

The impact of self compassion and emotion regulation on social anxiety in college students

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Submitted : 31-01-2024, Revised : 10-04-2024, Accepted : 25-05-2024

Abstract: Social anxiety is a common human experience, including among students. Social anxiety is a form of anxiety and fear of the judgment or views of other people. This research aims to reveal the influence of self-compassion and emotional regulation on social anxiety. This research uses quantitative research using survey and correlational designs. The subjects of this research were 159 IAIN Kerinci students. This research data was expressed using the Measuring the Scale and Scope of Social Anxiety among Students instrument, producing a Cronbach's Alpha of 0.939. The Short Form of the Self-Compassion Scale produced a Cronbach's Alpha of 0.779, The Difficulties in Emotion Regulation Scale: The DERS-16 produced a Cronbach's Alpha of 0.923, then the research results were processed using descriptive statistical analysis and hypothesis testing using simple and multiple regression techniques. The results of the analysis of the influence of self-compassion on social anxiety show a value of $t = -5.447$ with a significance value of 0.000. The second hypothesis which tested the influence of emotional regulation on social anxiety obtained a value of $t = -9.373$ with a significance value of 0.000, then testing using multiple regression obtained $t = -.904$ at a significance level of 0.367. Then $t\text{-count} = -7.050$ at a significance level of 0.000, then H_0 is rejected, meaning the regression coefficient is significant. The research results showed that self-compassion and emotional regulation influence social anxiety. It is hoped that future researchers will reveal the influence of self-compassion and emotional regulation on social anxiety among students and society for a wider distribution.

Keywords: Emotional Regulation; Social Anxiety; Self-compassion

Introduction

Humans cannot be avoided from social interaction because they are social creatures. Without this interaction humans cannot survive. Humans need interaction with other people to recognize and understand each other's needs, as well as to form interaction groups. Apart from that, humans also have the initiative to maintain the interaction relationships they have built well (Angraini et al., 2021). The ability to interact socially is defined as a person's ability to form social bonds through interactions with other people in their environment (Pasaribu, S, 2016). Our psychological and physiological well-being relies heavily on our interactions with peers throughout life. Humans then have a wide range of social abilities, allowing us to quickly, automatically, and efficiently detect the presence of other humans in our environment. However, in reality, several social problems arise among students, one of which is social anxiety (Richard et al., 2013)

Social anxiety is a form of anxiety and fear of the judgment or views of other people related to standards or expectations based on social situations (Hofmann et al., 2010). People who experience social anxiety disorder tend to show negative feelings when interacting and communicating with other people (Azka et al., 2018; Yandri et al., 2023). Social anxiety is defined as a cognitive and affective experience based on perceptions and evaluations made by other people (Murray B stein & J Stein, 2008). The cognitive model of social anxiety proposed by Clark and Wells has significant empirical evidence and has been shown to provide informative evidence about social anxiety disorder. According to this model, social anxiety is maintained by excessively high standards for social performance e.g., "I can't let anyone see me anxious", a tendency to assume that others see themselves as inadequate, e.g., boring, weird, unattractive, and so on, and the tendency to assume that other people's beliefs about themselves are true (Purdon et al., 2001a). Behavioral inhibition is one of the early indicators of social

anxiety, which later in life can progress to a specific personality structure (Cremers & Roelofs, 2016).

For students, anxiety can be caused by an increasingly high workload, having to immediately complete a final assignment, or anxiety when having to speak in public to present their assignments or when facing exams and so on (Amira et al., 2021). Social anxiety is the desire to build a positive impression of oneself through the views of other people (Sari, C, 2022).. The phenomenon of social anxiety can occur easily, because every individual tends to experience anxiety problems. However, the level of social anxiety can vary between people (Tajuddin, A & Haenidar, H, 2019). Social anxiety is a common human experience characterized by a deep fear of other people's opinions in social situations. When this condition reaches a serious situation, it is usually called social anxiety disorder or social phobia (Morrison & Heimberg, 2013). Individuals with social phobia often have erroneous beliefs about the extent to which others experience symptoms of social anxiety and the way others evaluate people who appear anxious (Purdon et al., 2001b). The experience of anxiety in students with social anxiety disorder in social situations can be classified into four major themes: (1) distorted self-awareness, (2) fear of negative reactions from others, (3) negative psychosomatic experiences, and (4) distorted desires. strong enough to seek treatment (Luan et al., 2022).

In fact, not all students are able to communicate fluently with other people. This obstacle occurs both in lectures on campus and in the off-campus environment. Barriers experienced by individuals in communicating can be related to their anxiety (Pujiati et al., 2018). During their education, students often experience obstacles which can have an impact on their low academic achievement. One of the obstacles they often face is anxiety (Kusumastuti, 2020). Anxiety is a painful and unpleasant feeling. A person who experiences anxiety can disrupt personal stability and psychological well-being, such as feeling tense, restless, restless, afraid, nervous, sweating, and so on. Students who experience anxiety tend to withdraw from social interactions, become irritable, and have difficulty sleeping. These things can disrupt student activities and cause a decrease in academic achievement. Apart from that, negative impacts can also be felt in their social environment (Aninda Cahya Savitri & Luh Indah Desira Swandi, 2023).

Research findings indicate that most individuals experience anxiety symptoms in social situations from time to time (Purdon et al., 2001c). Furthermore, other studies show that the prevalence of social anxiety disorder reaches more than 80%. The intensity of social phobia was mild in 20.2%, moderate in 41.9%, and severe in 28.3% of participants (Ahmad et al., 2017). Furthermore, a study of 293 respondents showed the relevance of SAD was 32.8% (Reta et al., 2020). Furthermore, a survey conducted by Hakami et al revealed that around 47.2% of students had mild symptoms, 42.3% had moderate symptoms, and 10.5% had severe to very severe SAD symptoms (Hakami et al., 2017). A more significant finding was revealed by Suryaningrum which showed that 76.9% of respondents experienced social anxiety (Suryaningrum, 2021). Social Anxiety is the most common anxiety disorder, starting at the age of 11 years in approximately 50% and by the age of 20 years in approximately 80% of individuals (Murray B stein & J Stein, 2008).

Several previous studies revealed that social anxiety is influenced by several aspects, one of which is self-compassion (Muris et al., 2016). Self-compassion is a form of affection and an attitude of concern and kindness towards oneself where individuals can accept their own shortcomings and difficulties in life (Biber & Ellis, 2019). Self-compassion refers to the way we treat ourselves when faced with perceived failure, inadequacy, or personal suffering (Neff, 2023). Individuals who have self-compassion offer warmth and understanding to themselves without being offensive or judgmental by criticizing themselves in the face of failure. They

realize that making mistakes and experiencing difficulties in life are part of the common human experience, not just "me" (Cândea & Szentágotai-Tătar, 2018). There are several components in self-compassion, including: (1) self-kindness: refers to understanding and accepting oneself as it is without regard to criticism and judgment from other people, (2) common humanity: refers to the awareness that one is not alone in suffering or failure because many people who experience similar experiences, (3) mindfulness: refers to attentive awareness of current experiences without fixating on future worries or regrets about the past (Scoglio et al., 2018). Individuals need to devote attention and affection to themselves by realizing the importance of taking care of themselves and giving the best for themselves. Apart from that, it is important for them to accept and forgive themselves when they face failure (Nabila, 2020).. Several research findings show that individuals who have higher levels of self-compassion tend to experience lower levels of social anxiety.

Apart from self-compassion, emotional regulation is also predicted to influence social anxiety (Werner et al., 2011). Emotions are responses to stimuli that trigger physiological changes, accompanied by strong feelings and often have the potential to erupt. Such reactions can occur in response to external or internal stimuli (Harmalis et al., 2023). Emotions are experiences that are subjective and experienced by a person, based on their point of view, closely related to feelings, behavior, mood, decision making, temperament and character (Faiz et al., 2019; Rahayu, 2013). Emotion regulation is a person's ability to identify, understand, manage and express emotions in an appropriate way to achieve emotional balance (Astuti et al., 2019). Someone who can manage emotions well tends to be able to assess and understand emotions objectively, and express them (Mikulincer & Shaver, 2019; Sari et al., 2020). Socially, the emergence of emotions often occurs through concrete support, such as interacting and forming interpersonal relationships. In terms of behavior, emotions are regulated by responding to certain actions, for example shouting, screaming, crying and so on (Husnianita & Jannah, 2021). Emotion regulation is related to self-compassion because to overcome an individual's negative emotions, at least, requires understanding and self-awareness when facing a problem. Having a self-compassion mindset can be a starting point for overcoming the negative emotions expressed (Hasmarlin & Hirmaningsih, 2019). People who cannot control their negative emotions will tend to blame themselves or the environment around them (Biber & Ellis, 2019). The research results show that a person's ability to manage and regulate their emotions can play an important role in reducing levels of social anxiety. Individuals who are effective in managing emotions tend to be better able to deal with social situations without being too anxious or worried.

This research aims to partially analyze the influence of self-compassion and emotional regulation on social anxiety. Apart from that, researchers also attempted to test the influence of these independent variables on social anxiety simultaneously. Although several previous studies have tried to analyze the relationship between these variables, in the context of the higher education environment in Indonesia this research is still very limited. This study can also provide great benefits for efforts to prevent and overcome social anxiety problems. The findings from this research can be a basis for college counselors in developing prevention and intervention programs for social anxiety problems by considering aspects of self-compassion and emotional regulation.

Method

In this research, researchers used a correlational research design. To determine the influence of self-compassion and emotional regulation on social anxiety. The sample collection technique used was convenience sampling and involved 159 IAIN Kerinci students, who

participated in filling out a scale distributed online. The first page was a request for willingness to be a respondent, followed by filling in identity, demographic variables and questionnaire statements. There is a table of respondent characteristics that can be observed in table 1.

Table 1. Characteristics of Research Respondents

Characteristics	Category	Frequency	Percentage
Gender	Male	48	30,4%
	Female	110	69,6%
Force/semester	2023/I	17	10,8%
	2022/III	100	63,3%
	2021/V	18	11,4%
	2020/VII	19	12%
	2019/IX	2	1,3%
	2018/XI	2	1,3%
IPK	>3,50	135	84,90%
	<3,50	22	14%

The table above illustrates that the majority of respondents who participated in the survey were female, namely 110 people or 69.6%, followed by 48 men or 30.4%. Furthermore, based on class and semester, the most people who took part in the survey were the class of 2022 semester 3 with 100 people or 63.3%, followed by the class of 2020 semester 7 with 19 people or 12%, class of 2021 semester 5 with 18 people or 11.4%, class 2023 semester 1 as many as 17 people or 10.8%, class of 2019 semester 9 there are 2 people or 1.3%, and finally the class of 2018 semester 11 as many as 2 people or 1.3%. Then based on the GPA, the maximum number was above 3.50, namely 135 people or 84.90% and below 3.50 there were 22 people or 14%.

The social anxiety variable was measured using the Measuring the Scale and Scope of Social Anxiety among Students instrument which was adapted from the social anxiety research scale by Ejaz et al (2020). This Social Anxiety Scale follows standard procedures, which can help in selecting adult populations in higher education institutions to identify the presence of social anxiety. This scale is used to create culturally oriented measurement instruments for proper supervision of student populations. This scale consists of 22 items using a 4-choice Likert scale (4=Strongly agree), (3=agree), (2=Disagree), (1=Strongly disagree). A total of 22 items with factor loadings > 0.40 were retained on theoretically relevant factors. The factors formed are performance anxiety (8 items), interaction anxiety (10 items) and evaluation anxiety (4 items). Additionally, the factor structure was found to be reliable as Cronbach's alpha for the scale (0.90) was well above the benchmark of 0.70 as per the social sciences. The researcher again carried out internal consistency testing using Cronbach's Alpha which resulted in a score of 0.939.

Furthermore, for the self-compassion variable, the researcher adapted the Short Form of the Self-Compassion Scale instrument. The researcher adapted the self-compassion research scale created by Raes et al., (2011). This scale is a shorter version but still has structural reliability equivalent to the longer SCS (Self-Compassion Scale). This scale consists of 12 items, statements on the scale can be measured using a 4-choice Linkert Likert scale (4=Strongly agree), (3=agree), (2=Disagree), (1=Strongly disagree). Adequate internal

consistency was measured at 0.86. The researcher again carried out internal consistency testing using Cronbach's Alpha which produced a score of 0.779.

The emotion regulation variable was measured using the Difficulties in Emotion Regulation Scale instrument: The DERS-16 is a short version consisting of 16 items. This assessment evaluates the dimensions of emotion regulation difficulties, which involve: not accepting negative emotions (three items), Limitations in engaging in goal-directed behavior appears when a person feels stressed (three items), difficulty controlling impulsive behavior when stressed (three items), less widespread availability of emotion regulation strategies that are considered effective (five items), and lack of emotional clarity (two items) . As with the original version of the DERS, respondents rate the extent to which each item applies to them on a 4-choice Likert scale from 1 (strongly disagree) to 4 (strongly agree). Total scores on the DERS-16 can range from 16 to 80, with higher scores reflecting greater levels of emotional dysregulation (Bjureberg et al., 2016). Results show that the DERS-16 has excellent internal consistency of 0.92, good test-retest reliability, and good convergent and discriminant validity (Bjureberg et al., 2016). The researcher again carried out validity and reliability testing, for validity using a total score test with items assisted by the SPSS 25.00 application with a product moment correlation test with the results of 16 valid items and a reliability test with a Cronbach's alpha value of 0.923.

In this research, data analysis was processed using descriptive statistical analysis, including average, standard deviation and percentage, in order to assess the level of achievement of respondents on each variable. Next, hypothesis testing was carried out using simple regression and multiple regression techniques. Regression analysis is a statistical calculation applied to measure the extent of relationship variables (Sarbaini et al., 2022). There are several conditions that must be met when carrying out regression analysis. In this study, we first tested normality, linearity, multicollinearity and heteroscedasticity. Tests were run using the SPSS application version 25.00.

Results and Discussion

In this research, data processing begins with descriptive analysis, which is applied to understand the achievements of each variable. Table 2 illustrates the processing results descriptively. In the social anxiety variable, the average was recorded at 51.61 and the standard deviation was 12.23, which was classified as a moderate level. The largest distribution of respondents was in the medium category, followed by high, very high, low and very low. These results indicate that there are still students who experience high or even very high levels of anxiety. In the self-compassion variable, respondents were categorized as moderate with an average of 34.89. The distribution of respondents was mostly in the medium category, but there were still respondents who had a low level of self-compassion, 2.52% of the total population. Furthermore, emotional regulation is categorized as moderate, but looking at the frequency distribution, there are still students who are categorized as low, even very low.

Table 2. Descriptive Analysis

Category	Mean (SD)	Level				
		Very Low	Low	Medium	High	Very High
Self compassion	34,89 (4,50)	0 (0)	4 (2,52)	71 (44,65)	70 (44,02)	14 (8,80)
Emotion regulation	41,75 (8,30)	7 (4,40)	31 (19,50)	65 (40,89)	47 (29,55)	9 (5,67)
Social anxiety	51,61(12,23)	13 (8,18)	54 (33,97)	66 (41,50)	20 (12,58)	6 (3,78)

Furthermore, as we explained in the methods section, there are several conditions that must be met in order to carry out regression testing, including normality, multicollinearity and heteroscedasticity. Table 3 describes the test results. In the normality test, the significance value of the self-compassion variable was 0.000, the value of the emotional regulation variable was 0.027, and the significance of the social anxiety variable was 0.044, so it was stated that all the data tested was normally distributed. In the multicollinearity test, a VIF value of 1.527 <10 was obtained so that there was no multicollinearity between variables. Furthermore, heteroscedasticity testing on the self-compassion variable produced a significance of 0.000 and emotional regulation of 0.017, so it was concluded that heteroscedasticity did not occur.

Table 3. Classic Assumptions

No	Classical Assumptions	Sig.	Decision
1	Self compassion normality testing	0.000 < 0,05	Normal
2	Testing the normality of Emotion Regulation	0.027 < 0,05	Normal
3	Testing the Normality of Social Anxiety	0.044 < 0,05	Normal
4	Multicollinearity	1.527*	Does not exist
5	Heteroscedasticity testing on the Self compassion variable	0.000**	Does not exist
6	Testing heteroscedasticity on emotion regulation variables	0.017**	Does not exist

* VIF Value

** *Glejser*

Based on the tests in table 3, all analysis requirements have been fulfilled. Next, the researcher tested the hypothesis using simple regression to see the partial influence of self-compassion and emotional regulation on social anxiety, and multiple regression to see the influence together. Table 4 describes these tests. Table 4 shows the regression analysis of the influence of self-compassion on social anxiety. Table 4 shows the calculated t value, namely -5.447, which means there is a significant influence of 0.000 self-compassion on social anxiety.

Table 4. Simple Regression Test of Self Compassion on Social Anxiety

Unstandardized Coefficients		Standardized Coefficients		t	Sig.
B	Std. Error	Beta			
89.434	7.001			12.774	0.000
-1.084	.199	-399		-5.447	0.000

The second hypothesis tested in this research is that there is an influence of emotional regulation on social anxiety, which was also carried out using a simple regression test. Table 5 shows the t value obtained is -9.373 with a significance value of 0.000, so it can be said that there is a significant influence of emotional regulation on social anxiety.

Table 5. Simple Regression Test of Emotion Regulation on Social Anxiety.

Unstandardized Coefficients		Standardized Coefficients		t	Sig.
B	Std. Error	Beta			
88.491	4.012			22.059	0.000
-.883	.094	-.599		-9.373	0.000

The next test is to test the influence of self-compassion and emotional regulation together on social anxiety. Testing was carried out using multiple regression analysis. Table 6 describes the test results.

Table 6. Results of Multiple Regression Analysis of Self Compassion and Emotion Regulation on Social Anxiety

Model	Unstandardized Coefficients		Standardized Coefficients	T	Sig.
	B	Std. Error	Beta		
(Constant)	92.684	6.134		15.110	0.000
Self compassion	-.194	.215	-.071	-.904	0.367
Regulasi emosi	-.821	.117	-.557	-7.050	0.000

Based on Table 6, the t-count is -.904 at a significance level of 0.367, so H_a is accepted, meaning the regression coefficient is significant. Then the t-count is -7.050 at a significance level of 0.000, then H_a is accepted, meaning the regression coefficient is significant. Based on these calculations, it can be concluded that self-compassion and emotional regulation influence social anxiety.

The research results show that self-compassion in students is categorized as moderate. Self-compassion refers to how we respond to failure, difficulties and suffering in life, related to ourselves (Neff, 2023). Self-compassion is an attitude of compassion and kindness towards oneself, including acceptance of shortcomings and without criticizing oneself when experiencing failures and difficulties. This also involves awareness that these experiences are a common part of human life (Karinda, 2020). Based on the research results, it was found that there is a significant influence of self-compassion on social anxiety. Other research findings also indicate that the higher an individual's level of self-compassion, the lower their likelihood of experiencing social anxiety (Pebriani & Kusuma W, 2021). This indicates that the more we care about ourselves, the less likely we are to experience social anxiety. In line with the findings of Stefan & Cheie (2022) which states that a higher level of self-care can help reduce symptoms of social anxiety. Furthermore, other research results suggest that higher levels of self-compassion can help prevent the onset of symptoms of social anxiety. Specifically, higher levels of self-compassion allow individuals to accept themselves, and this can influence how they judge themselves and other people. others, both in real and imagined situations. In addition, high self-compassion can also influence the strategies individuals use in dealing with

social situations, both those that occur in real life and those that only exist in their minds, which in turn influences the experience of social anxiety they experience (Gill et al., 2018). Individuals with high social anxiety and low self-compassion tend to isolate themselves by bottling up their suffering, so they cannot regulate their emotions and feel pressured by negative emotions (Werner et al., 2012). Self-compassion has a strong influence in reducing social anxiety, facilitating emotional regulation strategies, and has a further impact on reducing levels of social anxiety (Bates et al., 2021a).

Furthermore, research findings also show that emotional regulation in students is categorized as moderate. Emotional regulation is defined as a person's skills to identify, understand, manage and express emotions in an appropriate way to obtain emotional stability (Astuti et al., 2019). The results of the study showed that there was a significant influence between emotional regulation and social anxiety. In line with the findings of Farmer & Kashdan (2012) the ability to regulate emotions can play an important role in overcoming social anxiety. Individuals who regulate their emotions well tend to be better able to face and manage their level of social anxiety. They can restrain or change their emotional responses, reduce the intensity of anxiety, and more effectively interact with others. Then research conducted Aprisandityas & Elfida (2012) shows that someone who is able to manage their emotions appropriately experiences lower levels of anxiety, in contrast to those who are unable to manage their emotions, who will face higher levels of anxiety. In line with research findings Kurniasih & Pratisti (2013) it is stated that emotional regulation skills can increase a person's ability to accept and respect themselves. This skill has a role in controlling emotions, therefore visible behavior tends towards a positive direction when facing certain situations. Emotional states arise when a situation is judged to be directly related to one's goals. Emotions involve interrelated experiential, behavioral, and physiological responses. In the context of social anxiety, anxious emotions arise when individuals have the goal of being accepted by others (Bates et al., 2021b).

Then the research results found that self-compassion and emotional regulation had an effect on social anxiety. The combination of self-compassion and emotion regulation can provide significant support to reduce the impact of social anxiety. Self-compassion can be an emotion regulation strategy. This is in line with research Ramadhani & Nurdibyanandaru (2014). If a person's level of self-compassion increases, his emotional skills will improve. Supported by research Bates et al (2021a) which states that when someone has self-compassion, they tend to respond to negative emotions with more calm and acceptance, which then helps in overcoming social anxiety. So it can be stated that self-compassion and emotional regulation have a role in reducing social anxiety. Other research also shows that having higher levels of self-compassion with better emotional regulation predicts lower levels of social anxiety (Bates et al., 2021a). Self-compassion and emotional regulation have a strong influence and are also proven to be mechanisms that influence social anxiety (Ferrari, M. & nwood, E., 2018). The results of this research cannot change the condition of self-compassion and emotional regulation related to social anxiety in students. This research is only limited to revealing the influence of self-compassion and emotional regulation on social anxiety experienced by students.

Conclusions and Suggestions

Based on the research results, it was revealed that there is a significant influence between self-compassion and emotional regulation on social anxiety in students. Through this research, it is hoped that students can develop a sense of compassion and concern for

themselves. Apart from that, self-compassion is also expected to reduce levels of social anxiety. Likewise with emotional regulation, where good emotional management can help students control and control their emotions, as well as prevent social anxiety. Suggestions for further research are to explore the influence of self-compassion and emotional regulation on social anxiety among students and society more broadly, so that the research results can provide a more in-depth and sustainable contribution.

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