POSITION PAPER

Safe healing circles: Mindful self-compassion interventions to address racial battle fatigue with teachers of color

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Abstract
Mindful self-compassion can address the emotional exhaustion teachers of color experience due to racial injustice and social marginalization compounded by the pandemic. The authors propose a humanistic intervention in which mental health counselors create safe spaces for teaching self-regulation skills and processing emotional stressors related to racial tensions in schools.

KEYWORDS
humanistic intervention, mindfulness, racial tensions, self-compassion, teachers of color

Now, more than ever, Americans are witness to the ongoing racial tensions and discrimination that is plaguing our country. Teachers of color are not exempt from facing racial tensions and discrimination in their personal or professional lives. However, there is a paucity of research addressing mental health interventions in schools that specifically attends to the emotional toll associated with racial discrimination that teachers of color are facing across the nation in general. Thus, in an occupation already at high risk of burnout, it is important to ask: How is the current state of social marginalization and discrimination present as a result of the pandemic and nationwide social and political events affecting the mental health of teachers of color? What active role can mental health counselors play in school settings to attend to the specific emotional needs of teachers of color? In an attempt to address these questions, this article proposes a humanistic intervention of mindful self-compassion to address the emotional exhaustion experienced by teachers of color brought about by racial tensions.

The proposed intervention, referred to as *Safe Healing Circles*, is designed from a humanistic perspective with a lens of mindful self-compassion for teachers of color in a school setting. The intervention includes mental health counselors as facilitators to create a safe space to teach self-regulation skills and process emotional stressors related to racial tensions. Central to humanistic counseling, *Safe*

Healing Circles assert as a therapeutic demeanor for how mental health counselors approach warmth, immediacy, empathy, and understanding in a group setting. In the context of Safe Healing Circles, the relational value of humanism is recognized through acknowledging teachers of color as individuals and within their relational contexts.

Neff (2003) conceptualized mindful self-compassion as the practice of inward compassion during moments of suffering. From a humanistic perspective, mindful self-compassion is based on feelings of self-awareness with kindness and self-acceptance. The self-acceptance aspect stems from the sense of a shared humanity, which is consistent with the humanistic value of self-acceptance without promoting an individualistic self-focus (Hoffman et al., 2013); hence, not separating the self from others. As a result, the practice of mindful self-compassion fosters a sense of common social connection and a sense of safety when it comes to expressing feelings of suffering (Neff, 2003)

Solomon and Lambie (2020) found that discrimination coming from a lack of diversity among staff in school settings has taken an emotional toll on teachers of color, which has increased the overt racial tensions and clashes with cultures. As such, there is an additional layer of emotional labor for teachers of color as they have to constantly be aware of their differences in race and culture in order to adapt to the dominant white school environment (Anderson, 2020; Solomon & Lambie, 2020). Smith (2004) coined the term Racial Battle Fatigue (RBF) based on the aftermath of individuals of color experiencing emotional fatigue from accumulations or race-related tensions. Recent research found teachers of color to be at a significant risk of experiencing symptoms from RBF including intense hypervigilance to racial tensions and future possible racial incidents when working in schools (Pizarro & Kholi, 2018).

The racial tensions that people of color are currently experiencing have compounded with social marginalization due to the Covid-19 pandemic. For teachers of color, their experience with ongoing race stressors is now intensified by the dual tragedies of the COVID-19 pandemic and racial injustice. Teachers of color experience disproportionate impacts of COVID-19 (Anderson, 2020). For example, Black Americans are three times more likely than White Americans to contract COVID-19, and twice as likely to die from it (Anderson, 2020). Latinos are also more vulnerable accounting for about 17% of COVID-19 cases (Rodriguez-Diaz et al., 2020).

THE STATE OF TEACHERS OF COLOR IN SCHOOLS

The shortage on teachers of color amplifies the current issue of lack of diversity in the schools and exacerbates institutional racism. Will (2020) reported teachers of color often have a higher turnover rate than their White counterparts. Across the United States, teachers were laid off in 2020 due to state budget cuts caused by the pandemic (Burnette & Will, 2020). The budget cuts disproportionately affected teachers of color. Teachers' unions support issuing layoffs by seniority. Active recruitment of teachers of color is recent. Therefore, due to lack of seniority, most teachers of color are at a disadvantage when it comes to protection from pandemic related layoffs (Will, 2020).

In 2015, the Albert Shanker Institute reported that attrition of teachers of color outpaced White teachers by 20% and was growing while nonminority attrition was flat. Among the reported reasons for attrition of teachers of color were stressful working conditions, experiences with parallel racism embedded with feeling marginalized from White colleagues, policies, and functions of the administration, potentially leading them to emotional burnout (Kohli, 2016). More specifically, teachers of color stated feeling misunderstood at work, and felt that co-workers would minimize their experiences related to racial tensions, thus causing teachers of color to experience racial isolation (Burnette & Will, 2020; Kohli, 2016).

Teachers of color commonly work in schools that have higher proportions of students of color (Will, 2020). In addition, the working conditions for teachers of color are often harder due to being in high-poverty and difficult-to-staff schools (U.S. Department of Education, 2017). Teachers of color often face duress as they worry about their students of color not having adequate educational resources and lacking equal support from their White colleagues (El-Mekki, 2021).

According to Peske and Haycock (2006), teachers of color tend to be more sensitive in attending to the needs of minority students and are more inclined to believe in minority students' potential to excel in education. An increase of minority teachers can have an impact on students' learning accomplishments, social awareness, and cultural sensitivity (Allison & Rehm, 2007; Lander & Santoro, 2017). Salinas (2002) summarized the importance of minority teachers in the schools, noting their value as role models and their ability to enhance understanding of cultural differences and break down stereotypes while encouraging students to perform better.

ADDRESSING THE MENTAL HEALTH OF TEACHERS IN SCHOOLS

Mental health affects functionality in daily tasks, including work performance and coping with work-related stress (Maslach et al., 2001). Nationwide, teachers report high levels of stress related to their jobs. Bauer et al. (2007) reported that teachers suffer from depression more so than other professionals. Similarly, Capone and Petrillo (2018) concluded that mental health concerns were more common for teachers than nonteachers. Despite knowledge about the mental health needs of teachers, there is an absence of literature about counselors' clinical work to support teachers.

Although school counselors often develop close working relationships with teachers, in-house counseling services are not present for teachers within the workplace (Clark & Amatea, 2004). Commonly, school counselors focus on the mental health needs of the students, leaving little time to attend to the emotional needs of teachers in general (Dahir et al., 2009). Considering that currently teachers are on the frontline facing the crisis of the pandemic, which puts them at a much higher risk for experiencing mental health issues such as depression and anxiety, school leaders, now more than ever, need to take a proactive role in encouraging mental health care for their teachers by bringing mental health counselors into the schools to attend to the teachers' needs. Particularly, school leaders need mental health counselors to address the needs of teachers of color, who are at higher risk of attrition.

RACIAL BATTLE FATIGUE IN TEACHERS OF COLOR

Emotional exhaustion is a primary precursor to burnout (Maslach et al., 2001) and refers to a considerable reduction of emotional resources and a perceived inability to navigate stressors successfully. In the case of teachers, those at risk for burnout tend to lack both the work-related inspiration and job-related goals necessary to overcome occupational stressors (Bullough & Baughman, 1997). In addition to exposure to the general stressors all educators experience, for teachers of color specifically, there has been minimal attention given to the impact of racial tensions in school settings.

In an effort to theoretically frame the effects of racism experienced by people of color who work in predominantly White institutions, including school settings, Smith (2004) introduced the term RBF. The author compared the experiences of people of color in these institutions to the experiences of soldiers with combat fatigue (Smith, 2004). The mental health symptoms of RBF are documented in multiple sources and include anger, hypervigilance, loss of self-confidence, social withdrawal from colleagues, and self-consciousness in school settings (Gildersleeve et al., 2011; Pizarro & Kohli, 2018; Smith et al., 2007; Solomon & Lambie, 2020). In addition, research has demonstrated that people of color working in traditionally White institutions report experiencing lack of self-confidence to the point of questioning their ability to be productive and ultimately giving up on their professional goals (Smith et al., 2007). It follows that such experiences may result in teachers of color isolating and feeling emotionally exhausted from the energy spent battling racial tensions (Pizarro & Kohli, 2018). Most concerning is research that supports that these experiences may lead to more severe mental health issues including anxiety, depression, hopelessness, suppressed anger, and extreme fatigue (Kohli, 2016; Pizarro & Kohli, 2018).

Although it is a fact that all teachers are at risk of burnout, attending to the specific needs of teachers of color is necessary to start healing from the social and political tensions of the pandemic and to promote a diverse workforce that will benefit all students. More specifically, attending to the specific issues and emotional toll from RBF that teachers of color face at work has not been formally addressed in schools. There is a dearth of literature recommending interventions crafting a safe space for examining the mental health wellbeing of teachers of color so they can learn coping strategies for the daily challenges they face, especially in high-poverty schools where racial tensions and social marginalization are more prominent (Pearman & Lefever-Davis, 2012). The American Counseling Association, 2014 stipulates that mental health counselors have a responsibility to deliver culturally conscious interventions to clients that have experienced racial inequalities. Thus, strengthening the case that interventions to create a safe space for teachers of color would be best facilitated by mental health counselors coming to the schools.

COPING STRATEGIES FOR EMOTIONAL SELF-REGULATION WITH TEACHERS OF COLOR

Emotional self-regulation is defined as a healthy management of emotions in relation to a presented demand of a situation (Gross, 2002). For instance, Gross (2002) noted that regulating emotions is usually accomplished by either reappraising or suppressing emotions. Whereas reappraisal helps individuals decrease unpleasant emotions by reshaping their perspective on the distressing situation, through suppression, individuals merely avoid unpleasant emotions.

In particular, teachers of color often deal with emotional distress and anger through suppression due to additional stressors related to racial tensions (Liljestrom et al., 2007; Pizarro & Kohli, 2018). However, suppression is not a sustainable coping strategy as it could impair effective cognitive reasoning resources and block the ability to think critically for a better outcome (Gross, 2002). The over-practice of suppressing emotions, including neglecting or denying genuine emotions, often leads to burnout (Chang, 2009). Thus, introducing different strategies and practices aimed to address emotional self-regulation in teachers of color is of great importance. Self-awareness practices, including mindfulness, are proposed to help individuals learn to regulate their emotions through practicing awareness (Carmody & Baer, 2008; Kabat-Zinn, 2003).

MINDFULNESS INTERVENTIONS FOR TEACHERS OF COLOR

Mindfulness can be defined as conscious attention, meaning awareness of the present moment with no judgment (Kabat-Zinn, 2003). By fostering mental clarity and concentration, mindfulness practice improves emotional regulation (Walsh & Shapiro, 2006). In addition to emotional regulation, mindfulness increases emotional resilience, empathy, self-awareness, active self-reflection, and compassion (Davidson & Harrington, 2002; Shapiro et al., 2005). A meta-analysis of 39 studies (Hoffman et al., 2010) suggested that mindfulness-based therapy moderately improved mood symptoms and anxiety ($g = 0.59$; $g = 0.63$) with effects being even more favorable in patients formally diagnosed with anxiety and mood disorders, ($g = 0.97$; $g = 0.95$). Patients reportedly maintained improvements over follow up.

More recent research supports the use of mindfulness practices for emotional resilience in the education system (Damian et al., 2021; Jennings et al., 2011; Kemeny et al., 2012; Roeser et al., 2013). The literature addressing the student population supports the use of mindfulness practices in school settings to increase resilience and reduce emotional and behavioral problems of low-income students who are chronically exposed to structural traumatic stressors such as racism, violence, poverty, and systematic oppression (Damian et al., 2021). For teachers, other mindfulness interventions created specifically to support them, such as those in the Cultivating Awareness and Resilience in Education

program (CARE), have been useful for teachers to develop emotional regulation skills that, in turn, improve classroom management and reduce stress (Jennings et al., 2011).

Roeser et al. (2013) noted a significant decrease in occupational stress, symptoms of burnout, anxiety, and depression for elementary school teachers who engaged in mindfulness interventions. Moreover, teachers in this study also reduced their absences following the mindfulness interventions (Roeser et al., 2013). Similarly, in a study of 82 female teachers, Kemeny et al. (2012) reported benefits of mindfulness meditation in combination with emotional regulation training. Results of Kemeny's study showed reductions in depression, self-reported anxiety, and negative affect in the intervention group, compared to the control group. Despite the promising results these studies show for the use of contemplative practices such as mindfulness to improve the emotional wellbeing of teachers, they provided limited insight into the training experiences and the perspectives of teachers of color since most of these studies have been conducted with White teachers.

Damian et al. (2021) conducted a qualitative descriptive study to explore the social and emotional effects of mindfulness on teachers of color ($n = 25$). In this first-of-a-kind study, researchers utilized mindfulness exercises to assist in emotional regulation when discussing experiences of racism; they found that their participants, who were predominantly African American males (87.5%), were able to discuss some of their experience of traumatic stressors related to their race and to improve their optimism about their present circumstances with current racial stressors. These findings demonstrated that these teachers felt an increase in emotional regulation and empathy and felt safe to address their experiences within a group despite sociopolitical divisions due to racial tension.

To create a safe space to learn self-regulation while addressing racial tensions, self-compassion is one dimension of mindfulness practice that showed promising. Robins et al. (2012) examined the role of self-compassion in a Mindfulness-Based Stress Reduction (MBSR) training, showing that mindfulness and self-compassion independently mediate the positive effects of MBSR on worry. Self-compassion practice is only a component of MBSR training; nevertheless, self-compassion might play a significant role in emotional self-regulation and, consequently, the reduction of emotional fatigue.

Self-compassion

Self-compassion is based on the concept of compassion, which refers to feeling for the suffering of others and connecting with them to ease their discomfort (Gilbert, 2009). Self-compassion aims to stay connected with the self and to care about the self, similar to how one would care for others (Gilbert, 2009). According to Neff (2003), the concept of self-compassion includes three main components that may interweave and overlap throughout one's experience: (a) self-kindness versus self-judgment, (b) common humanity versus isolation, and (c) mindfulness versus over-identification. Self-kindness is defined as accepting one's own pain without harsh judgment. Common humanity is defined as acknowledging that inadequacies and challenges are part of being human (Germer, 2009) or understanding that it is not sustainable to be perfect as a human being. Finally, mindfulness, in the context of self-compassion, is defined as being aware and accepting even the most painful thoughts and emotions rather than ignoring or suppressing them (Neff, 2003).

As noted, self-compassion and the practice of mindfulness are closely related (Germer, 2009). Mindfulness practice, however, aims for the individual to experience the present moment and attend to the internal experience in general, while self-compassion practice attends particularly to one's own suffering (Germer, 2009). Self-compassion teaches individuals how to regulate their emotions by practicing awareness of painful emotions to better understand such emotions (Brown et al., 2007; Carmody & Baer, 2008; Kabat-Zinn, 2003). In summary, self-compassion relies on mindfulness to bring present awareness of painful emotions, while self-compassion does the healing work.

For people of color, mindful self-compassion practices can be a safe intervention to allow for processing their experiences with discrimination and the mental health consequences of those experiences. Further research suggests that practicing self-compassion benefits psychological health,

specifically by increasing contentment, conscientiousness, self-worth, and improves emotional regulation in general (Neff & Vonk, 2009). Moreover, self-compassion decreases negative thoughts and feelings, including depression (Diedrich et al., 2014) and anxiety (Neff & McGeehee, 2010; Raes, 2010). More recent empirical findings include the benefit of self-compassion as a protective factor when facing psychological distress (Ferrari et al., 2018; Luo et al., 2019; Podina et al., 2015). Thus, the proposition of using self-compassion as a helpful tool to process painful experiences such as racial discrimination may help teachers of color to understand such experiences by minimizing their levels of anxiety and rumination.

Self-compassion and humanistic counseling

The construct of self-compassion aligns consistently with the humanistic perspective of self-acceptance (Neff, 2003). Self-compassion stems from humanistic approaches which explore the subjective experience of the self (Patsiopoulus & Buchanan, 2011). Roger's (1961) philosophy of humanistic counseling promoted the unconditional positive regard toward oneself, which aligns with the self-compassion perspective. Roger's client-centered therapy approach allowed individuals to practice self-awareness from a nonjudgmental place with a kind self-attitude and openness to learn from experiences of suffering. Similarly, Snyder (1994) closely encouraged self-compassion practices that encouraged curiosity and compassion toward clients' experiences with suffering. In addition, Ellis (1973) coined the term "unconditional self-acceptance" as a key component for individuals to foster well-being and an openness to life's uncertainties while accepting one's imperfections and limitations with a forgiving attitude; all of which are key components of self-compassion practices (Neff, 2003).

Thus, for people of color, a humanistic intervention such as self-compassion, may facilitate a greater understanding of their own suffering when experiencing RBF. Brady-Amon (2011) argued that humanistic interventions foster empowerment through their phenomenological underpinnings for individuals and groups. The unique phenomenological experience of teachers of color is honored while allowing participants to make meaning of their individual experiences. Moreover, humanism acknowledges that people are intrinsically capable of their own emotional healing (Germer, 2009).

Self-compassion for teachers' occupational stressors

To date, research on self-compassion with caregiving professionals has demonstrated considerable benefits, including increased contentment, conscientiousness, and positive thinking, as well as decreased anxiety and depression (Ferrari et al, 2018; Luo et al., 2019; Raes, 2010). However, there is still limited research examining occupational stressors in teachers and the role of self-compassion in coping with such stressors.

Due to the solid empirical support that interventions incorporating self-compassion have received so far, it seems justified to expect that self-compassion might be a valuable skill for navigating difficult, challenging situations successfully. Therefore, it could be assumed that applying self-compassion during stressful times could contribute to general well-being for teachers who are facing stress, and possibly burnout. In particular, the practice of self-compassion may allow teachers of color to feel less isolated and decrease their stress coming from experiencing RBF. Neff (2003) indicated that people with higher self-compassion feel less isolated through common humanity awareness, which may also help teachers of color decrease their hyperawareness of being judged and increase their capacity to connect with others (Allen & Leary, 2010; Breines & Chen, 2012).

In the following section, we propose a humanistic intervention to address the emotional exhaustion of teachers of Color. Through *Safe Healing Circles*, mental health counselors use a lens of mindful self-compassion to create a safe space to teach self-regulation skills and process emotional stressors related to racial tensions for teachers of color in a school setting. The intervention is an innovative

and proactive approach, bringing mental health counselors into schools to facilitate self-compassion interventions that help teachers of color start healing emotionally from RBF and equip them with portable skills to face future racial discrimination.

Safe healing circles and interventions

It is critical to attend to the mental health consequences of dealing with racial tensions. An intervention designed for teachers of color and facilitated by mental health counselors is a necessary step to effectively address racial tensions in school districts and occupational stressors felt as a result of racial oppression. *Safe Healing Circles* is a hands-on approach that attends to the emotional and mental health toll of teachers of color. Because the literature has demonstrated that learning mindful self-compassion practices can be a useful tool to address stressors that tend to make one feel isolated, anxious, or depressed (Gilbert, 2009; Neff, 2003; Raes, 2010), *Safe Healing Circle*s is led through the theoretical components of mindful self-compassion.

The main objectives of *Safe Healing Circles* is for teachers of color to learn the meaning and implications of experiencing RBF, to attend to the specific stressors caused by dealing with RBF, to find a safe space to feel validated, and to start healing emotionally from the RBF they have experienced. Given the emotional sensitive nature of experiencing RBF, it is important to have mental health counselors facilitating. The Circles act as small clinical group interventions that include 10 group members and by invitation only. The Circles are designed to meet for 2 hours once a week for 4 weeks. The Circles are semi-structured, providing portions of psychoeducational interventions to learn about the tenets of self-compassion as a framework, while promising the safe space to talk about racial tensions.

We understand that the logistics of implementing *Safe Healing Circles* in schools come with financial challenges. For example, teachers do not have time to spare during the school day. We also recognize the importance of personal time after the school day ends, so when would the Circles actually take place? We believe *Safe Healing Circles* should be part of the school system's professional development program, and be made available to teachers on weekends, over the summer, or during school breaks. Funding for the program can be allocated as part of the professional development budget to compensate the mental health counselors for their work, or from the Employee Assistance Program (EAP) insurance/Wellness Prevention. In addition, this might be a strong source of funding to add a pay incentive for teachers that attend the Circles. Finally, no program can run without support and buy-in from the administration. The involvement and support of the school leadership will be critical for the logistic of the Circles to be successful. The second objective of the *Safe Healing Circles* is for group members to have a safe space to talk about their experiences with racial discrimination and feel connected through validation from others.

The mindful self-compassion framework used in *Safe Healing Circles* follows three central tenets: kindness versus harsh criticism, common humanity versus isolation, and mindfulness versus over-identification. These tenets provide a framework for group members to use as guidelines for sessions held the first three weeks. The last week, Week 4, offers an open space to reflect and process experiences from the group.

KINDNESS VERSUS HARSH CRITICISM

Teachers of color have reported the effects of an accumulation of collective experiences with racism in the workplace. Such racial realities have challenged their beliefs about being good teachers and have led them to contemplate giving up and leaving their profession (Betoret, 2009; Solomon & Lambie, 2020; Will, 2020). Kendi (2019) states that exposure to racism makes people of color think less of themselves and more vulnerable to these aggressions and accordingly, lowers their sense of self-worth. For teachers of color, feelings of inadequacy grow from such racist experiences and make the harsh inner critic thrive and question one's self-worth and ability to be an effective teacher.

Week 1: How do you treat a friend?

Group members will be encouraged to discuss the question, "How do you treat a friend?" This exercise aims to spark the realization that the expectations about how to treat a friend often do not align with how we tend to treat ourselves. Even though we want the best both for ourselves and our friends, we are usually more patient and understanding toward friends than toward ourselves. Moreover, we forgive our friends' faults but criticize our own.

Group members will discuss the common resistances or concerns about being kind instead of being highly critical to oneself during moments of feeling inadequate or oppressed by others. Common resistances include the fear of being weak, self-indulgent, being selfish, making excuses, and self-pity (e.g., Robinson et al., 2016). The facilitators will help participants detangle such misconceptions by emphasizing that individuals with high self-compassion actually tend to bounce back stronger from difficult situations and come back with a better perspective on how to handle such situations (Neff, 2009).

Group members will be asked to recall and write down a recent situation in which they have been unkind to themselves during a time of frustration due to feeling overwhelmed with the sense of not being included or their voice invalidated when facing racial discrimination. For example, an instance where a teacher of color may have felt excluded or rejected from a group of White colleagues, making them feel as if they were not good enough and hopeless about continuing to feel part of the working team. Next, they are asked to write down their situation-related inner critic as well as their reasoning behind being self-critical. Participants are asked to apply self-compassion skills and to think of the analogy of placing a dear friend in the same situation. Finally, they are asked to think about what they would say to a dear friend of color in the same situation in order to alleviate their suffering and to write it down as if they were addressing their friend. Once the exercise is complete, participants are encouraged to get into pairs to discuss what they learned from the exercise.

MINDFULNESS VERSUS OVERIDENTIFICATION

A substantial amount of data shows the physiological benefits of practicing mindful self-compassion during stressful events such as effective self-regulation (Brown et al., 2007; Neff, 2003; Raes, 2010). Thus, a mindfulness approach in the *Safe Healing Circles* aims to help group members learn to become their own resource when feeling emotionally overwhelmed and hypervigilant due to experiencing RBF. According to Gilbert's (2000) social mentality theory, the physiological underpinnings of an individual's inner negative stress activate the body's defense threat system, signaling to the brain that there is something wrong. Similarly, when one feels attacked by racism, cortisol and adrenaline are released to assist the fight-or-flight in the nervous system (Will, 2020). At this point, the insula, a part of our brain that allows us to have a different perspective of the situation, no longer works properly causing overidentification of the stressful situation presented and extended worrying (Germer, 2009).

Incorporating mindfulness practices within a lens of self-compassion when feeling oppressed, activates the mammalian system, releasing the hormone oxytocin and generating a sense of safety that counteracts the stress generated by the defense threat system (Neff, 2009). A simple way of activating the mammalian system would be by hugging oneself. The brain does not seem to know the difference between a hug received by another individual versus a self-hug; both signal the body to start releasing oxytocin and create a sense of safety, which further reduces the levels of cortisol released in a stressful situation, therefore reducing the suffering. Within the *Safe Healing Circles*, facilitators will encourage group members to find a soothing touch such as self-hugging to activate the mammalian system.

As noted earlier, mindfulness and self-compassion are interdependent concepts. Through mindfulness, the individual can experience suffering for what it is without over-identifying, whereas self-compassion is responsible for dealing with the suffering. The default mode network (DMN) is an area of interconnected neurons located through the midline of the brain responsible for the

overidentification thinking. Mostly, it is highly activated when worrying about the past and future (Germer, 2009). In other words, the DMN is the system in the brain responsible for the mind wandering, especially during stressful situations where one feels threatened or rejected. A teacher of color that experiences an accumulation of racial discrimination would likely start feeling hypervigilant and worry about the next racial aggression.

Week 2: Emotional self-regulation

Mindfulness exercises that can deactivate the DMN include activities such as naming emotions, noticing where an emotion is felt in the body, and being open to these feelings instead of resisting. Group members will learn not to minimize, but to honor their emotions instead to regain control of them. Group members will be able to heal from their racial wounds and analyze their problems more effectively by first acknowledging and honoring their difficult emotions around RBF. A tool to assist this process is the mindful self-compassion triangle. For example, a group member can be introduced to a visual of a mindful self-compassion triangle to help them identify and manage their highly aroused emotions. The top of the triangle asks with a sense of curiosity, "What is the emotion that I am feeling?" the bottom right of the triangle asks, "Where do I feel this emotion in my body?" and the bottom left of the triangle asks, "What do I need right now to take care of myself?"

COMMON HUMANITY VERSUS ISOLATION

Individuals who experience RBF have reported feeling isolated, resentful, and hyperinvisible (Pizarro & Kohli, 2018; Smith, 2004). Group members will learn to recognize that as people of color they are not alone in their experiences. From a common humanity perspective, their ancestors, family, and friends have collectively been part of similar struggles. Loving and kindness phrases can help mitigate feelings of isolation and promote a strong sense of connection with others.

Week 3: What do I need?

Group members will be asked to attend to self, to listen to their authentic needs, and to identify what they need to hear from others in their moments of suffering. The phrases should be short, easy to remember, and able to meet universal needs such as the need to feel loved, valued, and that one is not alone. Group members will be asked to compose one or two phrases they can use during stressful times, repeating them gently to themselves as a mantra to stop the mind from derailing to more negative thinking or feelings of isolation. The portability of these phrases allows group members to use them at any moment when they might feel oppressed or discriminated, having the effect of minimizing traumatic reactions. The phrases may evolve and change as needed.

CLOSURE

Week 4: Reflections and future expectations

In the final stage, group members can experience feelings of separation and vulnerability around leaving the safe space of the Circle (Corey, 2012). Given the emotional nature of the group, the process of closure is critical for the group members to leave with clear takeaways from the group, feeling encouraged and confident that they have the resources to face future racial tensions. Although the long-term goal is to hopefully continue checking in with the groups throughout the year, participants

should now have the necessary tools to prevent emotional exhaustion that comes from experiencing RBF.

Group facilitators can help group members identify how they will be using the skills they have learned in future stressful scenarios. For example, having the awareness of common humanity will help group members isolate less and seek support from their peers. In addition, group members are encouraged to continue mindful self-compassion meditation practices for self-regulation and have access to resources that will promote such practices. Most importantly, we hope that by the end of the *Safe Healing Circles*, group members will feel empowered to speak out about their needs from a self-compassionate lens. Finally, follow-ups with one-on-one sessions would be recommended if needed.

Implications and future research

Teachers of color, who work in a predominantly White profession, are reported to exhibit symptoms of RBF (Pizarro & Kohli, 2018). The recent events from the pandemic and social-political tensions with racism have exacerbated the emotional toll on teachers of color, leaving them depleted and at significant risk of burnout and attrition compared to their White colleagues (Gildersleeve et al., 2011; Pizarro & Kohli, 2018; Smith et al., 2007; Solomon & Lambie, 2020). Thus, the improvement of emotional wellbeing for teachers of color is essential to stopping the high turnover within school systems. The matter of emotional resilience in teachers of color, in general, is a concern that needs to be addressed systemically. School leadership should treat the issue of RBF in teachers of color holistically. Involving mental health counselors to attend to the emotional wellbeing of teachers of color in schools is critical as part of a plan to address racial discrimination in schools.

Introducing humanistic approaches such as mindful self-compassion can create a safe space for teachers of color to process and to start healing from the symptoms of RBF. Mental health counselors can also proactively reach out to school systems to educate the leadership on how addressing these issues will also benefit the students and foster a culture of compassion and interconnectedness to heal as a society. If schools address the problems of racism in the workforce with educational training for White staff about diversity without attending to the existing emotional damage that the teachers of color face, a safe environment to continue discussing discrimination and equity will not flourish.

While a holistic and humanistic practice such as mindful self-compassion has been shown to positively influence the management of occupational stressors (Germer, 2009; Neff, 2003), there is a dearth of research on the impacts of mindful self-compassion in teachers of color. Thus, future research should use a mindful self-compassion lens to determine how teachers of color can be assisted in confronting occupational stress related to racial discrimination. In addition, future mental health researchers should develop mindful self-compassion workshops geared to the needs of teachers of color to specifically address their symptoms with RBF. Finally, an evaluation of such interventions is recommended. Quantitative assessments could be performed to determine if these interventions have the potential to reduce the negative symptoms of RBF and the sense of support and safety in the school system for teachers of color.

CONCLUSION

Researchers have consistently highlighted how teachers of color struggle emotionally with racial discrimination, which could turn into RBF, and how these issues can result in burnout and attrition. Therefore, a closer look at the emotional wellbeing of teachers of color is a critical factor to stop attrition within school systems.

Previous research has shown that interventions including mindful self-compassion practices potentially reduce stress, worry, anxiety, and depression, while increasing positive emotions and

general well-being (Breines & Chen, 2012; Ferrari et al, 2018; Gilbert, 2009; Luo et al., 2019; Neff, 2003; Raes, 2010). Mindful self-compassion is a considerable and beneficial tool for emotional self-regulation. Teachers of color are confronted daily with occupational stressors that include racial discrimination which have exacerbated with the new challenges of Covid-19. Learning and practicing mindful self-compassion portable skills has the potential to reduce the emotional impact from RBF and thus benefit the learning outcome of the students, as well as the overall retention of teachers of color within the school systems.

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