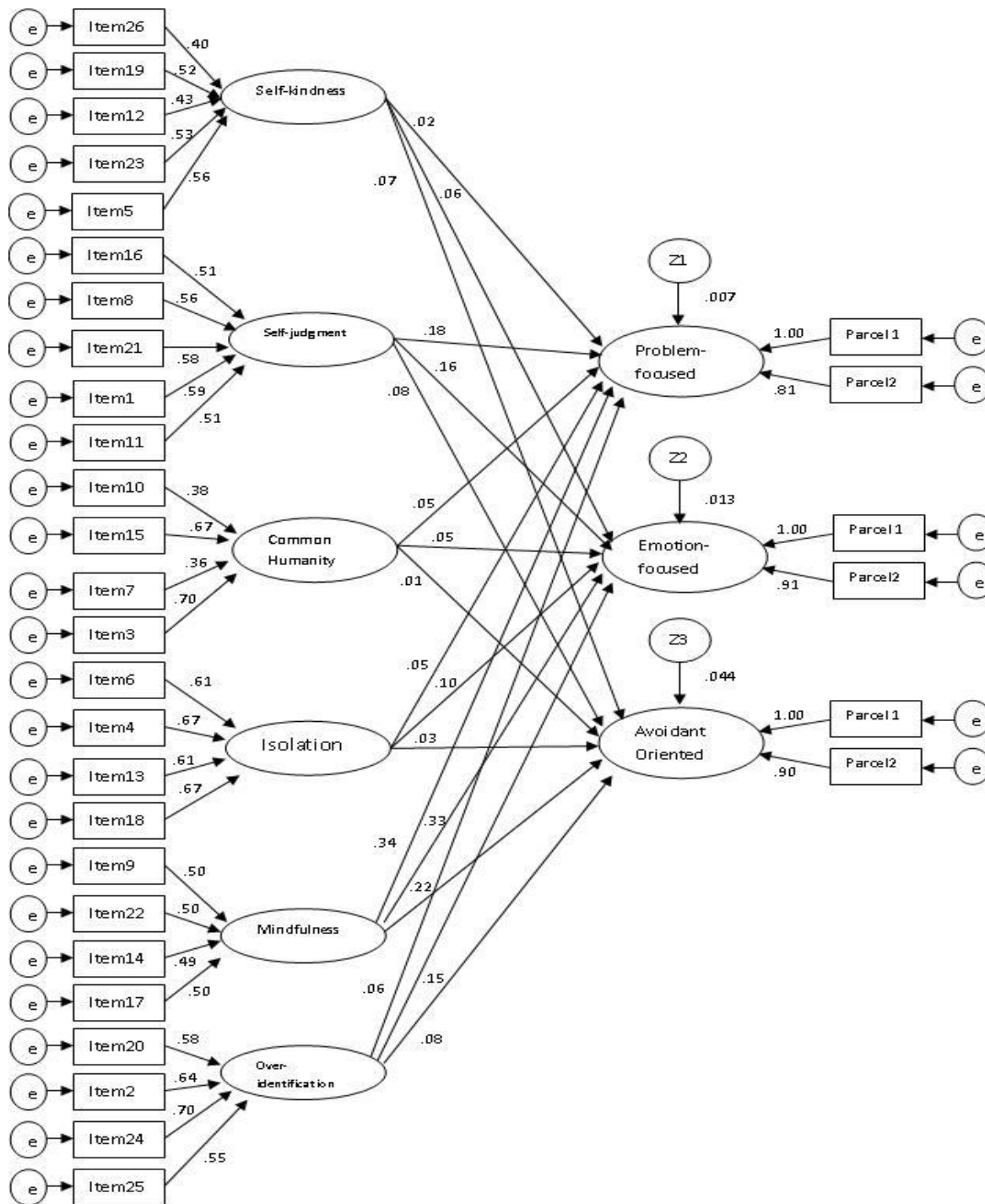*Six-Factor Model of Self-Compassion*

Figure 2
Concurrent Validity of Self-Compassion with Coping Strategies

The zero order correlations in the study showed that all factors of self-compassion and coping are significantly related. For problem focused, it supports Carver, Scheier, and Weintraub's (1989) report that students who adopt problem solving for their coping strategies resort to exerting efforts to remove the stressors by thinking how to confront their problems or avoid involvement in other activities in order to concentrate more completely on dealing with the stressor. Similar to Neff, Hseih, and Dejitthirat's findings in 2005, in which self-compassion was found highly correlated with emotion-focused strategies, the respondents in this study also showed that they have the tendency to get emotional support from another and make the best of situation by growing from it or viewing the difficulty in a less negative light. Although the result of the current study showed self-compassion was also positively linked with avoidance-oriented coping strategy, as opposed to that of Neff's study (2007), it is to be noted that the students obtained the lowest mean in this factor. There is likely the possibility that some of the students preferred the use of denial, mental or behavioral disengagement as their way of coping.

The relationship between the factors of self-compassion and coping strategies forms a theoretical link that further explains how Asian students perceive difficulties. Asian students form an attribution of failure for themselves but they are not hard on themselves for the failure. Rather than engaging in harsh self-blame, understanding oneself allows them to cope better with the problem. The process in this theoretical link further explains how individuals become resilient and flexible when faced with difficulties. It also provides insight on explaining why others easily cope and the others find difficulty in coping.

The results in the SEM also showed that all six factors of self-compassion directly increase the variance on all three coping strategies. Primarily, there were no specific hypotheses forwarded regarding the effect of self-compassion factors on each coping strategy. However, self-knowledge, common humanity, and mindfulness even increased the explained variance for avoidant-oriented coping. This coping strategy entails avoiding problems rather than facing it which denotes a maladaptive behavior. Although it can be argued that avoidance is still a coping strategy that allows individuals to deal with perceived difficulties. It can be assumed that self-compassion factors are relevant for any type of coping strategy.

Another pattern that was observed in the link between self-compassion and coping strategies is that all six self-compassion factors tends to have higher explained variance for emotion-focused coping. The strong variance further supports the notion that self-compassion is present to handle some emotional disturbance and the best way to do this is by emotion-focused coping. Self-compassion helps facilitate the alternative interpretation of the attributions of failure so that emotional disturbances will be deactivated. In this way, self-compassion becomes a mechanism of deactivating the negative emotions.

It can also be seen in the link that mindfulness had the highest explained variance for all three coping strategies. This further supports the idea that mindfulness is the paramount characteristic of self-compassion where the idea of self-compassion started with the concept of mindfulness (see Neff, 2003b). Mindfulness involves keeping ones emotion in balance and in proper perspective. There are specific types of emotions that serve to ruminate ones cognition (see Magno, 2010b), however mindfulness serves to activate strongly all three strategies in coping which make it a strong predictor. Being able to manage well one's emotions through balance and keeping things in the proper perspective allows one to extensively use the three varieties of coping. Mindfulness as a strong predictor of coping extends the idea that students who are highly mindful on their emotions are more able to cope well.

The overall findings of the study reveal that when examining the association between self-compassion and coping, self-compassion was highly and positively linked with Asian students' ability to deal with their difficulty, failure or any negative events by using all the strategies, namely problem-focused, emotion-focused, and avoidance-oriented strategy. These findings help confirm that coping strategy is a substantial outcome of self-compassion. The findings further suggests that when students are highly self-compassionate, they may have the tendency to effectively adapt and deal with any form of failures by using the three coping strategies. When they treat any negative thoughts, feelings and events kindly, or with shared humanity, or in mindfulness, they will be able to actively confront or plan the process of overcoming the stressor (problem-focused); or make the best of the situation by growing from the problem or viewing the it in a less negative way, get emotional support from another (emotion-focused), and they may just disengage from the event by rejecting or denying the stressors (avoidance-oriented). However in this particular study, the sample seemed to prefer to use the problem-focused more based on mean estimates. This may be attributed to their ability to analyze and plan as to what action to take when they are confronted with difficulties rather than use their emotions. This is a typical characteristic of the Filipino-Chinese showing that they are more analytical than emotional.

Previous studies have shown that adaptive psychological functioning plays significant role in self-compassion. Those who experience ongoing difficulty develop internal resources thus, reframe their life's hardships and propel themselves toward the future by continually re-adjusting their life's circumstances. Self-compassion may be reflected in forms of coping strategies. The findings of the study can guide teachers, counselors, and school administrators to discover and understand how students can cope with failures in their subjects and how positive attitudes can be encouraged and developed. Further assessment of self-compassion helps teachers to better understand students with difficulties.

References

Brown, K. W., & Ryan, R. M. (2003). The benefits of being present: Mindfulness and its role in psychological well-being. *Journal of Personality and Social Psychology, 84*, 822-848.

Carver, C. S., Scheier, M. F., & Weintraub, J. K. (1989). Assessing coping strategies: A theoretically based approach.*Journal of Personality and Social Psychology, 56, 26*7-283.

diSilva, P. (2005). *An introduction to Buddhist psychology* (4th ed.). New York: Palgrave.

Ekman, P., Davidson, R. J., Ricard, M., & Wallace, B. A. (2005). Buddhist and psychological perspectives on emotions and well-being. *American Psychological Society, 14*, 59-63.

Fan, X., Thompson, B., & Wang, L. (1999). The effects of sample size, estimation methods, and model specification on SEM fit indices. *Structural Equation Modeling, 6, 56*–83.

Folkman, S., & Lazarus, R. S. (1980).An analysis of coping in a middle-aged community sample. *Journal of Health and Social Behavior, 21,* 219-239.

Gilbert, P. (1989). *Human nature and suffering.*Hove: Lawrence Erlbaum.

Gilbert, P. (2005). Compassion and cruelty: A biopsychosocial approach. In P. Gilbert (Ed.), *Compassion: Conceptualizations, research and use in psychotherapy* (pp. 9–74). London: Routledge.

Gilbert, P., & Irons, C. (2005).Therapies for shame and self-attacking, using cognitive, behavioural, emotional imagery and compassionate mind training. In P. Gilbert (Ed.),

Compassion: Conceptualizations, research and use in psychotherapy (pp. 263–325). London: Routledge.

Holahan, C. J., & Moos, R. H. (1987). Risk, resistance, and psychological distress: A longitudinal analysis with adults and children. *Journal of Abnormal Psychology, 96*, 3-13.

Hu, L., & Bentler, P. M. (1995). Evaluating model fit. In R. H. Hoyle (Ed.), *Structural equation modeling concepts issues and applications* (pp. 76-99). Thousand Oaks, CA: Sage.

Hu, L. T., & Bentler, P. M. (1999). Cut-off criteria for fit indexes in covariance structural analysis: Conventional criteria versus new alternatives. *Structural Equation Model, 6*, 1-55.

Kalupahana, D. J. (1987). *The principles of Buddhist psychology.* Albany, NY: New York

Kongrul, D. (2005). *It's up to you: The practice of self-reflection on the Buddhist path.* Boston:
Shambhala.

Lazarus, R. (1977). Cognitive and copy processes in emotion. In R. Lazarus & A. Monat (Eds.), *In stress and coping: An anthology* (pp. 145-158). New York: Columbia University Press.

Leary, M. R. (2003). Self and emotion: The role of self-reflection in the generation and regulation of affective experience. In R. J. Davidson, K. R. Scherer, & H. H. Goldsmith (Eds.), *The handbook of affective sciences* . New York: Oxford University Press.

Leary, M. R. (2004). *The curse of the self: Self-awareness, egotism, and the quality of human life.* New York: Oxford University Press.

Leary, M. R., Adams, C., & Tate, E. (2005, August 20). *Adaptive self-evaluations: Self-compassion vs. self-esteem.* Presented at the annual meeting of the American Psychological Association, Washington, D.C.

Lun, V., Fischer, R., & Ward, C. (2010). Exploring cultural differences in critical thinking: Is it about my thinking style or the language I speak?. *Journal of Learning and Individual Differences, 20*, 604-616.

Magno, C. (2010a). Looking at Filipino pre-service teachers' value for education through epistemological beliefs about learning and Asian values.*The Asia-Pacific Education Researcher, 19*(1), 61-78.

Magno, C. (2010b). Integrating negative affect measures in a measurement model: Assessing the function of negative affect as interference to self-regulation. *The International Journal of Educational and Psychological Assessment, 4*, 48-67.

Neff, K. D., Rude, S. S., & Kirkpatrick, K. (2007). Self-compassion and its link to adaptive psychological functioning. *Journal of Research in Personality, 41,* 139-154.

Neff, K. D., Hseih, Y., &Dejitthirat, K. (2005). Self-compassion, achievement goals, and coping with academic failure. *Self and Identity, 4,* 263-287.

Neff, K. D. (2004). Self-compassion and psychological well-being.*Constructivism in the Human Sciences, 9,* 27-37.

Neff, K. D. (2003a). Self-compassion: An alternative conceptualization of a healthy attitude toward oneself. *Self and Identity, 2*, 85–101.

Neff, K. D. (2003b). Development and validation of a scale to measure self-compassion.*Self and Identity, 2*, 223-250.

Salzberg, S. (1997). *Loving kindness: The revolutionary art of happiness.* Boston: Shambala.

Zeidner, M. (1995). Adaptive coping with test situations: A review of the literature. *Educational Psychologist, 30*, 123-133.

Further correspondence can be addressed to Ms. Belen Chu, Guidance Department and the Center for Student Affairs and Services of Philippine Academy of Sakya, Manila or Dr. Carlo Magno, Counseling and Educational Psychology Department, 2401 Taft Ave., Manila.