

# Development of Psychological Intervention Models to Improve Self-Compassion in Adolescents

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## ABSTRACT

Self-compassion helps adolescents in strengthening psychological capital to be able to successfully navigate the development process. Various studies have proven this by stating that self-compassion has a positive relationship with increasing problem-solving abilities, emotional well-being, resilience, decreased psychological impairment, motivation, positive body perception, optimism, wisdom, curiosity, so as to be able to develop a growth mindset. Self-compassion is a feeling of being open to one's own suffering, by not rejecting it and having the awareness to heal oneself with kindness. With this capital, teenagers can face the problems that occur in their personal, academic, social, and career lives by being kind to themselves and not criticizing their weaknesses. Self-compassion consists of three components, namely self-kindness – self-judgment, common humanity – isolation, and mindfulness – over identification. Self-kindness refers to the tendency to be supportive and sympathetic towards oneself when aware of one's shortcomings and not to criticize harshly. Meanwhile, common humanity is a rational understanding that it is not only ourselves who face problems, not only ourselves who feel suffering, but this is an experience that must be faced as humans. While mindfulness means holding painful thoughts and feelings in a balanced awareness, and not too identified with the painful feelings. Studies related to intervention models conducted abroad to increase self-compassion, namely mindfulness-based cognitive therapy (MBCT), mindfulness-based stress reduction (MBSR), and mindfulness self-compassion training (MSC). However, studies related to self-compassion in Indonesia have not been widely carried out until now, especially in adolescents. Although in practice, many Indonesian cultural concepts teach to do good or to be compassionate towards oneself. As is the case in Javanese culture, there is the expression *Alon Alon Waton Lakon*, which is a reminder not to be too hard on yourself in achieving something. Referring to this, the researcher sees the need for a scientific basis in developing a model for increasing adolescent self-compassion based on a strong and tested theoretical framework. This research is a multi-year research that will be carried out within a period of two years. This research was designed to include two stages of continuous research. This research is a research and development (R&D) research designed with 4D steps. The population and data sources of this study were teenagers in the Special Region of Yogyakarta. Based on Slovin's formula to calculate the research sample, the number of samples obtained is 400 people. Data were collected through a literature search and distributing questionnaires consisting of a scale of self-compassion, subjective well-being, quality of life, resilience, and psychological distress. The results of this study found that positive affect ( $\beta = .38$ ,  $t = 4.40$ ,  $p < .001$ , 95% CI [.18, .44]) and quality of life ( $\beta = .17$ ,  $t = 1.98$ ,  $p < .05$ , 95% CI [.01, .16]) may act as a protective factor for self-compassion ( $F(2, 125) = 19.07$ ,  $p < .001$ ,  $R^2 = .22$ ). Meanwhile psychological impairment ( $\beta = -.38$ ,  $t = -3.59$ ,  $p < .001$ , 95% CI [-.37, -.12]) and negative affect ( $\beta = -.27$ ,  $t = -2.60$ ,  $p < .01$ , 95% CI [-.33, -.05]) together served as risk factors for self-compassion ( $F(2, 125) = 36.12$ ,  $p < .001$ ,  $R^2 = .36$ ). Self-compassion enhancement interventions will be designed to increase protective factors and decrease risk factors.

Kata Kunci: *self-compassion; adolescent; psychotherapy; intervention model*