



STATE OF THE ART OF SELF-COMPASSION IN BRAZIL: A SCOPING REVIEW

ESTADO DA ARTE DA AUTOCOMPAIXÃO NO BRASIL: UMA REVISÃO DE ESCOPO

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ABSTRACT: **Objective:** To evaluate the state of the art of self-compassion in Brazil through a scoping review. **Method:** The keywords “self-compassion” and “Brazil” were searched across ten databases. **Results:** Of 540 publications, 152 were analyzed. Publications began appearing in 2012, and their number has grown 17-fold over 11 years. Research was concentrated in the South, Southeast, and Northeast regions, with underrepresentation in the Central-West and North regions. Participants were predominantly adults, consisting of both sexes or women only. Most studies were empirical and cross-sectional, using questionnaires followed by interventions and experiments. Self-compassion was the primary focus in the majority of studies. In studies where self-compassion was a variable, the majority explored meditation and mindfulness. **Conclusion:** This review contributes to this expanding area of research, which may benefit the Brazilian population by fostering a more compassionate and less self-critical approach among individuals.

KEYWORDS: Psychological well-being. Self-criticism. Mental health. Positive Psychology.

RESUMO: **Objetivo:** Avaliar o estado da arte da autocompaixão no Brasil através de uma revisão de escopo. **Método:** As palavras-chave “autocompaixão” e “Brasil” foram pesquisadas em 10 bases de dados. **Resultados:** De 540 publicações, 152 foram analisadas. Foram encontradas publicações a partir de 2012, cujo número cresceu 17 vezes em 11 anos. As pesquisas foram realizadas no Sul, Sudeste e no Nordeste, com sub-representação do Centro-Oeste e Norte. Os participantes eram predominantemente adultos, com ambos os sexos ou somente mulheres. A maioria dos estudos tinham natureza empírica e desenho transversal, usando questionários, seguido de intervenções e experimentos. A autocompaixão foi tema principal na maior parte dos estudos. Naqueles em que a autocompaixão era variável, a maioria eram sobre meditação e mindfulness. **Conclusão:** A revisão contribui com este tema de pesquisa crescente, que pode beneficiar a população brasileira para que cada indivíduo lide consigo mesmo de forma mais compassiva e menos crítica.

PALAVRAS-CHAVE: Bem-estar psicológico. Autocriticismo. Saúde mental. Psicologia Positiva.

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INTRODUCTION

Self-compassion has recently gained interest in psychology as a positive approach to fostering a healthier relationship with oneself¹. It is essentially compassion directed inward². The Dalai Lama's well-known definition of compassion describes it as sensitivity to one's own suffering and the suffering of others, coupled with a deep commitment to alleviating it³.

According to Neff^{4,5}, self-compassion comprises three key elements: (1) self-kindness (treating oneself with kindness instead of self-criticism or judgment), (2) common humanity (recognizing suffering as a universal human experience rather than experiencing isolation), and (3) mindfulness (acknowledging suffering with conscious awareness rather than overidentification)^{1,6}.

Self-compassion provides a supportive, understanding stance toward oneself, especially during times of distress, inadequacies, mistakes, and failures^{2,5}. Research suggests that self-compassion can be cultivated as a skill, bringing numerous benefits^{7,8}. Compassion-Focused Therapy and other compassion-based therapies aim to help individuals respond to self-criticism with self-kindness and compassion, thus improving psychological well-being⁹.

Self-compassion has grown in importance as a positive form of self-relating that does not rely on self-evaluation or social comparison, offering most of the benefits of self-esteem with fewer drawbacks¹⁰. Self-compassion differs from self-esteem because it focuses on care and non-judgmental understanding rather than positive self-evaluation¹¹. Additionally, it does not depend on success or goal achievement; instead, it supports acceptance, resilience, and stability during difficult times^{12,13}. This perspective advocates a cultural shift toward valuing self-compassion, fostering a society kinder, emotionally functional and less self-centered⁴.

Research demonstrates that self-compassion can benefit health in various ways³. It correlates with well-being, enhances emotional regulation, encourages healthier adaptive behaviors, facilitates resilience, moderates extreme reactions and negative emotions, and fosters re-evaluation and acceptance during challenging times—all without resulting in negative self-assessments^{2,6,9,11,14,15}.

Self-compassion is positively linked to psychological health. It correlates with greater happiness, subjective well-being, life satisfaction, positive affect, optimism, emotional intelligence, social connection, wisdom, initiative, and curiosity, while being associated with less severe self-criticism, shame, rumination, negative affect, perfectionism, and fear of failure^{1,3,6,11-16}. In terms of personality factors, self-compassion shows positive associations with extraversion, agreeableness, and conscientiousness, and a negative association with neuroticism^{6,13}.

A connection also exists between self-compassion and psychopathology, as higher levels of self-compassion are associated with lower levels of mental health symptoms^{8,14,17}, including stress, depression, anxiety, interpersonal issues, personality pathologies, narcissism, and avoidance^{1,3,6,9,11,12,14,17}.

Regarding sociodemographic factors, self-compassion tends to be lower among women than men, as women are often more self-critical and tend to ruminate more on negative aspects than men¹². Self-compassion positively correlates with age but shows no significant correlation with income¹³. There is also evidence that it is not influenced by cultural orientation, whether independent or interdependent¹².

Given the relevance of self-compassion today and its associated benefits, this study aims to deepen understanding of Brazilian research on self-compassion. We conducted a scoping review to assess the current state of self-compassion research in Brazil and help identify knowledge gaps. This

type of review delineates the scope of a body of literature on a specific topic and field, indicating the volume of evidence and providing a comprehensive overview of the area¹⁸.

METHODOLOGY

We conducted an electronic bibliographic search across ten databases: Brazilian Digital Library of Theses and Dissertations (BDTD), Virtual Health Library (BVS), CAPES Thesis and Dissertation Catalog, Google Scholar, Latin American and Caribbean Health Sciences Literature (LILACS), Portal of Electronic Psychology Journals (PePSIC), CAPES Journal Portal, PubMed, SciELO, and Science Direct. The keywords “self-compassion” and “self-compassion AND Brazil” were searched within titles or abstracts without date restrictions.

Inclusion criteria were (1) the presence of “self-compassion” or “self-compassion AND Brazil” in the title and/or abstract, (2) the study being conducted in Brazil with a Brazilian population, (3) the availability of the study (PDF or accessible abstract), and (4) publication in Portuguese or English. We excluded international studies, international literature reviews, inaccessible studies, and studies unrelated to self-compassion. The first author retrieved and reviewed abstracts and full publications that met the inclusion criteria. We considered all available studies up to 2023, the year of data collection.

To map the state of self-compassion research in Brazil, the following data were extracted for analysis: 1. Year of publication; 2. Country regions (South, Southeast, Central-West, Northeast, and North); 3. Research fields (e.g., Psychology, Biology, Medicine); 4. Research nature (empirical or theoretical); 5. Study design (cross-sectional or longitudinal); 6. Participant profiles (e.g., university students, healthcare professionals, women); 7. Participant age range (adolescents, adults, older adults); 8. Participant gender (male, female, both); 9. Standardized instruments used; 10. Data collection methods (questionnaire, review, interview, experiment, intervention); 11. Publication type (journal article, book or book chapter, conference abstract, master’s thesis, doctoral dissertation, undergraduate thesis); 12. Keywords, to identify research focus areas in self-compassion; and 13. Study classification regarding self-compassion: (a) “On self-compassion,” for studies primarily focused on self-compassion, or (b) “Containing self-compassion,” for studies with other primary focuses but reporting self-compassion as a variable.

RESULTS

The initial search yielded 540 publications. After removing duplicates ($n = 221$) and excluding studies not meeting the inclusion criteria ($n = 204$), a revised sample of 125 publications was selected. Since some publications included more than one study, the final sample comprised 152 studies (Figure 1).

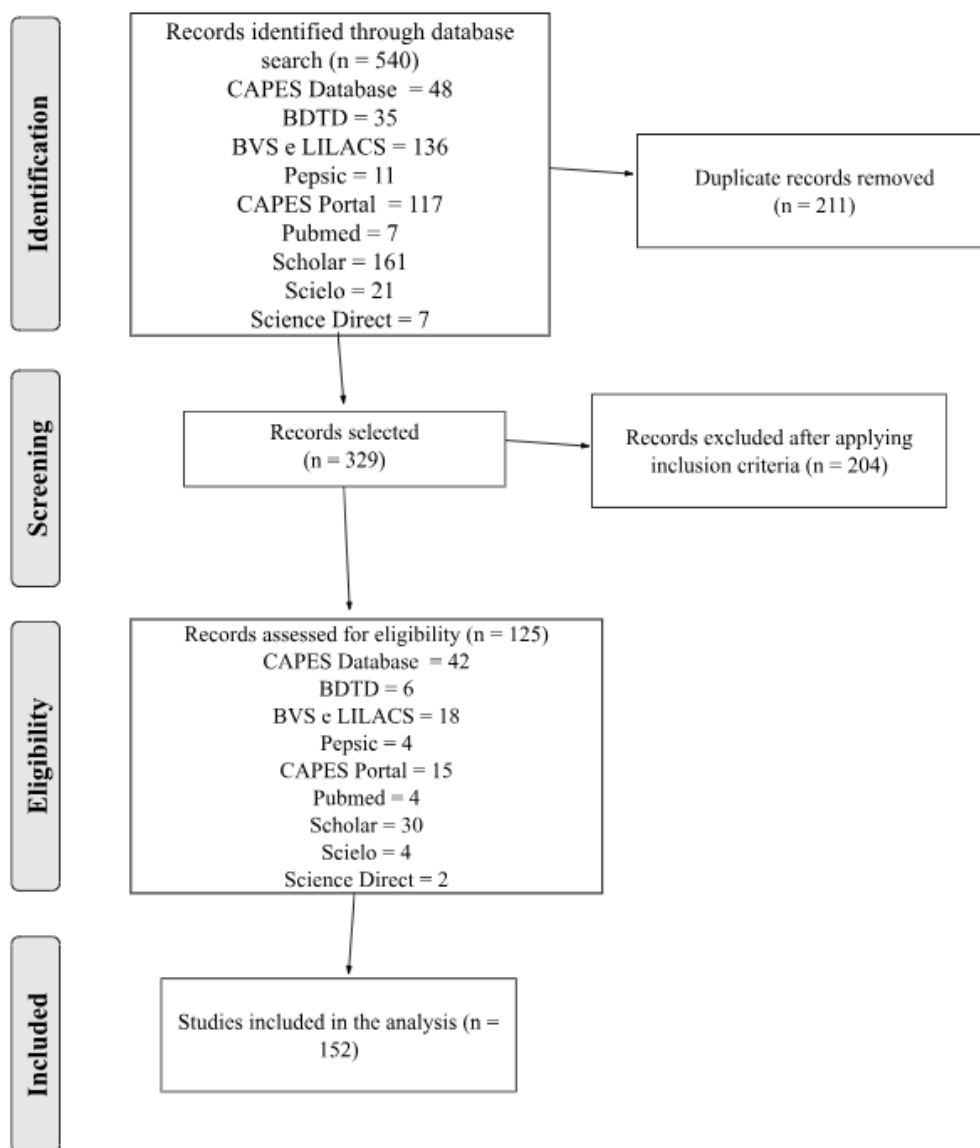


Figure 1. Publication flow across scoping review phases (Image adapted from: <http://www.prisma-statement.org/PRISMAStatement/FlowDiagram>).

Although self-compassion studies were conducted across all five geographic regions of Brazil, the highest concentration of studies originated from the South (41.4%), followed by the Southeast (38.8%) and Northeast (17.1%), while the Central-West (2%) and North (0.7%) regions were significantly underrepresented.

Figure 2 illustrates the number of studies published per year, highlighting a notable increase in publications over time: in eleven years, from 2012 to 2023, the number of published studies grew by 17-fold. No publications were found prior to 2012.

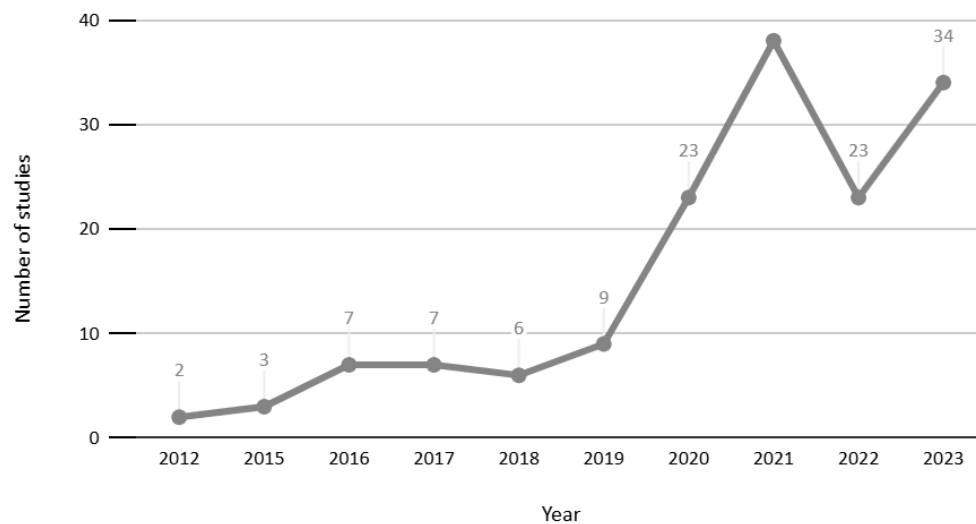


Figure 2. Frequency of self-compassion studies by publication year.

The most common types of publications were journal articles (38.8%) and theses (34.2%), followed by dissertations (17.1%), conference abstracts (7.2%), and undergraduate theses (2.6%). Three-quarters of the studies were empirical, while one-quarter were theoretical. Most studies (96.5%) used a cross-sectional design. Furthermore, questionnaires were the primary data collection method (63.2%), followed by interventions and experiments (30.7%) and interviews (6.1%).

In terms of academic fields, psychology accounted for 65.8% of the studies, followed by medicine (13.8%), nursing (7.2%), public health (4.6%), and gerontology (3.9%). Other fields, such as physical therapy, occupational therapy, physical education, biochemistry, and administration, contributed one to three studies each (Table 1).

Table 1. Frequency of self-compassion studies by field of study

Field of study	N	%
Psychology	100	65.8
Medicine	21	13.8
Nursing	11	7.2
Public Health	7	4.6
Gerontology	6	3.9
Administration	3	2.0
Biochemistry	1	0.7
Physical education	1	0.7
Physical therapy	1	0.7
Occupational therapy	1	0.7
Total	340	100

Most studies investigated participants of both sexes (79.8%), followed by those focusing exclusively on female participants (17.5%). Adults were the predominant age group (84.2%), followed by older adults (9.6%) and adolescents (5.3%). Specific target populations included university students (18.9%), women (11.4%), older adults (9.6%), and healthcare professionals (6.1%). Other specific groups, with study counts ranging from one to six, included adolescents, patients, nurses, caregivers, teachers, psychotherapists, family members, men, police officers, athletes, immigrants, mothers, meditators, community members, individuals in relationships, residents, and workers.

Among the instruments used, of the 81 studies employing scales and questionnaires, the Self-Compassion Scale (SCS) was used in 81.2% of the studies. Adapted versions of the SCS included the Self-Compassion Scale – Short Form (SCS-SF), used in two studies, and the Self-Compassion Scale for Adolescents (SCS-A), used in one study. Other frequently used instruments were the Positive and Negative Affect Schedule (PANAS) (12.3%), the Perceived Stress Scale (PSS) (12.3%), and the Mindfulness Attention Awareness Scale (MAAS) (11.1%). Various other mental health assessment tools were used, such as the Mini-Mental State Examination (MMSE), the Five Facets Mindfulness Questionnaire (FFMQ), the Hospital Anxiety and Depression Scale (HADS), the Depression, Anxiety, and Stress Scale (DASS-21), the Beck Depression Inventory (BDI), and the Maslach Burnout Inventory – General Survey (MBI-GS).

Most of our sample (57.9%) consisted of studies specifically focused on self-compassion ($n = 88$), followed by studies containing self-compassion as a variable (42.1%; $n = 64$). Among the studies containing self-compassion, a significant portion (46.8%) addressed topics related to meditation, mindfulness, and mindfulness-based interventions. In studies centered on self-compassion, aside from association and correlation studies, four addressed instrument validation, three used the Compassion-Focused Therapy (CFT) approach, and one involved self-compassion training.

Regarding research topics based on keywords, in addition to the expected keywords Self-compassion (10.8%) and Compassion (3.1%), other frequently found keywords included Mindfulness (6.8%), Mental health (3.3%), Meditation (2.2%), Pandemic/COVID-19 (2%), Anxiety (1.8%), Stress (1.8%), and Quality of life (1.6%).

DISCUSSION

This study represents the first known review of research on self-compassion in Brazil. We systematically organized studies available in online databases through 2023 to summarize the state of the art in Brazilian self-compassion research, highlighting key trends and gaps in the field. Presenting findings from 152 studies, we provide a more precise overview of this research in Brazil. Notably, most studies ($n = 100$) are concentrated in the field of Psychology.

Our review revealed a significant growth in research volume over the years. We identified studies starting from 2012, with a 17-fold increase in the number of studies over the 11-year period from 2012 to 2023. This growth indicates a rising interest in self-compassion research within Brazil, paralleling a global trend driven by the well-documented health benefits of self-compassion, such as improved well-being, emotional regulation, reduced mental health symptoms, increased happiness and life satisfaction and decreased perfectionism and fear of failure^{1-3,6,9,11-16}. Particularly notable is the fourfold increase in studies from 2019 to 2021, likely associated with social isolation during the COVID-19 pandemic, which spurred increased attention to mental health. In this context, self-compassion may offer various benefits, including resilience, acceptance during difficult times, more positive affect and optimism, reduced negative affect, and lower levels of stress, anxiety, and depression^{1,3,6,8,9,11,12,14,15,17}.

We identified self-compassion studies across all five geographic regions of Brazil. Most studies were conducted in the South, Southeast, and Northeast regions, while the Central-West and North were markedly underrepresented. One possible explanation for this pattern is that regions with a higher volume of academic output may also have more research groups and postgraduate programs focused on mindfulness, neuroscience, behavior, and positive psychology, thereby fostering interest in studying self-compassion.

With respect to participants, the studies primarily focused on adults (84.2%). Only a few studies targeted older adults ($n = 11$) and adolescents ($n = 6$). A wide range was observed among specific populations, which is valuable for the field and enhances the practical applicability of self-compassion research. Although university students, who are more accessible to researchers, constituted the most frequently targeted specific group, a considerable number of studies focused on health students and professionals, as well as teachers and caregivers.

On the one hand, research involving university students may introduce sampling biases, particularly about generalizing results that may only apply to individuals aged 18-25 or those from higher socioeconomic classes, thus not reflecting the general population. On the other hand, some studies explicitly focused on health students. Similarly, professionals, particularly in the healthcare field, experience negative impacts on their professional quality of life due to mental, physical, and emotional exhaustion from prolonged engagement in emotionally demanding situations¹⁹. This can lead to acute stress, burnout, and compassion fatigue. Against this backdrop, research on coping mechanisms and self-compassion has been increasing for this population, who critically need to mitigate negative impacts and enhance their quality of life.

In terms of participant sex, most studies included both sexes or exclusively focused on women, with very few studies exclusively targeting men. Studies show that women tend to be less self-compassionate than men, as they are often more self-critical. Furthermore, women are more compassionate towards others than towards themselves or than others are towards them²⁰. Consequently, these studies aim to improve the well-being of women, helping to reduce self-criticism, severe self-judgment, shame, perfectionism, and fear of failure, among other issues.

From a methodological standpoint, most studies were empirical and employed a cross-sectional design. Questionnaires were the most widely used data collection method, likely due to the convenience of data collection. The most frequently applied questionnaire was the Self-Compassion Scale (SCS), which examines how individuals generally treat themselves during challenging times and includes items on mindfulness, self-kindness, common humanity, self-criticism, over-identification, and isolation^{21,22}. Interventions and experiments were the second most common methods, possibly reflecting interest in the practical applications and health benefits of self-compassion for well-being and quality of life.

The predominance of questionnaires as a data collection method may also be linked to the social isolation period during the COVID-19 pandemic when online forms provided a safe and accessible research tool (from 2012 to 2019, $n = 16$; from 2020 to 2023, $n = 54$). Additionally, as interest in the topic grew during this time, methodologies had to adapt to the circumstances to allow research continuity. This shift is evident in the increased number of theoretical studies and reviews (from 2012 to 2019, $n = 2$; from 2020 to 2023, $n = 36$). Nevertheless, we found 12 interventions and experiments in 2021, the year following the pandemic's start, most of which involved therapeutic groups and mindfulness and/or self-compassion training.

We observed a slightly stronger interest in studying self-compassion as a main topic ($n = 88$) than in studying it as a variable within other themes ($n = 64$). Among studies where self-compassion was an investigated variable, over 45% focused on meditation, mindfulness, and mindfulness-based

interventions. It is well-established that self-compassion and mindfulness are interrelated concepts mutually reinforcing each other. This connection is supported by the high frequency of keywords like “mindfulness,” “meditation,” and “attention” found in self-compassion publications. Practicing mindfulness aids in developing self-compassion skills¹⁸. Therefore, studies are expected to explore self-compassion within mindfulness practices to assess how a more open, non-judgmental awareness contributes to a kinder, less critical self-view.

By analyzing the keywords in the publications, other frequently occurring terms included mental health, COVID-19 pandemic, anxiety, stress, and quality of life. As discussed earlier, the COVID-19 pandemic was a challenging time for most people, resulting in a heightened demand for coping strategies to manage mood, stress, anxiety, and depression, reduce self-criticism, and enhance resilience. Finally, there is a growing interest in mental health, anxiety, stress, and quality of life, all of which are areas where self-compassion can bring multiple benefits, leading to improved well-being and reduced human suffering.

A study using bibliometric scientific mapping to examine self-compassion research identified 2,185 articles published between 1999 and 2020. The analyses identified four general themes: 1. Mental health and well-being; 2. Clinical outcomes; 3. Self-perceptions; and 4. Physical health and family issues²³. Based on the 152 Brazilian studies on self-compassion and an analysis of their keywords, most of these studies fall under the theme of “mental health and well-being,” with only a few addressing “clinical outcomes.” Future studies could expand to include self-perceptions among the Brazilian population regarding self-compassion and explore self-compassion’s contributions to physical health and family issues.

Future studies could focus more on the Central-West and North regions of Brazil. Researchers could also increase the representation of older adults, adolescents, children, and men in self-compassion studies. Generally, as life expectancy rises, more individuals reach advanced ages, and self-compassion may contribute to greater quality of life, well-being, resilience, and coping with difficult moments while reducing psychological distress²⁴. For children and adolescents, the prevalence of mental disorders has increased in recent years, with a global prevalence estimated at 13.4% between 1985 and 2012²⁵. Self-compassion could aid in emotional regulation, symptom reduction, enhanced well-being, happiness, self-esteem, and optimism, decreased shame, guilt, perfectionism, and fear of failure, as well as promote greater self-acceptance^{1-3,6,9,12-16}.

For men, self-compassion may help reduce adherence to traditional masculinity norms, which can lead to negative outcomes such as high levels of shame, low self-esteem, and challenges in emotional expression and accessing emotional regulation²⁶. Longitudinal studies are also recommended to observe self-compassion’s development and change over time across different life stages. These studies would also evaluate intervention effectiveness and contribute to a better understanding of the causal relationships and effects of self-compassion on other variables. Future reviews could also investigate theological literature’s contributions to self-compassion, providing an integrated approach that considers both emotional and spiritual aspects, thereby enriching the understanding and practice of self-compassion.

Self-compassion offers a more welcoming and understanding approach to oneself and is a skill that can be learned, yielding various health benefits. Identifying the state of the art and research gaps in Brazil contributes to advancing this emerging field, thus addressing underexplored or previously unexamined aspects. It also aids in understanding and meeting social, clinical, and scientific needs, as well as in enhancing self-compassion practices and interventions, which can significantly benefit

individuals in need of treating themselves with greater kindness and self-care, ultimately promoting better health and quality of life.

CONCLUSION

This scoping review evaluated the state of the art on self-compassion research in Brazil and identified knowledge gaps. Revealing a significant growth in research volume over the years, we found studies starting in 2012, with the number of publications increasing 17-fold within 11 years. Most studies were conducted in the South, Southeast, and Northeast, while the Central-West and North were underrepresented. Studies primarily focused on adult participants, involving both genders or exclusively women. The majority of studies were empirical and used a cross-sectional design. Questionnaires were the most frequently used data collection method, followed by interventions and experiments. Self-compassion was mainly studied as a primary theme, and in studies where it was a variable, most focused on meditation and mindfulness. This review contributes to this growing research field, as self-compassion benefits the Brazilian population, supporting individuals in relating to themselves with less criticism and greater kindness and compassion.

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