The influence of pet ownership on self-compassion among nurses: A cross-sectional study

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Background: The modern lifestyle trend of pet ownership is undoubtedly beneficial for both physical and mental health. Research has shown a connection between pet ownership and staff self-compassion. However, there has not been any evidence linking pet ownership to self-compassion in the nurse population. **Aims:** To investigate the current status of pet ownership among nurses and explore the influence of pet ownership on self-compassion among nurses. **Methods:** An online survey was conducted in July 2022 with 1308 nurses in China. Data were collected using a general information questionnaire and a self-compassion scale. To compare categorical variables, the independent t test, one-way ANOVA, and multiple linear regression analysis were utilized. SPSS software was used for the statistical analysis. **Results:** We found that 16.9% of nurses owned at least one pet, and dogs and cats were the primary pets. The t test for independent samples showed that pet owners and non-pet owners scored differently on self-compassion ($t=3.286$, $p=0.001$), self-kindness ($t=3.378$, $p=0.001$), common humanity ($t=2.419$, $p=0.016$), and mindfulness ($t=2.246$, $p=0.025$). One-way ANOVA revealed that the highest degree was an influencing factor of self-compassion ($\chi^2=1.386$, $p=0.019$). Multiple linear regression showed that average monthly income, pet ownership, and highest degree were the factors that influenced self-compassion most significantly ($F=8.335$, $p\square0.001$). **Conclusion:** The results revealed that nurses actually own pets as part of their modern lifestyle, which provides them with social support and potentially enhances their self-compassion. More efforts should be focused on the impact of pet ownership on nurses' physical and mental health, and pet-based interventions should also be developed.

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4   **Abstract**

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6   physical and mental health. Research has shown a connection between pet ownership and staff

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8   compassion in the nurse population.

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10 of pet ownership on self-compassion among nurses.

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12 collected using a general information questionnaire and a self-compassion scale. To compare

13 categorical variables, the independent t test, one-way ANOVA, and multiple linear regression

14 analysis were utilized. SPSS software was used for the statistical analysis.

15 **Results:** We found that 16.9% of nurses owned at least one pet, and dogs and cats were the

16 primary pets. The t test for independent samples showed that pet owners and non-pet owners

17 scored differently on self-compassion (t=3.286, p=0.001), self-kindness (t=3.378, p=0.001),

18 common humanity (t=2.419, p=0.016), and mindfulness (t=2.246, p=0.025). One-way ANOVA

19 revealed that the highest degree was an influencing factor of self-compassion (χ^2=1.386,

20 p=0.019). Multiple linear regression showed that average monthly income, pet ownership, and

21 highest degree were the factors that influenced self-compassion most significantly (F=8.335, p<

22 0.001).

23 **Conclusion:** The results revealed that nurses actually own pets as part of their modern lifestyle,

24 which provides them with social support and potentially enhances their self-compassion. More

25 efforts should be focused on the impact of pet ownership on nurses' physical and mental health,

26 and pet-based interventions should also be developed.

27 **Keywords:** pet ownership, nurse, self-compassion, social support

INTRODUCTION

Nursing is a highly stressful career, and nurses have a high risk of burnout from a global perspective. Nurses are the main health force in the fight against COVID-19, but they face relatively high levels of stress (Galanis et al., 2021). A cross-sectional survey showed that 68.3% of nurses in China had high levels of occupational stress (Gu et al., 2019). Higher stress among nurses leads to anxiety, depression, burnout, and compassion fatigue and results in low job performance, reduced compassionate practice, poor patient outcomes, and even increased turnover to the detriment of organizational development (Bakhamis et al., 2019; Dall'Ora et al., 2020; Garcia et al., 2019; Hoff et al., 2019; Jun et al., 2021).

To date, a wide variety of interventions have been used to manage nurses' stress. A literature review (Chesak et al., 2019) revealed that various stress management interventions for nurses have been investigated, with most focusing on treating an individual rather than their environment. Psychological skills training and mindfulness-based and meditation training were the most commonly used interventions. In addition to the altered environment or care model, massage, energy therapy, and multimodal interventions, there are also other types of interventions. Currently, evidence shows that most treatments are directed at treating the individual. However, there is still a gap between environmental intervention knowledge and efficacy.

Self-care and social support are significant strategies for nurses to deal with stress. To cope with this issue, the vast majority of nurses use self-care behaviors. Self-compassion is a form of self-care and is a skill that can be learned (Mills et al., 2018). In recent years, self-compassion in particular has received attention from scholars. Self-compassion is a protective factor against stress. Individuals also require compassion for themselves, particularly during difficult times or when they are suffering (K. Neff, 2003).

K. Neff (2003) defined self-compassion as a regulation strategy in which feelings of worry or stress are not avoided in favor of being open and sensitive to one's own suffering, experiencing feelings of care and kindness to oneself, taking an attitude of understanding and not

55 judging one's own inadequacies and failures, and acknowledging that one's own experience is

56 part of the shared human experience. In 2016, Neff (2016) redefined self-compassion as a

57 dynamic system that represents a synergistic state of interaction among the key elements of self-

58 kindness, self-judgment, common humanity, isolation, mindfulness, and overidentification. A

59 scoping review showed that self-compassion is helpful for reducing work-based stressors such as

60 anxiety and compassion fatigue among nurses (Steen et al., 2021). Despite the fact that nurses

61 are charged with improving health and well-being, many do not practice compassionate self-care

62 because of their busy schedules, reluctance, or limited competency (Andrews et al., 2020; Egan

63 et al., 2019).

64   Although self-compassion is a relatively new field, it has received increasing attention

65 among nurses. Self-compassion can shield nurses from stress and burnout for their own health

66 and possibly for the health of their patients. It was found that self-compassion can improve the

67 job satisfaction and performance of nurses (Chu, 2017). Nurses often experience emotional

68 exhaustion and are prone to job burnout and even compassion fatigue due to prolonged exposure

69 to pain, but those with higher levels of self-compassion can generate compassion satisfaction,

70 thereby reducing compassion fatigue (Mooney et al., 2017). To enhance nurses' self-compassion,

71 interventions such as compassion-focused therapy (Corrigan et al., 2022) and mindful self-

72 compassion (Bodini et al., 2022) have been used. Recent research suggests that pet ownership

73 may be a new strategy to foster self-compassion.

74   People are better able to deal with stress when they have pets as social support (Barker et

75 al., 2020; Krause-Parello, 2012). A recent survey indicated that pet attachment could alleviate

76 job insecurity and stress (Wan et al., 2022). According to Clark et al. (2018), weekly visits from

77 a therapy dog may help reduce stress and feelings of being exhausted, frustrated, and

78 overwhelmed that are related to working in the nursing industry. Research on nurses related to

79 pet ownership or pet-assisted therapy is still relatively limited.

80   To date, pet ownership is the most common form of human-animal interaction (Scoresby et

81 al., 2021). A survey conducted in the United States estimated that approximately 67% of

82   households have at least one pet, with cats and dogs being the most popular choices (Jennifer W

83   Applebaum et al., 2020). Chinese research showed that the number of pet-owning households

84   reached 99.78 million in 2018, and the proportion of pet-owning households is approximately

85   17% (Chen, 2019), which is much lower than in other countries. Using attachment theory,

86   experts suggest that people and animals form attachments to one another (Westgarth, Heron, et

87   al., 2010). Moreover, pets are commonly recognized as family members and friends by most

88   people (Westgarth, Heron, et al., 2010).

89   The connection between pet ownership and health has been researched more thoroughly in

90   recent years. Because pet ownership provides social support, it has good physical and mental

91   health-promoting effects. Pets can connect with nature, play a role in recreational and work

92   activities, and provide companionship in the home. Pet-owning populations are more affectionate

93   toward their neighbors, exercise more, and sleep better (Mein & Grant, 2018). Among elderly

94   people, pet ownership contributes to successful aging, improves cognitive function, and enhances

95   the quality of life among chronic patients (Friedmann et al., 2020; Krittanawong et al., 2020).

96   Some studies have shown that pet companionship is a nonpharmacological approach to treating

97   neurological disorders (Boldig & Butala, 2021). Pet ownership reduces the occurrence of

98   psychological problems such as anxiety and depression, and pets may promote mental health

99   recovery by creating a sense of identity (Friesinger et al., 2021). A number of studies have

100 indicated that pet ownership continues to have a positive psychological impact during the

101 COVID-19 pandemic. Oliva and Johnston (2021) proved that pet ownership reduced stress and

102 decreased the incidence of autism. Tan et al. (2021) suggested that pet ownership is beneficial

103 for physical and mental well-being during periods of social isolation amidst a global pandemic.

104   Previous studies show that self-compassion and pet ownership are positively correlated.

105 Companion animals help increase owners' self-compassion (Kogan et al., 2021). Research has

106 demonstrated that veterans' self-compassion significantly improves with dog ownership in

107 combination with a structured dog training program (Dessa Bergen-Cico et al., 2018). However,

108 it is unclear how nurse self-compassion and pet ownership relate to one another in the nursing

109 population.

110   Despite promising initial findings on pet ownership related to self-compassion, to our

111 knowledge, there are no published empirical studies on the status of pet ownership among

112 Chinese nurses. Therefore, the present study aimed to investigate the current status of pet

113 ownership among nurses and to explore the relationship between pet ownership and self-

114 compassion.

115

116 **MATERIALS AND METHODS**

117 **Study design**

118 A cross-sectional online survey of mainland Chinese nurses was conducted using convenience

119 sampling. The present study adhered to the Strengthening the Reporting of Observational Studies

120 in Epidemiology (STROBE) statement and checklist.

121

122 **Ethical considerations**

123 This study was approved by the Ethics Committee of the First People's Hospital of Zunyi (2022-

124 016), and permission for data collection was obtained from the participants. Prior to completing

125 the survey, the participants were informed of the main content and the purpose of the study, and

126 the participants could choose to give informed consent before participating in the survey. The

127 participants were also informed that the results of the study would be presented in an aggregate

128 form and that there was no way to identify the individuals who completed the survey. If a

129 participant declined to participate, the questionnaire collection was automatically closed. Data

130 and written informed consent were both recorded online.

131

132 **Sample size estimation**

133 The sample size was calculated using PASS (Power Analysis and Sample Size) software 15.0.

134 According to a previous study, approximately 17% of Chinese people owned pets (Chen, 2019),

135 and when a two-sided $\alpha = 0.05$ with confidence level as 0.95 was set, a sample size of 906 was

136   calculated. Considering a 10% questionnaire error rate, at least 997 nurses would need to be

137   surveyed. In the end, 1409 nurses responded to the questionnaire.

138

139   **Participants**

140   All registered nurses who met the inclusion criteria were eligible to participate in this study. The

141   participants had to meet the following inclusion criteria: (1) having worked as a nurse in a

142   medical institution for more than one year and (2) being willing to participate in this study. The

143   exclusion criteria were as follows: (1) stopped working as a nurse more than six months before

144   the survey and (2) diagnosed with a severe psychological or physical disorder.

145

146   **Data collection**

147   Data collection was carried out between 6 and 27 July 2022. Wenjuanxing (www.wjx.cn), a

148   widely accepted online questionnaire survey platform in China for data collection, was used to

149   construct a web questionnaire. Using a poster, the link and QR code of the web questionnaire

150   were distributed via WeChat, a popular social media platform among users, and it was clearly

151   indicated on the poster who would be included and excluded. Nurses could fill out the

152   questionnaire by clicking on the link or scanning the QR code.

153

154   **Measurements**

155   **The general information questionnaire**

156   To collect general information, the authors designed a questionnaire based on the literature and

157   the purpose of the study. This questionnaire mainly included demographic and sociological

158   information such as gender, age, education, years of work, marital status, and ownership of pets

159   and their types.

160

161   **Self-compassion scale**

162   The Self-compassion Scale (SCS) was developed by Neff (K. D. Neff, 2003). The Chinese

163 version of the SCS that was used in this study was translated and revised by Chen (Chen et al.,

164 2011). The scale has 26 items in 6 dimensions: self-kindness, common humanity, mindfulness,

165 self-judgment, isolation, and overidentification. The items included in self-judgment, isolation,

166 and overindulgence should be scored in reverse. The Cronbach's α coefficient of the total scale

167 was 0.80, and the Cronbach's α coefficients of each subscale were 0.73, 0.70, 0.77, 0.77, 0.77,

168 and 0.70, respectively. The score of each dimension is the average score of all items in the

169 dimension, and the total score of self-compassion is the sum of the average scores of each

170 dimension. It is scored using the Likert 5-point system. The authors have permission to use this

171 instrument from the copyright holders (Chen et al., 2011).

172

173 **Statistical analyses**

174 IBM SPSS 26.0 software was used for data analysis. Continuous variables were reported as the

175 mean (± standard deviation [SD]), and the count data were described as frequency and

176 percentage. The Kolmogorov–Smirnov and Shapiro Wilk tests were used to check the normality

177 of the data. Independent *t* tests, one-way ANOVA and multiple linear regression analysis were

178 used to analyze the influencing factors of self-compassion. A difference's magnitude was

179 measured by the effect size. We used Cohen's d value to determine the effect size in the t test.

180 We considered d = 0.20 small, d = 0.50 medium, and d = 0.80 large. Cohen's f value was used

181 for the analysis of variance, and we considered small, medium, and large effect sizes of d = 0.10,

182 d = 0.25, and d = 0.40, respectively. Data analysis was performed using the least significant

183 difference (LSD) post hoc method to compare the groups. $p < 0.05$ was considered indicative of

184 statistical significance.

185

186 **RESULTS**

187 **Descriptive statistics**

188 A total of 1409 nurses responded to the questionnaire, of which 58 declined to participate in this

189 survey, resulting in 1351 questionnaires being received. Furthermore, 42 questionnaires were

190   judged to be invalid due to missing or incorrect information. The final 1309 questionnaires were

191   included in the analysis, with a valid return rate of 92.9%. The participants' ages ranged from 18

192   to 59 years old, and the average age was 32.25 ± 6.18. A total of 1267 (86.7%) of the participants

193   were female, and 42 (3.2%) were male. Some of the nurses owned pets, and 1088 nurses did not

194   own pets. Dogs and cats were the most common sorts of pets kept (55.7% and 52.5%,

195   respectively), followed by other animals (15.4%), with some people having both kinds of pets,

196   and most pet owners (76.0%) having had their animals for longer than a year. The results are

197   shown in Table 1.

198

199   **Scale scores between pet owners and non-pet owners**

200   Using independent samples, t tests showed that pet owners scored differently than non-pet

201   owners on self-compassion (t=3.286, p=0.001), self-kindness (t=3.378, p=0.001), common

202   humanity (t=2.419, p=0.016), and mindfulness (t=2.246, p=0.025). However, there were no

203   differences between the two groups for self-judgment (t=0.832, p=0.406), isolation (t=1.479,

204   p=0.140), and overidentification (t=1.687, p=0.093). The results are shown in Table 2.

205

206   **Univariate analysis and multiple linear regression of self-compassion**

207   One-way ANOVA revealed that the highest degree was an influencing factor of self-compassion

208   (χ^2=1.386, p=0.019). The LSD post hoc analysis showed that nurses with junior college and

209   below degree had a lower level of self-compassion than those with a bachelor's degree (p=0.010)

210   and a master's and above degree (p=0.022) had, but there was no significant difference between

211   those with a bachelor's degree and a master's and above degree (p=0.194). Furthermore, there

212   were no statistically significant differences among the other variables (p>0.05). The results are

213   presented in Table 3. In a multiple linear regression using the forward method, self-compassion

214   was used as the dependent variable, and demographic characteristics were used as the

215   independent variable. The findings showed that average monthly income, pet ownership, and

216   highest degree were the factors that influenced self-compassion most significantly (F=8.335, p<

217   0.001). The results are shown in Table 4.

218

219   **DISCUSSION**

220   In this study, we found that 16.9% (221) of the nurses owned at least one pet. We also

221   discovered that pet owners had higher self-compassion than non-pet owners. In addition, average

222   monthly income, pet ownership, and highest degree were influencing factors of self-compassion.

223   The results revealed that pet ownership may promote nurses' self-compassion.

224   To the best of our knowledge, pet ownership among nurses in mainland China has not been

225   reported by other studies. This cross-sectional study showed that 16.9% of the nurses owned at

226   least one pet, and this rate was similar to the data reported in a previous study (Chen, 2019).

227   Currently, little research has been conducted on the status of individual group pet ownership. The

228   literature on nurse pet ownership on a national and international scale is lacking, and this study

229   fills this gap. Our research shows that pet ownership among Chinese nurses is on par with that of

230   the general population. The rate of pet ownership in China is much lower than that abroad.

231   Consistent with previous studies, dogs and cats were the primary pets (Jennifer W Applebaum et

232   al., 2020). Nevertheless, there are large differences between cultures and types of household pets,

233   with dogs dominating in some countries and cats in others (Fraser et al., 2020; Kim & Chun,

234   2021), and there was a small difference between cats and dogs in our current study. Additionally,

235   many people owned at least one type of pet, and most nurses owned pets for at least a year.

236   Although studies have shown that pet ownership is a social act for individuals and is influenced

237   by subjective and objective factors (Purewal et al., 2019; Westgarth, Pinchbeck, et al., 2010),

238   there is a lack of research regarding the predictors of pet ownership among nurses. Thus, more

239   studies are needed to examine these predictors.

240   Another finding of our study was that pet ownership is also associated with self-

241   compassion. In this study, the results showed that pet owners had a higher level of self-

242   compassion than non-pet owners, which is consistent with previous findings (Dessa Bergen-Cico

243   et al., 2018; Kogan et al., 2021). Pet owners had a higher level of self-kindness, common

244   humanity, and mindfulness than non-pet owners, which indicated a positive effect of pet

245 ownership on self-compassion. High levels of self-compassion can promote self-care behaviors,

246 which further promote individuals' physical and mental health. However, the relationship among

247 pet ownership, self-compassion, and physical and mental health was not examined in depth in

248 this study and needs to be further explored in future studies.

249 Moreover, we found that pet ownership was also a predictor of self-compassion, and nurses

250 who keep pets had a higher degree of self-compassion in the multiple linear regression. This

251 could be because pet ownership can reduce individuals' anxiety and stress (Bolstad et al., 2021;

252 Brooks et al., 2018) and increase positive feelings of happiness and security (Brooks et al.,

253 2018), which may be a strategy for coping with stress. Pet ownership also provides social

254 support for owners (Antonacopoulos & Pychyl, 2010; J. W. Applebaum et al., 2020). A

255 longitudinal control study suggested that dog ownership in combination with a structured dog

256 training program could increase self-compassion among veterans (D. Bergen-Cico et al., 2018).

257 According to attachment theory, pet attachment is a specific form of attachment that also

258 occurs in adults (Westgarth, Heron, et al., 2010). Attachment behavior refers to a set of

259 emotional and behavioral strategies that are connected to close relationships and interactions

260 with others (Antonucci et al., 2004). In adulthood, attachment is classified according to two

261 dimensions: attachment avoidance and attachment anxiety. According to Ding and Xu (2021),

262 self-compassion moderates the relationship between attachment anxiety and self-esteem and has

263 a mediating effect on subjective well-being. The findings in this study support the idea that pet

264 ownership is associated with self-compassion, but the mechanisms by which pet attachment and

265 self-compassion interact need to be further investigated.

266 In addition, average monthly income and education were also associated with levels of self-

267 compassion, and this finding is consistent with previous studies. A longitudinal follow-up study

268 reported that higher income is associated with higher self-compassion levels (Lee et al., 2021).

269 Another cross-sectional study showed that less-educated individuals had lower self-compassion

270 (López et al., 2018). Although the association among these factors is quite complex, we

271 hypothesize that people with higher incomes and education are more inclined to self-regulate to

272   increase self-compassion, but more research is still needed to confirm this in the nurse

273   population.

274

275   **Limitations**

276   To our knowledge, this is the first study to examine the influence of pet ownership on

277   nurses' self-compassion. However, this study has several limitations. Our survey was conducted

278   online, and the participants might be more limited by our research methodology, which does not

279   yet fully represent Chinese nurses' overall pet ownership. Additionally, there are more women

280   than men in nursing due to the specificity of the profession. This means that the results cannot be

281   generalized to other populations. Furthermore, as our findings were based only on a status quo

282   survey, the results are limited by the variables studied, and more long-term and in-depth studies

283   are needed. Additionally, the degree of explanation of our model is relatively low, and further

284   validation is needed.

285

286   **CONCLUSION**

287   As a result of this study, we found that 16.9% of nurses owned at least one pet, which revealed

288   that nurses actually own pets as part of their modern lifestyle, providing them with social support

289   and potentially also enhancing their self-compassion. In the future, more empirical studies are

290   needed to confirm the correlation between pet ownership and nurses' physical and mental health,

291   especially occupational health, psychological mechanisms, and short- and long-term effects. In

292   addition, pet companionship can be explored as a new psychological intervention strategy.

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436

Table 1 Demographic characteristics of participants (*N*=1309)

1 **Table 1** Demographic characteristics of participants (*N*=1309)

Demographics	n (%)
Age (years)	
<30	444 (33.9)
30~	724 (55.3)
40~	112 (8.6)
50~	29 (2.2)
Gender	
Male	42 (3.2)
Female	1267 (96.8)
Personality Type	
Extrovert	577 (44.1)
Introvert	732 (55.9)
Highest Degree	
Junior college and below	200 (15.3)
Bachelor's	1075 (82.1)
Master's and above	34 (2.6)
Sibling	
Yes	159 (12.1)
No	1150 (87.9)
Marital status	
Unmarried	337 (25.7)
Married	949 (72.5)
Others	23 (1.8)
Children	

Yes	430 (32.8)
No	879 (67.2)
Job title	
None	85 (6.5)
Junior Level	672 (51.3)
Intermediate level	502 (38.3)
Senior level	50 (3.8)
Working years (years)	
≤5	348 (26.6)
6–15	770 (58.8)
≥16	191 (14.6)
Average monthly income (yuan)	
≤3000	141 (10.8)
3001~6000	725 (55.4)
6001~9000	311 (23.8)
≥9001	132 (10.1)
Number of night shifts per month	
0	439 (33.5)
1–4	238 (18.2)
≥5	632 (48.3)
Pets	
Dog	123 (55.7)
Cat	116 (52.5)
Others	34 (15.4)

Length of pet ownership	
≤ 6 months	31 (14.0)
6~12 months	22 (10.0)
>12 months	168 (76.0)

Table 2 Scale scores between pet-owners and non-pet owners (*N*=1309)

1 **Table 2** Scale scores between pet-owners and non-pet owners (*N*=1309)

Scores	Pet-owners (n=221)	Non-pet owners (n=1088)	*t*	*p*	Effect size
Self-compassion	81.89 ± 13.20	78.92 ± 12.05	3.286	0.001	0.24
Self-judgment	13.40 ± 4.03	13.16 ± 3.65	0.832	0.406	0.06
Isolation	11.07 ± 3.91	10.65 ± 3.17	1.479	0.140	0.13
Over-identification	11.74 ± 3.64	11.30 ± 3.11	1.687	0.093	0.14
Self-kindness	17.89 ± 3.57	17.01 ± 3.51	3.378	0.001	0.25
Common humanity	13.46 ± 2.92	14.34 ± 3.20	2.419	0.016	-0.28
Mindfulness	14.34 ± 3.20	13.85 ± 2.91	2.246	0.025	0.17

Table 3 Univariate analysis of Self-compassion (N=1309)

1   **Table 3** Univariate analysis of Self-compassion (*N*=1309)

Variables	Self-compassion	χ^2/t	*p*	Effect size
Age		0.798	0.892	0.19
＜30	79.48 ± 13.03			
30~	79.21 ± 11.96			
40~	79.49 ± 12.35			
50~	83.62 ± 7.96			
Gender		-0.915	0.360	-0.14
Male	77.71 ± 11.83			
Female	79.48 ± 12.31			
Personality Type		-0.728	0.467	-0.04
Extrovert	79.14 ± 12.61			
Introvert	79.64 ± 12.05			
Highest Degree		1.386	0.019	0.28
Junior college and below	77.29 ± 13.50			
Bachelor's	79.72 ± 12.01			
Master's and above	82.50 ± 12.53			
Sibling		0.060	0.316	0.08
Yes	80.34 ± 11.08			
No	79.30 ± 12.46			
Marital status		1.098	0.272	0.11
Unmarried	79.47 ± 12.59			
Married	79.33 ± 12.18			
Others	82.35 ± 12.99			

Children		-0.716	0.474	0.00
Yes	79.59 ± 13.02			
No	79.59 ± 11.93			
Job title		1.092	0.281	0.24
None	77.92 ± 15.17			
Junior Level	79.57 ± 12.34			
Intermediate level	79.11 ± 11.87			
Senior level	83.16 ± 9.80			
Working years (years)		0.787	0.906	0.13
≤5	79.74 ± 12.62			
6–15	79.07 ± 12.54			
≥16	80.26 ± 10.62			
Average monthly income (yuan)		1.071	0.323	0.35
≤3000	78.12 ± 14.29			
3001~6000	78.64 ± 12.60			
6001~9000	81.08 ± 11.00			
≥9001	81.20 ± 10.62			
Number of night shifts per month		0.707	0.971	0.04
0	79.36 ± 12.99			
1–4	79.71 ± 11.84			
≥5	79.36 ± 11.98			

Table 4 Multiple linear regression of self-compassion

1   **Table 4** Multiple linear regression of self-compassion

Variables	B	SD	β	t	p
Constant	76.764	2.938		26.125	<0.001
Average monthly income	0.984	0.446	0.064	2.206	0.028
Highest Degree	1.928	0.881	0.063	2.189	0.029
Pet ownership	-2.826	0.904	-0.086	-3.127	0.002

2   R^2=0.019, adjusted R^2=0.017, F=8.335, p<0.001