

# *“May all be well”: the links between compassion, psychological distress, and mindfulness in teaching in early years*

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# “May all be well”: The links between compassion, psychological distress, and mindfulness in teaching in early years

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## Abstract

This study investigated the relationship between compassion and mindfulness in teaching among early years practitioners, with low levels of psychological distress as a mediator. A total of 81 early years practitioners were recruited from the United Kingdom via mass emails and announcements on social media platforms. Findings based on path analysis indicated that lower psychological distress mediated the positive relation between compassion and intrapersonal mindfulness in teaching, after controlling for level of education, years of practice, and role of practitioner. More specifically, compassion was related to psychological distress, intrapersonal mindfulness, and interpersonal mindfulness in teaching, whereas psychological distress was related to intrapersonal mindfulness, but not interpersonal mindfulness in teaching. The present findings inform early years practitioners and researchers of a differential chain of processes between compassion, psychological distress, and mindfulness in teaching.

## KEY WORDS

Compassion, early years practitioners, mindfulness in teaching, psychological distress

**Practitioner points**

- Early years practitioners' lower psychological distress mediated the relation between compassion and intra-personal mindfulness in teaching.
- Compassion was related to psychological distress, intra-personal mindfulness, and interpersonal mindfulness in teaching.
- The present findings inform practitioners a potential chain of processes between compassion and mindfulness in teaching.

## 1 | INTRODUCTION

Teaching is a stressful profession in England and worldwide (Agyapong et al., 2022; Wiltshire, 2024). Recent studies indicated that teachers in England commonly work long hours, with 25% working over 60 h a week and 40% usually working in the evening (Allen et al., 2021). The heavy workload of various tasks has negative implications on teachers' well-being, including poor mental health (Jerrim & Sims, 2021; Lightfoot, 2016; Wiltshire, 2024). Along with the increasing demands, the limited resources and challenging work environment are also associated with teachers' burnout and psychological distress across education settings, including early years, primary, and secondary education (e.g., Antoniou et al., 2006; Desrumaux et al., 2015; Geng et al., 2015; Jeon et al., 2018). In the face of these challenges, teachers have a greater intention to leave the teaching profession (Agyapong et al., 2022), contributing to the significant shortage and turnover rates of teachers (Craig et al., 2023). The significance of psychological distress, particularly among early years educators, is far-reaching. Notably, recent findings indicated early years educators' psychological distress is not only related to lower levels of professional commitment, but also greater negative reactions toward children, thereby negatively affecting their social, emotional, and behavioral functioning (Buettner et al., 2016). To mitigate the risk for psychological distress and its potential ramifications on teaching, identifying the protective correlates of distress among early years practitioners is crucial.

### 1.1 | Compassion and positive psychological functioning

According to Goetz et al. (2010), compassion refers to the feeling arising from witnessing suffering, with a subsequent desire to help and alleviate distress. Pommier et al. (2019) further conceptualized compassion as the experience of mindfulness, kindness, and a sense of common humanity, and a low level of indifference towards other people's suffering. More specifically, mindfulness refers to the awareness arising from paying attention to the present moment, on purpose, and without judgment (Kabat-Zinn, 1994). Such an awareness forms the context and basis for the other aspects of compassion, namely kindness and common humanity (Neff, 2003; Tirch, 2010). As another central component of compassion, kindness refers to the concern for, caring towards, and a desire to support people who are suffering (Pommier et al., 2019). Common humanity involves an understanding that everyone goes through hardship and difficulties; it also involves a sense of connection to people who are suffering (Pommier et al., 2019). Conversely, indifference involves the feelings of separation and disengagement from others' suffering (Pommier et al., 2019).

When people are compassionate, they relate to others in a kind and caring manner, with the understanding that hardship is a common human experience. Recognizing that feelings are interconnected among individuals, they also have a

greater "altruistic aspiration to work toward the alleviation of suffering for all beings" (Tirch, 2010, p. 116). As a core theoretical tenet of well-being (Keyes, 1998), altruistic behavior arising from compassion is likely to enhance a sense of beneficence, meaning in life, and mental health (Oriol et al., 2023; Van Tongeren et al., 2016). Consistent with well-being theory (Keyes, 1998), recent research suggests that compassion protected against negative emotionality, anxiety, COVID-19 burnout, and loneliness (e.g., Asl et al., 2021; Lee et al., 2021; Oriol et al., 2023; Saarinen et al., 2021). Compassion has also been found to relate to better mental well-being (Lee et al., 2021). Beyond mental well-being, recent studies also indicate that compassion is related to better occupational functioning in medical professions, such as better quality of nursing care (Ockerby et al., 2023), greater workplace humor among medical staff (Timofeiov-Tudose & Măirean, 2023), and better job performance among healthcare professionals (San Román-Niaves et al., 2022).

In early years education, compassion may be depicted by teachers who try to be there for children who are going through a difficult time (e.g., parental divorce, family conflict, diagnosis of a chronic illness). Teachers and early years practitioners who embody compassion may also recognize that the experience of hardship is part of being human, namely a child undergoing the frustration of making mistakes, a colleague facing major work stress, or a parent suffering from trauma (e.g., Oplatka & Gamerman, 2017). Despite the importance of compassion in education settings (Casteek & Ryoo, 2020; Jazaieri, 2018), few correlational studies have been done to investigate the relations between compassion, psychological distress, and teaching quality among early years practitioners. Nevertheless, a recent study did find that a mindfulness-based intervention gearing towards cultivating compassion and emotion regulation for preschool teachers reduced their emotional distress (Keleynikov et al., 2022). Similarly, another study indicated that a compassion-based intervention improved kindergarten head teachers' character strengths and the supportiveness of the organizational climate (Vuorinen et al., 2021). Teachers from early years to high school also benefited from a compassion-based intervention through their increased compassion, increased positive affect, and reduced psychological distress (Matos et al., 2022). Taken together, recent studies suggested that compassion and compassion-based interventions are related to better mental well-being and work-related outcomes in various professions, including early years education.

## 1.2 | Psychological distress and mindfulness in teaching

Decades of research has shown that psychological distress is predictive of other areas of individual functioning, such as greater sleep disturbances and expressive suppression, as well as lower mindfulness and social self-efficacy (e.g., Alvaro et al., 2013; Cheung & Ng, 2023; Dawel et al., 2021). Importantly, teachers' greater psychological distress and poorer mental health are linked to lower self-efficacy and poorer school climate (Guo & Jiang, 2023; McLean et al., 2017). They are also related to lower mindfulness in teaching among early years educators (Cheng et al., 2020; Ma et al., 2021). According to cognitive theory of anxiety and depression (Clark & Beck, 2010), when teachers experience greater teacher stress and psychological distress, they are more likely to be preoccupied with negative thoughts, judgment, worries, and rumination (Agyapong et al., 2022; Clark & Beck, 2010; Constantin et al., 2018), thereby undermining their quality of teaching (Sandilos et al., 2015). Consequently, wellness programs have been developed to enhance teachers' mental health, self-regulation, sleep quality, and other areas of functioning (e.g., Lever et al., 2017).

As a correlate of psychological distress (Cheng et al., 2020; Ma et al., 2021), mindfulness in teaching is indexed by intrapersonal and interpersonal mindfulness (Frank et al., 2016). According to Frank et al. (2016), intrapersonal mindfulness refers to mindfulness directed towards the early years practitioners' own experience in their school setting. Examples include observing one's sensations and emotions, being aware of one's behavior rather than "running on autopilot", being nonjudgmental of one's thoughts, being nonreactive to various situations, and having an ability to describe one's emotional experience. Interpersonal mindfulness refers to mindfulness directed towards other people in the school setting. Examples include listening with full intention, having present-centered awareness during interactions, being accepting, open, and receptive to others' emotions and thoughts, being

self-regulated, and being compassionate for others and for the self (Duncan et al., 2009). Intrapersonal and interpersonal mindfulness are often related. For instance, early years practitioners may practice intrapersonal mindfulness by pausing and noticing their own judgments and emotions (e.g., anger), and then transition into the practice of interpersonal mindfulness by skilfully responding to a child's misbehavior. In the face of elevated psychological distress, however, practitioners may be less attentive to the present moment, have more judgments, and be more preoccupied with their negative experience (Clark & Beck, 2010). As a result, they may be less mindful at work in the early years context (Cheng et al., 2020; Ma et al., 2021).

### 1.3 | The present study

Guided by theories (Clark & Beck, 2010; Keyes, 1998) and previous research (e.g., Ma et al., 2021; Matos et al., 2022), the present study aimed to examine the relations between compassion, psychological distress, and mindfulness in teaching among early years practitioners in the United Kingdom. Specifically, greater compassion was hypothesized to be related to lower psychological distress. Lower psychological distress, in turn, was hypothesized to be related to greater mindfulness in teaching. Psychological distress was further hypothesized to mediate the relation between compassion and mindfulness in teaching among early years practitioners. Education level and years of practice in early years profession were included as covariates in the analyses, as past research indicated that they were related to the variables under study (e.g., Moyano et al., 2023; Viertiö et al., 2021). As the present study involved teachers and other early years practitioners (e.g., room leaders, general practitioners), the role of practitioner was also included as a covariate in the analyses.

Given some studies indicated that mindfulness in teaching longitudinally predicted mental well-being and distress (e.g., emotional exhaustion; Frank et al., 2016; Lomas et al., 2017), supplementary analysis was further conducted with a reversed directionality of effect between psychological distress and mindfulness in teaching. Specifically, a general sense of compassion was hypothesized to statistically predict greater mindfulness in teaching. Mindfulness in teaching, in turn, was hypothesized to predict lower psychological distress. Mindfulness in teaching was further examined as a mediator between compassion and psychological distress. Education level, years of practice in early years profession, and role of practitioner were included in the analyses as covariates.

## 2 | METHODS

### 2.1 | Participants

A total of 81 early years practitioners (6.35% men; 93.65% women) were recruited in the United Kingdom via mass emails and announcements on social media platforms. The participants had a mean age of 41.00 years ( $SD = 10.63$ ), and they were between the ages of 23–62 years old. Of the participants, 10.94% completed A-levels or Level 3 National Vocational Qualifications (NVQ) or equivalent, 3.13% had a Foundation Degree, 28.12% had an Undergraduate Degree, and 57.81% had a postgraduate degree. The ethnicity of the participants was primarily White, accounting for 79.68% of our sample, followed by Asian (10.94%), Greek Cypriot (3.13%), Black, Caribbean, or African (1.56%), Mixed/Multiple ethnic groups (1.56%), and other (3.13%). Participants reported an average of 13.02 years in the early years profession ( $SD = 10.56$  years). Among the participants, 62.50% reported that they were teachers, 9.38% were teaching assistants, 1.56% were nursery managers, 9.38% were general early years practitioners, 4.69% were educational psychologists, 4.69% were room leaders, and 7.80% were other practitioners.

## 2.2 | Procedures

Participants were recruited via mass emails and announcements on social media platforms. Ethics approval for this study was granted by the authors' institution. Participants completed a consent and were then directed to an online questionnaire on REDCap.

## 2.3 | Measures

### 2.3.1 | Compassion

The 16-item Compassion Scale (CS; Pommier et al., 2019) was used to assess compassion on a 6-point Likert scale ranging from 0 (*almost never*) to 5 (*almost always*). Sample items included, "I realize everyone feels down sometimes, it is part of being human" and "I feel that suffering is just a part of the common human experiences." Items that were negatively worded were reverse scored. The item scores of the items were then averaged, with higher average scores indicating greater compassion. The CS had good internal consistency and reliability, with Cronbach's alpha = 0.91 and McDonald's Omega = 0.91.

### 2.3.2 | Psychological distress

Psychological Distress was measured by the 10-item Kessler Psychological Distress Scale (KPDS; Kessler et al., 2003) which contains 10 items on a 5-point Likert scale ranging from 1 (*none of the time*) to 5 (*all of the time*). Sample items included, "In the past 4 weeks, how often did you feel so restless you could not sit still?" and "In the past 4 weeks, how often did you feel nervous?" The raw scores of the items were averaged, with higher average scores indicating greater psychological distress. The KPDS had good internal consistency and reliability, with Cronbach's alpha = 0.87 and McDonald's Omega = 0.85.

### 2.3.3 | Mindfulness in teaching

The 14-item Mindfulness in Teaching Scale (MTS; Frank et al., 2016) was used to measure teachers' intrapersonal mindfulness (9 items) and interpersonal mindfulness (5 items), respectively, on a 5-point Likert scale ranging from 1 (*never true*) to 5 (*always true*). Sample items included, "When I am teaching it seems I am 'running on automatic,' without much awareness of what I am doing" (Intrapersonal Mindfulness) and "I am aware of how my moods affect the way I treat my students" (Intrapersonal Mindfulness). Items that were negatively worded were reverse scored. The item scores of the items were then averaged, with higher average scores indicating greater intrapersonal and interpersonal mindfulness, respectively. In this study, Cronbach's alpha for intrapersonal mindfulness was 0.85 and for interpersonal mindfulness was 0.87. McDonald's Omega for intrapersonal mindfulness was 0.85 and for interpersonal mindfulness was 0.87.

## 2.4 | Analytic plan

Descriptive statistics and correlations were conducted using IBM SPSS Statistics 29 (SPSS Inc., Chicago, IL, USA). Path analyses were conducted using MPLUS, Version 8.8 (Muthén & Muthén, 2012-2023). Education level, years of practice in early years profession, and role of practitioner (i.e., teaching-focused vs. other) were included as

covariates. Maximum likelihood method was utilized to examine the fit of the model to the observed variance and covariance matrices. Full information maximum likelihood estimation was used to handle the missing data. Bootstrapping was used to examine the mediation effects.

### 3 | RESULTS

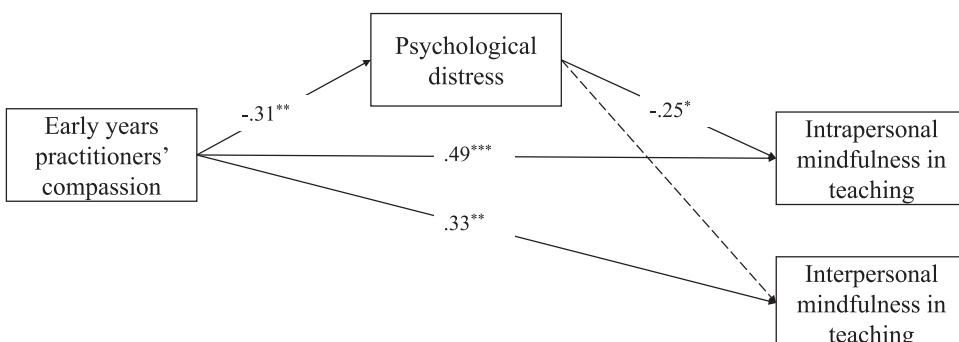
Means, standard deviations, and zero-order correlations are shown in Table 1. The hypothesized model fits well to the data,  $\chi^2(5) = 1.54$ ,  $p = .91$ , CFI = 1.00, TLI = 1.00, RMSEA < 0.001, SRMR = 0.03 (see Figure 1). Teachers' compassion negatively predicted psychological distress ( $\beta = -0.31$ ,  $p = .005$ ) and positively predicted intrapersonal and interpersonal mindfulness in teaching ( $\beta = 0.49$ ,  $p < .001$ ;  $\beta = 0.33$ ,  $p = .003$ , respectively). Teachers' psychological distress negatively predicted intrapersonal mindfulness in teaching ( $\beta = -0.25$ ,  $p = .017$ ), but not interpersonal

**TABLE 1** Correlations, means, and standard deviations of the variables.

| Variable   | (1)   | (2)   | (3)   | (4)     | (5)     | (6)   | (7)  |
|--|-------|-------|-------|---------|---------|-------|------|
| (1) Education level <sup>†</sup>                           | -     |       |       |         |         |       |      |
| (2) Years of practice in early years profession            | -0.01 | -     |       |         |         |       |      |
| (3) Role of practitioner (1 = teaching-focused; 0 = other) | 0.11  | 0.07  | -     |         |         |       |      |
| (4) Compassion   | 0.02  | 0.09  | 0.04  | -       |         |       |      |
| (5) Psychological distress                                 | 0.10  | 0.16  | 0.09  | -0.28*  | -       |       |      |
| (6) Intrapersonal mindfulness in teaching                  | 0.26* | 0.22  | 0.11  | 0.31*   | -0.30   | -     |      |
| (7) Interpersonal mindfulness in teaching                  | 0.07  | -0.04 | -0.06 | 0.53*** | -0.40** | 0.28* | -    |
| M  | 1.33  | 13.02 | -     | 4.27    | 2.42    | 4.14  | 3.82 |
| SD   | 0.98  | 10.56 | -     | 0.44    | 0.68    | 0.73  | 0.62 |

\* $p < .05$ ; \*\* $p < .01$ ; \*\*\* $p < .001$ .

<sup>†</sup>1 = A-levels or Level 3 National Vocational Qualifications (NVQ) or equivalent, 2 = Foundation Degree, 3 = Undergraduate Degree, and 4 = postgraduate degree.



**FIGURE 1** Early years practitioners' psychological distress as a mediator between compassion and mindfulness in teaching.  $\chi^2(5) = 1.54$ ,  $p = .93$ , CFI = 1.00, TLI = 1.00, RMSEA < 0.001, SRMR = 0.03. \* $p < .05$ , \*\* $p < .01$ , \*\*\* $p < .001$ . Standardized parameter estimates are presented. Education level, years of practice in early childhood education, and role of practitioner (i.e., teaching vs. other) were included as covariates. Nonsignificant parameter is shown in a dashed arrow.

mindfulness in teaching ( $\beta = -0.01$ ,  $p = .950$ ). Education level was related to greater intrapersonal mindfulness in teaching ( $\beta = 0.25$ ,  $p = .022$ ), but not to other variables under study,  $p > 0.05$ . Years of practice in the early years profession and role of practitioner were not related to the variables under study,  $p > 0.05$ . The standardized parameter estimates, unstandardized parameter estimates, and standard errors of the path model are shown in Table 2.

The mediating role of psychological distress was subsequently examined via bootstrapping based on 10,000 bootstrap samples with replacement. The 95% confidence interval (CI) indicated that the standardized indirect effect of teachers' compassion on intrapersonal mindfulness in teaching did not include a zero [CI: (0.001, 0.232)], suggesting psychological distress as a mediator.

**TABLE 2** Standardized and unstandardized parameter estimates of the path model.

| Parameters   | Standardized estimates | Unstandardized estimates (SEs) |
|--|------------------------|--------------------------------|
| <i>Hypothesized pathways</i>                           |                        |                                |
| Compassion   |                        |                                |
| → Psychological distress                               | -0.31 **               | -0.47 (0.18)                   |
| → Intrapersonal mindfulness in teaching                | 0.49 ***               | 0.68 (0.14)                    |
| → Interpersonal mindfulness in teaching                | 0.33 **                | 0.53 (0.19)                    |
| Psychological distress                                 |                        |                                |
| → Intrapersonal mindfulness in teaching                | -0.25 *                | -0.23 (0.10)                   |
| → Interpersonal mindfulness in teaching                | 0.01                   | 0.01 (0.13)                    |
| Intrapersonal mindfulness in teaching                  |                        |                                |
| ↔ Interpersonal mindfulness in teaching                | 0.17                   | 0.05 (0.04)                    |
| <i>Covariates</i>                                      |                        |                                |
| Education level <sup>†</sup>                           |                        |                                |
| → Psychological distress                               | 0.09                   | 0.06 (0.08)                    |
| → Intrapersonal mindfulness in teaching                | 0.10                   | 0.06 (0.06)                    |
| → Interpersonal mindfulness in teaching                | 0.25 *                 | 0.18 (0.08)                    |
| Years of practice in early years profession            |                        |                                |
| → Psychological distress                               | 0.18                   | 0.01 (0.01)                    |
| → Intrapersonal mindfulness in teaching                | -0.03                  | -0.002 (0.01)                  |
| → Interpersonal mindfulness in teaching                | 0.19                   | 0.01 (0.01)                    |
| Role of practitioner (1 = teaching-focused; 0 = other) |                        |                                |
| → Psychological distress                               | 0.08                   | 0.12 (0.16)                    |
| → Intrapersonal mindfulness in teaching                | -0.07                  | -0.09 (0.13)                   |
| → Interpersonal mindfulness in teaching                | 0.06                   | 0.09 (0.17)                    |

\* $p < .05$ ; \*\* $p < .01$ ; \*\*\* $p < .001$ .

<sup>†</sup>1 = A-levels or Level 3 National Vocational Qualifications (NVQ) or equivalent, 2 = Foundation Degree, 3 = Undergraduate Degree, and 4 = postgraduate degree.

### 3.1 | Supplementary analysis

Supplementary analysis indicated that the model with a reversed directionality of effect between psychological distress and mindfulness in teaching fits well to the data,  $\chi^2(6) = 3.25, p = .78$ , CFI = 1.00, TLI = 1.00, RMSEA < 0.001, SRMR = 0.04 (see Figure 1). Teachers' compassion positively predicted intrapersonal and interpersonal mindfulness in teaching ( $\beta = 0.56, p < .001$ ;  $\beta = 0.33, p = .002$ , respectively), but not psychological distress ( $\beta = -0.14, p = .306$ ). Intrapersonal mindfulness in teaching negatively predicted psychological distress ( $\beta = -0.33, p = .013$ ). However, interpersonal mindfulness in teaching did not predict psychological distress ( $\beta = 0.06, p = .650$ ). Education level was related to greater intrapersonal mindfulness in teaching ( $\beta = 0.25, p = .021$ ), but not to other variables under study,  $ps > 0.05$ . Years of practice in the early years profession and role of practitioner were not related to the variables under study,  $ps > 0.05$ .

The mediating role of intrapersonal mindfulness in teaching was subsequently examined via bootstrapping based on 10,000 bootstrap samples with replacement. The 95% confidence interval (CI) indicated that the standardized indirect effect of teachers' compassion on psychological distress did not include a zero [CI: (-0.421, -0.003)], suggesting intrapersonal mindfulness in teaching as a mediator.

## 4 | DISCUSSION

In line with supporting theories (Clark & Beck, 2010; Keyes, 1998) and previous research (Ma et al., 2021; Matos et al., 2022), this study indicated that lower psychological distress served as a process between compassion and intrapersonal mindfulness in teaching among early years practitioners. Importantly, compassion was related to lower psychological distress and greater intrapersonal and interpersonal mindfulness in teaching. Lower psychological distress further mediated the relation between compassion and intrapersonal mindfulness in teaching, but not interpersonal mindfulness in teaching. The differential findings from this cross-sectional study add to the growing evidence for the benefits of compassion in early years practitioners' psychological functioning and school climate (Keleynikov et al., 2022; Matos et al., 2022; Vuorinen et al., 2021).

With greater compassion, early years practitioners experience and practice greater kindness, mindfulness, and common humanity, and have lower indifference towards people's suffering (Pommier et al., 2019). Consistent with Keyes' (1998) theoretical tenet of well-being, participants in our study who oriented themselves towards caring and supporting people were more likely to experience lower psychological distress (see also Oriol et al., 2023; Van Tongeren et al., 2016). The findings also indicated that greater compassion was likely to foster greater intrapersonal and interpersonal mindfulness in teaching. Notably, practitioners who were more compassionate were also more likely to be aware of how their emotions might affect other people. In addition, they were more likely to attend to changes in classroom dynamics and less likely to "run on autopilot", react mindlessly, and lose touch with the present moment. As such, compassion appears to benefit early years practitioners both in terms of teaching and mental health.

A cross-sectional chain of processes was found, with lower psychological distress mediating the relation between compassion and intrapersonal mindfulness in teaching. When participants experienced lower distress, they were more likely to stay focused on their own experience in the present moment. Nevertheless, it was found that psychological distress was not related to interpersonal mindfulness in teaching. That is, practitioners' greater distress was unrelated to their mindfulness directed towards other people, such as noticing how their moods affected children in the classroom. These findings corroborated other studies in showing that preschool teachers' psychological distress was related to some aspects of teaching (e.g., instructional support, classroom organization), but not others (e.g., emotional support, quality of teacher-child interactions; Roberts et al., 2016; Sandilos et al., 2015). Based on the null findings between psychological distress and interpersonal mindfulness in teaching, it

is possible that early years practitioners compartmentalized distress from their dynamics with others, despite their internal turmoil.

Supplementary analysis further showed that intrapersonal mindfulness in teaching was statistically predictive of psychological distress. The reversed directionality of effect was consistent with other findings showing the mental health benefits of mindfulness in teaching (Frank et al., 2016; Lomas et al., 2017). Based on these findings, longitudinal studies are necessary to investigate the bidirectional effects between mindfulness in teaching and psychological distress. Nevertheless, in the supplementary analysis, interpersonal mindfulness in teaching was once again unrelated to psychological distress. Consequently, future studies are needed to investigate the potential nuances between these variables.

#### 4.1 | Implications for research and practice

Theory-driven research has important implications for teaching, clinical practice, and future research. Of note, this study offers support for theories of well-being, depression, and anxiety (Clark & Beck, 2010; Keyes, 1998), particularly for the links between compassion, lower psychological distress, and greater mindfulness in teaching. The present study also echoes with the calls for reducing psychological distress among early years practitioners (Lever et al., 2017). Policy makers and counselors may wish to prioritize increasing compassion to foster mental health and mindfulness in teaching for early years practitioners. Prevention and intervention programs for early years practitioners should also highlight compassion and mental health as core processes of mindfulness in teaching (see also Matos et al., 2022; Vuorinen et al., 2021).

#### 4.2 | Limitations and future directions

The present findings must be interpreted in light of several limitations. First of all, the use of self-report measures could lead to method bias (Podsakoff et al., 2012). Future research should adopt a multi-method, multi-informant approach to minimize biases. Second, this study has a cross-sectional design. As such, we were not able to examine the directionality of effects. Hence, future studies with a longitudinal design are necessary to draw conclusions on the mediation effects between compassion, psychological distress, and mindfulness in teaching (Maxwell & Cole, 2007). Third, the sample size of this study was small, with 93.65% women. Although previous research did suggest that 98% of early years practitioners in the United Kingdom are women (Haux et al., 2022), a larger and more gender-balanced sample is necessary to increase generalizability. Fourth, the present study did not include a measure of dispositional mindfulness. As dispositional mindfulness may give rise to both compassion and mindfulness in teaching (Cheung & Djekou, 2024; Neff, 2003; Tirch, 2010), future studies should include the measure to identify the distinct and incremental effect of compassion on teaching beyond dispositional mindfulness. Fifth, instead of examining compassion in teaching (Oplatka & Gamerman, 2017) and early years practitioners' occupational well-being (O'Hara-Gregan, 2021), in this study we assessed general compassion and psychological distress. Future studies should examine teachers' compassion and mental well-being within the early years context to increase specificity of the findings. Relatedly, given that teachers stress has multiple dimensions including emotional, physical, and professional distress (e.g., Fimian & Fastenau, 1990; Skaalvik & Skaalvik, 2017), future studies should expand the scope of the study and examine the role of teacher stress. Sixth, although 71.88% of our participants were teachers and teaching assistants whose main tasks were teaching-focused, the rest of the participants were other early years practitioners, such as room leaders, nursery managers, and educational psychologists. Even though we included the role of practitioner as a covariate, future studies should recruit a teacher sample to focus on teaching outcomes. Finally, given that mindfulness in teaching is predictive of numerous outcomes such as teachers' self-efficacy and job satisfaction (e.g., Yin et al., 2023), future studies should extend the

present findings to examine other teacher outcomes. Future studies could also examine the effects of mindfulness in teaching on child development.

#### 4.3 | Conclusion

The present study lends support to the mediating role of low levels of psychological distress between compassion and intrapersonal mindfulness in teaching among early years practitioners. In addition, early years practitioners' compassion was linked to lower psychological distress and greater intrapersonal and interpersonal mindfulness in teaching. These findings inform early years practitioners, counselors, and researchers a potential chain of processes between compassion and mindfulness in teaching. Translational studies gearing towards enhancing compassion and reducing psychological distress among early years practitioners merit future investigations.

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#### DATA AVAILABILITY STATEMENT

The data that support the findings of this study are available on request from the corresponding author. The data are not publicly available due to privacy or ethical restrictions.

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