

“Just The Way You Are”: Self-Compassion, Community Social Support & Self-Acceptance of Parents with Down Syndrome Children

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Abstract

Parents with down syndrome children often experience difficulties in the process of self-acceptance of their child's special needs. Parents cover up the child's condition from society, alienate child from social activities, do not facilitate with required therapy, eventually impact on general parenting given. Parents who moved by child's need open to join community with other parents with down syndrome children as necessity for social support. Internally, parents who are able to accept weaknesses and strengths of their children are one of the characteristics of self-compassion. This study aims to analyze the impact of self-compassion, community social support to parents' self-acceptance. Using quantitative research methods with likert scales consist of self-compassion, community social support and self-acceptance scale which analyzed with multiple regression technique and purposive sampling with 50 respondents involved. The results showed that self-compassion and community social support contribute to self-acceptance of parents with down syndrome children by 52.8 % ($p < 0.01$). Separately, community social support had 39.9% impact, while self-compassion had 43.9% impact to self-acceptance of parents with down syndrome children.

Keywords

down syndrome children, community social support, self-acceptance, self-compassion

Abstrak

Orang tua dengan anak *down syndrome* seringkali mengalami kesulitan dalam proses penerimaan diri terhadap kondisi anak. Tidak jarang orang tua menutupi kondisi anak dari lingkungan sosial. Orang tua yang mampu menerima segala kekurangan dan kelebihan anak menjadi salah satu ciri *self-compassion*. Selain itu, perasaan kesamaan situasi dengan orang tua lain yang memiliki anak *down syndrome* dalam sebuah komunitas memberikan rasa dukungan sosial. Penelitian ini bertujuan menganalisis pengaruh *self-compassion* dan dukungan sosial komunitas terhadap penerimaan diri orang tua dengan anak *down syndrome*. Instrumen penelitian menggunakan tiga skala jenis likert yaitu skala *self-compassion*, skala dukungan sosial komunitas dan skala penerimaan diri orang tua. Metode penelitian kuantitatif dengan teknik *purposive sampling* melibatkan 50 responden. Analisis hipotesis dengan regresi berganda. Hasil penelitian menunjukkan *self-compassion* dan dukungan sosial komunitas berpengaruh terhadap penerimaan diri orang tua dengan anak *down syndrome* sebesar 52.8% ($p < 0.01$). Secara terpisah, dukungan sosial komunitas berpengaruh sebesar 39.3% dan *self-compassion* sebesar 43.9% terhadap penerimaan diri orang tua dengan anak *down syndrome*.

Kata kunci

anak *down syndrome*, dukungan sosial komunitas, penerimaan diri, *self-compassion*

Article Info

Artikel History: Submitted: 2021-11-02 | Published: 2021-12-30

DOI: <http://dx.doi.org/10.24127/gdn.v11i3.4382>

Vol 11, No 3 (2021) Page: 171-181

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INTRODUCTION

The presence of children in marriage is an enhancer of happiness, satisfaction and love (Patmonodewo, 2001). Children with healthy condition is a source of happiness for parents and an indicator of satisfaction in marriage (Wismanto, 2012). Every child is born with various conditions. Some were born in a healthy condition physically and mentally, but some children were born with specific developmental disorders, such as autism, cerebral palsy, microcephaly and down syndrome. Children who experience developmental disorders are often known as children with special needs.

One of the developmental disorders of children is down syndrome. Down syndrome is an inherited genetic disorder caused by an error in the division of embryonic cells which usually produces two copies of chromosome 21, while down syndrome produces 3 copies of chromosome 21 which results in babies born with excess chromosomes (Kementerian Kesehatan, 2019). Parents of children with down syndrome is frequently did not prepare nor equipped enough to see how their child is doing compared to other children with down syndrome (Layton, 2004). The case of children with down syndrome in Indonesia increased every year. Since 2010, Riset Kesehatan Daerah (Riskesda) has recorded 0.12 percent of children born with down syndrome, increasing to 0.13 percent in 2013, reaching 0.21 percent in 2018 and increasing until the end of 2020 (Aminia, 2020).

Parents' worrying attitude begins with negative view of society regarding the limitations of children with down syndrome (Mangunsong, 2011). Parents did not provide education, abandoned children and also did not provide good service to children with special needs. This happen for several reason such as, school does not want to accept children with special needs or the schools that willing to accept are far from homes (Maisarah et al., 2018). Parents tend to reject the child's condition resulting in withdrawing children from the social environment to cover up the children's condition. In addition, parents become less concerned about children's development, thus showing less supportive parenting styles. This causes child development to be increasingly stunted and exacerbated by not providing therapy or education that is tailored to the child's condition (Triana & Andriany, 2010). This condition will cause further problem, for parents and their

children themselves. Ignoring the children's special needs will only make them as a burden for parents and the development of a child with down syndrome worsens.

Parents' acceptance of the child's condition greatly affects the development of children with down syndrome in the future. This is reinforced when parents are very influential in helping develop children's abilities which is a gift from God that must be guarded and cared for (Lestari, 2012). Accepting the situation with all its strengths and weaknesses, is one of the characteristics of individuals who have high self-compassion (Hidayati, 2015). Self-compassion is needed by parents with down syndrome children. Individuals who have high self-compassion will also provide compassion for others (Neff & Vonk, 2009). Having a loving attitude makes parents more caring and encourage parents to nurture their children with great affection (Ramadita & Pudjiastuti, 2018). Fakhry (2017) added critical statement that self-compassion and self-acceptance is the foundation of optimal living since human with both strength will appreciate the flaws and assets. To go through each process in the parent's self-acceptance stage, it certainly requires support from many parties. The presence of support obtained from the social environment will suppress pressured feeling and stress in caring for their children (Zeisler, 2011). One source of social support came from relatives and from other individuals such as friendship groups (Orford, 1992).

One form of social support that parents with down syndrome children get is by forming certain communities. It is known that one of the reasons parents seek community support mainly due to the hope of the community opening up opportunities for advocacy for their children (Ozkaya, 2017). Another reason is that parents want to be with other people who have had similar experiences with down syndrome children. In addition, the community can provide opportunities to get information about training and interact with other parents who have more experience. One of well-known community is POTADS, which stands for Perkumpulan Orang Tua Dengan Anak Down Syndrome. As community, POTADS aims to provide hope for parents and children with down syndrome to be strong together through challenges faced during the developmental process (POTADS, 2019). Various programs provided by POTADS include seminars on parenting and interactions for children with down syndrome and medical knowledge such as types of therapy to rehabilitation. This research involves POTADS since this community is the largest basis of down sync

Research with the same focus still needs further development and expansion, especially in linking the role of community social support as an external factor and parents' self-compassion as an internal factor for self-acceptance of parents with down syndrome children. The research location in POTADS is unique because the existence of the same community is very limited. This research expected to be a new reference for the role of the community in the development of children with down syndrome. The hypothesis proposed in this study is there is an influence between parents' self-compassion and community social support on self-acceptance of parents with children with down syndrome. The theoretical explanation of the dynamics between the three variables has been previously described.

METHOD

Design

This study used quantitative method with scale in the form of likert. The scale will have four types of answer choices, namely: strongly agree, agree, disagree and strongly disagree. The scoring will be based on the nature of the statement. Favorable statements have the following scoring provisions: the answer choices strongly agree are given a score of 4 (four), agree are given a score of 3 (three), disagree are given a score of 2 (two), strongly disagree is given a score of 1 (one).

Participants

Respondents to this study were selected using purposive sampling technique adjusted with two main criteria in accordance to following criteria such as parents who have children with down syndrome and join POTADS community for at least six months. Based on those criteria, 50 respondents involved in this study. The willingness of parents to be involved in this study is the main consideration for further data collection.

Instrument

Data collection techniques are methods used by researchers in collecting research data (Darmawan 2016). Research instrument use likert scale type with four options consists three scales with theoretical aspect involved. The self-compassion scale consists of 10 items covering three aspects, namely self-kindness, common humanity and mindfulness (Neff & Vonk, 2009). Examples of item such as; *"I view adversity as a part of life that everyone goes through, when bad things happen to me"* as favorable item and *"When I'm feeling down, I tend to feel that other people are happier than me"* as unfavorable item.

The social support scale consists of 31 items covering four aspects, namely emotional support, instrumental support, information support and group support (Sarafino & Smith, 2016). Examples of item such as; *"My community friends always take the time to listen to my stories"* as favorable item and *"Community members don't always want to share their experiences with me"* as unfavorable item. Based on Johnson & Medinnus theory ((Kiling & Kiling, 2015), the self-acceptance scale consists of 20 items covering four aspects, namely respecting children, assessing children as unique, recognizing children's needs and loving children unconditionally. Examples of item such as; *"I appreciate all of my child's work"* as favorable item and *"I feel embarrassed when my child behaves uncontrolled in public"* as unfavorable item.

The instrument validity test using Pearson's Product Moment analysis. If the correlation of each factor is positive and coefficient corrected total item is above 0.3, it will be categorized as strong item with good construction validity (Sugiyono, 2018). The results of the instrument validity test can be seen in table 1 below:

Table 1. Instrument Validity Result

No.	Instrument	Corrected-item	Aitem Valid
1	Self-Compassion	0.573 -0.789	7
2	Community Social Support	0.500 – 0.754	29
3	Self-Acceptance	0.435 – 0.749	17

Based on above result, eight total items from three scales are rejected due to corrected total item below 0.30. In more detail, there are 7 items (out of 10 items) categorized valid for self-compassion scale, 29 items (out of 31 items) categorized valid for community social support scale and 17 items (out of 20 items) categorized valid for self-acceptance scale.

Instrument reliability test using alpha-cronbach analysis. The reliability coefficient classification range 0.6 is considered not good, 0.6 - 0.7 is considered poor, 0.7 - 0.79 is considered quite good, 0.8 - 0.89 is considered good and the reliability coefficient 0, 9 is very good (Sugiyono, 2018). The results of the instrument reliability test can be seen in table 2 below:

Table 2. Instrument Reliability Result

No.	Instrument	Alpha-Cronbach
1	Self-Compassion	0.772
2	Community Social Support	0.954
3	Self-Acceptance	0.886

Community social support reliability is 0.954, Self-compassion reliability is 0.772 while parental self-acceptance reliability is 0.886. It is concluded that all scales are reliable to use further.

Data Analysis

Hypothesis analysis using multiple regression analysis. Multiple regression is a method of analyzing research hypotheses to test the presence or absence of the influence of two or more variables (Darmadi, 2014). Data analysis utilize SPSS 25.0 program. Before analyzing the hypothesis with multiple regression tests, an assumption test is needed as a prerequisite for data eligibility. Assumption tests have been carried out consisting of tests of normality, linearity, multicollinearity and heteroscedasticity.

RESULT AND DISCUSSION

Normality test using the Kolmogorov-Smirnov test analysis resulting Asymp value. Sig. (2-tailed) equal to 0.200 ($p > 0.01$). Therefore, data is concluded to have a normal data distribution. The linearity test with analysis variance showed that the variable linearity of community social support and parental self-acceptance had a deviation from linearity of 0.688 ($p > 0.01$) and the linearity of the self-compassion variable and parents' self-acceptance had a deviation from linearity of 0.019 ($p > 0.01$). Data is stated to have a linear relationship. The multicollinearity test is carried out to see the relationship between the independent variables in the regression model by looking at the tolerance and VIF values. To ensure that multicollinearity does not occur, the VIF value must be less than 10.00 and the tolerance value must be greater than 0.10. The results of the analysis show a VIF value of 1.503 (< 10.00) and a tolerance value of 0.665 (> 0.10). Data conclude to have no multicollinearity occur between independent variables.

Heteroscedasticity test is carried out to test whether there is an inequality of variance from one observation to another. Spearman's analysis was used in this analysis. The results showed a significance value of 0.724 on the community social support variable and 0.560 on the self-compassion variable ($p < 0.01$). Therefore, there is no heteroscedasticity problems on data. Data descriptive for each variable categorized into three levels consists of high, medium and low. The scale used does not provide a middle or neutral option. The scale will reveal the behavior of the subject that has been done or felt before so that the choice is being considered not to be given. Result showed that self-compassion, community social support and self-acceptance is at medium level in majority.

Table 3. Categorization Result

No.	Variables	Categorization		
		High	Medium	Low
1	Self-Compassion	10%	64%	26%
2	Community Social Support	18%	64%	18%
3	Self-Acceptance	22%	56%	22%

By fulfilling all the conditions for the assumption test, we can continue to analyze the hypothesis by using multiple regression analysis. The analysis shows a significance value of $p < 0.01$ with R squared value equal to 0.528. It concluded that self-compassion and community social support together have an effective contribution towards self-acceptance of parents with down syndrome children reaching 52.8% effect.

Separate analysis between each independent variables to dependent variable showed that community social support had 39.3% ($p < 0.01$) while self-compassion had 43.9% influence on self-acceptance of parents with down syndrome children.

Table 4. Pearson's Correlation Result

No.	Aspects	Pearson's Correlation	Sig.
1	Self-Compassion	0.439	<0.01
2	Community Social Support	0.393	<0.01

Both results show a positive relationship, which means the more self-compassion and community social support remains, the higher self-acceptance and and this happens the other way around. Result implication strengthening the relationship on how self-compassion and social support from community will strengthen the self-acceptance of parents with down syndrome children. This becomes valuable inputs for increasing community relations for parents with Down syndrome children. Sense of self-acceptance will be more easily obtained with the ability to accept all the shortcomings and strengths of children. Community as a forum for parents in obtaining information, provide support among parents both physically and emotionally. Parents with positive self-acceptance will surely give a positive impact for further development of children with down syndrome.

Based on the result above, we may conclude that the research hypothesis is accepted. It is found that there is a significant effect between self-compassion and community social support on self-acceptance of parents with down syndrome children. For every parent, a birth of a child with down syndrome is the event of extraordinary emotional charge and is accompanied by a variety of emotional reactions (Duranovic, Marina; Klasnic, Irena; Opic, 2017). Some parents more aware of their feelings and find exceptional power to deal with this condition. Some deny sadness, 177hemselves177177nt, 177hemselves177 and anger due to the hostility and uncooperative behaviour show by their down syndrome children. This caused both physically and emotionally impact and by time reducing their interaction to a minimum. Parental self-acceptance is essential to this stage of parenting.

Parental self-acceptance is a psychological effect of parental behavior towards their children in the form of affection, attachment, care, support and nurture as a form of expression of parental affection for children (Hurlock, 2010). There are components that affect the formation of parental self-acceptance. Factors that can increase parental self-acceptance include self-understanding, meaning in life, changing attitudes, self-engagement, targeted activities, and social support (Carrasco et al., 2019). In general, the above factors can be internal or external.

Parental self-acceptance has an attachment to self-compassion (Rizky et al., 2017). Parents with self-compassion will treat themselves with affection and love themselves more than self-criticism, have kind-hearted actions and issue positive attitude (Neff & Vonk, 2009). This is a key point of self-acceptance.

Parent's attachment and self-understanding of the children's strengths and weaknesses is closely related to the concept of self-compassion. In this study, self-compassion was a significant predictor of self-acceptance of parents with down syndrome children by 43.9 % ($p < 0.01$). Self-compassion described as being open and moved by the suffering experienced, a sense of caring and compassion for oneself, understanding without judgment, accepting one's strengths and weaknesses and realizing that other people experience more or less the same experience (Neff & Vonk, 2009).

Previous study have revealed that self-compassion has an influence on the emergence of positive affect (Septania & Saputra, 2020). The role of positive affect in humans is being able to narrow human attention to be more focused on the problems faced, expanding attention and thoughts on various opportunities so that they are able to act exploratively and creatively in solving problems. Self-compassion has also been shown to reduce the potential for negative behavior (Septania & Proborini, 2020). In general, self-compassion will strengthen individuals in understanding themselves and others better by generating positive feelings in each condition.

As inclusive schools is not available widely, the most reliable sources mothers preferred to follow was the experienced families who had children with down syndrome in the preschool (Kayhan & Ozaydin, 2017). By this fact, community giving a wider opportunity for parents as source of information and support. By the end, this ambience will strengthen parents to be more able to accept the reality and at the end, parents become more receptive to child's condition.

Externally, social support is one factor that influence parental self-acceptance. There is a significant relationship between social support and the acceptance of parents of children with down syndrome in SLB Semarang Regency (Saputra et al., 2018). Social

support can be obtained from the social environment generally, but parents with down syndrome children have a preference to limit themselves to social activities. This makes community is the best sources of social support.

This situation is 178hemselve by the fact that group support is the highest aspect among four other aspects on community support correlate towards parent's self-acceptance. Group or community facilitate the similar feeling connected by the same situation, strengthened by informational, emotional and instrumental support, enact community to stimulate an easier way for parents to accept 178hemselves as a whole.

Community social support had 39.3 % effect ($p < 0.01$) to parents' self-acceptance with down syndrome children. Social support from community, encourage parents to be part of a community that has the same fate, taste and experience. Parents have wider opportunity for information and support related to specific development of children with down syndrome, emotional support and have a sense of community in facing challenges as parents with down syndrome children.

Children with down syndrome, as well as other children with disabilities, are the most vulnerable part of the population and society and to grow up and develop, they need love, affection, care and concern of the whole society. Unfortunately, we still often perceive their appearance and damage, but not their personality. The most important thing we can do is remember that the illness of a child is only a small part of his personality and existence, no matter how serious it is and how significant impact it might have (Duranovic, Marina; Klasnic, Irena; Opic, 2017)

Parenting down syndrome children certainly has a bigger challenge for parents. Experiencing children developmental delays is the true challenge for parents. It requires both personal strength and external support need. When parents have social support from the community, it will be easier for parents to go through parenting process due to the decrease of pressured and stress in caring for their children (Zeisler, 2011).

Parents, especially mothers, who interpret community social support positively will tend to have higher resilience (Siti et al., 2018). Understanding that each child is unique and has their own strengths and weaknesses, parents will try their best to provide the best care and develop the child's strengths. This indicates the emergence of a sense of compassion in individuals (Neff & Vonk, 2009). Through a good parental acceptance with positive self-compassion in parents and community support, parents will show a better communication strategies to cope with challenges which will improved the effectiveness of down syndrome children's approach in progress (Ivic, 2016).

CONCLUSION

The results of the study have empirically found that community social support and self-compassion affect the self-acceptance of parents with down syndrome children by 52.8%. This shows that community social support and self-compassion turn to be an excellent predictor of self-acceptance for parents with down syndrome children. Separately, community social support has an influence of 39.3% and self-compassion has 43.9% influence on self-acceptance of parents with children with down syndrome. This proves empirically that both independent variables involved in this study are able to have an

influence on parental self-acceptance separately, and become stronger when the two are combined. This research is expected to be able to provide scientific contributions regarding the role of community social support and self-compassion on self-acceptance of parents with children with down syndrome. Based on the research results that have been obtained above, there are several suggestions that can be considered, among others, the need to increase the socialization of the existence of the POTADS community. Research respondents consisting of 50 respondents show that there are still few parents who have the awareness to make the community a source of social support that can increase parents' resilience and self-acceptance in the process of child development. Parents as the child's closest environment should naturally have positive feelings for their children, it will impact to the parenting style that is applied which suit their needs. All positive feelings will lead parents to good self-acceptance. This study still has several limitations, including the sample used in this study is still relatively small due to the difficulty of getting subjects who are willing to be involved and still use a cross sectional study. The use of a larger sample and longitudinal research will certainly provide more comprehensive research results.

Funding

This research was self-funded by author.

Acknowledgments

Author would like to thank POTADS Lampung and all respondents involved in this research. Also Universitas Muhammadiyah Lampung for its support until this research completed.

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REFERENCES

- Aminia, T. P. (2020). Down Syndrome and How Physiotherapy Treat Them. In *Ensiklopedia Fisioterapi PENPROF IMFI*.
- Carrasco, M. A., Delgado, B., & Holgado-Tello, F. P. (2019). Parental acceptance and children's psychological adjustment: The moderating effects of interpersonal power and prestige across age. *PLoS ONE*, *14*(4), 1–15. <https://doi.org/10.1371/journal.pone.0215325>
- Darmadi. (2014). *Metode Penelitian Pendidikan dan Sosial*. Alfabeta.
- Duranovic, Marina; Klasnic, Irena; Opic, V. (2017). A child with Down syndrome - Challenge for families, kindergartens and schools. *New Trends and Issues Proceedings on Humanities and Social Sciences*, *3*(5), 32–41. <https://doi.org/10.18844/prosoc.v3i5.2002>
- Hidayati, D. S. (2015). Self Compassion dan Loneliness. *Jurnal Ilmiah Psikologi Terapan*, *3*(1), 154–164.
- Hurlock, E. . (2010). *Psikologi Perkembangan Suatu Pendekatan Sepanjang Rentang Kehidupan*. Erlangga.
- Ivic, S. (2016). Communication Skills of a Child with Down Syndrome at the End of the First Grade of Elementary School. *Journal of Education and Practice*, *7*(23), 19–28.
- Kayhan, N., & Ozaydin, L. (2017). The Quality of Mainstreaming in Preschool: The Views of Parents of Children with Down Syndrome. *Journal of Education and Learning*, *7*(2), 157. <https://doi.org/10.5539/jel.v7n2p157>
- Kementerian Kesehatan. (2019). *INFODATIN Kementerian Kesehatan*.
- Kiling, B. N., & Kiling, I. Y. (2015). Tinjauan Konsep Diri Dan Dimensinya Pada Anak Dalam Masa Kanak-Kanak Akhir. *Jurnal Psikologi Pendidikan Dan Konseling: Jurnal Kajian Psikologi Pendidikan Dan Bimbingan Konseling*, *1*(2), 116. <https://doi.org/10.26858/jpkk.v1i2.1811>
- Layton, T. L. (2004). *Developmental Scale for Children with Down Syndrome* (pp. 1–12). Extraordinary Learning Foundation T and T Communication Services.
- Lestari, S. (2012). Psikologi keluarga: Penanaman nilai dan penanganan konflik dalam keluarga. In *Psikologi keluarga: Penanaman nilai dan penanganan konflik dalam keluarga* (1st ed.). Jakarta: Kencana Prenada Media.
- Maisarah, S., Saleh, J., & Husna, N. (2018). Anak Berkebutuhan Khusus dan Permasalahannya (Studi Kemukiman Pagar Air Kecamatan Ingin Jaya Kabupaten Aceh Besar). *Jurnal Al-Ijtima'iyyah*, *4*(1), 9–25.
- Mangunsong, F. (2011). Psikologi dan Pendidikan Anak Berkebutuhan Khusus Jilid 1. In *Psikologi dan Pendidikan Anak Berkebutuhan Khusus Jilid 1* (1st ed.). LPSP3 UI.
- Neff, K. D., & Vonk, R. (2009). Self-compassion versus global self-esteem: Two different ways of relating to oneself. *Journal of Personality*, *77*(1), 23–50. <https://doi.org/10.1111/j.1467-6494.2008.00537.x>
- Orford, J. (1992). *Community Psychology: Theory and Practice*. John Wiley & Sons, Ltd. [https://doi.org/https://doi.org/10.1002/\(SICI\)1099-1298\(200001/02\)10:1<82::AID-](https://doi.org/https://doi.org/10.1002/(SICI)1099-1298(200001/02)10:1<82::AID-)

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- Ozkaya, O. C. (2017). *Support Groups For Parents Of Children With Autism Spectrum Disorder (Asd)*. Master of Science In the Department of Curriculum and Instruction Indiana University.
- Patmonodewo, S. (2001). *Bunga rampai psikologi perkembangan pribadi : dari bayi sampai lanjut usia* (U. Press (ed.); 1st ed.). UI Press.
- Ramadita, A., & Pudjiastuti, E. (2018). Studi Deskriptif Self-Compassion Ibu Caregiver yang memiliki anak retardasi mental berat-sedang di SLNBN 2 PK/PLK Cimahi. *Prosiding Psikologi*, 4(1).
- Rizky, C. A. R., Wiyono, S., Widiastuti, T. R., & Witriani. (2017). Hubungan antara self-compassion dengan psychological well-being pada mahasiswa. *Journal of Cross-Cultural Psychological*, 35, 2–16.
- Saputra, H., Wakhid, A., & Choiriyah, Z. (2018). Hubungan Antara Dukungan Sosial Dengan Penerimaan Orang Tua Anak Down Syndrome. *Jurnal Perawat Indonesia*, 2(2), 62. <https://doi.org/10.32584/jpi.v2i2.41>
- Sarafino, E. P., & Smith, T. W. (2016). *Health Psychology: Biopsychosocial Interaction* (9th ed.). John Wiley & Sons, Ltd.
- Septania, S., & Proborini, R. (2020). Self-Compassion, Grit dan Adiksi Internet pada Generasi Z. *Analitika*, 12(2), 138–147. <https://doi.org/10.31289/analitika.v12i2.4175>
- Septania, S., & Saputra, R. (2020). Self-Compassion, Grit dan Positive Affect Sebagai Prediktor Kebersyukuran Mahasiswa Penerima Bidik Misi. *Majalah Ilmu Pengetahuan Dan Pemikiran Keagamaan Tajdid*, 23(1), 76–86. <https://ejournal.uinib.ac.id/jurnal/index.php/tajdid/article/view/1696>
- Siti, B. N., Supraptiningsih, E., & Hamdan, S. R. (2018). Hubungan Dukungan Para Anggota Komunitas Dengan Resiliensi Ibu Down Syndrome. *Jurnal Psikologi TALENTA*, 3(2), 1. <https://doi.org/10.26858/talenta.v3i2.5562>
- Sugiyono. (2018). *Metode Penelitian Kombinasi (Mixed Method)* (Sutopo (ed.); 10th ed., pp. 1–630). Alfabeta.
- Triana, N. Y., & Andriany, M. (2010). Stres dan Koping Keluarga dengan Anak Tunagrahita di SLB C dan SLB C1 Widya Bhakti Semarang. *Jurnal Keperawatan*.
- Wismanto, Y. B. (2012). Multi faktor yang mempengaruhi kepuasan pasangan perkawinan di Jawa Tengah. *Konferensi Nasional 30 Tahun Fakultas Psikologi UBAYA 3-4 Oktober 2012.*, 1(1).
- Zeisler, L. (2011). Association between stress and decisional procrastination in parents of children with Down syndrome during their developmental transitions. *Dissertation Abstracts International: Section B: The Sciences and Engineering*, 73(2-B), 842.