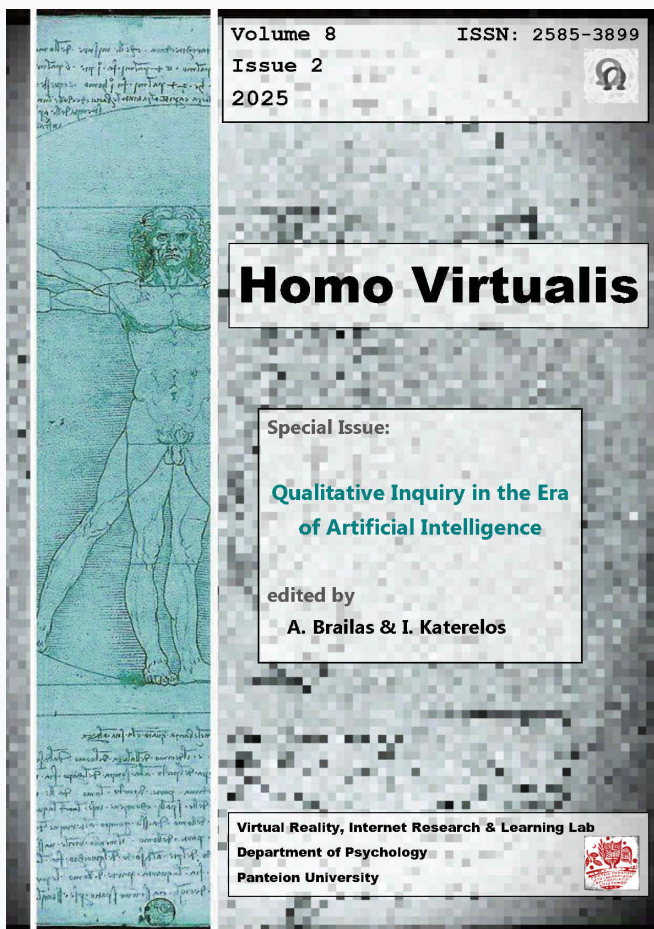


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## Adverse Experiences in Childhood and Self-Compassion: An Appreciative Inquiry

Stavroula Zerva

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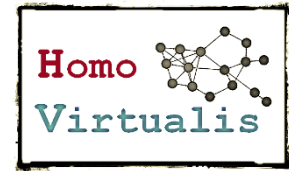
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## Adverse Experiences in Childhood and Self-Compassion: An Appreciative Inquiry

Stavroula Zerva <sup>1</sup>

**Abstract:** The purpose of this study is to explore the experiential way in which adults who have had adverse childhood experiences understand, process and redefine their personal identity, using tools such as self-compassion, mindfulness and personal visionary narrative. The research follows a qualitative, interpretive methodological approach and is based on the principles of social constructionism, recognizing the dynamic and discursive nature of identity. The data were generated through ten semi-structured, individual and multimodal interviews with five women and five men of Greek origin, from the middle and low socio-economic classes. Data analysis was based on the Thematic Analysis method and was supported by the QualCoder software to enhance accuracy and transparency in the coding process. The findings demonstrate that although the participants had internalized harsh childhood experiences, they gradually developed the skills of introspection, self-understanding and self-compassion. This ability seemed to be influenced by the form and chronicity of traumatic experiences, as well as by the existence or lack of supportive relationships. Furthermore, the use of appreciative inquiry strengthened their connection to personal meanings, values and desires, allowing them to shape a future vision free from the shackles of the past. The role of music as a tool to enhance self-compassion, and also as an autonomous regulating factor of mental resilience, was explored in the context of the study without being a central axis of analysis.

**Keywords:** Adverse Experiences, Self-Compassion, Mindfulness, Appreciative Inquiry, Music, Mental Resilience

"All happy families are alike. Every family is unhappy in its own way" (Tolstoy, 1869, p. 3)

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## **Introduction**

Childhood is considered a critical period during which the family environment and school shape the individual's sense of security and social relationships. However, a lot of people have adverse experiences such as neglect, abuse or emotional instability, which can negatively affect their relationship with themselves and their ability to cope with mental pain. The present study focuses on how adults who have had such experiences relate to themselves and examines self-compassion as a potential factor of mental resilience. Self-compassion has been linked to reduced symptoms of anxiety, depression and post-traumatic stress, as well as to improved emotional regulation.

This research follows a qualitative approach, based on appreciative inquiry, avoiding the pathologization of trauma and highlighting the protective factors that enhance mental resilience. Sampling was convenience and purposive, with 10 adults participating in semi-structured interviews of approximately 90 minutes. Anonymity and voluntary consent were ensured. Data analysis was conducted using thematic analysis, based on the theory of social constructionism.

## **Adverse Childhood Experiences**

The term Adverse Childhood Experiences (ACEs) refers to traumatic experiences that occur up to the age of 18 years and vary in severity and duration, negatively affecting mental resilience and health throughout life (Kalmakis, 2013). Over 50% of children experience at least one, while 15% are exposed to four or more adverse experiences (Woodward et al., 2023). The first major study, by Felitti et al. (1998), highlighted the link between ACEs and negative effects on adult health. ACEs were initially recorded in seven categories, grouped into abuse (physical, sexual, emotional), neglect (physical and emotional) and dysfunctional family environments (parents with mental illness, addictions, domestic violence, criminal involvement). The study by Felitti et al. (1998) confirms that people with multiple ACEs have a higher risk of developing serious mental and physical problems, such as major depression, severe anxiety and suicidal tendencies. These effects fuel a vicious cycle of distress that often persists into adulthood.

In contemporary literature, the conceptual framework of ACEs has been broadened to include social and political-economic factors such as economic insecurity, bullying, community violence, discrimination, immigration anxiety, and placement in foster care (Zhen-Duan, Colombo, Alvarez, 2023). Also, childhood bereavement (CB) is recognized as a new form of psychological adversity, with significant psychological and physiological health implications similar to traditional ACEs (Woodward et al., 2023; Chen et al., 2021). The effects of ACEs are multi-level and long-lasting.

## **The concept of self-compassion and its role**

Self-compassion is an attitude of acceptance and understanding towards oneself, especially during times of failure or mental difficulty. Instead of harsh self-criticism, it promotes emotional care, sympathy and the acceptance of human imperfection (TED, 2013). This concept has its roots in Buddhism and Eastern philosophy, but it has been studied extensively by Western researchers, such as Kristin Neff, with the aim of empirically evaluating its benefits (Neff & Vonk, 2009). Self-compassion is composed of three basic elements: self-kindness, shared humanity and mindfulness (Phillips, 2019). Self-kindness focuses on caring and empathy, rather than harsh self-criticism (Neff, 2013). Common humanity reminds us that imperfection and failure are experiences common to all people rather than personal shortcomings. Mindfulness allows the individual to observe their difficulty without completely identifying with it, thus limiting overidentification (Phillips, 2019).

Although it is a skill that can be cultivated, its levels vary depending on intrapersonal and environmental characteristics. Neuroticism, excessive introspection and early experiences of hypercriticism or lack of emotional support appear to be associated with lower levels of self-compassion (Neff, 2003a; Neff, Rude et al., 2007; Neff & Vonk, 2009). Equally important is the role of the early attachment patterns (Neff, 2008). According to the study by Nasika et. al (2023), individuals with a secure attachment style demonstrated higher levels of self-compassion, which in turn contributed to greater resilience in the context of chronic pain. In contrast, insecure attachment encompasses three subtypes: detached, disorganised and anxious/preoccupied. The findings indicated that the avoidant subtype showed elevated levels of self-judgment and isolation, reflecting reduced self-compassion. Furthermore, the disorganized attachment subtype exhibited the lowest levels of self-compassion compared to the other insecure attachment styles. Finally, the preoccupied attachment subtype did not yield significant findings in relation to self-compassion or its components.

Self-compassion is conceptually different from self-esteem, which is based on a sense of superiority or uniqueness. In contrast, self-compassion focuses on the non-judgmental acceptance of the self and does not depend on external criteria or successes; this makes it more stable and therapeutic in situations of failure.

## **Relationship between Adverse Childhood Experiences and Self-Compassion**

Self-compassion has been identified as a critical mechanism for regulating emotion and enhancing psychological resilience, especially in individuals who have had adverse childhood experiences. The study by Carbutt et al. (2022) shows that self-compassion is negatively associated with shame and adverse childhood experiences, while reducing the behavior of inflicting pain on the self and others. At the same time, a research by Hazzard et al. highlights the protective function of self-compassion against depression, eating disorders and obesity. Self-compassion reduces the effect of psychological abuse, providing stronger protection against eating disorders. The study

by Miron et al. (2016) points out that low levels of self-compassion in people with a history of emotional abuse are associated with more severe post-traumatic symptoms. Difficulties in cultivating self-compassion may be due to guilt or fear of self-care. The use of therapeutic approaches such as Compassion-Focused Therapy is recommended as a means to enhance emotional recovery.

### **Appreciative Inquiry**

Appreciative Inquiry (AI), introduced by Cooperrider and Srivastva (1987), is based on the constructivist theory, according to which reality is co-constructed through human interaction. Instead of focusing on problems, AI places emphasis on the positive experiences, the successes and the potential of the participants. As Brailas (2025) notes, this is an ethically oriented qualitative research approach that utilizes language as a tool for creating positive meaning and empowerment.

Van der Haar and Hosking (2004) approach AI through relational constructionism, emphasizing that it is a dynamic, collective process of sense construction, which should be evaluated within its own conceptual and practical assumptions, far from instrumental notions. Finally, Grant and Humphries (2006) criticize the absence of self-evaluation in the field of AI and suggest integrating the Critical Theory through the Critical Appreciative Process (CAP) in order to address issues of power and social inequalities that may be silenced by the positive focus of the method

### **Methodology**

This study is part of the qualitative, interpretivist research approach and draws theoretically from social constructionism, which argues that knowledge and reality are co-constructed through language and social interactions (Gergen, 2009). Appreciative Inquiry was chosen as the main methodological tool; it focuses on the emergence of the participants' positive experiences and personal resources, rather than focusing exclusively on traumatic or pathological experiences. The research focuses on the way adults who have had adverse childhood experiences relate to themselves in adulthood. It also examines the role of self-compassion and appreciative inquiry as potential therapeutic tools that contribute to the processing of traumatic experiences not through the repetition of trauma, but instead through the enhancement of positive characteristics, skills and empowering narratives. The aim is to highlight a transformative approach to psychosocial resilience and personal development through a positively oriented and relational research process.

The interpretive approach was deemed appropriate, given the need for an in-depth understanding of the participants' experiences through the way the individuals themselves make sense of their experiences. This approach recognizes the importance of subjectivity and the linguistic construction of experience, as well as narratives as means of sense-making (Braun & Clarke, 2006). The study population consisted of 10 adults (5 females, 5 males), residents of Greece, the main prerequisite being them having at least one adverse childhood experience. The sample was selected using a

combination of convenience sampling and criterion-based purposive sampling, the main criteria being the age (over 18 years old) and the existence of adverse experiences. This sampling serves the purpose of in-depth understanding through reflective activities.

Empirical data were collected through semi-structured interviews of an approximately 90-minute duration, using a multimodal approach. Participants were asked to engage in reflective activities that involved mentally visualizing their personal dream, imagining their ideal self in 10 years, and then creating a visual representation with plasticine, giving material form to their vision (Brailas, 2025). In addition, the cultivation of self-compassion was promoted by means of reflection on a personal disadvantage that they considered negative, focusing on the feelings evoked in them. They were then asked to bring to mind a person who loves them unconditionally and to write a letter to themselves from that person's perspective, expressing understanding and compassion while encouraging counter proposals with empathy (Neff, 2011). After reading the letter, participants reflected on the feelings evoked and identified their bodily expression, thus enhancing mindfulness. Finally, they were asked to assess how adverse childhood experiences affect the way they relate to themselves in difficult situations.

Part of the multimodal activities included a musical exploration, where participants recalled a song that provided support during difficult times and described the feelings it evoked. In addition, they were asked to suggest a title for a hypothetical song about self-compassion in order to demonstrate their personal way of making sense of the concept (Shum, 2020). Ethical management was ensured by means of signing an informed consent form, whereby participants were informed about anonymity, the right of withdrawal and confidentiality. Indeed, some participants exercised their right to withdraw from certain parts of the interview, in particular those relating to the plasticine activity.

The Thematic Analysis method was followed data analysis (Braun & Clarke, 2006), with phases such as familiarization with the material, initial coding, grouping and identifying themes, and naming and defining themes. The process was supported by QualCoder software for organization and coding. In order to ensure validity and reliability, the methods used included member checking, triangulation of methods through appreciative inquiry and narrative technique, as well as the researcher's reflection during the research, where personal thoughts and feelings were recorded, ensuring the systematicity and documentation of the analysis process.

## **Results-Findings**

This chapter presents the findings of qualitative study, which explores the ability of people who have had traumatic experiences during childhood to develop and express self-compassion. It focuses on the way participants make sense of their experiences, the way they use music as a means of expression and understanding of the self, and

the role of self-compassion as a tool for inner transformation. Data were collected through ten individual multimodal interviews with participants aged 18 to 56 years old. The analysis of the material was carried out based on the methodology of Thematic Analysis, focusing on the emergence of patterns and meaningful axes that highlight the participants' subjective experiences. The narratives cover various forms of adversity and reflect different levels of understanding and expression of self-compassion. The findings shed light on the complex relationship between childhood trauma and self-conscious, non-judgmental attitudes towards the self, highlighting the potential of self-compassion as a prospective psychotherapeutic tool in the healing process.

#### *Data analysis using the Thematic Analysis-Findings*

The themes presented below were derived from the systematic coding of the interviews with the QualCoder software, by application of the Thematic Analysis method (Braun & Clarke, 2006). The themes were constructed on the basis of the code groups and the relevant frequencies of occurrence, as revealed through the interpretive processing of the material. Four main themes emerge from the interviews: 1. childhood adversity and emotional resonance; 2. self-compassion and management of the inner critic; 3. identity reconstruction and vision for the future; and 4. mindfulness and inner processing of experience.

##### *1. Childhood adversity and emotional resonance.*

Participants described a variety of traumatic experiences during their childhood, which have left a strong imprint on their emotional development. The codes that make up this thematic analysis are "parental absence", "abusive behaviour", "loss/death", "economic insecurity", "neglect", "bullying/isolation". Furthermore, people's emotional experiences vary such as "self-incrimination/internalized guilt", "isolation", "anger/rage" and "low self-esteem".

The narratives reveal that these difficulties have made participants to form a detachment attitude towards their feelings and sense of self. This emotional detachment is not only expressed in the form of internal alienation from personal experiences, but also as difficulty in sharing or expressing emotions to others. In one of the narratives, the traumatic experiences have left a deep imprint on the life of the person, who reports that he finds it difficult to feel and express love for himself and to those around him. Suppression or concealment of emotions is presented as a defense mechanism aiming at avoiding exposure or eventual rejection, especially when the family environment has been strict or cold.

Yes, generally speaking, the attitudes, more so of my father made me feel more cruel than I am.[...] And so I hid a lot of my feelings, because I thought that I shouldn't show them.[...] So I hid my love for myself and my love for others.[...]

A recurring pattern that emerged in the narratives was the sense of internalized guilt, particularly in cases of the people who reported having been abused in childhood. This

guilt was often accompanied by self-reproach and self-blaming behaviors, as the attitudes of the environment reinforced the impression that the individuals themselves were responsible for the abusive acts they had suffered. It appears that the internalization of these messages made them form negative beliefs about themselves and has had a decisive impact on their self-perception and relationship with themselves in adulthood. As one participant states in her narrative :

[...] I used to talk very badly of myself, borderline swearing at me [...] and I would take it out on me, I mean I would swear at myself[...] Especially when I do this, I become worse than everybody else, in terms of behavior. I treat myself in the worst way. With others I take it easy, but when it comes to me, honestly, I have called myself both useless and irresponsible, that I'm no good for anything.

In addition, people who have been neglected or abused in childhood often have a deficient sense of security. When the primary caregiver -who should act as protector and guide - turns into a source of insecurity, instability and constant fear, the development of a secure bond is fundamentally undermined. The consequences of this dysfunctional relationship are evident not only during the period when the caregiver's harmful behavior is manifested, but also in later stages of life. As mentioned in an interview, where there is an interesting reversal between the external environment (usually perceived as threatening at a young age) and the home environment which becomes a source of fear:

And fear of people outside. I wasn't afraid to go out or anything. Fear was at home.

As already mentioned, the consequences of this dysfunctional relationship are not limited to childhood, but continue to affect the course of a person's life on multiple levels. Experiencing emotional insecurity and instability reinforces a sense of distrust and emotional distance, which is reflected in the way a person relates to others. Difficulties in building meaningful interpersonal relationships, avoidance of intimacy or hypersensitivity to rejection are common manifestations of these early experiences. Thus, the imprint of child abuse or neglect becomes permanent and shapes, to a large extent, a person's future social and emotional connections.

I think that if a parent fucks you up, you lose trust of the whole world [...] I don't trust anyone [...] to turn to and say I have an issue; there are very few to zero people that I can say I'm going to call and say, "Hey man, I'll tell you what, let's go get a coffee, I want to talk to you about something."

In contrast, people who have experienced adversities such as the loss of their beloved, but found themselves in a supportive and stable environment, were able to manage these difficulties effectively without having significant negative effects in their adult lives. Despite their trend of adaptation, some of these individuals appear to face

challenges in conditions of high cognitive ambiguity, suggesting reduced tolerance to uncertainty as a possible residual psychological risk factor. This results in excessive thinking and withdrawal in moments of joy and fun as the fear of the unexpected is established.

I'm sad because I'm losing things. I don't enjoy situations. What this stupid thing with dad has done to me is [...] when I'm having a really good time, I'm like, "What if something happens now?" So I can't stay in the moment.

Moreover, when the grieving process does not take place in a supportive and safe context, strong feelings of detachment from the family environment may emerge. This alienation can intensify the person's already existing experience of loneliness, leading to the belief that they are unable to express their feelings or seek help. As a result, the person experiences a daily sense of rejection from their own family.

Mmmm, I'm somehow emotionally constipated.[...] when there's no space, no people talking around you, you can't start talking on your own.

The sense of alienation is particularly intensified in people who have been bullied at school or have experienced social exclusion from the wider community. These people are often burdened with a strong sense of injustice, accompanied by feelings of anger, bitterness and deep emotional sadness. Such traumatic experiences have a negative impact on the development of interpersonal relationships, as they may reinforce introversion, cause difficulty in adapting to new social circumstances, and contribute to impaired self-esteem and social confidence.

You've known me for, say, ten or thirteen years, and suddenly you hang up on me saying, "Never set a foot here again, you're not wanted?" "What have I done?" Yes, that's where I felt no good. Not just no good, I felt like a doormat, I felt like I'm nothing

## *2. Self-compassion and management of the inner critic*

According to the participants' narratives, the majority of them reported difficulty in expressing kindness and self-acceptance, as well as in moderating the negative inner monologue that is often activated in moments of self-criticism. Despite any initial difficulties, in most cases the feeling that prevailed after writing the self-compassion letter was positive, indicating a shift towards greater emotional release and intrapersonal understanding. Specifically, the codes that characterize this theme are "self-awareness through acceptance of difficulty", "gentle self-direction without a critical tone", "self-supporting", "mental empowerment", "relief and liberation", "recognition of self-worth" and finally "association of trauma with a present problem".

The above codes highlight the varying dimensions of the participants in the process of developing self-compassion. "Self-knowledge through acceptance of difficulty" and "gentle self-direction without a critical tone" indicate a shift from harsh self-criticism

to a more conscious and supportive attitude towards the self. At the same time, the codes "self-supporting", "mental empowerment" and "relief - liberation" indicate the empowerment experienced by individuals once they abandon the internal critical discourse and replace it with a compassionate inner voice.

"Recognition of self-worth" reflects a process of redefining identity, while "association of trauma with a present problem" highlights a deeper awareness of the roots of self-criticism, allowing a connection between past experiences and current difficulties.

The reason why you may have reached the point where everything gets to you is your childhood, when your father was strict and violent and cursed and got mad about trivial things, and the restriction that came from him

The following extract reflects the theme of mental empowerment, as the participant seems to enlist a supportive inner discourse in order to regulate their anxiety. This attitude can be interpreted as a form of intrapersonal solidarity, where different aspects of the self discuss with each other in order to enhance emotional resilience and restore inner balance.

Everything will be fine, the truth is that the world is a bit shitty, but it's ok. You stress as if what's going to happen makes sense. But whatever is to be done, will be done because you are you. You have achieved a lot and even if you still crush the whole world, it will still be ok. I'll keep walking. Life is pleasure and you should be the center of it. Everything is on the table, nothing is bad. Everything will be all right.

### *3. Identity reconstruction and vision for the future*

The material collected in the context of the Appreciative Inquiry activity, in which participants were asked to envision their ideal self over a ten-year period, proved to be particularly rich and diverse. Through these narratives, specific thematic codes emerged, reflecting the participants' personal values, desires and hopes for the future: 'feeling of security/familiarity', 'need for peace/quiet', 'personal success', 'positive relationships', 'creating positive memories', 'relational enjoyment', 'supportive environment', 'authenticity of self', and 'well-being/enjoyment of life'.

In particular, the majority of the participants envisioned their future self as connected to a loving partner, highlighting the deeper need for meaningful emotional connection and security. Furthermore, this need is reinforced by the desire to create beautiful memories with the partner, i.e. a relational enjoyment. As illustrated in the image below (see Figure1), the participant visualized his vision through the creation of a composition entitled "My Marriage", representing an ideal future life scenario. The depiction includes an idyllic landscape, with a cave in the background and all the important people in his circle, suggesting deep needs for emotional fulfillment, stability and social acceptance.

**Figure 1:** "My Marriage" : an artistic representation of participant's envisioned future self, created with modelling clay.



**Note:** The participant imagines himself getting married in a cave, surrounded by applauding friends. The creation expresses a desire of love, stability and social belonging.

Moreover, the motif of 'personal success' emerges in various and multi-layered ways from the participants' narratives, reflecting the subjective nature of this concept. It is worth noting that personal success seems to be perceived and interpreted differently by each individual, depending on their lived experiences and internal needs. A typical example is the case of a participant who described her ideal self as being free from the guilt oppressing her in the present. The visualization of her dream was entitled "The Fighter"-as shown in Figure 2-, symbolizing the imaginary battle with her personal fears and the way to overcome them through a process of inner empowerment and acceptance.

However, the concept of personal success is not limited to existential or emotional dimensions, but often includes practical goals, such as career advancement or engaging in a profession that corresponds to one's deeper desires and values. This can be *combined* with accepting the world

The first thing that came to my mind was me being at a concert of mine, obviously, abroad, I don't know, maybe New York [...] But a very big event.

**Figure 2:** *"The Fighter": an artistic representation of a participant's envisioned future self, created with modeling clay.*



**Note:** The participant imagines herself as a warrior, who just won the battle with her fears.

However, the concept of personal success is not limited to existential or emotional dimensions, but often includes practical goals, such as career advancement or engaging in a profession that corresponds to one's deeper desires and values. This can be *combined* with accepting the world

The first thing that came to my mind was me being at a concert of mine, obviously, abroad, I don't know, maybe New York [...] But a very big event.

Or even personal success may be linked to the achievement of an individual goal, which acts as a means of satisfying the inner need for personal fulfilment. In some cases, this pursuit seems to correspond to an attempt to manage a constantly critical inner self, which tends to undermine positive self-perception and reinforce feelings of inadequacy or dissatisfaction.

My first sensation was that I thought I could hear the sea somewhere [...] And I was thinking about having my laptop and writing my third successful book.

The code of personal success can be related to the code of positive interpersonal relationships, since many dream scenarios referred to choosing a profession that corresponds to deeper personal goals and, at the same time, involve the presence of loved ones, such as friends. Such coexistence enhances the sense of mutual support and social connection, underlining the dual nature of success as an individual and social experience. It is worth noting the character created by a participant as his ideal dream is to follow the profession of a game developer together with his friends.

**Figure 3:** *"Ivan Blackwood": an artistic representation of a video game character envisioned by a participant as part of his future work as a game developer.*



**Note:** The participant created a clay figure of a hero from his future video game, symbolizing his aspirations of creativity, storytelling, and professional accomplishment.

In addition, the supportive environment may also involve distancing oneself from relationships that no longer provide the necessary support, even when these belong to the family circle. Participants who have experienced abuse or neglect report their desire, over the span of a decade, to be surrounded by people who love and fully accept them, allowing them to express their true selves.

To have changed gender, to be in Germany, to be with my girlfriend, to live there. To have no one close to us.

The character's name is Ivan Blackwood (Figure 3)[...] (It symbolizes) that, based on the collaboration of the three of us [...] we have reached a nice result and we want to show the world [...] that in order to do something you have to gradually start learning it.

Finally, it is worth noting the striking similarity between the narratives of two female participants, who, despite not knowing each other, described a similar vision for the future. In both cases, the ideal life scenario included a sense of calm and serenity in a seaside environment, combined with the presence of loved ones. The element of well-being and enjoyment of life coexists with the choice of a simple, minimalist lifestyle, as they mentioned the desire for a simple white house by the sea – an indication of humility and detachment from materialistic pursuits. On the right is the ideal vision of Participant 4 and on the left that of Participant 3, as shown in Figure 4 and Figure 5.

**Figure 4:** *“Serenity”: an artistic representation of life.*



**Note:** Envisioned separately by two completely unrelated individuals, both of whom depicted remarkably similar visions of their ideal existence—set in a minimalist house by the beach.

#### *4. Mindfulness and the internal processing of experience*

After writing the self-compassion letter to themselves, participants were asked to reflect on and describe the emotions that emerged while reading their text, and to identify the exact point in their bodies where they embodied these emotional reactions. The sternum and stomach area were referred in most responses as the centers of physical sensation. However, the experiences of the participants were not homogeneous, as the emotions associated with these areas showed considerable diversity.

**Figure 5:** “My future”: an artistic representation of life.



**Note:** Envisioned separately by two completely unrelated individuals, both of whom depicted remarkably similar visions of their ideal existence—set in a minimalist house by the beach.

The majority of the participants who reported feelings of relief, satisfaction and self-actualization after reading the self-compassion letter described the embodied experience of these feelings in a particularly vivid way. More specifically, several participants reported a feeling of mobility in the abdomen, which they described as "butterflies in the stomach" or "like something tickling my stomach". Furthermore, a common theme in the narratives was a sense of liberation, with participants stating that they felt "a weight lifted off their shoulders", locating this physical discharge mainly in the area of the chest and the lungs.

However, some participants reported experiencing a complex range of emotions. On the one hand, they felt joy and satisfaction at being able to address themselves with kindness and under terms of acceptance. On the other hand, they expressed feelings of anger and sadness owed to their difficulty in constantly adopting this way of thinking. These conflicting emotions were experienced physically as a feeling of pressure in the chest area.

I can feel it somehow pressing against my chest. It's like being pressed by a hand or an open palm.

This feeling may reflect difficulty in emotional processing and the internal conflict caused by trying to incorporate a more compassionate way of thinking, especially when it contradicts ingrained patterns of self-criticism or guilt.

Finally, in the broader range of emotional reactions recorded, anxiety was the one standing out. Many participants reported that, although they made an effort to cultivate an attitude of self-compassion and to address themselves with kindness and acceptance, they felt strongly concerned about whether this approach could also exist in their interpersonal relationships. In particular, anxiety was expressed around the question of whether it is possible to receive similar understanding, acceptance and emotional support from others, particularly in relation to personal characteristics or difficulties that they themselves perceive as flaws or disadvantages.

(I felt) anxious if this would happen. That is, if someone sits down and writes a nice letter to me.

In the context of exploring lived experience and with the aim of highlighting the mental tools that people use when dealing with difficult situations, the participants were asked to recall and share a song that offered them support or relief in moments of emotional distress. This question seemed to be difficult for a lot of them, given that no answer was given by half of them. However, in the narratives of those who responded, it was observed that the songs mentioned would often be associated with feelings of sadness and distress, especially in times of mourning or loss. In several cases, music acted as a means of consciously connecting with these difficult emotions, allowing participants to acknowledge and express the pain and anger they felt, especially when they realised their inability to offer help or reverse the outcome of a loss. As one participant described:

Wrath because, I mean anger, anger because unfortunately it is not up to human being to reverse death, to stop it from happening.

## **Discussion**

The present study, although mainly focusing on the concept of self-compassion and mental resilience, also highlighted other critical issues. The analysis of the narratives confirmed the negative effects of adverse childhood experiences, highlighting in particular the strong sense of inner guilt that people with such a background tend to develop. This guilt, often non-consciously, acts as a way of understanding traumatic experiences, offering an illusion of control amidst chaotic situations. This finding is in line with international literature (Fuentes et al., 2017), according to which self-reproach functions as a survival mechanism in cases of child abuse or neglect.

At the same time, many participants reported difficulty in feeling safe, both in relation to others and to themselves. According to the attachment theory (Ainsworth et al., 1978), the quality of early care has a catalytic effect on later relationships and internal security. Research by Zilan Ye et al. (2023) supports this position, demonstrating a

statistically significant correlation between NECE (Negative Early Childhood Experiences) and insecure attachment types.

Regarding the relationship between self-compassion and a supportive environment, the study revealed that people with less social support found it more difficult to show kindness and self-care. This finding is supported by Hazzard et al. (2021), who identify self-compassion as a mediating factor between NECE and mental disorders. Similarly, the study by Lathren, Bluth & Zvara (2020) highlights that self-compassion is enhanced when the individual has received positive parental support; instead, it is reduced when there is criticism in the environment.

A personal hypothesis that emerged from the analysis is that internalized guilt is likely to intensify when the environment is disengaged or negatively charged, while it decreases when there is positive feedback from experts or familiar persons. Acceptance and support facilitate reconciliation with adverse experiences and enhance the process to healing.

Remarkably, expressing compassion towards oneself was associated with positive emotions such as relief, optimism and satisfaction. These results are consistent with research by Karakasidou and Stalikas (2017), where a six-month intervention based on self-compassion led to a reduction in stress and depression and increased life satisfaction.

The application of appreciative inquiry as a methodology contributed to illustrate the participants' dreams and hope. Despite the difficulties in childhood, the narratives contained goals and wishes for the future, demonstrating that resilience and traumatic experience co-exist. This approach helps to construct an empowering reality building on possibilities and not only on difficulties (Cooperrider et al., 2013; Brailas, 2025).

Although not a central focus of the research, it was recorded that music acted as a regulating factor of mental resilience for some participants. This finding is confirmed by the study of Fraile et al. (2023), which acknowledges music as a valuable tool in trauma treatment through the polyphonic and emotional support it offers. However, future research should examine the role of music in therapeutic interventions for individuals with adverse childhood experiences, as the present study did not explore this dimension in depth.

The survey has certain limitations, such as the small sample size (ten people), the use of convenience sampling and the limitation of the cultural context. Although it does not aim to generalize, it offers profound and authentic testimonies that illuminate important dimensions of mental resilience. Finally, another limitation of the current study is its primary focus on Compassion-Focused Therapy, without considering other trauma-focused approaches. One such method is Eye Movement Desensitization and Reprocessing (EMDR), in which the client attends to the traumatic event while simultaneously moving their eyes back and forth—similar to REM sleep—in order to process the traumatic experience that may have remained “frozen” (Schreiber, 2004).

Another relevant intervention is Trauma-Focused Cognitive Behavioral Therapy (TF-CBT), which, through its core components (cognitive processing and reframing, exposure, and anxiety management), has been shown to be highly effective (Cohen et al., 2000).

Ultimately, it is suggested that the type of adversity as a differentiating factor in the development of self-compassion should be further investigated. More specifically, people who had experienced bereavement appeared to relate differently to themselves compared to people who had experienced abuse. Furthermore, future research should include parameters such as gender, age and cultural background for a more holistic understanding of self-compassion and its psychosocial effects.

### **Researcher's reflexivity**

The journey to my thesis began in June 2024, in a climate of stress and uncertainty. Although my training up to that point had focused on quantitative research, I decided to work with a professor whose team specialized in the qualitative approach. Terms such as "multimodal methods" and techniques such as "appreciative inquiry" were unfamiliar to me. However, thanks to the encouragement by my supervisor and by attending his classes, I gradually entered the world of qualitative research - a decision that proved to be of determining importance for my student career. The interviews turned out to be a particularly intense experience. The activity with the self-compassion letter marked me. One participant with a history of abuse wrote that she would stand by herself with tenderness. That was a moving moment that filled me with pride, as I felt the power of human resilience. I realized how important it is to feel heard. In the beginning I stuck to the interview guide, but over time I realized that each narrative is unique. What made the interviews meaningful were spontaneous questions, genuine connection and the creation of a climate of safety. The participants found it difficult to look into themselves, but in the end they felt relieved. The same happened with the plasticine and dreaming activities. I realized that creativity, play and self-care are not luxuries, but needs - even in adulthood.

Finally, I include below two creations I made during different phases of my thesis journey. The first, titled *"The Ideal Dream of My Thesis"*, was made at the very beginning. In this drawing (Figure 6), I appear optimistic about my thesis. I am receiving encouragement from the participants and my close circle, who support me throughout the process, and I feel joyful about my achievement.

The second drawing—as shown in Figure 7—was created after completing the interviews, during the transcription process. In it, I am depicted lost in thought. This tangle of thoughts is expressed in different colors—both positive and negative. Perhaps the hardest part is trying not to get lost in your thoughts and swept away by them. To allow them to exist without letting them consume you.

Apart from knowledge, qualitative research also offers space for voices that are usually not heard. In a time of global crisis, recording such experiences can lead to social

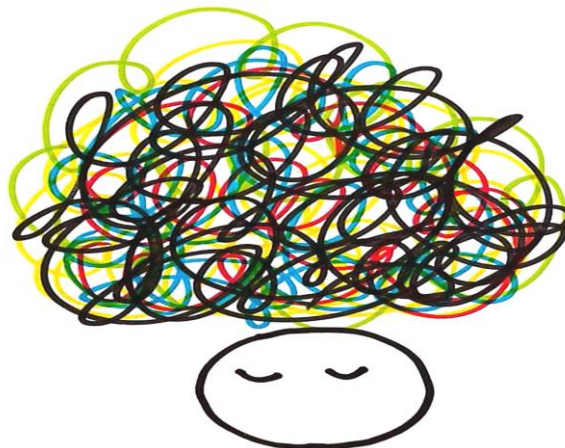
change. Ultimately, the biggest realisation was that we create our reality through our relationship with others. The same image can have multiple interpretations - and we are invited to discover them.

**Figure 6:** *“The Ideal Dream of My Thesis”:* an artistic depiction of my thesis journey.



**Note:** Illustrating the progression from its initial stages to the culmination of its intellectual and creative peak

**Figure 7:** *“A clutter of Thoughts”:* an artistic depiction of my thesis journey”



**Note:** A reflective acknowledgment of the emotions and thoughts that emerged during this particularly challenging state of my thesis.

## Concluding thoughts

Self-compassion plays a critical role as a mediating mechanism between childhood trauma and its long-term mental health effects. When a person develops understanding and self-care, symptoms such as anxiety, depression and emotional isolation are reduced. Although traumatic experiences erode the sense of self-esteem, the potential for healing remains active. Participants described a complex relationship with themselves, with an internal struggle between critical voices and the desire for self-care.

Supportive relationships with friends, therapists or teachers, as well as creative activities such as art and writing, play a crucial role in recovery. These were factors that bolstered their self-esteem and sense of identity. The use of affirmative inquiry highlighted not only pain, but also moments of strength, hope and transformation.

The study demonstrates the need for person-centered, positive approaches to mental health, emphasizing the already existing resources of the individual. Self-compassion, trusting relationships and creative expression are essential means of personal empowerment and healing

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### **Notes on Contributor**

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