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DESCRIPTIVE STUDY OF SELF COMPASSION DEGREE ON ADOLESCENT IN BANDUNG

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Introduction

Adolescents have to fulfil the primary task of building their self. The goal of this task is to attain a positive self attitude and to become flexible enough for adapting in new situation. In this age, a person will encounter self-evaluation and social comparison intensely. Teenagers will also try to establish their identity and their place in social hierarchy. Teenagers run into many requirements relate to the task. To achieve positive self, teenager should experience successes and failures in: personal attractiveness, peer approval, school / work success, feeling virtuous, family support.

Indonesian teenagers get more demands from religion and culture. Indonesia as a religious country requires the teenagers to follow the religion tenets, that some of the tenets are love and care for others. Caring for others is thought in all five religions. Indonesian culture is included in Asian culture or east culture, usually called collectivism culture. This culture enquires the societies to mingle and have good relationship with others. Bandung teenagers are trained to mind and to concern the collectively prominence in some decisions or prioritize the common importance than personal importance. With all of this pleads, norms become an important thing in Indonesian society. Thus, Indonesian or Bandung adolescents are been commanded to develop good relations with others and to have an ability to situate theirselves in social surroundings.

The illustration about religion and culture requirements explained that Indonesian teenagers are charged to be compassion for others. Thus, the ability of be kind and compassion are necessity for teenager in Bandung. From Shapiro & Carlson (2009), compassion for others is started with build up kindness and compassion for self, but this concept must have been examined. Compassion for our self, according to Neff (2003), is labeled as self-compassion. Self-compassion is a capacity to be gentle to the self, without this ability, a individual possibly will not be ready to give compassion to other people. Neff (2003) also said if a person has high degree of self-compassion, she or he will be caring for his or herself and also to other people. Because of the obligation to care others, Bandung teenagers should have developed their self-compassion.

However if we see the facts in Indonesia, adolescents will have an inner conflict. There is a big difference between religion and culture's principles with the crises in Indonesia. Indonesia is one of developing countries in South East Asia. In recent years, Indonesia has experienced many problems, crisis and conflicts, that

should not occur on such a scale in a country with strong religious values. Moreover the economical differences between the rich and the poor layers of society have considerably grown over the last ten years. A further widening of the social gap between the rich and the poor will most probably contribute to a further increase in crime in Indonesia.

Due to economical, social and political problems, the mortality rate among the young people unfortunately also has increased. On an individual level, the suicide rate has grown because of stress and depression. On a social level, the racial conflicts and the religion conflicts have expanded. Disappointed by the economical and political situation and the continuing lack of justice and law enforcement Indonesian people question and even devalue their traditional beliefs and values (belief in religion, care for others, etc).

Economic and political crisis, showed much aggressions in Indonesian society. Some of the Leaders do not give a good example of the noble culture of the nation, such as give awareness to each other. These things destroyed the value of compassion for others into insignificance. The high rate of suicide among adolescents showed that adolescents in Indonesia began to lose the meaning of life. Teenagers in Indonesia are also more likely to experience more stresses and depressions. This suggests that more teenagers develop empty and individualism feelings. Feeling happy and feel prosperous also was reduced among adolescents. Stress, depression, feeling empty, and individualism or isolated feeling has a negative correlation with self-compassion. This relationship was proved by Akin research (2010) about the correlation between self-compassion and loneliness. The research showed that self-kindness, common humanity, and mindfulness factors of self-compassion were found negatively related to loneliness. On the other hand, self-judgment, isolation, and over-identification factors of self-compassion were found positively correlated to loneliness.

Research of Neff, Hseih, & Dejithirat (2005) also confirmed that the degree of self-compassion is associated with the increased of happiness, optimism, curiosity and feeling of connectedness with others. A high degree of self-compassion also reduced the anxiety, depression, rumination and fear of failure. Self-compassion involves the desire to attain mental health and well-being, and relates to the magnitude of personal initiatives to make a change in his life. Thus, self-compassion may buffer people against negative events and engender positive self-feelings when life goes badly.

Faced with the re-occurring state of crisis in Indonesia – whether due to natural disasters or political or economical problems – the capacity for self-compassion becomes more important for adolescents in order to achieve the feeling of happiness and well-being. Therefore the researcher is interested to explore the degree of self-compassion in adolescent people in Bandung.

Self-Compassion

Self-compassion is the ability to be kind hearted to oneself, without this ability of individuals may not be ready to be caring for others. In western culture, compassion has been understood primarily in terms of concern for the suffering of others (Goetz, Keltner, & Simon-Thomas, 2010). As defined by Webster's Online Dictionary, compassion is "the quality of human understanding the suffering of others and wanting to do something about it." In the Buddhist tradition, however it is considered equally important with offering compassion to yourself (Brach, 2003; Feldman, 2005; Salzberg, 2005). Confer the compassion to others but not to themselves, looks like drawing a separator between the self and others, and deny the major connections of the individual (Hahn, 1997).

From the Buddhist psychological perspective, building the capacity to endure sufferings with compassionate awareness will facilitate the emergence of the ability to express love to a target which is, self, others, and organisms (Hoffman, Grossman & Hinton, 2011; Salzberg, 1997). There were also some evidences that the efforts to increase self-compassion stimulate some parts of the brain that generally associated with compassion. Using MRI technology, Longe et al. (2009), found that instructing individuals to become more self-compassion-related with neuronal activity that is similar to what happens when feelings of empathy toward others were raised.

Self-compassion involves the recognition that human condition is fragile and imperfect. Self-compassion is being kind hearted and caring to oneself when we experience suffering, failure, and imperfection. Self-compassion consists of three main components, namely self-kindness, a sense of common humanity, and mindfulness (Neff, 2003). These three components are interrelated and combine with one another so that if one component is high then the other is also high and produces a high self-compassion.

Self-compassion is very different from self-pity. When individuals feel self-pity (self-pity), individuals become immersed in their problems and forget that other people are also having problems. Individual turns into neglecting relationships with others and acting that only individual who are suffering. To be compassionate for the self doesn't mean be self-centered and exaggerating distress. Self-compassion provides a sense of security and protection that individuals want and allow themselves to see the experience of relationships with other people without any separation.

Self-compassion is different from self-esteem. A research presented that self-compassion is quite related to the level of self-esteem (Leary et al., 2007; Neff, 2003; Neff, Kirkpatrick, & Rude, 2007), because self-compassion and self-esteem are positive attitudes toward the self. However, self-compassion gives greater happiness, optimism, less depression, and anxiety, when self-esteem had been controlled (Neff, 2003). High self-esteem are associated with downward social comparison with others, which means people put others down and gasped to self as a way to feel better.

Self-kindness is the individual's ability to understand and to accept whatsoever and to give tenderness, devoid of judging and hurting one self, where the majority of people see it as something normal. Individuals recognize about their problems and shortcomings, without the absence of the self-assessment, so that the individuals can do something that are needed to help them. Self-kindness means people stop judging themselves continuously and underestimate internal. It requires individuals' understanding of their weaknesses and failures and isn't about judging the self (self-judgment). Self-judgment means evaluating, adjudicating, and criticizing one self. With self-kindness, individuals can relieve and calm down, and also put themselves at peace by offering warmth, tenderness, and sympathy to themselves.

Common humanity is the awareness that individuals perceive difficulties, failures, and challenges are part of human life. It is something that can be experienced by everyone, not just be experienced by one self. The second fundamental component of self-compassion is the recognition that beings get used to be together with others.

Common humanity associates individual weaknesses with the human condition in general, so the limitations are viewed as a whole and not just the subjective view that the limitations are only belonged to the individual. Similarly with the hard times, the tussles, and the failures in life are experienced by all humans, so we can realize that is not only us have the experience of painfulness and failures in life.

One of the biggest problems with individual's evaluation is likely to make one self feels isolated (self-isolation). Self-isolation happens when individual focus on their deficiencies. They could not see anything else and feel that they are so feeble and worthless. When individuals see something improbable in themselves, they will feel that somebody else is more perfect than them. With self-compassion, individuals admit that the challenges and failures are gone through all people, so they will not feel isolated when they get sufferings.

Mindfulness means see clearly, accept and face reality without judgment of what is going on in a situation. Individuals need to see things as they are, no more, no less to respond to the situation with compassion (Neff, 2011).

According to Brown and Ryan (2003), mindfulness is to be aware of the experiences that happened with a clear and balanced manner and also does not ignore or reflect those aspects that are not favored either inside or in life. Mindfulness refers to the action of seeing the experiences with an objective perspective.

Mindfulness is the opposite of over identification. Over identification is the extreme reaction or overreaction of individuals when they are facing a problem. Over identification occurs when individuals observe fear and anxiety. Individuals try to save themselves from a lot of unwarranted pains. With mindfulness, people will back to the present and provide a balanced type of consciousness that form the basis of self-compassion.

Method

Participant

Respondents in this study amounted to 194 teenagers, who are students at two universities in Bandung. From 194 respondents, 152 (78.4%) are female respondents and 42 (21.6%) are male respondents. Age of the respondents was ranged from 17 years to 19 years.

Measurement

Self compassion scale. Self-compassion was measured by using Self-compassion Scale (Neff, 2003b). Indonesian adaptation of this scale had been done by Missiliana (2012). The reliability score of this scale is 0.82. The range validity score from the items is 0.32-0.61. Self-compassion Scale is a 26-item self-report measurement and consists of six sub-scales; self-kindness, self-judgment, common humanity, isolation, mindfulness, and over-identification. Each item was rated on a 5-point Likert scale (1=*almost never* to 5=*almost always*).

Procedure

Permission for participation of students was obtained from related chief departments and students voluntarily participated in research. Completion of the scales was anonymous and there was a guarantee of confidentiality. The scales were administered to the students in groups in the classrooms. The measures were counterbalanced in administration. Prior to administration of scales, all participants were informed about purposes of the study. The analyses (frequency and cross tabulations) were carried out via SPSS 19.

Results

Table 1, Degrees of Self-Compassion

Degrees of Self Compassion	N	%
Low	56	28,9%
High	138	71,1%
Total	194	100%

The above table shows that out of 194 respondents, the majority (71.1%) had self-compassion in a high degree.

Table 2. Cross tabulation between Self-Compassion and it's Components

Components	Self-Compassion	Self Compassion				Total	
		Low		High			
Self Kindness	Low	32	16,5%	23	11,9%	55	28,4%
	High	24	12,4%	115	59,3%	139	71,6%
Common Humanity	Low	48	24,7%	68	35,1%	116	59,8%
	High	8	4,1%	70	36,1%	78	40,2%
Mindfulness	Low	39	20,1%	31	16,0%	70	36,1%
	High	17	8,8%	107	55,2%	124	63,9%

The above table shows that from the 55 respondents who have a low self-kindness, 32 respondents (16.5%) have a low degree of self-compassion, and 23 respondents (11.9%) have a high degree of self-compassion. From 139 respondents who have a high degree of self-kindness, 24 respondents (12.4%) have a low degree of self-compassion and 115 (59.3%) of respondents, their degree of self-compassion is high.

The table also shows from the 116 respondents who have a low degree of common humanity, 48 respondents (24.7%) have a low degree of self-compassion, and 68 (35.1%), their degree of self-compassion is high. While from the 78 respondents who have a high degree of common humanity, 8 respondents (4.1%), the degree of self-compassion is low, and 70 respondents (36.1%) have a high degree of self-compassion.

Mindfulness components showed that from the 70 respondents who have a low degree of mindfulness, 39 respondents (20.1%) have self-compassion in low-grade and 31 respondents (16.0%), the degree of self-compassion is high. While 124 respondents with a high degree of mindfulness, 17 respondents (7.7%) have a low degree of self-compassion, and 107 (55.2%) respondents, the self-compassion is in a high degree.

Table 3, Cross Tabulation between Self-Compassion with Negative Components

Negative Components	Self-Compassion	Self Compassion				Total	
		Low		High			
Self-judgement	Low	8	4.1%	87	44,8%	95	49,0%
	High	48	24,7%	51	26,3%	99	51,0%
Isolation	Low	27	13,9%	122	62,9%	149	76,8%
	High	29	14,9%	16	8,2%	45	23,2%

Over Identification	Low	25	12.9%	122	62.9%	147	75.8%
	High	31	16.0%	16	8.2%	47	24.2%

The above table shows that of the 95 respondents who the degree of self-judgment is low, 8 (4.1%) of respondents have a low degree of self-compassion and 87 (44.8%) respondents, the degree of self-compassion is high. While from the 99 respondents who have a high degree of self-judgment, 48 (24.7%) respondents, the degree of self-compassion is low and 51 (26.3%) respondents have a high degree of self-compassion.

The data of isolation (the negative component of common humanity), from 149 respondents that have a low degree of isolation, 27 (13.9%) respondents, the degree of self-compassion is low and 122 (62.9%) of respondents have a high degree of self-compassion. From the 45 respondents who their degree of isolation is high, 29 (14.9%) respondents have a low degree of self-compassion and 16 (8.2%) of respondents have a high degree of self-compassion.

The above table also shows from the 147 respondents with a low degree of over-identification, 25 (12.9%) respondents have a low degree of self-compassion and 122 (62.9%) respondents with a high degree of self-compassion. While from 47 respondents with a high degree of over identification, 31 (16.0%) respondents have a low degree of self-compassion and 16 (8.2%) respondents have a high degree of self-compassion.

Discussions

The results showed that most respondents (71.1%) have a high degree of self-compassion. This means that most respondents have the ability to be compassionate to themselves. In addition, most of the teenagers in Bandung have the ability to give thought to themselves and care for themselves when faced with failure and perfection. This result is related to the age of the respondents who are in late stage of adolescent. Their age range is 16-19 years.

Self-compassion may also be an important aspect of maturity. Research has shown that self-compassion has a small but significant association with age [Neff & Vonk, 2009]. Perhaps more importantly, self-compassion is strongly associated with emotional intelligence and wisdom [Neff, 2009]. This should have happened in the late stage of adolescent. Emotional development in adolescents is signed with establishing a realistic and coherent sense of identity in the context of relating to others and learning to cope with stress and manage emotions (Santrock, 2001). Sense of identity includes two concepts. First is self-concept: the set of beliefs one has about oneself. Second is self-esteem, which involves evaluating how one feels about one's self-concept. This is consistent with the study that showed that self-compassion has a significant correlation with the level of self-esteem (Leary et al., 2007; Neff, 2003;

Neff, Kirkpatrick, & Rude, 2007), as one of hope given that both a positive attitude toward oneself.

If we see from the table 2 that in general, respondents (71.6%) have a high degree of self-kindness. For mindfulness component, most of the respondents (63.9%) had a high degree of mindfulness. While from the data of common humanity, the majority of respondents (59.8%) had a low degree of common humanity. These results are not consistent with Neff theory (2003b) that the three components of self-compassion are interrelated and combine with one another so that if one component is high, the others are also high. The combination produces a high self-compassion. According to Neff (2003a), self-compassion involves "being open to and moved by one's own suffering, experiencing feelings of caring and kindness toward oneself, taking an understanding, nonjudgmental attitude toward one's inadequacies and failures, and recognizing that one's experience is part of the common human experience".

The cross tabulation calculation between self-compassion with its components showed that most respondents who have a high degree of self-kindness (59.3%), they also have high degree of self-compassion. While the majority of respondents who have a low degree of self-kindness (16.5%), the degree of their self-compassion is low. Results of this study showed that teenagers in Bandung who are able to accept events and issues in her life, are also able to provide softness, and will not judge themselves, will also have the ability to care for themselves. This is disclosed with Neff theory (2003). Presumably, a person high in self-compassion sees his or her problems, weaknesses, and shortcomings accurately, yet reacts with kindness and compassion rather than with self-criticism and harshness. Thus, self-compassion may buffer people against negative events and engender positive self-feelings when life goes badly.

Mindfulness component also showed an association with self-compassion in this study. Most respondents who the degree of mindfulness is high, their degree of self-compassion is also high (55.2%). While most of the respondent who have a low degree of mindfulness, their degree of self-compassion is also low (20.1%). Results of this study showed that teenagers who are able to see everything for what it is and realize their experience in understandable way, they will also able to be compassionate on themselves. It also happens vice versa. This is consistent with Neff theory (2003) about self-compassion. The results are also consistent with the research from Birnie, Speca, & Carlson (2009). They studied the effects of Mindfulness-Based Stress Reduction (MBSR). The results showed the impact of MBSR on self-compassion and empathy.

In this study, the component that didn't show a significant relation with self-compassion is a common humanity. The result showed that the majority of respondents who have a high degree of common humanity, their degree of self-compassion is also high (36.1%). Most of the subjects who have a low degree of common humanity, they also have a high degree of self-compassion (35.1%). This

result shows that both teenagers who are able and are not able to see the difficulties and challenges as well as a failure or something that everyone experienced, they have the competency to deal with the failure to care for themselves. The results are inconsistent with the theory Neff (2003), which declared self-compassion focuses on the individual demonstrating the degree of self-kindness, common humanity, and mindfulness.

When it compared with the results of cross tabulation between self-compassion with negative components, the result is most of the respondents who have a low degree of isolation, they have high degree of self-compassion (62.9%), while respondents with a high degree of isolation have a low degree of self-compassion (14.9%). That means adolescents who focus on deficiencies and felt worthless, will have a tendency not to be able to understand and care for themselves. The results also showed that most of the respondents who have a low degree of over identification, their degree of self-compassion is high (62.9%). Most respondents with a high degree of over-identification, they have a low degree of self-compassion (16.0%). That indicates that young people who give more attention to fear and anxiety, will not able to be kind and mind for themselves. All of these are happened because they care too much about their fear and anxiety than themselves.

The research result of self-judgment as a negative component of self-kindness, indicated that most respondents have a higher degree of self-judgment (51.0%). In table 3 showed that there was not a significant difference of percentage from a high and low degree of self-judgment. This result showed that in general, adolescents in Bandung, more prone to judge and less sympathy for themselves.

The results of cross tabulation between self-judgment and self-compassion showed that from most respondents who have a low degree self-judgment, their degree of self-compassion is high (44.8%). For respondents who have a high degree of self-judgment, there is no a significant difference between the percentage of low self-compassion (24.7%) and high self-compassion (26.3%). This result doesn't correspond to the theory of Neff (2003), which states there should be a negative correlation between self-judgment and self-compassion.

In this study, there were two components that did not show a correspondence result with Neff's theory, they were common humanity and self-judgment. Both of these maybe can be explained by the factors of self-compassion. Internal factors are personality and gender. External factors are maternal support, harmonious family functioning, and secure attachment. A recent study [Neff & McGehee, in press] found that maternal support, harmonious family functioning and secure attachment all predicted higher levels of self-compassion among teens. Similarly, developmental factors such as adolescent egocentrism – specifically the personal fable – negatively predicted self-compassion. The study also showed that self-compassion partially mediated the link between family factors, adolescent egocentrism and well-being (measured in terms of depression, anxiety and connectedness). This suggests that one

way family and cognitive-developmental factors influence adolescent functioning is by fostering self-compassionate versus self-critical inner dialogues.

One of the factors been thought to be related to self-compassion is internalized culture. In this study, respondents were teenagers in Bandung, which is took account of collectivist cultures. In a previous study by Heine, Lehman, Markus, & Kitayama (1999, in Neff, 2011) implied that people in collectivist cultures will have a high degree of self-compassion than those who live in the individualism culture. This corresponded to this research. Adolescents in Bandung who internalized a collectivism culture, have a high degree of self-compassion.

In this study, the factors that associated with self-compassion have not obtained. That's why, the researcher suggests the next study should examine the relationship between self-compassion and the factors, in order to obtain richer datas and be able to answer the differences in these results with the results of previous studies.

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