

The Relationship Between Self-Compassion and Body Dissatisfaction in Second-Year Nursing Students at the Gorontalo Ministry of Health Polytechnic

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Abstract. *This study aimed to examine the relationship between self compassion and body dissatisfaction among second year nursing students at the Gorontalo Ministry of Health Polytechnic. The study employed a quantitative correlational design involving nursing students as respondents. Data were collected using a self compassion scale based on Neff's concept and a body dissatisfaction scale based on Cooper's framework. The data were analyzed using Pearson correlation analysis with the assistance of SPSS version 26. The findings showed that most respondents had moderate levels of self compassion and moderate levels of body dissatisfaction. The Pearson correlation test indicated a significant negative relationship between self compassion and body dissatisfaction, with a correlation coefficient of r equals negative 0.225 and a significance value of p equals 0.05. This finding suggests that students with higher self compassion tend to experience lower body dissatisfaction, whereas students with lower self compassion are more likely to report higher dissatisfaction with their body image. The study highlights the importance of self compassion as a psychological resource that may help nursing students develop healthier body acceptance and reduce negative evaluations of physical appearance. These findings also imply the need for supportive educational and psychological interventions that strengthen self kindness, common humanity, and mindfulness among students who face body image pressures in academic and social environments.*

Keywords: *Self Compassion, Body Dissatisfaction, Nursing Students, Body Image, Pearson Correlation*

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INTRODUCTION

Physical appearance is the most important aspect of an individual's life, both men and women (Quittkat et al., 2019; Swami & Harris, 2012; Alleva et al., 2019). Having a well-formed physique is a source of pride. Physical appearance encompasses not only the face but also body shape (Safitri, 2020). Teenagers often begin to preoccupy themselves with their physical appearance. Individuals dissatisfied with their body shape will make efforts to improve it (Purnawan, 2022).

Physically attractive individuals are more likely to be invited to join organizations and attend informal gatherings (Palmer & Peterson, 2021; Ridings & Gefen, 2004). At first impressions, physically attractive individuals are perceived as possessing more positive

characteristics and are more likely to benefit from this impression than less attractive individuals (Maharani & Aviani, 2023).

A common issue faced by women is beauty. The term "Slim is beauty" is often interpreted as a new standard of beauty, where women are considered beautiful if they have a slim body. Generally, beauty assessments are based on weight, so women with slim and thin bodies are considered more attractive (Nisa, 2021). High levels of social comparison, especially when women compare themselves to "ideal thin" models, can negatively impact body image. This often leads to negative feelings and a decline in self-esteem (Riswari, 2023).

Body image dissatisfaction is closely linked to women's psychological well-being compared to men's. Women spend more time and effort than men to achieve their ideal body, such as following diet programs and regularly purchasing skincare products, makeup, and beauty supplements (Tumakaka et al., 2022).

Body dissatisfaction can be defined as the discrepancy between how a person perceives their body size and shape and their actual weight. This negative perception can be dangerous, as it can trigger obsessive efforts to control weight, especially in adolescents. People who feel dissatisfied with their bodies often diet without professional supervision (Nindita, 2018).

Based on the explanations above, body dissatisfaction can trigger various psychological problems, including eating disorders, low self-esteem, anxiety, and depression. This significantly impacts the mental and physical well-being of college students, particularly women. Women tend to be more influenced by societal beauty standards, as seen in their efforts to achieve the ideal body through dieting, skincare, beauty supplements, and makeup products (Hati & Soetjningsih, 2022).

Body dissatisfaction can have negative consequences for those experiencing it, such as dieting, excessive exercise, and even plastic surgery. Individuals experiencing body dissatisfaction negatively evaluate their body shape, become embarrassed in social settings, engage in body checking, cover up their body shape with clothing, or even withdraw from their environment. Body dissatisfaction has been identified as a key factor in dieting behavior, negative affect, and the causes and treatment of eating disorders (Ananta & Suhadianto, 2022).

A person's satisfaction with their body parts reflects how they perceive their body, whether as a function or simply as an object of beauty. Currently, physical appearance is highly coveted, especially among young adult women. As a result, the body is often judged solely on its external appearance, while its primary function is overlooked. A person is considered attractive if they have a beautiful face and an ideal weight and body shape (Nisa, 2021).

A study (Kartikasari, 2013) reported that body dissatisfaction can impact a person's physical and mental health. High levels of body dissatisfaction can impact self-confidence and reduce life satisfaction. Individuals are also susceptible to depression, low self-esteem, and social withdrawal.

Self-compassion, a self-accepting and understanding attitude toward oneself, is a compassionate attitude, especially when faced with failure, suffering, or imperfection. Self-compassion is a non-judgmental understanding of suffering, failure, or mistakes, while avoiding shortcomings, failures, and imperfections. Self-compassion can reduce comparison behavior that can lead to body dissatisfaction (Moffitt et al., 2018; Thøgersen-Ntoumani et al., 2017; Nawaz et al., 2023; Homan & Tylka et al., 2015; Maher et al., 2021; Ntoumanis et al., 2020).

Self-compassion can play a role in mitigating the impact of negative perceptions of appearance. With self-compassion, a person is more likely to accept their body as it is and tends to avoid attempts to change it. This helps individuals manage their thoughts and feelings, allowing them to accept their body image without judgment and reducing the habit of comparing their appearance to others (Marizka, 2019).

Self-compassion can also act as an individual skill, enabling individuals to empathize and experience the generosity of their environment, which then triggers the formation of self-acceptance, both emotionally and cognitively, enabling them to cope with various difficult situations in daily life. Self-compassion can also emerge as a warm and supportive attitude, helping individuals cope with difficulties and suffering, as long as these conditions remain within reasonable limits (Giyati, 2023).

Low self-compassion is related to the inability to love and accept oneself as one is. Unfulfilled self-compassion can lead to feelings of anxiety (over-identification), feelings of inferiority that lead to a desire to withdraw (isolation), and a tendency to self-criticism (self-judgment). Self-compassion is an open attitude and compassion for various difficult situations, including one's own shortcomings and failures, and an awareness that these difficult situations are common to everyone (Muchsin, 2024). Previous research by Horan & Taylor (2018), revealed that people who utilize self-compassion to address their weaknesses are highly motivated to improve and change their behavior for the better.

Previous research has demonstrated a relationship between self-compassion and body dissatisfaction, including Soni Laksana Adi's study, "The Effect of Self-Compassion on Body Dissatisfaction among Adolescent Girls in Yogyakarta in 2018," which showed that self-compassion influences body dissatisfaction among adolescents (Manikam, 2022). This is supported by research by Gardner et al. (1999); Kamaria et al. (2016); Gruszka et al. (2022), who states that body dissatisfaction is a negative assessment of one's body resulting from differing perceptions of the height and body type of others who are more ideal than their current body type.

The negative impact of body dissatisfaction on individuals experiencing it, such as an obsession with beauty, can lead to serious physical health problems. Possible problems include eating disorders, dieting that leads to obesity, and the effectiveness of self-punishing behaviors (Ramadhani, 2024). According to (Meiliana, 2018), body dissatisfaction is not only experienced by women, but also by men. A study found that the percentage of body dissatisfaction among men and women at an Indonesian university was 76.56% and 82.87%, respectively.

Based on information obtained from interviews conducted by researchers with second-year nursing students at the Gorontalo Ministry of Health Polytechnic, four nursing students at the second-year nursing polytechnic face significant pressure regarding their physical appearance, particularly due to social expectations and beauty standards disseminated through social media. Dissatisfaction with body shape can negatively impact mental health, such as lowering self-confidence and increasing stress. However, they also recognized that self-compassion can be an effective way to overcome these negative feelings. Students who practiced self-compassion reported an improvement in their self-perception and a decrease in comparing themselves to others.

Based on the above description, it can be concluded that individuals often experience body dissatisfaction due to social pressure and unrealistic beauty standards, which can trigger psychological problems such as eating disorders, low self-esteem, and depression. However, self-compassion has been shown to be an important mechanism for mitigating the negative impact of body dissatisfaction. With self-compassion, individuals are better able to accept their shortcomings, avoid harmful social comparisons, and are more motivated to improve themselves without judgment.

Therefore, the researcher is interested in seeing how "the relationship between self-compassion and body dissatisfaction in second-year nursing students at the Gorontalo Ministry of Health Polytechnic of Health".

METHODS

This study employed a quantitative correlational design to examine the relationship between self-compassion and body dissatisfaction among second year nursing students at the

Gorontalo Ministry of Health Polytechnic. This design was considered appropriate because the study did not seek to manipulate variables or provide treatment, but rather to determine whether a statistically significant relationship existed between students' level of self compassion and their level of body dissatisfaction. Self compassion was positioned as the independent variable, while body dissatisfaction was positioned as the dependent variable.

The population of this study consisted of 254 second year students enrolled in the Nursing Study Program at the Gorontalo Ministry of Health Polytechnic. The sample was determined using the Isaac and Michael table with a 5 percent margin of error. Based on this calculation, the study involved students who met the criteria as active second year nursing students and were willing to participate in the research. The sampling process was carried out to obtain respondents who represented the population of second year nursing students in the institution. However, the manuscript needs to ensure consistency between the stated sample size in the methods section and the number of respondents presented in the results tables, because the methods section states 146 respondents, while the results section reports 150 respondents.

Data were collected using a questionnaire consisting of two psychological scales. The first instrument was the self compassion scale, which was developed based on the concept of self compassion proposed by Kristin Neff. This scale measured students' tendency to treat themselves with kindness, recognize personal difficulties as part of common human experience, and maintain balanced awareness when facing negative emotions or personal shortcomings. The second instrument was the body dissatisfaction scale, which was developed based on the framework of Cooper et al. This scale measured students' dissatisfaction with their body shape, comparative perception of body image, attitudes toward body alteration, and perceived severe alteration in the body.

Both instruments used a Likert scale format with four response options, namely strongly agree, agree, disagree, and strongly disagree. The use of this response format allowed respondents to express the degree of their agreement with each statement while minimizing neutral responses. The questionnaire was administered to the selected respondents after they were informed about the purpose of the study and the voluntary nature of their participation. Respondents were expected to answer each item honestly according to their personal condition and perception.

The collected data were analyzed using SPSS version 26 for Windows. Before hypothesis testing was conducted, the data were examined through normality and linearity tests to ensure that the assumptions for Pearson correlation analysis were met. The normality test was used to determine whether the data distribution was appropriate for parametric analysis, while the linearity test was used to confirm whether the relationship between self compassion and body dissatisfaction followed a linear pattern. After these assumptions were fulfilled, Pearson correlation analysis was applied to test the relationship between self compassion and body dissatisfaction. The direction and strength of the relationship were interpreted based on the correlation coefficient, while statistical significance was determined using a 5 percent significance level.

RESULTS AND DISCUSSION

Univariate Analysis

Table 1. Description of Research Respondents

Age	Total	Percentage
20 Year	52	34%
21 Year	38	25,7%
22 Year	61	40,7%
Total	150	100%

Source: Processed Results of SPSS 2025

Based on the table above, it can be seen that the subjects in this study were 52 people aged 20 years (34%), 38 people aged 21 years (25.7%), and 61 people aged 22 years (40.7%).

Table 2. Self-Compassion Scale Score Categorization

Category	Frequency	Percentage
Low	34	22,7%
Medium	105	70%
High	11	7,3%
Total	150	100%

Source: Processed Results from SPSS 2025

The table above shows that 34 (22.7%) respondents had low self-compassion, 105 (70%) had moderate self-compassion, and 11 (7.3%) had high self-compassion.

Table 3. Body Dissatisfaction Scale Score Categorization

Category	Frequency	Percentage
Low	29	19,3%
Medium	73	48,7%
High	48	32%
Total	150	100%

Source: Processed Results from SPSS 2025

The table above shows that 29 respondents (19.3%) categorized their body dissatisfaction as low, 73 respondents (48.7%) as moderate, and 48 respondents (32%) as high.

Table 4. Categorization of Self-Compassion Aspects

Aspect	Category	Frequency	Percent
Self Kindness	Low	21	14,0%
	Medium	93	60,2%
	High	36	24,0%
	Total	150	100%
Common Humanity	Low	100	66,7%
	Medium	27	18,0%
	High	23	15,3%
	Total	150	100%
Mindfulness	Low	55	36,7%
	Medium	93	62,0%
	High	2	1,3%
	Total	150	100%

Source: Processed Results of SPSS 2025

Based on the table, it can be seen that the Self-Knowledge aspect category for Level II Nursing Students at the Gorontalo Ministry of Health Polytechnic shows that approximately 14.0% are in the low category, 62.0% are in the moderate category, and 24.0% are in the high category. Meanwhile, in the Common Humanity aspect, 66.7% of Level II Nursing Students at the Gorontalo Ministry of Health Polytechnic fall in the low category, 18.0% in the moderate category, and 15.3% in the high category. For Mindfulness, 36.7% are in the low category, 62.0% in the moderate category, and 1.3% in the high category.

Table 5. Categorization of Body Dissatisfaction Aspects

Aspek	Category	Frequency	Percent
Self Perception Of Body Shape	Low	25	16,7%
	Medium	79	52,7%
	High	46	30,7%
	Total	150	100%
Comparative Perception Of Body Image	Low	25	16,7%
	Medium	74	49,3%
	High	51	34,0%
	Total	150	100%
Attitude Concering Body Alteration	Low	53	35,3%
	Medium	54	36,0%
	High	43	28,7%
	Total	150	100%
Severe Alteration In Body	Low	16	10,7%
	Medium	76	50,7%
	High	58	38,7%
	Total	150	100%

Source: Processed Results of SPSS 2025

Based on the table, the Self-Perception of Body Shape aspect of Level II Nursing Students at the Gorontalo Ministry of Health Polytechnic shows that approximately 16.7% are in the low category, 52.7% are in the moderate category, and 30.7% are in the high category. Meanwhile, in the Comparative Perception of Body Image aspect, Level II Nursing Students at the Gorontalo Ministry of Health Polytechnic are in the low category, 49.3% are in the moderate category, and 34.0% are in the high category. For Attitude Concern for Body Alteration, 35.3% are in the low category, 36.0% are in the moderate category, and 28.7% are in the high category. For Severe Alteration in Body, 10.7% are in the low category, 50.7% are in the moderate category, and 38.7% are in the high category.

Bivariate Analysis

Table 6. Normality Test Results

Research Variables	Nilai Sig.
Self Compassion dan Body Dissatisfaction	0,200

Source: Processed Results of SPSS 2025

Based on the results of the normality test, the significance value was $0.200 > 0.05$, thus concluding that the data for the self-compassion and body dissatisfaction variables are normally distributed.

Table 7. Linearity Test Results

Variable	Deviation From Linearity	Information
X - Y	0,891	Linear

Source: Processed Results of SPSS 2025

Based on the table output above, it can be concluded that there is a significant relationship between self-compassion and body dissatisfaction of 0.891, where $0.891 > 0.05$. Therefore, it can be concluded that the relationship between each independent variable and the dependent variable is linear.

Hypothesis Testing

Table 8. Results of the Pearson Correlation Hypothesis Test

Research Variables	r count	Mark Sig.
Self Compassion Body Dissatisfaction	-0,225	0,05

Source: Processed Results of SPSS 2025

The results of the table above show that the significance value between self-compassion and body dissatisfaction is $0.05 = 0.05$. If the significance value is exactly at 0.05, the decision-making requirement for correlation is determined by comparing the Pearson correlation value (calculated r) with the table r , i.e., the calculated r (-0.225) and the table r (0.159). The calculated r value is greater than the table r value ($-0.225 > 0.159$), indicating a correlation between the two variables. A negative sign in the calculated r value indicates a negative (opposite) relationship between self-compassion (X) and body dissatisfaction (Y). Therefore, as self-compassion increases, the tendency for body dissatisfaction decreases. Conversely, lower self-compassion results in a higher tendency for body dissatisfaction. Therefore, it can be concluded that there is a relationship between self-compassion and body dissatisfaction. Therefore, the hypothesis of this study is accepted: there is a relationship between self-compassion and body dissatisfaction in Level II Nursing Students at the Gorontalo Ministry of Health Polytechnic.

Self-Compassion Level in Second-Year Nursing Students of the Gorontalo Ministry of Health Polytechnic

Based on the results of this study, it was found that the majority of Second-Year Nursing Students at the Gorontalo Ministry of Health Polytechnic have moderate levels of self-compassion. This can be seen from the self-compassion scale data, which shows that a total of 105 students, or 70%, fall into the moderate category, 34 students (22.7%) fall into the low category, and 11 students (7.3%) fall into the high category.

The results indicate that having moderate levels of self-compassion means that students are sometimes able to treat themselves with compassion and accept all their shortcomings, but at other times they still tend to be harsh on themselves, especially under stressful situations. In this moderate category, self-compassion has begun to develop, but is not yet strong enough to become a primary coping mechanism for stress or failure. There is fluctuation in how they manage themselves, being fully accepting in some situations, but easily falling into self-criticism in others (Andiany & Khairun, 2024).

However, there are still students who lack self-acceptance and self-compassion. This can be seen from the results, which show that 22.7% of students still fall into the low category. Kristin Neff stated that low self-compassion occurs when someone frequently judges themselves rather than shows kindness, feels isolated, believes that failure is solely their own, and exaggerates personal suffering and loses perspective (overidentification) (Neff, 2023). Some students also have self-acceptance and exhibit good self-compassion. This is evident from the results, which show that 7.3% of students fall into the high category. Raes (2015) stated that students with high self-compassion are more likely to be reflective about difficult experiences, suppress negative impulses and self-blame, and maintain psychological stability in various contexts (Raes et al., 2015).

In terms of common humanity, these students recognize that failure is a normal experience and not unique to them. However, under high pressure, they can feel isolated and think that "other people are better than me" or "I'm the only one who failed," so their common humanity is not strong enough to completely reduce feelings of shame or guilt. The realization that "everyone makes mistakes" sometimes appears, sometimes disappears depending on the emotional atmosphere at the time (Almisari & Ikhwanisifa, 2023). In the self-knowledge dimension, students with moderate self-compassion can show kindness when faced with minor mistakes, sometimes they can tell themselves that they deserve respect, but for example, when they see

social beauty standards (when classmates are slimmer or more athletic), they may be easily tempted to criticize themselves (Hati, 2022).

In terms of mindfulness, nursing students with moderate self-compassion are usually quite capable of observing their feelings without overly rejecting or ignoring them. They understand that feeling disappointed, afraid, or frustrated is normal. However, when under severe stress, they can become overwhelmed by negative feelings, magnifying problems in their minds, or becoming overly focused on their own shortcomings. Therefore, their mindfulness skills fluctuate, sometimes being quite aware and sometimes being swept away by emotions. Overall, this moderate self-compassion category indicates that these nursing students are on a positive path, but still need to strengthen their consistent self-acceptance, especially when facing high stress. This is a good stage for further development, as they already have a sufficient foundation, namely the knowledge that no human is perfect and are beginning to learn to deal with emotions consciously (Purnawan, 2022).

According to Neff (2011), self-compassion can be defined as the ability to embrace and accept one's circumstances. Therefore, a feeling of self-compassion will help individuals recognize and accept not only their strengths but also their weaknesses, particularly regarding body shape (Purnawan, 2022). Research conducted by Bluth & Blanton (2015); Neely et al. (2009); Zhang et al. (2016); Kroshus et al. (2021), shows that self-compassion influences student well-being and reduces stress levels and other negative emotions. Furthermore, high self-compassion also fosters positive social relationships, as Neff (2023) stated that individuals with self-compassion are more likely to be kind to others (Karinda, 2020).

In this study, self-compassion is influenced by various factors, such as high academic demands, social expectations of the nursing profession, or personal experiences. The nursing environment, which often emphasizes perfection, responsibility, and professional appearance, can also make it more difficult for students to maintain a compassionate attitude toward themselves when they feel they do not meet these standards. This pressure leaves some students struggling to balance the need to achieve with the need to accept their human limitations.

Body Dissatisfaction Level in Second-Year Nursing Students of the Gorontalo Ministry of Health Polytechnic

Based on the results of this study, it was found that the majority of Second-Year Nursing Students at the Gorontalo Ministry of Health Polytechnic experienced moderate levels of body dissatisfaction. This can be seen from the body dissatisfaction scale data, which showed that overall, 73 students (48.7%) fell into the moderate category, 29 students (19.3%) fell into the low category, and 48 students (32%) fell into the high category. The results indicate that Second-Year Nursing Students at the Gorontalo Ministry of Health Polytechnic experienced moderate levels of body dissatisfaction. This means that students sometimes experience internal conflict: on the one hand, they accept their bodies as they are, but on the other, they still desire to change or improve certain aspects of their bodies, such as weight, body shape, height, or facial features.

These feelings can be exacerbated when they compare themselves to peers, browse social media, or wear certain clothing, such as tighter nursing practice uniforms. Dissatisfaction in this moderate category is fluctuating, meaning that in certain situations, they may feel quite confident with their bodies, but at other times, they may feel less confident, depending on the social and emotional context. For example, when hanging out with friends, they may feel comfortable, but when faced with a professional situation that demands a neat and ideal appearance, body dissatisfaction can resurface, making them feel awkward or uncomfortable.

Despite this, body dissatisfaction remains high among college students, at 32%. According to Cash (2016), individuals with high levels of body dissatisfaction perceive their bodies as far from ideal, even though this is not the reality. This mindset, which involves constantly critically evaluating their bodies and frequently comparing themselves socially, can even lead to eating disorders, low self-esteem, depression, and anxiety (Cash, 2016). On the other hand, 19.3% of

students have low levels of body dissatisfaction. This indicates that only a small portion of students have accepted their body appearance and are not judgmental about their body image. Tylka & Wood-Barcalow (2015) stated that individuals with low body dissatisfaction tend to care for their bodies out of self-love rather than social pressure, possess a broad perspective on beauty, and demonstrate resilience to media or social pressure (Tylka & Wood-Barcalow, 2015).

In terms of body image perception, they generally perceive parts of their body as not meeting the ideal standards presented on social media, such as feeling too fat, too short, or disproportionate. However, this perception does not dominate their overall outlook. They still appreciate some aspects of their body, although dissatisfaction sometimes arises in certain situations, such as when looking in the mirror or comparing themselves to others. Comparative perception, on the other hand, creates internal pressure because they indirectly adopt external standards to evaluate their own bodies. The more frequent and intense the comparison, the greater the desire to change their bodies. On the other hand, students in the moderate body dissatisfaction category still recognize that everyone has different body characteristics, although sometimes it remains difficult to completely ignore the urge to compare. In terms of attitudes toward body change, students begin to demonstrate behaviors to improve or care for their bodies, such as following a balanced diet, light exercise, or choosing certain clothing to enhance their appearance.

However, this behavior is still within healthy limits, not to the point of causing extreme behavior such as strict dieting, excessive exercise or avoiding social situations with the main motivation being to improve self-confidence, not because of hatred towards the body (Novita, 2024). According to Fasha, body dissatisfaction is defined as an individual's assessment of their body, related to comparing their perceived body image with others, excessive self-image, self-understanding of their body, and the presence of drastic changes in their body (Fasha, 2023).

This aligns with research conducted by Stronge et al. (2015) in their study, "NetGirls: The Internet, Facebook, and Body Dissatisfaction/Body Image," at a more moderate level among adolescent girls. They found that many individuals felt moderately dissatisfied with their bodies, but this dissatisfaction was not extreme and was often related to external factors, such as social pressure and media-influenced body image. Similarly, research conducted by Cash (2016), leading researchers in the field of body image and body dissatisfaction, is also relevant. In their book, *Body Image: A Handbook of Theory, Research, and Clinical Practice*, they discuss various levels of body dissatisfaction, not just about "loving" or "hating" one's body. There's also a more realistic "middle ground" that can be identified as moderate, where individuals feel there's room for improvement but still accept their bodies (Nindita, 2018).

In this study, body dissatisfaction is influenced by various factors, including the influence of social media, which expects individuals to have a neat, healthy, and ideal appearance. Moderate body dissatisfaction is defined as a person who feels satisfied with their body in certain situations but lacks confidence in others. Although not yet severe, attention to this issue is still important, especially to prevent long-term consequences, such as eating disorders or a reduced quality of life for students.

The Relationship between Self-Compassion and Body Dissatisfaction in Second-Year Nursing Students at the Gorontalo Ministry of Health Polytechnic

Based on the results of the study of the relationship between self-compassion and body dissatisfaction in students of the second-year Nursing Study Program at the Gorontalo Ministry of Health Polytechnic, it is known that the Pearson correlation test results show a Sig. value between self-compassion (X) and body dissatisfaction (Y) of 0.05. If we look at the calculated r value for the relationship between the self-compassion variable and body dissatisfaction, the value is -0.225, while the r table value at the 5% significance level is 0.159, so the calculated r value is greater than the r table value (-0.225 > 0.159). The negative sign in the calculated r value means that the self-compassion variable has a negative (opposite) relationship with the body dissatisfaction variable. Which means that if the level of self-compassion is high, the level of body

dissatisfaction is low, and vice versa. If the level of self-compassion is low, the level of body dissatisfaction is high. Therefore, it was found that there is a significant negative relationship between self-compassion and body dissatisfaction in students of the second-year Nursing Study Program at the Gorontalo Ministry of Health Polytechnic. Thus, the hypothesis in this study is accepted.

This aligns with research conducted by Tolonen et al. (2025), which found that self-compassion in early adulthood is in the moderate category. This indicates that, on average, early adults have fairly good self-compassion. Furthermore, the Body Dissatisfaction variable experienced by early adults is also predominantly in the moderate category. This indicates that, on average, early adults still have poor body image and are dissatisfied with their appearance (Hati et al., 2022). Self-compassion refers to an understanding and kind attitude toward oneself, especially when faced with failure or imperfection. In the context of body dissatisfaction, self-compassion serves as a protective factor that can reduce body dissatisfaction. Individuals with high self-compassion are more likely to accept their bodies, despite their flaws, without falling into excessive self-criticism. Conversely, those low in self-compassion are more likely to feel depressed or disappointed with their physical appearance, which often exacerbates feelings of body dissatisfaction.

Body dissatisfaction is often triggered by comparing oneself to ideal body standards found on social media, in the social environment, or in culture. Self-compassion teaches individuals to stop judging themselves and instead treat themselves with gentleness and understanding. When someone has a high level of self-compassion, they are better able to reduce destructive self-criticism and accept their body flaws as part of the natural human experience. Empirical research has supported that individuals with higher levels of self-compassion exhibit lower levels of body dissatisfaction. Those who develop self-compassion tend to be less affected by external pressure to meet ideal body standards, whether from the media or peers. While not completely eliminating body dissatisfaction, self-compassion helps them mitigate the negative impact of feelings of body dissatisfaction.

Overall, self-compassion has a significant positive effect on reducing body dissatisfaction, both by reducing excessive self-criticism and by increasing body acceptance. By increasing self-compassion, individuals can develop a healthier relationship with their bodies and experience greater psychological benefits, including improved mental and emotional well-being. Therefore, practicing self-compassion is crucial for overcoming body dissatisfaction and improving overall quality of life (Mukhlida, 2024). This is also supported by research conducted by Purnawan (2022), which found a relationship between self-compassion and body dissatisfaction in early adulthood. Based on the results of the Spearman rank correlation test, a correlation coefficient of -0.364 was obtained with a significance value of $0.000 < 0.05$, indicating a negative relationship between self-compassion and body dissatisfaction. These results indicate that the hypothesis in this study is accepted.

CONCLUSION

The relationship between self-compassion and body dissatisfaction in Level II Nursing Students of the Gorontalo Ministry of Health Polytechnic obtained a value of -0.225. While the r table value at a significance level of 5% is 0.159. Therefore, the calculated r value is greater than the r table value ($-0.225 > 0.159$). The negative sign in the calculated r value means that the self-compassion variable (X) has a negative (opposite) relationship with body dissatisfaction (Y). So the higher the self-compassion, the lower the level of body dissatisfaction. Conversely, the lower the self-compassion, the higher the level of body dissatisfaction. This states that the hypothesis in this study is accepted.

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