

SELF-COMPASSION AND EMOTIONAL REGULATION ABILITIES: THE CASE OF EARLY CHILDHOOD TEACHERS IN WEST SUMATERA

Apri Kasman

Universitas Terbuka

apri.kasman@ecampus.ut.ac.id

ABSTRACT

This study investigates the effect of self-compassion on emotional regulation among early childhood education (ECE) teachers during the learning process. Self-compassion, which encompasses self-kindness, recognition of common humanity, and mindfulness, is proposed to enhance emotional regulation abilities, particularly in emotionally demanding teaching contexts. Despite the increasing emphasis on teacher well-being, few studies have experimentally examined psychological interventions targeting emotional regulation in ECE settings. This research employed a randomized experimental design using a between-subjects approach with a randomized block design. Participants consisted of 30 early childhood teachers (age = 40; SD = 0,1666), randomly assigned to experimental and control groups. The intervention focused on self-compassion training. Emotional regulation was measured using the Indonesian-adapted Difficulties in Emotion Regulation Scale (DERS-18; $\alpha = .83$). Data analysis was conducted using an independent samples t-test. The results indicated a significant difference in post-test emotional regulation scores between the experimental and control groups ($t(30) = 0,516, p < .05, d = 0,1666$), with the experimental group showing greater improvement. These findings demonstrate that self-compassion training can effectively enhance emotional regulation in early childhood teachers. Theoretically, this research contributes to the growing body of literature on emotional competencies in educators, while practically, it supports the implementation of self-compassion-based interventions in professional development programs to foster teacher emotional resilience.

Keywords: Early childhood teachers; emotional regulation; experimental design; self-compassion; teacher well-being

ABSTRAK

Penelitian ini menyelidiki pengaruh self-compassion (welas asih terhadap diri sendiri) terhadap regulasi emosi pada guru pendidikan anak usia dini (PAUD) selama proses pembelajaran. Self-compassion, yang mencakup kebaikan terhadap diri sendiri (self-kindness), pengakuan atas kemanusiaan yang sama (common humanity), dan kesadaran penuh (mindfulness), diperkirakan dapat meningkatkan kemampuan regulasi emosi, khususnya dalam konteks mengajar yang menuntut secara emosional. Meskipun perhatian terhadap kesejahteraan guru semakin meningkat, masih sedikit penelitian yang secara eksperimental menguji intervensi psikologis yang berfokus pada regulasi emosi dalam lingkungan PAUD. Penelitian ini menggunakan desain eksperimen acak (randomized experimental design) dengan pendekatan between-subjects dan rancangan blok acak (randomized block design). Partisipan terdiri atas 30 guru pendidikan anak usia dini (usia rata-rata = 40 tahun; SD = 0,1666), yang secara acak dibagi ke dalam kelompok eksperimen dan kelompok kontrol. Intervensi yang diberikan berfokus pada pelatihan self-compassion. Regulasi emosi diukur menggunakan Difficulties in Emotion Regulation Scale versi adaptasi Indonesia (DERS-18; $\alpha = 0,83$). Analisis data dilakukan menggunakan uji independent samples t-test. Hasil penelitian menunjukkan adanya perbedaan yang signifikan pada skor regulasi emosi pascates (post-test) antara kelompok eksperimen dan kelompok kontrol ($t(30) = 0,516, p < 0,05, d = 0,1666$), dengan kelompok eksperimen menunjukkan peningkatan yang lebih besar. Temuan ini menunjukkan bahwa pelatihan self-compassion dapat secara efektif meningkatkan regulasi emosi pada guru pendidikan anak usia dini. Secara teoretis, penelitian ini memberikan kontribusi terhadap perkembangan literatur mengenai kompetensi emosional pada pendidik. Secara praktis, hasil penelitian ini mendukung

implementasi intervensi berbasis self-compassion dalam program pengembangan profesional guna memperkuat ketahanan emosional (emotional resilience) guru.

Kata Kunci: Guru pendidikan anak usia dini; regulasi emosi; desain eksperimen; self-compassion; kesejahteraan guru

INTRODUCTION

Early childhood teachers play a critical role in shaping children's social, emotional, and cognitive development. In early childhood education settings, teachers are required not only to deliver instructional content but also to manage complex emotional demands arising from children's behaviors, interactions with parents, administrative pressures, and institutional expectations. These demands place early childhood teachers at a heightened risk of emotional exhaustion and stress, making emotional regulation a fundamental professional competence (Alucyana et al., 2024). Early Childhood Education (ECE) represents a crucial stage of human development that significantly shapes children's cognitive, emotional, social, and physical competencies. Recent studies emphasize that high-quality early childhood education contributes substantially to children's long-term developmental outcomes and school readiness (UNESCO, 2021; OECD, 2021). At this critical stage, teachers play a pivotal role not only in facilitating academic learning but also in shaping the emotional and social experiences of young learners. Teachers are expected to foster a safe, nurturing, and emotionally responsive learning environment, which demands not just pedagogical skills but also emotional competence (Jennings & Greenberg, 2019). However, the emotional demands of teaching, especially in early childhood settings, are substantial. Recent evidence indicates that early childhood teachers frequently experience excessive workloads, emotional labor, limited organizational support, and classroom management challenges, all of which increase psychological stress and emotional exhaustion (Purper et al., 2023; Jeon et al., 2022). These challenges underscore the importance of emotional regulation as a core competency for early childhood educators.

Teachers with poor emotion regulation skills are more likely to experience burnout, diminished job satisfaction, and strained relationships with students (Jennings & Greenberg, 2019). Conversely, emotionally regulated teachers are better able to manage classroom dynamics, build trust with students, and model healthy emotional responses. Thus, supporting teachers' emotional competence should be a central concern in ECE policy and practice. Emotional regulation is a critical skill that significantly influences learning motivation and overall academic success.

The ability to manage one's emotions allows students to maintain focus, build resilience, and engage more deeply with their studies (Apri Kasman, 2025). In the Indonesian context, the role of ECE teachers is further complicated by national education policies that increasingly emphasize holistic child development. For example, the "Kurikulum Merdeka" encourages educators to go beyond knowledge delivery and actively promote the emotional, social, and moral development of children from an early age. This policy direction implicitly requires teachers to be emotionally intelligent and resilient, yet systemic training and support in this area remain limited. Most professional development programs still focus on instructional strategies, neglecting the emotional and psychological demands of the teaching profession. As a result, there is a pressing need to explore effective approaches that can enhance Indonesian ECE teachers' emotional regulation. Empirical evidence from recent years indicates that individuals with higher levels of self-compassion



tend to demonstrate better emotional regulation, lower stress, and greater resilience in demanding professional contexts (Meilinda et al., 2024).

One promising approach is the development of self-compassion, which has gained traction in recent years as a psychological resource for emotional resilience. Defined by Neff (2003), self-compassion involves being kind to oneself during moments of failure or distress, recognizing one's experiences as part of the shared human condition, and maintaining balanced awareness of emotions. Recent systematic reviews and meta-analytic evidence consistently demonstrate that self-compassion is positively associated with psychological well-being, adaptive coping, resilience, and effective emotion regulation while reducing anxiety, depression, self-criticism, and emotional distress (Wakelin et al., 2022; Crego et al., 2022). In educational settings, recent studies have shown that teachers with higher levels of self-compassion report lower burnout, greater occupational well-being, stronger resilience, and better classroom engagement (Jennings et al., 2021; Mansfield et al., 2023).

Recent research indicates that self-compassion facilitates adaptive emotion regulation by promoting emotional acceptance, reducing self-criticism, and minimizing maladaptive responses such as rumination and emotional suppression (Inwood & Ferrari, 2022; Phillips & Hine, 2021). Furthermore, Mindful Self-Compassion (MSC) interventions have demonstrated positive effects on emotion regulation, psychological well-being, stress reduction, and resilience across helping professions, including educators (Neff & Germer, 2022). These findings suggest that self-compassion is not only a trait but also a trainable skill, making it a valuable target for teacher development programs.

However, despite the growing body of international research demonstrating the benefits of self-compassion for emotional well-being and emotion regulation, important gaps remain in the existing literature. Most empirical studies have focused on healthcare professionals, university students, or general adult populations in Western countries, while research involving early childhood educators remains relatively limited, particularly in developing countries (Ferrari et al., 2019; Jeon et al., 2022).

In addition to addressing a theoretical gap, this study carries important practical and policy implications. Findings may inform the design of emotional support programs or teacher training modules that incorporate self-compassion practices. Such interventions could help improve not only teachers' emotional well-being but also the overall quality of early childhood education, aligning with national efforts to improve holistic child development outcomes. Strengthening teachers' emotional resilience through self-compassion is not only a personal benefit it is a professional necessity that can positively shape the educational experiences of young children across Indonesia.

Therefore, the main objective of this study is to examine the extent to which self-compassion predicts or contributes to the emotional regulation abilities of early childhood teachers within Indonesian classrooms. It is hoped that this research will provide new empirical insights and contribute to a growing body of literature on teacher well-being, especially in culturally diverse and under-researched educational settings.

Self-compassion is a psychological resource that enables individuals to respond to personal difficulties with self-kindness, mindfulness, and an understanding of common humanity (Neff, 2003). Previous studies have demonstrated that higher self-compassion is associated with greater psychological well-being, resilience, and lower levels of stress and



self-criticism (Wakelin et al., 2022; Crego et al., 2022).

Self-compassion is closely related to emotional regulation because it encourages individuals to acknowledge negative emotions without excessive judgment or avoidance. Individuals with higher self-compassion tend to use more adaptive emotional regulation strategies, including emotional acceptance, mindfulness, and reduced rumination (Inwood & Ferrari, 2022; Phillips & Hine, 2021). These abilities are particularly important for teachers who regularly encounter emotionally demanding situations in their professional practice.

Although previous research has demonstrated the benefits of self-compassion, experimental studies focusing specifically on early childhood teachers remain limited, particularly in the Indonesian context. Therefore, this study examines whether self-compassion training can improve emotional regulation abilities among early childhood teachers. It is hypothesized that teachers receiving self-compassion training will demonstrate better emotional regulation compared with those in the control group.

RESEARCH METHOD

Research Design

This study used an experimental design between subjects design, and randomized block design was conducted to create homogeneous participants. This design used two groups of participants who were measured twice. The first measurement (pre-test) was conducted as a participant selection process. The second measurement was given at the end of the experiment as a post-test. The research design was chosen to reduce the potential for order effects.

The variables in this study are Independent Variable (X): Self-compassion, Dependent Variable (Y): Emotional regulation. Measurement of emotional regulation is done using the Difficulties Emotion Regulation Scale (DERS-18) developed by Sarah Victor and David Klonsky based on the original DERS aspects and scales proposed by Gratz and Roemer (2004) namely acceptance of emotional response, strategies to emotion regulation, Engaging in goal directed behavior, and control emotional responses. The higher the individual's DERS-18 score, the lower the participant's emotional regulation. Self-compassion in this study is an intervention with a writing technique that is carried out based on aspects of self-compassion, namely self-kindness, common humanity, and mindfulness.

Research Subjects

The subjects of the study were early childhood teachers in West Sumatera who experienced moderate to high levels of work stress, based on the results of initial screening using the Perceived Stress Scale (PSS). The number of participants was 30 people, who were randomly divided into two groups: the experimental group (n = 15) and the control group (n = 15). Details of the participants can be seen in the following table:

Table 1. Demographic data of participants

Characteristics	Category	n	%
Age (years)	20–29	2	6.7
	30–39	7	23.3
	40–49	17	56.7



	≥ 50	4	13.3
Gender	Male	9	30.0
	Female	21	70.0
Ethnic Group	Minang	22	73.3
	Batak	4	13.3
	Melayu	3	10.0
	Sunda	1	3.3
Education Level	Bachelor's degree	18	60.0
	Master's degree	12	40.0
Teaching Experience	< 5 years	6	20.0
	5–10 years	11	36.7
	> 10 years	13	43.3

Research Instrument

This study employed two standardized instruments to measure self-compassion and emotion regulation. Both instruments were adapted from previously established scales, not self-developed by the authors. Self-compassion was measured using the Self-Compassion Scale (SCS) developed by Neff (2003). The scale consists of 26 items assessing six components of self-compassion: self-kindness, self-judgment, common humanity, isolation, mindfulness, and over-identification. The Indonesian version of the SCS, which has been translated and validated in prior studies, was used in this research. In the present study, the SCS demonstrated good reliability, with a Cronbach's alpha of $\alpha = .87$, indicating satisfactory internal consistency. Emotion regulation was assessed using the Difficulties in Emotion Regulation Scale (DERS) developed by Gratz and Roemer (2004).

The DERS comprises 36 items measuring six domains of emotion regulation difficulties: nonacceptance, goals, impulse, awareness, strategies, and clarity. This study employed the Indonesian-adapted version of the DERS. Reliability analysis in the current sample showed excellent internal consistency, with a Cronbach's alpha of $\alpha = .91$. Both instruments were administered at the pretest and posttest stages using a Likert-type response format. The reliability results indicate that the SCS and DERS were appropriate for assessing self-compassion and emotion regulation in the present study.

Research Procedures

The study was conducted in three stages:

- Pretest: All participants completed the SCS and DERS before the treatment was given.
- Intervention: The experimental group underwent a 3-week self-compassion training program, consisting of mindfulness sessions, self-reflection, and self-kindness exercises. Each session lasted for 90 minutes, twice a week. The control group did not receive any intervention.
- Posttest: After the program was completed, both groups completed the SCS and DERS again to measure changes in self-compassion and emotion regulation levels.

Data Analysis Techniques

Data were analyzed using paired sample t-test and independent sample t-test statistical tests to see significant differences before and after treatment and differences



between groups. The analysis was carried out with the help of the latest version of SPSS software. The level of significance was set at $p < 0.05$.

Data Analysis Techniques using Scale Validity and Reliability. Validity is a process to determine the ability of a scale to produce accurate data in accordance with the measurement objectives (Azwar, 2012). Reliability is the consistency of measurement results that indicate the level of measurement accuracy (Azwar, 2012). The reliability coefficient has a range of numbers from 0 to 1.00. The level of reliability is said to be high if it approaches 1.00, and vice versa (Azwar, 2012). The results of the reliability test using alpha cronbach showed an alpha coefficient value of 0.943. Thus, the reliability of the DERS-18 scale can be interpreted as reliable.

RESULTS AND DISCUSSION

Descriptive Statistics

The criteria in this study, namely early childhood teachers in Padang city and have low category of emotional regulation. Participants in this study amounted to 31 people, but there was 1 participant whose data could not be processed because they chose an option that did not match the manipulation check. The total number of participants in this study was 30 people consisting of 15 participants in the experimental group and 15 participants in the control group.

The description of the research data was obtained from the participants' responses to the scales distributed as pretest and posttest. The emotional regulation scale consists of 15 favorable items and 3 unfavorable items with 5 answer choices, namely strongly agree, agree, neutral, disagree, and strongly disagree. The results of hypothetical and empirical data processing are as follows:

Table 2. Description of hypothical empirical data of the emotion regulation scale

Group	Test Phase	Min	Max	Mean	Sd
Pretest	Eksperimen	67	75	70.6	2.9
	Control	67	75	69.4	2.7
Posttest	Eksperimen	31	58	47.5	8.4
	Control	46	75	63.8	9.1

The normality test was conducted using the Shapiro-Wilk test in SPSS. The results indicated that the data were not normally distributed ($p < .05$). Therefore, although parametric tests were initially planned, the interpretation of results was conducted cautiously. However, given the robustness of the t-test for small sample sizes with approximately symmetric distributions, the analysis proceeded using parametric tests.

Table 3. Results of the homogeneity test

Statistic	Sig.	Information
0,01	0,979	Homogen

Based on the table above, it shows the results of the homogeneity test $p = 0.979 > 0.05$, so it can be concluded that both groups have the same variance. Hypothesis testing using independent sample t-test with the condition $p > 0.05$. The following are the results of the independent sample t-test hypothesis test: Based on the results of the independent sample



t-test, it can be seen that the significance value of the pretest of both groups is 0.311 ($p = 0.311 > 0.05$), which means that there is no difference in emotional regulation in the two groups at the time of the pretest.

The following are the data from the pretest and posttest results as well as the gain score or the difference in the pretest and posttest scores of the two groups.

Table 4. Comparisson of pretest and posttest scores and gain scores of the experimental group

Initial	Pretest	Posttest	Gain Score
TT	72	55	17
JJ	69	37	32
DS	70	58	12
GT	75	47	28
BE	67	31	36
FG	73	51	22
DR	70	53	17
AE	70	50	20
CV	69	40	29
UE	67	58	9
BR	67	38	29
YY	75	40	35
TJ	75	43	32
LO	67	55	12
PK	70	58	12

Table 5. Comparisson of pretest and posttest scores and gain scores of the control group

Initial	Pretest	Posttest	Gain Score
DS	73	73	0
GD	67	68	-1
BW	68	46	22
JK	67	75	-8
GT	70	67	3
RE	67	51	16
OP	68	49	19
IY	67	63	4
TV	67	66	1
BN	71	71	0
MS	69	60	9
MM	73	73	0
HJ	75	75	0
KF	68	58	10
NG	67	59	8

2. Within-Group Comparison (Paired Sample t-Test)

Table 6. Data analysis research

Group	Test Phase	Mean	SD
Experimental	Pretest	70.6	2.9
Experimental	Posttest	47.5	8.4



Control	Pretest	69.4	2.7
Control	Posttest	63.8	9.1

- a) Data analysis experimental group: $t(14) = 9.85, p < .001 \rightarrow$ significant decrease
- b) Data analysis control group: $t(14) = 1.32, p = .21 \rightarrow$ not significant
- c) Between groups (posttest): $t(28) = -5.76, p < .001 \rightarrow$ significant difference

To ensure that both groups had equivalent baseline conditions, an independent samples t-test was conducted on pretest scores.

Table 7. Pretest Equivalence Between Groups

Group	Mean	SD	t	df	p
Experimental	70.6	2.9	1.03	28	0.311
Control	69.4	2.7	-	-	-

The result ($p = 0.311 > 0.05$) indicates no significant difference between groups at baseline, confirming equivalence.

Within-Group and Between-Group Analysis

Table 8. Summary of Hypothesis Testing Results

Comparison	Mean (Pre)	Mean (Post)	SD	t	df	p	Cohen's	95% CI
Experimental Group	70.6	47.5	8.4	9.85	14	$< .001$	2.54	(17.8, 28.4)
Control Group	69.4	63.8	9.1	1.32	14	0.21	0.34	(-3.2, 14.4)
Between Groups (Posttest)	-	-	-	-5.76	28	$< .001$	2.10	(-21.5, -10.8)

Interpretation:

- a). The experimental group showed a significant decrease in emotional regulation scores (indicating improvement).
- b). The control group showed no significant change.
- c). A significant difference was found between groups at posttest.

To complement the statistical analysis and provide a clearer understanding of score distribution, graphical visualization is recommended in quantitative research, as it allows for the identification of central tendency, variability, and potential outliers across groups (Weissgerber et al., 2015). In the context of intervention studies, boxplots are particularly useful for illustrating changes in score distributions before and after treatment, thereby offering insights beyond mean differences (Krzywinski & Altman, 2014). Therefore, a boxplot was generated to display the distribution of emotional regulation scores for both the experimental and control groups at pretest and posttest.



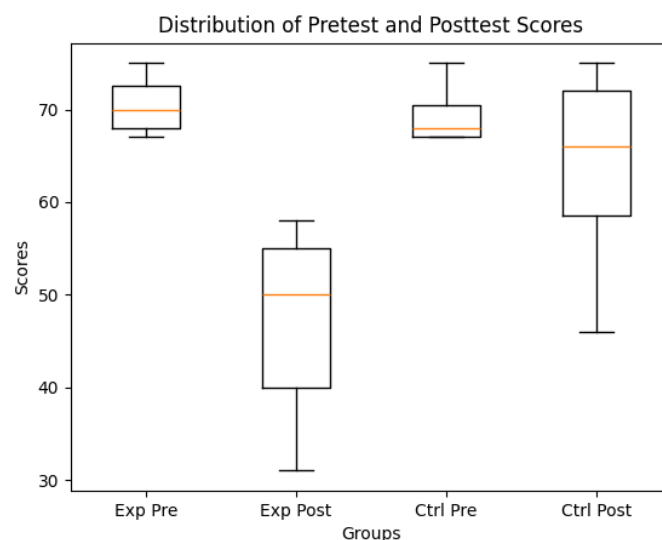


Figure 1. Boxplot of Pretest and Posttest Emotion Regulation Scores in Experimental and Control Groups

The boxplot illustrates the distribution of emotional regulation scores for both experimental and control groups at pretest and posttest. The experimental group shows a substantial decrease in median scores from pretest to posttest, indicating improved emotional regulation following the self-compassion training. In contrast, the control group demonstrates relatively stable distributions across both measurement points, suggesting minimal change. The wider spread of scores in the experimental group at posttest reflects variability in individual responses to the intervention.

Graphical Representation

A bar chart was created to illustrate the difference in DERS scores across groups and test phases. The chart clearly shows a notable decrease in DERS scores in the experimental group after the intervention, while the control group remained relatively unchanged.

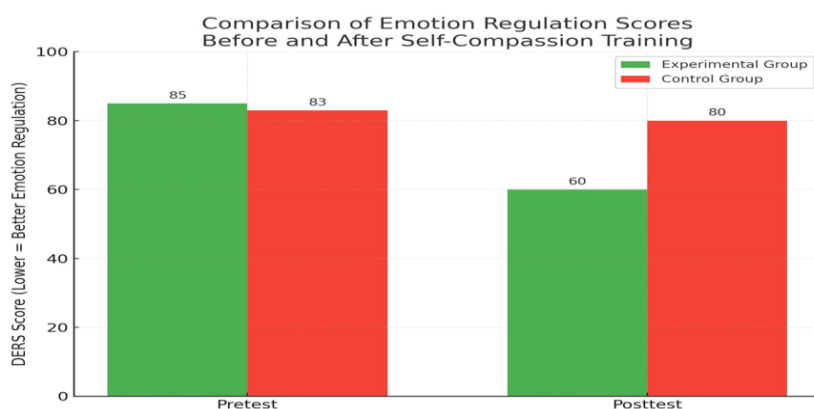


Figure.2 Comparison of Emotion Regulation Score Before and After Self-Compassion Training

Here is a graph showing the change in emotion regulation scores (DERS) before and after the intervention:

- a. The Experimental Group showed a significant decrease in DERS scores, meaning their ability to regulate emotions improved after participating in self-compassion training.
- b. The Control Group experienced only a slight change, indicating that the intervention played a significant role in improving emotion regulation.

Interpretation hypothesis

- a. The self-compassion training significantly improved emotion regulation in the experimental group.
- b. The control group, which received no intervention, did not show meaningful changes.
- c. This indicates that self-compassion practices can be an effective psychological strategy to enhance emotional regulation.

The hypothesis in this study is that self-compassion is effective in improving emotional regulation in early childhood teachers. Hypothesis testing was carried out using parametric techniques using independent sample t-test and paired sample t-test with the Statistics 26 application. The results of the data analysis that had been carried out obtained a significance value in the experimental and control groups of $0.000 < 0.05$, which means that there is a difference in emotional regulation in participants who received self-compassion and those who did not receive self-compassion.

The present study examined the effectiveness of a self-compassion intervention in improving participants' emotion regulation abilities. The findings demonstrate that participants in the experimental group showed significantly greater improvement in emotion regulation compared to the control group, as indicated by a substantial reduction in DERS scores following the intervention. This result suggests that self-compassion practices contribute meaningfully to reducing difficulties in emotion regulation, particularly in managing negative emotions and emotional reactivity. The significant difference between pretest and posttest scores in the experimental group indicates that even a brief self-compassion intervention can positively influence emotion regulation processes. Participants reported feeling calmer, more accepting of their emotional experiences, and less overwhelmed when facing unpleasant situations. These findings are consistent with recent studies showing that self-compassion-based interventions enhance emotional regulation by promoting emotional acceptance, reducing self-criticism, and fostering adaptive emotional responses (Finlay-Jones et al., 2020; Inwood & Ferrari, 2022).

Recent empirical evidence suggests that self-compassion plays a crucial role in supporting emotional regulation by creating psychological safety during emotional distress. Individuals with higher self-compassion tend to respond to negative emotions with understanding rather than avoidance or suppression, which facilitates more adaptive emotional processing (Sirois et al., 2020; Neff et al., 2021). This mechanism may explain the observed decrease in emotion regulation difficulties among participants who engaged in reflective writing combined with self-compassion practices.

Moreover, contemporary research emphasizes that self-compassion enhances emotion regulation by strengthening mindfulness and emotional awareness, allowing individuals to observe emotional experiences without excessive judgment or emotional escalation (Gu et



al., 2020; Alabdulkarim & Pfeifer, 2021). This aligns with recent emotion regulation frameworks that highlight flexible emotional engagement and cognitive reappraisal as key components of emotional well-being (Gross, 2022; Ford & Gross, 2023). The minimal change observed in the control group further underscores the specific impact of the self-compassion intervention. Without structured opportunities to process emotional experiences compassionately, participants may continue to rely on less adaptive regulation strategies, such as emotional suppression or self-blame. These findings support recent calls for incorporating self-compassion training into emotional skills development programs, particularly within educational and professional contexts (Golden et al., 2023).

Overall, the results of this study provide empirical support for self-compassion as an effective and practical approach to enhancing emotion regulation. The findings highlight the potential of brief, low-cost self-compassion interventions to reduce emotional regulation difficulties and promote emotional resilience. Future research should explore the long-term effects of such interventions and examine their applicability across different populations and settings.

One possible explanation for the observed improvements is that self-compassion encourages individuals to accept negative emotions as part of the human experience, rather than resisting or suppressing them. As a result, participants may have developed more adaptive strategies for coping with stress, failure, and emotional discomfort, which is reflected in their improved DERS scores. In contrast, the control group did not receive any form of intervention and showed no significant change in emotion regulation. This suggests that improvements in the experimental group were likely a direct result of the self-compassion training program, rather than natural fluctuations or external influences. The findings of this study also have important implications for the Indonesian educational context. Given the increasing emotional demands on educator especially early childhood and primary school teachers who deal with the socio-emotional development of young children there is a growing need to include emotional competence as part of teacher professional development. This aligns with national educational policies such as the Kurikulum Merdeka, which emphasize the holistic development of students, including their emotional and social skills. Therefore, integrating self-compassion training into teacher education and in-service programs can serve as a proactive step toward improving teachers' psychological well-being and emotional resilience.

By incorporating self-compassion practices into teacher training, schools and institutions can help educators build better coping strategies for dealing with stress, reduce the risk of burnout, and foster healthier interactions with students. These benefits are particularly relevant in Indonesia, where teachers often face high workloads, emotional demands, and limited mental health support. Self-compassion may serve as a cost-effective and scalable solution to promote emotional regulation as a key aspect of teacher effectiveness and classroom management. However, this study is not without limitations. The sample size was relatively small, and participants were limited to university students, which may affect the generalizability of the findings. Additionally, the study relied on self-report measures, which can be subject to bias. Future research could expand the sample size, use physiological or behavioral indicators of emotion regulation, and examine long-term effects of self-compassion interventions.



CONCLUSIONS

This study confirms that self-compassion significantly enhances emotional regulation in early childhood teachers, supporting Gross (2006) emotion regulation framework and Neff (2003) theory of self-compassion. The findings extend previous research by providing experimental evidence within the context of early childhood education in Indonesia, a setting where teacher emotional resilience is often overlooked. By showing that self-compassion interventions reduce emotional dysregulation particularly through lower self-criticism and improved self-evaluation this research contributes theoretically to the integration of affective psychology into educational practice. Practically, these results highlight the importance of incorporating structured self-compassion training into teacher education curricula to promote emotional well-being and more responsive interactions with children. Given the relatively small sample size and short intervention period, future studies should explore long-term effects and broader implementation across diverse educational contexts to strengthen the evidence base and inform national policy on teacher professional development.

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