

Self Compassion And Body Dissatisfaction Among Adolescent Boys

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ABSTRACT

During adolescence, individuals not only experience physical maturity, but also changes in the body. Changes in the body of adolescents often raise their own problems, including concerns about body condition. These changes lead adolescents to body dissatisfaction not only in female adolescents but also male adolescents. This study aims to determine the relationship between self-compassion and body dissatisfaction in adolescent boys in Yogyakarta. The hypothesis proposed is that there is a negative relationship between self-compassion and body dissatisfaction in adolescent boys in Yogyakarta. The subjects in this study amounted to 150 people with the characteristics of male adolescents aged 15-21 years in Yogyakarta. The subject collection technique used purposive sampling with data collected through self-compassion and body dissatisfaction scales. Data were analyzed using product moment correlation. Based on the results of the analysis, the correlation value (r_{xy}) = -0.500 with $p = 0.000$ was obtained. So that the hypothesis proposed in the study is accepted. This means that there is a significant negative relationship between self-compassion and body dissatisfaction in adolescent boys in Yogyakarta. This shows that the higher the self-compassion in adolescent boys, the lower the body dissatisfaction. The coefficient of determination (R^2) shows that the self-compassion variable provides an effective contribution of 0.250 or 25% to body dissatisfaction and the remaining 75% is influenced by other factors not examined in this study.

Keywords: self-compassion, body dissatisfaction, adolescent boys

Introduction

Early adolescence (12-15 years), middle adolescence (15-18 years), and late adolescence (18-21 years) these age limits are the division of adolescence according to (Monks, Knoers, & Haditono, 2014). During this period, each individual will experience physical maturity or what is often called puberty. Physical maturity is usually marked by wet dreams in men and menstruation in women (Kumalasari,

2017). In adolescence, individuals not only experience physical maturity, but also changes in the body. During adolescence, individuals are preoccupied with body images that are in accordance with local culture (Mueller, 2007). Attention to the body also occurs in adolescence. During this period of development, changes in the adolescent body often lead to its own problems, including concerns about body condition. These changes lead adolescents to body dissatisfaction. Body dissatisfaction is often known as body dissatisfaction (Purnawan, 2022).

Puspita & Ambarini (2017) stated that body dissatisfaction is experienced more by adolescent girls than adolescent boys. This is because men tend to be ignorant, do not care about their appearance and do not appear to have good-looking standards (Olfah, et al., 2023). However, according to Ganeswari & Wilani (2019) adolescent boys also think about how their body looks in front of many people and experience anxiety about appearance. Research conducted by Pelegrini & Petroski (2010) states that 72.6% of adolescent boys also feel dissatisfaction with their body image. Then according to Quittkat, et al., (2019) stated that 69% of men were dissatisfied with their weight. Someone who experiences body dissatisfaction will have negative feelings about their body (Prima & Sari, 2013). According to Cash & Pruzinsky (2002) also said that the gap between the ideal body and the body owned can lead to negative judgments regarding body shape, weight, and size. This causes individuals to feel dissatisfied with their bodies. Negative feelings make a person always feel dissatisfied with their body shape, so that individuals become insecure and unhappy with their appearance.

The negative impact of body dissatisfaction affects a person's mental health (hellosehat.com, 2017). Persistent body dissatisfaction will lead to depression, anxiety, low self-esteem, and reduced quality of life (Cash & Pruzinsky, 2002). According to Grogan (2016), factors that influence body dissatisfaction are culture, social media, age, social class, interpersonal relationships, and personality. Personality is a factor that is very influential on body dissatisfaction. This personality affects the way individuals view their body image. One of the factors that can affect a person's body image is self-compassion (Erismadewi, et al., 2022). Neff & Vonk (2009) state that self-compassion in each individual can be a protective factor in reducing body dissatisfaction (Andini, 2020). Self-compassion is defined as providing understanding and kindness to oneself when experiencing failure or making mistakes, but not judging and not criticizing oneself excessively for the imperfections and weaknesses experienced (Neff, 2011). Self-compassion is considered effective in helping individuals to be able to love more, not judge, and blame themselves when individuals have shortcomings (Anggraheni & Rahmandani,

2019). Lusiana & Saputra (2024) found that the higher the self-compassion ability, the lower the level of body dissatisfaction.

Based on the description above, the problem raised in this study "Is there a relationship between self-compassion and body dissatisfaction in adolescent boys in Yogyakarta".

Methods

This research method is quantitative correlational. The research sampling technique used purposive sampling, which means taking sample members specifically (Hardani, et al., 2020). This technique is used so that researchers get a sample that matches the desired subject characteristics. The characteristics of the research sample are adolescent boys aged 15-21 years who live in Yogyakarta. The data collection technique uses a scale. In this study, the scale used is divided into two, namely the Body Dissatisfaction Scale based on aspects of the theory belonging to (Rosen, et al., 1995) modified from Anjarwati (2019), namely negative assessment of body shape, feeling embarrassed about body shape when in a social environment, body checking, body camouflage, and avoiding physical contact and social activities with others. The Self-Compassion Scale modified from Harahap based on aspects of self-compassion by Neff (2011) namely self-kindness, common humanity, and mindfulness.

This scale is compiled using a Likert scale which has 4 answer options. The measurement scale begins with a score range of 1-4 and the answer options are Very Suitable (SS = 4), Suitable (S = 3), Not Suitable (TS = 2), and Very Not Suitable (STD = 1) for the favorable statement score. Meanwhile, unfavorable statements are Very Suitable (SS = 1), Suitable (S = 2), Not Suitable (TS = 3), and Very Not Suitable (STD = 4).

The data analysis used is product moment correlation from Karl Pearson used to test the hypothesis in this study. Product moment correlation is used when both variables are interval and in using this formula has the assumption that the relationship between variables that occurs is linear (Azwar, 2018). Researchers use this analysis technique because product moment correlation analysis is suitable for testing hypotheses regarding the relationship between 2 variables, which in this study is testing the relationship between self-compassion variables and body dissatisfaction variables. The Body dissatisfaction scale consists of 24 items with a differentiation index moving from a range of 0.341-0.680 and an alpha reliability coefficient of 0.884. The self-compassion scale consists of 18 items with a difference index moving from a range of 0.308-0.719 and an alpha reliability coefficient of 0.890.

Results

Table 1. The description of the research data shows that the self-compassion variable has a minimum hypothetical score of 18 and a maximum score of 72, with a hypothetical mean of 45 and a standard deviation of 9. Empirical self-compassion variables obtained a minimum score of 28 and a maximum score of 72. With an empirical mean of 50.96 and a standard deviation of 7.607. Then the body dissatisfaction variable has a hypothetical score of 24 and a maximum score of 60. With a hypothetical mean of 60 and a standard deviation of 12. Empirical data body dissatisfaction variables obtained a minimum score of 27 and a maximum score of 78. With an empirical mean of 55.39 and a standard deviation of 8.004.

Table 1. Description of research data

Variables	Hypothetical Data				Empirical Data			
	Mean	Score		SD	Mean	Score		SD
		Min	Max			Min	Max	
Self Compassion	45	18	72	9	50,96	28	72	7,607
Body Dissatisfaction	60	24	96	12	55,39	27	78	8,004

Data categorization aims to place individuals into groups that are tiered according to a link based on the attributes being measured, categorization on self-compassion and body dissatisfaction is divided into 3 groups, namely low, medium, and high (Azwar, 2019). Based on the results of the categorization of the self-compassion scale, Table 2 shows that there are 49.33% (74 subjects) in the high category, 46% (69 subjects) in the medium category, and 4.67% (7 subjects) in the low category. So it can be concluded that most of the subjects in this study are in the high self-compassion category.

Table 2. Self Compassion Scale Categorization

Category	Guidelines	Score	N	Percentage
High	$(\mu + 0.75\sigma) \leq X$	$52 \leq X$	74	49,33%
Medium	$(\mu - 0.75\sigma) \leq X < (\mu + 0.75\sigma)$	$38 \leq X < 52$	69	46%
Low	$X < (\mu - 0.75\sigma)$	$X < 38$	7	4,67%
		Total	150	100%

Table 3 shows the results of the categorization of the body dissatisfaction scale that there are 4.6% (7 subjects) who are in the high category, 71.33% (107 subjects) are

in the moderate category, and as many as 24% (36 subjects) are in the low category. So it can be concluded in this study that most subjects have body dissatisfaction in the moderate category.

Table 3. Body Dissatisfaction Scale Categorization

Category	Guidelines	Score	N	%
High	$(\mu + 0.75\sigma) \leq X$	$69 \leq X$	7	4,67%
Medium	$(\mu - 0.75\sigma) \leq X < (\mu + 0.75\sigma)$	$38 \leq X < 69$	10	71,33%
Low	$X < (\mu - 0.75\sigma)$	$X < 38$	7	24,%
Total			15	100%
			0	

Prerequisite assumption test, consisting of normality test and linearity test. The normality test used in this study is the one sample Kolomogorov-smirnov (KS-Z) model analysis. The guidelines used are, if $p > 0.050$ then the data distribution is normally distributed. However, if $p < 0.050$ then the data distribution is not normally distributed (Safitri, 2019). Based on the results of the normality test, the self-compassion variable obtained $KS-Z = 0.065$ with $p = 0.200$ ($p > 0.050$) and the body dissatisfaction variable $KS-Z = 0.056$ with $p = 0.200$ ($p > 0.050$). The data shows normal distribution. Linearity test is conducted to determine whether the relationship between the two variables shows a linear relationship. The rule used is if the significance value of $p < 0.050$ then the two variables are declared to have a linear relationship. However, if the significance value of $p > 0.050$ then the two variables are declared not to have a linear relationship. Based on the results of the linearity test, the results obtained $F = 51.388$ and $p = 0.000$, which means that the relationship between the two variables has a linear relationship.

Table 4. Hypothesis Test Results

		Body disstaisfaction	Self Compassion
Body dissatisfaction	Person	1	-.500
	Correlation		
	Sig. (2-tailed)		.000
	N	150	150
Self Compassion	Person	-.500	1
	Correlation		
	Sig. (2-tailed)	.000	
	N	150	150

Table 4 shows hypothesis testing using product moment correlation. The correlation test guideline is, if $p < 0.050$ means there is a correlation between variables, but if $p > 0.050$ means there is no correlation between variables. Based on the results of product moment analysis, the correlation coefficient (r_{xy}) = -0.500 and $p = 0.000$ ($p < 0.050$), which means that there is a relationship between self-compassion and body dissatisfaction. This shows that the hypothesis in this study is accepted, namely there is a negative relationship between self-compassion and body dissatisfaction in adolescent boys in Yogyakarta. The higher the self-compassion in adolescent boys, the lower the body dissatisfaction. Vice versa, the lower the self-compassion in adolescent boys, the higher the body dissatisfaction. The coefficient of determination (R^2) obtained in this study is 0.250. This shows that the self-compassion variable provides an effective contribution of 25.0% to the body dissatisfaction variable and the remaining 75% is influenced by other factors.

Discussion

The results showed a significant negative relationship between self-compassion and body dissatisfaction with a correlation coefficient (r_{xy}) = -0.500 and $p = 0.000$ ($p < 0.050$). Which means the higher the self-compassion in adolescent boys, the lower the body dissatisfaction. Vice versa, the lower the self-compassion in adolescent boys, the higher the body dissatisfaction. Thus the hypothesis in this study is accepted. The results of this study support Purnawan's research (2022) which also shows a negative relationship between self-compassion and body dissatisfaction with a correlation coefficient of -0.364 and a significance of 0.000, $p < 0.05$. Adolescents who have high self-compassion have a low level of body dissatisfaction. Conversely, the lower the level of self-compassion, the higher the level of body dissatisfaction among adolescents. These results are also supported by the results of Afifah's research (2024) data showing that the correlation coefficient is -0.379 at the level of 0.000. This study concluded that there is a negative relationship between self-compassion and body dissatisfaction in adolescent boys.

In general, the results of this study indicate that 107 (71.33%) adolescent boys have a level of body dissatisfaction in the moderate category. This is because male adolescents are not satisfied with their body shape, such as body size, muscles, and face so that the subject feels that they do not have the ideal body as desired. However, some of them showed that they were satisfied with their body shape, be it the face, muscle shape, nose and other body parts, while self-compassion owned by male adolescents was on average in the high category as many as 74 subjects (49.33%). Self-compassion in adolescent boys is in the high category because some subjects have an open attitude to suffering, failure, or shortcomings that exist in the subject

without comparing with others, understanding without judgment, having an attitude of care and compassion for themselves.

Conclusion

The results showed a significant negative relationship between self-compassion and body dissatisfaction. This means that the higher the self-compassion in adolescent boys, the lower the body dissatisfaction. Vice versa, the lower the self-compassion in adolescent boys, the higher the body dissatisfaction. Thus the hypothesis in this study is accepted.

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