# 発表成果報告書

国際学術交流助成金に採択された方は，学会参加後１か月以内（ただし，助成決定時にすでに発表済みの場合は通知から１か月以内）に以下の資料をご提出ください。

① 発表成果報告書（本様式），②発表抄録（英文），③発表実績（ポスターやスライド等の写し）

【発表概要】（400 字程度）

2026 年 6 月 25 日から 28 日にかけて、アメリカのサンフランシスコで開催された第 11 回世界認知行動療法会議（WCCBT 2026）に参加し、ポスター発表を行った。本発表では、看護学生を対象としたセルフ・コンパッションに基づくバーンアウト予防のための心理教育的介入の長期的効果を検討した。日本の看護専門学校生を対象に、心理教育やマインドフルネス等を組み込んだ 3 回の介入と、1 年後の 2 回のブースターセッションからなる集団介入を実施した。介入前～就職 3 ヶ月後まで縦断的に評価し、piecewise growth model を用いて解析した。その結果、介入期には抑うつとバーンアウトの一部指標（個人的達成感の低下）が改善し、セルフ・コンパッションが増加した。就職後には抑うつやバーンアウトの悪化が見られたものの、介入期にセルフ・コンパッションがより大きく増加した学生ほど、就職後の精神健康の悪化が有意に小さかった。以上より、学生期におけるセルフ・コンパッションを高める介入が、就職後の心理的負担を緩和する可能性が示唆された。

【参加体験記】（800 字程度）

本大会は、サンフランシスコのダウンタウン内にあるホテル Marriott Marquis にて行われた。サンフランシスコの異国情緒あふれる街並みとカラッとした気候は印象深く、国際学会に参加したという実感が得られた。また、ランチタイムには食事やスナック、炭酸飲料が提供され、研究者同士のカジュアルな交流が行われるなど、フランクで新鮮な空気を感じた。ポスターセッションは思いのほか日本人の研究者も多く、海外の研究者のみならず日本の研究者の方々と交流できたことは大きな収穫だった。私の発表に関心を持っていただいた研究者の方々からは、特に介入の具体的内容に関する質問が寄せられた。加えて、看護学生や新人看護師のメンタルヘルス問題に対する心理臨床からの支援について、日本において本領域の実践・研究を牽引されてきた先生から直接示唆を得る貴重な機会にも恵まれた。さらに、他の参加者の発表を観覧し、私の他の研究テーマであるアディクションに関しても、同様の研究を行っている海外研究者との議論や、国内の第一人者の先生との意見交換を通じて大きな刺激を受けた。一方で、海外の発表者へ質問する際に考えを十分に伝えきれなかった。非英語圏の参加者も多く、つたない英語でも真摯にやりとりしてくれる研究者が多かったためコミュニケーションを積極的に行える環境だったが、議論を深めるための語学力向上が今後の課題だと感じられた。自身の発表以外では、シンポジウムから先進的な研究手法に触れることができたり、憧れていた著名な研究者と交流することもできた。特に、最終日に参加したアディクションのワークショップは非常に印象的であった。生物・心理学的要因に加え、社会的要因が及ぼす影響についてマクロな視点から解説があり、現代社会において臨床家が回復をどうサポートし向き合うべきか考える契機となった。今回の経験は、研究成果の世界への発信のみならず、臨床家・研究者としての視野を大きく広げる機会となった。この貴重な学びを糧にして、今後の研究および臨床活動に一層励んでいきたい。

## Title

Effects of a Self-Compassion Intervention for Nursing Students and Its Impact on Mental Health After Employment.


## Keyword

Burnout, Compassion, School/School-Based Interventions



## Abstract Text

Nurses are exposed to high levels of occupational stress (Parker et al., 2014). Although pre-employment mental health is associated with post-employment burnout (Rudman & Gustavsson, 2012), it remains unclear whether interventions delivered during the student period can mitigate mental health deterioration after entering the workforce. Self-compassion has gained attention as a protective factor against burnout and depressive symptoms, and intervention studies among nurses have reported its effectiveness (e.g., Neff et al., 2020).

This study examined the effects of a self-compassion intervention for nursing students and whether changes in self-compassion during the intervention period influenced post-employment mental health outcomes.

Participants were 221 students from a Japanese vocational nursing school (212 females; M age = 19.6, SD = 1.12). They received a group-based intervention consisting of three sessions that included psychoeducation on self-compassion and practice of related skills (e.g., soothing touch, mindfulness meditation), followed by two booster sessions conducted one year later focusing on skill review and planning for application after employment. Depressive symptoms, burnout, and self-compassion were assessed before and after the intervention and booster sessions (T1–T6) and three months after employment (T7).

Given the high occupational stress experienced after employment, a piecewise growth model was applied, assuming different slopes for the intervention period (T1–T6; $\beta_1$) and the post-employment period (T6–T7; $\beta_2$). To examine whether intervention-related changes affected post-employment outcomes, an additional slope term incorporating changes in self-compassion during the intervention period was included for the T6–T7 interval ($\beta_3$).

During the intervention period (T1–T6), significant changes were observed only in self-compassion ($\beta_1 = 0.72$, $p < .001$) and depressive symptoms ($\beta_1 = -0.30$, $p = .010$), indicating partial effects of the intervention.

Regarding post-employment changes, when changes in self-compassion during the intervention period were not taken into account, the slopes for depressive symptoms and burnout were $\beta_2 = 3.80$ ($p < .001$) and $\beta_2 = 2.61$ ($p = .007$), respectively. In contrast, when self-compassion was incorporated into the model, the corresponding slopes were attenuated

for depressive symptoms ($\beta_3 = -0.32$, p = .002) and burnout ($\beta_3 = -0.27$, p = .046). These findings suggest that although depressive symptoms and burnout may worsen over time after employment, individuals who showed greater increases in self-compassion as a result of the intervention may experience a buffered deterioration in mental health. Future studies incorporating comparison groups are needed.

# Sustained Effects of a Self-Compassion Intervention for Nursing Students and Its Impact on Mental Health After Employment

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## BACKGROUND

- ✓ Nurses are exposed to high levels of occupational stress (Parker et al., 2014).
- ✓ Pre-employment mental health is associated with post-employment burnout (Rudman & Gustavsson, 2012).
- ✓ Self-compassion may protect against burnout and depressive symptoms, and self-compassion-based interventions have shown benefits among nurses (e.g., Neff et al., 2020).
- ✓ However, it remains unclear whether interventions delivered during nursing school can mitigate mental health deterioration after entering the workforce.

**Aim**

**1) To examine longitudinal changes in mental health and self-compassion from intervention period to post-employment follow-up.**

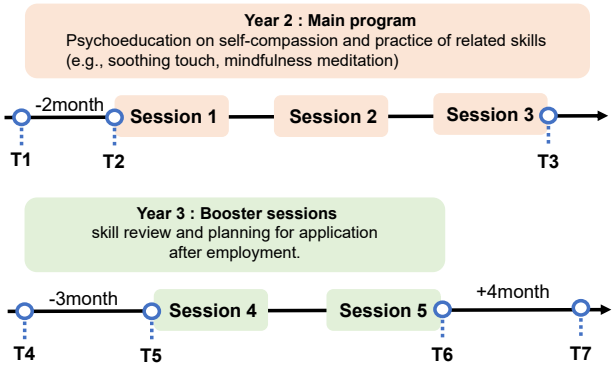
**2) To test whether increases in self-compassion during nursing school buffered post-employment mental health.**

## METHODS

■ **Participants**

221 students from a Japanese vocational nursing school (212 females, Mage= 19.6, SD=1.12).

■ **Intervention & Assessment**




■ **Measures**

- ☐ **Depression** was assessed using the Japanese version of the Self- Rating Depression Scale developed by Zung(1965) (Fukuda & Kobayashi, 1973).
- ☐ **Burnout** was assessed using the Japanese Burnout Scale(Kubo & Tal, 1994) based on the Maslach Burnout Inventory(Maslach & Jackson, 1981). This scale includes emotional exhaustion, depersonalization, and personal accomplishment.
- ☐ **Self-compassion** was assessed using the Japanese version of the Self-Compassion Scale-Short Form(Arimitsu et al., 2016).

## Statistical analysis: Model

- ✓ Piecewise linear mixed models were used to examine the two study aims.

■ **Model:** $Y_{it}=\beta_0+\underbrace{\beta_1 \text{slope\_int}_{it}+\beta_2 \text{slope\_FU}_{it}}_{\text{Aim(1)}}+\underbrace{\beta_3 \Delta SC_i+\beta_4(\text{slope\_FU}_{it}\times\Delta SC_i)}_{\text{Aim(2)}}+u_{0i}+\varepsilon_{it}$

Yit : Outcome score for participant *i* at time *t*
β1 : Average change during the intervention period
slope_int : Slope during the intervention period from T1 to T6
β2 : Average post-employment change
slope_FU : Slope during the follow-up period slope from T6 to T7
β3 : Association between change in self-compassion and the outcome level
ΔSCi : Change in self-compassion from T1 to T6 for participant *i*
β4 : Buffering effect of change in self-compassion on post-employment change
u0i : Random intercept for participant *i*
εit : Residual error

## RESULTS

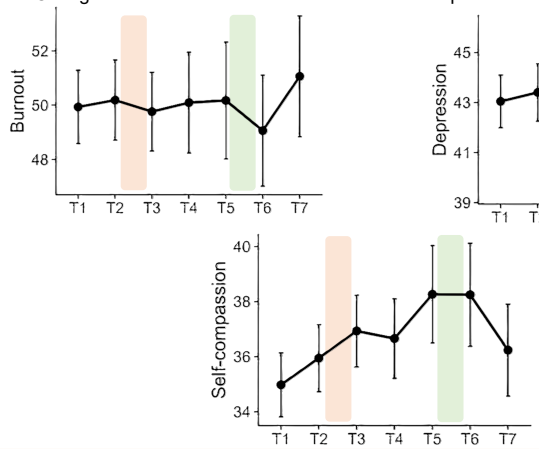
- ✓ **During the intervention period (T1–T6), depression and emotional exhaustion decreased, while self-compassion increased.**
- ✓ **After employment (T6–T7), depression, burnout, and emotional exhaustion increased.**
- ✓ **Greater increases in self-compassion from T1 to T6 were associated with smaller post-employment increases in depression, burnout, and emotional exhaustion.**

■ Table. Piecewise linear mixed model results

| | Aim (1) | | Aim (2) |
|---|---|---|---|
| | T1–T6 slope (β1) | T6–T7 slope (β2) | T6–T7 slope × ΔSC (β4) |
| Depression | -0.30* | 3.80*** | -0.32** |
| Burnout | ns | 2.61** | -0.27* |
| Self-compassion | 0.72*** | ns | — |

*p* < .05, ** *p* < .01, *** *p* < .001. ns = not significant. ΔSC = change in self-compassion from T1 to T6.

■ Figure. Changes in mental health outcomes and Self-compassion from T1 to T7




## CONCLUSION

✓ **Main finding**

The intervention period was associated with decreased depression and increased self-compassion.

However, depression and burnout increased after employment. This may reflect the psychological burden of the transition into nursing work.

Increases in self-compassion during nursing school may buffer post-employment mental health deterioration among new nurses.

✓ **Limitation**

Because this was a single-arm study, future controlled studies are needed to confirm whether the observed changes can be attributed to the intervention.

## KEY MESSAGE

**Enhancing self-compassion during nursing school may help buffer mental health deterioration after employment.**

**Poster Data**

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