

REVIEW ARTICLE

Compassion as a Framework for Creating Individual and Group-Level Wellbeing in the Classroom: New Directions

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Abstract

The success of Social Emotional Learning (SEL) interventions is thought to rely on teacher social emotional competency, student-teacher relationships, and the readiness of the school environment. From an evolutionary motivational systems perspective, an underlying driver behind these aspects is the motivational state of students and teachers. Providing a foundational framework for supporting SEL development may be a critical differentiating factor in successfully incorporating SEL into curriculum to enhance individual and group-level wellbeing. This article presents compassion as a motivational framework that can be used to support SEL. We review theoretical perspectives and empirical research applying compassion to help regulate emotional experience and provide a series of possible suggestions on how to integrate compassion into classrooms. Specifically, we provide a series of suggestions on how compassion can help with student and staff wellbeing. A compassionate approach to establishing a positive classroom environment and incorporating simple activities adapted from compassion-focused therapy may provide a baseline conducive context in which SEL is accepted and thrives.

Keywords: Compassion; emotion regulation; compassion focused therapy; social and emotional learning; connection

The broad adoption of Social Emotional Learning (SEL) programs in schools has led researchers and educators to call for a greater understanding of how to support SEL integration and build sustainability and fidelity in its implementation. Teachers are central in managing the social emotional landscape of the classroom, relying on their own social emotional competencies to model skills and build a supportive environment (Jennings et al., 2019). While teacher SEL competencies and self-efficacy have been shown to play a major role in SEL implementation success (Thierry et al., 2022), there has been less focus on how teacher (and student) *motivations* influence SEL outcomes. Evolutionary psychology frameworks such as evolutionary motivational systems theory (Gilbert, 2015) view motives as innate drivers of behaviour geared towards meeting basic needs for survival and reproduction. Different motivational states are activated adaptively in response to current goals and social contexts, and shape behaviour, emotional responses, and social interactions. Jennings et al. (2021) recently argued that understanding motivational states and their interaction with SEL competencies is critical for promoting prosociality in the classroom. Modelling conducive motivational states by teachers may form an implicit but necessary step in establishing a classroom climate conducive to SEL curriculum. We argue here that a framework based on cultivating compassionate motives may provide a foundation for supporting SEL implementation and provide suggestions for enabling a prosocial environment with an understanding of underlying motivational systems.

Compassion

Compassion can be defined as, ‘sensitivity to suffering in self and others, with a commitment to alleviate and prevent it’ (Gilbert, 2014, p. 19). This conceptualisation comprising two key components, engaging with suffering and the willingness to help alleviate suffering, views compassion as a *motivation* rather than subsequent prosocial behaviour per se. This definition also draws a distinction between empathy and compassion — where empathy is required to detect suffering, it does not necessarily involve the motivation to alleviate it.

Compassion involves compassionately relating with others, with ourselves, and being open to receiving compassion from others. Research has found that all three directions of compassionate relating are associated with improved positive affect and wellbeing (Gilbert & Basran, 2018). Individuals may be high in one aspect of compassion, but not others. For example, individuals can struggle with relating to themselves with self-compassion and receiving compassion from others but are able to show compassion to others (Carter et al., 2021). Critically, context can either inhibit or facilitate compassionate actions. If the context is one of safety, trust, and support, compassion will be expressed. However, if it is a context of competitiveness and threat it will be inhibited (Kirkland et al., 2022). Navigating social contexts and overcoming potential barriers to interpersonal relationships is fundamental to developing compassionate relating. Thus, in many ways, the classroom is a unique environment for the development of compassionate capabilities in children and adolescents.

While compassionate motives are thought to be an emergent evolutionary property in humans, it is not an innate, unmalleable trait. The focus of compassion focused therapy is to improve the sensitivity to suffering in self and others, as well as increase motivational states to act to alleviate suffering. Indeed, mindfulness-based interventions for teachers are effective in improving self-compassion (Klingbeil & Renshaw, 2018). Therefore, cultivating compassion during critical stages of development is a promising target for SEL programs.

Compassion During Development

We learn to be self-compassionate based on how others have related to us. Research has found that if we are often criticised by others, particularly parents and teachers, we are more likely to adopt a self-critical relating style (Thompson & Zuroff, 1999). Conversely, if others have been generally compassionate to us, we are more likely to learn to relate self-compassionately (Beaton et al., 2020). Emerging parenting research has found that compassion-based modules, including parent training, can improve not only self-compassion in parents, but improve prosocial behaviour in children (Hoang et al., 2022). This is important, as the meta-cognitive capacities involved in self-relating (how one evaluates and relates to oneself) emerge later in maturational development. Thus, parents and teachers have a powerful role in helping develop childhood compassion (Kirby, 2020).

Importantly, like adults, children and adolescents do not show compassion equally to all. Children aged 2 years will engage in altruistic helping so others can complete action-based goals (Warneken & Tomasello, 2007). In contexts of suffering (e.g., distressed puppets or actors) 4- to 5-year-old children act compassionately only when there is no personal cost involved (Green et al., 2018). Research has also found that children aged between 4½ and 6 years are selective with who they help, preferring friends and treating nonfriends less well when making decisions on how to allocate resources (Moore, 2009). Further, children are more likely to help those who have been previously more helpful than those who have not (Olson & Spelke, 2008). Children have been found to show an increasing preference for in-group members with exclusionary treatment of others in the out-group from ages 5–10 years (Fehr et al., 2008).

During adolescence there are significant changes and growth in cognitive capacity; however, research shows that cognitive (perspective taking) and affective (emotional) empathy in adolescents is not as developed as adults, both of which help inform compassionate action (E.J. Kim et al.,

2020). A cross-sectional study of 12-, 13- and 14-year-olds has also found that self-compassion, compassion to others, and compassion towards the environment all decreased with age (Bengtsson *et al.*, 2016). Therefore, supporting teachers and staff in methods of purposefully creating classroom conditions to enable, model, and reinforce compassionate efforts for children and adolescents is key to facilitating this development.

Understanding Compassionate Motivations

Compassion is crucial to promoting social-emotional development in schools, according to Gilbert's (2014) social mentality theory. Social mentality theory is an evolutionary model that suggests that individual patterns of cognition, affect, physiology, and behaviours are determined by the contextual social roles in which the individual is engaging. There are many social motives (e.g., competitive, cooperative, sexual, and compassionate) that can lead to different role relationships with others (e.g., teacher-student, parent-child, therapist-client, employer-employee) and relationships with ourselves. Gilbert (2014) suggests that our environments can shape which social mentality is 'turned-on', and thus whether we are in competitive or compassionate role relationships with others or ourselves. In this respect, the school classroom can be highly influential. Gilbert (2014) postulates two crucial motives for social and emotional development: competitive and compassionate motives.

Competitive Motives

Competitive motives are when individuals monitor social relationships and engage in social comparisons to determine their relative rank or status (e.g., 'Am I superior or inferior to others?'). This can lead to feelings of external shame (e.g., 'Others see me as less than or inferior') resulting in submissive or aggressive behaviours (e.g., hiding, avoidance, or perfectionistic over-compensation). During adolescence there are significant changes in peer belonging and social standing among peers (Baumeister & Leary, 1995), particularly in relation to evaluative domains such as appearance, popularity, as well as avoidance of rejection and ostracism (Irons & Gilbert, 2005).

Based on social rank theory and its associated findings (e.g., Gilbert *et al.*, 2007), it becomes apparent that internally competitive social groups (e.g., schools) can have a major impact on shame proneness, impression management, and self-identity. Competitive environments are more likely to make people focus on the competitive nature of their social relationships, which can activate a rank-focused, social mentality related to heightened social comparison, concerns with inferiority, and consequent rejection (Gilbert, 2014). In schools, this may stimulate fears in students, which encourages 'striving' to win a place in the social domain to avoid rejection, criticism, and being overlooked by others. When one is driven by competitive motives and experiencing shame, it increases the likelihood of relying on self-criticism as a way to self-regulate, which is associated with mental health difficulties (J. Kim *et al.*, 2020).

When individuals are competing to avoid inferiority, and thus rejection or exclusion by others becomes central, they can be operating with a 'competitive motive'. An example of an 'insecure striver' is somebody who believes they are only valued when they succeed. Conversely, a 'secure non-striver' is somebody who believes that others will accept them even if they fail. Competitive schools and classrooms can inadvertently stimulate insecure striving, which is a vulnerability factor for mental health. For example, one study found that insecure striving was associated with social comparisons, submissive behaviours, external shame, elevated stress, anxiety, depression, and a highly competitive attitude. (Gilbert *et al.*, 2007). The implications from these findings are that insecure strivers are very focused on validation seeking, which makes individuals vulnerable to psychopathology, particularly in highly competitive environments.

Table 1. Competitive and compassionate mentalities in action

Situation: Student is selected last in a group activity	
Competitive mentality	Compassionate mentality
<i>Everyone else is better than me</i> (Social Comparison)	<i>Hurts being picked last</i> (Sensitive to distress)
<i>They don't want me in the team really</i> (External Shame)	<i>Can't always be picked first</i> (Perspective taking)
<i>I am a loser</i> (Self-criticism)	<i>I know I've got friends in this group</i> (Self-reassuring)
<i>I better stay quiet</i> (Withdraw) OR <i>I better show I am smart</i> (Overcompensation)	<i>I hope I can contribute in a useful way</i> (Encouragement) <i>I'll tell Tim how it hurts being picked last; he is supportive</i> (Help seeking)

Compassionate Motives

Compassionate motives are focused on alleviating distress and can facilitate self-reassurance and encouragement (J. Kim et al., 2020), as well as help-seeking behaviour (Dschaak et al., 2021). A compassionate environment helps stimulate feelings of both safety and safeness. A sense of safety is experienced when there is a lack of threats detected in the environment (Gilbert, 2020). However, safety can interrupt explorative behaviour as safety does not mitigate against vigilance from potential threats. For example, in competitive and threatening environments, a student may seek safety by not answering a difficult question out of fear of getting it wrong, resulting in potential ridicule by peers. Safeness (or *social safeness*) is distinct from safety, referring to the sense that an environment is caring, supportive, helpful, and friendly (Gilbert, 2020). Safeness is not just the absence of threat, but an active signal of safety that suppresses threat processing. Socially safe environments characterised by care, support, and friendliness encourage openness and willingness to explore (Gilbert, 2014); for example, attempting to answer a question even if the answer may be wrong, but knowing that others will be supportive if it is incorrect. In organisational and human factors psychological research, this is often referred to as *psychological safety*, and is a major determinant of both learning and group performance outcomes in adult collaborative teams (Newman et al., 2017).

Neuroscience research indicates that relating self-critically when experiencing a setback magnifies neural activation associated with pain (anterior insular/anterior cingulate) and threat (amygdala) in the brain, compared to relating self-compassionately, which suppresses such activity (J. Kim et al., 2020). Table 1 illustrates the two different mentalities for an adolescent who was selected last in a group activity.

Three Affect Regulation Systems

According to Gilbert's social mentality theory, motives are linked to affect regulation, and are conceptualised as a three-affect regulation system of emotion (also known as the three-circle model; see Figure 1). As shown in the figure, the three emotion regulation systems interact and include: threat/self-protect system (red circle), drive/reward system (blue circle), and affiliative/soothing system (green circle).

The threat system detects and responds to threats (physical, emotional, and social) to direct behaviour towards self-protection and avoid harm and danger. This system is responsible for the physiological fight or flight response (sympathetic system) when faced with threat (Gilbert, 2014). As such, the threat system is the most dominant emotion regulation system and is prioritised over the other systems, given it is focused on harm avoidance and survival. The drive system regulates behaviour involving seeking and obtaining resources (e.g., food, status, sexual opportunities, and friendships) and achieving desired goals). The emotions elicited in the drive system include positive emotions of excitement,

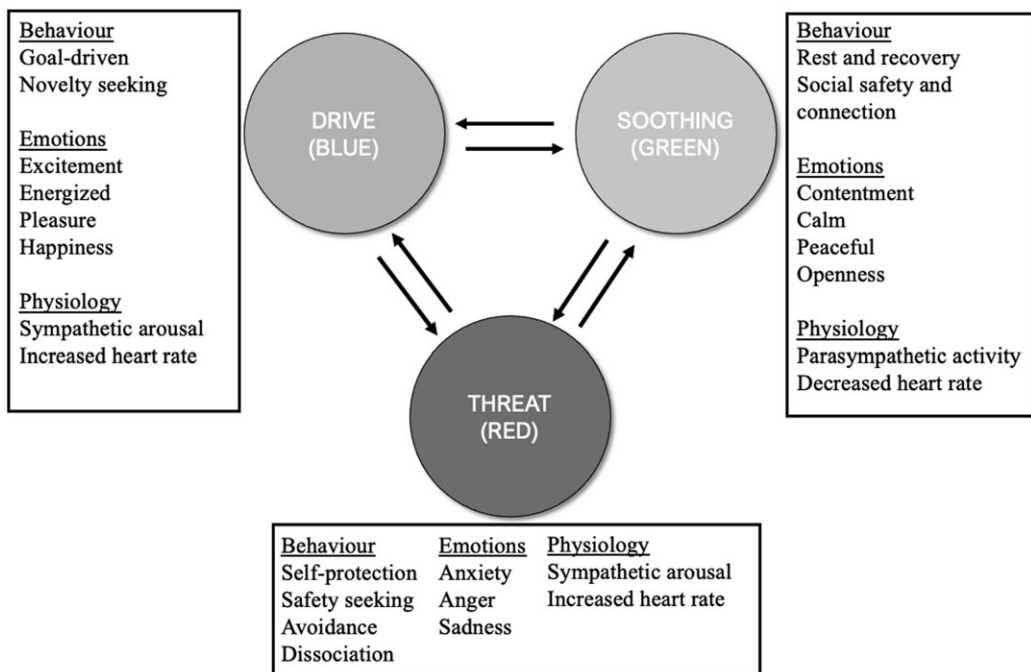
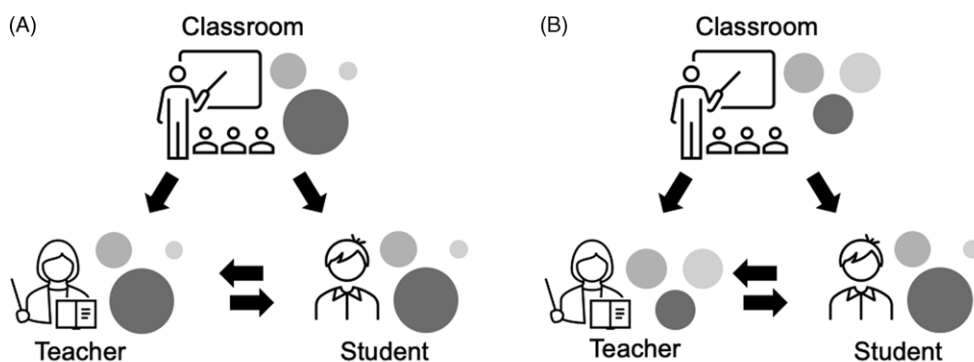


Figure 1. Interaction between the three major emotion-regulation systems, with examples of behavioural motivations, affective states, and physiological states. Adapted from Gilbert (2009).

pleasure, and happiness. The soothing-affiliative system functions to slow the organism to allow for important physiological actions such as recovery, resting, and digesting, and emotions connected to this system include feeling calm, content, and peaceful. According to Gilbert's model, the soothing system is linked to the parasympathetic nervous system that activates a slowing down of the autonomic nervous system and energy conservation. It is also linked to the experience of intra- and interpersonal safeness, which, for humans, is not necessarily derived from the absence of threats, but more specifically from the presence of 'affiliative and helping others', and our own ability to compassionately self-soothe when stressed. Critically, the soothing system plays a vital role in regulating the drive and threat systems — preventing dominance when it is not contextually appropriate (i.e., self-regulation).

Gilbert (2014) proposes that these three emotion regulation systems are influenced by motivation. How these systems operate is contextual, and in some contexts, it is important to have a more dominant threat-drive system, with a weaker soothing system (e.g., responding appropriately to a crisis). The key, however, is to examine how these systems are operating across all contexts, and the theory postulates that if one is compassionately motivated there is greater balance between these systems. Conversely, if one is competitively motivated, there is an over-reliance on the threat-drive systems, which is theorised to be a vulnerability factor for distress and mental health difficulties. How these systems are activated can be triggered by external (immediate threat in front of you) and internal factors (judgments we make). Therefore, a balance of these three affect regulation systems reflects successful emotion regulation.

The affect regulation systems can be regulated both internally through a range of different techniques (e.g., reappraisal, breathing, mindfulness, compassionate imagery) or externally by other people (e.g., peers, teacher). Regulation can also occur as a product of other cognitive or behavioural factors, such as music, sleep quality, exercise, time, food, drink, or distraction. Co-regulation (shared or reciprocal emotional regulation) is an important way of regulating our experience, with adults being critical to co-regulating child and adolescent distress and emotional experience. However, a teacher working in



Case Example: A teacher who is time-limited and pressured to cover material whilst preparing students for upcoming standardised tests. Students are worried and dislike tests, so become disengaged and talkative. In panel **A** (left), the teacher may become angry towards students in order to have quiet in the classroom, which has the potential to escalate if the student does not comply. In these experiences, all actors involved (teacher, students) are learning that one way to regulate distress (e.g., anxiety) is with threat. In panel **B** (right) is a classroom characterized by compassion, where the classroom climate is defined by a more balanced three circle configuration. When a student is distressed, the teacher can regulate the student's emotional experience not with threat but through compassion due to a stronger soothing response. This allows for greater composure and calmness in the environment.

Figure 2. Case example of a Competitive (A) and Compassionate (B) classroom environment.

a classroom characterised by competitiveness is likely to have regulation systems dominated by a dominant threat/drive balance, which will then be used to regulate child or adolescent distress. In these instances, it is a case of threat regulating threat in a context of threat (Figure 2A). Conversely, classrooms conducive to compassionate motivations can enable co-regulation guided by the teacher and peers to achieve greater balance (Figure 2B). An appealing aspect of this model is that it is easy to grasp and provides teachers and students with a shared language around emotional experience (e.g., red, blue, and green circles).

This approach to understanding emotional experience has been examined comparing community adolescent males and young offenders (Sousa et al., 2022). Patterns of physiological activity in this study aligned with the three circles (reduced parasympathetic activity for red and blue, greater parasympathetic activity for green) in community teens. Conversely, young offenders displayed decreases in parasympathetic nervous system activity when engaged in green circle activities, which the authors suggested mirror threat-like physiological responses to soothing. These findings provide important consideration for teachers, as students with behavioural difficulties or who display callous-emotional traits may not respond immediately favourably to compassion (Sousa et al., 2022).

Individual differences in response to compassion are not unusual. A large body of research indicates individuals can fear compassion (Kirby et al., 2019), which is associated with higher mental health problems. However, that does not mean that using compassion with young people should be avoided. On the contrary, directly fostering compassionate capabilities for the self and others through compassion focused therapy has been shown to effectively reduce psychopathic traits. In a large randomised controlled trial with young offenders, compassion focused therapy significantly reduced grandiose-manipulative traits, callous-unemotional traits, and impulsive-irresponsible traits compared to cognitive behavioural therapy (da Silva et al., 2021). While programs targeting aggressive behaviour and antisocial traits have been effective (e.g., Houghton et al., 2017), this research is geared towards *individual* mental health difficulties rather than at the collective group level.

Facilitating Compassion in Schools

While compassion is an innate and normative interpersonal process, interventions aimed at fostering compassionate motivations, sensitivities, and capabilities have shown great success. Meta-analytic work that included 21 RCTs and over 1200 participants found interventions can significantly increase compassion and self-compassion, while reducing depression and anxiety, and improving wellbeing (Kirby *et al.*, 2017). However, this work was done with adults. In the school context, the focus to date has been on how compassion-based interventions, such as Compassionate Mind Training (CMT; Gilbert, 2014), can help improve teacher and staff mental health, with randomised controlled trial data examining CMT compared to a control group finding it can improve self-compassion, compassion to others, positive affect and physiological regulation (increased heart rate variability), as well as decrease teacher burnout and stress (Matos *et al.*, 2022). However, little is known about how this translates directly to the student experience and prosocial behaviour between students, as well as the classroom environment.

Compassion, although helpful for teachers and school staff, has not yet been implemented to the same extent as other similar constructs, such as mindfulness. A comprehensive evaluation of a school-based mindfulness program was recently conducted, examining mindfulness as a universal program to help with student and staff wellbeing, as well as school climate, namely the 'My Resilience in Adolescence' (MYRIAD) program. The MYRIAD program was conducted in over 100 different schools, with more than 28,000 students, and taught by 650 teachers (Kuyken *et al.*, 2022), and compared to traditional social-emotional learning programs already embedded within the school. The results were not favourable, such that the intervention had no impact on depression, social-emotional-behavioural functioning, or for wellbeing. When examining subgroups, it was found that older students responded better, and those with mental health problems did not respond well. In contrast, the intervention helped decrease teacher burnout, but this was no longer significant at 1-year follow-up. It did, however, improve the school climate, specifically the value of respect. Findings suggested that no one single intervention approach is a panacea.

In relation to compassion-based approaches much can be learnt from the MYRIAD research. First, it is important to distinguish how mindfulness is different to compassion. Among many compassion scholars, mindfulness is considered an important competency or skill, but it should be paired with a motivation, namely a caring and compassionate motivation (Gilbert, 2020; Ricard, 2015). Mindfulness can increase the present moment awareness, but it does not inform what actions come next (Ricard, 2015). For students experiencing elevated mental health difficulties, becoming more mindful may only serve to increase the awareness of their pain, and the MYRIAD trial found it was less helpful for those with mental health difficulties (Kuyken *et al.*, 2022). Second, students did not practise mindfulness; on average, they only practised mindfulness once over the 10-week course. However, students who practised regularly showed improvement. This points to the critical need to listen to students' views and the importance of co-design processes in intervention development, as opposed top-down enforced interventions.

Recommendations

With the understanding of the systemic, structural, and resource challenges in educational systems, this article now attempts to provide actionable and practical recommendations for 'first steps' towards facilitating compassionate capabilities in young people in the classroom in lieu of an established program or intervention. We suggest compassion could be a royal road to multiple positive outcomes for student and staff wellbeing, positive classroom climate, school-home connection, and increased prosocial behaviour.

Psychoeducation

Providing students, teachers, and school community members with an understanding around the concepts of a compassionate framework is a relatively straightforward but necessary initial step. The three-

circle model in particular is an intuitive model that can be readily communicated to individuals across age groups, as is common in clinical contexts such as compassion focused therapy (Gilbert, 2010). Teachers can be creative with their students in how they represent and teach the three-circle model for younger children; for example, using different coloured hula hoops to represent which system is most dominant. A shared language such as the three-circle model can facilitate open communication between peers, between the student and teacher, and between students and parents. Facilitating this communication is critical for co-developing effective compassionate strategies with student and parent input.

Working with teachers in understanding the why behind compassion and how to adopt it in their classroom with students, or how to incorporate it with existing SEL interventions in place supports the long-term sustainability of such practices for themselves and their classrooms. More broadly, teacher professional development in terms of psychoeducation is critical in understanding normative development, as well as being able to relate their own emotion regulation to that of their students. This core understanding may facilitate co-regulation and afford teachers the chance to meaningfully reflect on their practice. Psychoeducation further builds a shared language among peers that can facilitate further practical steps towards staff wellbeing. For example, research has found that when completing compassion-based interventions, having a partner to share the experiences improves outcomes (Engert et al., 2017). Buy-in from students, teachers, and the school community relies on feasibility, accessibility, self-efficacy, and collective input based on a shared understanding of the goals and concepts involved in any framework.

Light-Touch Interventions

Implementing brief, short-term CMT can be an effective tool for improving short-term wellbeing and self-compassion (Matos et al., 2022). CMT uses techniques such as compassionate imagery and rhythmic breathing to improve self-soothing and respond to stress in a compassionate way. For example, *Cultivating the Compassionate-Self* is a 10–15 minute guided imagery CMT exercise script delivered via audio track or speaker that focuses on building self-compassion and resilience to self-criticism. This exercise has been shown to improve physiological regulation and reduce fears of self-compassion with less than 10 repetitions (J. Kim et al., 2020). Critically, fostering the compassionate self can improve how one relates to life difficulties, leading to greater insights into said difficulties, increased self-empathy, and feeling better able to cope and more encouraged about the future (Gilbert & Basran, 2018). The brief nature of CMT exercises make them ideal for self-implementation (via audio tracks) by teachers to improve wellbeing, but can be easily implemented by teachers in the classroom for students and incorporated similarly to mindfulness exercises. While such exercises are appealing as turnkey solutions, they require foundational psychoeducation to facilitate uptake and flexibility based on student input. Students may find guided meditations difficult to focus on, and alternatives such as written analogues such as prompted journaling may be more appealing. Co-development of light-touch interventions involving all parties will likely improve participation and outcomes.

Integrated Compassion Activities

Beyond brief exercises to foster compassion within and outside of the classroom, evidence from clinical and educational studies supports the integration of activities targeting thoughtful compassion-focused activities into regular classroom activities. One example based on the affect regulation model is regular journaling of the self-reported size of the three circles, typically via drawing the size of each circle corresponding to the subjective state of the individual. Reflection on current and past progression of the state of the three affect regulation circles has been a fixture of CFT in clinical settings (Gilbert, 2010), and may foster greater self-awareness and mindfulness, and aid in building regulatory capabilities. Large, randomised trials have validated compassion- and mindfulness-based programs based on Gilbert's motivational systems theory, such as the Cultivating Awareness and Resilience

Table 2. Potential compassion-focused activities, examples, and aims

Activity	Examples	Aims
Three-circle 'check-in'	Students draw the relative size of the soothing, drive, and threat circles. Alternatively, areas in the classroom could be designated for each circle and student stand where they feel most dominant.	Provides students with a moment for self-reflection, and provides educator with a representation of the classroom motivational state
'Green circle' activities	Time for students to engage in soothing music, forest bathing, self-guided reading or writing, self-touch (hand on heart), or alone time.	Activities not relying solely on mindfulness or meditation used to bolster the soothing system
Teacher three-circles	Teacher demonstrates their own three-circle balance at the beginning of the lesson to share with the class.	Models self-regulation and focus on regulating motivations
Classroom compassion guidelines	Establishing a set of guidelines for in-class behaviour, such as turning to your teacher or a friend when struggling, highlighting the value and importance of co-regulation, and how to manage uncomfortable emotions.	Promotes a compassionate classroom environment and psychological safety
Compassion challenges	Setting goals for compassionate actions across the term, semester, or school year. This can be self-compassionate (meditation, exercise) or for others (volunteering, tutoring other students).	Highlights compassionate action rather than only intent, which may reinforce compassionate motives
Compassion reflections	Asking students to recall times in which they felt disappointed or unhappy with their own actions, and then asking them to imagine they are another person and approaching themselves with compassion.	Based on compassion imagery exercises; allows students to practice self-compassion

in Education (CARE) program (Jennings *et al.*, 2013). While such programs are in their infancy, teachers need not necessarily rely on packaged programs to implement meaningful change in the classroom. Building self- and collective efficacy at the teacher and school leadership level can support meaningful co-development of strategies and interventions with students and the community (MacMahon *et al.*, 2022). An understanding of the principles behind compassion and prosocial leadership (Thierry *et al.*, 2022) can allow educators to design, implement, and assess their own strategies that are likely to have increased fidelity within their own setting. Table 2 provides a precursory outline of potential actionable activities that could promote a compassionate environment as outlined above.

Future Challenges

While compassion-focused therapies and compassionate mind training programs are gaining more traction, researchers need to adopt a unified approach to examining such approaches. Of primary concern is the common practice of implementing broad, multicomponent interventions and assessing end-goal outcomes without understanding the efficacy of individual 'ingredients' to produce the purported benefits of such programs. This lack of specificity as to the underlying mechanisms through which these interventions effect positive change inevitably limits their generalisability. In order to design and implement programs with flexibility and across a range of contexts, it is crucial to identify how individual-specific factors and contexts affect the mechanisms through which compassion-focused interventions function.

Conclusion

SEL is vital for success in school, in relationships, and in day-to-day life. While there are many SEL interventions on offer, with solid evidence bases and theoretical frameworks, results are still mixed.

This article proposes that a compassion focus in the classroom is the vehicle needed to drive SEL successfully in education. A theoretical foundation has been outlined to illustrate why compassion can be helpful plus a range of suggestions as to how compassion can be cultivated in schools. Evaluating the success of these approaches and making compassion a priority for all levels of the school community is the next step forward.

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