The Self-Compassion Scale's Validity in a HBCU Undergraduate Sample

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ABSTRACT   The purpose of the current study was to determine the validity of the Self-Compassion Scale in a non-clinical, Historically Black College or University undergraduate sample. The sample included 669 participants, with a mean age of 19.94 years (SD= 1.70). Participants completed a computerized survey that included psychosocial measures assessing self-compassion, depressive symptoms, satisfaction of life, social support, and mindfulness. Principal component analysis yielded two components, Uncompassionate and Compassion. The Uncompassionate component accounted for the most variance (37.79%) and was positively associated with depressive symptoms. The Compassionate component, which accounted for 19.24% variance, was positively associated with the social support, mindfulness, and satisfaction of life. These findings run in contrast to the 6-factor model in previous research and add to the growing literature surrounding the self-compassion construct.

Keywords: Self-Compassion; Historically Black College or University; Mindfulness; Psychometrics; Psychosocial

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INTRODUCTION

Over the last two decades, self-compassion has emerged as a unique construct, utilized in various interventions and treatments (Albertson et al., 2014; Smeets et al., 2014; Friis et al., 2016). Previous research suggests self-compassion is negatively associated with poor mental health outcomes and positively associated with psychological well-being (Neff et al., 2007). Self-compassion is characterised by the compassion or sympathy expressed towards oneself when feeling emotionally distraught or inadequate. Seminal work by Neff (2003a) discusses self-compassion in the context of three main components: 1) self-kindness versus self-judgment, 2) common humanity versus isolation, and 3) mindfulness versus overidentification. These components reflect an individual's awareness and balance regarding painful thoughts, or the degree a person identifies their experiences as part of the larger human experience (Neff 2003a; Reilly et al., 2013). Moreover, these concepts reflect the six-factor structure and the subsequent six subscales represented on the self-compassion scale. The Self-Compassion Scale (SCS) is comprised of 26 items, spread across six intercorrelated subscales (Neff, 2003). The SCS has been widely used in various populations and in several languages (Neff & Vonk, 2009; Castilho & Pinto-Gouveia, 2011; Garcia-Campayo et al., 2014; Petrocchi et al., 2013).

Previous research attempting to examine the SCS' validity have yielded positive associations with measures of social connectedness, life satisfaction, self-esteem, and emotional processing and negative associations with measures of psychological distress, self-criticism, neurotic perfectionism, and rumination (Neff, 2003). Findings from these studies are inconsistent, with some providing empirical support for the SCS six-factor structure (Neff et al, 2017) and others reporting results that suggest a model focusing on two constructs: Self-compassion versus self-critical attitudes differ from the framework presented by Neff (Lopez et al., 2015; Costa et al., 2015). Support for the generalizability of the six factor model, with one higher order factor structure, was reported in European and American community samples (Raes et al., 2011; Castilho, Pinto-Gouveia, and Duarte, 2015; Neff & Vonk, 2009; Garcia-Campayo et al., 2014; Petrocchi et al., 2013). Recently, researchers have identified a two-factor model, which reflects positive and negative components within self-compassion (Lopez et al., 2015; Costa et al., 2015). In contrast to the six-factor model previously posited by Neff and colleagues, previous research suggests the scale is comprised of two distinct dimensions: a negative self-criticism dimension and a positive self-compassion dimension (Costa et al, 2015). The negative dimension has predicted negative mental health outcomes and the positive dimension either weakly predicted negative outcomes or did not predict them at all (Lopez et al., 2015; Costa et al., 2015).

Some discrepancies exist in the replication of the findings, but the theoretical framework presented by Neff (2016) maintains that there are compassionate and uncompassionate components embedded in the

self-compassion questionnaire. Further factor structure replication and validity assessment with different psychosocial constructs is necessary. The SCS is employed in undergraduate students (Neff, 2003), community-based samples (Neff & Vonk, 2009), and clinical samples (Gilbert & Procter, 2006; Costa et al., 2015). However, no study has examined self-compassion in a Historically Black College or University (HBCU) sample, which may have unique stressors. These stressors include being the first in their families to go to college (Negga, Applewhite, & Livingston, 2007) or lack of resources (Greer et al., 2008). Approximately 41% of African Americans are first generation college students (Bettinger, Baker, 2011). Moreover, approximately 70% of HBCU students are of low socioeconomic status, compounding other stressors experienced by students (Balemian & Feng, 2013). Many researchers employ tasks despite not having any validity studies conducted in that sample type. Given the majority of previous samples included less than 8% Black or African American participants, elucidating how the SCS functions within a predominantly Black institution may be critical for tailoring intervention methods and clinical care for HBCU undergraduate students by including self-compassion as a construct. The purpose of the study was to determine the validity of the SCS in a sample of HBCU undergraduate students. Given previous research, we anticipate having six components, similar to Neff (2003). Specifically, compassionate components (e.g. Self-Kindness, Common Humanity, and Mindfulness) will be positively associated with positive psychosocial measures and the uncompassionate components (e.g. Self-Judgment, Isolation, and Overidentification) will be positively associated with the negative psychosocial measures.

METHOD

Participants
The data were collected as a part of the cross-sectional parent study entitled "*The Checkpoint Survey Study*" (Keen, Blanden, & Rehmani, 2016). The sample consisted of 669 undergraduate students from Virginia State University, with a mean age of 19.94 (SD = 1.70) 509 (76%) females and 160 (24%) males. The majority of the sample identified as Black 552 (82.5%). There were 53 (7.9%) participants that identified as Mixed, 26 (4%) that identified as White, 20 (3%) that identified as Other, nine (1.3%) that identified as Hispanic, seven (1%) that identified as Asian, and two (0.3%) that identified as American Indian. This study recruited undergraduate college students from Psychology, Mathematics, and Biology courses through flyers and professor referrals in the Virginia State University departments of Psychology, Mathematics, and Biology. Inclusion criteria for the current study included individuals between the ages of 18 and 25 years, with no history of traumatic brain injury. This study has received annual approval from the Virginia State University Institutional Review Board. Only those with complete demographic, psychosocial, and substance use history data were included in the current study.

PROCEDURE

The study procedure included one in-person study visit, which lasted approximately 30 minutes. Each participant took part in an online survey that included demographic information, such as age, sex, and socioeconomic status, followed by measures of substance use, brief medical history, depressive symptomatology, interpersonal and family social support, mindfulness, life satisfaction, impulsivity, and self-compassion. After completion of the online survey, participants' names were collected and recorded so that they could receive extra credit in their respective courses. Participants were allowed to discontinue study at any time without penalization and still received extra credit. If a student declined to participate in the study they did not receive extra credit.

MEASURES

Ethnicity
A single item was utilized from the Multigroup Ethnic Identity Measure (MEIM) (Phinney, 1992; Roberts et al., 1999) to assess ethnicity in the current study. The participants were asked to choose from the following options to identify their ethnicity: 1) Asian or Asian American, including Chinese, Japanese, and others; 2) Black or African American; 3) Hispanic or Latino, including Mexican American, Central American, and others; 4) White, Caucasian, Anglo, European American; not Hispanic; 5) American Indian/Native American; 6) Mixed; Parents are from two different groups; and 7) Other.

Depressive Symptomatology
The Center for Epidemiologic Studies Depression Scale (CES-D) is a brief self-report scale used to measure depressive symptoms in the general population. The items on the CES-D were designed to see if symptoms associated with depression are present or not within the past seven days (Radloff, 1977). The scale is composed of 20 items on a four-point scale ranging from 0 to 3, representing "rarely or none of the time (less than a day)" to "most or all of the time (5 to 7 days)" and added together to create a total score. The possible range of scores is 0 to 60, with the higher scores indicating the presence of more symptomatology. Items include: "I was bothered by things that usually don't bother me." and "I had trouble keeping my mind on what I was doing." The CES-D has high reliability and is predicted to correlate well with similar measures. In this study, this scale had a Cronbach's alpha of .87.

Family Social Support

The Perceived Family Social Support Scale (PSS-Fa) was used to measure family social support. This scale is comprised of 20 questions that are answered by "Yes", "No", or "Don't Know." Questions focused on how people perceive closeness to their families and assess how and if they feel their needs are addressed by their families. The scale also measures their perceived dynamics of them in their families in relation to overall support (Procidano & Heller, 1983). Example items include: "Most other people are closer to their family than I am." and "I have a deep sharing relationship with a number of members of my family." For each item, the response indicative of perceived social support was scored as "1" so that scores ranged from 0, indicating no perceived social support, to 20, indicating maximum perceived social support as provided by family. The "Don't Know" category is not scored (Procidano & Heller, 1983). This scale yielded a Cronbach's alpha of .81.

Mindfulness

The Mindfulness Attention Awareness Scale (MAAS) is a 15 item, self-report measure designed to measure trait mindfulness in adult populations (Brown & Ryan, 2003). Each question is written in the negative, to assess "mindlessness" (e.g., "I could be experiencing some emotion and not be conscious of it until sometime later."). Responses are scored using a six point Likert scale from 1 (almost always) to 6 (almost never), and are added together to create a total score. Higher scores are indicative of higher levels of mindfulness. In the current sample the scale yielded a reliability coefficient of .89, which is comparable to other studies that have examined Black college students (Morgan, Masuda, and Anderson, 2014)

Life Satisfaction

The Satisfaction with Life Scale (SWLS) assesses global cognitive judgements of one's own life satisfaction as a whole. The instrument does not assess satisfaction with domains such as health but permits participants to integrate and weigh such domains however they choose (Diener, Emmons, Larsen, & Griffin, 1985). The scale consists of five items using a seven-point scale that ranges from 7 "Strongly Agree" to 1 "Strongly Disagree". Example items include: "I am satisfied with my life." and "If I could live my life over, I would change almost nothing." The total score is computed by adding up the five items and obtaining a total mean score. The total score yielded a Cronbach's alpha of .85.

Impulsivity

The Impulsiveness Sensation Seeking Scale (ImpSS) of the Zuckerman-Kuhlman Personality Questionnaire was used to measure impulsivity (Zuckerman et al., 1993). The ImpSS consists of 19 items measuring poor planning, inattention, and impulsive acts. Questions included statements such as, "I tend to change interests frequently"; "I will try anything once"; and "I prefer friends that are excitingly unpredictable". The responses were dichotomous, "True" and "False". Each item is scored 1 for "True" except for the reverse scored item, where "False" received a score of 1. The ImpSS measure includes an impulsivity subscale, sensation seeking subscale, and impulsivity overall total scale. The impulsivity total scale yielded a Cronbach's alpha coefficient of .76. The impulsivity subscale had a Cronbach's alpha coefficient of .65. The sensation seeking subscale yielded a Cronbach's alpha coefficient of .70.

Self-Compassion

The Self-Compassion Scale is a 26-item measure that was used to assess trait levels of self-compassion through six orthogonal subscales (Neff, 2003). The subscales include being kind and understanding towards oneself in times of pain or failure rather than being harshly self-critical; perceiving one's experiences as part of the larger human experience instead of seeing them as isolated; and keeping painful feelings and thoughts in mindful awareness rather than over-identifying with them. The measure is used on a five-point likert scale ranging from 1 representing "Almost Never" to 5 representing "Almost Always". The Self-Compassion Scale consists of six subscales: Self-Kindness (kindness and understanding towards one's self), Self-Judgement (harsh self-judgement or criticism), Common Humanity (the realization that suffering and inadequacies are a part of the human condition and that one's unique experience is a part of the natural human experience), Isolation (egocentric feelings of separation), Mindfulness (a non-judgmental, receptive mind state in which individuals pay attention to their feelings and thoughts as they arise without trying to change them and running away from them), and Over Identified (the excessiveness of personal suffering and failure to recognize others experiencing similar issues). Items include: "When times are really difficult, I tend to be tough on myself." and "When I fail at something important to me, I try to keep things in perspective." The Self-Kindness subscale yielded a Cronbach's alpha of .78. The Self-Judgment subscale yielded a Cronbach's alpha of .83. The Common Humanity subscale yielded a Cronbach's alpha of .79. The Isolation subscale yielded a Cronbach's alpha of .82. The Mindfulness subscale yielded a Cronbach's alpha of .80. The Over-Identified subscale yielded a Cronbach's alpha of .80. The total score yielded a Cronbach's alpha of .84.

Assessment of Covariates

Age (in years) and sex were collected via the demographic questionnaire. Sex was dummy coded where males were represented by "0" and females were represented by "1".

Data Analysis
Statistical analyses were conducted in SPSS, version 24 (IBM, 2016). Descriptive statistics were determined by using means, standard deviations, frequencies, and percentages. For these analyses, ethnicity and sex were categorical variables. Ethnic categories were Asian, Black, Hispanic, White, American Indian, Mixed, and Other as the levels of the variable. T-test analyses were employed to determine sex-based differences in demographic and psychosocial study variables. For the ethnicity and gender variables, Chi Square analyses were used to determine their association with sex. Principal components analyses, with a varimax rotation, was employed to determine the loadings and component structure for the Self-Compassion Scale. Principal components analysis provides standardized loading statistics, presented in absolute statistics (Harman, 1976). Thus, the first component, comprised of negatively worded items, was multiplied by -1 for interpretation. Zero-order Pearson r correlation analysis was utilized to determine associations among the components yielded from the Principal Component analysis, demographic and psychosocial variables, and original subscales of the Self-Compassion Scale.

RESULTS

Self-Compassion Scale Data Reduction
Principal component analysis was conducted to determine the structure and variance of the SCS in the current sample. As seen in Table 2, the principal component analysis revealed two components of the SCS in the current sample. The two components accounted for approximately 57.04% of the total variance and were named Uncompassionate and Compassionate (Neff, 2016). The "Uncompassionate" component accounted for approximately 37.79% of the variance within the SCS and consisted of items 1, 2. 4, 6, 8, 11, 13, 16, 18, 20, 21, 24, and 25. The "Compassionate" component accounted for approximately 19.24% of the variance within the SCS and consisted of items 3, 5, 7, 9, 10, 12, 14, 15, 17, 19, 22, 23, and 26.

Correlations Among Components, Subscales, Psychosocial Factors and Demographic Characteristics
As shown in Table 3, there were statistically significant correlations among the SCS subscales, components, and covariates. The "Uncompassionate" component was positively correlated with the ImpSS (r = .113, p = .035) and the CESD (r = 510, p = .023). The "Uncompassionate" component was negatively correlated with the MAAS (r = -.126, p = .001), the ISEL subscales Appraisal subscale (r = -.187, p = .001), Belonging subscale (r = -.210, p = .001), Tangible subscale (r = -.165, p = .001), FSS (r = -.239, p = .001), and SWLS (r = -.391, p = .001). The "Compassionate" component was positively correlated with the MAAS (r

= .134, p = .001), Appraisal subscale (r = .086, p = .026), Belonging subscale (r = .146, p = .001), Tangible subscale (r = .146, p = .001), and FSS (r = .093, p = .016).

DISCUSSION

The current study proposed to determine validity of the Self-Compassion Scale (SCS) in an HBCU undergraduate sample. Specifically, we looked to determine the component structure of the SCS and the components' associations with psychosocial factors. Results suggested a two component solution, accounting for more than half of the total variance in the SCS. The two components seemed to be stratified by the negative and positive scope of the items, consistent with previous research (Brenner et al., 2017). The component comprised of the negative items on the SCS was the stronger component, accounting for approximately 37.79% of the total variance. Additionally, there were gender-based differences in the Self-Kindness and Mindfulness subscales. Specifically, women reported higher scores of self-kindness than their male counterparts. However, men reported higher mindfulness levels than women.

This study employed a data reduction technique similar to factor analysis, principal component analysis, to determine the component structure of the SCS. Our results did not support the six subscales nor the overarching single component of SCS presented in previous research (Neff, 2003; Raes et al., 2011). The findings in this study partially support previous SCS psychometric assessments by Neff (2016) and others (Costa et al., 2015), which discuss the possibility of two SCS components: uncompassion and compassion. Previous commentary on employing the two-component model for SCS suggests that the two-component model does not effectively capture individuals' affective responses, cognitive understanding, or attentiveness towards their suffering (Neff, 2016). Thus, a six-factor model allows researchers and clinicians to measure six distinct ways that individuals address pain, failure, and suffering. This theoretical consideration must be strongly considered when using the SCS. If a researcher looks to examine particular theoretical components of SCS, then attempting to extrapolate or infer one or all of the six subscales from the two components would be improper. However, if a researcher is looking to examine self-compassion in general, employing the two components may be a more prudent way to address the construct.

The uncompassion and compassion components presented in the current study correlated with psychosocial factors as expected and aligned with well-established literature. Specifically, the uncompassion component was negatively related to positive or healthy psychosocial

factors (i.e. mindfulness, social support, satisfaction with life) and positively related to detrimental psychosocial factors (i.e. impulsivity, depressive symptomatology). Additionally, the compassion component was only associated with positive or healthy psychosocial factors. These findings aid in determining the validity of the SCS in this HBCU undergraduate sample. Our validity findings are consistent with previous studies (Pertocchi et al., 2013). This is the first study to use social support factors as a potential validation factor, which may aid in future clinical research. Understanding how self-compassion may be associated with patients', or participants' social support interactions may aid in developing tailored treatment programs.

The six subscales all reported acceptable internal consistencies, despite not differentiating when the principal component analysis was employed. Females were significantly higher in self kindness than males, while males reported significantly higher mindfulness levels than their female counterparts. Men reporting higher levels of mindfulness is consistent with previous research (Neff, 2003). Contrary to Neff's (2003) seminal work, women reported higher self-kindness. Overall, the mean SCS subscale scores were higher than previous undergraduate samples (Neff, 2003a; Garcia-Campayo et al., 2014; Brenner et al., 2017) and community-based studies (Pertrocchi et al., 2013). This presents a unique contrast in the literature, given previous research utilizing SCS is not predominantly comprised of Black or African American young adults.

Some limitations must be considered when interpreting the current findings. First, our study is cross-sectional, and we cannot draw causal conclusions. The undergraduate sample recruited for the current study did not have an even distribution of male and female participants. However, the large sample size and breadth of psychosocial factors included in the study aid in the interpretation and potential extrapolation of the current findings.

The results from the current study suggest that there is a difference between the theoretical interpretation of the six subscales and the statistical results when compared to previous research. However, the findings from this study support the notion of the Self-Compassion Scale being driven by two main constructs: self-compassion and un-compassion. Given self-compassion's utility in numerous clinical and research-based fields, it is critical to continue to determine the Self-Compassion Scale's association with other quality of life and measures assessing psychological and physiological symptomatology. This will not only elucidate the connection between self-compassion and health, but also provide for opportunities for empirical replication of the statistical composition of the SCS in clinical and non-clinical samples.

Table 1: Demographic and Psychosocial Characteristics

	Total Sample (N= 669)	Men (n=160)	Women (n=509)		
	N/Mean (%/ SD)	N/Mean (%/SD)	N/Mean (%/SD)	²/ T-Statistic	p- value
Age	19.94 (1.70)	19.99 (1.74)	19.90 (1.69)	0.19	0.41
Ethnicity					0.05
0.04					
Asian	7 (1%)	5 (3.1%)	2 (0.4%)		
Black	552 (82.5%)	128 (80%)	424 (83.3%)		
Hispanic	9 (1.3%)	4 (2.5%)	5 (1%)		
White	26 (4%)	8 (5%)	18 (3.5%)		
American Indian	2 (0.3%)	0 (0%)	2 (0.4%)		
Mixed	53 (7.9%)	10 ((6.3%)	43 (8.4%)		
Other	20 (3%)	5 (3.1%)	15 (2.9%)		
IMPSS	9.16 (4.08)	9.25 (4.32)	9.14 (4.01)	0.31	0.12
PSS-Fa	13.16 (5.68)	13.05 (5.45)	13.20 (5.76)	-0.28	0.20
CESD	17.96 (10.59)	15.33 (9.20)	18.78 (10.87)	**-3.63**	**0.01**
Appraisal	13.69 (2.42)	13.53 (2.49)	13.74 (2.39)	-0.96	0.78
Belonging	13.62 (2.22)	13.66 (2.33)	13.61 (2.19)	0.25	0.44
Tangible	13.36 (2.18)	13.26 (2.11)	13.39 (2.21)	-0.61	0.74
MAAS	3.55 (1.09)	3.60 (1.18)	3.53 (1.06)	0.73	0.11
SoL	23.36 6.51)	24.18 (5.98)	23.10 (6.66)	1.83	0.11
SCQ Subscales					
Self-Kindness	3.90 (1.16)	3.76 (1.29)	3.94 (1.12)	**-1.70**	**0.04**
Common Humanity	3.79 (1.21)	3.64 (1.32)	3.83 (1.17)	-1.71	0.05
Mindfulness	3.95 (1.19)	4.01 (1.39)	3.93 (1.12)	**0.73**	**0.01**
Self Judgement	3.21 (1.04)	3.41 (1.00)	3.14 (1.05)	2.80	0.65
Isolation R	3.22 (1.04)	3.42 (1.02)	3.16 (1.05)	2.75	0.83
Over Identified	3.22 (1.03)	3.56 (1.01)	3.12 (1.02)	4.75	0.90

Note: N=669; Asian= Asian or Asian American; Black= Black or African American; Hispanic= Hispanic or Latino; White= White, Caucasian, Anglo, European American; American Indian= American Indian/Native American; Appraisal= Interpersonal Support Evaluation List subscale; Belonging= Interpersonal Support Evaluation List subscale; Tangible= Interpersonal Support Evaluation List subscale; MAAS= Mindfulness Attention Awareness Scale; PSS-Fa= Perceived Family Social Support; SoL= Satisfaction of Life; IMPSS= Impulsive Sensation Seeking scale; CESD= Center of Epidemiologic Studies Depression scale

Table 2: Principal Component Analysis of Self Compassion Questionnaire

Items	PCA 1		PCA 2	
	Rotated	SE	Rotated	SE
1. I'm disapproving and judgmental about my own flaws and inadequacies.	0.741	0.053		
2. When I'm feeling down I tend to obsess and fixate on everything that's wrong.	0.790	0.052		
4. When I think about my inadequacies, it tends to make me feel more separate and cut off from the rest of the world.	0.775	0.049		
6. When I fail at something important to me I become consumed by feelings of inadequacy.	0.765	0.050		
8. When times are really difficult, I tend to be tough on myself.	0.721	0.052		
11. I'm intolerant and impatient towards those aspects of my personality I don't like.	0.746	0.048		
13. When I'm feeling down, I tend to feel like most other people are probably happier than I am.	0.765	0.049		
16. When I see aspects of myself that I don't like, I get down on myself.	0.818	0.047		
18. When I'm really struggling, I tend to feel like other people must be having an easier time of it.	0.741	0.048		
20. When something upsets me I get carried away with my feelings.	0.729	0.050		
21. I can be a bit cold-hearted towards myself when I'm experiencing suffering.	0.745	0.051		
24. When something painful happens I tend to blow the incident out of proportion.	0.693	0.046		
25. When I fail at something that's important to me, I tend to feel alone in my failure.	0.772	0.049		
3. When things are going badly for me, I see the difficulties as part of life that everyone goes through.			0.640	0.060
5. I try to be loving towards myself when I'm feeling emotional pain.			0.737	0.060
7. When I'm down and out, I remind myself that there are lots of other people in the world feeling like I am.			0.687	0.061
9. When something upsets me, I try to keep my emotions in balance.			0.693	0.057
10. When I feel inadequate in some way, I try to remind myself that feelings of inadequacy are shared by most people.			0.666	0.058
12. When I'm going through a very hard time, I give myself the caring and tenderness I need.			0.785	0.058
14. When something painful happens, I try to take a balanced view of the situation.			0.812	0.055
15. I try to see my failings as part of the human condition.			0.739	0.056
17. When I fail at something important to me I try to keep things in perspective.			0.822	0.054
19. I'm kind of to myself when I'm experiencing suffering.			0.563	0.060

Table 3: Correlations among Self Compassion Questionnaire, components and Psychosocial measures

	PCA 1	PCA 2
Age	0.018	0.065
Sex	**0.139****	0.034
Ethnicity	**0.124****	0.012
MAAS	**-0.126****	**0.134****
Appraisal	**-0.187****	**0.086***
Belonging	**-0.210****	**0.176****
Tangible	**-0.165****	**0.146****
FSS	**-0.239****	**0.093***
SoL	**-0.391****	0.074
ImpSS	**0.113****	0.035
CESD	**0.510****	0.023

Note: N=669; *= p <.05; **= p <.01; Appraisal= Interpersonal Support Evaluation List subscale; Belonging= Interpersonal Support Evaluation List subscale; Tangible= Interpersonal Support Evaluation List subscale; MAAS= Mindfulness Attention Awareness Scale; PSS-Fa= Perceived Family Social Support; SoL= Satisfaction of Life; ImpSS= Impulsive Sensation Seeking scale; CESD= Center of Epidemiologic Studies Depression scale; PCA 1= "Uncompassionate" Component; PCA 2= "Compassionate" Component

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