

Nurturing Self-Compassionate Performers

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Nurturing Self-Compassionate Performers.

Performers, such as athletes, actors, dancers, and musicians, function within high pressure competitive and often hostile or critical environments. These individuals can be prone to a range of self-critical cognitions and behaviours which may make them susceptible to mental ill-health and psychological distress. Fostering and nurturing self-compassion is one approach to motivating behaviour and health which may be relevant within training and support settings. Self-compassion has been associated with a range of positive outcomes in the general community, as well as in those functioning in performance spaces, primarily sport. In this commentary, we outline why cultivation of self-compassion may be an increasingly valuable method for psychologists working with individuals from these environments, particularly within the context of a decimated industry during the global pandemic. We provide a brief overview of relevant research, before exploring practical and applied approaches (including transcripts) that can be used within therapeutic settings.

Keywords: self-compassion; athletes; performing arts; sport; mental health; self-criticism

What is already known about this topic

- Performers such as athletes, dancers, actors, and musicians are exposed to a range of stressors which can increase susceptibility to mental ill-health.
- Self-compassion can be cultivated in therapy and is associated with better mental health outcomes.
- Due to a range of hostile self-critical tendencies that are commonly seen in performers, some individuals may be resistant to concepts of self-compassion.

What this topic adds

- We outline a rationale for why psychologists working with performers should aim to nurture self-compassionate tendencies and practices.
- We outline methods and practical approaches to doing this in session, as well as describe potential hurdles and barriers for implementation.

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Individuals whose livelihoods are characterised by participation in performances which are inherently associated with competition, pressure, and comparison, may be at increased risk of mental ill-health. In this commentary, we consider performance through artistic and sporting pursuits such as musicians, actors, dancers, and athletes to fit these criteria, while acknowledging that a broader occupational interpretation is entirely reasonable. While clear differences exist between the performing disciplines, we contend that there are nevertheless fundamental factors relating to the individual and environment which are central to performers across the board. Understanding how these factors may emerge and contribute to mental ill-health is of relevance for clinical and therapeutic interventions.

Recent figures in Australia highlight the concerning rates of mental ill-health that are seen among elite athletes (Gulliver et al., 2015; Purcell et al., 2020; Walton et al., 2021a); consistent with the broader literature (Gouttebauge et al., 2019; Reardon et al., 2019). While less extensively researched, artistic performers also appear susceptible to experiencing mental ill-health at high rates (Kegelaers et al., 2020; Vaag et al., 2015), with an overlap in potential stressors clearly evident, as discussed below.

In light of the devastating effects of the COVID-19 pandemic on many creative and sporting industries, the mental health of performers is of heightened concern (Flore et al., 2021; Reardon et al., 2021). This may be particularly relevant for younger performers (in adolescence and early adulthood) who are currently undertaking training and education or in the early phases of their career, given young people already appear to be disproportionately suffering the greatest mental health burden both during the pandemic (Jones et al., 2020; Rossell et al., 2021) and otherwise (Patel et al., 2007; Solmi et al., 2021). Many performers now seek out mental health treatment to navigate the ongoing difficulties that may be faced within these industries, often exacerbated by the COVID-19 pandemic (Spiro et al., 2021). In the current commentary, we overview the factors that challenge performers mental health, the

value of compassion-based approaches, and how psychologists working in this space can directly apply these strategies in their clinical practice.

The mental health of performers: A significant concern.

Evidence exists to suggest that performers may be at heightened risk for mental ill-health. For example, recent data exploring athletes at the Australian Institute of Sport, suggested that compared to published community norms, athletes were more likely to report 'high to very high' psychological distress (9.5% vs 17.7%, respectively) and to meet the threshold for needing treatment for a potential disorder (19% vs 35%) (Purcell et al., 2020). Meta-analytic evidence supports these findings, with approximately 34% of current elite athletes shown to be experiencing symptoms of depression or anxiety, higher than many estimates of the general community (Gouttebauge et al., 2019). Similarly, in a descriptive study of orchestral musicians in Australia, a range of simple screening questions suggested 33% and 32% of musicians may have met criteria for social phobia or depression respectively, with 22% for post-traumatic stress disorder (Kenny et al., 2012). While meta-analytic evidence does not yet exist, many international studies are aligned, with psychological distress and mental health problems including anxiety, depression, post-traumatic stress, and body image concerns highly prevalent among musicians and dancers (Kapsetaki & Easmon, 2019; Thomson & Jaque, 2015; Vaag et al., 2015). This trend extends beyond professional artists, with recent work demonstrating significantly higher rates of mental health disorders and symptomatology among music and art students when compared to the broader student cohort (Vaag et al., 2021).

There are a range of factors which may contribute to the mental health of youth and adult performers (Reardon et al., 2019; Walton et al., 2021b; Willis et al., 2019). First, those in performing contexts may be prone to particular cognitive and behavioural traits and

tendencies which are vulnerability factors for poor psychological health. For example, performers may demonstrate hyper-competitive and perfectionistic behaviours and standards (Patston & Osborne, 2016; Sagar & Stoeber, 2009; Stoeber & Eismann, 2007), distorted and narrow views of self and identity (Brewer & Petitpas, 2017; Willard & Lavalley, 2016), as well as high self-criticism (Powers et al., 2009; Sutherland et al., 2014); all of which are potential contributors to worsened mental health (Edison et al., 2021; Limburg et al., 2017; Werner et al., 2019). We also note, however, that while high level performance can foster or enhance certain harmful cognitive and behavioural patterns, the same can be said for more positive protective factors. For example, many individuals are well-equipped to manage the stressors and challenges entrenched within performance contexts. Specifically, performers may have learned skills and approaches which build resilience and coping, accumulated over years of being within these contexts and overcoming adversity (Howells et al., 2017; Kegelaers et al., 2020; Sarkar & Fletcher, 2014).

In relation to stressors, performers are faced with a range which can act as catalysts for poorer well-being or mental ill-health (Simpson et al., 2021; Willis et al., 2019). Performers are typically exposed to high levels of both real and perceived evaluation and critical assessment. These typically revolve around performance failures and competence. In some settings such as dance and aesthetic- or weight-dependent sports, factors such as body weight and image come into play, with individuals in these environments more sensitive to perceived demands on their body weight and shape (Arcelus et al., 2014; Wells et al., 2020). Other factors that are especially relevant include financial difficulty and job instability, social media or audience abuse, and exposure to significant injury (Reardon et al., 2019; Van den Eynde et al., 2016). Approaches to responding effectively to these difficulties are needed for performers.

Self-compassion as the antidote for performer distress

In line with Gilbert (2014), we define compassion as “the sensitivity to suffering in self and others, with a commitment to try to alleviate and prevent it” (p. 19), thus incorporating both compassion for others and self; while acknowledging other definitions exist (e.g., see Mascaro et al., 2020). We, among others (Mosewich et al., 2019), suggest that self-compassion may be valuable for competitors. The ability to be self-compassionate, either intrinsically or through cultivation and training, has been associated with a range of positive outcomes in both general and clinical populations (Ferrari et al., 2019; Kirby, 2017; Kirby et al., 2019; Marsh et al., 2018; Turk & Waller, 2020; Wilson et al., 2019a). There is also a growing literature on the benefit of self-compassion in performers, which – to the authors’ knowledge – has all been conducted thus far in athletes (Mosewich, 2020; Mosewich et al., 2019). While the field to date is relatively limited by design, sample size, and scope, a range of cross-sectional studies tentatively link self-compassion with an enhanced ability to counteract the undesired cognitive and emotional responses associated with disappointing performances (Barczak & Eklund, 2018; Killham et al., 2018), injury (Huysmans & Clement, 2017), and body image concerns (Eke et al., 2019). In addition, adaptive physiological responses (by way of heart-rate variability) has been demonstrated in more self-compassionate athletes following recalled failures (Ceccarelli et al., 2019). Finally, of relevance in a clinical context, self-compassionate athletes tend to display enhanced well-being (Eke et al., 2019; Ferguson et al., 2014) and reduced psychological distress (Walton et al., 2020).

Unfortunately, only limited evidence exists regarding compassion-based interventions within performers. As represented in Table 1 and the supplementary materials, interventions in the general population typically rely on tools such as compassionate imagery, loving-kindness meditations, compassionate writing, and evolutionarily-informed psychoeducation

(Gilbert, 2020; Kirby, 2017). In sport, Mosewich et al. (2013) developed an intervention which primarily focused on self-compassionate writing exercises, which led to increased self-compassion along with reduced self-criticism, rumination, and concern over mistakes. However, another brief study from Reis et al. (2015) was unable to produce more adaptive athlete responses to emotionally difficult sport-specific situations, tempering enthusiasm for self-compassion interventions to this point. Given the promising cross-sectional results linking self-compassion to a range of positive outcomes, the field desperately needs evidence from well-structured and adequately powered compassion-based interventions in these populations. Of note, the authors of this commentary are currently developing a self-compassion-guided intervention for performing artists.

Perhaps one reason why interventions are lacking in this population, relates to the presumed difficulty of engaging athletes and competitive performers with compassion-based concepts. Here, we discuss why these perceived barriers are likely a fallacy, with many athletes able to relate to self-compassion when these concepts are accurately understood.

“But there’s no room for compassion in performance”

A commonly expected response from individuals who have come up through high performance contexts is to resist or reject the potential benefit of being self-compassionate. Indeed, on an individual level there is some truth to this assumption. Qualitative studies have highlighted that some athletes view compassion as a weakness, with one telling quote suggesting “*most people who are like that don't go as far in sports because they're too easy on themselves*” (pg 212; Ferguson et al., 2014). However, such views may not be as dominant as assumed. For example, in a recent study, we anticipated that elite athletes who participate under higher competitive demands, would be less self-compassionate or even *fearful* of being self-compassionate. This hypothesis was not supported, with no meaningful differences

observed across varying levels of competition (from local/social to international) [AUTHORS BLINDED FOR REVIEW]. A key role of applied work with performers is to understand the broader meaning behind self-compassion, and to assist athletes and performers in relating to self-compassion as a motivational mechanism. In fact, there may be merit in many clinical settings to avoid the word “compassion” altogether, as alluded to by Mosewich et al. (2019), instead leaning into the underlying qualities (i.e., an awareness of one’s suffering and the motivation and ability to engage in self-caring and self-soothing behaviours).

Within competitive sport and the performing arts, performances have significant real-world consequences to the individual; including role selection, sponsorship, contract renewal, peer trust/approval, and so on. Performances that are insufficient are often met with significant criticism from external sources such as coaches and teachers, media, and critics. Further, setbacks, disappointments, and failures are all potential triggers to an individual engaging in their own hostile self-criticism. Performers are required to constantly improve, and the reality of these contexts is that *triggers* to self-criticism are constant and often inescapable. Given the prominence of fear of failure, individuals often rely on self-criticism as a key motivational relating style (Mosewich et al., 2014; Sutherland et al., 2014). However, in athletes and musicians, previous work has demonstrated that overly self-critical approaches are ineffective at achieving performance-based goals and lead to poorer wellbeing (Powers et al., 2009). In the broader literature, there is a growing body of neuroscientific work showing that if the texture of the self-criticism is one of hostility and anger (i.e., self-attacking), this is particularly damaging for the individual (Kim et al., 2020a; Kim et al., 2020b).

However, self-compassion can be equally concerned with goal attainment, as it provides a safe and non-judgmental context where an individual is able to process

undesirable aspects of one's performance, and strive to better them in future. For example, across a range of experiments in non-performers, an influential study by Breines and Chen (2012) illustrated how self-compassion is a particularly effective approach to motivating improvement and growth. A number of studies have also found that many athletes see the ability to be self-compassionate as critical to motivation and responding to adversity (e.g., Ingstrup et al., 2017). Thus, contrary to common misconception, self-compassion is not simply accepting mediocrity, and may offer performers a way to encourage their efforts and to pursue their goals in ways that are supportive, as opposed to being hostile and attacking. In the sports context, self-compassion may be considered by some to be the antithesis to mental toughness; however, Wilson et al. (2019b) described how athletes actually see self-compassion as critical in the development of mental toughness, for if they did not use self-compassion, they would struggle to move past moments of adversity. In the final section, we provide guidance on how psychologists working with performers can help to instigate more self-compassionate behaviour for the betterment of their performance goals and well-being.

Nurturing self-compassion in your practice

There are number of systematic reviews and increasing meta-analytic evidence supporting the efficacy of compassion focused approaches for a range of populations and mental health difficulties (Craig et al., 2020; Kirby et al., 2017b). When considering implementing a compassion-focused approach with performers, there are multiple elements to consider. As a starting point for clinicians, we have provided a succinct summary of key information regarding assessments, interventions, and resources in Table 1, as well as transcripts in the supplementary materials. The information contained within this table and section is informed by our combined clinical experience working with the compassion focused therapies and/or performers, as well as evidence-based guides alluded to throughout (e.g., Gilbert, 2010).

Assessment is critical to understanding an individual's compassionate traits and motivations which may inform formulation, as well as keeping track of potential growth and clinically relevant change. A range of well-used and validated scales can provide insights into how performers relate to compassion-based concepts. The Fears of Compassion Scale (Gilbert et al., 2011) is a good example, with meta-analytic work finding these fears are associated with higher levels of self-criticism, shame, depression and anxiety (Kirby et al., 2019). A recent study also found that fears of compassion are significantly higher in clinical populations such as those with Obsessive-Compulsive Disorder, Social Anxiety Disorder, and Generalised Anxiety Disorder compared to those with no current mental health difficulties (Merritt & Purdon, 2020). A second relevant scale is the Forms of Self-Criticising/Attacking & Self-Reassuring Scale, which differentiates whether individuals are self-criticising to improve or to punish (Gilbert et al., 2004). Of particular use for feedback to the performer is the Compassion Motivation and Action Scale (Steindl et al., 2021). This is the first self-report scale to assess for weekly change in whether someone *acted* self-compassionately, with a recent study finding the measure was sensitive to change in an 8-week compassionate mind training program (Matos et al., 2021). Neff's Self-Compassion Scale (Neff, 2003) is a frequently-used tool, with meta-analytic evidence suggesting those scoring in low ranges to have higher levels of depressive and anxious symptoms (MacBeth & Gumley, 2012). In terms of sport-specific measures, the recently developed Athletic Perceptions of Performance Scale (Rice et al., 2021) can assess for shame- and guilt-proneness, key targets for compassion work. These assessment tools can be used at the beginning, mid- and end-treatment stages to determine how the performer is responding to compassion-based interventions.

Further to assessment tools, it is critical for practitioners to listen to how the performer is talking about and framing their difficulties. For example, gauging how

performers view instances of setbacks, disappointments, and failure. Potentially of most importance, is understanding their patterns of self-talk after these experiences, as these are all triggers to hostile self-critical attacks (Werner et al., 2019), which can increase rumination and neurophysiological threat responses (Kim et al., 2019; Kim et al., 2020b). If the individual is experiencing self-criticism in relation to a disappointment, one way a practitioner can assess for a client's capacity for compassion is by posing a hypothetical to them. That is, they can ask the performer, "if this was a close friend of yours, another performer who you cared about, what would you say to them? How would you feel about them?" To this question, more often than not, the individual is able to offer compassionate understanding and encouragement. Such a hypothetical also allows an opportunity for the clinician to validate the client's wisdom, as it suggests the client is not only compassionate, but recognises the helpfulness of compassion to assist their friend, team-mate, or fellow performer in times of difficulty. However, it is common for those who have difficulties with self-compassion to be good at directing compassion outwards to those they care for, as opposed to directing it inward. Thus, the clinician can then follow-up this question with, "what would worry you about directing this kind of response to yourself"?

This line of questioning enables the performer to explore and possibly discover any fears or resistances they have towards being compassionate. One possible difficulty here is the environment in which the performer operates, with potentially contrasting voices from coach or teacher. Athletes for example, are known to engage with self-compassion more readily when it is normalised within the performing contexts by teammates (Crozier et al., 2019; Ingstrup et al., 2017). Anecdotally, we know that coaches can be hesitant to engage with concepts around compassion, and therefore this can become a friction point if performers feel they are trying to adopt an 'opposing' style. This may be helped by strong communication between the triad of performer-coach/teacher-psychologist if feasible, and

psychoeducation regarding the potential performative and well-being benefits of compassion are likely to be key for coach or teacher buy-in.

Often there are misunderstandings of what compassion is, with many believing that if they were to adopt a self-compassionate mind-set, this would mean settling for mediocrity and no longer striving for improvement. Thus, it is critical in the therapeutic process to be clear about what compassion is and what compassion is not. For suggestions on how to do this clinically there are many books available (e.g., Gilbert, 2010; Kolts, 2016). One approach would be to ask the client what their greatest fears are in becoming more self-compassionate. If the client lists qualities that infer compassion as being weak (e.g., self-indulgent, selfish etc), the therapist can explore through Socratic dialoguing where these ideas of compassion originated. Indeed, the focus of the therapeutic journey is often working with understanding, and validating the fears, blocks and resistances clients may have to developing compassion towards oneself (Kirby & Gilbert, 2017).

Often the most effective way to work on reducing the fear response to compassion is with exposure. Thus, leaning on case formulation and clinical judgement, the practitioner can begin to introduce specific practices aimed at gently nurturing and developing self-compassion. This provides an opportunity for the client to experience the practice and reflect on aspects of the exercises that worked well or that they struggled with, developing the therapeutic discussion. Examples of initial techniques include working with body posture, soothing rhythm breathing, and then adopting a compassionate-mind-set. We have provided a set of example transcripts within the Supplementary Materials of this manuscript, to guide clinicians and researchers in using some of these tools with performers. These exercises are used within compassion-focused therapy approaches (Kirby & Gilbert, 2017), with meta-analytic evidence supporting their efficacy at reducing self-criticism, depression, anxiety, as well as increase self-compassion (Kirby et al., 2017b). Such resources are certainly not

considered definitive, and may be used and adapted as appropriate, utilising clinical judgement. A recent study used this technique with a 15-minute audio guided meditation, and over a two-week period found it reduced fears of compassion, as well as increasing heart rate variability (Kim et al., 2020b).

Summary

We have highlighted why compassion-focussed approaches to improve self-compassion among performers is a valuable approach to managing the psychological distress that is common among this population. We encourage psychologists who work with these populations to develop their skillset in delivering compassion-informed approaches within therapy, particularly in instances where motivation drives are stemming from self-critical attacks and fear of failure. We also call upon researchers to further develop our understanding of self-compassion and mental health among performers, particularly in the performing arts where evidence is lacking.

Table 1. Overview of relevant resources and guides for clinicians interested in implementing compassion-based interventions with performers

	Measures	Therapist Enquiry	Established Compassion Interventions	Key Exercises	Resources
Therapist Options	<p>Self-Report Scales</p> <ul style="list-style-type: none"> Compassion Motivation Action Scale (CMAS; Steindl et al., 2021) Fears of Compassion Scale (FCS; Gilbert et al., 2011) Self-Compassion Scale (SCS; Neff, 2003) Forms of Self-Criticising/Attacking & Self-Reassuring Scale (FSCSR; Baião et al., 2015) Compassion Engagement and Action Scale (CEAS; Gilbert et al., 2017) 	<ul style="list-style-type: none"> How do you respond to someone you care for when they struggle? How do you view compassion? What would be your greatest fear of being compassionate? What do you think would happen if you were to be compassionate to your struggles? What are the benefits of you 	<ul style="list-style-type: none"> Compassion Focused Therapy (open ended psychotherapy; Gilbert, 2010) Compassionate Mind Training (time limited set skills based program; Gilbert & Procter, 2006) Mindful Self-Compassion Program (Neff & Germer, 2018) Compassion Cultivation Training (Jazaieri et al., 2013) 	<p><i>Example transcripts are provided within the supplementary materials.</i></p> <ul style="list-style-type: none"> Developing the Compassionate-Self Safe Place Imagery Compassionate Image 	<p>Books</p> <ul style="list-style-type: none"> Compassionate Mind (Gilbert, 2010) CFT Made Simple (Kolts, 2016) Mindful Self-Compassion Workbook (Neff & Germer, 2018) <p>Websites</p> <ul style="list-style-type: none"> Compassionate Mind Foundation (https://www.compassionatemind.co.uk/) Center of Compassion & Altruism & Research Education (http://ccare.stanford.edu/) <p>Online Guided Meditations</p> <ul style="list-style-type: none"> Compassion Initiative (https://soundcloud.com/jamesn-kirby/sets/compassionate-mind-training-1)

	<p>Physiology</p> <ul style="list-style-type: none"> Heart Rate Variability (Kirby et al., 2017a) 	<p>being self-critical?</p>	<ul style="list-style-type: none"> Cognitively Based Compassion Training (Ash et al., 2021) Buddhist Compassion Meditations (Hofmann et al., 2011) 		
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**Supplementary Materials: Transcripts for Example Compassion Techniques
for Developing the Compassionate Self**

Compassionate Self Exercise

Hello my name is _____, and over the next 10-15 minutes I will be guiding you through a practice, which helps develop your compassionate-self.

Body Posture

So get comfortable in your chair, feet flat on the ground. And you may like to close your eyes if you feel comfortable doing this.

And now focus on your body and how it is sitting in the chair.

The posture we have for this exercise is shoulders back, chest open, with hands resting in your lap or on the top of your legs.

This is our compassionate body posture, one that is stable, has stillness, but one which is comfortable.

Now we are going to focus on our breathing

Soothing Rhythm Breathing

For this breathing we will be breathing slightly slower and slightly deeper than we would normally. We're going to aim for about five breaths per minute.

The in-breath is about 4-5 seconds ... we then pause... and then take 4-5 seconds for the out-breath. The key is the smoothness of the breath -so 'in' smooth and 'out' smooth.

So let's begin and I will count you in

Breathing In-2-3. Out 2-3.

In-2-3-4. Out 2-3-4.

In 2-3-4-5. Out 2-3-4-5.

In 2-3-4-5. Out 2-3-4-5.

And just continue with that breathing rhythm

You can continue with the count but you don't have to, just stay with the rhythm.

Pause 10 sec

As can happen if or when your mind wanders gently bring your attention back to the breath with an attitude of friendliness.

Just stay with this now for one minute

60 seconds

Compassionate-Self

So now we're going to deliberately switch our mind state, and as best we can, to start to develop the mind and body pattern of what we call the compassionate self.

To do this we are going to focus on some very specific qualities of compassion that you can add to your own personal and unique qualities you want to create in your compassionate self.

These are the qualities of your compassionate wisdom, strength and commitment.

So the compassionate self has a deep wisdom that we all just find ourselves here part of the flow of life, with a tricky brain that can get is caught up in

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worry loops and anger and frustration – and this is not your fault -- you have this wisdom right now and you understand other people could be like that too. So you have a wisdom of no-blame and judgment, but of openness and understanding that life is difficult and tricky at times.

30 seconds

Now try to imagine that your wisdom comes from a sense of strength. Try to connect with an internal sense of strength, by focusing on your body posture and your soothing rhythm breathing. A solid posture, as if your body was a mountain, your breath a soft breeze, and your mind a clear and open sky.

30 seconds

Now based on this strength and wisdom, try to focus on your commitment to be compassionate, and your desire to be helpful to people, to use wisdom and strength where you can and help others, as well as yourself.

60 seconds

Notice how you feel when you imagine yourself like this, with these compassionate qualities. It doesn't mean that you actually feel like this now; we are simply imagining what it would be like to be this way, a compassionate person.

Now to develop this practice a step further I'd like you to imagine you're watching a video of yourself. You see yourself getting up in the morning.

Now holding your position of compassion, watch yourself moving around
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your room and slowly getting on with your day. Try to notice how the person that you're watching (yourself) is sometimes troubled by self-critical feelings or thoughts, maybe shame or fear, troubles about relationships past or present. Try to just be in touch with the person you are watching – try to notice the struggle and the suffering but maintain your position of inner strength and wisdom. In other words, looking out through the eyes of your compassionate self with the intention of being helpful. How would you respond to yourself when in pain or struggling? How would you respond to others? What would you say, how would you say it? Try to get a feel for what it would be like, to respond as your compassionate-self. It might be tricky, but just try to imagine, as best you can, you are this compassionate person.

Now just letting that imagery go and return slowly back to our breath, noticing the rise and fall of our belly, and noticing the contact our body makes with the chair. Getting a greater sense of the room and space around us.

Safe Place Imagery

(A practice key in Compassion Focused Therapy)

Hi my name is _____, and today we are going to work on a new exercise called, Safe Place Imagery.

We focus on safe place imagery because we are going to try and create a place in our mind – a place that could give us the feeling of safeness, calmness.

If you are feeling very depressed or anxious those feelings might be difficult feelings to generate, but the act of trying, and the sense of it being the sort of place you would like to be is the important thing here.

So remember, it is the act of trying the practice that is important, and the feelings of safeness and calmness may follow later.

So it is also important that when we do this exercise that we realise the big difference between safeness and safety. A place of safety is where you are cut-off from the rest of the world so that bad things can't happen, so like being a bunker under ground, you are safe from bad things happening, but you are also cut-off, and restricted.

Whereas a place of safeness is where we feel able to explore our surroundings, we are free, we can have open attention and playfulness.

With a feeling of safeness comes the freedom to explore. This is an important distinction, and we are building a place of safeness.

It is also important that when we practice these skills that you gently play around with them, and try these different techniques in different ways to work out what best works for you.

Ok, so let us begin the exercise.

First, get comfortable, and you can do this either sitting or standing, it is up to you.

And remember always respect the process, so remember our posture.

Shoulders back, spine straight, open chested. And remember our friendly facial expression and friendly inner voice tone as we do this exercise.

And you may like to close your eyes if you feel comfortable doing this.

That is what I will be doing.

And now just bringing our attention to our breathing. Connecting with our Soothing Rhythm Breathing.

Breathing In-2-3-4. Out 2-3-4. In 2-3-4. Out 2-3-4

Noticing the sensation of our mind slowing down, and body slowing down. And becoming more grounded and stable in the body.

And now I would like you to bring to mind an image of a place where you feel a sense of safeness. A place where you are free to explore, a place where you feel calm and at ease. The place could be anywhere, it might be at the beach, in the mountains, or in a forest somewhere. It could be a place you have been before, but it doesn't have to be. I'll just give you a moment to imagine a place of safeness.

The image doesn't have to be a perfect polaroid picture, it is just a sense of the place you are creating. It might be just fleeting or hazy, and that is perfectly fine.

And you might have a number of places that come to mind, but now I'd like you to settle on just one. For now, at this point of time, just pick one place.

And now I really want you to connect with this place through your sensory qualities. So what do you see? What do you see this safe place? Are the

colours rich and bright? What time of day is it, is it the morning or is it the evening?

And what do you feel against your skin? Is there a light breeze in this safe place you are creating? What's the temperature like, is it warm or is it slightly cold. If you are barefooted, what does the ground feel like beneath your feet as you walk around?

What can you hear? If your safe place is outside can you hear any animals in the distance – say a bird for example? Or if you are at the beach can you hear the waves gently reaching the shore.

What do you smell in this safe place?

Try to allow your body to relax into this place. Imagine your facial expression and allow it to have a rested, gentle, and soft smile about being in this space.

And now we are going to move from the sensory qualities of this safe place, to the relationship quality we have with this place. So it is important to remember that you created this safe place, it is your own unique place, created by you. So the place takes joy in you being here. It welcomes you here, it wants you here, you belong here.

And just explore how it might feel if your safe place takes pleasure in you being there. Explore your feelings when you imagine this place is happy with you being here.

You might even find that you have only a fleeting image of this place. But no matter how fleeting, try to bring it into mind, and try to *feel* what it is like to be in this place, and even try to create an emotional connection to the place.

Just noticing what it is that you are doing here, in this place of safeness, this place where you have freedom, the freedom to explore.

And now just letting that imagery go, and connecting again with our breath.
Noticing the sensation of the breath coming in and coming out.

Knowing we can always return to this place of safeness. It is something that we have created in our minds. It is a place that brings a sense of safeness, calmness, and stability.

And just take a moment for yourself to reflect on this exercise. What was it like? Were you alone in your safe place, were others there with you?

Where was it? How did you feel at this safe place?

And, you might like to practice this exercise again, just for a few minutes, at different times of the day. You could be anywhere, at home, on the bus, or at work. The key is to just focus on the safe space imagery and connecting with that feeling of belonging at this place and the place taking joy in you being there. You might like to try different places and see what happens.

Noticing that when we connect with safe space imagery it helps us slow down and feel a sense of safeness and calmness, it is our secure base, which we have created in our own minds.

Compassionate Image

(A practice key in Compassion Focused Therapy)

Hi my name is _____, and today we are going to work on a new exercise called, Building a Compassionate Image.

This exercise is to help you build up a compassionate image for you to work with and develop (you can have more than one if you wish, and they can change over time). But whatever image comes to mind, or you choose to work with today, it is important to note that it is your creation and therefore your own personal ideal - is what you would *really* like from feeling cared for and cared about.

In this practice it is important that you try to give your compassionate image certain qualities. These include:

- Strength, courage, wisdom, warmth, and kindness.

So building our compassionate image with these qualities helps us to continue to build our compassionate mind.

So let us begin the exercise.

So first, get comfortable, and you can do this either sitting or standing, it is up to you.

And remember to respect the process, so remembering our posture.

So shoulders back, spine straight, open chested. And remember our friendly facial expression and friendly inner voice tone as we do this exercise.

And you may like to close your eyes if you feel comfortable doing this.

That is what I will be doing.

And now just bringing our attention to our breathing. Connecting with our Soothing Rhythm Breathing.

Breathing In-2-3-4. Out 2-3-4. In 2-3-4. Out 2-3-4

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Noticing the sensation of mind slowing down, body slowing down. And becoming more grounded and stable in the body.

Now, let's begin by simply imagining what a compassionate person might look like.

For you, how might a compassionate person look? People sometimes describe compassionate people as having warmth and kindness, displaying a kind of wisdom that comes from their own experiences, and a non-judgemental/non-condemning stance towards themselves and others. There might also be a desire to help alleviate suffering in others.

Please just take a few moments and try to imagine what a compassionate person would look like for you, and what their qualities would be.

So what would you want your caring/nurturing image to look like, would you like them to seem old or young; male or female (or non-human looking e.g., an animal, sea or light) – so perhaps a strong mountain, or the warming sun, or a big stable tree.

Would your compassionate 'image' have gone through similar experiences to you? Would they be like a friend or even part of a team that welcomes you to belong?

Just let images emerge in the mind –as best you can – do not too try to hard - if nothing comes to mind, or the minds just wanders, just gently bring it back to the breathing and practice compassionately accepting this.

Now I would also like you to attend to your own desire to become a compassionate person, and how you would think, behave, and feel.

Imagine the sense of kindness and warmth, and a gentle, non-judgemental, non-condemning stance.

What might your tone of voice be?

What kinds of things would you be saying or doing?

Imagine your strength, courage and commitment at wanting to help others to alleviate their suffering, and wanting the same for yourself.

You might even like to create a compassionate facial expression, like a half smile or some other expression that embodies compassion.

If you don't feel like you are a very compassionate person that is OK, the key is to imagine that you are becoming a compassionate person.

And as you do this, I'd like you to pay attention to what you are noticing in your body.

Remember, like any skill, this will take some practice, so don't worry if it feels unnatural or awkward at first. It will become easier and more natural with practice. It's like working out our compassionate muscles.

And now just connecting with our breath again, breathing in-2-3-4 and out-2-3-4. Focusing back on our body and how it feels to be seating in the chair.

Feel free to practice this again, and maybe playfully noticing differences that come up when creating a compassionate image. Some days it might be a person other days an animal, and some other days something else. The key is to connect with those qualities of Strength, courage, wisdom, warmth, and kindness, as this helps build our compassionate mind.