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Demographic Perspectives of Self-Compassion: Exploring Self-Compassion among Urban Malaysian Adolescents

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Abstract

The study of self-compassion in Malaysia's context is still in its infancy compared to the western countries. It is important to explore the profiles of self-compassion any target population before explaining the phenomenon of self-compassion in further details. In conjunction with that, the presents study aims to examine the demographic perspective specifically, gender, household income, and self-compassion profile of adolescents residing in the capital city of Malaysia, Kuala Lumpur. A total of 377 (male = 219, female=158) adolescents aged 16 years old from the Federal Territory of Kuala Lumpur were recruited and agreed to participate in this study. The quantitative approach has been used which participants have completed a set of questionnaires consisting of demographic questions such as gender and household income and also the Social Compassion Scale. Completed questionnaires were then collected and data were analyzed using the IBM SPSS Software version 22 using descriptive analysis. The results showed a sub-factor of self-compassion such as self-kindness=3.28, self-judgment=.89, common humanity=1.07, isolation=1.09, mindfulness=.96 and over identification=.99. The mean for self-judgmental as the highest, followed by isolation and self-kindness. The negative factors were higher than positive factors for self-compassion among adolescents compared to other sub-factors of self-compassion. The findings have important implications which provide demographics information on the gender, household income, and self-compassion profile of the adolescents in Kuala Lumpur. Future research suggested using inferential statistics to examine the relationship and influence of self-compassion on adolescent's life and well-being.

Keywords: Self-Compassion, Adolescents, Gender, Household Income, Urban Malaysian

Introduction

Self-compassion is one of the psychological variables that has gradually gained much attention from various researchers in the field of psychology. In the last 10 years, the construct of self-compassion has been widely spread in a vast discipline of studies. It has been identified as one of the contributing factors to increasing the sustainability of

happiness and psychological well-being (Pastore et al., 2022). The topic of self-compassion is getting attention among many researchers, especially in the field of Social Sciences. In some countries, self-compassion is still new and continues to be studied from various aspects and practices. It is also being implemented in intervention sessions and used as a meditation. The role of self-compassion has been widened not only towards reducing or preventing psychological problems but also being used as one of the techniques to rationalize negative events by looking at the positive perspective of the current situation. Rationalization using self-compassion helps to increase engagement in self-acceptance and positive self-worth (Hablado & Clark, 2020) and likely becomes a key factor in emotional flexibility (Beshai et al., 2018).

Self-compassion was introduced by Neff (2003) entails 3 main components namely: i) self-kindness versus self-judgment; ii) common humanity versus isolation and iii) mindfulness versus over-identification. The first component of self-compassion is self-kindness versus self-judgemental. self-kindness is defined as a way of managing personal emotions such as despair or an inferiority complex with a good approach. The main focus of self-kindness is understanding one's own condition when in pain, difficulty, or failure. People with higher self-kindness will treat themselves with love and care. It becomes a way to support themselves during times of suffering and pain. In contrast, people with less self-kindness will show vice versa, which is more on criticizing oneself or negative thoughts (Yang et al., 2019). People who practice self-kindness will value themselves unconditionally and priority is given to themselves to avoid self-harm (Barnard & Curry, 2011). The second component of self-compassion, which is the common humanity versus isolation, explains the condition of individuals who are not alone in facing the trials and challenges of life. Chio et al (2021) common humanity as suffering and failure experienced by an individual as part of the human experience rather than an isolated experience that only happens to a specific person. Mindfulness versus over-identification is the third component of self-compassion which explains awareness of the self's emotional state. Self-awareness involves being aware of the situation experienced by the person which can bring changes to the physical, emotional, and thinking at a certain time. Mindfulness involves acknowledging or being aware of physical, emotional, and mental pain for a moment in mindful awareness rather than over-identifying any of the pitfalls or drawbacks that happened in such patterns (Inwood & Ferrari, 2018). According to Stapleton et al (2018) individuals with high mindfulness are less self-judgmental and focus on positive thinking instead of focusing on failure and suffering. The individual's self-compassion is defined based on their responses in a certain situation which can be positive or negative forms.

Research about self-compassion has been conducted over the world which focuses on perspectives of education (Bakar & Ildil, 2020), clinical (Athanasakou et al., 2022), and psychology (Wong, 2021). Most of the previous research examines self-compassion at any level including adolescents (Marshall et al., 2020; Phuoc & Nguyen, 2020) and adults (Phillips, 2019) to enhance the positive impact on life. From Malaysia's perspective, self-compassion is gaining ground among psychology researchers to examine and investigate its role and impact on human well-being. Self-compassion was conducted to investigate the perspectives of Malaysian teachers of counseling and guidance (Mahomed et al., 2019), university students and social media disorders (Mohammad et al., 2016), mental health (Kotera & Neary, 2021), and adolescents' happiness and well-being (Khatib et al., 2021). Results from the previous research showed a significant impact on happiness (Ying et al.,

2016) and psychological well-being (Bakar & Ildil, 2020). The demographic perspective also was investigated in previous research. Demographic perspective and self-compassion research suggest that gender women have slightly lower levels of self-compassion than men. However, the contribution of gender role orientation has not been carefully explored. A nuanced understanding of differences in self-compassion based on gender and gender role orientation is needed (Yarnell et al., 2019).

The popularity of this topic is due to the impact on self and society. Research developments are growing rapidly across disciplines. The impact of self-compassion can empower oneself to accept any possibilities when facing pain or life chaos (Hablado & Clark, 2020). The topics gained popularity in contemporary psychology research after the movement toward positive psychology. Self-compassion is a construct that falls under the branch of positive psychology. It emphasizes the individual's capacity and ability to face difficult situations and life crises in a positive way (Neff & Costigan, 2014). Research about self-compassion has been extensively conducted and stretching back almost 15 years after Neff (2003) scientifically proved it brings a positive outcome for life. Previous research also showed that self-compassion has a high potential to increase well-being and happiness (Khumas et al., 2019). Recent interest has been driven by the recognition of the link between a tendency to treat oneself with kindness when suffering occurs, whether the suffering is the result of a catastrophe, perceived inadequacy, or slightly about life difficulties (Coroiu et al., 2018). Self-compassion refers to healthy ways of relating to a good attitude toward oneself that is driven by a desire to help rather than harm (Inwood & Ferrari, 2018).

The demographic perspectives have been investigated in a previous study that tries to understand the gender difference and the correlation between demographic perspective and self-compassion (Hashim & Zaharim, 2020). But, the study of demographic and self-compassion still needs further research to provide a better understanding of the key demographic factors and self-compassion in everyday events that can contribute to the happiness of adolescents in Malaysia. In accordance with the limitations of previous studies, the present study identifies the demographic profiles of adolescents' in Malaysia specifically focusing on the urban city of Malaysia, Kuala Lumpur. The present study specifically had two main objectives. First, we aimed to check the descriptive profile of adolescent connectedness involving gender and household income of the participants. Next, we examine the self-compassion profile of Malaysian adolescents in Kuala Lumpur. To date, the adolescent is highlighted in an urban area in the Federal Territory of Kuala Lumpur or the capital city of Malaysia and focused on national secondary school.

Materials and Methods

Participants

Research participants were selected through a simple random sampling method from three zones, specifically Keramat, Bangsar/Pudu, and Sentul in Kuala Lumpur. Statistics show that the entire zone has 46 schools with a student capacity of 7833 people. The number of 377 respondents is estimated to be appropriate and sufficient to represent the population of adolescents in Kuala Lumpur based on recommendation from (Hair, 2003;2007).

Measures

Self-Compassion Scale

Self-Compassion Scale by Neff (2003) aims to measure social compassion which consists of self-kindness, self-judgment, common humanity, Isolation, mindfulness, and over-identification. The Self-Compassion Scale (SCS) contained 26 items with six sub-factors namely the self-compassion scale contains 13 positive items (5,12,19,23,26, 3,7,10,15, 9,14,17,22) and 13 negative items (1,8,11,16,21, 4,13,18,25, 2,6,20,24) that need to be inverted (e.g. 1 =5, 2 = 4, 3 = 3. 4 = 2, 5 = 1) to positive during the data transformation process before further inferential analysis is conducted. Sub-factors of self-compassion include *self-kindness* (5, 12,19,23,26), *self-judgment* (1, 8, 11,16,21), *common humanity* (3, 7,10, 15), *Isolation* (4,13,18, 25), *mindfulness* (9, 14,17, 22), *over-identification* (2,6, 20,24). All responses applied the 5-point Likert scale (1= Almost never, 5= Almost often). The average total score or mean score obtained was based on the questionnaire answered by the respondents. A total score for self-compassion ranging from 1 to 2.5 indicates low self-compassion; a score of 2.5 to 3.5 indicates moderate self-compassion and a maximum score of 3.5 to 5.0 indicates a high level of self-compassion.

Socio-Demographics

Questions related to participants' demographic information were also included in the questionnaire. The questions specifically requested participants' gender and household income.

Procedure and Statistical Analysis

Ethical approval and permission were granted by the Educational Planning and Policy Research Division (EPRD) KPM.600-3/2/3 Jld. 46 (11) under the Ministry of Education which is the unit responsible for educational planning, research evaluation, policy analysis, and coordination. Data were collected in 2019 via a paper-pencil survey. Study eligibility was limited to citizens of Malaysia, who were secondary schooling students aged 16-year-old from the Federal Territory of Kuala Lumpur. Parental informed consent was obtained as the participants were considered under-aged. After the parental permission was granted, the participant filled up their own written informed consent on the day of data collection which was held. Participants were encouraged to answer all the questions and were free to omit items they did not wish to respond to but were prompted to attend to missing data entries. At the conclusion of the survey, participants received written debriefing information and were remunerated MYR 3.00 as a token of appreciation for their participation. After all the questionnaires were gathered, data were treated by checking the missing responses in a dataset and further analyses were conducted using IBM SPSS-AMOS–22. Data were analyzed using a descriptive approach such as frequencies, percentages, minimum, maximum, mean, standard deviation, and variance to describe the self-compassion profile of adolescents.

Results

The data for this study were analyzed using IBM SPSS and descriptive data analyses. The present study involved applying descriptive statistical analyses. Descriptive statistical analyses showed information relating to gender proportion, household income, and self-compassion properties.

Descriptive Information on Gender

Gender proportion for 377 participants shows 58.1 % (males=219) and 41.9% (females=158). The number of participants based on gender is not equal due to the population of each school that was randomly selected.

Table 1

Information on gender

Demography	Frequencies	Percentage (%)
Gender		
Male	219	58.1
Female	158	41.9
Total	377	100

Descriptive information on household income

There were four categories of income involved in the study. Household income below MYR 1,000=54 (14.3%), While income ranged between MYR 1,001 to MYR 3,000 = 218 (57.8%), followed by the household income ranged between MYR 3,001 to MYR 5,000 = 75(19.9%) and household income for above MYR 5,000=28 (7.4%). The highest category household income of the participants fell from MYR 3,001 to MYR 5,000. The details of the information are presented in Table 2.

Table 2

Participants' household income

Household income	Frequencies	Percentage (%)
<MYR 1000	54	14.3
MYR1001-MYR3000	218	57.8
MYR3001-MYR5000	75	19.9
>MYR5000	28	7.4
Prefer not to answer	2	0.6
Total	377	100

Descriptive information on self-compassion

Self-compassion entails three components with six subfactors. The descriptive analysis of self-compassion showed the mean and standard deviation of each subfactor. The *self-kindness* showed (M=3.28, SD=1.13), *self-judgmental* (M=3.38, S.D.=0.89), *common humanity* (M=3.26, SD=1.07), *isolation* (M=3.30, S.D.=1.09), *mindfulness* (M=3.22, S.D.=.0.96) and *over-identification* (M=3.22, S.D.= 0.99). The analysis showed the mean for *self-judgmental* as the highest, followed by *isolation* and *self-kindness*. The negative factors were higher than positive factors for *self-compassion* among adolescents. The details of the descriptive information are presented in Table 3.

Table 3

Mean and standard deviation of self-compassion

Descriptive Statistics						
Factors	N	Minimum	Maximum	Mean	Std. Deviation	Variance
SK	377	1	5	3.28	1.13	1.28
SJ	377	1	5	3.38	.89	.799
CH	377	1	5	3.26	1.07	1.14
Is	377	1	5	3.30	1.09	1.18
Md	377	1	5	3.22	.96	.92
OI	377	1	5	3.22	.99	.99

Note: SK=Self-kindness; SJ=Self-judgmental; CH=Common Humanity; Is=Isolation; Md=Mindfulness;OI= Over-identification

Discussion

The present study examined the demography and descriptive properties of self-compassion among the adolescent staying in urban areas in Kuala Lumpur. Self-compassion is found to be an important psychological construct and studies have found that it is crucial to maintain an individual's thoughts and behavior (Chio et al., 2021; Nguyen & Le, 2021; Poots, & Cassidy, 2020; Wilson et al., 2020). Although this study is preliminary, and only focusing on descriptive data, it is crucial for future researchers with special interest in self-compassion to explore further components with other important psychological variables such as psychological well-being and mental health. The demographic perspective of self-compassion was conducted by Hashim and Zaharim (2020) to investigate the role of sociodemographic factors of self-compassion and happiness. The result of this study supports the previous study in which demographic's characteristics in terms of gender and socio-economy are important that can influence adolescents' level of self-compassion. Previous research investigates the categorical gender role orientation classifications using a mean comparison of self-compassion across groups (Yarnell et al., 2019). The result from the previous study conducted by (Yarnell et al., 2019) supported the present study on the need to investigate the role of gender in determining the impact of self-identified gender on self-compassion. The relevant of the study is to explore the demographic perspectives such as gender and household income before proceed with the advance inferential statistics. The demographic perspective can provide basic information about self-compassion profile of the targeted respondent.

The self-compassion component consists of three components that can be in the form of positive and negative factors. The descriptive analysis results of the present study showed that *self-judgmental* is the highest among the other self-compassion sub-factors. *Self-judgmental* is found to be the most reported by participants. Conversely, it is something that researchers should pay attention to especially when focusing on exploring and understanding psychological well-being of individuals. Previous studies have shown that self judgemental as an important negative psychological aspect that is related to mental health and psychological well-being of an individual (Kinman & Grant, 2020; Kotera et al., 2021; Pandey et al., 2021; Yela et al., 2020). The present study also has a parallel objective with the previous study conducted by Hashim & Zaharim (2020) which shows the importance of studying the demographic perspective and properties of self-compassion to know the level of adolescents in specific. The household income, the income of the father, the education of the father, the

education of the mother, and academic performance was significantly associated with self-compassion and adolescent happiness. This basic information can lead to future understanding about the component of self-compassion which can be explored with other psychological variables in a way to increase human well-being.

The implication of this study suggests that more in-depth studies should be conducted to explore the nature of self-compassion and other important psychological aspects that are related to psychological well-being. This includes the development of anxiety and depression (Egan, 2021), empathy and prosocial behavior (Marshall et al., 2020), gratitude and prosocial behavior (Yang et al., 2021) and coping strategies (Chen & Zhu, 2022). Another practical implication is that it provides important psychological input to the helping professions such as counselors, therapists and social workers who work with adolescents. It also provides psychological input, especially when developing intervention programs and psychoeducation for adolescents. Therefore, there is a critical need for further research to use advanced statistical analysis to investigate self-compassion with other important psychological variables in order to understand the nature of self-compassion to psychological well-being. Not only will it benefit the expanding knowledge in the field of psychology, namely self-compassion, but also assist the well-being of individuals living in the challenging world.

Conclusion

In conclusion, self-compassion is a construct that can bring a significant impact on human life, likely to maintain psychological well-being and happiness. The unique contribution of self-compassion is well known. But, the construct is still being investigated to improve the content, psychometric properties and increase the understanding of people to practice self-compassion in daily life. Self-compassion constructs become a good factor in increasing psychological well-being, also can help people to accept the difficult situations that happen in life with a rational mind and lead to positive perspectives. To understand self-compassion in depth, further analysis should be conducted using inferential statistics to examine the relationship or influence of self-compassion with other positive constructs that have the potential to give a good outcome for an adolescent's life.

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