



Pelatihan *Self Compassion* untuk Meningkatkan Resiliensi pada Warga Binaan Lapas Perempuan Kelas II A Pontianak

Self Compassion Training to Increase Resilience in Inmates of Class II A Women's Prison in Pontianak

Puput Makarti* & Antonius Johanes Tjahjoanggoro

Master of Professional Psychology, Faculty of Psychology, University of Surabaya, Indonesia

Submitted: 4 March 2022; Reviewed: 17 October 2022; Accepted: 24 December 2022

*Corresponding author: Email: s154120020@student.ubaya.ac.id

Abstrak

Penelitian bertujuan untuk menguji efektivitas pelatihan *self compassion* untuk meningkatkan resiliensi. Pelatihan yang diberikan berdasarkan aspek *self compassion* yaitu *self kindness*, *common humanity* dan *mindfulness*. Metode yang digunakan adalah *quasi-experimental one group pre-test post-test design*. Pelatihan diikuti oleh 15 orang warga binaan Lembaga Pemasyarakatan Perempuan Kelas II A Pontianak yang memiliki rentang usia 18 tahun hingga 56 tahun dengan pendidikan terakhir SD hingga S1. Evaluasi dilakukan pada level *reaction*, *learning*, dan *behavior*. Data kuantitatif didapatkan dengan memberikan skala resiliensi yang diukur dengan *Connor-Davidson Resilience Scale* (CD-RISC) yang terdiri dari 10 butir dengan lima pilihan jawaban dari sangat tidak sesuai hingga sangat sesuai. Data kuantitatif kemudian dianalisis menggunakan *paired sample t-test* ($t = 3.800$, $p = 0.002$ ($p < 0.05$)). Simpulan dari penelitian ini menunjukkan bahwa pelatihan *self compassion* efektif untuk meningkatkan resiliensi pada warga binaan Lembaga Pemasyarakatan Perempuan kelas II A Pontianak.

Kata Kunci: *Self Compassion*; Resiliensi; Lembaga Pemasyarakatan.

Abstract

This study aims to test the effectiveness of self-compassion training to increase resilience. The training provided is based on aspects of self-compassion, namely self kindness, common humanity and mindfulness. The method used is a quasi-experimental one group pre-test post-test design. The training was attended by 15 residents of Class II A Women's Prison in Pontianak who have an age range of 18 to 56 years with the last education being elementary school to bachelor degree. Evaluation is done at the level of reaction, learning, and behavior. Quantitative data was obtained by providing a resilience scale as measured by the Connor-Davidson Resilience Scale (CD-RISC) which consists of 10 items with five choices of answer from very inappropriate to very appropriate. Quantitative data were then analyzed using a paired sample t-test ($t = 3,800$, $p = 0.002$ ($p < 0.05$)). The conclusions of this study indicate that self-compassion training is effective in increasing resilience of the inmates at Class II A Women's Prison in Pontianak.

Keywords: *Self-Compassion*; *Resilience*; *Correctional Institution*.

How to Cite: Makarti, P., & Tjahjoanggoro, A.J. (2022). Self Compassion Training to Increase Resilience in Inmates of Class II A Women's Prison in Pontianak. *Analitika: Jurnal Magister Psikologi UMA*, 14 (2): 113 – 122.

INTRODUCTION

The Indonesian government provides prisons or what is commonly referred to as prisons as places for lawbreakers. The function of the prison is to be able to prepare its residents to be able to reintegrate healthily with the community. Prison residents consist of Correctional Assisted Persons (WBP), Prisoners (prisoners), and also prisoners (persons whose status has not been determined guilty or not by a judge). One of the prisons in Indonesia is the Class II A Pontianak Women's Penitentiary. This prison is specifically for women who violate the law in the West Kalimantan region. The Pontianak Class II A Women's Penitentiary is also the first Women's Prison in West Kalimantan. Class II A Pontianak Women's Prison was established in 2017 which at first was still merged with Class II A Pontianak Prison. In 2018, the Pontianak Class II A Women's Prison began construction to separate itself from the Pontianak Class II A Prison. The building is located on Jalan Raya Kakap km.13, Sungai Kakap Village, Sungai Kakap District, Kubu Raya Regency, and began operating in 2019 to be precise on April 27, 2019.

Article 3 of the Law of the Republic of Indonesia Number 12 of 1995 concerning Correctional Services states that the correctional system functions to prepare correctional assisted citizens so that they can integrate healthily with the community, so that they can play a role again as free and responsible members of society. This shows that it means that the penitentiary is not only a place for its fostered citizens to receive punishment for the mistakes they made but as a place to re-prepare the fostered citizens so that they can return as free and responsible members of society. Assisted citizens are entitled to receive training and coaching while in prisons and as people and human resources must be treated properly and humanely in an integrated coaching system. The Pontianak Class II A Women's Penitentiary also hopes to become a place for state prisoners who have facilities that can fulfill human rights for their fostered residents. In addition, the Pontianak Class II A Women's Correctional Institution also hopes that it can have enough experts to provide guidance and guidance and have programs that can make its fostered residents ready to return to the community. However, currently, the existing prison facilities are still very lacking and the prison buildings are also occupied by assisted residents who exceed capacity. The existing experts are also still lacking so that the programs in the prison are still very limited and depend on other parties outside the prison.

Officers are also expected to be able to divide time and provide regular coaching to their fostered residents as well as be able to build relationships that understand and understand each other with their fostered residents. However, the limited number of experts makes officers feel overwhelmed and there are still officers who cannot fully understand the situation of the assisted residents. The assisted residents at the Class II A Pontianak Women's Correctional Institution also said that the relationship between other fostered residents is still often in disputes, they also often feel stressed and cannot accept the conditions of those who have to live in prison. But on the other hand, they also feel that they don't have readiness and confidence to return to the community environment. They often feel down and also have not been able to fully control themselves and the negative feelings they feel in dealing with the situation they are currently in.

Based on the results of the interview, it can be seen that the assisted residents at the Pontianak Class II A Women's Correctional Institution still do not fully have good resilience. Resilience or resilience is the result of successful adaptation to adversity, in the form of recovery, or how people bounce back from stressful and sustainability events, or the capacity to forge ahead in the face of adversity (Baker, Caswell, & Eccles, 2019). Resilience is an interactive concept that refers to resilience relative to risky experiences from the environment, or coping with stress and difficulties, and it is distinguished from positive mental health, however the factors that influence the development of resilience can be considered in line with those of people who promote mental health (Herrman, Stewart, Diaz-Granados, Berger, Jackson, & Yuen, 2011).

Resilience that has not been well established in the assisted residents because they have not been able to be sincere and accept the situation, they are currently in. They always feel that their current life is a punishment for them and their mistakes are unforgivable. The feeling of being unacceptable again and always feeling that they are getting a negative stigma is a concern for them. The lack of resilience possessed by the residents of the Pontianak Class II A Women's Correctional Institution is caused by the lack of self-compassion in them. Self compassion or compassion is when the individual can consider personal shortcomings, mistakes, and failures, as well as when facing painful life situations that are beyond the control of the individual (Germer & Neff, 2013). Self compassion can also be used by individuals as a strategy in adapting (Azizah, Wibowo & Purwanto, 2020). Self compassion is considered a formulation of healthy self-acceptance based on its aspects, namely self-kindness, common humanity, and mindfulness (Kotera & Sheffield, 2020).

Several studies reveal that resilience correlates with self-compassion. Research conducted by Perez-Aranda, Garcia-Campayo, Gudee, Lucianoc, Feliu-Soler, Gonzalez-Quintela, Lopez-del-Hoyo, & Montero-Marin (2021) states that self compassion has a relationship with resilience with the concept of resilience relationships influenced by self compassion. The results of research conducted by Febrinabilah & Listiyandini (2016) on former drug addicts also show that when a former drug addict has a good self-compassion, he becomes more resilient so that he is able to face the challenges of being a former drug addict. Research conducted by Bluth, Mullarkey, & Lathren, (2018) shows that self compassion is significantly positively related to resilience.

High self compassion can withstand stress both in adolescents, young adults and in adults, with higher self compassion then a person will use positive coping strategies when faced with stress or problems (Bluth, Mullarkey, & Lathren, 2018). Ivtzan & Lomas (2016) says that individuals who have self compassion show greater resilience in maintaining their motivation after experiencing failure. This shows that self-compassion has a positive relationship with resilience. Therefore, researchers will conduct self-compassion training to increase resilience in female prison assisted residents' class II A Pontianak with the aim of testing the effectiveness of self-compassion training to increase resilience.

RESEARCH METHOD

This research is an experimental study using a quasi-experimental method with an experimental design, namely one group pretest-posttest design. This research will test the free variable, namely self-compassion training with a bound variable, namely resilience. Participants in this study were residents of pontianak class IIA women's prison with narcotics and corruption cases. The selection of participants uses purposive sampling techniques and is also in accordance with the needs in the Pontianak class IIA women's prison. The number of participants in the training was 15 people, who had an age range of 18 years to 56 years with the last education from elementary to bachelor. The training is conducted in three sessions over two days with each session lasting 90 minutes. The first day was given one session starting with giving a pretest and then discussing resilience and self compassion as well as about self kindness which is an aspect of self compassion. Then the second and third sessions were carried out on the next day which contained material related to common humanity and mindfulness and closed with the provision of a posttest.

RESULTS AND DISCUSSION

The following is an overview of the implementation of the training:

Table 1. First Day Training Rundown

Day One		
Monday, 17 Mei 2021		
Time	Duration	Material
09.00-09.10	10'	Registration
09.10-09.15	5'	Opening
09.15-09.20	5'	Rules of Training
09.20-09.40	20'	Pre-test
09.40-09.55	15'	Ice Breaking
Session 1		
09.55-10.20	25'	Resilience & Self Compassion
10.20-11.25	65'	Self Kindness
11.25-11.40	15'	Closing

Table 2. Second Day Training Rundown

Day Two		
Tuesday, 18 Mei 2021		
Time	Duration	Material
09.00-09.10	10'	Registration
09.10-09.20	10'	Opening & Rules of Training
Session 2		
09.20-10.50	90'	Common Humanity Material
Session 3		
10.50-12.20	90'	Mindfulness Material
12.20-12.50	30'	Closing

In this training, the evaluation measured is at the level of reaction, learning and behavior. Kirkpatrick & Kirkpatrick (2007) mentioned reaction levels used to measure trainee satisfaction. The form of evaluation that will be given is an assessment for the implementation of training, facilities, and the ability of trainers to provide training. This evaluation is based on the results of observations during the training and evaluation

sheets filled out by participants. In addition to the evaluation sheets filled out by the participants, observations were also carried out to see how the participants participated in the training activities. Observations are made based on indicators of success in each session.

In the learning evaluation, all participants will be given a pre-test first and then a post-test will be given. The results of the pre-test and post-test will be seen how it changes as a result of the training that has been carried out. This evaluation is carried out to see the knowledge and attitude of the participants. Knowledge evaluation is given by asking participants to answer several questions related to the material presented. Furthermore, attitude evaluation is given with a questionnaire containing a self compassion scale and a resilience scale. The self compassion scale is measured by the Self-Compassion Scale-Short Form (SCS-SF) which consists of 12 items with five choices n answers from highly inappropriate to highly appropriate (Raes, Pommier, Neff, & Gucht, 2011). Here is the Self-Compassion Scale-Short Form (SCS-SF) blueprint:

Table 3. Blueprint Self-Compassion Scale-Short Form (SCS-SF)

Favorable	2,3,5,6,7,10
Unfavorable	1,4,8,9,11,12
Total	12 Items

Then for the Resilience scale measured by the Connor-Davidson Resilience Scale (CD-RISC) which consists of 10 items with five choices of answers from very inappropriate to very appropriate (Campbell-Sills, & Stein, 2007). Here is the Connor-Davidson Resilience Scale (CD-RISC) blueprint:

Table 4. Blueprint Connor-Davidson Resilience Scale (CD-RISC)

Favorable	1,2,3,4,5,6,7,8,9,10
Total	10 items

In the evaluation of the level of behavior, an evaluation of the results of the training was carried out on the daily lives of the participants. Evaluation will be carried out by conducting interviews with participants and prison officers as well as providing self-compassion and resilience questionnaires to participants. The technique of analysis data that is carried out is to use data analysis techniques quantitatively and qualitatively.

Reaction Level

Table 5. Participant Observation Results

Nu.	Name	Session 1	Session	Session	Average	Description
		2	3			
1.	A	2,0	2,0	2,1	2,0	Active
2.	B	2	2,3	2,1	2,1	Active
3.	C	2	2,1	2,0	2,0	Active
4.	D	2	2,1	1,8	2,0	Active
5.	E	2,3	2,6	2,1	2,3	Active
6.	F	2,4	2,7	2,1	2,4	Active
7.	G	2	2,1	2,0	2,0	Active
8.	H	2	2,4	1,6	2,0	Active

Nu.	Name	Session 1	Session	Session	Average	Description
			2	3		
9.	I	2	2,0	1,7	1,9	Active
10.	J	1,7	1,9	2,0	1,9	Active
11.	K	1,7	1,9	1,8	1,8	Moderately Active
12.	L	2	1,9	2,0	2,0	Active
13.	M	1,9	1,9	2,1	2,0	Active
14.	N	2	2,0	2,0	2,0	Active
15	O	2	2,0	2,0	2,0	Active

Based on table 5, it can be seen that all participants had an average training engagement evaluation score above 1.8 in each session. Based on this, it can be concluded that the majority of training participants are involved and active during the training so that it can be assumed that the trainees understand the training material presented because they are involved with the training carried out so that the process of receiving the material is faster and easier because the participants are directly involved.

Learning Knowledge Level

Tabel 6. Hasil Evaluasi Knowledge

Nu.	Name	Score	Description
1.	A	75	Good
2.	B	75	Good
3.	C	75	Good
4.	D	75	Good
5.	E	100	Excelent
6.	F	75	Good
7.	G	75	Good
8.	H	75	Good
9.	I	50	Quite Good
10.	J	50	Quite Good
11.	K	75	Good
12.	L	75	Good
13.	M	75	Good
14.	N	75	Good
15.	O	75	Good

The results of the knowledge evaluation provided in the form of questions regarding the training material found that the average score of the participants was 73.33 with the highest score of 100 and the lowest score of 50. The participants who got a score of 100 were one person, then those who scored 75 were twelve people, and those who got the lowest score of 50 were two people.

Attitude

Resilience Normality Test

Table 7. Resilience Normality Test Results

Resilience Normality Test	
	Sig.
Pretest	0.191
Posttest	0.055

The results of the pretest and posttest normality tests for resilience measurement data in residents of class II A women's correctional institutions obtained results of 0.191 for pretest and 0.055 for posttest, which means > 0.05 which indicates that the distribution of data is normal.

Self Compassion Normality Test

Normality Test	Self Compassion
	Sig.
Pretest	0.200
Posttest	0.200

The results of the pretest and posttest normality tests for self-compassion measurement data in residents of class II A female penitentiaries obtained a result of 0.200, which is > 0.05 , which means that the distribution of data is normal.

Resilience Difference Test

Table 9. Resilience Difference Test Results				
	Amount	Average	Sig.	t
Posttest	15	34.200	0.002	3.800
Pretest	15	27.800		

The results of different tests conducted on the pretest and posttest resilience scores showed that there were differences in the resilience scores owned by participants before and after the training. The significance value is 0.002 ($p < 0.05$) which indicates that there is a significant change after the participants are given training.

Self Compassion Difference Test

Table 10. Self Compassion Difference Test Results				
	Amount	Average	Sig.	t
Posttest	15	31.333	0.000	4.961
Pretest	15	24.133		

The different tests conducted on the pretest and posttest self compassion scores showed that there were differences in self-compassion owned by participants before and after the training. The significance value is 0.000 ($p < 0.05$) which indicates that there is a significant change after the participants are given training.

Level Behavior (Follow Up)

Table 11. Participant Follow Up Results

Nu.	Speaker	Results
1.	Prison Officers	Officers said that residents who attended the training seemed more enthusiastic about carrying out their daily activities in the prison. Officers also said that after attending the training, the residents became more organized and focused on participating in activities in the prison.
2.	Trainees	Some trainees said that after attending the training, they can accept and live life in prison more sincerely. They will calm down if they experience anxiety by trying to feel their emotions then calming down by catching their breath and feeling the air entering their bodies. Some participants said they were better able to bounce back from the mistakes they had made. When experiencing sadness, they try to do an attitude of hugging themselves. They are more confident and courageous to have better expectations of their lives. Some participants when reminded of their mistakes or felt that they had let their family down, they tried to form new thoughts by realizing that they could forgive themselves by trying to be even better.

Self-compassion training conducted on residents of the female penitentiary class II A Pontianak found that this training had an influence and was effective in increasing resilience in its participants, this can be seen from the results of the pretest and posttest of trainees with the average value of resilience of trainees increased which before him had an average value of 27,800 then increased to 34,200. Different tests conducted on participant resilience also showed significant results with sig values. = 0.002. This shows that self-compassion training can increase resilience in trainees. These results are in line with research conducted by Bluth, Mullarkey, & Lathren, (2018) which showed that self-compassion is significantly positively related to resilience.

In addition, the results also showed that the condition of self-compassion of participants before and after training increased with an initial average value of 24,113 then increased to 31,333. Then, the difference test conducted on self-compassion showed significant results with a sig value. = 0.000. These results show that the training provided has an influence and is effective in increasing self-compassion in its participants. Then, the evaluation provided to the participants also showed that the participants felt that this training had a theme and material that could be accepted and implemented well.

In their research, Bluth, Mullarkey, & Lathren, (2018) say that a person who has a high self-compassion, they will become a more resilient or resilient person and can bounce back when facing challenges in life. Germer & Neff (2013) also say that self-compassion facilitates a person's resilience by moderating people's reactions to negative events. A person who has self-compassion can become a tougher person in living his life. This shows that when someone has self-compassion, then they will have higher resilience in living their life. Research conducted by Perez-Aranda, Garcia-Campayo, Gudee, Lucianoc, Feliu-Soler, Gonzalez-Queintelaf, Lopez-del-Hoyo, & Montero-Marin (2021) also states that self-compassion has a relationship with depression mediated by resilience which means that

self compassion has a relationship also with resilience. Self compassion can help protect a person from shyness and negative self-evaluation leading to better mental health outcomes (Baker, Caswell, & Eccles, 2019). Self compassion possessed by a person gives positive things to the person. This self compassion can make them become more resilient or resilient because they can understand themselves so that they can calm and nurture themselves when facing pain instead of having to get angry and drag on in negative emotions when life is not as expected. The self-kindness aspect of self-compassion is also said to increase the appeasement of self-esteem which is likely to lead to less use of the time spent by them reflecting and feeling other negative emotions (Bluth, Mullarkey, & Lathren, 2018). By having self compassion, they can understand that everyone lives an imperfect life so that when facing something in life they can get back on their feet because they realize their condition as a human being and understand that what happens to them is a natural thing experienced by a human being. The mindfulness aspect of self compassion can also facilitate a person's principles or attitudes on challenging conditions so that they are able to respond in a constructive way, rather than just reflecting or reacting impulsively (Roeser, & Pinela 2014).

The process of implementing the training also went well and the material provided could be understood by the participants. The results of the assessment of trainees at the knowledge level show that most of the participants have good scores and some even get perfect scores. This shows that the material presented can be accepted and understood by participants. However, the implementation of activities has several obstacles, because the age and education gaps are too far. In carrying out some activities, there are participants who are quite slow in following the process and some other participants have been able to understand and carry out activities in the training first. During the training, this obstacle can be overcome by the trainer by providing assistance to participants who experience difficulties, but this needs to be a record in the implementation of the training that may be carried out by the next implementer.

CONCLUSION

Self Compassion training to improve resilience in the assisted residents of the Pontianak Class IIA Women's Correctional Institution as a whole can be said to be successful and effective. This is based on the evaluation results that show positive things at various levels, both at the reaction level, learning, and behavior. The average resilience of trainees increased from an average value of 27,800 to 34,200 with a sig value. = 0.002 (p<0.05). Then, the participants' self-compassion value increased with an initial average value of 24,113 increasing to 31,333 with a sig value. = 0.000 (p<0.05). The training sessions and materi delivered are also acceptable and understandable to the participants.

BIBLIOGRAPHY

Azizah, N., Wibowo, M.E., & Purwanto, E. (2016). The Effectiveness of Strength Based Intervention Motivational Interviewing Group Counseling to Improve Students' Self Compassion. *Jurnal Bimbingan Konseling*, 9 (2): 189-193. <https://doi.org/10.15294/jubk.v9i2.34394>

Baker, D.A., Caswell, H.L., & Eccles, F.J.R. (2019). Self-Compassion and Depression, Anxiety, And Resilience in Adults With Epilepsy. *Elsevier: Epilepsy & Behavior*, 90, 154-161.

Bluth, K., Mullarkey, M., & Lathren, C. (2018). Self-Compassion: A Potential Path to Adolescent Resilience and Positive Exploration. *Springer Science: Journal of Child and Family Studies*. <https://doi.org/10.1007/s10826-018-1125-1>

Campbell-Sills, L., & Stein, M.B. (2007). Psychometric Analysis and Refinement of the Connor-Davidson Resilience Scale (CD-RISC): Validation of a 10-Item Measure of Resilience. *Journal of Traumatic Stress*, 20 (6): 1019-1028. DOI 10.1002/jts

Connor, K.M., & Davidson, J.R.T. (2003). Development of a new resilience scale: The Connor-Davidson Resilience Scale (CD-RISC). *Depression and Anxiety*, 18 (2): 76-82. doi:10.1002/da.10113

Febrinabilah, R., & Listiyandini, R.A. (2016). Hubungan Antara Self Compassion dengan Resiliensi Pada Mantan Pecandu Narkoba Dewasa Awal. *Prosiding Konferensi Nasional Peneliti Muda Psikologi Indonesia*, 1 (1): 19-28.

Germer, C.K., & Neff, K.D. (2013). Self-Compassion in Clinical Practice. *Journal of Clinical Psychology*, 69 (8): 856-867. doi:10.1002/jclp.22021

Herrman, H., Stewart, D.E., Diaz-Granados, N., Berger, E.L., Jackson, B., & Yuen, T. (2011). What Is Resilience?. *The Canadian Journal of Psychiatry*, 56 (5): 258-265.

Ivtzan, I., & Lomas, T. (2016). *Mindfulness In Positive Psychology: The Science of Meditation and Wellbeing*. New York: Routledge.

Kirkpatrick, D.L., & Kirckpatrick, J.D. (2007). *Implementing the Four Levels*. San Fransisco: Berrett-Koehler Publisher, Inc.

Kotera, Y., & Sheffield, D. (2020). Revisiting the Self-compassion Scale-Short Form: Stronger Associations with Self-inadequacy and Resilience. *SN Compr. Clin. Med.* 2, 761-769. <https://doi.org/10.1007/s42399-020-00309-w>

Neff, K.D. (2016). The Self-Compassion Scale is a Valid and Theoretically Coherent Measure of Self-Compassion. *Mindfulness*, 7 (1): 264-274. doi:10.1007/s12671-015-0479-3

Perez-Aranda, A., Garcia-Campayo, J., Gudee, F., Lucianoc, J.V., Feliu-Soler, A., Gonzalez-Queintela, A., Lopez-del-Hoyo, Y., & Montero-Marin, J. (2021). Impact of mindfulness and self-compassion on anxiety and depression: The mediating role of resilience. *Elsevier: International Journal of Clinical and Health Psychology*, 1-9. <https://doi.org/10.1016/j.ijchp.2021.100229>

Raes, F., Pommier, E., Neff, K.D., & Gucht, D. V. (2011). Construction and factorial validation of a short form of the Self-Compassion Scale. *Clinical Psychology and Psychotherapy*, 18 (3): 250-255. doi:10.1002/cpp.702

Roeser, R., & Pinela, C. (2014). Mindfulness and compassion training in adolescence: a developmental contemplative science perspective. *New Directions for Youth Development*, 142: 9-30.