



Öz-Şefkat Becerisinin Covid-19 Kaygısı ve Yalnızlık ile İlişkisinin İncelenmesi

Examining the Relationship of Self-Compassion Skill with Covid-19 Anxiety and Loneliness

ÖZET

Bu çalışmanın amacı, öz-şefkat becerisinin önemini ortaya koymaktır. Öz-şefkat becerisine sahip veya öz şefkat becerisi yüksek olan kişilerin acı, kaygı, öfke gibi duygulara bakış açısı değişmektedir. Son dönemde yaşanan koronavirüs pandemisi, pandemi ve değişen koşullarla yalnızlaşan bireylerin öz şefkat becerisine ihtiyaçları artmaktadır. Bu araştırma ile öz şefkat, Covid-19 Kaygısı ve yalnızlık arasındaki ilişkiler incelenmektedir. Araştırma modeli olarak ilişkisel tarama modeli kullanılmıştır. Covid-19 Kaygısı, öz şefkat, duygusal ve sosyal yalnızlık ölçeklerinden oluşan anket 350 kişiye yöneltilmiştir. Toplanan anket yanıtları SPSS 24 ile analiz edilmiştir. Analizlerde %95 güven aralığı esas alınmıştır. Öncelikle kullanılan ölçeklerin güvenilirliğinin ve iç tutarlılığının analizi için tüm alt boyutlar ve ölçekler bazında Cronbach's Alpha katsayıları hesaplanmıştır. Buna göre, Covid-19 Kaygısı, öz şefkat ile duygusal ve sosyal yalnızlık ölçeklerinin güvenilirlik katsayıları sırasıyla (.962), (.766) ve (.872) şeklinde hesaplanmıştır ve tüm ölçekler yüksek güvenilirlik skalasında yer almıştır. Değişkenler arasındaki ilişkinin incelenmesi için korelasyon analizi yapılmıştır ve yorumlanmıştır. Korelasyonlar $p < .05$ elde edildiğinden dolayı anlamlı bulunmuştur. Buna göre, bireylerde öz şefkat becerisi arttıkça Covid-19 kaygı düzeylerinde azalma olmuştur. Öz şefkat becerisinin artmasıyla iyi hal ortaya çıkmaktadır. Bu çalışma ile öz-şefkatin kaygı gibi olumsuz duygular söz konusu olduğunda onlar üzerinde olumlu etki yapabileceği gösterilmiştir. Yapılan regresyon analizi sonuçları da göstermiştir ki öz-şefkat becerisi değişkeni Covid-19 Kaygısını anlamlı bir şekilde yordamaktadır. Kaygının azalması öz-şefkatin artmasıyla sağlanabilmektedir.

Anahtar Kelimeler: Covid-19 pandemisi, Kaygı, Şefkat, Yalnızlık.

ABSTRACT

The purpose this study is to reveal the self-compassion skill. To monitor the perspective of people with self-compassion skills or high self-compassion skills on emotions such as pain, anxiety, anger. The need for self-care skills of individuals who are alone with the recent coronavirus pandemic, pandemic and conditions is increasing. The aim of this research is to examine the relationships between self-compassion, Covid-19 anxiety and loneliness. The questionnaire consisting of Covid-19 anxiety, self-compassion, emotional and social loneliness scales was directed to 350 people. Collected survey responses were analyzed with SPSS 24. The analysis was based on a 95% confidence interval. First of all, Cronbach's Alpha coefficients were calculated on the basis of all sub-dimensions and scales to analyze the reliability and internal consistency of the scales used. Accordingly, the reliability coefficients of the Covid-19 anxiety, self-compassion, and emotional and social loneliness scales were calculated as (.962), (.766) and (.872), respectively, and all scales were included in the high reliability scale. Correlation analysis was performed and interpreted to examine the relationship between the variables. The correlations were found to be significant as $p < .05$. Accordingly, as individuals' self-compassion skills increased, their covid-19 anxiety decreased. With the increase in self-compassion skills, good behavior emerges. This study showed that self-compassion can be a tool when it comes to negative emotions such as anxiety. The results of the regression analysis also showed that self-compassion skill predicted anxiety. Reduction in anxiety can be achieved by increasing self-compassion.

Keywords: Covid-19, Anxiety, Compassion, Loneliness

INTRODUCTION

Covid-19 pandemic, which broke out in 2019 and influenced the whole world, had several physical, psychological and social impacts on people and these impacts still continue. The rapid transmission of coronavirus at the onset of the pandemic, the constant evolution of the virus and the increase in its variations caused a decrease in the social relationship of people. The necessity of staying at home, the isolation processes and hygiene concern have caused people to feel anxiety. In addition, the fact that some people pay utmost attention to protective measures at familial, workplace and social environments and take the virus very seriously whereas some do not take care of it the same way have caused interpersonal conflicts. However, the death cases, the intensive care cases, the fear of losing loved ones or of dying, the disease itself and some ongoing disorders in people after the disease due to Covid-19 disease also brought along the anxiety, trauma, stress, mood disorders (Şahin, M., 2019). Some people have tended to isolate themselves, that is to say, to loneliness to protect themselves from such cases.

Loneliness is one of the most intense feelings that people may experience recently. It is thought that the loneliness feeling is experienced in almost every developmental period and people are exposed to the negativities brought by

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loneliness experience especially in their adulthood. People experience a feeling of loneliness to a greater or lesser extent at any point in their lives. Loneliness is the most hurtful feeling of all human experiences, which emerges in cases where the intimacy need of the person is not met (Sullivan, 1953). It is not easy to immediately identify whether people are alone, to detect quickly and precisely in one fell swoop. Because loneliness is a state and emotion, so a person feels or does not feel alone; that is, it is not possible to detect loneliness externally (Tufan, 2003). Loneliness is the feeling of not being understood emotionally when there are people around the individual, the need to be understood or the psychological needs that will come from another person cannot be met. It is estimated that one in four people experience loneliness for some time (Perlman, 1988). Loneliness is associated with many psychological and physical disorders (DiTommaso and Spinner, 1997). Given the concepts such as loneliness and anxiety, self-compassion concept is considered as a beneficial alternative for psychological well-being (Rosenberg, 2000). When the results of the studies performed are examined, self-compassion is seen to be in a positive relationship with many concepts such as self-acceptance, happiness, being positive, optimism, life satisfaction, social interest, awareness, personal development. However, self-compassion is found to have a negative relationship with concepts such as anxiety, depression, self-criticism, thought pressure and neurotic perfectionism (Neff, 2003'a, 2003'b; Neff et al., 2005). Self-compassion can be defined as the state that the individual is open to the feelings that cause him/her to experience pain and distress, approaches him/herself with caring and loving attitudes, is sympathetic towards his/her inadequacies and failures and accepts his/her negative experiences as a natural process of the human life (Neff, 2003'a).

Covid-19 Anxiety

Coronavirus pandemic (Covid-19) broke out in 2019 in Wuhan state affiliated to Hubei state of China and then it spread to every continent, except for Antarctica, causing it to be named as pandemic (Wang, Di, Ye and Wei, 2020). The virus has caused a disease, which leads to severe acute respiratory infections and the fatal effect of which increases with the advancing age (Çobanoğlu, 2020: 37).

Covid-19 pandemic was anticipated to be over when the societies were immunized against the disease and it was reported that vaccination would play a key role in this regard. As the result of the intensive studies performed by the scientists, many vaccines were developed against Covid-19 and vaccination started in December 8, 2019 in the world and in January 14, 2021 in Turkey. As the result of vaccination, the pandemic gradually lost its effect, but is not yet completely over.

According to the data from a survey study, 53.4% of the participants rated the psychological effect of the pandemic as moderate to severe: 16.5% of the participants reported moderate-to-severe depressive symptoms, while 28.8% reported moderate-to-severe anxiety symptoms and the remaining portion reported moderate-to-severe stress levels. In addition, it is seen that Covid-19 anxiety decreases with increasing age, and Covid-19 anxiety and high values are observed in the range of 41-50 and 51-60. The reason for this is thought to be that people in these age groups have elderly parents and children who are actively involved in social life (Şahin, Tetik Küçükkelçi, 2020). According to the data from a survey conducted in China when the Covid-19 pandemic first broke out, the approximately one third of the responders was seen to have a moderate-to-severe anxiety for the virus that caused the disease (Wang et. al., 2020).

The fact that the disease is widespread this much and Covid-19 risk has continued for a long time, that the transmission rate of the virus is high due to mutation despite decrease in the mortality rates in those who are vaccinated, that the mortality rates have increased again in those who have not been vaccinated or have not completed their vaccination, and that the risks continue causes an increase in the stress, psychological problems and anxiety incidences in individuals.

Self-Compassion Skill

Increasing the number of the self-protection alternatives of the individuals is thought to be critical in order to alleviate or prevent psychological problems that may occur in the society in these times when the negative situations such as pandemics, natural disasters etc. are prevailing (Pablo et al. 2020). At this point, self-compassion concept, which may support the individuals in dealing with certain fears, springs to mind. Briefly, self-compassion can be described as the capability of the person to be a friend of him/herself. It is the state that the person shows support, care, grace, understanding and patience to him/herself as well in the same way that s/he shows to a very close friend when s/he goes through tough times, is in trouble or has difficult emotions. Self-compassion does not mean self-indulgence, selfishness, self-pitying, self-confidence or carelessness. Self-compassion means the individual's being kind and understanding towards him/herself, instead of judging him/herself mercilessly for inadequacies, defects and mistakes. It is stated that self-compassion is the key to mental health, and is in a close relationship with openness to others and empathy (Atalay, 2019).

Self-compassion can be defined as the state that the individual is open to the feelings that cause him/her to go through suffering, pain and distress, approaches him/herself with caring and loving attitudes, is sympathetic towards his/her inadequacies and failures and accepts his/her negative experiences as a natural process of the human life (Neff, 2003'a). According to this definition, self-compassion is seen to be composed of three main components, namely self-kindness, common humanity approach and awareness.

First of all, *self-kindness* means the individual's trying to understand him/herself with no prejudice, and approaching all defects with kindness and grace, instead of judging him/herself. The people do not always get what they want, everything may not be the way that the person desires or everyone may not behave the way that the person desires. Thus, when the expectations of the person are not fulfilled, suffering, stress and disappointment may occur. When the reality is accepted with sympathy, grace, kindness and love, a great emotional calmness is achieved. In the literature, there is judgment concept versus self-kindness (Neff, 2003'a).

Second one is *common humanity approach*. Common humanity approach means that the suffering experienced and the personal inadequacies are for all humanity. There are states of being mortal, sensitive and faulty within the definition of being human. Everybody suffers, everybody has defects and everybody may be distressed. In case that such awareness is achieved, when a person has faced with experiences causing failures, pain and distress, it is seen that all such experiences are a part of humanity experiences, instead of self-judgment and isolation tendency (Neff, 2003'b). This inevitable common ground that the mankind possesses emphasizes the ties and links of the ego of the person with other people and of the people with each other (Kirkpatrick, 2005). Common humanity approach is opposed to isolation.

The third component of self-compassion is *awareness*. Self-compassion requires not ignoring, suppressing, exaggerating our negative feelings, and having a balanced attitude towards them. The balanced attitude allows us to see our tough negative states as they are, clearly and with awareness. Mindfulness is an open mind state in which the person observes his/her thoughts and feelings without attempting to suppress or deny them (Neff, 2003'b). Martin (1997) defined this concept as "a state of psychological freedom that occurs at times when the attention of the individual is calm and flexible without being stuck to any point of view". The individual with a high level of awareness accepts the personal experiences "as they are", not as good-bad or healthy-unhealthy, because the person cannot ignore the pain and feel sympathy at the same time.

Although these three components of self-compassion differ in terms of meaning, they are in interaction with each other. Improving one of them also improves the others. The studies performed state that the awareness is of prime importance, that the awareness has a positive impact on the approaches of the people towards their negative experiences, and that it helps them develop the feelings of self-kindness and common humanity sense (Neff, 2003'b). Furthermore, nonjudgmental awareness state reduces self-criticism and makes it easier for the individual to understand him/herself, thus self-kindness development is supported (Jopling, 2000).

Emotional and Social Loneliness

Today, rapidly changing culture, familial and business life, social life, developing technology, decrease in socialization because of technology, the prolongation of human life, individualization, urbanization and alienation that occurs at the same time, and isolation cause the people to experience loneliness. Throughout their lives, people may experience loneliness at any time of their lives. In his study in 1953, Sullivan defines the loneliness as the most hurtful situation that occurs when the intimacy need of the person is not met. In another source, the loneliness is defined as "unpleasant psychological state that occurs in the social relationships of the person quantitatively or qualitatively" (Peplau and Perlman, 1988). Kozaklı (2006) defines loneliness as "a danger that causes the person to experience pain and distress and occurs against the psychological, physical and social integrity of the person".

Many current definitions of loneliness show that loneliness is an unpleasant feeling and disincensive and sorrowful experience that may yield primarily severe results (Peplau and Perlman, 1988). Loneliness handled as experience is also associated with many psychological and physical disorders (DiTommaso and Spinner, 1997). Determining whether people are alone or not is not easy. Because loneliness is a state, a feeling, it is not easy to detect from outside (Tufan, 2003). Loneliness is the feeling of not being understood emotionally when there are people around, the need to be understood or even support from another person may not be able to meet this need. Studies show that the loneliness is associated with the concepts such as worry, anxiety, alcohol dependency, dissatisfaction, psychosomatic disorders, self-respect, unhappiness, sense of alienation, not being understood, alienation, depression (Goodwin, Cook and Yung, 2001).

Literature mentions two types of loneliness, namely emotional and social. Both types of loneliness include deprivation. Emotional loneliness is caused by the failure of a person to establish intimacy with another person or to lack of an attachment relationship. Social loneliness means that the person cannot have a social relationship.

Covid-19 Anxiety and Self-Compassion Skill

When the literature was reviewed, no studies on the association of Covid-19 anxiety with self-compassion were found. It is thought that the studies on Covid-19 fear and self-compassion have a supportive nature.

It is found in the studies performed that self-compassion reduces Covid-19 fear and also prevents the occurrence of mental disorders such as depressed mood and anxiety, which may be resulted from the fear. It is important to increase the self-compassion levels of the individuals and support the individuals emotionally at these times when there is a big risk factor such as COVID-19 for mental well-being. It has been found in international and national literature that the studies on this subject are limited in number, and that there are no supportive studies in this regard (Özer, Şahin Altun, 2022). In this study, the relationship between sub-dimensions of the self-compassion skill and Covid-19 Anxiety was also examined.

H₁: There is a relationship between Covid-19 Anxiety levels of the people and their self-compassion skills.

Covid-19 Anxiety and Emotional & Social Loneliness

In the literature, no studies in which Covid-19 Anxiety was associated with loneliness were found. However, in a study on students going through Covid-19 experience, it was found that the results of this experience had a negative effect on psychological resilience of the students, and this isolated them. The individuals' not losing their purpose of life or their getting over their anxieties towards the future is important for their psychological health and for their elimination of the sense of loneliness (Çetin, Anuk, 2020).

H₂: There is a relationship between Covid-19 Anxiety levels of the people and their loneliness.

Self-Compassion Skill and Emotional & Social Loneliness

A negative relationship was found between self-compassion skill and loneliness in a study on adolescents in the literature. This finding shows that the adolescents who cannot forgive themselves tend to isolate themselves by feeling that they are not worth being forgiven either and withdrawing themselves from social relationships (Karataş, Uzun, 2021).

H₃: There is a relationship between self-compassion skill of the people and their loneliness.

METHOD

Necessary permissions regarding the scales used in the study were obtained. Besides, the study was certified ethically.

Method

The study is a descriptive study with survey model. As this study intends to analyze the situation between "The Relationship of Self-Compassion Skill with Covid19 Anxiety and Loneliness", descriptive survey model was used. The survey models are a model that is suitable for the studies intending to describe a situation, which has existed in the past or is still existing, as is (Karasar, 2019).

The data were collected via an online questionnaire. SPSS program was used to analyze the data collected. Correlation analysis was used to examine the relationship between variables. In addition, t-tests and variance analysis were used for the analysis of the difference that was caused by demographic features.

Sample

Convenience sampling technique was used as the sampling method. A questionnaire study was carried out with 350 volunteered participants between July 2022 and September 2022 through the Internet.

Table 1: Demographic Features of Participants

		N	N %
Age ranges	20 and below	69	19.7%
	21 to 30	157	44.9%
	31 to 40	61	17.4%
	41 to 50	42	12.0%
	51 to 61	21	6.0%
Gender	Female	273	78.0%
	Male	77	22.0%
Marital status	Married	98	28.0%
	Single	187	53.4%
	With partner	39	11.1%
	Single	26	7.4%
Diagnosed with Covid-19	Yes	120	34.3%
	No	230	65.7%

The ages of 44.9% of the participants range between 21 and 30. Females consist of 78% of all samples. The number of participants whose marital status is single is 187. 120 study participants were diagnosed with coronavirus and consist of a portion of 34.3% of all samples.

Data Collection Tools

Three different scales were used in the study, namely the self-compassion, social and loneliness, and Covid-19 Anxiety scale. Necessary permissions for using the scales were obtained.

Self-compassion scale was developed by Kristen Neff in 2003 as 26 items and 6 sub-dimensions. The study of adapting to Turkish was performed in 2007. Accordingly, the scale has 6 dimensions and 26 items, which is consistent with the original version. These dimensions are self-compassion and self-judgment consisting of five items each; sense of sharing, isolation, awareness and over identification consisting of four items each. The scale is evaluated with 5-point likert scale. The scores that can be obtained from the scale vary between 26 and 130. Mean scores of six sub-scales give mean total self-compassion (Akin, Akin, Abacı, 2007).

Covid-19 Anxiety scale was developed in 2021 with 22 items and 4 sub-scales in order to be able to measure the anxiety level that people go through due to the pandemics (Şahin, Tetik Küçükkelçi, 2021). The dimensions are "Objective and Neurotic Anxiety" dimension consisting of 12 items, "Anxiety of Contacting People" dimension consisting of 5 items, "Compulsive Behavior" dimension consisting of three items and "Sleep Hygiene" dimension consisting of 2 items. The scale is evaluated with 5-point likert scale. As the scores that can be obtained from the scale increase, the anxiety levels also increase.

The social and loneliness scale was, on the other hand, developed by DiTommaso and Spinner (1997) in order to measure the feeling of loneliness, in a way to be consistent with Weiss's (1973) distinction between the experience of emotional isolation (emotional loneliness) and social isolation (social loneliness) and as multi-dimensional based on the theory. The scale consists of 15 items and 3 sub-dimensions in total (Di Tommaso, 1997). The Turkish adaptation was made by Akgül (Akgül, H., 2020). The Turkish version of the "Social and emotional loneliness scale for adults" is compatible with the original scale. The scale is evaluated with 7-point likert scale. The scale is answered by checking the option that is thought to express the person in the best way. The scores to be obtained from the scale vary between 15 and 105.

STATISTICAL ANALYSIS

The data collected in the study were analyzed by using SPSS 24 and the tables were interpreted. In order to determine the reliability and internal consistency values of the scales used in the study, Cronbach's Alpha coefficients were used. The correlation analysis was performed for the relationship between scales, and regression analysis was performed for modeling the cause and effect relationship.

Findings

Reliability and Internal Consistency

The scale used in a study and the validity and reliability of the scales are very important for study results. The scale(s) should be tested in terms of the reliability and validity before using. Accordingly, the reliability is an indicator of how carefully the questions used to measure a variable are answered (Özdoğan, Kalemci, Tüzün, 2007). In this study, the coefficients of Cronbach's Alpha model will be used while performing Reliability Analysis.

Cronbach's Alpha coefficient can also be defined as the fit value depending on the correlation between the questions. In case that the value of the Cronbach's Alpha coefficient is (.70) and above, the scale is considered as reliable (Kalaycı Ş., 2006).

Table 2: Cronbach's Alpha Values of Scales

Scales	Item Number	Cronbach's Alpha Value
• Covid-19 Anxiety	22	.961
• Loneliness	15	.766
• Self-Compassion Skill	26	.663

Covid-19 Anxiety scale used within the scope of the study consists of 22 items and is included in the very reliable range with confidence coefficient (.961); and the loneliness scale consists of 15 items and is included in the highly reliable range with confidence coefficient (.0766). Self-compassion skill scale consists of 26 items and is included in the reliable range with the confidence value (.663). The reliability and internal consistency values of all scales used for the study are high and reliable.

Correlation Analysis

Correlation coefficient is a tool used for the determination of the magnitude and direction of the changes of two scales, but does not establish a cause and effect relationship in any way. The minimum value that the correlation coefficient can take is -1, and the maximum value is +1 (Büyüköztürk, Ş. 2017). The results of the correlation analysis performed to test the hypotheses of the study are presented in Table 3.

Table 3: Correlation Analysis Results of Variables

		WA	SD	1	2	3
1	Self-Compassion	2.9703	0.65421	1		
2	Covid-19 Anxiety	53.520	20.8847	-0.241*	1	
3	Loneliness	47.331	18.4045	0.315**	-0.279*	1

**p<0.01, *p<0.05

The result of the correlation analysis show that there is a negative relationship between covid-19 anxiety levels of the participants and their self-compassion skills ($p<0.05$: $R=-0.241$); and a positive relationship between the self-compassion skill and loneliness ($p<0.01$: $r=0.315$). In this case, H_1 and H_2 hypotheses are accepted. In addition, a negative relationship between Covid-19 Anxiety levels and loneliness ($p<0.05$: $r=-0.279$) was found.

As the Covid-19 Anxiety scores of the people has increased, their loneliness has decreased. However, as the self-compassion skill has increased, the loneliness of people has also increased.

Regression Analysis

Regression analysis is an analysis that expresses the relationship between the variables mathematically. It is necessary to make an independent and dependent variable separation between variables that are interrelated. The models established in the study are given in Table4.

Table 4: Regression Analysis Results of Variables

Dependent Variable	Predictor Variable	β	B	t	R^2
Covid-19 Anxiety	Self-Compassion Skill	-0.241	-3.545	-2.085	0.06
Loneliness Level	Self-Compassion Skill	0.315	8.849	6.182	0.09
Covid-19 Anxiety	Loneliness Level	-0.130	-0.136	-2.256	0.08

**p<0.01, *p<0.05

As Covid-19 Anxiety levels increase, the self-compassion skill decreases in the individuals. The decreased self-compassion causes an increase in the anxiety of people in case of a disease. When the individuals show compassion towards themselves in the same way that they show to a very close friend, their anxiety decreases.

CONCLUSIONS AND DISCUSSION

This study focuses primarily on examining the attitudes of the individuals about self-compassion, loneliness and Covid-19 Anxiety concepts. As the result of the correlation analysis, significant relationships were found between self-compassion skill, and coronavirus anxiety and loneliness. Self-compassion skill has a positive effect on social loneliness in the individuals. This result also shows parallelism with the study performed by Karataş and Uzun in 2021 on adolescents. Self-compassion concept is the condition that the individual is open to his/her own suffering, does not avoid it and is not unrelated, but that s/he feels a desire to reduce his/her pain and agony, heals him/herself with compassion and understand the feeling of inadequacy and failure, which s/he considers as experience, without judging them (Deniz, Kesici and Sümer, 2008; Eliüşük, 2014) Besides, self-compassion is also described in the literature as the ability of the people to show the positive behaviors that they show to a suffering loved one also to

themselves in the face of any difficult situation. This also supports the fact that the self-compassion is related to a social loneliness. It has been found that there is a positive correlation between loneliness, and the self-kindness, which is one of sub-dimensions of self-compassion, and self-judgment. The self-kindness concept is the opposite of negative judgment of one's own self. The individual facing negativities in the life tend to blame him/herself. Individuals with high self-compassion are moderate and understanding towards themselves instead of criticizing themselves in troubled situations. Self-kindness, which is one of the sub-dimensions of self-compassion, and awareness are associated with Covid-19 Anxiety. The results obtained show that the anxiety increased with the increased awareness, but the anxiety decrease with the increased self-kindness. This result is one of the significant results for literature.

It is important to increase the number of studies on the self-compassion skill, to be able to promote the self-compassion more, and to be able to promote the studies that may be performed in order to increase the skill.

The factors in the decrease of self-compassion and in the emergence of negative criticisms and feelings:

A significant portion of the people criticizes themselves mercilessly even if they do not show this outwardly. During their childhood, they internalize the behavior, thought and feelings of their parents and authority figures and record this to their ego states, and retrieve and play these records in the face of a failure and criticize themselves even more than their parents.

- ✓ The most important reasons for this include the high expectations of the parents from the child, which exceed the strength of the child. When they cannot fulfill these expectations, the fear and anxiety of losing the love of their parents increase in children.
- ✓ For this reason, the children strive to be successful, to be perfect, to please the others and to be strong, even if this exceeds their strength. However, the children who are criticized when they cannot fulfill the high expectations perceive themselves as inadequate, imperfect and helpless, and think that all the negativities occur because of them.
- ✓ The individuals who internalize these decisions, turn them into a life style and life fiction and record them to the ego state lose their self-esteem in cases that exceed their strength and capabilities, beat and criticize themselves mercilessly, go through physical tensions for the fear of being perceived as helpless and inadequate, and their anxiety levels increase.

SUGGESTIONS

What to do to increase the self-compassion skill and decrease the negative feelings and anxiety:

Training should be provided to the parents to increase their self-compassion skills:

In order to improve the self-compassion skills of children and to make them turn the negative situations to positive, the parents should be provided with the training below:

- ✓ To accept the children unconditionally, to respect their existence, and to acknowledge their existence even when they make mistakes,
- ✓ To acknowledge the existence of the children who engage in undesired behaviors, explaining them why that behavior is unacceptable with its justification,
- ✓ To make the children feel their subjective existence and uniqueness, without comparing them with the others,
- ✓ To provide the children with environments in which they can make choices according to their own interests and desires, and they can realize the self-discovery period while continuing their developmental journey,
- ✓ The guide the children while they are realizing their innate potentials and fulfilling their duties in the zone of proximal development, to provide them with positive messages as they succeed in the duties in the zone of proximal development and put forward their potentials

Awareness training should be provided to adults:

- ✓ Training in which the individuals facing with negative situations during the adulthood realize that their life fictions and their way of thinking cause emotional, behavioral and physiological problems as well as become aware of their positive and negative way of thinking,
- ✓ Training in which they can evaluate their way of thinking, can come up with alternative thoughts instead of automatic thoughts and beliefs about the emerging situation, can try solution methods by which they can change the negative situations they face with, to develop new approaches in this regard and they can notice their childhood fictions should be provided.

When the above-mentioned conditions are met, the children and adults will be able to gain the ability to be healthy individuals who do not judge themselves, have self-esteem, embrace their success and failures, show self-compassion in the negative situations and say “I Am OK, so the Others Are OK”. The individuals with a high level of awareness about the present situation will be able to “acknowledge their personal experiences here and now as they are, not as good-bad or healthy-unhealthy, and show themselves self-compassion by accepting the behaviors they show as well as their thought and feelings”.

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