

Self-Compassion: A Preventative Tool

By Sarah

I was sitting in the Raising Canes drive-thru when my son told me something genuinely funny. I laughed but quickly realized that it wasn't natural or emotionally driven. I had to put effort into it. This failure to feel happens when I'm overstimulated, overthinking, and distracted—my mind stuck on yesterday's to-do list and tomorrow's worries. As I flipped through the 37 open tabs in my brain, my son's sweet and silly effort to make me smile kept circling back like an anchor holding me down in the present.

As parents, educators, and caregivers, it's not uncommon to operate on autopilot. We jump from one tender, messy moment to the next. As we reflect on the present, there's no better time to slow down and remember what compassion really looks like. Let's make the month of love about taking care of one another. This starts closest to home—our own self-compassion.

We all know too well the old quote, "You can't pour from an empty cup." Dr. Rebecca Hubbard sheds light on how most people misinterpret this message. Caring for yourself *only* so you can do more or show up louder minimizes the value of "refilling." She encourages us to pay attention to *what* we're pouring. Are we overflowing into others or scraping the bottom of our cup? The value of what we're giving depends on it.

Dr. Kristin Neff, an Associate Professor of Educational Psychology at the University of Texas, describes self-compassion as our ability to relate to our own suffering in a kind, caring manner. Dr. Neff specifically breaks this down into three parts: mindfulness, common humanity, and kindness. Here's what some of the research teaches us and some questions to reflect on in our caregiving roles.

Dr. Neff offers a challenging yet thought-provoking perspective on the development of self-esteem compared to self-compassion. Research shows that the three most common areas that determine our self-esteem are social approval, perceived attractiveness, and success. In other words, self-esteem relies on feeling better than others in order to feel good about ourselves. When we measure our self-worth by how we see others, we're prompted to wonder, "*Am I good enough?*" and "*Do I belong here?*" This naturally leads to higher judgement, comparison, and criticism. Furthermore, when you're having an off day or someone else's success dims your own, you lose self-esteem. It's not stable or consistent and flees at the first sign of trouble. In contrast, self-compassion is there for you *when you fail*. It reminds you of your value, not because you've reached some standard, but because every human is flawed and *still* worthy of love. Most social-emotional curricula contain lessons on the development of self-esteem. What if self-compassion was taught and practiced rather than esteem being the goal?

Another component of self-compassion is the acknowledgment that discomfort and imperfection are shared human experiences. This allows us to feel connected to others when we struggle. Neuroscience helps explain why self-compassion is contagious. Mirror neurons are brain cells that fire both when we perform an action *and* when we observe the same action in others. This neural activity helps us connect meaning to behavior. Children internalize how adults handle suffering and failure, shaping their own emotional responses and resilience.

Research also shows that teachers with higher self-compassion experience less stress during challenging interactions and are better equipped to co-regulate students' emotions. This creates environments where students know their value and feel safe to show up as is, learn from their mistakes, and keep growing. Self-compassion protects educators and parents from empathy

fatigue and burnout as we ride alongside our kids on the emotional rollercoaster they face every day. This is how we serve kids more effectively without scraping from our empty cup.

Self-compassionate people are more likely to take responsibility for their mistakes and work toward repairing harm, helping to increase perspective-taking and build empathetic communities. Self-compassion serves as a greater intrinsic motivator and encourages a growth mindset. Research links it to higher emotional resiliency, less anxiety and depression, and improved overall wellbeing. *Self-compassion is not a luxury for caregivers—it is a preventative tool that protects emotional health, strengthens relationships, and sustains our ability to care for others.*

So where do we start if our self-compassion is running low? Here's some practical ways to begin building your self-compassion.

- + **Pause before reacting:** Take a few slow breaths when stressed to shift from automatic self-doubt to thoughtful response.
- + **Challenge self-criticism:** Pay attention to the dialogue in your head. How do you talk to yourself on your worst day? Practice the 3:1 ratio of positive to negative self-feedback.
- + **Practice mindfulness:** Slow down, quiet your body, and feel your breath.
- + **Recognize common humanity:** Understand that all people struggle and you're not alone in difficult moments.
- + **Tune into others' cues:** Notice other people's movements, gestures, and actions to energize the mirroring functions of your brain.
- + **Establish self-compassion habits:** Try journaling and practicing gratitude before and after school to help reset emotional states.
- + **Seek community & peer support:** Sharing experiences with your colleagues will enhance reflection and reduce feelings of isolation.
- + **Visit** self-compassion.org/self-compassion-practices for guided exercises and tips for practicing.

References

- Grupe, M. (2018). Finding sustainability, joy, and connection in teaching through mindfulness and self-compassion. *Kaleidoscope: Educator Voices and Perspectives*.
- Hanson, R. (2017). *Foundations of mindfulness*. Retrieved from <https://rickhanson.com/bb-foundations-of-mindfulness/>
- Hubbard, R. (2023). I was misinterpreting 'you can't pour from an empty cup'. *Medium, New Writers Welcome*. Retrieved from <https://medium.com/new-writers-welcome/i-was-misinterpreting-you-cant-pour-from-an-empty-cup>
- Neff, K. (n.d.). What is self-compassion? Retrieved from <https://self-compassion.org/what-is-self-compassion/>

AI Chatbots and Mental Health

By Nick

AI is being integrated into every facet of our lives at a pace that is difficult to keep up with. Utilizing artificial intelligence (AI) has become widely popular, with a study by Pew Research surveying nearly 1500 teenagers showing that two-thirds of teens admit to having messaged an AI chatbot at least once, and three in ten teens report using chatbots daily. With chatbots being as popular as they are, it is beneficial to understand the potential ways they can impact your life both positively and negatively.

To understand how AI can impact mental health, it is important to first know how AI chatbots work. Chatbots run on what is called “generative AI,” a category of AI programmed to notice patterns in data. Due to how this process works, AI does not truly learn in the same way that we do, but reproduces answers solely based on patterns. For example, AI knows that two plus two equals four, not because it understands numbers and counting, but because most users told it two plus two equals four. AI is incapable of producing anything truly original and can often be fooled, produce incorrect answers, and lie unintentionally.

The common concern with AI chatbots is overuse and dependence. Just like using your phone or social media too much is shown to have negative effects on your mental health, AI can do the same and can be more harmful in ways unique to AI. Chatbots, such as ChatGPT, are particularly prone to capturing your attention for extended periods. The near-perfect imitation of human conversation allows chatbots to trigger the same parts of your brain activated by social interactions with real humans. Your brain cannot tell you are talking to a computer and will still activate its natural reward center and release dopamine. The burst of dopamine created by simulated social interaction can be temporarily therapeutic, with some users reporting a decrease in anxiety after confiding in chatbots. When overused, it can be addictive, and it often serves to increase social isolation and feeds into personal delusions, causing social dependence. Users who have built dependence are characterized by prioritizing time spent with their chatbot over time spent with their friends or family. This effectively makes one addicted to social isolation, increasing the likelihood and severity of symptoms related to major depressive and anxiety disorders.

In the most extreme cases, a popular, but not official, term has been coined “AI psychosis”. This is generally defined as AI creating symptoms related to mania or psychosis. This occurs when AI is overused, and users begin to have delusions that are created by the chatbot they are utilizing. Oftentimes, at this stage, users refer to their chatbot as if it were a real human or their best friend, turning to it for any problems that would typically benefit from the advice of a friend or professional. Even though AI can accurately imitate human behaviors, it differs from your real-life best friend in important ways. Companies have ensured that AI chatbots are agreeable, often to a fault. After all, what is the point of an instant robot companion if the companion doesn’t get along with the user? It is this behavior that will create delusions. Users who end up with delusions will often ask AI to answer moral or ethical questions, like whether they won an argument or if an action they took was the correct one. Almost always, AI will tell the user they are correct and have made morally sound decisions. AI is a product that is incentivized to keep users online and addicted to make a profit. In a few rare cases, this has gone as far

as encouraging mental delusions and suicidal ideation that were disclosed to the chatbot, ultimately leading to the death of a very small number of users.

AI is still relatively new and developing at a breakneck pace. Most chatbots have added multiple safety features geared towards helping users who may struggle with delusions. A couple of examples include filters that will detect delusional speech and suicidal ideation and immediately prompt the user to seek counseling by linking them to the websites of local counselors or sending the number to the suicide help hotline. OpenAI, the owner of ChatGPT, has implemented parental controls as a way to increase safety for its younger users. The good news is that chatbots are getting safer day by day, but users should still exercise caution if they notice overuse or are struggling with their mental health.

Having community and social interaction is essential to staying happy and healthy. To someone in need of more interaction or looking to practice social skills, a chatbot can be an easy, healthy, or supplemental way to practice in a low-stakes scenario. In small doses, this has been shown to reduce anxiety or be a fun activity to waste a few minutes during your day. Just like using any technology, and most similarly social media, it is best to disconnect regularly and to have a healthy understanding of the service you are using. Chatbots can never fully replace a real human community and the benefits it creates.

Sources

<https://mental.jmir.org/2025/1/e85799/>

<https://hai.stanford.edu/news/exploring-the-dangers-of-ai-in-mental-health-care>

<https://www.mentalhealthjournal.org/articles/minds-in-crisis-how-the-ai-revolution-is-impacting-mental-health.html>

<https://www.pewresearch.org/internet/2025/12/09/teens-social-media-and-ai-chatbots-2025/>

From Meme to Addiction: The Hidden Dangers of Nicotine Packets

By Tessah

Scrolling on our phones, standing in the checkout line, and mentioned in day-to-day conversations, we've all been exposed to Zyn and its growing list of jargon: Zynfluencers, Zynnig, Zynner, and Zynthusiast. Even as a Gen Zer, I couldn't help but simultaneously laugh and roll my eyes at the endless puns and humor surrounding a product that's steadily becoming normalized in today's young and young adult populations. What often gets lost beneath the creativity of memes and trending social media posts, such as Josh Allen, Baker Mayfield, and Max Homa promoting its use, is the reality that nicotine pouches are not harmless. In fact, they're highly addictive, easily accessible, largely missed, and ignored at home and in school buildings. As Zyn gains popularity, it's worth pausing to examine the real health risks behind a trend that's been branded as clean, convenient, and cool.

In case you've joined the party late and aren't familiar with Zyn or other nicotine pouches (VELO, On!, Rogue, and FRE), here's a breakdown of the product and how they differ from traditional tobacco products. Nicotine pouches are a form of smokeless tobacco, because they're not inhaled. Typically, between 15 and 20 pouches are sold in one can depending on the brand. The pouches themselves are about finger-tip-sized packets made from a fiber casing filled with a powdered mixture of nicotine, chemicals, sweeteners, and flavorings. Often compared to tiny pillows, these pouches can contain anywhere from 2 mg to 20 mg of nicotine. Per Baylor, College of Medicine, "the average user consumes about half a can or eight to 12 pouches of the 6 mg nicotine pouches. This is equivalent to one to three packs of cigarettes per day." The pouch is placed between the lips and gum, where the nicotine is absorbed through the mouth. Users, AKA "Zynner", have even coined their own slang for the product, calling the pouch a "decky," and depending on placement of the pouch an "upper deck" or "upper-decker" if it's placed under the upper lip while a "lower deck" or "lower-decker" if it's placed beneath the lower lip.

Nebraska Legislative Bill 9 defines nicotine pouches as an alternative tobacco product. Because, unlike traditional tobacco products, nicotine pouches do not contain actual tobacco leaves. This distinction has allowed major tobacco companies to market the products as a "safer" alternative to traditional tobacco products, and this argument has fooled our youth and young adults. (Noting, this is how tobacco companies marketed vapes between 2010 and 2020.) Another feature adding to their appeal is that nicotine pouches don't require spitting, unlike chewing tobacco, making them easier to conceal in school or home environments.

Nicotine pouches' popularity and prevalence of use have significantly increased since 2023. This could be attributed to a variety of fruity, minty, sweet flavors that attack young individuals. Per the Tobacco Control Network, Nebraska, between 2023 and 2025, sales significantly increased: tobacco-flavored nicotine pouch sales increased from \$1,500 to \$699,000, while menthol-flavored nicotine pouch sales increased from \$1.9 million to \$6.0 million, and mint-flavored pouch sales increased from \$87.4 million to \$308.9 million. The American Lung Association reported a 641% increase in sales of the products between 2019 and 2022, but just 2.9% of U.S. adults had ever used a nicotine pouch. Signaling an increasing rate of youth nicotine use.

Much of this spike in popularity can be attributed to youth targeted marketing tactics and social media promotions on TikTok. If you have both brain cells and time to waste, I encourage you to review Freezetarps Cheddy and Daddy Wellness (uses adult language) accounts to fully understand the term and role of “Zynfluencers” and the content shaping our youth’s perception of nicotine. Are tobacco companies targeting young and young adults? Yes. But that’s not the point of this article.

We’ve established that pouch use is growing, so it’s important to examine the associated health risks—starting with the physiological effects of nicotine. Nicotine places significant stress on the cardiovascular system by triggering the release of adrenaline, which causes the heart to beat faster and harder while constricting blood vessels. This raises heart rate and blood pressure, restricts blood flow, and over time can lead to stiffened blood vessels and plaque buildup. These effects increase the risk of cardiovascular and vascular disease, as well as stroke.

Nicotine use is especially dangerous for individuals with diabetes because it promotes insulin resistance, preventing glucose from effectively entering cells. It can also directly impair the pancreas’s ability to secrete insulin, making blood sugar levels more difficult to regulate.

Nicotine use is linked to a range of gastrointestinal issues, including nausea, upset stomach or stomach pain, heartburn, and constipation. Long-term use may also increase the risk of developing stomach ulcers and Crohn’s disease.

Nicotine use may have negative consequences for a person’s oral health. Use can increase susceptibility to gum problems, including inflammation, soreness, recession, and ulcers. Prolonged pouch use also raises the risk of tooth decay and cavities. New studies out of Thailand show that some users develop precancerous white patches in the mouth known as leukoplakia.

The effects that nicotine has on our neurology and behaviors are especially concerning, particularly for adolescents and young adults who are experiencing a very crucial stage of brain development and maturity. Nicotine disrupts brain development, affecting memory, attention span, and our abilities to learn. Regular exposure to nicotine alters brain chemistry, fostering dependence and increasing the risk of withdrawal symptoms such as irritability and difficulty concentrating.

In addition to its harmful consequences on brain development and its addictive capabilities, nicotine can perpetuate or worsen mental health disorders. While it temporarily produces a dopamine “high,” this effect is short-lived and ultimately exacerbates conditions such as anxiety, depression, and ADHD.

Lastly, the ALA published a 2022 study that found 44 nicotine pouch products were found to contain several harmful chemicals, including formaldehyde (a carcinogen), along with ammonia, chromium, and nickel.

In the time of a “Zyndemic” (Zyn and Pandemic), research on nicotine pouches is still scarce, but the bottom line is that all tobacco and nicotine products come with serious health risks. Tobacco companies’ market so-called harm reduction products as “healthier alternative”, “safe”, and

“clean” but these statements are false. These are tactics to get youth and young adults addicted to their products at a young age to make them lifetime tobacco consumers.

A statement made by the U.S. Surgeon General found that youth use of nicotine in any form is unsafe. At SCIP, we encourage school districts to implement comprehensive tobacco use prevention curriculum and ask families to either begin or continue conversations at home about tobacco and nicotine use. This conversation does not have to be uncomfortable or accusatory. Simply asking your student what they’ve heard about Zyn and other nicotine pouches can begin the conversation. Setting clear expectations about tobacco and nicotine use in schools and at home set guidelines for students, but it’s important to also model the behavior you want to see. Tobacco Free Nebraska and the Nebraska Tobacco Quitline are available and offer quit kits. Local Tobacco Free Coalition can also provide quit kits when contacted. Additional resources from Stanford Medicine’s REACH Lab include free curriculums and conversation guides to help begin the conversation for all tobacco products. The Truth Initiative also provides a series of educational tools to promote prevention and cessation.

References

Baylor, College of Medicine: <https://blogs.bcm.edu/2025/06/09/what-are-nicotine-pouches/>

Tobacco Control Network, Nebraska, https://tobaccomonitoring.org/wp-content/uploads/2025/10/Nicotine-Pouch-Sales-Data-Brief_8.10.2025.pdf

American Lung Association Data and 2022 Study: <https://www.lung.org/blog/zyn-nicotine-addiction>

Thailand Study <https://pubmed.ncbi.nlm.nih.gov/39097712/>

Centers for Disease Control and Prevention website was referenced for health-related consequences.