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The Relationship between Self Compassion, Loneliness and Depressive Tendencies in Early Adult

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ABSTRACT

Early adulthood is vulnerable to depression. This period is characterized by substantial transitions, including pursuing higher education, entering the workforce, and forming intimate relationships, which can contribute to vulnerability to mental health disorders. Self-compassion and loneliness are factors associated with a tendency toward depression, including in early adulthood. This study aims to analyze the relationship between self-compassion, loneliness, and depression in early adulthood. This research employs a quantitative correlational approach. Data were obtained from 387 early adult participants using researcher-developed scales measuring depressive tendencies, self-compassion, and loneliness. Data analysis was conducted using the non-parametric Spearman analysis technique. The results indicate that self-compassion has a significant negative correlation with depression, while loneliness has a significant positive correlation with the tendency toward depression in early adulthood.

INTRODUCTION

Depression is the most common mental disorder in the world. According to data from the Institute for Health Metrics and Evaluation (WHO, 2023), approximately 280 million people worldwide experience depression. Depression is about 50% more common in women than in men (WHO, 2023). Findings from the Global Burden of Disease (2021) indicate that two of the most debilitating mental disorders are depression and anxiety disorders, both of which ranked among the top 25 leading causes of global burden in 2019. This burden is high across all age groups, for both genders, and in many regions. No decrease in the prevalence or global burden of these disorders has been detected since 1990, despite strong evidence supporting interventions that could reduce their impact. The World Health Organization (2011) predicts that depression will become the leading contributor to the global disease burden by 2030.

In Indonesia, based on data from the 2018 Basic Health Research (Riskesdas), more than 19 million people over the age of 15 experience emotional mental disorders, and more than 12 million suffer from depression. The 2023 Indonesian Health Survey (SKI) from the Ministry of Health of the Republic of Indonesia shows that the highest prevalence is among people over the age of 15, with many of them having suicidal thoughts in the last month of their lives (Arlinta, 2024). The prevalence rate of depression among adults has also significantly increased to 21.8%, with a higher prevalence among women compared to men, according to the study by Peltzer & Pengpid (2018). This 21.8% increase is higher than the 18% prevalence rate found in the study by Christiani, Byles, Tavener, and Dugdale (2015), which involved 1,117 adult participants (Peltzer & Pengpid, 2018).

Depression is a common mental health issue that significantly affects individuals in early adulthood. Early adulthood is the age group with the highest cases of depression compared to other life stages (Kuwabara, et al., 2007). This period is marked by substantial transitions, including pursuing higher education, entering the workforce, and forming intimate relationships, which contribute to vulnerability to mental health disorders. The transition to adulthood is a crucial developmental milestone. For most people, the period between 18 and 30 years old is a time of self-discovery and increasing independence, when important decisions about residence, employment, and further education are made (Austine et al., 2018). The inherent instability of this life stage,

characterized by role transitions and identity formation, can exacerbate depression (Leach & Butterworth, 2020).

Depression is caused by multiple factors. Experiences of bullying or trauma during adolescence can have long-term effects, increasing the likelihood of depressive symptoms in early adulthood (Chen, 2019). The quality of interpersonal relationships also significantly affects mental health (Leach & Butterworth, 2020). Adults who have recently experienced depression often struggle to form stable romantic relationships, leading to feelings of loneliness and hopelessness (Leach & Butterworth, 2020). According to Leach & Butterworth (2020), factors such as financial insecurity, social isolation, and unmet expectations regarding personal achievements can cause significant emotional distress. Based on direct interviews conducted by the researcher with several participants, it was found that some of the causes of depression in early adulthood include academic pressure to graduate, financial obligations to support their family, workplace stress, daily living needs, feelings of being left behind compared to their peers' achievements, negative self-evaluation, the belief that failing to be perfect means they are a failure, feelings of being misunderstood, and feelings of being neglected.

Individuals experiencing depression are at higher risk for various adverse outcomes. Depression can hinder academic achievement and reduce the likelihood of completing higher education. Additionally, individuals with depression may face difficulties in securing stable employment, leading to long-term economic instability (Fergusson, Boden, David, 2007). Mental health problems can also interfere with the development of meaningful relationships, affecting social support networks and romantic relationships (Leach & Butterworth, 2020).

One of the factors associated with depression is self-compassion. Individuals with low self-compassion are more likely to experience depressive symptoms (Hood, Ross, Wills, 2020). According to cognitive theory, a lack of self-compassion can lead to negative emotions that influence the development of depression (Beck, 1964). Individuals experiencing depression tend to have lower self-compassion (Krieger et al., 2013). Self-compassion is a protective factor against depressive symptoms (Zargar, Mansouri, Tarrahi, 2023). The absence of self-compassion can result in cognitive distortions and the development of depression (Wang et al., 2024). Self-compassion is a positive emotional

attitude toward oneself that can protect against the negative impact of self-judgment, isolation, and rumination, playing a crucial role in depression (Neff, 2003). A lack of self-compassion can lead to negative emotions and self-denial, which can influence the development of depression (Beck, 1964). Self-kindness and mindfulness are essential components of self-compassion, both of which help individuals remain caring and accepting of themselves, thereby alleviating depression (Zhou et al., 2022).

Low levels of self-compassion and negative coping styles contribute to negative self-perception. The absence of self-compassion can lead to cognitive distortions and the development of depression. Individuals who adopt a positive coping style can face situations objectively, while those who adopt a negative coping style are more likely to experience depression (Wu, 2020).

Neff (2003) argues that individuals with strong self-compassion are more aware and prevent excessive identification with suffering, failure, and loss. The ability to stay present and focus on the current moment helps individuals confront their problems more effectively rather than being overwhelmed by negative emotions such as sadness, anger, disappointment, and despair. Highly self-compassionate individuals tend to avoid escapist coping mechanisms. Instead, they accept their negative emotions and take proactive steps to overcome challenges, failures, or setbacks (Adie et al., 2021). Young adults often face significant social pressures, such as expectations to succeed in education, careers, and interpersonal relationships. Studies show that individuals in this age range experience what is known as a quarter-life crisis, which causes them to feel trapped between reality and high expectations (Mulyadi, Rohayati, Maulidia, 2024). The inability to meet these expectations can lead to excessive self-criticism and a lack of self-compassion.

Another factor often associated with depressive symptoms is loneliness (Bond, 2018). According to several studies, loneliness can lead to depression through various mechanisms, such as increased stress, reduced social support, and negative effects on physical health (Cacioppo, Hawkley, Thisted, 2010). Additionally, lonely individuals may struggle to build and maintain healthy social relationships, which in turn can exacerbate their depression (Qualter et al., 2015). There is a strong direct relationship between loneliness and depression, which remains significant even after adjusting for

confounding factors (Kraav et al., 2021). Adults who have recently experienced depression often find it challenging to establish stable romantic relationships, leading to increased loneliness and despair (Leach & Butterworth, 2020). Loneliness and depression are significant public health issues that impact both mental and physical well-being (Qirtas et al., 2023). Loneliness is associated with an increased risk of subsequent depression or worsening depressive symptoms, regardless of other aspects of social relationships (Lee, 2021). Findings by Solmi, Veronese, and Galvano (2020) indicate that greater loneliness predicts worse outcomes in terms of depression severity and remission rates.

Loneliness is a distressing emotional state caused by a discrepancy between desired and actual meaningful social relationships (Mann, 2017). According to Perlman & Peplau (1998), lonely individuals often experience other negative emotions such as paranoia, anger, and depression. They report feelings of sadness, alienation, rejection by others, low self-confidence, boredom, anger toward others, and depression. The relationship between loneliness and depression is well established. Lonely individuals frequently report feeling sad and depressed, and they score higher on standard depression measures compared to non-lonely individuals (Perlman & Peplau, 1998). Therefore, this study will examine the relationship between self-compassion, loneliness, and depressive tendencies in emerging adults. This study differs from previous research because all three variables are measured using instruments developed by the researcher based on the theories of Beck (depressive tendencies), Neff (self-compassion), and Weiss (loneliness). This study has three hypotheses. The first hypothesis states that there is a correlation between self-compassion, loneliness, and depression tendencies in emerging adults. The second hypothesis states that there is a significant correlation between self-compassion and depression tendencies in emerging adults. The third hypothesis states that there is a significant correlation between loneliness and depression tendencies in emerging adults.

METHODS

The research questionnaire was completed by 387 respondents aged 18 to 29 years. The instrument for measuring depressive tendencies was based on Beck's theory and developed by the researcher, with a total of 48 valid items. The self-compassion scale, designed by the researcher based on Neff's theory, consisted of 31 valid items, while the loneliness scale, based on Weiss's theory,

comprised 30 valid items. The research data were obtained from the scales developed by the researcher, which were structured according to the operational definitions and indicators of each variable. The depression scale was designed using a Likert model, a scale used to measure attitudes, opinions, and perceptions of individuals or groups regarding social phenomena (Sugiyono, 2017).

In addition to validity testing, the researcher also conducted a reliability test. Reliability refers to the consistency of a measurement instrument, ensuring that its results are trustworthy. Consistency is a prerequisite for accuracy (Azwar, 2012). A Cronbach's Alpha value above 0.70 is considered to indicate good reliability. The reliability test results for all three measurement instruments showed a Cronbach's Alpha value > 0.7 , confirming their reliability. Next, an assumption test for normality was conducted, revealing that the data distribution was not normal. Therefore, the non-parametric Spearman analysis technique was used. Data processing was carried out using SPSS version 27 for Windows.

RESULTS AND DISCUSSION

The research findings indicate that self-compassion is significantly and negatively correlated with depressive tendencies ($r = -0.393$, $p < 0.001$), meaning that lower self-compassion is associated with higher depressive tendencies. Loneliness is significantly and positively correlated with depressive tendencies ($r = 0.593$, $p < 0.001$), indicating that higher loneliness is linked to greater depressive tendencies. Self-compassion has a significant negative correlation with depressive tendencies in emerging adults. In the context of self-compassion, Neff (2003) explains that self-compassion involves accepting oneself with all shortcomings, providing emotional support to oneself, and treating oneself with kindness and understanding. This study suggests that low self-compassion makes individuals more vulnerable to negative self-perceptions. The inability to show kindness toward oneself exacerbates feelings of worthlessness, a core aspect of depression. The dimension of kindness plays a crucial role in providing emotional support to oneself during difficult times. When this dimension is weak, individuals tend to engage in destructive self-criticism, which not only worsens mood but also hinders emotional recovery.

This negative self-perception is further intensified by a lack of awareness of common humanity. Common humanity the understanding that difficulties are a natural part of human life can help individuals feel less isolated and reduce negative worldviews. Without the awareness that struggles are a universal human experience, individuals may feel isolated, as if they alone are suffering. The inability to openly process emotions through mindfulness also reinforces negative rumination, ultimately fostering pessimism about the future. Mindfulness is closely related to an individual's ability to openly accept emotional experiences. The researcher argues that a lack of mindfulness makes individuals more likely to become trapped in repetitive negative thought patterns, reinforcing pessimism about the future. This aligns with Beck's theory, which emphasizes that negative thought patterns about the future are a core component of depression.

These findings support several previous studies. For example, research by de Souza, Policarpo, and Hutz (2020) examined self-compassion in relation to stress, anxiety, and depression. Their study, involving 298 adults, found a significant negative correlation between self-compassion and all DASS-21 scores. Another study by Fadillah, Fauzia, and Lubis (2023) used a cross-sectional research design. The sample was selected using purposive sampling and included 25 elderly individuals who met the study criteria and participated until completion. The results showed a significant relationship between self-compassion and depression in the elderly in Alim Hasak Village, Seidapdap District, Asahan Regency in 2022. A study by Nashori, Saputri, and Lubis (2024) involved 280 active university students in Yogyakarta. Measurement was conducted using a self-compassion scale and the depression subscale of the DASS-42. The influence of self-compassion on student depression was analyzed using Pearson's product-moment correlation and regression analysis. The results indicated that self-compassion significantly affects depression in students. Kamravamanesh et al. (2023) conducted research on pregnant women, involving 527 participants. Spearman's correlation test results showed a significant negative relationship between self-compassion and depression in pregnant women. Logistic regression analysis indicated that components of self-compassion, such as self-kindness and common humanity, play a role in predicting depression among pregnant women.

Loneliness is significantly correlated with depressive tendencies in emerging adults. Weiss (1973) distinguishes loneliness into two main dimensions: emotional loneliness and social loneliness. Individuals who feel they lack adequate emotional connections tend to blame themselves and feel unworthy of love. Emotional loneliness reflects an unmet need for deep and meaningful relationships. The researcher views that individuals experiencing emotional loneliness often feel emptiness, which can worsen negative self-perceptions. They may feel unworthy of love or acceptance, further reinforcing self-criticism. Social loneliness reflects an individual's disconnection from their social environment. Even with many acquaintances, individuals experiencing social loneliness often feel a lack of substantial relationships. The researcher observes that this feeling reinforces a negative worldview, perceiving the world as unfair and unsupportive. Additionally, social isolation creates the perception that opportunities for positive change are minimal, reinforcing pessimism about the future. Social loneliness fosters a sense of alienation, even in crowded spaces, further intensifying negative worldviews. The combination of these two forms of loneliness also influences negative perspectives on the future, as individuals feel that meaningful relationships are difficult to achieve, leading to a sense of hopelessness.

These findings support previous studies. For instance, research by Rahmawati, Wisnusakti, and Bolla (2023) involved 66 elderly individuals at the UPTD Social Service Center for the Elderly. Using purposive sampling, the study found a significant relationship between loneliness and depression in elderly individuals at the center. Another study by Beto, Rosdiyana, Rahayu (2024) examined the relationship between loneliness and depression among elderly residents at Griya Lansia Husnul Khatimah. This study used purposive sampling with 58 elderly participants. The findings indicated a significant relationship between loneliness and depression levels. Research by Lasgaard, Goosens, and Elklit (2011) also explored loneliness and depression using cross-sectional and longitudinal analyses on adolescents. The first wave of the study included 1,009 adolescents, while the second wave included 541 adolescents. Cross-lagged Structural Equation Modeling analysis showed that loneliness was positively correlated with depressive symptoms at the cross-sectional level, regardless of gender, other demographic factors, several psychosocial variables, and social desirability. A study

by Kayaoglu and Bascillar (2022) examined loneliness and depression in adolescents during the COVID-19 pandemic. A total of 423 adolescents participated in the study, which found a statistically significant positive correlation between total depression scores and total loneliness scores. As adolescent loneliness increased, so did their levels of depression.

Overall, these findings suggest that self-compassion can be considered a protective factor, while loneliness acts as a risk factor for depression. From the researcher's perspective, these two variables interact to influence the negative cognitive schemas central to depression. For instance, individuals with high self-compassion may be better equipped to cope with the negative effects of loneliness, as they have internal mechanisms to manage difficulties. Conversely, individuals with low self-compassion and high loneliness are more vulnerable to negative feedback loops that worsen depression.

CONCLUSION

This study aims to examine the relationship between self-compassion, loneliness, and depression tendency in emerging adults. The research sample consisted of 387 respondents. The analysis technique used was Spearman correlation, as the data did not meet the normality assumption required for parametric analysis.

Based on the analysis results, the first hypothesis in this study could not be tested using regression analysis due to the non-normal distribution of the data. However, the second hypothesis was supported, indicating a significant negative correlation between self-compassion and depression tendency. This finding suggests that individuals with lower levels of self-compassion tend to have a higher tendency toward depression. In this context, self-compassion reflects the extent to which individuals can treat themselves with kindness (self-kindness), recognize that suffering is a natural part of human life (common humanity), and accept emotional experiences without judgment (mindfulness) (Neff, 2003). Individuals with high self-compassion are better able to manage emotional stress adaptively, thereby reducing the risk of depression. Conversely, low self-compassion can increase the tendency toward negative thinking patterns, self-destructive criticism, and feelings of worthlessness, which are key factors in depression (Beck, 1967).

Additionally, the third hypothesis in this study was also supported, revealing a significant positive correlation between loneliness and depression tendency. Loneliness, in both emotional and social forms (Weiss, 1973), contributes to an increased tendency toward depression. Emotional loneliness arises when individuals feel they lack deep and meaningful relationships, leading to feelings of emptiness and low self-worth. Meanwhile, social loneliness reflects a disconnection from the social environment, even when individuals have many acquaintances. This study found that social loneliness reinforces a negative view of the world as an unsupportive place, aligning with Beck's (1967) theory that negative cognition is a core factor in depression.

Overall, this study demonstrates that self-compassion can serve as a protective factor against depression, while loneliness acts as a risk factor. These two variables interact in shaping the negative cognitive schemas that underlie depression. Individuals with high self-compassion are more capable of mitigating the negative effects of loneliness due to their adaptive internal mechanisms for coping with difficulties. In contrast, individuals with low self-compassion and high loneliness are more vulnerable to negative feedback loops that exacerbate depression tendencies. Based on the findings of this study, several recommendations can be made for future research. First, this study only examined the influence of self-compassion and loneliness on depression in emerging adults. To enhance the understanding of factors contributing to depression, future research is encouraged to consider other variables that may also play a role, such as stress levels, social support, personality traits, or cognitive patterns (e.g., rumination). Including these variables could provide a more holistic perspective on the factors influencing depression tendencies. Second, future studies could explore potential moderating or mediating factors that influence the relationship between self-compassion, loneliness, and depression. For instance, examining whether social support or coping skills moderate the relationship between loneliness and depression, or whether self-compassion serves as a mediator between loneliness and depression, could offer deeper insights into the mechanisms underlying these relationships. Investigating these moderating or mediating factors would contribute to a more comprehensive understanding of how these variables interact.

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