

**APPLYING ART THERAPY
TO INCREASE SELF-COMPASSION IN
MALADAPTIVE PERFECTIONIST UNIVERSITY
STUDENTS**

THESIS

By:

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**MASTER'S PROGRAM IN PSYCHOLOGY
FACULTY OF PSYCHOLOGY
TARUMANAGARA UNIVERSITY JAKARTA**

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**This thesis is submitted in partial fulfillment of the requirements
for the degree of Master of Psychology (M.Psi.)**

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TABLE OF CONTENT

Acknowledgment	i
Table of Content	iii
List of Tables and Figures	vii
Appendices	x
Abstract	xii
CHAPTER 1 : INTRODUCTION	1
1.1 Background	1
1.2 Statement of the problem	7
1.3 Purpose of the study	7
1.4 Significance or benefits of the study	8
1.5 Organization of content	8
CHAPTER 2 : LITERATURE REVIEW	9
2.1 Perfectionism	9
2.1.1 Definition	9
2.1.2 The two-factor theory of perfectionism: perfectionistic strivings and perfectionistic concerns	10
2.1.3 Aspects of perfectionism beyond the two-factor model	13
2.2 Self-Compassion	15
2.2.1 Definition	15
2.2.2 Components of self-compassion	18
2.2.3 Self-compassion and perfectionism	21
2.3 Art Therapy	22
2.3.1 Definition	22

2.3.2 Functions and benefits of art therapy	24
2.3.3 Drawing as a form of art therapy, and its use with adults	25
2.3.4 The practice of art therapy	26
2.4 University Students	28
2.4.1 Definition	28
2.4.2 Young adulthood	28
2.5 Framework of the current study	30
2.6 Hypothesis	33
CHAPTER 3 : METHODS	34
3.1 Participants	34
3.2 Design	34
3.3 Location, Setting and Equipment	35
3.4 Measures	35
3.5 Procedures	36
CHAPTER 4 : RESULTS	40
4.1 Participant Y	40
4.1.1 Description of Participant Y	40
4.1.2 Intervention Process	43
4.1.3 Analysis Summary of Participant Y	58
4.1.4 Posttest results of Self-Compassion Scale by Neff	59
4.2 Participant CG	61
4.2.1 Description of Participant CG	61
4.2.2 Intervention Process	63
4.2.3 Analysis Summary of Participant CG	78
4.2.4 Posttest results of Self-Compassion Scale by Neff	79

4.3 Participant ZQ	81
4.3.1 Description of Participant ZQ	81
4.3.2 Intervention Process	83
4.3.3 Analysis Summary of Participant ZQ	98
4.3.4 Posttest results of Self-Compassion Scale by Neff	99
4.4 Participant LOR	101
4.4.1 Description of Participant LOR	101
4.4.2 Intervention Process	104
4.4.3 Analysis Summary of Participant LOR	118
4.4.4 Posttest results of Self-Compassion Scale by Neff	119
4.5 Participant M	121
4.5.1 Description of Participant M	121
4.5.2 Intervention Process	123
4.5.3 Analysis Summary of Participant M	137
4.5.4 Posttest results of Self-Compassion Scale by Neff	138
4.6 Participant CF	140
4.6.1 Description of Participant CF	140
4.6.2 Intervention Process	142
4.6.3 Analysis Summary of Participant CF	156
4.6.4 Posttest results of Self-Compassion Scale by Neff	157
4.7 Comparison of participants' posttest results	159
4.8 Evaluation of the therapy's intervention design	160
CHAPTER 5 : CONCLUSION, DISCUSSION, AND RECOMMENDATION	164
5.1 Conclusion	164
5.2 Discussion	164

5.3 Recommendation	169
5.3.1 Recommendation for future research	169
5.3.2 Recommendation for participants and other concerned parties ...	170
References	P-1

LIST OF TABLES AND FIGURES

Tables

Table 1	Intervention Design	37
Table 2	Analysis summary of participant Y's sessions	58
Table 3	Analysis summary of participant CG's sessions	78
Table 4	Analysis summary of participant ZQ's sessions	98
Table 5	Analysis summary of participant LOR's sessions	118
Table 6	Analysis summary of participant M's sessions	137
Table 7	Analysis summary of participant CF's sessions	156
Table 8	Summary of Session 1 (Draw with Your Eyes Closed) for all participants	160
Table 9	Summary of Session 2 (Self-Portrait Dialogue) for all participants	160
Table 10	<i>Summary of Session 3 (Transforming the Inner Critic) for all participants</i>	161
Table 11	Summary of Session 4 (Acceptance and Compassion) for all participants	161
Table 12	Summary of Session 5 (Self-Compassion Break) for all participants	161
Table 13	Summary of Session 6 (Compassionate Timeline) for all participants	162
Table 14	Summary of Session 7 (Termination) for all participants	162

Figures

Figure 1	Participant Y's first session artwork	43
Figure 2	Participant Y's second session artwork	45
Figure 3	Participant Y's third session artwork	47
Figure 4	Participant Y's fourth session artwork	48
Figure 5	Participant Y's fifth session artwork	51
Figure 6	Participant Y's sixth session artwork	53
Figure 7	Participant CG's first session artwork	64
Figure 8	Participant CG's second session artwork	65
Figure 9	Participant CG's third session artwork	68
Figure 10	Participant CG's fourth session artwork	71
Figure 11	Participant CG's fifth session artwork	73
Figure 12	Participant CG's sixth session artwork	74
Figure 13	Participant ZQ's first session artwork	84
Figure 14	Participant ZQ's second session artwork	85
Figure 15	Participant ZQ's third session artwork	88
Figure 16	Participant ZQ's fourth session artwork	91
Figure 17	Participant ZQ's fifth session artwork	93
Figure 18	Participant ZQ's sixth session artwork	94
Figure 19	Participant LOR's first session artwork	104
Figure 20	Participant LOR's second session artwork	106
Figure 21	Participant LOR's third session artwork	109
Figure 22	Participant LOR's fourth session artwork	111
Figure 23	Participant LOR's fifth session artwork	113
Figure 24	Participant LOR's sixth session artwork	115

Figure 25	Participant M's first session artwork	124
Figure 26	Participant M's second session artwork	126
Figure 27	Participant M's third session artwork	128
Figure 28	Participant M's fourth session artwork	130
Figure 29	Participant M's fifth session artwork	132
Figure 30	Participant M's sixth session artwork	133
Figure 31	Participant CF's first session artwork	143
Figure 32	Participant CF's second session artwork	145
Figure 33	Participant CF's third session artwork	148
Figure 34	Participant CF's fourth session artwork	150
Figure 35	Participant CF's fifth session artwork	152
Figure 36	Participant CF's sixth session artwork	153
Figure 37	Comparison of participants' posttest results	159

APPENDICES

Appendix 1	Questionnaire for screening participant	L-1
Appendix 2	Informed Consent	L-6
Appendix 3	Reliability testing of measurement scales	L-7
Appendix 4a	Participant Y's Pretest	L-8
Appendix 4b	Participant Y's Informed Consent	L-13
Appendix 4c	Participant Y's Detailed Analysis	L-14
Appendix 4d	Participant Y's Posttest	L-18
Appendix 5a	Participant CG's Pretest	L-20
Appendix 5b	Participant CG's Informed Consent	L-25
Appendix 5c	Participant CG's Detailed Analysis	L-26
Appendix 5d	Participant CG's Posttest	L-32
Appendix 6a	Participant ZQ's Pretest	L-34
Appendix 6b	Participant ZQ's Informed Consent	L-39
Appendix 6c	Participant ZQ's Detailed Analysis	L-40
Appendix 6d	Participant ZQ's Posttest	L-45
Appendix 7a	Participant LOR's Pretest	L-47
Appendix 7b	Participant LOR's Informed Consent	L-52
Appendix 7c	Participant LOR's Detailed Analysis	L-53
Appendix 7d	Participant LOR's Posttest	L-57
Appendix 8a	Participant M's Pretest	L-59
Appendix 8b	Participant M's Informed Consent	L-64
Appendix 8c	Participant M's Detailed Analysis	L-65
Appendix 8d	Participant M's Posttest	L-70

Appendix 9a	Participant CF's Pretest	L-72
Appendix 9b	Participant CF's Informed Consent	L-77
Appendix 9c	Participant CF's Detailed Analysis	L-78
Appendix 9d	Participant CF's Posttest	L-81

ABSTRACT

Applying Art Therapy to Increase Self-Compassion in Maladaptive Perfectionist University Students

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Perfectionism is defined as a personality trait characterized by striving for flawlessness and setting excessively high standards for performance accompanied by tendencies for overly critical evaluations of one's behavior. Perfectionism can be maladaptive, in which maladaptive perfectionists are often found to have negative characteristics that are traditionally linked with perfectionism. A population in which maladaptive perfectionists can be found is university students. Self-compassion entails being open to and moved by one's own suffering, experiencing feelings of caring and kindness toward oneself, taking an understanding, nonjudgmental attitude toward one's inadequacies and failures, and recognizing that one's own experience is part of the common human experience. Self-compassion can help to buffer the negative effects of perfectionism. While there are various publications on therapies which can increase self-compassion, there are only very few published studies which focuses on applying art therapy specifically to increase self-compassion. Thus, the present study will focus on applying art therapy specifically to increase self-compassion. Participants of the study were six female university students from University X in Jakarta, Indonesia. The sampling method used was incidental sampling, and the study design was mixed methods and the one-group pretest-posttest design. The instrument used to detect maladaptive perfectionism was the Short Almost Perfect Scale by Rice, Richardson, and Tueller. The instrument used to measure self-compassion was the Self-Compassion Scale by Neff. Participants took part in a seven session art therapy program specifically designed to increase self-compassion. Results show all participants experienced an increase in self-compassion after completing the art therapy program.

Keywords: art therapy, self-compassion, perfectionism, university students.

ABSTRAK

Penerapan *Art Therapy* untuk Meningkatkan *Self-Compassion* pada Mahasiswa *Maladaptive Perfectionist*

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Perfectionism didefinisikan sebagai ciri kepribadian yang ditandai dengan usaha mencapai kesempurnaan dan menetapkan standar kinerja sangat tinggi, dan juga kecenderungan mengevaluasi perilaku diri dengan terlalu kritis. *Perfectionism* dapat *maladaptive*, di mana *maladaptive perfectionism* sering ditemukan memiliki berbagai karakteristik negatif yang umumnya diasosiasikan dengan *perfectionism*. Suatu populasi di mana *maladaptive perfectionism* dapat ditemukan adalah mahasiswa. *Self-compassion* termasuk terbuka terhadap dan tergerak oleh penderitaan diri sendiri; mengalami perasaan peduli dan kebaikan hati untuk diri sendiri; memiliki sikap pengertian dan tidak menilai terhadap kekurangan dan kegagalan diri; dan menyadari bahwa pengalaman-pengalaman diri merupakan bagian dari pengalaman manusia yang umum. *Self-compassion* dapat membantu melindungi individu dari efek-efek negatif *perfectionism*. Walaupun terdapat banyak publikasi mengenai berbagai terapi untuk meningkatkan *self-compassion*, hanya sedikit yang berfokus pada penerapan *art therapy* secara spesifik untuk meningkatkan *self-compassion*. Maka, penelitian ini berfokus pada penerapan *art therapy* spesifik untuk meningkatkan *self-compassion*. Partisipan penelitian adalah enam mahasiswi dari Universitas X di Jakarta. Metode *sampling* adalah *incidental sampling* dan desain penelitian adalah *mixed methods* dan *one-group pretest-posttest*. Alat ukur untuk mendeteksi *maladaptive perfectionism* adalah *The Short Almost Perfect Scale* dan alat ukur untuk tingkat *self-compassion* adalah *The Self-Compassion Scale*. Para partisipan mengikuti tujuh sesi *art therapy* yang dirancang untuk meningkatkan *self-compassion*. Hasil penelitian menunjukkan semua partisipan mengalami peningkatan *self-compassion* setelah mengikuti program *art therapy*.

Kata kunci: *art therapy*, *self-compassion*, *perfectionism*, mahasiswa.

CHAPTER 1

INTRODUCTION

1.1 Background

Perfectionism is generally defined as “a personality trait characterized by striving for flawlessness and setting excessively high standards for performance accompanied by tendencies for overly critical evaluations of one’s behavior (Stoeber & Otto, 2006). This definition is still used in numerous current perfectionism research (Ferrari, Yap, Scott, Einstein, & Ciarrochi, 2018; Hicdurmaz & Aydin, 2017).

Stoeber and Otto (2006) proposed a conceptual framework which recognizes two basic dimensions of perfectionism that can be used to differentiate between groups of perfectionists. The two basic dimensions are perfectionistic strivings and perfectionistic concerns. Perfectionistic strivings is characterized by having high personal standards, and is associated with the positive characteristics traditionally linked with perfectionism. These positive characteristics include higher levels of positive affect, higher levels of endurance, greater subjective

well-being, higher self-esteem, and lower depression (Marshall, Parker, Ciarrochi, Sahdra, Jackson, & Heaven, 2015; Stoeber & Otto, 2006).

Perfectionistic concerns is characterized by having concerns over mistakes, doubts about actions, and perceived discrepancy between actual achievements and high expectations (Stoeber & Otto, 2006). This second dimension is associated with the negative characteristics traditionally linked with perfectionism, including higher levels of negative affect, depression, depressive symptoms, burnout, and perceived stress (Ferrari et al., 2018; Mehr & Adams, 2016; Smith, Sherry, Rnic, Saklofske, Enns, & Gralnick, 2016; Craiovan, 2014; Sherry, Gautreau, Mushquash, Sherry, & Allen, 2014; Stoeber & Otto, 2006).

As previously mentioned, these two dimensions of perfectionism can be used to discriminate between groups of perfectionists (Stoeber and Otto, 2006). Those who have low levels of perfectionistic strivings are categorized as nonperfectionists, while those with higher levels are categorized as perfectionists. This group of perfectionist is then further divided into two groups; healthy (adaptive) and unhealthy (maladaptive). Adaptive perfectionists show lower levels of perfectionistic concerns, while maladaptive perfectionists show higher levels of perfectionistic concerns. Thus, maladaptive perfectionists suffer from the numerous negative characteristics associated with perfectionistic concerns, such as the ones detailed in the previous paragraph.

The portrait of the maladaptive perfectionist is then as such; individuals who set extremely high standards for themselves and strive for flawlessness, yet perceive their capabilities and achievements as always falling short of their high standards, i.e. they believe they are never good enough. In the face of perceived failures and shortcomings, the maladaptive perfectionist engages in harsh self-

criticism and is overly concerned about making mistakes and being negatively evaluated by others. It's no wonder maladaptive perfectionism has been found to be linked to depressive symptoms, negative effect, and perceived stress.

A population in which maladaptive perfectionists can be found is university students. In an academic environment, university students are constantly required to complete assignments, pass exams, and achieve scores which put a value to their performance. They will also receive feedback and critics from authoritative educators. All this and in a competitive environment amongst many other students. Besides the academic life, there is also non-academia life; as Ferrari et al., (2018) proposes, "adolescents and adults alike are frequently exposed to pressures to perform at excessively high standards at school or work, accomplish demanding goals in activities such as sport or music, and have the perfect physical appearance, perfect partner and indeed, the perfect life". Adding to that, perfectionists are more prone to experience various kinds of stress than non-perfectionists (Hewitt & Flett, in Hicdurmaz & Aydin, 2017). Therefore, it is no surprise than various researchers have found links between perfectionism and the negative characteristics traditionally associated with it amongst university students (Abdollahi, Hosseini, & Asmundson, 2018; Curran & Hill, 2017; Lizmore, Dunn, & Dunn, 2017; Sherry, Sherry, Hewitt, Mushquash, & Flett, 2015), including lower levels of self-esteem, self-compassion, and optimism, and higher levels of pessimism and rumination. Indeed, after conducting a meta-analysis study and reviewing the evidence, Curran and Hill proposed that perfectionism has the potential to partially explain psychopathologies such as higher levels of depression, anxiety, loneliness, and suicide ideation and more reports of eating disorders and body dysmorphia amongst university students.

A possible strategy to mitigate the negative effects of maladaptive perfectionism is to increase self-compassion. Self-compassion is defined as “being open to and moved by one’s own suffering, experiencing feelings of caring and kindness toward oneself, taking an understanding, nonjudgmental attitude toward one’s inadequacies and failures, and recognizing that one’s own experience is part of the common human experience” (Neff, 2003c). There are three basic components of self-compassion; self-kindness, recognition of common humanity, and mindfulness. By having self-kindness, one extends kindness and understanding to oneself instead of harsh self-criticism and judgment. In having recognition of common humanity, one sees one’s experience as part of the larger human experience (i.e. there are other people experiencing the same things) rather than as separating and isolating (i.e. no one else is experiencing the same thing). Through having mindfulness, a person perceives his or her painful thoughts and feelings objectively as they really are, as opposed to over-identifying with them.

When faced with failure, mistakes, or shortcomings, those who have self-compassion are able to be kind to themselves instead of criticizing themselves harshly (Neff, 2003c). They are able to acknowledge that failure and inadequacies are part of the human condition that everyone else experiences, and thus they are worth of compassion just like everyone else. Moreover, they are able to adopt an objective perspective and do not become immersed or wallow in negative emotional reactions. In other words, self-compassion enable individuals to be open to difficult emotions, extend kindness toward themselves, and recognize that these experiences are common to humanity, thus they are not alone in their pain or suffering. Self-compassionate individuals recognize that

imperfections, faults, and difficulties in life are universal, and therefore are less likely to be self-critical, harsh, and judgmental.

Ferrari et al. (2018) suggests that “theoretically, as self-compassion fosters self-kindness and acceptance of self, such healthy ways of relating to oneself should directly buffer the negative effects of perfectionism.” In times of error or distress, perfectionists who respond with harsh self-criticism, which could otherwise lead to maladaptive helplessness and hopelessness, may avoid such negative effects by responding to mistakes and sufferings with self-compassion. Some findings seem to support this argument. Ferrari et al. found that “self-compassion moderated the maladaptive perfectionism—depression link such that self-compassion weakened the relationship between maladaptive perfectionism and negative affect”. Mehr and Adam (2016) found that self-compassion partially mediated the link between perfectionism and depression in a sample of university students. Lizmore, Dunn and Dunn (2017) found that perfectionistic concerns were negatively predicted by self-compassion, whilst perfectionistic strivings positively predicted self-compassion. That is, when individuals have high perfectionistic concerns, there is a reduced tendency to engage in self-compassion; this makes sense, considering perfectionistic concerns involve the tendency to be highly self-critical in the aftermath of failure, whereas self-compassion involves being kind to oneself and making oneself feel better following negative events. Meanwhile, as perfectionistic strivings increased there was a greater tendency to engage in self-compassion. These results were expected by Lizmore, Dunn, and Dunn because self-compassion, while involving self-kindness in the context of failure, does not also involve complacency or lowering standards set for oneself.

Theory and research findings suggest that self-compassion should lessen the negative impact of perfectionism, particularly maladaptive perfectionism. Therefore, perfectionists can benefit greatly from having high levels of self-compassion, and should therefore try to increase their self-compassion. While there are various publications on therapies which can increase self-compassion, thus far there are only very few published studies which focuses on applying art therapy specifically to increase self-compassion. Presently, the author has only managed to find one study which measures the levels of self-compassion before and after a form of art therapy is completed, and even in this study self-compassion was not the main focus. In her thesis on undergraduate students, Weiland (2012) sought to test the effectiveness of using a mindfulness based practice, Focusing-Oriented Art Therapy (FOAT), as a way to reduce stress and also raise levels of self-compassion. After conducting two sessions of FOAT, Weiland found mixed results on the changes of self-compassion levels, with participants reporting increasing, decreasing, and unchanging levels of self-compassion. Weiland proposed that a longer study with more FOAT sessions is needed to measure the impact of FOAT on self-compassion. Thus, the author presently aims to conduct a study which focuses on applying art therapy specifically to increase self-compassion.

In its essence, art therapy is, as its name suggests, using art as a means of therapy. Case and Dalley (1992) explains that art therapy involves the use of different art media, through which a client can express and work through different issues and concerns. AATA (2013) lists the purposes for art therapy as such; exploring feelings, reconciling emotional conflicts, fostering self-awareness, managing behavior and addictions, developing social skills, improving reality

orientation, reducing anxiety, and increasing self-esteem. BAATA (in Edwards, 2004) notes the purposes of art therapy as self-expression and reflection. The overall goal in art therapy is to improve or restore the client's functioning and sense of personal well-being, and to enable change and growth on a personal level for the client through the use of art materials (AATA, 2013). Thus, with art therapy's many purposes, functions, and usefulness, there is a promising chance that art therapy can also be used to increase self-compassion.

To summarize, maladaptive perfectionists, including those who are university students, are vulnerable to having poor well-being and suffering from the negative characteristics of perfectionism. Theory and research findings suggest that self-compassion can lessen the negative impact of maladaptive perfectionism; thus, maladaptive perfectionist students can greatly benefit from cultivating their self-compassion. So far there are only very few published studies which focuses on applying art therapy specifically to increase self-compassion. Therefore, the present study aims to apply art therapy to increase self-compassion in maladaptive perfectionistic university students.

1.2 Statement of the problem

Can art therapy be applied to increase self-compassion in maladaptive perfectionist university students?

1.3 Purpose of the study

The purpose of the study is to find out if art therapy be applied to increase self-compassion in maladaptive perfectionist university students.

1.4 Significance or benefits of the study

The theoretical benefits of this study includes offering contributions to the scholarly and scientific literatures in the areas of art therapy, self-compassion, and clinical psychology. Specifically, this study will contribute to the advancement in knowledge regarding the effects that art therapy may have on self-compassion levels, and potentially offering an additional method to increasing self-compassion along with other already-found therapy styles. In terms of practical benefits, the findings of this study may help anyone who is concerned with increasing their self-compassion levels of themselves or of others; these may include parents, friends, educators, and mental health workers.

1.5 Organization of content

This thesis consists of five chapters. Chapter 1 outlines the background, statement of the problem, purpose of the study, significance or benefits of the study, and the organization of content. In Chapter 2, literature that are relevant to the study is reviewed; these include literature on perfectionism, self-compassion, art therapy, and young adults. This chapter also includes the study's framework of thought. Chapter 3 describes the study's research methods and presents the participants' criteria and the study's research design, location, setting, equipment, measures, and procedures. In Chapter 4 the results of the study are presented. The final chapter, Chapter 5, includes the study's conclusion, further discussion, advantages and limitations of the study, suggestions for future studies, as well as recommendations for concerned parties.

CHAPTER 2

LITERATURE REVIEW

2.1 Perfectionism

2.1.1 Definition

Perfectionism is generally defined as “a personality trait characterized by striving for flawlessness and setting excessively high standards for performance accompanied by tendencies for overly critical evaluations of one’s behavior (Stoeber & Otto, 2006). This definition, alongside with Stoeber and Otto’s 2006 comprehensive review of existing research literature, is still used in numerous current perfectionism research (Ferrari, Yap, Scott, Einstein, & Ciarrochi, 2018; Hicdurmaz & Aydin 2017). Stoeber (2018) defines perfectionism as “a multidimensional personality disposition characterized by striving for flawlessness and setting exceedingly high standards of performance accompanied by overly critical evaluations of one’s behavior”. Stoeber further notes that perfectionism is a complex characteristic which comes in different forms and has various aspects which may be harmless or adaptive, or maladaptive and dysfunctional.

2.1.2 The two-factor theory of perfectionism: perfectionistic strivings and perfectionistic concerns

In the history of perfectionism research, two prominent multidimensional models of perfectionism emerged in the 1990s. The first was proposed by Frost, Marten, Lahart, and Rosenblate (1990, in Stoeber, 2018) and explained perfectionism as having six dimensions. The first is personal standards, characterized by a perfectionist's exceedingly high standards for performance. The second is concern over mistakes, which is the fear perfectionists have about making mistakes and its negative consequences on their self-evaluation. The third is doubts about action, referring to the perfectionist's tendency of indecisiveness based on their uncertainty about doing the right thing. The fourth is parental expectations, characterized by the perception that parents expect the perfectionist to be perfect. The fifth is parental criticisms, in which the perfectionist perceives that parents would be critical if the perfectionist failed to meet their high standards. Lastly, the sixth dimension is organization, referring to the perfectionist's tendency to be organized and value order and neatness.

The second multidimensional model of perfectionism proposed at around the same time was by Hewitt and Flett (1990, 1991, in Stoeber, 2018). This model distinguished between three forms of perfectionism; self-oriented, other-oriented, and socially prescribed. The first form is self-oriented perfectionism, and entails internally motivated beliefs that striving for perfection and being perfect are important; self-oriented perfectionists expects and aims to be perfect by their own demands. While self-oriented perfectionism demands perfection from the self, other-oriented perfectionism demands perfection from others; other-oriented perfectionism entails internally motivated beliefs that it is important for others to

strive for perfection and be perfect. In short, other-oriented perfectionists expect others to be perfect. The third dimension, socially prescribed perfectionism, is the only externally motivated belief amongst the three dimensions, and is the belief that striving for perfection and being perfect are important to others. Therefore, socially prescribed perfectionists strives for perfection because they believe others expect them to be perfect.

These two multidimensional models of perfectionism were then subjected to a factor analysis, and from it emerged two higher-order dimensions (Kline, in Stoeber, 2018). The first dimension comprised of personal standards, organization, self-oriented perfectionism, and other-oriented perfectionism. The second dimension comprised of concern over mistakes, doubts about actions, parental expectations, parental criticisms, and socially prescribed perfectionism. Furthermore, the first dimension was found to be positively correlated with positive affect, yet showed non-significant correlations with negative affect and depression. In contrast, the second dimension showed positive correlations with negative affect and depression, yet showed non-significant correlations with positive affect. This led to a labeling of the first dimension as “positive striving” and the second as “maladaptive evaluation concerns”. Hence, the two-factor model of perfectionism emerged.

A common practice amongst researchers were to label the two dimensions with evaluative connotations, such as adaptive versus maladaptive perfectionism, adaptive versus maladaptive, healthy versus unhealthy, and functional versus dysfunctional (Stoeber, 2018). Presently, the two dimensions are commonly referred to as personal standards perfectionism and evaluative concerns perfectionism, or perfectionistic strivings and perfectionistic concerns.

Stoeber and Otto (2006) proposed a conceptual framework in which the two basic dimensions of perfectionism, referred as perfectionistic strivings and perfectionistic concerns, can be used to differentiate between groups of perfectionists. Stoeber and Otto explained perfectionistic strivings as being characterized by having high personal standards, and is associated with the positive characteristics traditionally linked with perfectionism, and explained perfectionistic concerns as being characterized by having concerns over mistakes, doubts about actions, and perceived discrepancy between actual achievements and high expectations, and is associated with the negative characteristics traditionally linked with perfectionism.

The use of the aforementioned two dimensions of perfectionism to discriminate between groups of perfectionists are as follows (Stoeber and Otto, 2006). Those who have low levels of perfectionistic strivings are categorized as non-perfectionists, while those with higher levels are categorized as perfectionists. This group of perfectionist is then further divided into two groups; healthy (adaptive) and unhealthy (maladaptive). Adaptive perfectionists show lower levels of perfectionistic concerns, while maladaptive perfectionists show higher levels of perfectionistic concerns. Thus, maladaptive perfectionists suffer from the numerous negative characteristics associated with perfectionistic concerns.

The portrait of the maladaptive perfectionist is then as such; individuals who set extremely high standards for themselves and strive for flawlessness, yet perceive their capabilities and achievements as always falling short of their extremely high standards, i.e. they believe they are never good enough. In the face of these perceived failures and shortcomings, the maladaptive perfectionist

engages in harsh self-criticism, and is overly concerned about making mistakes and being negatively evaluated by others.

2.1.3 Aspects of perfectionism beyond the two-factor model

Beyond the two-factor model of perfectionistic strivings and perfectionistic concerns, there are three other aspects of perfectionism which are important in understanding perfectionism; other-oriented perfectionism, perfectionistic self-presentation, and perfectionism cognitions (Stoeber, 2018).

As previously mentioned, other-oriented perfectionism is a part of the three-part model of perfectionism proposed by Hewitt and Flett (1990, 1991, in Stoeber, 2018), and is characterized by demanding perfection from others. Research on other-oriented perfectionism have focused on areas such as its role in the perfectionism social disconnection model and its association with narcissism, Machiavellianism, and psychopathy. This second area of research has led to other-oriented perfectionism being regarded as a dark form of perfectionism. Other-oriented perfectionism has also become a defining component in the research of narcissistic perfectionism. With these standalone interests in other-oriented perfectionism uninclusive of the two-factor model, other-oriented perfectionism is hence better regarded as a separate form of perfectionism outside the two-factor model.

Perfectionistic self-presentation examines the motivating principles that lies beneath perfectionism from a self-regulation perspective; in other words, perfectionistic self-presentation explores the ways a perfectionist achieves the impression of being perfect (Stoeber, 2018). Perfectionistic self-presentation has two aims; “to promote the impression that one is perfect, and to prevent the

impression that one is not" (Hewitt et al., in Stoeber, 2018). There are three ways for a perfectionist to achieve these aims. The first is perfectionistic self-promotion, which is focused on promotion and driven by the need to seem perfect executed by impressing others, and to be seen as perfect through shows of faultlessness and a flawless image. Whereas perfectionistic self-promotion is focused on promotion, the following two aspects are focused on prevention. The second aspect is non-display of imperfection, which is driven by the need to avoid appearing as imperfect; this entails avoiding situations where one's behavior will be closely observed if there is a chance one's personal shortcoming, flaws, or mistakes will be exposed. The third aspect is nondisclosure of imperfection, in which a perfectionist is driven by the need to "avoid verbally expressing or admitting to concerns, mistakes, and perceived imperfections for fear of being negatively evaluated". Various findings have shown that perfectionistic self-expression plays a role in psychological maladjustments, and may even be the reason why dispositional perfectionism is associated with psychological maladjustment. Perfectionistic self-representation has been shown to be an important aspect that must be considered when regarding perfectionism and maladjustment.

Perfectionism cognitions refer to "automatic perfectionistic thoughts reflecting the need to be perfect and concerns about one's inability to achieve perfection" (Flett, Hewitt, Blankstein, & Gray, in Stoeber, 2018). While perfectionism is often regarded as a disposition or trait, perfectionism cognitions may represent the less permanent and more transitory state aspect of perfectionism. Perfectionism cognition has been found to explain variances in psychological maladjustment beyond what dispositional perfectionism can explain.

2.2 Self-Compassion

2.2.1 Definition

To understand self-compassion, it is helpful to first understand the definition of compassion. Compassion entails being moved by others' suffering, being aware of others' pain and not avoiding or disconnecting from it, so that from that arises feelings of kindness toward others and the desire to lessen their suffering (Wispe, in Neff, 2003a). Compassion also entails giving nonjudgmental understanding towards those who fail or make mistakes, and seeing their failures and mistakes as part of the universal human experience that everyone shares. Self-compassion, in turn, involves giving compassion to oneself; self-compassion entails "being touched by and open to one's own suffering, not avoiding or disconnecting from it, generating the desire to alleviate one's suffering and to heal oneself with kindness" (Neff, 2003a). Self-compassion also entails "offering nonjudgmental understanding to one's pain, inadequacies and failures, so that one's experience is seen as part of the larger human experience".

In the face of mistakes and failures, people are prone to evaluating and giving judgment to themselves (Neff, 2003b). When judging, a label of "good" or "bad" is given to oneself, and when mistakes or failures happen, one tends to give oneself the simplistic label of "bad". This is judgment, which is not a part of self-compassion. What *is* a part of self-compassion is discriminating wisdom. Different from the simplistic action of judgment, discriminating wisdom involves recognizing that life is full of complexity and ambiguity, and that various external factors outside of one's control also plays a role which causes mistakes and failures. Discriminating wisdom involves going beyond giving simplistic labels of good or bad and opening oneself to a deeper understanding of the conditions which led to

particular actions and situations. Having discriminating wisdom does not mean not taking responsibility of poor actions; discriminating wisdom recognizes when actions or situations are poor, but also recognizes the causes and conditions that lead to those poor actions or situations in the first place. Self-compassion entails having discriminating wisdom instead of judgment, which helps in healing and forgiving oneself.

Some may be hesitant to give self-compassion in fearing that it is a self-indulgent act. However, Neff (2011) explains that self-compassion does not involve spoiling and protecting oneself from every difficulties. Instead, self-compassion involves wanting health and well-being for oneself because one cares for oneself and wants to be happy. In the same way, a parent who cares about their child will not spoil that child and let him or her do whatever he or she wants. Likewise, self-compassion motivates oneself to persevere through difficulties, learn from mistakes and try hard, because one wants to be happy and free from suffering.

Self-compassion is also different from self-pity (Neff, 2011). Self-pity is “a solipsistic process in which individuals exaggerate their own problems and forget that others are experiencing similar problems”, whereas self-compassion entails seeing suffering as part of the shared human experience that everyone goes through. Instead of emphasizing one’s misfortune, self-compassionate individuals recognize that life is difficult for everyone, and remembers that others are suffering in similar or even worse ways. Having self-compassion will put one’s own experiences into greater perspective, and thus self-compassionate individuals do not exaggerate the extent of personal suffering.

Self-indulging and self-pitying are passive actions, whereas self-compassion is the desire to maintain one's well-being which motivates proactive actions to improve situations (Neff, 2003b, 2011). Self-compassionate individuals also do not see their suffering as more important or lesser than the suffering of others, but that their suffering is just as important as the ones felt by others, and thus just as deserving of care and compassion.

Another important distinction to make is between self-compassion and self-esteem. Self-esteem is often the result of comparing oneself to others, and feeling that oneself is better or more special than others (Neff, 2011). To always feel better than others, one could condescend others or exaggerate the positive qualities of oneself. This makes one unable to see oneself objectively and ignore one's negative qualities. Consequently, one cannot grow optimally and social relations may be disturbed with such acts as blaming others when the fault was actually one's own.

Although possessing high self-esteem does carry some benefits, several research has found that having high self-esteem is also linked to various negative effects or characteristics (Neff, 2003b, 2011). Positive evaluation of oneself cannot be constantly upheld; there will be times when one is aware of one's shortcomings. When aware of one's flaws and inadequacies, some people can be very critical of themselves. While self-criticizing may be done in the hopes of constantly improving oneself, it can also bring about feelings of inadequacies. The pressure to always be better than others may cause anxiety, depression, and low self-confidence. Several negative characteristics associated with having high self-esteem includes narcissism, discrimination, self-righteous anger, self-absorption, and prejudice. Self-compassion and self-esteem both gives one

protection from criticisms. However, unlike having self-esteem, to have self-compassion one does not need to compare oneself to others and feel better or more special than others. Therefore, self-compassion has the same benefits of self-esteem, but without the negative consequences of self-esteem.

2.2.2 Components of self-compassion

Neff (2003b, 2011) defines self-compassion as having three main components which overlap and mutually interact; self-kindness versus self-judgment, recognition of common humanity versus isolation, and mindfulness versus over-identification.

Self-kindness. Self-kindness is the tendency to “be caring and understanding with ourselves rather than harshly critical or judgmental” (Neff, 2011). When making mistakes or experiencing failure, people often will criticize themselves harshly or blame themselves. Those with self-compassion are able to see that negative comments and harshly critical judgments inflicted on the self does not do one any good, and attempts to stop them. Individuals who possess self-kindness can recognize their flaws and inadequacies and accept them without criticizing or judging themselves; flaws and inadequacies are instead “treated in a gentle, understanding manner, and the emotional tone of language used towards the self is soft and supportive.” By having self-kindness, individuals can understand their mistakes and failures, instead of only criticizing them, and accept the fact that they are imperfect. Self-kindness also entails actively soothing and comforting oneself when circumstances are difficult, by first recognizing that problems are indeed occurring, and then giving oneself

sympathy, caring, kindness, and support. In having self-kindness, individuals are not dependent on others to give them support or caring (Neff, 2003b, 2011).

Recognition of common humanity. Recognition of common humanity is the awareness that all people experience failure, make mistakes, and feel inadequate (Neff, 2003b, 2011). Flaws, wrong decisions or actions, and the regret that follows cannot be avoided by anyone. Self-compassion entails recognizing that imperfection is part of the shared human condition, “so that the self’s weaknesses are seen from a broad, inclusive perspective”, thus recognizing that everyone has flaws (Neff, 2011). The same perspective is taken in viewing difficult life circumstances; self-compassion helps one to realize that there are others in the world who are also suffering, perhaps the same suffering as one feels, and this realization rouses a feeling of togetherness and connectedness with others, rather than feeling disconnected and isolated from others when experiencing suffering, i.e. feeling like the only one who is suffering or that no one else understands the pain. When thinking about their personal flaws or tough times, people often have the irrational thought process that it is abnormal to fail, have weaknesses, or experience difficulties, and it is this thought process which causes strong feelings of disconnection and can also cause feelings of disliking, even hating themselves. When troubles and hardships occur, self-compassion helps to extinguish feelings of loneliness and isolation.

Mindfulness. Neff (2011) explains that, within the context of self-compassion, mindfulness involves accepting what is happening in the present, acceptance that is without judgment and perceived objectively; in other words, mindfulness is simply seeing things as they actually, objectively are. Brown and Ryan (in Neff, 2011) defines mindfulness as involving “being aware of present moment

experience in a clear and balanced manner so that one neither ignores nor ruminates on disliked aspects of oneself or one's life". Neff (2011) explains that before one can give oneself compassion, one must first be mindful; one must first recognize that one is suffering and in need of comforting to be able to extend compassion toward the self. When experiencing hardship or failure, people often become too focused on their negative aspects, their failures, judging themselves or trying to solve their problems, instead of taking the time to pause and acknowledge their pain and discomfort. Without mindfulness, one cannot have a clear perspective to realize that one is suffering and thus will not be able to give self-compassion.

In going through a tough time, it is very easy for people to feel overwhelmed, panicked, depressed or angry and to solely focus on such feelings. This makes it difficult for people to view situations in an objective and clear perspective, and can get them "swept up in and carried away by the story-line of one's own pain" (Neff, 2003b). When people are caught up as such, they tend to exaggerate and fixate on harmful thoughts and emotions, thus disabling them to see themselves and their troubles clearly. Neff terms this process as 'over-identification', and mindfulness helps to prevent one from over-identifying. Thus, over-identification is the opposite of mindfulness. When one is able to recognize that one is going through a difficult situation without exaggerating the hardships, it is then that mindfulness takes place. Mindfulness involves observing a situation as it is, without distorting or ignoring any part of the situation. Mindfulness gives a balance awareness which becomes the foundation of self-compassion.

2.2.3 Self-compassion and perfectionism

Ferrari et al. (2018) suggests that “theoretically, as self-compassion fosters self-kindness and acceptance of self, such healthy ways of relating to oneself should directly buffer the negative effects of perfectionism.” In times of error or distress, perfectionists who respond with harsh self-criticism, which could otherwise lead to maladaptive helplessness and hopelessness, may avoid such negative effects by responding to mistakes and sufferings with self-compassion. Some findings seem to support this argument. Ferrari et al. found that “self-compassion moderated the maladaptive perfectionism—depression link such that self-compassion weakened the relationship between maladaptive perfectionism and negative affect”. Mehr and Adam (2016) found that self-compassion partially mediated the link between perfectionism and depression in a sample of university students. Lizmore, Dunn and Dunn (2017) found that perfectionistic concerns were negatively predicted by self-compassion, whilst perfectionistic strivings positively predicted self-compassion. That is, when individuals have high perfectionistic concerns, there is a reduced tendency to engage in self-compassion; this makes sense, considering perfectionistic concerns involve the tendency to be highly self-critical in the aftermath of failure, whereas self-compassion involves being kind to oneself and making oneself feel better following negative events. Meanwhile, as perfectionistic strivings increased there was a greater tendency to engage in self-compassion. These results were expected by Lizmore, Dunn, and Dunn because self-compassion, while involving self-kindness in the context of failure, does not also involve complacency or lowering standards set for oneself.

2.3 Art Therapy

2.3.1 Definition

In its essence, art therapy is, as its name suggests, using art as a means of therapy. Case and Dalley (1992) explains that art therapy involves the use of different art media, through which a client can express and work through different issues and concerns. The American Art Therapy Association (2013) and The British Association of Art Therapists (in Edwards, 2004) elaborates that art therapy involves the client using art materials whilst facilitated by a trained art therapist. It is within the supportive environment fostered by the therapist-client relationship that it becomes possible for clients to create images and objects with the explicit aim of exploring and sharing the meaning these may have for them (Edwards, 2004).

Art therapy originally had two distinct orientations: art as therapy, focusing on the process of art making; and art psychotherapy, focusing on the finished created product and relying on the triangulated relationship between therapist, artist, and the artwork (Gussak & Rosal, 2016). Contemporary art therapy combines numerous approaches and has become more nuanced than the original perspectives; no longer are there only two ways to think about art therapy (Gussak & Rosal, 2016). As the profession of art therapy established itself, definitions became more settled. From a contemporary perspective, art therapy may be defined as a form of therapy in which creating images and objects plays a central role in the psychotherapeutic relationship established between the art therapist and client (Edwards, 2004).

Nucho (2003) adds that art therapy can be defined as the process of becoming aware of, externalizing, portraying, and then decoding one's imagery in

order to integrate experiences, and to determine new ways for action. The imagery that the client makes arise spontaneously in response to various experiences in life; these images are symbolizations or crystallizations of life experiences.

AATA (2013) lists the purposes for art therapy as such; exploring feelings, reconciling emotional conflicts, fostering self-awareness, managing behavior and addictions, developing social skills, improving reality orientation, reducing anxiety, and increasing self-esteem. BAATA (in Edwards, 2004) notes the purposes of art therapy as self-expression and reflection.

The aims of art therapy often vary to suit the particular needs of individual clients (Edwards, 2004). Furthermore, these needs may change as the therapeutic relationship develops. The overall goal in art therapy is to improve or restore the client's functioning and sense of personal well-being, and to enable change and growth on a personal level for the client through the use of art materials (AATA, 2013).

Professional art therapists must possess knowledge of visual art and the creative process, in addition to human development, psychological, and counseling theories and techniques (AATA, 2013). However, clients of art therapy need not possess experience or skill in art.

What does art therapy look like? Art therapy can use any type of art form. This includes, and are not limited to, visual arts (such as painting, installation art, and wood sculpturing), dance, music (such as concrete or action music, free vocal music, traditional forms of music including songs, rhythm and blues), literary arts (such as lyric, epic drama, storytelling, and poems), and theater (such as poor theater and puppet play) (Knill, Levine, & Levin, 2005). Art therapy is a

multifaceted field; there are various ways in which art in which art can be used for either understanding (assessment) or for helping (therapy) (Rubin, 2010).

2.3.2 Functions and benefits of art therapy

Obviously, art therapy would have the same basic functions and benefits of any therapeutic method, such as helping clients in resolving conflicts, reducing negative stress, socialization, expressing feelings, issues, hopes, problems, and conflicts, achieving personal insight, managing problematic behaviors, and enhancing reasoning and thinking skills (AATA, 2013; Buchalter, 2004). But what special functions and benefits does art therapy offer that is unique to itself?

Clients may find it easier to relate to the therapist through the art object, and indeed many do (Case & Dalley, 1992). The art object, as a personal statement, provides a focus for discussion, analysis, and self-evaluation. The art created is a visual representation of the client's problems and progress. As the art object is concrete, it also acts as a record of the therapeutic process that cannot be denied, erased, or forgotten, and allows for reflection in the future. The created artworks provide a reminder of the process or resolution after the completion of treatment (Case & Dalley, 1992; Atkins & Williams, 2007).

The art process facilitates the emergence of inner experience and feelings, and the art materials provide a tangible means through which conscious and unconscious aspects of the person can be expressed (Case & Dalley, 1992). Indeed, the image that came to the client may have an important meaning to the client (Knill, Levine, & Levine, 2005). Unconscious material, which was previously hidden from exploration, is often depicted in many of the drawings (Buchalter, 2004). The artwork can enable client to communicate symbolically and verbally. It

provides an abundance of symbols and images client may relate to and learn from. Images serve as vehicles, which facilitate communication, growth, and insight.

2.3.3 Drawing as a form of art therapy, and its use with adults

Visual art is perhaps the most commonly used form of art therapy, and rightfully so, as the introduction of visual art into therapy offers a window into the soul and an opportunity to achieve greater depth and understanding (Atkins & Williams, 2007). Drawing, in particular, allows the client the opportunity to communicate thoughts, feelings, concerns, problems, wishes, hopes, dreams and desires in a relatively non-threatening manner (Buchalter, 2009). It also serves as a vehicle to express unconscious as well as conscious issues and beliefs.

One of the advantages of using images in therapy is that they are concrete and are open to visual interpretation more obviously than any verbal process (Case & Dalley, 1992) Furthermore, drawings may be saved and referred back to during the course of therapy, and also serve as a compilation of feelings, problems, concerns and solutions that are exclusively the client's own (Buchalter, 2009). However, a disadvantage of drawings is that they are more vulnerable to misinterpretation, in regards to the objective understanding of content (Case & Dalley, 1992). Images are statements that have different layers of meaning, which may need gradual unfolding.

Good (in Gussak & Rosal, 2016) explains why art making is therapeutic for adults:

Adults talk; they verbalize. One of the most important reasons why art therapy is a very effective treatment for adults is because adults verbally

have learned how to avoid dealing with issues in their lives. By adulthood, people have learned to get what they want and manipulate their world by talking their way in and out of situations. Adults learn to avoid talking about the real issues in their lives. Art therapy provides a venue for adults to identify, work on, and resolve life stressors in a metaphoric, imagistic, and safe manner. (Good, in Gussak & Rosal, 2016).

From this reasoning, it can be concluded that art therapy can be very helpful in letting adults express their mind, issues, and self in a way deemed safe, where direct judgment of verbal expression is absent.

2.3.4 The practice of art therapy

Knill, Levine, and Levine (2005) offers a guideline for the sequence of activities in an art therapy session. First, opening of session commences, in which the therapist can follow up on anything the client would like to share. Next, the therapist gives instructions or guidance for art-making. This acts as a bridge into the actual art-making, in which client creates an art work as per the instructions of the therapist. After the art work is completed, analysis is conducted, in which the art work is discussed. This is followed with closing of the session, which can include discussing the next possible actions for the client to take. The heart of the therapy, as Knill, Levine, and Levine emphasizes, is in the art-making and analysis of the art work. Verbal conversation is allowed to weave through an entire session; art-making does not need to be non-verbal.

An important issue to monitor during an art therapy session is time (Knill, Levine, & Levine, 2005; Case & Dalley, 1992). Effective guidance can be done when the therapist is aware of how much time is available, and how to

appropriately divide and assign the time available for each activity (opening of session, art-making, analysis, and closing of session). The length of sessions can vary; in institutional settings, sessions typically last for 50 to 90 minutes.

Structured or specific art-making instructions are not always necessary; art therapy can be presented in many ways, and sometimes it is beneficial to have clients draw thoughts and feelings spontaneously, while at other times a more structured approach proves to be most therapeutic (Buchalter, 2009). Buchalter notes, however, that “clients are usually more willing to begin creating with a more structured approach”, i.e. when instructions are given.

On the first meeting with the client, the therapist should allow the client to talk about him or herself, the client’s situation, reasons for participating in therapy, and problems currently encountered (Case & Dalley, 1992). The therapist must gain an impression of the client, particularly if the client will benefit from art therapy and whether the client is motivated to partake in art therapy. The art therapist should also inform the client what is involved in art therapy. Preferably, some indication of understanding and motivation is evidence in the client to encourage the implementation of art therapy. Agreements regarding the regular time of sessions, length of each session, and number of sessions should be reached (Case & Dalley, 1992). The therapist should try to answer, as clearly as possible, any questions the client has.

Termination of therapy can happen for various reasons (Case & Dalley, 1992). It might be useful to the client to terminate therapy, in particular when it is felt that most of the problems have been worked with and some resolution has taken place. Personal circumstances of either therapist or client could also be a reason for terminating therapy. Whatever the case, a good deal of warning is required to

end the therapy process, so that the work is terminated in a satisfactory way for both client and therapist.

2.4 University Students

2.4.1 Definition

The Collins Dictionary (n.d) defines “university student” as “a student enrolled in a university”. Similarly, the Oxford Dictionary (n.d.) defines “student” as “a person who is studying at a university or other place of higher education”. The majority of university students’ higher education years are spent while they are in their adulthood period, most commonly the young adulthood period (Papalia, Olds, & Feldman, 2009).

2.4.2 Young adulthood

Young adulthood is usually defined as the developmental period between the approximate ages of 20 to 40 (Papalia, Olds, & Feldman, 2009). Erikson (in Feist & Feist, 2008) classified young adulthood as the ages of 19 to 30.

Typically, young adulthood is a time of peak physical health, strength, energy, endurance, and sensory and motor functioning (Papalia, Olds, & Feldman, 2009). Young adulthood is also the time when the foundation for lifelong physical functioning is laid, including through behavioral factors or lifestyle. Behavioral factors, aside from genetic factors, have a major impact on health and well-being, and includes aspects such as diet, amount of sleep, physical activeness, smoking habits, drinking habits, and use of drugs. However, simply knowing about what constitutes as healthy lifestyle is not enough to make a person practice healthy habits; “personality, emotions, and social surroundings often outweigh what

people know they should do and lead them into unhealthy behavior", to quote Papalia, Olds, and Feldman.

Cognitive development in young adulthood is marked by the ability to think in more complex forms; this includes reflective thinking and postformal thought (Papalia, Olds, & Feldman, 2009). Reflective thinking is defined as a type of logical thinking that involves continuous, active evaluation of information and beliefs in the light of evidence and implications. Reflective thinkers continually question supposed facts, draw inferences, and make connections, and can create complex intellectual systems that reconcile seemingly conflicting ideas. The capacity for reflective thinking seems to emerge at the same period the cortical regions of the brain that handle higher-level thinking are fully myelinated. Furthermore, environmental support can also stimulate progress in reflective thinking; for young adults, this can include higher education experiences. Aside from reflective thinking, postformal thought also generally emerges during young adulthood. Postformal thought is defined as a mature type of thinking that relies on subjective experience and intuition as well as logic, and is useful in dealing with ambiguity, uncertainty, inconsistency, contradiction, imperfection, and compromise. Postformal thought is flexible, open and adaptive; helps people transcend a single logical system; and reconcile or choose among conflicting ideas or demands. Similar to reflective thinking, postformal thought often develops in response to events and interactions that open up unaccustomed ways of perceiving and challenge a simple view of the world.

Upon leaving high school, young adults may choose to pursue higher education, work, or both at the same time (Papalia, Olds, & Feldman, 2009). Both the higher education and working life after high school provide opportunities for

cognitive growth; new educational or work environment offers opportunities for young adults to question long-held assumptions and try new ways and perspectives of looking at the world. Higher education can be a time of intellectual discovery and personal growth. Several factors which help students to change are the curriculum, which offers new insights and ways of thinking; other students, who can challenge long-held views and values; the student culture, which is different from the society culture in general; and faculty members, who provide new role models.

Psychosocial development in young adulthood involves the continued search for identity until the adult identity crystallizes (Papalia, Olds, & Feldman, 2009). Young adults also learn to redefine their relationship with their parents as one between adults. Erikson (in Papalia, Olds, & Feldman, 2009) saw the development of intimate relationships as the crucial task of young adulthood, which includes both friendships and romantic relationships.

2.6 Framework of the current study

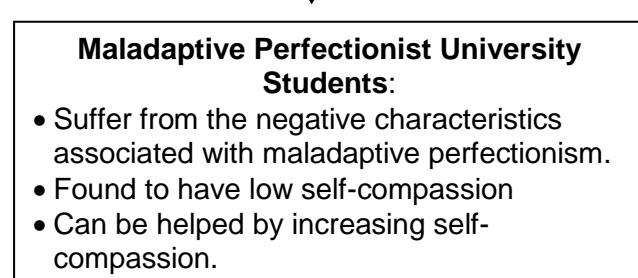
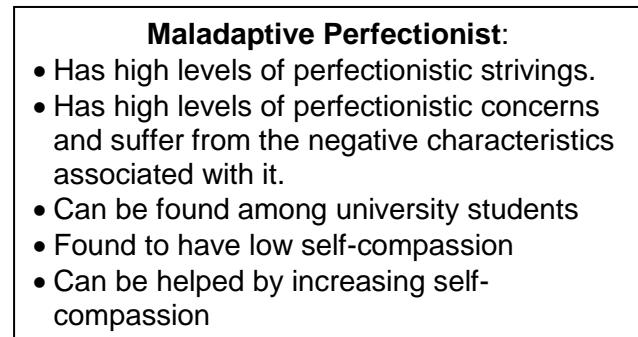
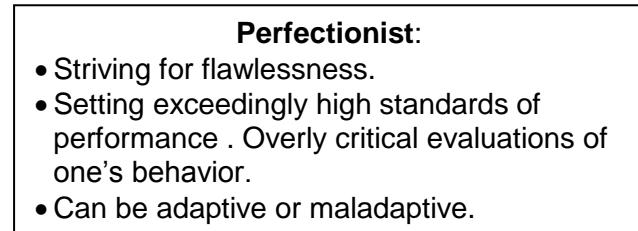
Perfectionism is generally defined as “a personality trait characterized by striving for flawlessness and setting excessively high standards for performance accompanied by tendencies for overly critical evaluations of one’s behavior. There are two dimensions of perfectionism which can be used to categorize types of perfectionists. The two dimensions are perfectionistic strivings and perfectionistic concerns. Perfectionistic strivings is characterized by having high personal standards, and is associated with the positive characteristics traditionally linked with perfectionism. Perfectionistic concerns is characterized by having concerns over mistakes, doubts about actions, and perceived discrepancy

between actual achievements and high expectations, and is associated with the negative characteristics traditionally linked with perfectionism. People with low levels of perfectionistic strivings are categorized as non-perfectionists, while people with higher levels of perfectionistic strivings are categorized as perfectionists. This group of perfectionists is then further divided into two groups; healthy (adaptive) and unhealthy (maladaptive). Adaptive perfectionists show lower levels of perfectionistic concerns, while maladaptive perfectionists show higher levels of perfectionistic concerns. Thus, maladaptive perfectionists suffer from the numerous negative characteristics associated with perfectionistic concerns. A population in which maladaptive perfectionists can be found is university students.

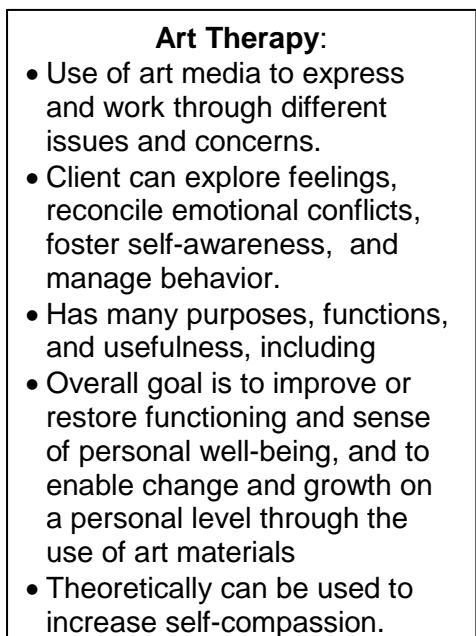
A possible strategy to mitigate the negative effects of maladaptive perfectionism is to increase self-compassion. Self-compassion is defined as being open to and moved by one's own suffering, experiencing feelings of caring and kindness toward oneself, taking an understanding, nonjudgmental attitude toward one's inadequacies and failures, and recognizing that one's own experience is part of the common human experience. When faced with failure, mistakes, or shortcomings, those who have self-compassion are able to be kind to themselves instead of criticizing themselves harshly. They are able to acknowledge that failure and inadequacies are part of the human condition that everyone else experiences, and thus they are worth of compassion just like everyone else. Moreover, they are able to adopt an objective perspective and do not become immersed or wallow in negative emotional reactions. In other words, self-compassion enable individuals to be open to difficult emotions, extend kindness toward themselves, and recognize that these experiences are common

to humanity, thus they are not alone in their pain or suffering. Self-compassionate individuals recognize that imperfections, faults, and difficulties in life are universal, and therefore are less likely to be self-critical, harsh, and judgmental. Thus, as self-compassion fosters self-kindness and acceptance of self, it can buffer the negative effects of perfectionism. Therefore, perfectionists can benefit greatly from having high levels of self-compassion, and should therefore try to increase their self-compassion.

While there are various publications on therapies which can increase self-compassion, thus far there are only very few published studies which focuses on applying art therapy specifically to increase self-compassion. Art therapy involves the use of different art media, through which a client can express and work through different issues and concerns. Its purposes include exploring feelings, reconciling emotional conflicts, fostering self-awareness, and managing behavior. The overall goal in art therapy is to improve or restore the client's functioning and sense of personal well-being, and to enable change and growth on a personal level for the client through the use of art materials). With art therapy's many purposes, functions, and usefulness, there is a promising chance that art therapy can also be used to increase self-compassion. Therefore, the present study aims to find out if art therapy can be applied specifically to increase self-compassion in maladaptive perfectionistic university students.



Self-compassion is increased



2.6 Hypothesis

The hypothesis of this study is that art therapy can be applied to increase self-compassion in maladaptive perfectionist university students.

CHAPTER 3

METHODS

3.1 Participants

The criteria for this study's participants are university students within the young adulthood age range who can be categorized as having maladaptive perfectionism and low self-compassion. There were no limitations regarding gender, religion, birth order, or domicile. The sampling method used was incidental sampling, a sampling technique in which the most convenient and available sample was used (Cohen-Swerdlik, 2009). After the screening process, six female undergraduate students from ages 19—21 with various backgrounds were recruited for the study.

3.2 Design

This study uses a mixed methods research design, in which both quantitative and qualitative data are collected and analyzed (Creswell, 2002). Mixed method research is beneficial in that the data collected and analyzed from both methods can be used to confirm each other's findings.

Furthermore, this study also utilizes the one-group pretest-posttest design (Barker, Pistrang, & Elliott, 2002). In the one-group pretest-posttest design, a pre-measure is taken from the participants, a treatment is conducted for the participants, and a post-measure is taken from the participants after the treatment is completed. This is an appropriate design option to evaluate the outcome of a clinical intervention. In this design, the pre-measure and post-measure taken will be of the participants' self-compassion levels, and the treatment conducted will be art therapy. Thus, the independent variable of the study is art therapy, while the dependent variable is self-compassion levels.

3.3 Location, Setting and Equipment

The present study takes place at the art therapy studio in University X, a private university located in Jakarta, Indonesia. The equipment used were informed consent forms, stationaries, the Almost-Perfect Revised Scale, the Self-Compassion Scale, A4 papers, and art materials. The art materials comprised of A3 drawing papers, 2B drawing pencils, coloring pencils, coloring crayons, watercolor paint, poster paint, acrylic paint, brushes, palettes, and water pots.

3.4 Measures

Demographics and background information. The participants' demographics and background information were obtained by asking participants to fill a brief personal data form and conducting interviews with the participants.

Perfectionism. An Indonesian language adaptation of the Short Almost Perfect Scale (SAPS) by Rice, Richardson, and Tueller (2014) was used to screen potential participants. This scale was chosen because it is designed to

detect maladaptive perfectionism and is suitable for the university student population. Maladaptive perfectionism was detected by scores of 42 and higher in both the Standards and Discrepancy scales of the SAPS (Rice & Ashby, 2007). Thus, only participants which met these criteria are further considered to participate in the study. The SAPS consists of nineteen items measured with a seven point Likert scale (from 0 = "strongly disagree" to 7 = "strongly agree"). All corrected item-total values are above 0.2, indicating that no item needed to be removed, and the scale's Chronbach alpha value is .823 indicating high reliability.

Self-compassion. An Indonesian language adaptation of the Self-Compassion Scale (SCS) by Neff (2003c) was used to screen potential participants. This scale was chosen because it is able to detect low levels of self-compassion and is suitable for the university student population. Low self-compassion was detected by having a score of 2.5 and lower (Neff, 2018). Thus, only participants which met this criteria are further considered to participate in the study. The SCS consists of 26 items measured with a five point Likert scale (from 1 = "almost never" to 5 = "almost always"). All corrected item-total values are above 0.2, indicating that no item needed to be removed, and the scale's Chronbach alpha value is .865 indicating high reliability.

3.5 Procedures

Recruitment and selection of participants. The writer distributed a questionnaire consisting of an informed consent, a brief personal data form, the SAPS, and the SCS to five classes in University X. In total, 167 respondents completed the questionnaire. After scoring the SAPS and SCS, six respondents were found to meet the criteria of having maladaptive perfectionism and low self-

compassion. These six respondents were then contacted and an individual interview session was conducted with each participant. During the interview session, further background information about the participants were obtained, as well as more detailed descriptions regarding their maladaptive perfectionism and low self-compassion. After the respondents were found to be suitable participants, they were invited to join the study, to which all participants agreed.

Art therapy intervention. In total, seven sessions were conducted for each participant. The seven sessions comprised of six sessions with art-making activities and one termination session. These seven sessions were conducted with a minimum of two days in-between sessions. At the termination session, participants were given the SCS again as the posttest measurement.

Table 1. *Intervention design*

Session	Activity and its purpose	Materials
1	<p>“Draw with your eyes closed” (from Buchalter, 2009)</p> <p>Instruction: Participants are instructed to draw with their eyes closed.</p> <p>Purpose/Goals: To open up discussions about perfection; feelings regarding having to be perfect can be discussed to help participants become attuned to their perfectionism. This experience also allows participants to “loosen up” and freely express themselves.</p>	Drawing paper, pencil, colored pencils, markers, crayons.
2	<p>“Self-Portrait Dialogue” (from Walters, in Atkins & Williams, 2007)</p> <p>Instructions: Participants are instructed to:</p> <ol style="list-style-type: none"> 1. Draw themselves with their non-dominant hand. 2. Write with the non-dominant hand any criticisms they have of the work and of herself. 3. Write with the non-dominant hand rebuttals to each criticisms, to defend themselves. 4. Think of a message gained from this experience and to write it down with the dominant hand. <p>The participant is given time between each instructions to complete the activity before proceeding to the next instruction.</p>	Drawing paper, pencil, colored pencils, markers, crayons.

<p>Purpose/Goals: To build the strength of the voice of compassion and reason, the voice that cares for the self and gives encouragement in a realistic manner when struggling or facing challenges. Through the process of exposing and confronting the inner critic, the participant is given the opportunity to increase positive self-talk. This activity allows the participant to confront the inner critic and win in a manner that is uniquely their own.</p>		
3	<p>“Transforming the Inner Critic” (from Rappaport, 2009)</p>	<p>Drawing paper, pencil, colored pencils, markers, crayons, poster paint, watercolor, acrylic.</p>
<p>Instructions: Participants are first given guided imagery to help them find a symbol for their self-critic, a symbol for their criticized self, and an image which describes the present relationship between their self-critic and criticized self. They are then asked to draw that image.</p>		
	<p>Participants are then given a second guided imagery to find an image which represents how they want the relationship between their self-critic and their criticized self to be in the future.</p>	
<p>Discussion prompts: Questions to ask the self-critic; what is your intention in being so critical? What are you afraid of? What do you want for me?</p>		
	<p>Questions to ask the self-critic; what does it feel like to be criticized? What do you want to say? What do you need?</p>	
<p>Purpose/Goals: To become mindful of, listen to, and extend compassion to the inner critic and the other part of self that is the recipient of the criticism. Also to envision, express artistically, and build a new relationship to the inner critic and between the critic and criticized parts of self.</p>		
4	<p>“Acceptance and Compassion” (from Rappaport, 2009)</p>	<p>Drawing paper, pencil, colored pencils, markers, crayons, poster paint, watercolor, acrylic.</p>
<p>Instructions: Participants are given guided imagery to help them find an image which represents feelings of acceptance and compassion to the self. They are then asked to draw or paint that image.</p>		
	<p>Discussion prompts: Explore how the participant feels with the idea of being compassionate to herself by asking, does self-compassion come easily? What are the challenges to giving self-compassion?</p>	
<p>Purpose/Goals: To explore how the participant feels with the idea of being compassionate to herself, and to help participants explore and become more open to the idea of self-compassion.</p>		

5	<p>“Self-Compassion Break” (from King, 2016)</p> <p>Instructions: Participants are instructed to ask themselves what they need right now, and draw it.</p> <p>Purpose/Goals: To help participants practice self-compassion by asking themselves a self-compassion break question.</p>	Drawing paper, pencil, colored pencils, markers, crayons, poster paint, watercolor, acrylic.
6	<p>“Compassionate Timeline” (from Hass-Cohen & Clyde Findlay, in King, 2016)</p> <p>Instruction: Participants are instructed to draw their past, present, and a future, as it would be seen by someone who loves or cares for them, or from a kind and supportive self-perspective.</p> <p>Purpose/Goals: To encourage the participants to view themselves in a compassionate manner and extend compassion to themselves in the future.</p>	Drawing paper, pencil, colored pencils, markers, crayons, poster paint, watercolor, acrylic.
7	<p>Termination</p> <p>Purpose/Goals: To review the artworks produced by the participants and what the participants have learned throughout the therapy, and also to administer the Self-Compassion Scale as posttest measurement.</p>	Participant's artworks, SCS.

CHAPTER 4

RESULTS

4.1 Participant Y

4.1.1 Description of Participant Y

4.1.1.1 Profile

Initials	:	Y
Gender	:	Female
Age	:	20 years, 6 months
Place, Date of Birth	:	Nebraska, U. S. A., October 15 th 1997
Religion	:	Protestant
Birth Order	:	Second of six children
Current Education Level	:	Bachelor's degree
Current Semester at University	:	2
Current GPA	:	3.15

Y was born in Omaha, U.S.A., and spent her first four years there before her family moved back to Jakarta. Her parents' relationship was tumultuous during Y's early years and the couple divorced when Y was in fourth grade. While her parents separated, Y mainly stayed with her mother, but would live with her father once in a while. Presently, Y feels closer to her mother than her father. After two years of divorce, Y's parents decided to re-marry and remain amicable until now. Y lists her hobbies as reading and writing, specifically reading fiction or history books and writing on her blog, journal, and occasionally poetry.

Y sets high standards and expectations on herself, especially on her social relationships and personality. It is important for Y to maintain good relationships with people she cares about. It's also important for Y to always strive to be the best person she can be and so Y constantly tries to improve herself. For example, Y thinks she is too quiet, does not stand up for herself enough, and often represses her feelings, thoughts, and opinions. Y wishes she is braver, more able to stand up for herself, and better at expressing herself. Overall, Y is not satisfied with herself. Moreover, Y often feels that she is not able to meet the high standards and expectations she's set for herself. These high expectations came from Y herself; Y doesn't think her family or friends have ever pushed her to have high standards or have demanded highly of her.

In general, Y thinks she has many flaws and inadequacies that she doesn't like. When she makes a mistake or experiences failure, Y will ruminate them and criticize herself strongly and harshly, often saying mean things. Y doesn't think she takes care of herself when times are hard; Y admits to ignoring her problems and upsetting feelings, even though she knows it's better to deal with them.

4.1.1.2 Pretest: Neff's Self-Compassion Scale

Mean Total Score	Category	
2.23	Low	
Item no.	Positive Statements	Response Score (1–5)
3	When things are going badly for me, I see the difficulties as part of life that everyone goes through.	2
5	I try to be loving towards myself when I'm feeling emotional pain.	1
7	When I'm down and out, I remind myself that there are lots of other people in the world feeling like I am.	1
9	When something upsets me I try to keep my emotions in balance.	2
10	When I feel inadequate in some way, I try to remind myself that	1

	feelings of inadequacy are shared by most people.	
12	When I'm going through a very hard time, I give myself the caring and tenderness I need.	1
14	When something painful happens I try to take a balanced view of the situation.	1
15	I try to see my failings as part of the human condition.	2
17	When I fail at something important to me I try to keep things in perspective.	2
19	I'm kind to myself when I'm experiencing suffering.	1
22	When I'm feeling down I try to approach my feelings with curiosity and openness.	2
23	I'm tolerant of my own flaws and inadequacies.	4
26	I try to be understanding and patient towards those aspects of my personality I don't like.	4

Item no.	Negative Statements	Response score reversed (1—5)
1	I'm disapproving and judgmental about my own flaws and inadequacies.	1
2	When I'm feeling down I tend to obsess and fixate on everything that's wrong.	1
4	When I think about my inadequacies, it tends to make me feel more separate and cut off from the rest of the world.	1
6	When I fail at something important to me I become consumed by feelings of inadequacy.	5
8	When times are really difficult, I tend to be tough on myself.	3
11	I'm intolerant and impatient towards those aspects of my personality I don't like	4
13	When I'm feeling down, I tend to feel like most other people are probably happier than I am.	3
16	When I see aspects of myself that I don't like, I get down on myself.	4
18	When I'm really struggling, I tend to feel like other people must be having an easier time of it.	4
20	When something upsets me I get carried away with my feelings	2
21	I can be a bit cold-hearted towards myself when I'm experiencing suffering.	2
24	When something painful happens I tend to blow the incident out of proportion.	2
25	When I fail at something that's important to me, I tend to feel alone in my failure.	2

4.1.2 Intervention process

4.1.2.1 Session 1

Procedure

The first session with Y was conducted on Friday, April 27th 2018 at the art therapy studio in University X, from 8:00 to 9:00. Y was given the instruction to draw with her eyes closed. This was followed with a discussion session.

Artwork, Observation and Discussion

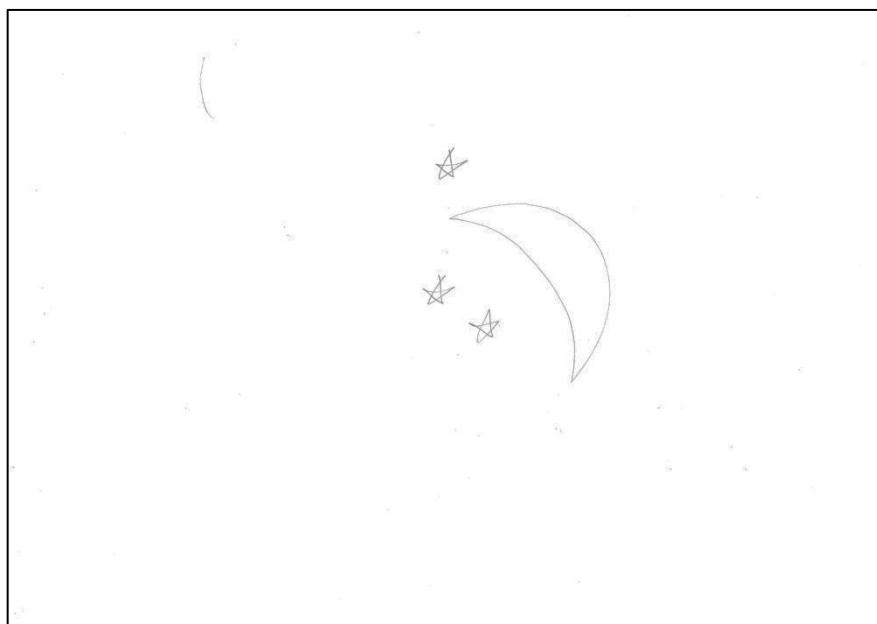


Figure 1. Participant Y's first session artwork.

Y considered what she would draw for about a minute, and then closed her eyes and first drew a crescent moon, then three stars. Y worked quickly and surely, and her drawing lines were stable and sharp. Y then opened her eyes, looked at her drawing, and erased some extended lines on her drawing.

Y explained she wanted to draw a simple drawing that she knows she can do correctly even with her eyes closed; she didn't want to attempt anything complicated that she won't be able to do well. Y also explained she chose not to color because she wouldn't be able to ensure she can color perfectly inside the

lines. When asked what would be the matter with drawing “incorrectly”, Y said looking at a drawing that she has drawn incorrectly does not feel good and the unpleasant feeling won’t go away until she has fixed her drawing.

Y said this is how she approaches her work; if she knows she isn’t able to meet the standards she has set, she will avoid the work. If she is still required to do it, she will try her best, yet almost always feel unsatisfied with her results, knowing that it had not been done the best that it could’ve been. At the end of the session, Y remarked it felt “nice” to take some time and reflect on herself.

4.1.2.2 Session 2

Procedure

The second session with Y was conducted on Monday, April 30th 2018 at the art therapy studio in University X, from 15:30 to 16:30. First, Y was asked to draw herself. Second, Y was asked to write criticisms for her drawing and herself. Third, Y was told to write rebuttals to objectively and realistically defend herself against the criticisms. These first three steps were done using her non-dominant hand. Last, Y was asked to look at her artwork and think of a lesson she had gained from this activity. A discussion session followed.

Artwork, Observation and Discussion

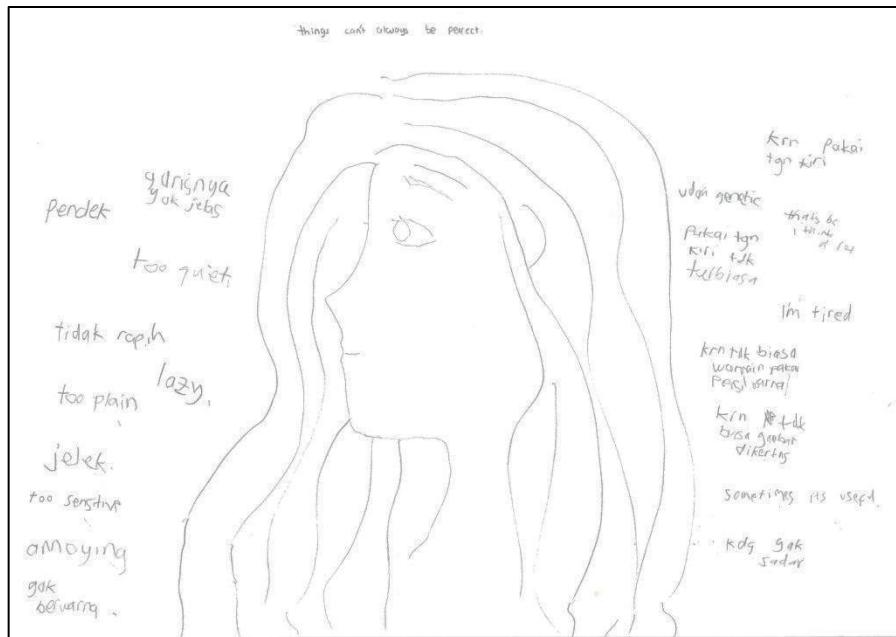


Figure 2. Participant Y's second session artwork.

Y worked quickly and surely with steady drawing lines, and could quickly write many criticisms. Y took a longer time at writing rebuttals and looked to be thinking hard. As the message she gained, Y wrote “things can't always be perfect”.

During the discussion session, Y explained each criticism and rebuttal. About her drawing, Y had written “garisnya gak jelas (lines are not clear)”, “tidak rapih (not neat)”, “too plain”, “jelek (ugly)”, and “gak berwarna (colorless)”. Her rebuttals were; “krn pakai tgn kiri (because used left hand)”, “pckai tgn kiri tdk terbiasa (not used to using left hand)”, “krn tdk bisa warnain pakai pensil warna (because can't color with pencils)”, and “krn tdk bisa gambar di kertas (not used to drawing on paper)”. Y explained it's natural her drawing is “imperfect” and “not good”, as she was using her left hand. As for the lack of color, Y could see this flaw was not a failure, but the result of lack of practice which she can improve.

Y's criticisms of herself were, "pendek (short)", "too quiet", "lazy", "too sensitive", and "annoying". Her rebuttals were; "udah genetic (it's genetics)", "that's bc I think a lot", "I'm tired", "sometimes it's useful", and "kdg gak sadar (sometimes don't realize)". Y could see her height is caused by genetics, which can't control. Y could also realize that her silence are times when she's thinking, which she likes to do and is "a good thing". Y also reasoned sometimes she is not lazy, but too tired to do her work. Y could even find a useful side to a 'flaw'; Y saw her sensitiveness allows her to sense when someone is upset, check on the person and offer her help, which makes Y feel good. Finally, Y can reason she often doesn't realize she is being annoying and doesn't mean to upset anyone.

Sharing what she had learned from the session, Y said she can now see there are two sides to everything, i.e. that there can be a positive side to any negativity or flaw. She reflected it was new and interesting to objectively examine her self-criticisms and defend herself. From this, she could see sometimes her flaws are not "100% her fault", and that she doesn't have to blame herself for everything.

4.1.2.3 Session 3

Procedure

The third session with Y was conducted on Thursday, May 3rd 2018 at the art therapy studio in X University, from 11.30 to 12.30. Y was first instructed to divide the drawing paper into two, then guided to find an image which illustrates the relationship between her self-critic and her criticized self, and to draw it on the paper's left side. Y then was guided to find an image which illustrates how she would like the relationship between her self-critic and criticized self to be, and to draw it on the paper's right side. A discussion session then followed.

Artwork, Observation and Discussion

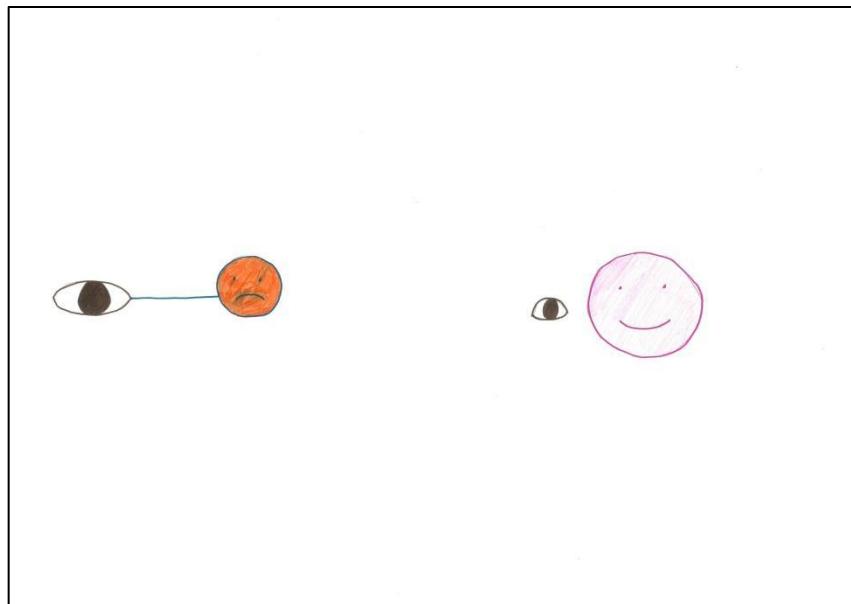


Figure 3. Participant Y's third session artwork.

When asked to divide the drawing paper into two, Y folded the paper very meticulously. Following the first instructions, Y drew an eye and a blue-and-orange sad face connected by a line. After the second instructions, Y drew an eye and a face on the right side of the paper. However, now the eye was smaller, the face was bigger and pink, and there was no line connecting the two.

Y explained she chose an eye as the symbol of her self-critic as she feels her self-critic constantly watches and scrutinizes her. The sad face represents how her criticized self feels burdened and sad by the self-critic's constant criticism, but feels there is nothing she can do about it. The drawing on the right side of the paper represents how Y doesn't want the critic to go away, but wants it to be less dominant, and wants the criticized self to be able to accept criticism and still feel happy and good about herself. Y explains her self-critic's intention is to ensure Y behaves according to how she sees is right. Y's self-critic is afraid Y's behavior can deviate too much from Y's idealisms and wants Y to stay in check.

In turn, Y explained her criticized self feels sad and burdened when the self-critic harshly point out her mistakes and how she should be doing better. However, the criticized self can see that the self-critic is doing this so that Y will always improve, and so the criticized self accepts the self-critic's judgments.

The therapist guided Y to think of how she can achieve the relationship she wishes her self-critic and criticized self to have. Y answered she can make her self-critic's tone more gentle and supportive. The therapist suggested Y can also mind and change the wordings of her criticisms, and Y agreed.

4.1.2.4 Session 4

Procedure

The fourth session with Y was conducted on Monday, May 7th at the art therapy studio in X University, from 15.30 to 16:30. In this session, Y was given guided imagery to find and draw a symbol or imagery which represents how she feels when she feels she is given compassion. A discussion session followed.

Artwork, Observation and Discussion

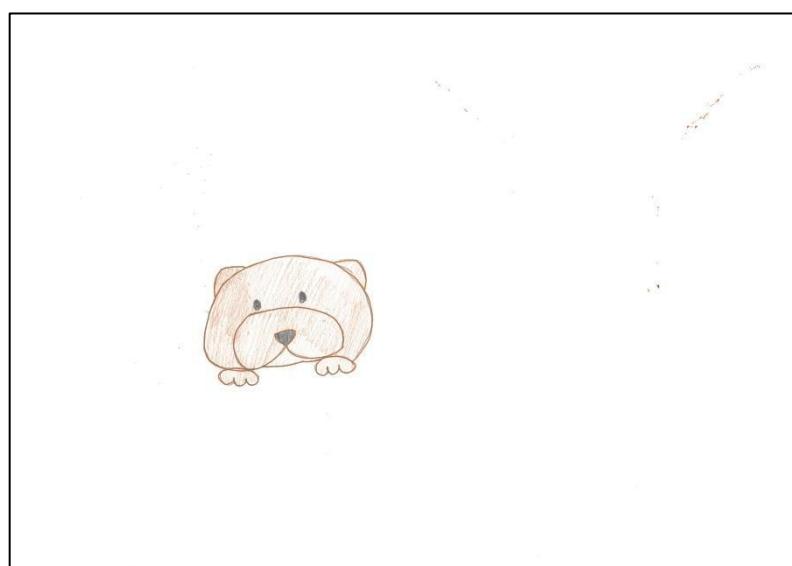


Figure 4. Participant Y's fourth session artwork.

Before the session began, Y shared that she hasn't been criticizing herself too much. When she finds herself self-criticizing, she tries to use a gentler tone. Y shares she finds it strange, but that it's something she can try to get used to.

After given the drawing instructions. Y drew a dog. Y explained that she thought of her favorite dog, Boston. Smiling, Y explained Boston is always kind and caring towards Y, seemingly knowing when Y is upset and tries to cheer her up. Y feels Boston is a constant and reliable source of compassion, and when she thinks of how Boston makes her feel, she feels happy, carefree, and light. Y's other sources of compassion are her mother, sister, and boyfriend.

The therapist asked Y to imagine giving herself compassion as Boston, her mother, sister, and boyfriend has, and to make herself feel how they make her feel. Y said it would be very hard to do, as she is used to talking and thinking negatively of herself. The therapist suggested Y can start by becoming mindful of her feelings and mental state, and when Y perceives she is sad, angry, tired, or in any way 'suffering', Y can think of something that will make her feel better. The therapist drew parallels to how this is what Boston does for Y. However Boston, her mother, sister, or boyfriend might not always be around for Y, and so it's important for Y to practice giving herself compassion. Y said this makes sense to her. The therapist encouraged Y to first practice being mindful of her emotions and noting when she is 'suffering', as this is the first step to self-compassion.

The therapist encouraged Y to try it right now and check with herself if she is 'suffering' at the moment. Y shared that what's currently bothering her most is that she believes she is not open enough towards other people, even though she wants to be, and this makes her disappointed in herself. Y shared that what she fears the most is that when she shares her story, she won't be understood, which

will only make her feel like a weird person who's different than everyone else. Y then shared that she has been bulimic for the past five years, the story of how her bulimic behavior started, and how she still maintains the behavior. Crying, Y admits she often feels very lonely because no one else around her understands what she is going through. Most people who know about her condition only tells her to stop without trying to understand her. Her boyfriend is an exception; Y feels her boyfriend constantly gives her support and love.

At the end of the session, the therapist asked Y to really consider if she thinks she should attend some counseling or therapy regarding her bulimic behavior. The therapist reminded Y of how self-compassion includes wanting what's best for herself and striving to obtain it even when it's hard, and asked Y to consider if counseling or therapy includes in what is best for her.

4.1.2.5 Session 5

Procedure

The fifth session with Y was conducted on Friday, May 11th 2018 at the art therapy studio in X University, from 11.00 to 12.00. Y was instructed to ask herself what she needs right now and draw it.

Artwork, Observation and Discussion

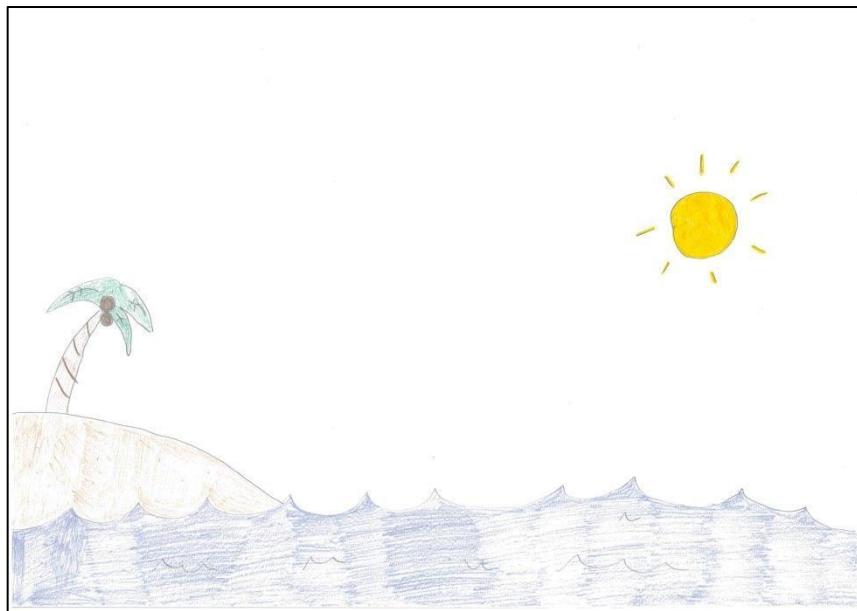


Figure 5. Participant Y's fifth session artwork.

After given the instructions to think about what she needs and draw it, Y drew a beach to represent a vacation, and smiled almost the whole time she drew. During the discussion session, Y explained what she feels she needs the most right now is to have a break, as she is currently tired from her academic work. Y also admitted that dealing with her bulimic thoughts is also tiring. The therapist then helped Y to think of daily things 'breaks' she can give herself. Y thought of reading a book, phoning her close friend in high school, and talking to her sister as things that she enjoys doing and gives herself a rest from her daily stresses.

Next, the therapist discussed with Y any worries she might have about giving self-compassion, and Y shared she doesn't want to make excuses for herself when she feels she isn't doing something right. An example Y gave is for times when she's feelings too lazy to study. Y mentioned that a previous exercise had encouraged her to find other reasons than "feeling lazy" that could explain why she doesn't want to study, such as feeling too tired from the day's activities.

However, Y reflected on this and thinks that sometimes she really is just too lazy, even when she's not tired. Thus, Y feels it isn't right to always try and defend ourselves, because sometimes we are in the wrong, and must face facts.

The therapist commended Y for being able to self-reflect, for thinking at home about what she had learned during the sessions, and also for bringing this issue forward with the therapist to discuss. The therapist agreed with Y that indeed we shouldn't be simply making excuses for ourselves; that is not what self-compassion is about. Rather, self-compassion is about remaining objective and genuine when judging ourselves, i.e. not making up reasons to excuse our behavior, and instead really trying to understand the true reason behind our behavior. Further, the therapist emphasized that having self-compassion means wanting what's best for ourselves. That can include attaining goals that are hard to accomplish. When struggling, giving self-compassion does not mean we become easy on ourselves and stop ourselves from doing what's hard; rather, self-compassion entails keeping in mind what's best for ourselves and making sure we give ourselves that. If what is best for ourselves is to achieve that difficult goal, then being self-compassionate entails giving ourselves all the support and encouragement we need to accomplish that goal, especially when times are hard and we experience setbacks. Y says this makes sense and helps her understand self-compassion better, and that now she feels better about giving herself kindness and compassion, as it is something that helps her reach her goals.

At the end of the session, Y shares that after thinking about it, she isn't opposed to the idea of counseling or therapy for her bulimia. Y can see that her bulimic behavior is "actually not good". However, Y is still reluctant to do it; Y is

worried it will not work and would cost her a lot of money. The therapist told Y she will try to find therapists that can help Y with affordable fees.

4.1.2.6 Session 6

Procedure

The sixth session with Y was conducted on Monday, May 14th 2018 at the art therapy studio in University X, from 12:00 to 13:00. Y was instructed to draw a timeline of her life, with one section each for her past, present, and future. Furthermore, Y was instructed to take a compassionate, kind, and loving perspective of herself while making her timeline.

Artwork, Observation and Discussion

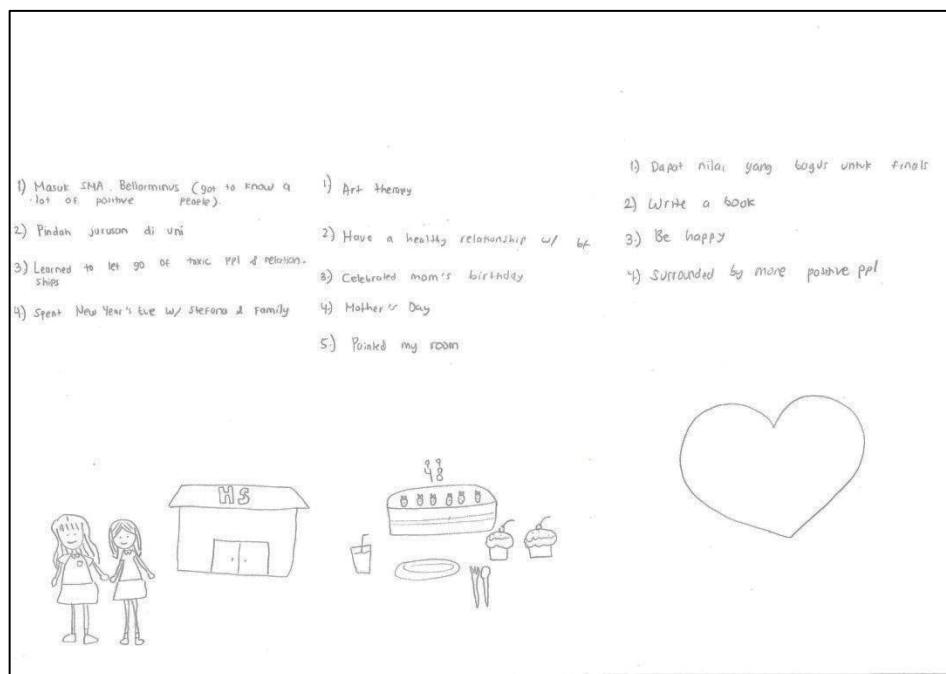


Figure 6. Participant Y's sixth session artwork.

During the discussion session, Y explained that she kept a positive mindset while drawing. In the past and present sections, she focused on things that make her happy, feel loved, or that she is proud of. In the past section, she had written

“masuk SMA Bellarminus (enrolled in Bellarminus High School), got to know a lot of positive people”; this is something she is grateful and happy for, and she feels the friends she’s met there has given her lots of support and love. Next, Y wrote, “pindah jurusan di uni (moved uni major)”; Y had previously been enrolled at the law major of her university on the request of her parents, but after a year she decided to move, as she did not enjoy it. Y is proud of herself that she was brave enough to speak to her parents about it and managed to move to a major that she now loves. Next, Y wrote, “learned to let go of toxic ppl & relationship”. Y is proud of herself especially for being able to let go of an abusive ex-boyfriend. Lastly, Y wrote, “spent New Year’s Eve w/ Stefana & family”, which was a cheerful and always makes Y feel happy when remembering it.

In the “present” section, Y first wrote, “art therapy”, referring to the art therapy she is currently doing with the therapist. Y shares that she’s proud of herself for being able to open up to the therapist, reflect on herself and her experiences, and remembering what she’s learned throughout the therapy process. Y is also proud of the times she’s tried to practice what she’s learned during therapy, such as not criticizing herself too harshly and also thinking about the meaning and importance of self-compassion in her spare time. Next, Y wrote, “have a healthy relationship w/ bf”; Y is proud of the healthy relationship she has with her current boyfriend and how they’ve worked to communicate well and support each other. The next two things Y wrote were “celebrated mom’s birthday” and “Mother’s Day”, which were days when her family recently went out to celebrate the occasions and had fun, and which made Y feel surround with love and joy. Last, Y wrote “painted my room”, a recently achieved personal accomplishment Y is very proud of, as it is something she’d wanted to do for a long time but always held off.

In the “future” section, Y first wrote, “*dapat nilai yang bagus untuk finals*”; this is a short-term goal Y wants to work on and feels quite confident she can manage. Second, Y wrote, “write a book”; this has been a dream of Y’s for a long time, and it’s something she really hopes she can do. Third, Y wrote, “be happy”; Y reflects she thinks being happy can be achieved by taking care of herself and giving self-compassion. However, Y also realizes that she needs help to think positively, and thus added “surrounded by more positive ppl”.

Y remarked that at first she thought it would be much harder to take on a kind, compassionate, loving and supportive perspective when thinking of herself and her life. However, Y noticed that it was easier for her to do so than it used to be before and at the start of the art therapy program. The therapist remarked how “practice makes perfect”, and that by trying to think compassionately of herself, Y will find it easier and easier to do with time. Y agrees that this is what’s happening to her, as before joining the art therapy she did not know about the self-compassionate mindset, but now that she’s learned about it and how to practice it, it’s become something she does do, and does get easier to do. Y expresses that she doesn’t feel she’s doing it enough, and the therapist pointed out things Y had mentioned she’s done to take care of herself, such as trying to get enough sleep, making herself take breaks by reading a book, and also realizing that she should get help for her bulimia, as ways that she’s also practiced self-compassion. Y smiled and said, “I suppose that’s true”. The therapist then encouraged Y to continue on with this mindset and not be upset at herself if she feels she is not being self-compassionate enough. Rather, just pick up right where she is, and give herself the self-compassion she currently needs.

The therapist then shared with Y that there is a therapist who is willing to help Y with her bulimia for a very affordable fee. Y seemed very interested and asked many questions about the therapist and what the therapy would be like. The therapist discussed with Y how getting therapy is a form of self-compassion and taking care of herself. As Y was still somewhat hesitant, the therapist encouraged Y to give the matter some more thought, and to let the therapist know at the next and final session whether Y wants to try therapy.

4.2.1.7 Session 7

Procedure

The seventh session with Y was conducted on Friday, May 18th 2018 at the art therapy studio in University X, from 9:30 to 10:30. During this final session, the therapist and Y reviewed all the artworks Y had made and the activities and goals of each session. A discussion session followed in which Y shared her feelings during the therapy, what she had learned from doing the therapy, any insights she had gained and any changes she had felt. An evaluative discussion also followed where Y shared her impressions towards the art therapy program and the therapist, what she liked and didn't like about the program and the therapist, and any suggestions she might have for the program and for the therapist. At the end of the session, the therapist thanked Y for participating in the program.

Observation and discussion

While looking at her artwork, Y smiled and occasionally made comments on her drawing or how she had felt while doing certain activities, such as how nervous she was at the first session because she was asked to draw with her eyes closed, and how her left-handed drawing is actually quite good.

During the discussion session, Y shared that at first she did not think she would be able to open up to the therapist as she is generally a private and closed person; but as the sessions progressed, she felt more and more comfortable and safe to share her stories and thoughts with the therapist. This both surprised and pleased her, as “it felt nice” to be able to talk to someone. Y also felt the therapy has helped her to better understand herself, in terms of her perfectionistic attitude, self-criticizing tendencies, and low self-compassion. Additionally, Y also thinks the therapy has helped her better understand what she needs, noting that the fifth session was especially helpful and insightful; Y was not accustomed to asking herself what she needs, and the activity introduced the concept to her, and she found she really liked doing it. Furthermore, Y noted that the previous session helped her to realize which things actually matter to her. Y also adds that through the therapy she has learned how to self-criticize in an objective and constructive rather than harsh and ultimately unhelpful way; this really opened up her mind and is something she wants to work on.

Evaluating the therapy, Y remarked that she liked the setting of the therapy, as she found it to be calm and quiet, thus making it easier to talk about her feelings and thoughts. Furthermore, also thinks using art in therapy has been very helpful for her, especially as she sometimes finds it hard to express herself with words, and expressing herself through drawing was even fun. Regarding the therapist, Y shared she perceived the therapist to be very positive, kind, friendly, and very helpful in giving suggestions and in helping Y to understand herself better.

At the end of the session, Y revealed she wants to try and start therapy for her bulimia, realizing that it really will help her and she needs to take care of herself. The therapist praised Y for thinking about it and wanting what's best for herself,

and arrangements for introducing Y to the referred therapist was then made. Finally, the therapist thanked Y for participating in the program, praised Y for the improvements she's made, and parted ways.

4.1.3 Analysis Summary of Participant Y

Table 2

Analysis summary of participant Y's sessions.

Session	Summary
1. Draw with your eyes closed	Showed perfectionism. Able to self-reflect, be aware of, and discuss her perfectionism.
2. Self-portrait dialogue	Showed tendency to self-criticize. Not used to thinking about flaws and failures in objective and reasonable way; however, able to do this when encouraged. Thus, showed potential for increasing self-compassion.
3. Transforming the inner critic	Able to think mindfully about her self-critic, criticized self, and the current relationship between the two parts. Able to envision a healthy relationship between self-critic and criticized self, and able to discuss how to achieve it. Learned constructive criticism; how to self-criticize with gentler tone and encouraging words. Showed there is potential to increase self-compassion.
4. Acceptance and compassion	Still found it hard to give self-compassion, but can see benefits of it, thus more open to the idea of giving self-compassion. Able to practice mindfulness, but still needs to work on increasing it. Increase in rapport; able to trust therapist with discussing significant issue. Taught that first step of self-compassion is mindfulness and how to practice it at home (in the context of self-compassion).
5. Self-Compassion Break	Able to show mindfulness and self-kindness. Has thought about self-compassion at home. Able to better understand self-compassion and more willing to practice it.
6. Compassionate Timeline	Found it easier to think self-compassionately. Shows increasing self-compassion.
7. Termination	Enjoyed art therapy program, learned many things, and gained personal insights. Shows improvement in self-compassion.
Conclusion	There is overall increase in self-compassion.

For more detailed analysis, please see Appendix 4C (Participant Y's Detailed Analysis).

4.1.4 Posttest results of Self-Compassion Scale by Neff

Mean Total Score		Category	
PRE-Test	POST-TEST	PRE-Test	POST-Test
2.23	2.77	Low	Moderate

Item no.	Positive Statements	PRE-Test Score	POST-Test Score	Increase of Self-Compassion
3	When things are going badly for me, I see the difficulties as part of life that everyone goes through.	2	2	NO
5	I try to be loving towards myself when I'm feeling emotional pain.	1	2	YES
7	When I'm down and out, I remind myself that there are lots of other people in the world feeling like I am.	1	3	YES
9	When something upsets me I try to keep my emotions in balance.	2	3	YES
10	When I feel inadequate in some way, I try to remind myself that feelings of inadequacy are shared by most people.	1	3	YES
12	When I'm going through a very hard time, I give myself the caring and tenderness I need.	1	4	YES
14	When something painful happens I try to take a balanced view of the situation.	1	3	YES
15	I try to see my failings as part of the human condition.	2	3	YES
17	When I fail at something important to me I try to keep things in perspective.	2	2	NO
19	I'm kind to myself when I'm experiencing suffering.	1	2	YES
22	When I'm feeling down I try to approach my feelings with curiosity and openness.	2	4	YES
23	I'm tolerant of my own flaws and inadequacies.	4	3	NO
26	I try to be understanding and patient towards those aspects of my personality I don't like.	4	3	NO

Item no.	Negative Statements	PRE-Test Score reversed	POST-Test Score reversed	Increase of Self-Compassion
1	I'm disapproving and judgmental about my own flaws and inadequacies.	1	2	YES
2	When I'm feeling down I tend to obsess and fixate on everything that's wrong.	1	3	YES
4	When I think about my inadequacies, it tends to make me feel more separate and cut off from the rest of the world.	1	3	YES
6	When I fail at something important to me I become consumed by feelings of inadequacy.	5	3	NO
8	When times are really difficult, I tend to be tough on myself.	3	2	YES
11	I'm intolerant and impatient towards those aspects of my personality I don't like	4	3	NO
13	When I'm feeling down, I tend to feel like most other people are probably happier than I am.	3	4	YES
16	When I see aspects of myself that I don't like, I get down on myself.	4	2	NO
18	When I'm really struggling, I tend to feel like other people must be having an easier time of it.	4	3	NO
20	When something upsets me I get carried away with my feelings	2	2	NO
21	I can be a bit cold-hearted towards myself when I'm experiencing suffering.	2	2	NO
24	When something painful happens I tend to blow the incident out of proportion.	2	3	YES
25	When I fail at something that's important to me, I tend to feel alone in my failure.	2	3	YES

4.2 Participant CG

4.2.1 Description of Participant CG

4.2.1.1 Profile

Initials	:	CG
Gender	:	Female
Age	:	20 years, 2 months
Place, Date of Birth	:	Jakarta, February 14 th 1998
Religion	:	Buddhism
Birth Order	:	Second of three children
Current Education Level	:	Bachelor's degree
Current Semester at University	:	2
Current GPA	:	3.86

CG shares she comes from a broken family. CG's family life truly bothers her;

she finds it hard to accept her "horrible" family background and life conditions, in which her parents seem to have never married, her relationship with her mother is poor, and her father is financially dependent on his parents. CG often daydreams of a better life, and is determined to be successful and have lots of money so she can do what she likes. CG lives with her father, grandparents, and siblings. CG's mother is married to another man and has a new family, and CG rarely sees her. Her hobbies are writing, reading, and watching films.

CG sets high standards and expectations on herself, in particular on her academic achievements. CG puts heavy pressure on herself to perform the best that she can and wants to achieve the highest possible grade. Thus, CG constantly tells herself to study and complete her assignments. However, the huge pressure she puts on herself makes it hard for her to start any task. These high standards and expectations did not come from an external source; CG recounts that her family does not pressure her to obtain high grades, but that she herself does. CG admits to never feeling satisfied with her performance and often feels that her best is not enough; she feels she can always do better.

CG believes she has many flaws and inadequacies, especially her tendency to procrastinate. When she catches herself procrastinating or when she thinks about her procrastination, CG will be very annoyed, berate and critique herself, constantly telling herself that she should be better than this.

4.1.2.2 Pre-Test: Self-Compassion Scale by Neff

Mean Total Score	Category
2.12	Low

Item no.	Positive Statements	Response Score (1—5)
3	When things are going badly for me, I see the difficulties as part of life that everyone goes through.	4
5	I try to be loving towards myself when I'm feeling emotional pain.	2
7	When I'm down and out, I remind myself that there are lots of other people in the world feeling like I am.	3
9	When something upsets me I try to keep my emotions in balance.	2
10	When I feel inadequate in some way, I try to remind myself that feelings of inadequacy are shared by most people.	2
12	When I'm going through a very hard time, I give myself the caring and tenderness I need.	4
14	When something painful happens I try to take a balanced view of the situation.	1
15	I try to see my failings as part of the human condition.	2
17	When I fail at something important to me I try to keep things in perspective.	1
19	I'm kind to myself when I'm experiencing suffering.	4
22	When I'm feeling down I try to approach my feelings with curiosity and openness.	1
23	I'm tolerant of my own flaws and inadequacies.	2
26	I try to be understanding and patient towards those aspects of my personality I don't like.	2

Item no.	Negative Statements	Response score reversed (1–5)
1	I'm disapproving and judgmental about my own flaws and inadequacies.	1
2	When I'm feeling down I tend to obsess and fixate on everything that's wrong.	1
4	When I think about my inadequacies, it tends to make me feel more separate and cut off from the rest of the world.	1
6	When I fail at something important to me I become consumed by feelings of inadequacy.	1
8	When times are really difficult, I tend to be tough on myself.	4
11	I'm intolerant and impatient towards those aspects of my personality I don't like	4
13	When I'm feeling down, I tend to feel like most other people are probably happier than I am.	1
16	When I see aspects of myself that I don't like, I get down on myself.	1
18	When I'm really struggling, I tend to feel like other people must be having an easier time of it.	4
20	When something upsets me I get carried away with my feelings	1
21	I can be a bit cold-hearted towards myself when I'm experiencing suffering.	4
24	When something painful happens I tend to blow the incident out of proportion.	1
25	When I fail at something that's important to me, I tend to feel alone in my failure.	1

4.2.2 Intervention Process

4.2.2.1 Session 1

Procedure

The first session with CG was conducted on Friday, April 27th 2018 at the art therapy studio in X University, from 12:00 to 13:00. CG was given the instruction to draw anything with her eyes closed. A discussion session followed.

Artwork, Observation and Discussion

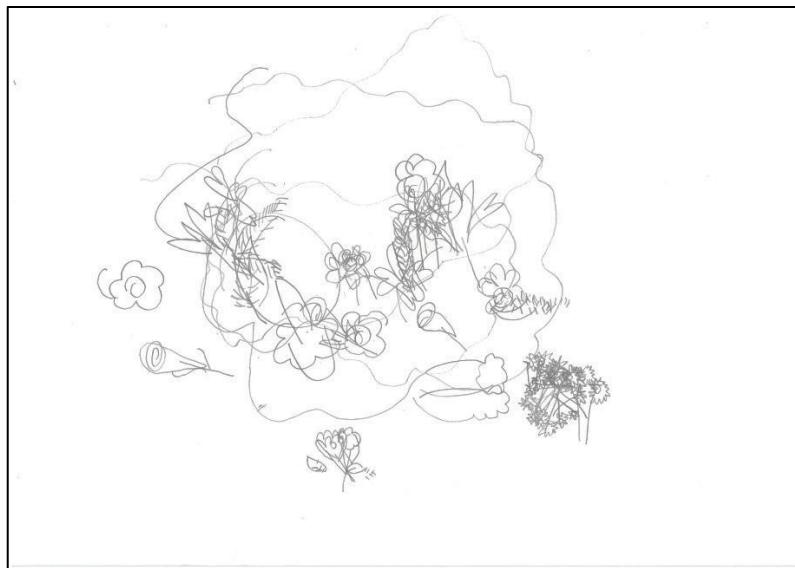


Figure 7. Participant CG's first session artwork.

While drawing, CG used her non-drawing hand to guide herself in guessing the relative positions of her drawing. When she first opened her eyes and saw her drawing, CG expressed her disappointment that her drawing did not live up to her expectations, but could accept that this was because she had a major obstacle while drawing (i.e. having her eyes closed).

During the discussion section, CG expressed she found the activity fun but “stressful. CG put pressure on herself to draw a lot; she felt as if this activity was a test and that she had to prove that she’s able to draw well. Looking at her drawing, CG shares she feels disappointed and is thinking, “why is it like this?”, “it’s so different than what I pictured in my head”, “I wish the drawing was better”. CG shares that she always feels pressure to perform the best that she can at any task, but almost always feels as if she’s “not done enough”. Regarding her decision not to color, CG explained she felt coloring with her eyes closed would be too difficult, and so she chose not to.

4.2.2.2 Session 2

Procedure

The second session with CG was conducted on Wednesday, May 2nd 2018 at the art therapy studio in X University, from 8:00 to 9:00. First, CG was instructed to draw herself. Second, CG was asked to write down criticisms for her drawing and herself. Third, CG was told to write rebuttals to objectively and realistically defend herself against the criticisms. These first three steps were done using her non-dominant hand. Last, CG was asked to look at her artwork and think of a lesson she had gained from this activity. A discussion session followed.

Artwork, Observation and Discussion

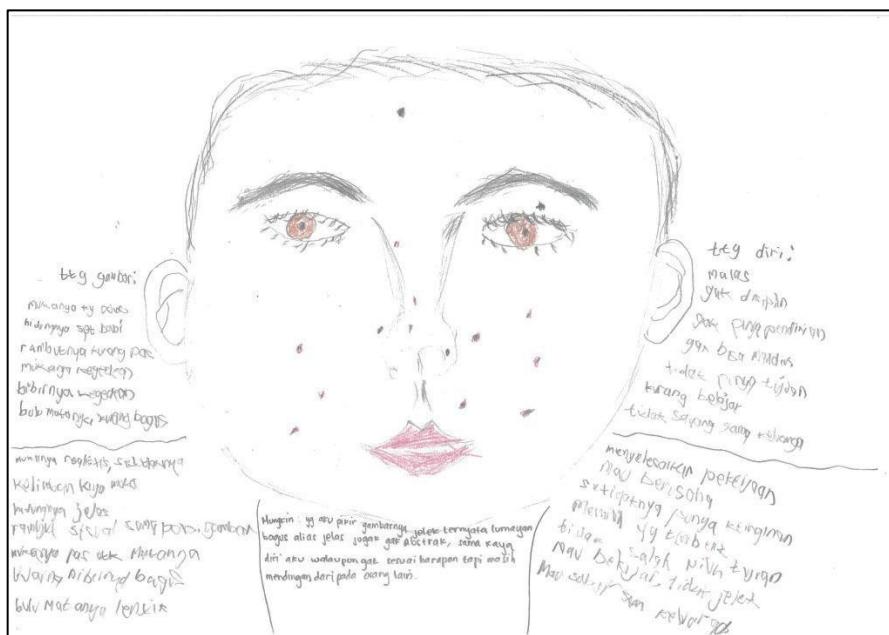


Figure 8. Participant CG's second session artwork.

CG drew with repeated, discontinued lines and often erased and redrew her lines. CG was able to think of criticisms quickly, but took a longer time to think of rebuttals and seemed to be thinking very hard for it. For the message she gained, CG wrote “*mungkin yang aku pikir gambarnya jelek ternyata lumayan bagus alias jelas jugak gak abstrak, sama kaya diri aku walaupun gak sesuai harapan tapi merindung dari pada orang lain*”.

masih mendingan dari pada orang lain (maybe the ugly drawing is actually quite good as it's pretty clear and not abstract, same like me even though not according to expectation but still better than other people".

During the discussion session, CG explained each criticism and rebuttals. Regarding her drawing, CG had written down "*mukanya ky cwo* (face like boy)", "*hidungnya spt babi* (nose like pig)", "*rambutnya kurang pas* (hair not right)", "*mukanya kegedean* (face too big)", "*bibirnya kegedean* (lips too big)" and "*bulu matanya kurang bagus* (eyelashes not good enough)". Her rebuttals were; "*mukanya realistik, setidaknya keliatan kaya muka* (face is realistic, at least looks like a face)", "*hidungnya jelas* (nose is clear)", "*rambut sesuai sama porsi gambar* (hair is appropriate for drawing's portions)", "*mukanya pas utk matanya* (face is appropriate for eyes)", "*warna bibirnya bagus* (color of lips is pretty)" and "*buku matanya lentik* (eyelashes are curled)". CG admitted she was probably being too harsh on her drawing, and that the parts she thought was really bad are actually not too bad, and there are good sides to the negativities she found.

CG's criticisms of herself were, "*malas* (lazy)", "*gak disiplin* (not disciplined)", "*gak punya pendirian* (don't have values)", "*gak bisa mandiri* (can't be independent)", "*tidak punya tujuan* (have no goals)", "*kurang belajar* (doesn't study enough)" and "*tidak sayang sama keluarga* (doesn't love family)". Her rebuttals for these criticisms were; "[*tetap*] *menyelesaikan pekerjaan* (still finishes work)", "*mau berusaha* (wants to try)", "*setidaknya punya keinginan* (at least has desires)", "*memilih yang terbaik* (chooses the best)", "*tidak salah milih tujuan* (doesn't choose wrong goal)", "*mau belajar, tidak jelek* (wants to study, not bad)" and "*mau sabar sama keluarga* (patient with family)". CG could see although she often feels lazy, she still completes her work. Although she feels she isn't

disciplined, she is still willing to put in effort. CG often criticizes herself for not having principles, but she sees she at least has aspirations. Regarding her un-independence and having no goals, CG sees this is because she wants to make the best decision and not make a mistake in choosing a goal. Although she isn't studying enough, CG sees she at least has the desire to study. Lastly, CG feels although she doesn't love her family enough, she is still patient with them.

CG shared although her initial impressions on her drawing was negative and that it was easy for her to criticize it, when encouraged to look for the objectively positive aspects of her drawing, she is able to do so. CG further shares it was even easier to think of the criticisms for herself, as she always perceives herself negatively and often thinks of her flaws. Therefore, it was also harder to think of the rebuttals for herself. CG shared she almost never thinks of herself positively, so this exercise was difficult for her. The only comfort that CG could think of was that, as bad as she thinks she is, there must be others who are worse than her.

CG shared she always compares herself to other people who are better than her in any way, making her feel discouraged. CG is often jealous of others and wants to have their life. CG admits she doesn't like her 'bad' life and feels she cannot accept it, and that it feels like she is the only one who is "having it bad". The therapist then discussed with CG how part of the human experience is having problems, and how others might even be jealous of what CG has that she doesn't appreciate enough. CG agrees with the therapist, and says she would like to change and not be so negative. At the end of the session, CG remarked the session had been very interesting, as she was pushed to think positively of herself, and she was able to gain new insights about how everyone must be having their own problems and that she might have things that others desire.

4.2.2.3 Session 3

Procedure

The third session with CG was conducted on Tuesday, May 8th 2018 at the art therapy studio in X University, from 13:00 to 14:00. CG was first instructed to divide the drawing paper into two, then guided to find an image which illustrates the relationship between her self-critic and her criticized self, and to draw it on the paper's left side. CG then was guided to find an image which illustrates how she would like the relationship between her self-critic and criticized self to be, and to draw it on the paper's right side. A discussion session then followed.

Artwork, Observation and Discussion

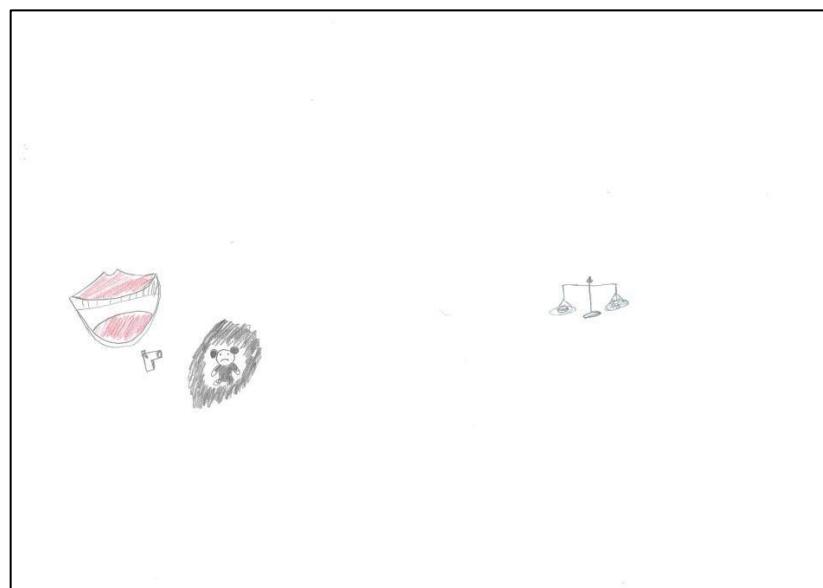


Figure 9. Participant CG's third session artwork.

CG folded the paper very carefully. Following the first instructions, CG drew an open mouth with teeth showing, a small gun pointing towards the right, to a small teddy bear with a sad face surrounded by black lines. After the second instructions, CG drew a balancing scale, with a small and closed mouth on the

left side of the scale, and a small teddy bear on the right side of the scale; both sides of the scale are equally balanced.

CG explained that she chose a big, chattering mouth holding a gun as the symbol of her self-critic. CG explains that the mouth (her self-critic) often yells loudly and “*ngomongnya kasar* (speaks harshly)”, saying things like “*lu ngga ada apa-apanya* (you are noting)”, “*lu ngga ada kemampuan* (you have no abilities)”, “*hidup lu berantakan* (your life is a mess)”, and “*hidup lu ngga ada apa-apanya* (your life is nothing)”. The mouth constantly criticizes her and holds a gun to symbolize how the mouth is harming the teddy bear. In turn, the teddy bear represents her criticized self; its sad face symbolizes how the teddy bear feels sad, burdened, tired, alone, powerless, and as if she cannot escape the darkness represented by the black lines around it. The drawing on the right side of the page represents how CG wishes the relationship between her self-critic and criticized self to be; CG wants the mouth and the teddy bear to be equal to and balance each other. The mouth is there to help, not to harm.

CG explains the mouth’s intention in being critical is to push the teddy bear to improve and be a successful and good person. The mouth is afraid of the teddy bear. In turn, CG explains that the teddy bear feels tired and burdened from the mouth’s criticisms, yet the teddy bear feels she should follow the mouth’s criticisms so she can improve herself. The teddy bear wants to tell the mouth to be quiet for a while and not shout all the time, and that she is tired and wants to rest. CG feels the teddy bear needs a friend and support so it can be successful.

Being successful is important to CG because she thinks her current life is a mess, and she is very unsatisfied and unhappy with it. She feels if she was successful and had lots of money, her life would be better. This perspective came

from observing her father struggling financially to provide for his children and from seeing her mother constantly ask for money from her father's family. Thus, CG wants to be successful, and feels the way to achieve this is to be harsh on herself and constantly push herself to do and be the best.

The therapist discussed with CG how the intention to push herself to do her best is good, but making herself feel sad, burdened, exhausted, lonely, and helpless is not. The therapist noted that CG can have the relationship between her self-critic and criticized self that she wants, in which the self-critic is there to help CG reach her goal without harming her. The therapist then guided CG to think of how she can achieve said relationship by first criticizing herself in a gentle and supportive tone. Second, CG can also criticize herself with words that are objective, constructive and encouraging, and practiced this together with CG. The therapist discussed how it is important to be mindful of the tone and words CG uses when criticizing herself, and to always aim to talk to herself in a way that is constructive. CG remarked this would be difficult and the therapist encouraged her to try this until the next session, where the experience will be discussed, and CG agreed.

4.2.2.4 Session 4

Procedure

The fourth session with CG was conducted on Monday, May 14th 2018 at the art therapy studio in X University, from 15:00 to 16:00. In this session, CG was given guided imagery to find and draw a symbol or imagery which represents how she feels when she feels she is given compassion. A discussion session followed.

Artwork, Observation and Discussion



Figure 10. Participant CG's fourth session artwork.

CG shared she has tried to be mindful of the times she criticized herself, to use a gentler tone when self-criticizing, and to use the objective and constructive sentences discussed in the previous session. CG noted that knowing and having the objective and constructive criticism ready has really helped to fight the harsh self-criticism, as she feels that if she were asked to make-up the sentences by herself alone for the first time, she would find it very hard to do so. CG noted that though she is practicing constructive self-criticism, it still does not come naturally or easily. The therapist commended CG's efforts and encouraged CG to persevere, as practice will make perfect; the more CG practices self-compassion, the easier it will be.

After given the instructions, CG drew three girls standing in front of a building. CG drew while smiling and sometimes humming to herself. CG colored in a hurried way, and when asked, she explained this was because she wanted to 'let loose' and not confine herself to her usual perfectionistic way. CG explained she

had drawn her three closest friends from junior high school standing in front of their school building. CG shares that these three friends are her constant sources of support, love, kindness and acceptance. When CG thinks of how they give her compassion, CG shares that she feels very happy, touched and grateful.

CG explained her biggest challenge in giving self-compassion is that she doesn't feel she deserves to be given compassion, in that she isn't a good enough person and hasn't worked hard enough. The therapist discussed with CG her friends must have befriended CG and given her compassion because they think CG deserves them. The therapist shared that if CG cannot trust her own judgment, she can trust her friends' belief that she is worth giving compassion. Hearing this, CG had tears in her eyes and agreed with the therapist.

The therapist then encouraged CG to start giving herself compassion by first becoming more mindful of her feelings and mental state. When CG perceives that she is any way 'suffering', CG can think of something that will make her feel better. The therapist drew parallels to how this is what her friends do; that is, noticing when CG is upset and trying to cheer her up. However, because her friends are not always around, it is thus important for CG to practice giving herself compassion. CG says this is something she wants to work on and improve, as she is tired of being so negative to herself.

4.2.2.5 Session 5

Procedure

The fifth session with CG was conducted on Friday, May 18th 2018 at the art therapy studio in X University, from 13:30 to 14:30. CG was instructed to ask herself what she needs right now and draw it.

Artwork, Observation and Discussion

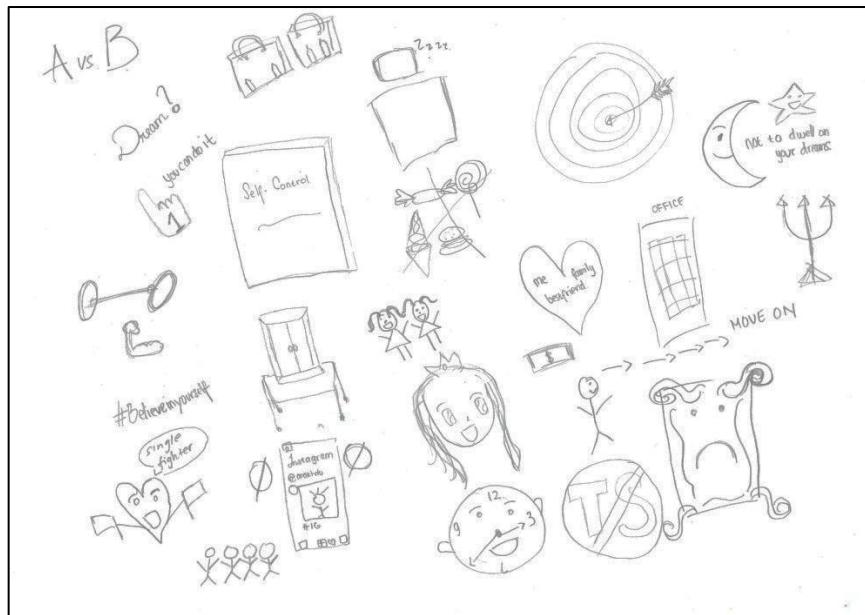


Figure 11. Participant CG's fifth session artwork.

CG drew while smiling and humming. CG explained she did not color because she was excited to get to the discussion. CG then explained what each drawing represented and that these are all things she believes she needs to be happy despite coming from a "messed up" family. The therapist discussed a theory which states that a majority of a person's happiness doesn't come from reaching a 'destination' or goal, but comes from the person's mindset. The therapist asked CG to think of what she needs to start feeling happy, mindset-wise. CG pointed to the luggage, explaining what she needs most is to accept her "baggage", i.e. her family background, so she can have peace of mind and work towards feeling happy. The therapist agreed and helped CG to think mindfully, explore why it's hard for CG to accept her family background, and work out the issue.

Following this, the therapist explained to CG she has just practiced thinking mindfully; how having mindfulness can help CG to be aware of when she is suffering, to not exaggerate her troubles, and thus help her to give herself

compassion. CG said she has been opened to a new way of thinking, and it feels like a burden has been lifted off of her, and things seem brighter. The therapist encouraged CG to practice mindfulness by noticing when she's suffering and objectively assessing her problems, and then extending self-kindness by thinking of a way to relief her suffering.

4.2.2.6 Session 6

Procedure

The sixth session with CG was conducted on Tuesday, May 22nd 2018 at the art therapy studio in X University, from 13:00 to 14:00. CG was instructed to draw a timeline of her life, with one section each for her past, present, and future. Furthermore, CG was instructed to take a compassionate, kind, and loving perspective of herself while making her timeline.

Artwork, Observation and Discussion

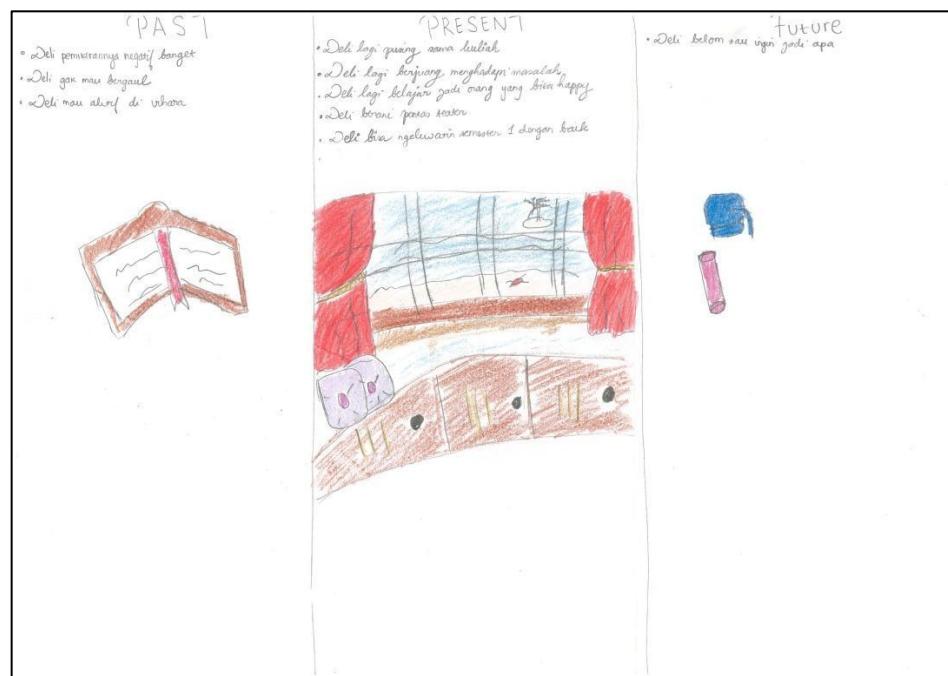


Figure 12. Participant CG's sixth session artwork.

CG shared that she has continued to feel lighter as a result of the previous session, as if some burden has been taken off of her. CG shared she has tried to practice thinking mindfully of her present state of mind and also to be objective when thinking about her worries; while CG admits it's hard to do and doesn't come naturally, CG is eager to practice it, and the therapist commends her.

After drawing, CG explained at first she found it hard to keep a positive perspective on herself, so she thought from the perspective of her best friends who care for her, and imagined what they would say about her. For the past section, CG wrote what her best friends used to say about her in the past; that she often thinks very negatively and that she does not socialize much. CG now realizes her friends only wanted to help CG be more positive and socialize more, and she regrets that was so negative and mostly kept to herself. The third item CG wrote was that she used to be more active in her Buddhism community, something that she is proud of; CG drew a prayer book to represent this.

In the present section, CG shared she had pushed herself to take the perspective of her own self, and to think of her achievements. CG wrote that although she is currently "*pusing sama kuliah*" (her studies are giving her a headache), she is also "*berjuang menghadapi masalah*" (persevering to confront and overcome her problems). Furthermore, CG wrote she is "*lagi belajar jadi orang yang bisa* happy" (learning how to be happy), "*bisa ngelewatin semester 1 dengan baik*" (have passed through semester one well), and has "*berani pentas teater*" (have been brave enough to do theater). These are all things CG is proud of herself for. CG drew a settee next to a window overlooking the beach, and explained that this represents how she currently feels she needs some alone time to self-reflect and rest.

Regarding the future section, CG admitted she didn't know what to draw for a long time, as she currently has no goals or dreams she feels passionate enough to pursue. Finally, CG chose to draw a graduation cap and certificate tube to represent finishing and graduating from her bachelor's degree. The therapist discussed with CG how it is alright that CG does not yet have a goal for the future, and reminded CG not to criticize herself harshly for it, but rather be friendly, understanding, and accepting to herself when doing her self-reflections and self-talk. CG nodded and shared that she has been doing this lately, and that it "really does feel much nicer" than the way she used to talk to herself. Therefore, although it still doesn't come naturally or very easily to her, CG has tried to be kinder and more compassionate to herself. The therapist commended CG, and encouraged her to continue looking at her life and herself in a perspective that is compassionate, caring, and kind.

4.2.1.7 Session 7

Procedure

The seventh session with CG was conducted on Friday, May 25th 2018 at the art therapy studio in X University, from 10:30 to 11:30. During this final session, the therapist and CG first reviewed all the artworks CG had made, while reviewing the activities and goals of each session. A discussion session followed in which CG shared her feelings during the therapy, what she had learned from doing the therapy, any insights she had gained and any changes she had felt. An evaluative discussion also followed where CG shared her impressions towards the art therapy program and the therapist, what she liked and didn't like about the program and the therapist, and any suggestions she might have for the program

and for the therapist. At the end of the session, the therapist thanked CG for participating in the program.

Observation and discussion

While looking at her artwork, CG occasionally laughed and made comments on her drawing or how she had felt while doing certain activities. In particular, CG pointed at her third session's drawing of the teddy bear surrounded in darkness and commented that nowadays when she feels sad, the darkness does not seem as dark, heavy, and suffocating as it used to be; CG will still feel sad, but it is not as heavy as it used to be. CG smiled after explaining this, and remarked that this is a pleasant change.

During the discussion session, CG shared that she feels participating in the therapy has helped her in straightening and figuring out the confusing thoughts she used to have and in better understanding herself, particularly in terms of her negative-thinking tendencies, what her issues are, her harsh self-criticizing tendencies, and her low self-compassion. CG further shared what she had learned from participating in the therapy, which included how to be mindful and how to treat herself kindly. In particular, CG shares that one of the most significant lessons she's learned is that she does not need to be harsh when criticizing herself, but that she can self-criticize in an objective and constructive way. Also, she is reminded more than ever now that everyone has their own strengths and weaknesses, that it is human to make mistakes, and that she is not alone in her troubles. These are all new ways of thinking that CG is glad to know of and strengthen now.

Evaluating the therapy, CG remarked that she liked being able to draw to express herself, and that her only complaint is a minor one, in that her table was

slightly uncomfortable as there was no space to rest her feet. Regarding the therapist, CG shared she found the therapist to be very helpful in assisting CG to straighten out her jumbled thoughts. CG added that the therapist has also given CG many ideas on how to deal with her issues.

At the end of the session, the therapist noted and commended CG on the work and progress CG have achieved throughout therapy, and encouraged CG to remember what she has learned and to continue practicing self-compassion. Finally, the therapist thanked CG for participating in the program, praised CG again for her improvements, and parted ways.

4.2.3 Analysis Summary of Participant CG

Table 3

Analysis summary of participant CG's sessions.

Session	Summary
1. Draw with your eyes closed	Showed perfectionism. Able to self-reflect, be aware of, and discuss her perfectionism.
2. Self-portrait dialogue	Showed tendency to self-criticize. Not used to thinking of flaws and failures in objective, understanding way; however, able to do so when encouraged. Showed low recognition of common humanity, but able to improve this. Thus, showed potential for increasing self-compassion.
3. Transforming the inner critic	Able to think mindfully about her self-critic, criticized self, and the current relationship between the two parts. Able to envision a healthy relationship between self-critic and criticized self, and able to discuss how to achieve it. Learned constructive criticism; how to self-criticize with gentler tone and encouraging words. Increase in rapport; able to trust therapist with discussing significant issue. Showed there is potential to increase self-compassion.
4. Acceptance and compassion	Still found it hard to give self-compassion, but showed efforts to practice it. Significant progress in believing she deserves self-compassion. Taught that first step of self-compassion is mindfulness and how to practice it at home (in the context of self-compassion).
5. Self-Compassion Break	Able to self-reflect and practice mindfulness and self-kindness. Gained insight over personal issue. Willing to practice self-compassion.

6. Compassionate Timeline	First found it difficult to think self-compassionately, but able to push self to do so. Practiced self-compassion at home. Showed increasing self-compassion.
7. Termination	Enjoyed art therapy, learned many things, gained personal insights. Shows improvement in self-compassion.
Conclusion	There is overall increase in self-compassion.

For more detailed analysis, please see Appendix 5C (Participant CG's Detailed Analysis).

4.2.4 Posttest: Self-Compassion Scale by Neff

Item no.	Positive Statements	Mean Total Score		Category	
		PRE-Test	POST-TEST	PRE-Test	POST-Test
		2.12	2.96	Low	Moderate
3	When things are going badly for me, I see the difficulties as part of life that everyone goes through.			PRE-Test Score	POST-Test Score
5	I try to be loving towards myself when I'm feeling emotional pain.	4	4	NO	
7	When I'm down and out, I remind myself that there are lots of other people in the world feeling like I am.	2	3	YES	
9	When something upsets me I try to keep my emotions in balance.	3	4	YES	
10	When I feel inadequate in some way, I try to remind myself that feelings of inadequacy are shared by most people.	2	3	YES	
12	When I'm going through a very hard time, I give myself the caring and tenderness I need.	4	3	NO	
14	When something painful happens I try to take a balanced view of the situation.	1	3	YES	
15	I try to see my failings as part of the human condition.	2	4	YES	
17	When I fail at something important to me I try to keep things in perspective.	1	3	YES	
19	I'm kind to myself when I'm experiencing suffering.	4	3	NO	

22	When I'm feeling down I try to approach my feelings with curiosity and openness.	1	3	YES
23	I'm tolerant of my own flaws and inadequacies.	2	3	YES
26	I try to be understanding and patient towards those aspects of my personality I don't like.	2	3	YES

Item no.	Negative Statements	PRE-Test Score reversed	POST-Test Score reversed	Increase of Self-Compassion
1	I'm disapproving and judgmental about my own flaws and inadequacies.	1	2	YES
2	When I'm feeling down I tend to obsess and fixate on everything that's wrong.	1	2	YES
4	When I think about my inadequacies, it tends to make me feel more separate and cut off from the rest of the world.	1	3	YES
6	When I fail at something important to me I become consumed by feelings of inadequacy.	1	3	YES
8	When times are really difficult, I tend to be tough on myself.	4	3	NO
11	I'm intolerant and impatient towards those aspects of my personality I don't like	4	4	NO
13	When I'm feeling down, I tend to feel like most other people are probably happier than I am.	1	2	YES
16	When I see aspects of myself that I don't like, I get down on myself.	1	3	YES
18	When I'm really struggling, I tend to feel like other people must be having an easier time of it.	4	2	NO
20	When something upsets me I get carried away with my feelings	1	2	YES
21	I can be a bit cold-hearted towards myself when I'm experiencing suffering.	4	3	NO
24	When something painful happens I tend to blow the incident out of proportion.	1	2	YES
25	When I fail at something that's important to me, I tend to feel alone in my failure.	1	3	YES

4.3 Participant ZQ

4.3.1 Description of Participant ZQ

4.3.1.1 Profile

Initials	:	ZQ
Gender	:	Female
Age	:	20 years, 8 months
Place, Date of Birth	:	Jakarta, August 14 th 1997
Religion	:	Islam
Birth Order	:	First of three children
Current Education Level	:	Bachelor's degree
Current Semester at University	:	6
Current GPA	:	3.22

Born and raised in Jakarta, ZQ is the first of three children, and has two younger sisters. ZQ relates that her parents are both also the eldest amongst their siblings, and ZQ often sees how they help take care of their younger siblings, often by giving them money. This makes ZQ feel she must also do the same, not only to her younger siblings, but also to other family members that may come to her for help. Thus, ZQ is determined to be financially successful. ZQ shares that she is closer with her father than with her mother, and used to have a distant and tumultuous relationship with her mother that is now much better and closer. Currently, ZQ has a boyfriend who she cares for very much, gives her lots of support and love and makes her very happy.

ZQ has high expectations for her future; ZQ is determined that she must have a successful career and be financially secure enough to provide for her parents and two younger sisters, and other relatives who might come to her for financial help. Thus, ZQ strives very hard to be successful academically in the hopes of earning the favors of future companies that will hire her. This huge pressure has become a burden to her, and she admits her high standards stress her all the time. ZQ constantly feels that she can do better, and is almost never satisfied

with her performance or efforts. These high expectations were not something imposed upon ZQ by anyone else, but came from within herself.

When thinking about her flaws and inadequacies, ZQ thinks she has many of them, and will often berate, critique and be hard on herself. ZQ believes she should not tolerate her flaws at all because if she makes many mistakes or failures, she will not be successful. When ZQ makes mistakes or experiences failures, she will feel very sad and criticize herself harshly.

4.3.1.2 Pre-Test: Self-Compassion Scale by Neff

Mean Total Score	Category	
2.38	Low	
Item no.	Positive Statements	Response Score (1—5)
3	When things are going badly for me, I see the difficulties as part of life that everyone goes through.	4
5	I try to be loving towards myself when I'm feeling emotional pain.	5
7	When I'm down and out, I remind myself that there are lots of other people in the world feeling like I am.	2
9	When something upsets me I try to keep my emotions in balance.	5
10	When I feel inadequate in some way, I try to remind myself that feelings of inadequacy are shared by most people.	2
12	When I'm going through a very hard time, I give myself the caring and tenderness I need.	4
14	When something painful happens I try to take a balanced view of the situation.	2
15	I try to see my failings as part of the human condition.	4
17	When I fail at something important to me I try to keep things in perspective.	2
19	I'm kind to myself when I'm experiencing suffering.	4
22	When I'm feeling down I try to approach my feelings with curiosity and openness.	2
23	I'm tolerant of my own flaws and inadequacies.	2
26	I try to be understanding and patient towards those aspects of my personality I don't like.	4

Item no.	Negative Statements	Response score reversed (1–5)
1	I'm disapproving and judgmental about my own flaws and inadequacies.	2
2	When I'm feeling down I tend to obsess and fixate on everything that's wrong.	1
4	When I think about my inadequacies, it tends to make me feel more separate and cut off from the rest of the world.	1
6	When I fail at something important to me I become consumed by feelings of inadequacy.	1
8	When times are really difficult, I tend to be tough on myself.	1
11	I'm intolerant and impatient towards those aspects of my personality I don't like	1
13	When I'm feeling down, I tend to feel like most other people are probably happier than I am.	1
16	When I see aspects of myself that I don't like, I get down on myself.	1
18	When I'm really struggling, I tend to feel like other people must be having an easier time of it.	1
20	When something upsets me I get carried away with my feelings	1
21	I can be a bit cold-hearted towards myself when I'm experiencing suffering.	4
24	When something painful happens I tend to blow the incident out of proportion.	4
25	When I fail at something that's important to me, I tend to feel alone in my failure.	1

4.3.2 Intervention Process

4.3.2.1 Session 1

Procedure

The first session with ZQ was conducted on Friday, April 27th 2018 at the art therapy studio in University X, from 9:30 to 10:30. ZQ was given the instruction to draw anything she'd like with her eyes closed. This was then followed with a discussion session.

Artwork, Observation and Discussion

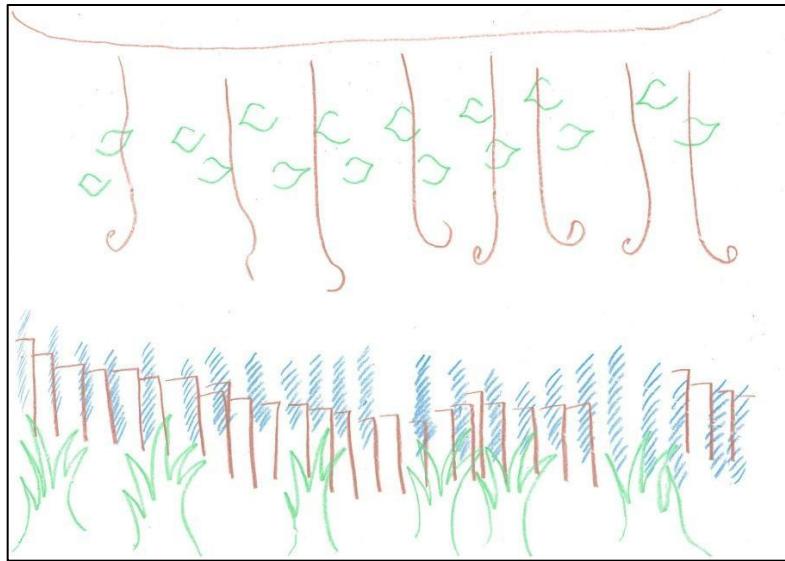


Figure 13. Participant ZQ's first session artwork.

ZQ used her non-drawing hand as a guide to mark where she had last drawn.

ZQ took her time in deciding where to draw, before slowly and steadily drawing.

Her face showed she was concentrating hard and she worked quietly.

ZQ shared she planned to draw a hanging garden with hanging plants, a blue fence, and shrubs in front of the fence. ZQ explained she wanted to make a pretty drawing, and she loves pretty plants and gardening; thus, she chose to draw a pretty garden. While drawing, ZQ wanted very much to make a good drawing and didn't want to make any mistake. Looking at the drawing, ZQ thinks the drawing is not too bad for something she did with her eyes closed, although she still feels bothered by the mistakes she made.

ZQ shared that with every task she is given, she always wants to do her best and will try her hardest. However, her best efforts often do not satisfy her, and she always feels she could've done better and haven't worked hard enough. After explaining herself, ZQ remarked she never really thought it through like that, and this session has given her a new insight on herself.

4.2.3.2 Session 2

Procedure

The second session with ZQ was conducted on Wednesday, May 2nd 2018 at the art therapy studio in University X, from 10:00 to 11:00. First, ZQ was asked to draw herself. Second, ZQ was asked to write criticisms for her drawing and herself. Third, ZQ was told to write rebuttals to objectively and realistically defend herself against the criticisms. These first three steps were done using her non-dominant hand. Last, ZQ was asked to look at her artwork and think of a lesson she had gained from this activity. A discussion session followed.

Artwork, Observation and Discussion

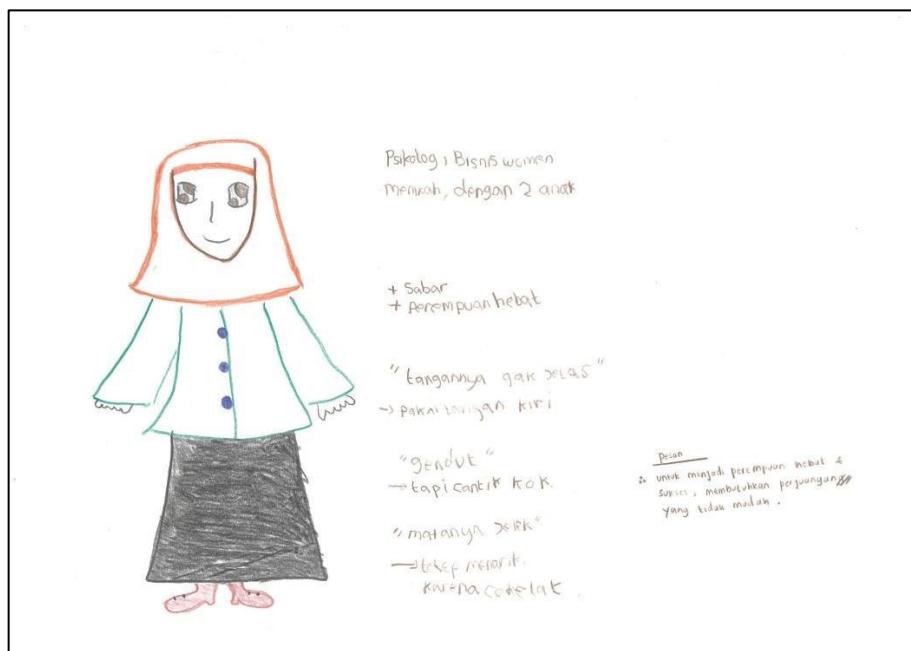


Figure 14. Participant ZQ's second session artwork.

ZQ worked very carefully and in a controlled manner, drawing her lines in slow, deliberate, steady, and continuous strokes. Midway through coloring the skirt, ZQ began to cry. ZQ apologized and asked to be excused to go to the

bathroom. After a few minutes, ZQ returned and continued her drawing. Lastly, ZQ wrote some brief descriptions of the drawing to the right of her work.

ZQ wrote her criticisms slowly but steadily, and took a much longer time to write her rebuttals. For the message she had learned from this activity ZQ wrote, “*untuk menjadi perempuan hebat dan sukses, membutuhkan perjuangan yang tidak mudah* (to be a great and successful woman, difficult struggle is required)”.

ZQ shared she wanted to make a good drawing and had to concentrate very hard to draw well with her left hand. ZQ explained that instead of drawing herself as she is presently, she had drawn what she wanted to be like in the future, which is as written in her description; “*psikolog, bisnis women, menikah, dengan 2 anak* (psychologist, businesswoman, married, with two children)”. However, as she was drawing, she thought about the many obstacles she must go through to realize her dream of being successful, and became so overwhelmed and sad that she cried. ZQ shares she has put a huge pressure on herself to be successful and be able to provide for her parents and younger siblings, and even though she has worked her hardest in her academics to achieve that goal, she feels she is never doing enough and will probably never be good enough to reach her goal. Furthermore, ZQ thought of how her boyfriend’s mother does not approve of ZQ. ZQ has tried to be perfect to impress and earn her boyfriend’s mother’s approval, but she feels she is failing to do so and doubts she will ever succeed.

ZQ shared that she actually has much more self-criticisms than what she wrote, but she felt so tired from all the aforementioned thoughts and crying that she couldn’t muster the energy to think of the criticisms she often say to herself. This led to a discussion about the criticisms she had written down, where ZQ explained each criticism and their rebuttals to the therapist. Regarding her

drawing, ZQ had written down “*tangannya gak jelas*” and “*matanya jelek*”. Her rebuttals for these were; “*pakai tangan kiri*” and “*tetap menarik, karena cokelat*”. ZQ was able to accept it was natural for her drawing to be “imperfect” and “not good”, as she was asked to draw with her non-dominant hand.

ZQ only wrote one criticism of herself; “*gendut (fat)*”, which was rebutted with “*tapi cantik kok (but still pretty)*”. ZQ shared she doesn’t want to sound vain, but she sometimes thinks she looks “alright”, and telling herself this makes her feel better, and is a way for her to give “self-love”. ZQ explains the self-criticism she most often engages in is calling herself fat or too tanned. She explains physical appearance is very important to her, as she believes being good-looking helps a person to be successful. Thus, ZQ puts a huge pressure on herself to be attractive, which is to be slim and fair-skinned. ZQ often calls herself “fat”, “dark-skinned”, and “not pretty”; she isn’t sure why she does this, as it makes her upset, but she can’t stop. ZQ also shared she often tells herself she’s not good enough and cries herself to sleep thinking about it. ZQ shares she often thinks negatively of herself and self-criticizes often. She has tried to comfort herself by saying “it’s okay, it’ll be okay”, but finds it hard to do and believe.

In discussing what she had learned from this session, ZQ shared she couldn’t think of anything else aside from what she had written because of how worked up she was about her problems. Thinking back now, ZQ shared that this session has made her realize and become fully aware of her self-criticizing tendencies and how upsetting it actually makes her feel, thus stirring her to want to change and “not be so negative”. The therapist remarked that this is indeed one of the goals of the therapy and ZQ expressed her excitement. At the end of the session, ZQ commented that today’s session had been interesting and insightful.

4.2.3.3 Session 3

Procedure

The third session with ZQ was conducted on Tuesday, May 8th 2018 at the art therapy studio in X University, from 10.30 to 11.30. ZQ was first instructed to divide the drawing paper into two, then guided to find an image which illustrates the relationship between her self-critic and her criticized self, and to draw it on the paper's left side. ZQ then was guided to find an image which illustrates how she would like the relationship between her self-critic and criticized self to be, and to draw it on the paper's right side. A discussion session then followed.

Artwork, Observation and Discussion



Figure 15. Participant ZQ's third session artwork.

ZQ folded the paper very carefully. Following the first guided imagery instructions, ZQ drew strands of black ropes twisted and tied tightly together, with smaller yellow ropes tying the black ropes at the center. For her second drawing, ZQ drew a big, strong tree with "beautiful leaves".

ZQ shared that when given the instructions to find a symbol for her self-critic, ZQ had thought of a big, huge cross (X) imposing on top of a small stone. The cross represented her self-critic, and the stone represented her whole self. The cross is huge and overbearing, comprising of all the things it is saying the stone should not do, and the stone is small and heavy with all the criticisms it is burdened with. When given the instructions to find a symbol for her criticized-self, ZQ thought of a stone, which now symbolized her criticized-self, wrapped tightly with a rope and hanging from a big bell. The stone is trying to release itself from the ropes, and trying to do so carefully to avoid ringing the bell.

Thus, for her first drawing, ZQ wanted to portray how suffocating and tightly binding her self-criticisms are; so she drew ropes which are tied very tightly together, to symbolize how she feels she cannot untie or loosen the hold of her self-critics. For her second drawing, ZQ drew a tree with the characteristics she hoped she could possess in the future; beautiful and strong. In this second drawing, the cross (her self-critic) is completely gone.

ZQ explains that her self-critic's intention is to help ZQ become her ideal version, that her self-critic wants ZQ to always improve, and that her self-critic is afraid ZQ will never reach her goals. While ZQ realizes her self-critic means well, her self-critic is also suffocating. ZQ is confused because she feels her self-critic's presence is necessary to ensure she always improves herself, yet her self-critic makes her feel bad. She is worried getting rid of her self-critic will derail her from getting to be her ideal self. Turning the focus on her criticized part, ZQ answers that her criticized self feels exhausted and sad, wants to tell the self-critic to stop criticizing for a while, and just needs to rest peacefully.

ZQ notes that in her future drawing, the cross (her self-critic) is gone. However, ZQ has no idea how this can be possible, since she thinks her self-critic is necessary for her to improve herself. Yet at the same time, ZQ also wants to feel good about herself and be free from the harsh effects of her self-critic. This led to a discussion between ZQ and the therapist about how having a self-critic whose intention is to push her to do well is good, but having a self-critic who makes her feel bad is not. Thus, the therapist guided ZQ to think of ways to self-criticize without putting herself down; in other words, how to criticize in a constructive, objective, and encouraging way. The therapist and ZQ discussed that she can make the tone of her self-critic to be more gentle and encouraging, and ZQ can also mind and change the wordings of her criticisms. Furthermore, the therapist introduced the idea of self-compassion, in terms of recognizing when ZQ herself is feeling down or 'suffering', being kind to herself when suffering, and trying something to cheer herself up and make herself feel better. At the end of the session, ZQ agreed to try and practice this new way of self-criticizing and thinking.

4.2.3.4 Session 4

Procedure

The fourth session with ZQ was conducted on Friday, May 11th at the art therapy studio in X University, from 8.00 to 9:00. In this session, ZQ was given guided imagery to find and draw a symbol or imagery which represents how she feels when she feels she is given compassion, acceptance, and kindness. Afterwards, a discussion session was held.

Artwork, Observation and Discussion

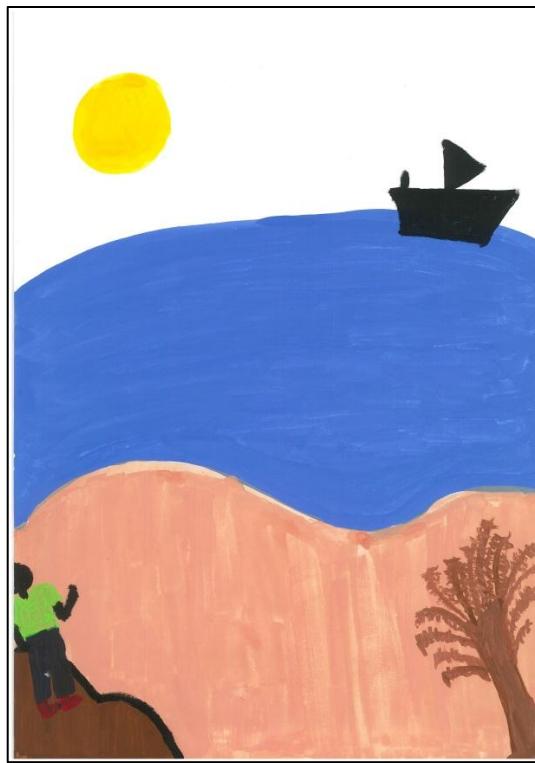


Figure 16. Participant ZQ's fourth session artwork.

ZQ hummed songs to herself while she painted and was often smiling. ZQ explained she had drawn a situation that gave her feelings of receiving compassion, which was a morning scene at the beach with her boyfriend. ZQ admitted she would usually hate the idea of going to the beach while the sun is out, but imagining being there with her boyfriend makes her feel happy instead. The therapist remarked how being given compassion can make even the worst situations feel better and peaceful for ourselves, and ZQ agreed while giving an example of how her boyfriend had helped her feel better through hard times. Like the feeling she gets when thinking of the scene in her painting, the thought of being given compassion makes her feel peaceful, calm, and content.

ZQ and the therapist discussed how ZQ can practice self-compassion and the benefits of self-compassion. ZQ brought up her biggest worry and challenge

about giving self-compassion; she is afraid she'll end up spoiling herself (“*manjain diri sendiri*”) when she gives self-kindness, such as telling herself to stop doing something that actually needs to be done just because it's too hard and upsetting, which can lead to ZQ not accomplishing her goals.

The therapist commended ZQ for thinking about self-compassion outside of the session and bringing up an issue to discuss with the therapist, and proceeded to discuss with ZQ how she can avoid this. The therapist suggested that ZQ can check with herself if the goal is important and must be accomplished, and if the it is worth the struggle of attaining it. If it is, then ZQ should give herself the support and encouragement to reach it, and to persevere even in times of struggle; this is self-compassion. Self-compassion is wanting what is best for ourselves, and helping ourselves attain our goals especially through times of struggle.

The therapist further emphasized that giving self-compassion means ZQ should not treat herself too harshly in the face of setbacks or failures; rather, to always remain objective when judging and criticizing herself, to remember that everyone makes mistakes and experiences failure, and to encourage herself to learn from mistakes and move forward. ZQ shared that this makes sense to her, and now that she can distinguish between giving herself compassion and spoiling herself, she feels more comfortable about practicing self-compassion.

4.2.3.5 Session 5

Procedure

The fifth session with ZQ was conducted on Tuesday, May 15th 2018 at the art therapy studio in X University, from 14.00 to 15.00. ZQ was instructed to ask herself what she needs right now and draw it.

Artwork, Observation and Discussion

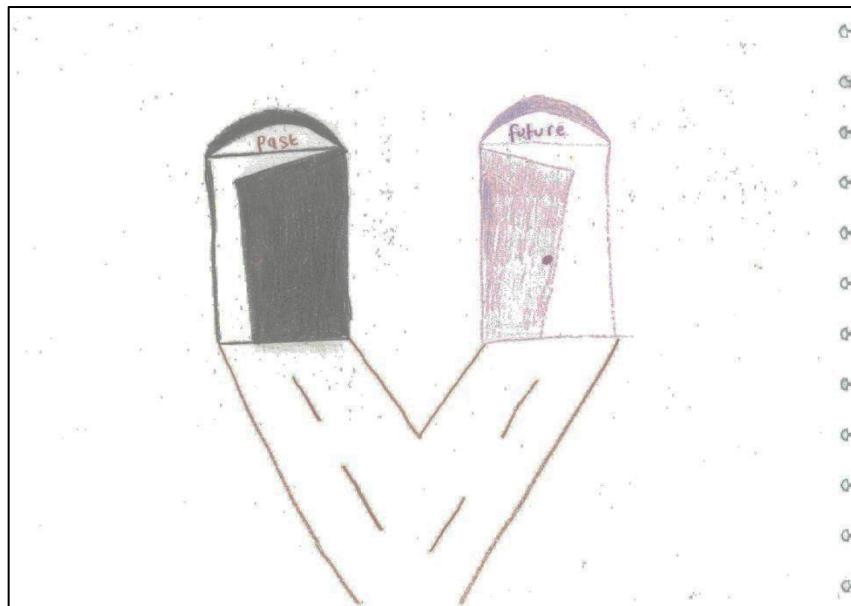


Figure 17. Participant ZQ's fifth session artwork.

Before beginning this session's art activity, ZQ shared that she had been trying to practice self-criticizing in a constructive, objective, and encouraging way, and had experienced a breakthrough this morning. The therapist commended ZQ on this wonderful progress and how she has improved in her self-compassion.

ZQ drew two paths, with the left path leading to a black door labeled "past" and the right path leading to a light purple door labeled "future". ZQ explained what she feels she needs the most is for other people to accept not only the good sides of her which she presently shows and the bright future she is trying to build, but also her bad sides from the past. ZQ then shared her 'bad' past with the therapist, and how her current friends don't know about it. ZQ is afraid of her friends finding out because she believes her friends won't be able to accept her past and would push her away, resulting in her losing her friends and being alone. At one point, ZQ commented, "how can they accept how I was if I can't even accept it?" at which point the therapist pointed out that perhaps what ZQ

first needs is not for other people to accept her, but for her to accept herself. ZQ was quiet for a few moments, before saying, "I think you're right. What I need is to accept my [bad past] first, before I can ask others to do it". The therapist and ZQ then discussed how self-compassion can help her accept herself. At the end of the session, ZQ expressed her excitement to work on accepting herself.

4.2.3.6 Session 6

Procedure

The sixth session with ZQ was conducted on Friday, May 18th 2018 at the art therapy studio in University X, from 8:00 to 9:00. ZQ was asked to draw her life's timeline, with a section each for her past, present, and future. ZQ was also asked to take a compassionate, kind, and loving perspective of herself while making it.

Artwork, Observation and Discussion



Figure 18. Participant Y's first session artwork.

While she drew, ZQ smiled, hummed to herself, and sometimes quietly murmured to herself. ZQ explained she had tried to take a compassionate and loving perspective and focused on the good things about herself. In the “past” section, ZQ first wrote “*kejadian umur 2,5 tahun (gajah)* (something that happened at 2.5 years old [elephant])” and drew an elephant and a toothpaste. ZQ had thought of a “cute” incident with her younger self who she sees as adorable and funny. Second, ZQ had written “*SMA (logo acara)* (High School [event logo])” with a drawing of a banner with the name “THAFEST” on it. ZQ explained how this is about one of her achievements she is most proud of.

At the “present” section of her timeline, ZQ had drawn herself and written qualities she is proud to have, which are “wise, mature, [and] patient”. ZQ explained she is very proud of how much she’s changed since junior high school, that she is now much more confident, able to make friends, and can better control her anger. ZQ further explained that she even hates yelling or raising her voice now, and can be more patient with her still easily angered mother, a development that helped ZQ to have a better, calmer relationship with her mother. Smiling, ZQ remarked, “if I really think about it, I’m quite proud of how much I’ve changed.”

For the “future” section, ZQ wrote “*rumah (a house)*” and drew a big house with an ornate design, a pathway leading to it, potted plants and flowers, and a tree around it. ZQ explained that she had thought of a house that she wants to have one day, “a big, beautiful, tidy house” she will live in. When asked about who she envisioned living with her, ZQ answered she might live alone, and looked content when thinking it. ZQ shared that after doing some self-reflecting, ZQ decided her dream no longer has to include marrying her boyfriend; if her boyfriend’s mother continues to disapprove of ZQ, even after ZQ has tried her

best to win her approval, then ZQ will let go of her boyfriend. She does not want to stay in that toxic, unhealthy mindset of constantly trying to impress someone who refuses to accept and appreciate her, someone who is not even kind to her. Instead, ZQ explained, she will focus on taking care of herself, and only marrying when she is ready.

ZQ remarked that it is getting easier for her to think of herself in a positive, compassionate way, and how much better she feels now compared to at the start of the therapy. Sharing that she has actively been trying to practice self-compassion in her own time, ZQ shared how she had never thought of this kind of mindset before, and how much it has and can help her. The therapist commended ZQ's efforts and progress, and remarked that "practice makes perfect"; ZQ might be find it easier to extend self-compassion as she has been pushing herself to practice it. ZQ agreed, and expressed her excitement at continuing to practice it and thus continuing to improve her well-being.

4.2.3.7 Session 7

Procedure

The seventh session with ZQ was conducted on Tuesday, May 22nd 2018 at the art therapy studio in University X, from 11:30 to 12:30. During this final session, the therapist and ZQ reviewed all of ZQ's artworks, while reviewing the activities and goals of each session. A discussion session followed in which ZQ shared her feelings during the therapy, what she had learned from the therapy, any insights she had gained and any changes she had felt. An evaluative discussion also followed where ZQ shared her impressions towards the art therapy program and the therapist, what she liked and didn't like about the

program and the therapist, and any suggestions she might have for the program and for the therapist. At the end of the session, the therapist thanked ZQ for participating in the program.

Observation and discussion

While looking at her artwork, ZQ smiled and occasionally made comments on her drawing or how she had felt while doing certain activities, such as how her first drawing is actually quite tidy for something drawn with her eyes closed, how burdened she had felt during the second session, and how much she feels lighter and better now.

During the discussion session, ZQ shared that she had found the experience of participating in art therapy as interesting, and has taught her that drawing and painting can help her to figure out a problem. ZQ liked that there were many art tools available for her to use; the range of supplies had made her eager and excited to try using them all to create interesting artworks. While ZQ liked that the art therapy room was calm with a conducive environment, she found the room to be occasionally noisy, as external noises would come into the room and distract her; personally, she would have preferred a quieter therapy room. Furthermore, ZQ shared that through the therapy, she has gained insight and understanding about how to criticize herself in a healthier way, how to give herself self-compassion, and also that everyone needs self-compassion, not self-pity. ZQ remarked that the therapist has also been very friendly and patient, and has made ZQ feel comfortable enough to talk about her feelings, thoughts, and problems.

At the end of the session, the therapist noted and commended ZQ on the work and progress she had achieved throughout therapy, and encouraged ZQ to

remember what she has learned and to continue practicing self-compassion. Finally, the therapist thanked ZQ for participating in the program, praised ZQ again for her improvements, and parted ways.

4.3.3 Analysis Summary of Participant ZQ

Table 4

Analysis summary of participant ZQ's sessions.

Session	Summary
1. Draw with your eyes closed	Showed perfectionism. Able to self-reflect, be aware of, and discuss her perfectionism.
2. Self-portrait dialogue	Showed tendency to self-criticize. Increase in rapport; able to trust therapist with discussing significant issue. Realized self-criticizing habits are upsetting her, thus wants to change; shows self-compassion in being touched by own suffering and wanting to relieve that suffering. Thus, showed potential for increasing self-compassion.
3. Transforming the inner critic	Able to think mindfully about her self-critic, criticized self, and the current relationship between the two. Able to see how she can have a healthy self-critic which also has a healthy relationship with her criticized self. Able to discuss how to achieve this. Learned constructive criticism; how to self-criticize with gentler tone and encouraging words. Showed capability for self-compassion and increasing it.
4. Acceptance and compassion	Still found it hard to give self-compassion. Had thought of an issue with self-compassion but able to talk through it with therapist, thus felt more comfortable with self-compassion and showed potential for increasing it.
5. Self-Compassion Break	Showed significant improvement in self-compassion and potential to increase it even more. Able to self-reflect and gain insight over personal issue. Advised and willing to practice mindfulness and self-kindness.
6. Compassionate Timeline	Has been practicing self-compassion, found it easier to think self-compassionately. Showed increasing self-compassion and potential to increase it even more.
7. Termination	Enjoyed art therapy, learned many things, gained personal insights. Shows improvement in self-compassion.
Conclusion	There is overall increase in self-compassion.

For more detailed analysis, please see Appendix 6C (Participant ZQ's Detailed Analysis).

4.3.4 Posttest results of Self-Compassion Scale by Neff

Mean Total Score		Category	
PRE-Test	POST-TEST	PRE-Test	POST-Test
2.38	3.50	Low	Moderate

Item no.	Positive Statements	PRE-Test Score	POST-Test Score	Increase of Self-Compassion
3	When things are going badly for me, I see the difficulties as part of life that everyone goes through.	4	3	NO
5	I try to be loving towards myself when I'm feeling emotional pain.	5	4	NO
7	When I'm down and out, I remind myself that there are lots of other people in the world feeling like I am.	2	4	YES
9	When something upsets me I try to keep my emotions in balance.	5	5	NO
10	When I feel inadequate in some way, I try to remind myself that feelings of inadequacy are shared by most people.	2	4	YES
12	When I'm going through a very hard time, I give myself the caring and tenderness I need.	4	5	YES
14	When something painful happens I try to take a balanced view of the situation.	2	4	YES
15	I try to see my failings as part of the human condition.	4	4	NO
17	When I fail at something important to me I try to keep things in perspective.	2	4	YES
19	I'm kind to myself when I'm experiencing suffering.	4	5	YES
22	When I'm feeling down I try to approach my feelings with curiosity and openness.	2	4	YES
23	I'm tolerant of my own flaws and inadequacies.	2	3	YES
26	I try to be understanding and patient towards those aspects of my personality I don't like.	4	4	NO

Item no.	Negative Statements	PRE-Test Score reversed	POST-Test Score reversed	Increase of Self-Compassion
1	I'm disapproving and judgmental about my own flaws and inadequacies.	2	3	YES
2	When I'm feeling down I tend to obsess and fixate on everything that's wrong.	1	3	YES
4	When I think about my inadequacies, it tends to make me feel more separate and cut off from the rest of the world.	1	3	YES
6	When I fail at something important to me I become consumed by feelings of inadequacy.	1	4	YES
8	When times are really difficult, I tend to be tough on myself.	1	2	YES
11	I'm intolerant and impatient towards those aspects of my personality I don't like	1	2	YES
13	When I'm feeling down, I tend to feel like most other people are probably happier than I am.	1	3	YES
16	When I see aspects of myself that I don't like, I get down on myself.	1	2	YES
18	When I'm really struggling, I tend to feel like other people must be having an easier time of it.	1	3	YES
20	When something upsets me I get carried away with my feelings	1	2	YES
21	I can be a bit cold-hearted towards myself when I'm experiencing suffering.	4	4	NO
24	When something painful happens I tend to blow the incident out of proportion.	4	4	NO
25	When I fail at something that's important to me, I tend to feel alone in my failure.	1	3	YES

4.4 Participant LOR

4.4.1 Description of Participant LOR

4.4.1.1 Profile

Initials	:	LOR
Gender	:	Female
Age	:	20 years, 7 months
Place, Date of Birth	:	Jakarta, September 25 th 1997
Religion	:	Catholic
Birth Order	:	Second of two children
Current Education Level	:	Bachelor's degree
Current Semester at University	:	4
Current GPA	:	2.94

Born and raised in Jakarta, LOR has an older brother who is currently taking his master's degree in engineering in Australia on a scholarship. Her father has been unemployed ever since she was in elementary school, and LOR herself doesn't know why; her parents both never explained the matter to her, even when she asked. Thus, her mother is the breadwinner of the family, and earns money by selling things; presently, she most often sells clothes and cookies she bakes herself. LOR shares that while her mother is very warm, kind, and affectionate, her father is very strict, to the point of being unreasonable, and often gets mad at his children for not doing exactly what he says. Thus, LOR has a closer relationship with her mother. LOR shares that she is often compared to her older brother by her family, with comments such as, "if he can do it, why can't you?" and "he can do it, don't tell us you can't do it?" This has made LOR feel some pressure to compete with her older brother.

LOR sets high standards for her academic performance and relationship with her family, in particular with her father. Although her family does not explicitly ask her to obtain high grades, LOR feels that her family constantly compares her to her older brother, who LOR feels is smarter than her and achieves better grades. In the beginning, this pushed LOR to do well academically only to keep up with

her brother. However, LOR now wants high grades to please herself, and not simply to keep up with her brother. LOR almost always feels that even her best efforts are not good enough, and is almost never satisfied with her performance. Regarding her relationship with her father, LOR feels that she should be having a closer and better relationship with her father, and the fact that her relationship with her father is not how she feels it should be bothers her quite a lot.

LOR sees her current academic performance and distant relationship with her father as her biggest shortcomings; she feels she must do better on these two aspects. When she thinks of her flaws and inadequacies, LOR feels annoyed and upset at herself, and sad. In the face of mistakes or failures, LOR's immediate reaction is to feel down, and she will remain in that mood for a very long time. This causes her to neglect and not take care of herself, such as by not eating or not resting well enough as she ruminates or tries to fix her mistakes. LOR reveals she often criticizes, demands, and becomes upset at herself.

4.4.1.2 Pre-Test: Self-Compassion Scale by Neff

Mean Total Score	Category
2.5	Low

Item no.	Positive Statements	Response Score (1—5)
3	When things are going badly for me, I see the difficulties as part of life that everyone goes through.	4
5	I try to be loving towards myself when I'm feeling emotional pain.	5
7	When I'm down and out, I remind myself that there are lots of other people in the world feeling like I am.	3
9	When something upsets me I try to keep my emotions in balance.	2
10	When I feel inadequate in some way, I try to remind myself that feelings of inadequacy are shared by most people.	2
12	When I'm going through a very hard time, I give myself the caring and tenderness I need.	3
14	When something painful happens I try to take a balanced view of the	2

situation.		
15	I try to see my failings as part of the human condition.	3
17	When I fail at something important to me I try to keep things in perspective.	3
19	I'm kind to myself when I'm experiencing suffering.	3
22	When I'm feeling down I try to approach my feelings with curiosity and openness.	1
23	I'm tolerant of my own flaws and inadequacies.	2
26	I try to be understanding and patient towards those aspects of my personality I don't like.	3

Item no.	Negative Statements	Response score reversed (1—5)
1	I'm disapproving and judgmental about my own flaws and inadequacies.	3
2	When I'm feeling down I tend to obsess and fixate on everything that's wrong.	1
4	When I think about my inadequacies, it tends to make me feel more separate and cut off from the rest of the world.	2
6	When I fail at something important to me I become consumed by feelings of inadequacy.	1
8	When times are really difficult, I tend to be tough on myself.	2
11	I'm intolerant and impatient towards those aspects of my personality I don't like	4
13	When I'm feeling down, I tend to feel like most other people are probably happier than I am.	1
16	When I see aspects of myself that I don't like, I get down on myself.	2
18	When I'm really struggling, I tend to feel like other people must be having an easier time of it.	4
20	When something upsets me I get carried away with my feelings	2
21	I can be a bit cold-hearted towards myself when I'm experiencing suffering.	1
24	When something painful happens I tend to blow the incident out of proportion.	4
25	When I fail at something that's important to me, I tend to feel alone in my failure.	2

4.4.2 Intervention Process

4.4.2.1 Session 1

Procedure

The first session with LOR was conducted on Friday, April 27th 2018 at the art therapy studio in University X, from 14:00 to 15:00. LOR was given the instruction to draw anything she'd like with her eyes closed. A discussion session followed.

Artwork, Observation and Discussion



Figure 19. Participant LOR's first session artwork.

When beginning to draw, LOR closed her eyes for a few moments, made a few strokes, then quickly opened her eyes and asked if the therapist was observing her. When this was confirmed, LOR remarked, "it doesn't feel good knowing that you're watching me draw". The therapist assured LOR that this was a safe place in which LOR can make no mistakes, and LOR closed her eyes again and began to draw. LOR worked very slowly, taking a long time to decide where to draw next; but once she's decided, she would draw her lines surely. Sometimes LOR would make making very hesitant strokes in certain place she

appears to be coloring in. LOR also often used her non-drawing hand to cover her drawing hand from the therapist's sight.

LOR explained she had drawn two flowers growing from the ground, as she thought it was something she can manage with her eyes closed. LOR explained she felt uncomfortable with the therapist observing her drawing because LOR knew she would make mistakes while she drew and did not want the therapist to see them. In general, LOR doesn't like people to see her making mistakes or failing. LOR shared she had felt very nervous and pressured while drawing because she really wanted to make a good drawing, but she was unable to see what she was doing. LOR shared she doesn't like it, that it's very messy, and that it isn't a good drawing. LOR admits she does set a high standard for most things she do, and likes to be able to control her work, plan them, and execute her plan as best as she can. However, LOR rarely deems her best efforts as enough, and always believes she could've done better.

4.2.1.2 Session 2

Procedure

The second session with LOR was conducted on Wednesday, May 2nd 2018 at the art therapy studio in University X, from 13:30 to 14:30. First, LOR was asked to draw herself. Second, LOR was asked to write criticisms for her drawing and herself. Third, LOR was told to write rebuttals to objectively and realistically defend herself against the criticisms. These first three steps were done using her non-dominant hand. Last, LOR was asked to look at her artwork and think of a lesson she had gained from this activity. A discussion session followed.

Artwork, Observation and Discussion

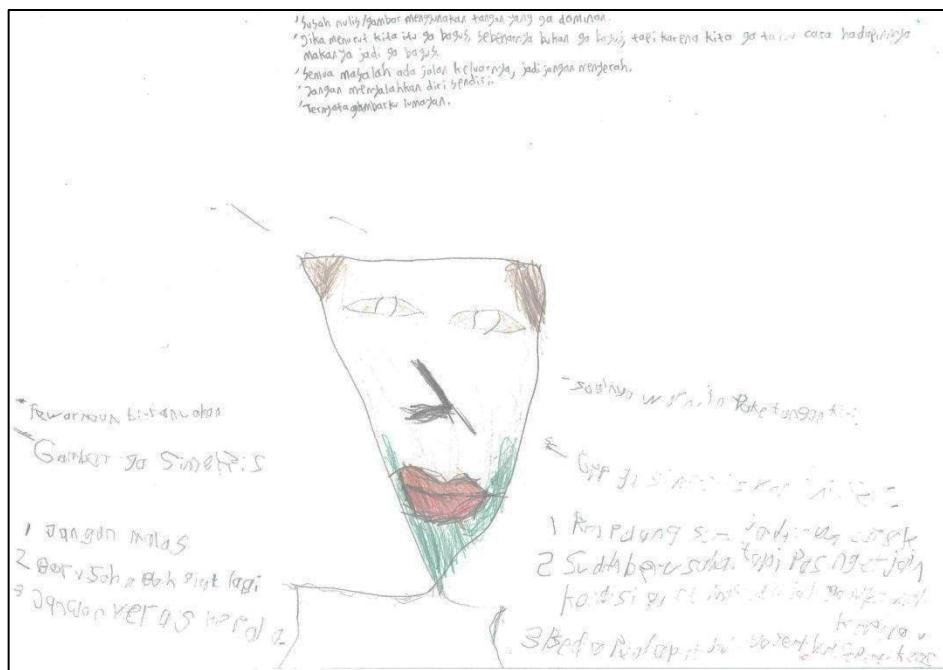


Figure 20. Participant LOR's second session artwork.

LOR worked carefully, trying to control her non-dominant hand as best she can. LOR also used her non-drawing hand to hide what her drawing hand was doing from the therapist. LOR was able to write criticisms right away and quickly; however, she took a much longer time to write rebuttals.

LOR explained that, before drawing, she had thought to herself, "this is art therapy. There are no rules in art. Just draw however you want", which prompted her to draw as freely as she wanted. LOR explained she had seen painting of the surrealism manner and had wanted to try making her own surrealistic artworks, something she's never done before. LOR shared, "*mumpung ada kesempatan dan ngga dinilai juga gambarnya, ya aku mau coba* (while there's an opportunity to do it and it's not graded, I wanted to try it)". However, LOR found it very hard to control her left-hand and expressed her dissatisfaction with how she was unable to color inside the lines.

LOR explained each criticism and their rebuttals to the therapist. Regarding her drawing, LOR's first criticism was "*pewarnaan berantakan* (messy coloring)", which was rebutted with "*soalnya warnain pake tangan kiri* (because colored with left hand)"; LOR admitted it was understandable that her coloring was messy because she is unaccustomed to using her left-hand. Her second criticism for her drawing was "*gambar ga simetris* (drawing isn't symmetrical)", which she rebutted with "*gpp ga simetris kan ini seni* (it's okay that it's unsymmetrical because this is art)"; LOR reasoned that art doesn't have to be perfect, and thus it's okay that her drawing isn't symmetrical.

When thinking of criticisms for herself, LOR thought of things she usually says to scold or chide herself. LOR's first criticism to herself was "*jangan malas*, (don't be lazy)", which LOR rebutted with "*krn pulang sore jadinya capek* (because arrives home late in the afternoon so feel tired)". LOR explains that she often berates herself for being lazy and always feels that she isn't working enough; after thinking about it, LOR can see that she often spends a full day at campus for classes and extracurricular activities, because of which she will feel too tired to do her assignments; thus, she can understand that she isn't simply lazy, but that she is also tired. LOR's second criticisms of herself was "*berusaha lebih giat lagi* (try to work harder)", which she rebutted with "*sudah berusaha, tapi pas ngerjain kondisi ga fit, hasilnya jadi ma maksimal* (have tried, but condition was unhealthy, so result was not maximum)". Regarding this criticism, LOR had specifically thought of a mid-semester exam in which she felt she had not studied hard enough and done well enough. However, LOR could realize that she had been feeling unwell on the days leading up to and the day of that exam, causing her to be distracted when studying and doing the exam. LOR's last criticism of

herself was “*jangan keras kepala* (don’t be stubborn)”, which was rebutted with “*beda pendapat jadiya terlihat keras kepala* (has different opinion so seems stubborn”). LOR explains that she often feel guilty for being too stubborn and not giving in to other people’s opinions; LOR often feels she is a bad person for being unable to follow what other people say or believes. Upon further thinking, LOR reasoned with herself that everybody has different opinions, and it is normal for her to have opinions that are different than her friends’, and that this doesn’t make her stubborn and a bad person.

LOR then discussed the insights she gained from this activity, which were, “*susah nulis/gambar menggunakan tangan yang ga dominan* (it’s difficult to write/draw with non-dominant hand)”, “*jika menurut kita itu ga bagus, sebenarnya bukan ga bagus, tapi karena kita ga tahu cara hadapinya makanya jadi ga bagus* (when we think it’s not good, it actually isn’t not good, but we just don’t know how to face it, so it isn’t good)”, “*semua masalah ada jalan keluarnya, jadi jangan menyerah* (every problem has a solution, so don’t give up)”, “*jangan menyalahkan diri sendiri* (don’t blame yourself)”, and “*ternyata gambarku lumayan* (my drawing is actually pretty good)”. LOR explained that after thinking about it, she can see that what she perceives to be poor performance on her part isn’t entirely because she has not tried enough, but because she did not know a better way to handle a situation; thus, LOR can admit that she has done her best under the circumstances. LOR also shares that the activity has opened her mind to not always blame herself harshly, but to try and understand why she made mistakes or fails; LOR admits that she has probably never thought this way, and was only accustomed to blaming or criticizing herself harshly. At the end of the session, LOR commented that today’s session had been interesting and insightful.

4.2.1.3 Session 3

Procedure

The third session with LOR was conducted on Tuesday, May 8th 2018 at the art therapy studio in X University, from 15.00 to 16.00. LOR was first instructed to divide the drawing paper into two parts. Afterwards, LOR was guided to find an image which illustrates the relationship between her self-critic and her criticized part. This image was then drawn on the left side of the paper. Following this, LOR was guided to find an image which illustrates how she would like the relationship between her self-critic and criticized part to be in the future. This image was then drawn on the right side of the paper. A discussion session then followed.

Artwork, Observation and Discussion

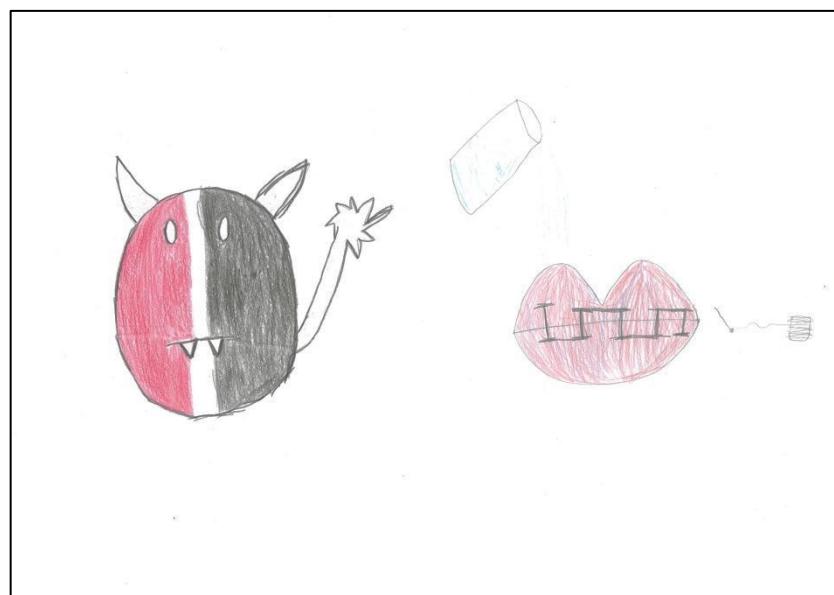


Figure 21. Participant LOR's third session artwork.

When given the instruction to divide the drawing paper into two, LOR proceeded to do so carefully, making sure the paper was divided equally. Following the first guided imagery instructions, LOR drew an oval-shaped figure with eyes, fangs, pointed ears, and a sharp tail. After the second guided imagery

instructions, LOR drew a mouth sewed shut, a sewing needle and thread, and cup pouring water on the sewed mouth.

During the discussion session, LOR explained that she had thought of a big, wide, open mouth that talks non-stop as a symbol for her self-critic. As for her criticized self, LOR had thought of fire to symbolize it, representing how LOR feels upset and heated whenever she hears her own criticisms. The first drawing is meant to represent 'evil'; LOR explains that the relationship between her self-critic and criticized self is unhealthy and not good. The critic is mean, harsh, and bad and can make the criticized self do bad things as it gets more upset; thus, their relationship is bad and plain evil. LOR's second drawing represents how she wants to be able to shut the self-critic's mouth and stop the self-critic from constantly criticizing her. The water represents how LOR wants to be able to cool down the mouth so that it does not become so mean and harsh.

LOR explains her self-critic is afraid LOR will make mistakes, and all it wants and its intention in being critical is to make sure LOR doesn't make mistakes and can perform up to LOR's high standards. In turn, LOR explained her criticized self feels upset, sad, and tired whenever it hears the self-critic. The criticized self wants the self-critic to not be so harsh and needs the self-critic to be quiet.

The therapist and LOR then discussed how her self-critic actually has good intention to help LOR not make mistakes, but that it isn't good that her self-critic is making her feel so upset. It isn't that the self-critic needs to shut up or stop criticizing at all, but that the self-critic needs to change how it criticizes. The therapist and LOR discussed how she can self-criticize in a more constructive, objective, and encouraging way. LOR thought of changing the tone of the self-critic to be gentler, more encouraging, and more supportive, and the therapist

suggested that LOR could also mind and change the wordings of her criticisms. LOR expressed that this might be hard for her to do, but she is willing to try it.

4.2.1.4 Session 4

Procedure

The fourth session with LOR was conducted on Monday, May 14th at the art therapy studio in X University, from 10.30 to 11:30. In this session, LOR was given guided imagery to find and draw a symbol or imagery which represents how she feels when she feels she is given compassion, acceptance, and kindness. Afterwards, a discussion session was held.

Artwork, Observation and Discussion

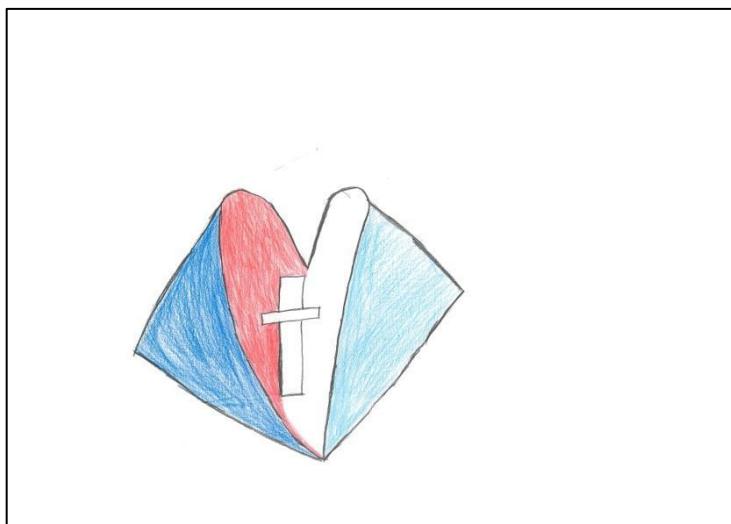


Figure 22. Participant LOR's fourth session artwork.

After given the instructions to find and draw a symbol or imagery which represents how she feels when she feels she is given compassion, acceptance, and kindness, LOR drew a heart with a cross inside it and two blue triangles on each side. During the discussion session, LOR explained that when she thought of being given compassion, love, acceptance, and kindness, she had felt so

happy and free, as if she could fly. She had thought of her mother and how her mother's compassion and love is without limit. LOR also thought of how she had been taught that God's love is without limits, and that she can always look for God when needing support and love. Thus, the heart that LOR drew represents compassion, caring, kindness, and love. The cross inside it represents God and how she can always turn to God for comfort. The left triangle with a darker blue represents the ocean, and the right triangle with a lighter blue represents the sky; these two parts of nature are limitless and boundless, and such is the feeling LOR feels when she receives compassion, support, and kindness.

The therapist then discussed with LOR how she feels about giving herself compassion and the feelings that come with it, and what her biggest challenge in giving self-compassion is. LOR admitted that she still finds it hard to not criticize herself harshly, and is unsure when to practice giving self-compassion. The therapist explained that LOR can use her harsh self-criticism as a reminder or alert to practice self-compassion; whenever LOR catches herself saying mean things to herself, that is when she should practice being mindful, giving constructive criticism, and extending self-kindness. As LOR was having trouble stopping herself from saying harsh self-criticisms, the therapist also suggested that the next time LOR catches herself saying mean and harsh things to herself, LOR should try to imagine saying those same things to her closest friends that she cares about. If LOR feels she would never say certain comments to her friends, that she should not say them to herself, too. The therapist encouraged LOR to be her own friend, and think of herself as a friend who needs encouragement and support, not demeaning or upsetting comments. LOR remarked that she never thought about it this way, that this makes sense to her,

and that she believes this could be help her in giving self-compassion. At the end of the session, LOR expressed that she is willing to try this new mindset of seeing herself as her own friend.

4.2.1.5 Session 5

Procedure

The fifth session with LOR was conducted on Friday, May 18th 2018 at the art therapy studio in X University, from 11.00 to 12.00. LOR was instructed to ask herself what she needs right now and draw it.

Artwork, Observation and Discussion

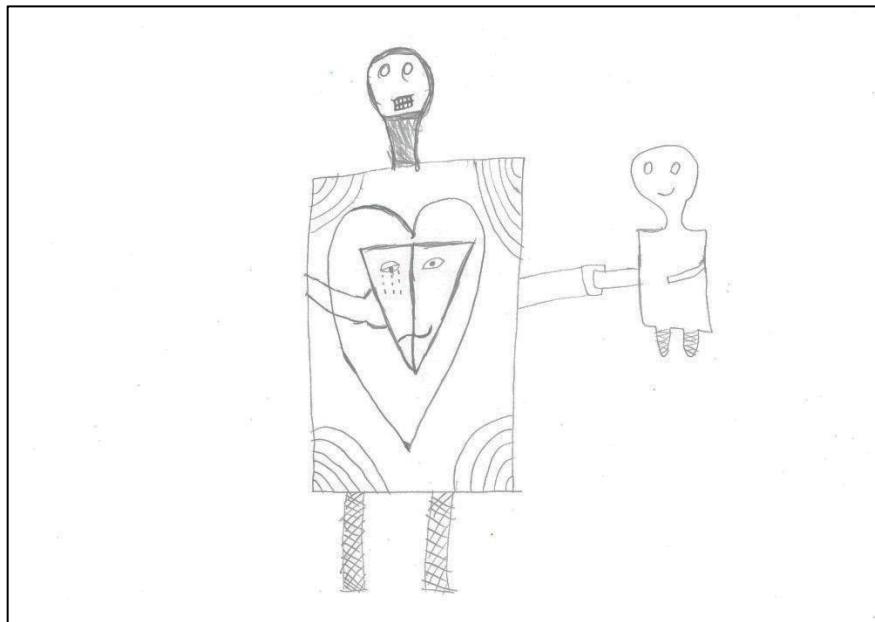


Figure 23. Participant LOR's fifth session artwork.

After given the instructions to think about what she needs and draw it, LOR drew a human-like figure with a heart inside. Inside the heart, there is an upside-down triangle sectioned into two parts; the left side has a crying eye and sad face, while the right side has a smiling lip and eye. The human-like figure's left

hand is touching the triangle, while its right hand is extended outwards and holding the hands of a smaller human-like figure who is smiling.

During the discussion session, LOR explains that what she felt she needed was compassion, both from herself and from other people. The human-like figure represents herself, and its left hand that touches the heart represents how LOR wants to give compassion to herself, while the right hand reaching out to another figure represents how LOW also wants to be given compassion by her family and friends. The triangle with sad and happy faces represents how, without compassion, LOR would be sad like the left side of the triangle, but when she receives compassion she will be happy like the right side of the triangle.

LOR then shares that the advice she received in the previous session, to think of herself as a friend, has helped her make sense of and feel more comfortable in giving self-compassion. In particular, LOR has practiced catching herself when harshly self-criticizing and thinking whether she would say the exact same thing to her friends; this has helped her to stop her harsh self-criticizing and to talk to herself in a more encouraging way. The therapist commended LOR's effort and progress, and encouraged LOR to continue practicing self-compassion.

4.2.1.6 Session 6

Procedure

The sixth session with LOR was conducted on Tuesday, May 22nd 2018 at the art therapy studio in University X, from 15:00 to 16:00. LOR was instructed to draw a timeline of her life, with one section each for her past, present, and future. Furthermore, LOR was instructed to take a compassionate, kind, and loving perspective of herself while making her timeline.

Artwork, Observation and Discussion

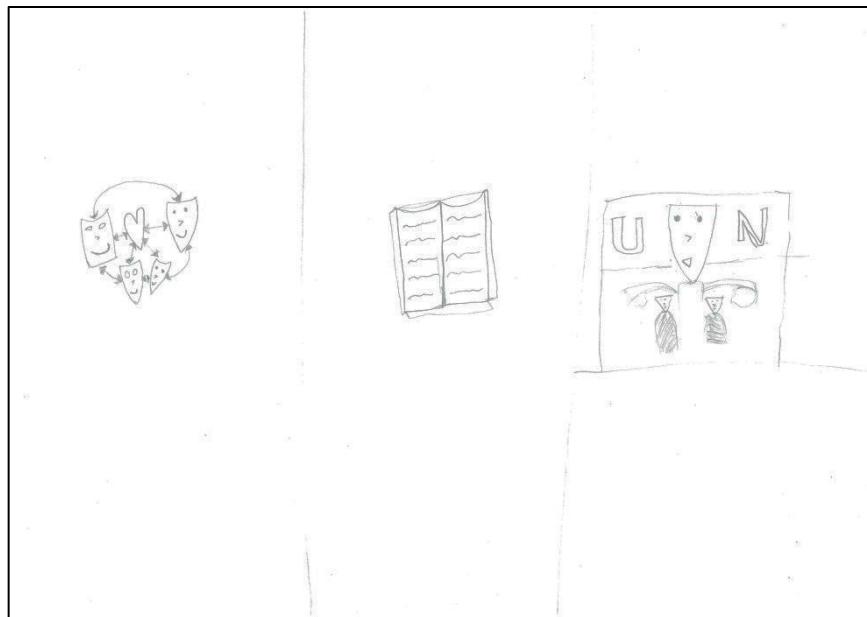


Figure 24. Participant LOR's sixth session artwork.

LOR took some time to think about what she would include in her timeline before starting to draw. During the discussion session, LOR explained what she had included in each section. For the “past” section, LOR had thought of the many instances she has received compassion from her family while growing up, and she wanted to draw something that will represent how much her family has given her compassion throughout the years. Thus, LOR had drawn a heart and four masks that are connected to each other by arrows, where the heart represents compassion and each mask represents a family member. LOR shares that she feels she has been given plenty of compassion and love from her family, and she is very grateful for that. Even when she sometimes fights or argues with her family, LOR believes they still love each other, and that LOR has learned about compassion and love from them.

For the “present” section, LOR had drawn a book to represent the most significant part of her life right now, which is her academic study. LOR shares she

can see that she has been working hard trying to balance academic work and extracurricular activities, and although the drop in her GPA is something she is disappointed in, LOR can forgive herself because she understands that she had been busy with extracurricular activities. For now, LOR wants to focus more on her grade and try to improve it in the upcoming semesters.

In the “future” section, LOR drew a dream and goal of hers, which is to work in the UN to help people. LOR believes that she can work hard enough to achieve this goal and that she believes in herself. Overall, LOR shared that she found it surprisingly easier to think of her life and herself in a self-compassionate manner. Particularly, LOR was pleasantly surprised that, when thinking of her future, she found that she can believe in herself to achieve her goal and say encouraging words to herself, instead of harshly criticizing herself like she used to do. LOR shares that she has been practicing giving herself constructive criticism and self-kindness, and though she doesn’t find it easy to do, she is still able to most of the time and feels more comfortable doing it the more that she does. The therapist commended LOR’s efforts and progress, and remarked that “practice makes perfect”; LOR might be finding it easier to extend self-compassion as she has been pushing herself to practice it. LOR agreed, and expressed her willingness to continue practicing self-compassion.

4.2.1.7 Session 7

Procedure

The seventh session with LOR was conducted on Friday, May 25th 2018 at the art therapy studio in University X, from 12:00 to 13:00. During this final session, the therapist and LOR first reviewed all the artworks LOR had made, while

reviewing the activities and goals of each session. A discussion session followed in which LOR shared her feelings during the therapy, what she had learned from doing the therapy, any insights she had gained and any changes she had felt. An evaluative discussion also followed where LOR shared her impressions towards the art therapy program and the therapist, what she liked and didn't like about the program and the therapist, and any suggestions she might have for the program and for the therapist. At the end of the session, the therapist thanked LOR for participating in the program.

Observation and discussion

While looking at her artwork, LOR smiled and occasionally laughed and made comments on her drawing or how she had felt while doing certain activities, such as how much she likes her fifth session's drawing and how nervous she had felt during her first session.

LOR shared that she had found the experience of participating in art therapy interesting and eye-opening, and she feels that she can understand herself better now. LOR enjoyed making artworks and expressing herself, as well as the various art supplies available for her to use. The lessons LOR feels she has learned from participating in this therapy includes how to give herself compassion and kindness, and how to handle harsh criticisms from herself and from others. In regards to any changes she has gone through throughout the therapy process, LOR remarks that she is now able to give herself self-compassion, that she does not criticize herself as much anymore, and that when she does, it is no longer harsh like it used to be.

At the end of the session, the therapist noted and commended LOR on the work and progress she had achieved throughout therapy, and encouraged LOR

to remember what she has learned and to continue practicing self-compassion. Finally, the therapist thanked LOR for participating in the program, praised LOR again for the improvements she's made, and parted ways.

4.4.3 Analysis Summary of Participant LOR

Table 5

Analysis summary of participant LOR's sessions.

Session	Summary
1. Draw with your eyes closed	Showed perfectionism. Able to self-reflect, be aware of, and discuss her perfectionism.
2. Self-portrait dialogue	Showed tendency to self-criticize. Not used to thinking of flaws and failures in objective, understanding way; however, able to do so when encouraged. Thus, showed potential for increasing self-compassion.
3. Transforming the inner critic	Able to think mindfully about her self-critic, criticized self, and the current relationship between the two. Able to see how she can have a healthy self-critic which also has a healthy relationship with her criticized self. Able to discuss how to achieve this. Learned constructive criticism; how to self-criticize with gentler tone and encouraging words. Showed capability for self-compassion and increasing it.
4. Acceptance and compassion	Still found it hard to give self-compassion, but showed efforts to practice it. Significant progress in learning about self-compassion. Willing to practice self-compassion, thus showed potential for increasing it.
5. Self-Compassion Break	Able to self-reflect and practice mindfulness and self-kindness. Found tip from previous session to be helpful in giving self-compassion. Showed increase in self-compassion and potential to increase it even more.
6. Compassionate Timeline	Showed improvement in self-compassion; found it easier to think self-compassionately. Have been practicing self-compassion. Showed potential to increase self-compassion.
7. Termination	Enjoyed art therapy, learned many things, gained personal insights. Shows improvement in self-compassion.
Conclusion	There is overall increase in self-compassion.

For more detailed analysis, please see Appendix 7C (Participant LOR's Detailed Analysis).

4.4.4 Posttest results of Self-Compassion Scale by Neff

Mean Total Score		Category	
PRE-Test	POST-TEST	PRE-Test	POST-Test
2.5	3.73	Low	High

Item no.	Positive Statements	PRE-Test Score	POST-Test Score	Increase of Self-Compassion
3	When things are going badly for me, I see the difficulties as part of life that everyone goes through.	4	1	NO
5	I try to be loving towards myself when I'm feeling emotional pain.	5	5	NO
7	When I'm down and out, I remind myself that there are lots of other people in the world feeling like I am.	3	1	NO
9	When something upsets me I try to keep my emotions in balance.	2	4	YES
10	When I feel inadequate in some way, I try to remind myself that feelings of inadequacy are shared by most people.	2	4	YES
12	When I'm going through a very hard time, I give myself the caring and tenderness I need.	3	3	NO
14	When something painful happens I try to take a balanced view of the situation.	2	3	YES
15	I try to see my failings as part of the human condition.	3	4	YES
17	When I fail at something important to me I try to keep things in perspective.	3	4	YES
19	I'm kind to myself when I'm experiencing suffering.	3	4	YES
22	When I'm feeling down I try to approach my feelings with curiosity and openness.	1	5	YES
23	I'm tolerant of my own flaws and inadequacies.	2	3	NO
26	I try to be understanding and patient towards those aspects of my personality I don't like.	3	3	NO

Item no.	Negative Statements	PRE-Test Score reversed	POST-Test Score reversed	Increase of Self-Compassion
1	I'm disapproving and judgmental about my own flaws and inadequacies.	3	3	NO
2	When I'm feeling down I tend to obsess and fixate on everything that's wrong.	1	4	YES
4	When I think about my inadequacies, it tends to make me feel more separate and cut off from the rest of the world.	2	5	YES
6	When I fail at something important to me I become consumed by feelings of inadequacy.	1	3	YES
8	When times are really difficult, I tend to be tough on myself.	2	3	YES
11	I'm intolerant and impatient towards those aspects of my personality I don't like	4	5	NO
13	When I'm feeling down, I tend to feel like most other people are probably happier than I am.	1	4	YES
16	When I see aspects of myself that I don't like, I get down on myself.	2	4	YES
18	When I'm really struggling, I tend to feel like other people must be having an easier time of it.	4	5	YES
20	When something upsets me I get carried away with my feelings	2	3	YES
21	I can be a bit cold-hearted towards myself when I'm experiencing suffering.	1	5	YES
24	When something painful happens I tend to blow the incident out of proportion.	4	5	YES
25	When I fail at something that's important to me, I tend to feel alone in my failure.	2	4	YES

4.5 Participant M

4.5.1 Description of Participant M

4.5.1.1 Profile

Initials	:	M
Gender	:	Female
Age	:	21 years, 3 months
Place, Date of Birth	:	Pekanbaru, January 16 th 1997
Religion	:	Islam
Birth Order	:	Second child of three siblings
Current Education Level	:	Bachelor's degree
Current Semester at University	:	4
Current GPA	:	2.5

Born and raised in Pekanbaru, M is the second of three children and the only daughter. M's mother works as a principal at a local elementary school, while M's father used to be a freelance writer but is currently unemployed. M keeps an amiable relationship with both parents and M feels closer to her mother, as her father is more strict and emotionally distant with his children than M's mother. M shares she keeps an amiable relationship with her siblings. M spent all her childhood and adolescence in Pekanbaru and moved to Jakarta for university. She currently lives alone while the rest of her family are in Pekanbaru. M admits doesn't have any close friends either and often feels lonely. Her number one hobby is writing, especially expressive writing.

M sets high standards for herself on her academic performance. M went through a significant personal problem during her second semester which disrupted her academic activities and made her GPA significantly drop; this really bothers M. She puts pressure on herself to perform the best she can; however, she constantly feels her best efforts aren't good enough and she can always do better. M's high standards and expectations did not come from her family, but from within herself.

There are many flaws and inadequacies M believes she has, the biggest one being that M feels she is too 'closed', and has a very difficult time opening up to others, even though she wants to. When she thinks of her shortcomings, M feels disappointed in herself and that she can do better. Furthermore, when M makes mistakes or experiences failure, she will also feel disappointed, upset, and annoyed at herself, and sad. She will then treat herself harshly by isolating herself, binge eating, and in general not caring about her well-being. M also often engages in self-criticizing and berating herself.

4.5.1.2 Pre-Test: Self-Compassion Scale by Neff

Mean Total Score	Category	
1.35	Low	
Item no.	Positive Statements	Response Score (1–5)
3	When things are going badly for me, I see the difficulties as part of life that everyone goes through.	2
5	I try to be loving towards myself when I'm feeling emotional pain.	2
7	When I'm down and out, I remind myself that there are lots of other people in the world feeling like I am.	2
9	When something upsets me I try to keep my emotions in balance.	1
10	When I feel inadequate in some way, I try to remind myself that feelings of inadequacy are shared by most people.	2
12	When I'm going through a very hard time, I give myself the caring and tenderness I need.	2
14	When something painful happens I try to take a balanced view of the situation.	1
15	I try to see my failings as part of the human condition.	2
17	When I fail at something important to me I try to keep things in perspective.	1
19	I'm kind to myself when I'm experiencing suffering.	1
22	When I'm feeling down I try to approach my feelings with curiosity and openness.	1
23	I'm tolerant of my own flaws and inadequacies.	1
26	I try to be understanding and patient towards those aspects of my personality I don't like.	2

Item no.	Negative Statements	Response score reversed (1—5)
1	I'm disapproving and judgmental about my own flaws and inadequacies.	2
2	When I'm feeling down I tend to obsess and fixate on everything that's wrong.	1
4	When I think about my inadequacies, it tends to make me feel more separate and cut off from the rest of the world.	1
6	When I fail at something important to me I become consumed by feelings of inadequacy.	1
8	When times are really difficult, I tend to be tough on myself.	1
11	I'm intolerant and impatient towards those aspects of my personality I don't like	1
13	When I'm feeling down, I tend to feel like most other people are probably happier than I am.	1
16	When I see aspects of myself that I don't like, I get down on myself.	1
18	When I'm really struggling, I tend to feel like other people must be having an easier time of it.	2
20	When something upsets me I get carried away with my feelings	1
21	I can be a bit cold-hearted towards myself when I'm experiencing suffering.	1
24	When something painful happens I tend to blow the incident out of proportion.	1
25	When I fail at something that's important to me, I tend to feel alone in my failure.	1

4.5.2 Intervention Process

4.5.2.1 Session 1

Procedure

The first session with M was conducted on Monday, April 30th 2018 at the art therapy studio in University X, from 11:30 to 12:30. M was given the instruction to draw anything she'd like with her eyes closed. This was then followed with a discussion session.

Artwork, Observation and Discussion

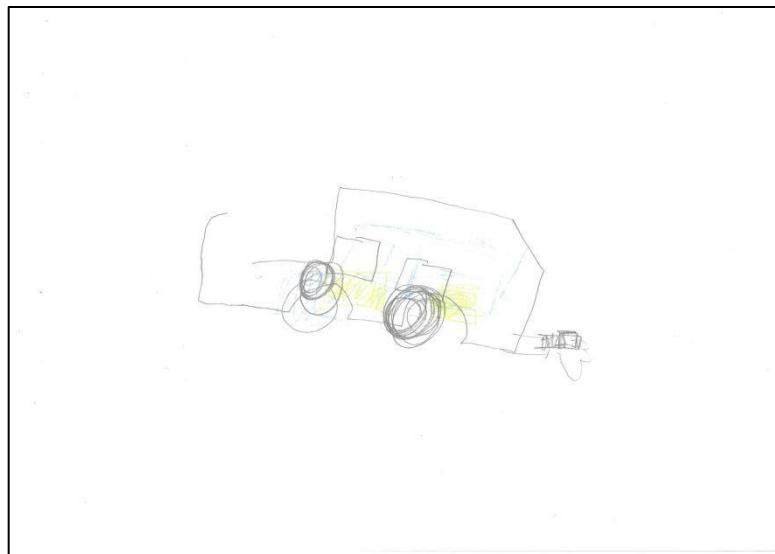


Figure 25. Participant M's first session artwork.

While drawing, M used her hand as a guide to mark where she had drawn and decide where to draw next. During the discussion session, M explained she chose to draw a car because she thought she could draw it correctly even with her eyes closed. M shared she was and worried whether the drawing would be good. After drawing the pencil, M had felt unsure about coloring, but then thought to herself that she's making an artwork, and art has no right or wrong. This made her feel relieved and freer to do what she would like. Looking at her drawing, M remarks that it's not too bad for something that she drew with her eyes closed, but it is definitely very messy and can be better. M remarked quietly on things she could've done differently.

The therapist noted aloud that M seems to be reviewing her work and effort, and thinking of ways she could've done things better. M shares that she often does that, thinking back about her past mistakes, failures, or any other things that she feels did not go as she wanted to, and thinks of ways that she could've "done better". When asked for a percentage of the times she had thought this way

about anything that didn't go as she planned, M answered, "maybe...90% of the time", and shared that she would often ruminate on her past mistakes, as well. M also shared that these thoughts upset her and makes her feel like she's stupid. M often wonders, "why was I so stupid?" and thinks that she's never able to meet the standards she's set for herself. When asked in which areas of her life this applied to, M answered academically and personally, but was reluctant to further elaborate on the personal aspect. M was quiet for a long time and looked unwilling to share about her personal life. Throughout the whole session, M was mostly quiet and gave short answers, only specifically answering questions without offering additional explanations. Not wanting to push M too much on her first session, the therapist ended the session with M's last remark.

4.2.1.2 Session 2

Procedure

The second session with M was conducted on Thursday, May 3rd 2018 at the art therapy studio in University X, from 16:00 to 17:00. M was given four steps of instructions. First, M was instructed to draw herself. Second, M was asked to write down criticisms she can think of for her drawing and of herself. Third, M was told to write down rebuttals to objectively and realistically defend herself against the criticisms. These first three steps were done using her non-dominant hand. Last, M was asked to take a few moments to look at her drawing and what she had written, and think of a lesson she had gained from this activity. This was then followed with a discussion session.

Artwork, Observation and Discussion

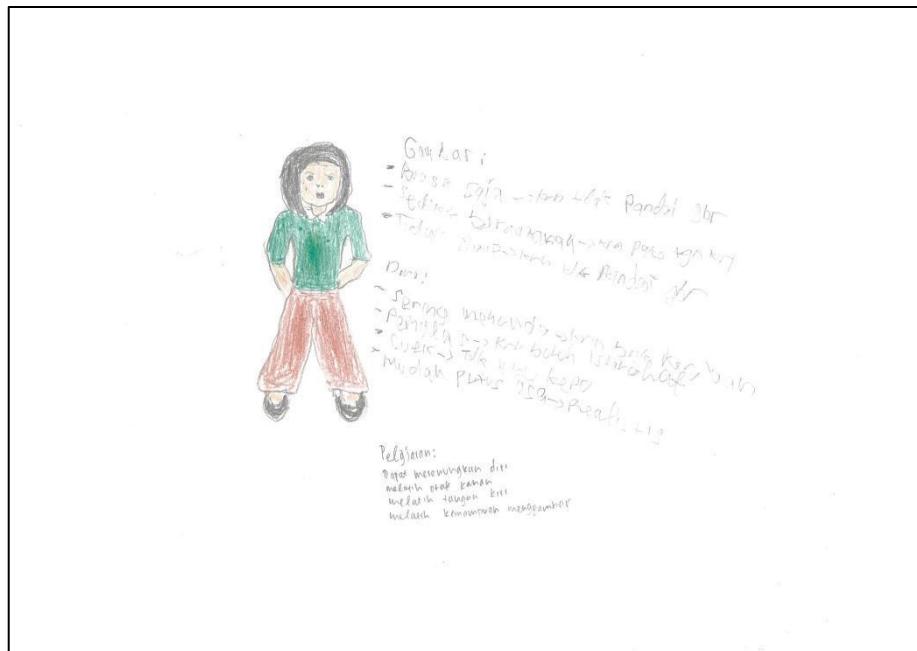


Figure 26. Participant M's second session artwork.

M worked with a very concentrated look on her face, and drew with shaky, discontinued strokes, often erasing her lines and re-drawing them carefully. M also took her time in choosing pencil colors and tried very carefully to color inside the lines. M was able to write criticisms quickly; however, writing the rebuttals took noticeably more effort and time for M. For the messages she had gained, M wrote, “dapat merenungkan diri (can self-reflect)”, “melatih otak kanan (train the right brain)”, “melatih tangan kiri (train the left hand)”, and “melatih kemampuan menggambar (train drawing skills)”.

M explained each criticism and their rebuttals to the therapist. Regarding her drawing, M wrote “biasa saja (ordinary)”, “sedikit berantakan (a little messy)”, and “tidak mirip (not similar [to herself])”. Her rebuttals were; “krn tidak pandai gbr (because not good at drawing)”, “krn pake tgn kiri (because used left hand)”, and again wrote “krn tidak pandai gbr (because not good at drawing)”. M explained it

was understandable her drawings were ordinary and did not resemble herself as she is not good at drawing. Furthermore, M can understand her drawing is messier than she would like because she had drawn with her non-dominant hand

M's first criticism of herself was “*sering menunda* (often procrastinates)”; M explains this is true for academic work. M's rebuttal for this was, “*krn byk kerjaan* (many other things to do)”; M lives alone and has to take care of house chores which often make her tired and unmotivated to do her schoolwork. M's second criticism of herself was “*pemalas* (lazy)”, which she rebutted with “*krn butuh istirahat* (because need rest)”. M's third criticism of herself is “*cuek* (aloof)”; M is aware she's often aloof to other people, and don't ask many questions or try to get to know them better. M rebutted this with, “*tdk mau kepo* (don't want to be nosy)”; M doesn't want to appear as a nosy person by asking too many questions, as she's worried people will not like it. M currently does not have close friends and would like to make some, but is unsure how to make conversations without appearing too nosy. M's last criticism of herself is, “*mudah putus asa* (gives up easily)”, which M rebutted with “*realistik* (realistic)”. M explains she often gives up before even starting a project or pursuing a goal because she 'realistically' thinks she cannot live up to the expectations she has set.

Discussing what she had learned from this session, M explained she had learned a way to self-reflect that she never had before, which was to try to understand the objective and reasonable explanations behind each self-criticism, instead of just stopping at criticizing herself and calling herself names. M had found it hard to think of the rebuttals, as she was used to thinking negatively about and criticizing herself, but never tried to think deeper and objectively about

her self-criticisms. At the end of the session, M commented that today's session had been interesting and insightful.

4.2.1.3 Session 3

Procedure

The third session with M was conducted on Monday, May 7th 2018 at the art therapy studio in X University, from 11:30 to 12:30. M was first instructed to divide the drawing paper into two, then guided to find an image which illustrates the relationship between her self-critic and her criticized self, and to draw it on the paper's left side. M then was guided to find an image which illustrates how she would like the relationship between her self-critic and criticized self to be, and to draw it on the paper's right side. A discussion session then followed.

Artwork, Observation and Discussion

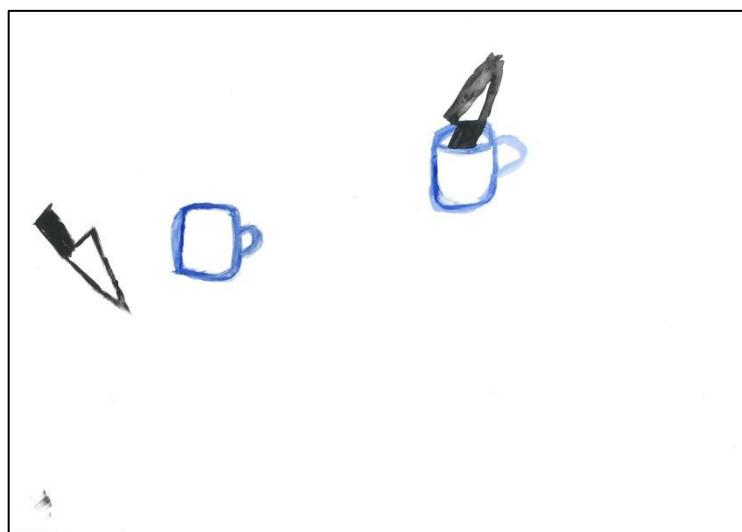


Figure 27. Participant M's third session artwork.

M folded the paper carefully. Following first the instructions, M drew a black knife and a blue cup. After the second instructions, M again drew a black knife and a blue cup, only this time the knife was placed handle-first inside the cup.

M explained she chose a knife to symbolize her self-critic as her self-critic is sharp and harsh ("*tajam*") and can hurt her very badly. The blue cup represents how her criticized self look fine and polished but is actually fragile and breakable, and can be damaged by the knife. On the left side drawing, the knife is near and ready to damage the cup. On the right side drawing, the knife is inside the cup to symbolize how M wants to be able to welcome and accept her self-criticisms. The knife has a blade cover and is placed handle-first into the cup, so it won't hurt the cup. This symbolizes how N wants her self-critic to be less harsh and hurtful. N realizes her self-critic has its uses, yet she would like it to not hurt her so much.

M explains her self-critic's intention is to make sure M doesn't make mistakes and always does what's right. M's self-critic is afraid of other people judging her badly, and wants M to do what's so others don't think badly of her. In turn, M's criticized self feels tired and overwhelmed when she hears the self-critic giving out harsh judgments and criticisms. M's criticized self wants her self-critic to not be so harsh and mean, and needs support and positive encouragement.

Together with the therapist, M thought of ways through which she can achieve the relationship she wishes her self-critic and criticized self to have. These included making the tone of the self-critic to be gentler and more encouraging, and also minding and changing the wordings of her criticisms to be more constructive and supportive. M agreed this is something she can work on.

4.2.1.4 Session 4

Procedure

The fourth session with M was conducted on Friday, May 11th at the art therapy studio in X University, from 13.00 to 14:00. M was given guided imagery

to find and draw a symbol or imagery which represents how she feels when she feels she is given compassion. A discussion session followed.

Artwork, Observation and Discussion

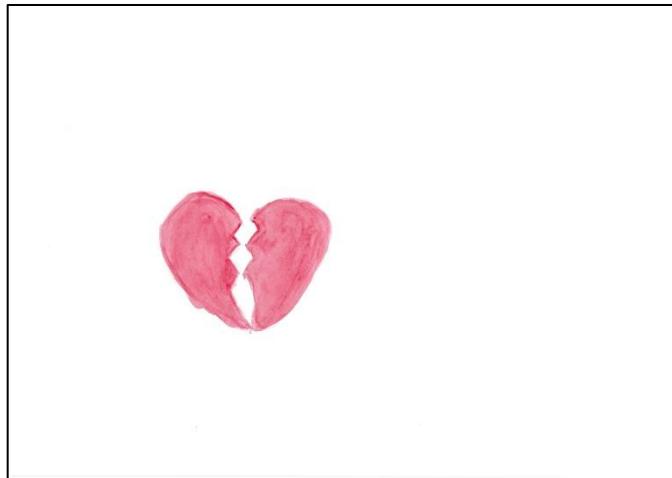


Figure 28. Participant M's fourth session artwork.

At the beginning of the session, M shared a small problem she had with her teammates. The therapist then guided M to work through this problem by thinking about what she can do to help her situation. After M was able to smile and joke about the situation, the therapist moved on with the session's activity.

After she finished painting, M explained that she had thought of her mom as someone who always gave her compassion, kindness, caring, and love. However, thinking about this made M feel both sad and touched ("sedih sama terharu"). M started to cry, and explained she feels her mother has sacrificed so much for their family, and M feels sad when thinking about it. M is very touched by her mother's kindness and feels somewhat guilty to her mother that she has acted badly in the past, thus making her feel sad. M shares that when thinking of her past mistakes, she often says very harsh things to herself, such as calling herself "bodoh banget (so stupid)".

The therapist had thought to discuss one of these 'stupid' mistakes of M's, in particular her poor actions during her second semester of university that she keeps alluding to, to exercise M's mindfulness and mindfully assess if the mistake really was 'stupid', and thus asked M to share the 'stupid' mistake she had meant. However, M was reluctant to tell the therapist about it, and said that she has never talked about what she did for fear of people's bad judgment. The therapist discussed with M how this session is a safe place to share her story and that doing so might help her feel better. M shares these therapy sessions have made her want to be kinder to herself, and though she is finding it difficult, she wants to work on it; but for now, she isn't ready to talk about that big mistake yet.

The therapist then discussed with M her biggest challenge in giving self-compassion. M shared she's scared to talk positively to herself and be optimistic as she's afraid of becoming disappointed; M would rather demean and belittle herself when doing a task because if she told herself she can do it, and then fails, she'll be disappointed. The therapist and M discussed how this might help M attain her goal and avoid disappointment, but it also makes M suffer. The therapist offered there is another way for M to attain her goal, in which she can constructively criticize herself and offer herself support and kindness through any hardships. M agreed this is a good mindset to have, although it will be hard to adopt. The therapist gave M encouragement to try and practice. The therapist then emphasized the essence of self-compassion, which is realizing when we are suffering and attempting to relieve that suffering, while always wanting what's best for ourselves; this includes keeping ourselves on track of attaining our goal, but doesn't entail giving ourselves such harsh criticism and judgment that we feel burdened and unpleasant. M likes this mindset and wants to practice it.

4.2.1.5 Session 5

Procedure

The fifth session with M was conducted on Monday, May 14th 2018 at the art therapy studio in X University, from 9.00 to 10.00. M was instructed to ask herself what she needs right now and draw it.

Artwork, Observation and Discussion

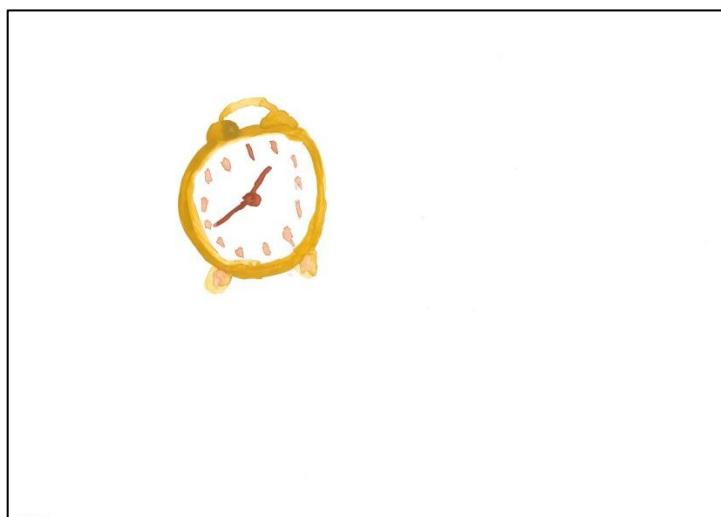


Figure 29. Participant M's fifth session artwork.

M explained what she needs most is time "to heal myself, to move on, to grow, to be more independent, to be more disciplined, and to be more active (socially)". M shared she has had some big problems and negative events in the past she still cannot move on from, and that only time will help her to. The therapist asked if this included the 'stupid' mistake of her second semester and M acquiesced.

The therapist and M discussed again how sharing this problem can make M feel better, with the therapist sharing a metaphor which M found funny. M finally agreed to talk about her second semester's problem. However, M wants to do this in the next session, as she thinks there won't be enough time to talk about it now. The therapist commended M for deciding this and remarked this is another

way M is helping herself heal and taking care of herself; M agreed and expressed how she wants to start take care of herself and stop being negative to herself. M then talked about a particular problem she was ready to share with the therapist to try make herself feel better. After M finished, the therapist praised M for being able to share a problem, and M laughed and said, "it does feels nice to talk about it. It feels relieving, like I've let something go. I feel lighter now."

4.2.1.6 Session 6

Procedure

The sixth session with M was conducted on Friday, May 18th 2018 at the art therapy studio in University X, from 12:00 to 13:00. M was instructed to draw a timeline of her life, with one section each for her past, present, and future; and to take a compassionate, kind, and loving perspective of herself while making it.

Artwork, Observation and Discussion

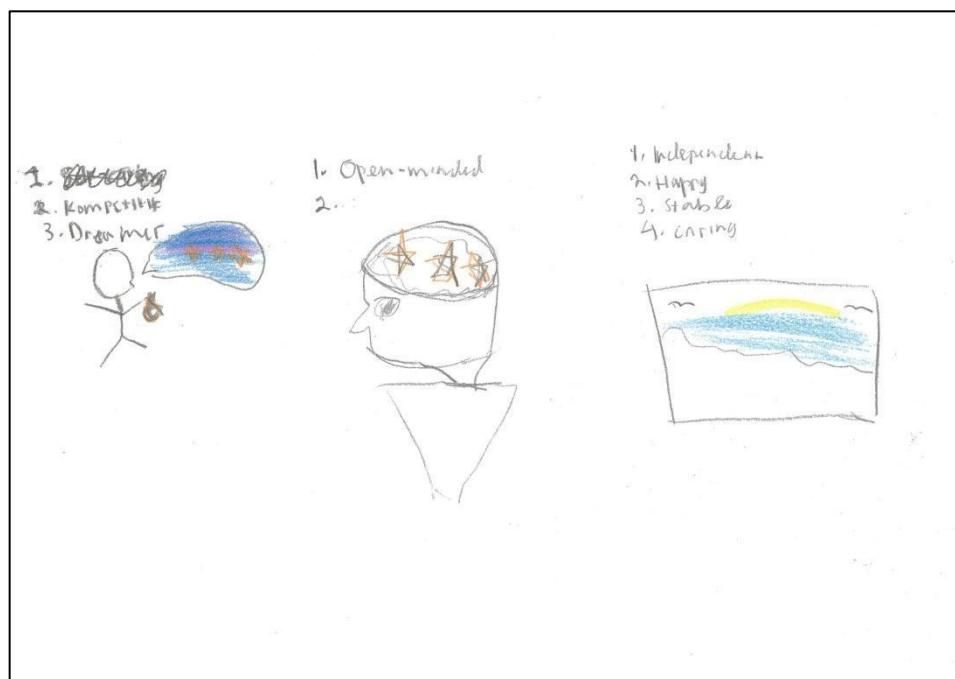


Figure 30. Participant M's sixth session artwork.

M looked more cheerful this session; she smiled and laughed often, and initiated small talk with the therapist at the beginning of the session, something she had never done before. During the discussion session, M explained she tried to keep a positive and compassionate mindset while making her timeline and focused on things she likes about herself. In the past section, M had written “competitive” and “dreamer” and drew a stick figure of her young self with thought clouds. M explained she used to be very motivated and competitive when she was younger, that she admires the stronger drive she used to have, and that she wishes she could go back to having it. Additionally, M’s younger self also had many dreams that were not yet limited by the “common sense that comes from getting older”. M liked that she used to think she can do anything she wants, instead of herself now who’s very cautious to dream in fear of disappointment.

In the present section, M wrote down “open-minded” and drew herself with a literally open head filled with stars. Her lines for this particular illustration were messier than the others, and M explained this was because she was first unsure of what to draw, and then unsure of how to draw what she had in mind. However, M didn’t want to use an eraser; she wanted to force herself to think that it’s okay to make mistakes. Thus, she left the drawing as ‘messy’ as it is. M explained she believes she is more open-minded now, and it is a quality she most likes about herself. When asked if M can think of any other qualities about herself that she likes, M smiled and said that for now, being open-minded is the only positive quality of hers she feels comfortable enough to acknowledge. M shares that while she is getting better at thinking positively and self-compassionately about herself, it is still quite hard to do, and she still doesn’t feel fully comfortable yet to say aloud positive characteristics she’s beginning to acknowledge that she has. The

therapist assured her this was alright, and commended M for making the effort to practice thinking positively and self-compassionately of herself.

For the future section, M wrote down thinks she wishes she could be in the future, which are, “independent”, “happy”, “stable”, and “caring (to herself)”, and illustrated a beach to represent that she would also like a vacation and a rest. M believes she can reach these goals of being independent, happy, stable, and caring to herself; M shares she is frankly tired of feeling so negative about herself, and is ready to make the change.

This led to the therapist inviting M to share her second semester problem as M promised she would. M then did so, and afterwards the therapist thanked and commended M for finally being able to share her story. The therapist then discussed with M her thoughts, feelings, and beliefs about what she did, with M concluding that she has been more able to accept and come to terms with what she did, but she still needs more time to be fully at peace with it and accept what she did. M remarked that it does feel a lot nicer and freeing now that she’s shared the story with someone, and ended the session with a big smile on her face.

4.2.1.7 Session 7

Procedure

The seventh session with M was conducted on Monday, May 21st 2018 at the art therapy studio in University X, from 11:00 to 12:00. During this final session, the therapist and M first reviewed all the artworks M had made, while reviewing the activities and goals of each session. A discussion session followed in which M shared her feelings during the therapy, what she had learned from doing the therapy, any insights she had gained and any changes she had felt. An

evaluative discussion also followed where M shared her impressions towards the art therapy program and the therapist, what she liked and didn't like about the program and the therapist, and any suggestions she might have for the program and for the therapist.

Observation and discussion

While looking at her artwork, M smiled and occasionally made comments on her drawing or how she had felt while doing certain activities, such as how her drawings are quite simple in style and how much better she had felt while doing the previous session's activity.

M shared that she had found the experience of participating in art therapy to be interesting, as it was able to help her, even though some of the activities may have seemed strange at first, such as drawing with her eyes closed. M liked that the therapy has helped her to understand herself better and that it has taught her how to criticize herself in a better way, how to think mindfully of herself and her situations, that it is important for her to give compassion to herself, and how to give self-compassion. M also shared this therapy has helped to remind her to focus on how to take care of herself and to avoid things that make her feel helpless. Although M still finds it hard to give self-compassion, going through the therapy helped her realize how important it is to take care of herself, and thus M is motivated to continue practicing self-compassion. The therapist then discussed with M things that she can do after the therapy to take care of herself.

Evaluating the therapy, M said she found the therapist's way of engaging with her to be "comfortable and relaxing", so that M was able to feel comfortable enough to openly talk about things and to express her emotions. At the end of the session, the therapist noted and commended M on the work and progress she

had achieved throughout therapy, and encouraged M to remember what she has learned and to continue practicing self-compassion. Finally, the therapist thanked M for participating in the program, praised M again for the improvements she's made, and parted ways.

4.5.3 Analysis Summary of Participant M

Table 6

Analysis summary of participant M's sessions.

Session	Summary
1. Draw with your eyes closed	Showed perfectionism. Able to self-reflect, be aware of, and discuss her perfectionism.
2. Self-portrait dialogue	Showed tendency to self-criticize. Not used to thinking of flaws and failures in objective, understanding way; however, able to do so when encouraged. Thus, showed potential for increasing self-compassion.
3. Transforming the inner critic	Able to think mindfully about her self-critic, criticized self, and the current relationship between the two parts. Able to envision a healthy relationship between self-critic and criticized self, and able to discuss how to achieve it. Learned constructive criticism; how to self-criticize with gentler tone and encouraging words. Increase in rapport; able to trust therapist with discussing significant issue. Showed there is potential to increase self-compassion.
4. Acceptance and compassion	Increase in rapport; shared personal story with therapist. Still found it hard to give self-compassion, but wants to practice. Able to find biggest challenge in giving self-compassion and able to talk through it with therapist. Able to see benefits of self-compassion, thus willing to practice it. Showed potential for increasing self-compassion.
5. Self-Compassion Break	Able to self-reflect and practice mindfulness. Increase in rapport and significant improvement of self-compassion shown by wanting to share stories of problems. Showed potential for increasing self-compassion.
6. Compassionate Timeline	Able to think self-compassionately. Showed further improvement in self-compassion and potential for more.
7. Termination	Enjoyed art therapy, learned many things, gained personal insights. Shows improvement in self-compassion.
Conclusion	There is overall increase in self-compassion.

For more detailed analysis, please see Appendix 8C (Participant M's Detailed Analysis).

4.5.4 Posttest results of Self-Compassion Scale by Neff

Mean Total Score		Category	
PRE-Test	POST-TEST	PRE-Test	POST-Test
1.35	2.54	Low	Moderate

Item no.	Positive Statements	PRE-Test Score	POST-Test Score	Increase of Self-Compassion
3	When things are going badly for me, I see the difficulties as part of life that everyone goes through.	2	3	YES
5	I try to be loving towards myself when I'm feeling emotional pain.	2	3	YES
7	When I'm down and out, I remind myself that there are lots of other people in the world feeling like I am.	2	3	YES
9	When something upsets me I try to keep my emotions in balance.	1	2	YES
10	When I feel inadequate in some way, I try to remind myself that feelings of inadequacy are shared by most people.	2	3	YES
12	When I'm going through a very hard time, I give myself the caring and tenderness I need.	2	3	YES
14	When something painful happens I try to take a balanced view of the situation.	1	3	YES
15	I try to see my failings as part of the human condition.	2	3	YES
17	When I fail at something important to me I try to keep things in perspective.	1	3	YES
19	I'm kind to myself when I'm experiencing suffering.	1	3	YES
22	When I'm feeling down I try to approach my feelings with curiosity and openness.	1	2	YES
23	I'm tolerant of my own flaws and inadequacies.	1	3	YES
26	I try to be understanding and patient towards those aspects of my personality I don't like.	2	3	YES

Item no.	Negative Statements	PRE-Test Score reversed	POST-Test Score reversed	Increase of Self-Compassion
1	I'm disapproving and judgmental about my own flaws and inadequacies.	2	2	NO
2	When I'm feeling down I tend to obsess and fixate on everything that's wrong.	1	2	YES
4	When I think about my inadequacies, it tends to make me feel more separate and cut off from the rest of the world.	1	2	YES
6	When I fail at something important to me I become consumed by feelings of inadequacy.	1	3	YES
8	When times are really difficult, I tend to be tough on myself.	1	2	YES
11	I'm intolerant and impatient towards those aspects of my personality I don't like	1	3	YES
13	When I'm feeling down, I tend to feel like most other people are probably happier than I am.	1	2	YES
16	When I see aspects of myself that I don't like, I get down on myself.	1	2	YES
18	When I'm really struggling, I tend to feel like other people must be having an easier time of it.	2	3	YES
20	When something upsets me I get carried away with my feelings	1	1	NO
21	I can be a bit cold-hearted towards myself when I'm experiencing suffering.	1	2	YES
24	When something painful happens I tend to blow the incident out of proportion.	1	3	YES
25	When I fail at something that's important to me, I tend to feel alone in my failure.	1	2	YES

4.6 Participant CF

4.6.1 Description of Participant CF

4.6.1.1 Profile

Initials	:	CF
Gender	:	Female
Age	:	20 years, 4 months
Place, Date of Birth	:	Jakarta, December 12 th 1997
Religion	:	Protestant
Birth Order	:	Third of five siblings; part of triplet
Current Education Level	:	Bachelor's degree
Current Semester at University	:	4
Current GPA	:	3.49

CF has two older brothers, a fraternal twin brother, and a fraternal twin sister.

CF spent her early childhood in Jakarta before her family moved to Bintaro as CF started elementary school. Her father is a self-made businessman while her mother is a housewife. CF's parents enrolled their children to an international school where they studied mostly in English; consequentially, CF grew up speaking better English than Bahasa Indonesia, and English remains her preferred language. This proved to be a challenge for CF when she started university, where she was to socialize and study in Bahasa Indonesia; however, CF's determination to maintain a high GPA and perform well drove her to adapt.

CF's hobbies are writing, playing the piano, and reading books.

CF readily admits that she is a perfectionist. In particular, she sets high standards for her academic performance and strives to get the highest grades she possibly can. Her expectations and standards of herself are so high that they have become a bothersome burden to her. CF almost always feels her best efforts are still not good enough and is almost never satisfied with herself; while CF can realize that she has tried her best, she always thinks that she should be able to perform better. These expectations came from within CF herself, and were not imposed on her by others.

There are two flaws and inadequacies of her own which most bothers CF. The first is that CF feels she is constantly thinking she should've performed better, and this takes a toll on her mental health. The second is that CF feels she should be more patient. When CF thinks about these shortcomings and the many others she feels she has, CF feels frustrated, annoyed and upset with herself. In times of failures or mistakes, CF will criticize and berate herself very harshly, and does it very often. CF also often judges and speaks meanly to herself.

4.6.1.2 Pre-Test: Self-Compassion Scale by Neff

Mean Total Score	Category
2.08	Low

Item no.	Positive Statements	Response Score (1–5)
3	When things are going badly for me, I see the difficulties as part of life that everyone goes through.	4
5	I try to be loving towards myself when I'm feeling emotional pain.	3
7	When I'm down and out, I remind myself that there are lots of other people in the world feeling like I am.	4
9	When something upsets me I try to keep my emotions in balance.	3
10	When I feel inadequate in some way, I try to remind myself that feelings of inadequacy are shared by most people.	4
12	When I'm going through a very hard time, I give myself the caring and tenderness I need.	2
14	When something painful happens I try to take a balanced view of the situation.	3
15	I try to see my failings as part of the human condition.	4
17	When I fail at something important to me I try to keep things in perspective.	4
19	I'm kind to myself when I'm experiencing suffering.	2
22	When I'm feeling down I try to approach my feelings with curiosity and openness.	4
23	I'm tolerant of my own flaws and inadequacies.	2
26	I try to be understanding and patient towards those aspects of my personality I don't like.	1

Item no.	Negative Statements	Response score reversed (1–5)
1	I'm disapproving and judgmental about my own flaws and inadequacies.	1
2	When I'm feeling down I tend to obsess and fixate on everything that's wrong.	1
4	When I think about my inadequacies, it tends to make me feel more separate and cut off from the rest of the world.	1
6	When I fail at something important to me I become consumed by feelings of inadequacy.	1
8	When times are really difficult, I tend to be tough on myself.	1
11	I'm intolerant and impatient towards those aspects of my personality I don't like	1
13	When I'm feeling down, I tend to feel like most other people are probably happier than I am.	1
16	When I see aspects of myself that I don't like, I get down on myself.	1
18	When I'm really struggling, I tend to feel like other people must be having an easier time of it.	2
20	When something upsets me I get carried away with my feelings	1
21	I can be a bit cold-hearted towards myself when I'm experiencing suffering.	1
24	When something painful happens I tend to blow the incident out of proportion.	1
25	When I fail at something that's important to me, I tend to feel alone in my failure.	1

4.6.2 Intervention Process

4.6.2.1 Session 1

Procedure

The first session with CF was conducted on Monday, April 30th 2018 at the art therapy studio in University X, from 14:00 to 15:00. CF was given the instruction to draw anything she'd like with her eyes closed. This was then followed with a discussion session.

Artwork, Observation and Discussion

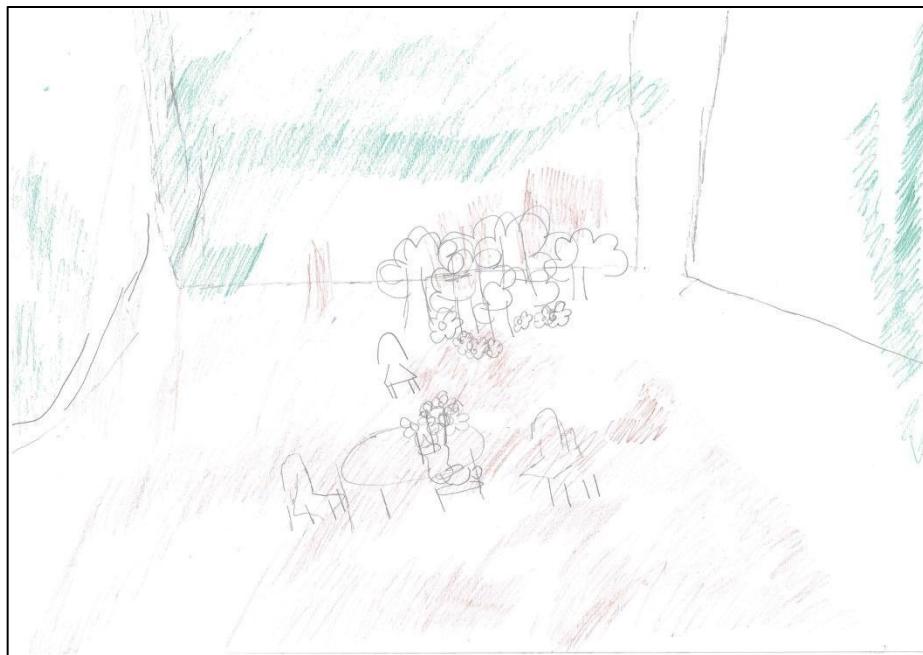


Figure 31. Participant CF's first session artwork.

CF took a long time to think about what she wanted to. CF drew with soft, discontinuous strokes. While drawing, CF used her hand as a guide to mark where she had drawn and decide where to draw next. CF was very careful and measured in deciding where to draw next, resulting in her working quite slowly. Her eyebrows were furrowed deeply and she looked to be deeply concentrating.

Upon opening her eyes and seeing her drawing for the first time, CF said, "oh my God...hmpf! I knew it" and looked at the drawing for some time. CF explained she had tried to draw a scene of a balcony with a table, chairs, a vase of flowers, and a cup, overlooking the forest. Before drawing, CF had taken a long time to think about what to draw because she was worried her drawing won't turn out how she wants it to. This was what spurred CF to say "I knew it" upon seeing her drawing; CF had known and indeed can see that the drawing isn't as good as she imagined it to be. CF shared while drawing she had felt very anxious because

she knew she cannot make a drawing as good as she wanted to, especially with her eyes closed. CF said, "I felt this huge pressure to make this perfect drawing. I wanted so much for it to be exactly how I imagined it, even though I know it can't be, because the picture in my head is so nice."

CF shared that she doesn't like the drawing because she feels it is not finished and not as good as it should be. CF had thought that she should move, but she grew frustrated as she could not feel sure where to color, and in the end decided that she couldn't stand it anymore. Repeatedly, CF commented, "I don't like [the drawing]. It's not done. It can be so much better". CF shared this activity was the same like any other tasks she is given, in that she felt a huge pressure to do it as perfectly as she can. In her own words, CF said, "I am a perfectionist, I know that, and I want to do everything perfectly". When asked if her perfectionism bothers her, CF shares that it does, that it gets tiring for her, but she can't help it.

4.2.6.2 Session 2

Procedure

The second session with CF was conducted on Friday, May 4th 2018 at the art therapy studio in University X, from 15:30 to 16:30. CF was given four steps of instructions. First, CF was instructed to draw herself. Second, CF was asked to write down criticisms she can think of for her drawing and of herself. Third, CF was told to write down rebuttals to objectively and realistically defend herself against the criticisms. These first three steps were done using her non-dominant hand. Last, CF was asked to take a few moments to look at her drawing and what she had written, and think of a lesson she had gained from this activity. This was then followed with a discussion session.

Artwork, Observation and Discussion

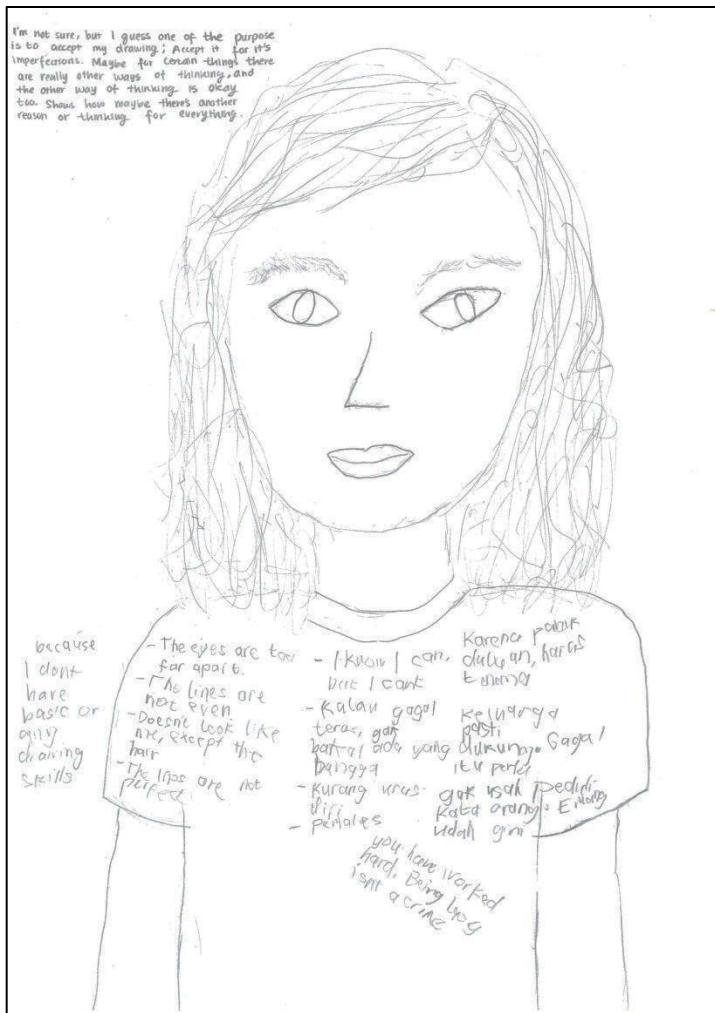


Figure 32. Participant CF's second session artwork.

CF worked very carefully and in a controlled way. CF also often erased and redrew many times. A few times CF also sighed, sounding frustrated. After she had finished, CF shook out her arm, remarking that her arm feels tired. CF was able to write criticisms almost straight away and wrote many, even lingering to think of other criticisms after quickly writing the first ones. CF took a longer time to write rebuttals and looked to be thinking hard. For the message she had gained, CF wrote "I'm not sure, but I guess one of the purpose is to accept my drawing; accept it for its imperfections. Maybe for certain things there are really

other ways of thinking, and the other way of thinking is okay too. Shows how maybe there's another reason or thinking for everything".

Regarding her drawing, CF had written "the eyes are too far apart", "the lines are not even", "doesn't look like me, except the hair", and "the lips are not perfect". For these criticisms, CF's rebuttal was, "because I don't have basic or any drawing skills". CF reasoned she never draws and never took lessons, thus it's understandable her drawing is not as good as she wanted it to be.

CF's first criticism of herself was, "I know I can, but I can't"; CF explained that, when facing a task, often she will know that she can do it, but she finds herself unable to start. CF's rebuttal for this criticism was, "*karena panik duluan, harus tenang* (because panics right away, must be calm)"; CF explains she realizes that when facing a task she often will think she won't be able to accomplish it as well as she wants, which makes her panic and freeze, unable to start the task until forced to by upcoming deadlines. The second criticism of herself CF wrote was, "*kalau gagal terus, gak bakal ada yang bangga* (if fail all the time, no one will be proud)". CF explains this is something she often says to herself to scare and thus motivate herself to not fail; that if she fails often, no one will be proud of her. This criticism is rebutted with, "*keluarga pasti dukung. Gagal itu perlu* (family will support. Failure is necessary)". CF realizes her family will love and support her even if she fails, and her father even often tells her, "failing is necessary for you to learn and grow". This has given CF comfort when she panics or worries about failing. The next criticism she wrote was, "*kurang urus diri* (doesn't take care of self)"; CF remarks that the people in her life often chastise her for neglecting to take care of herself as she prefers to work on her assignments or work on her part-time job. CF's rebuttal for this is, "*gak usah peduli kata orang, emang udah*

gin”. CF said, “this sounded harsher than I meant it to”, and explained that what she had meant was that she doesn’t know how to be another way (i.e. taking more care of herself), and that this is just the kind of person she is. Her last criticism for herself was, “*pemalas* (lazy)”, which she rebutted with, “you have worked hard. Being lazy isn’t a crime”. CF often ‘accuses’ and blames herself of being too lazy to do her assignments. However, she can realize that often she will come home too, that it is understandable she feels too lazy to work on her homework.

CF shared that it was new and interesting to be asked to objectively and reasonably examine the criticisms she has for herself and defend herself, something she was not used to doing. From this, she could see there is a different way of thinking about her criticisms and flaws, a different way which isn’t bad and might even be more right than the criticism. At the end of the session, CF commented that today’s session had been interesting and insightful.

4.2.6.3 Session 3

Procedure

The third session with CF was conducted on Monday, May 7rd 2018 at the art therapy studio in X University, from 14.00 to 15.00. CF was first instructed to divide the drawing paper into two parts. Afterwards, CF was guided to find an image which illustrates the relationship between her self-critic and her criticized self. This image was then drawn on the left side of the paper. Following this, CF was guided to find an image which illustrates how she would like the relationship between her self-critic and criticized self to be in the future. This image was then drawn on the right side of the paper. A discussion session then followed.

Artwork, Observation and Discussion



Figure 33. Participant CF's third session artwork.

CF folded the paper very meticulously. After the first instructions, CF painted a grey tornado against a red background. After the second instructions, CF drew a potted flower and a tap to its right, with murky water flowing out of the tap and into the pot. When mixing paint colors, CF did so very carefully, making sure the colors were thoroughly mixed before using them to paint with. CF worked slowly and carefully, her face showing full concentration.

CF explained that in the first painting, she had painted a red background to represent fire, the symbol of her self-critic. The fire is burning, and represents how her self-critic is harmful, painful, and hot; listening to her self-critic makes CF feel hurt, upset, and worked up. The tornado represented her criticized self; CF explains her criticized self often ruminates on problems, going in circles but not finding a solution or able to get out, like how a tornado goes in circles. Just like how tornados get hotter and more riled up with fire, CF's criticized self can also become more anxious and restless the more she listens to her self-critic.

For the drawing on the right side, CF has drawn a flower that is able to grow strong because and despite of the dirty water it receives. CF's self-critic is represented by the murky water; the water is nourishing and helps the flower grow, but it can be dirty. This is symbolic to how CF envisions her self-critic to be in the future; dirty in that sometimes it's hurtful or hard to swallow, but ultimately it will help the flower to grow. The flower represents her criticized self that is able to grow strong despite hearing upsetting criticisms.

CF explains her self-critic is afraid of failure and only wants to help CF succeed. Her self-critic wants CF to not be weak, to be strong, and to ultimately be better. On the other hand, when CF's criticized self listens to the self-critic, all it does is ruminate and get riled up, "just circling and getting nowhere". CF's criticized self's thoughts can be destructive, disorganized and chaotic when harshly self-criticized, causing CF to not be able to work. Her criticized self feels tired, upset, and not good about herself upon hearing all the criticisms. Her criticized self wants to tell her self-critic to stop being so harsh, to stop making her feel bad, and to give her a break. CF explains that her criticized self needs a break from all the criticisms, and also needs support from CF herself.

The therapist and CF then discussed how her self-critic actually means well. However, it's not good that her self-critic is currently creating a tornado out of the criticized self, instead of the growing flower that CF wants. Therefore, the criticisms that come out of the self-critic needs to be changed to be more constructive. CF agreed and shared she's never thought of it that way, but that this makes sense, and it's something she wants to work on. The therapist and CF then discussed that she can make the tone of her self-critic to be more gentle and supportive, and that CF can also mind and change her criticisms' wordings.

4.2.6.4 Session 4

Procedure

The fourth session with CF was conducted on Friday, May 11th at the art therapy studio in X University, from 15.30 to 16:30. In this session, CF was given guided imagery to find and draw a symbol or imagery which represents how she feels when she feels she is given compassion. A discussion session followed.

Artwork, Observation and Discussion

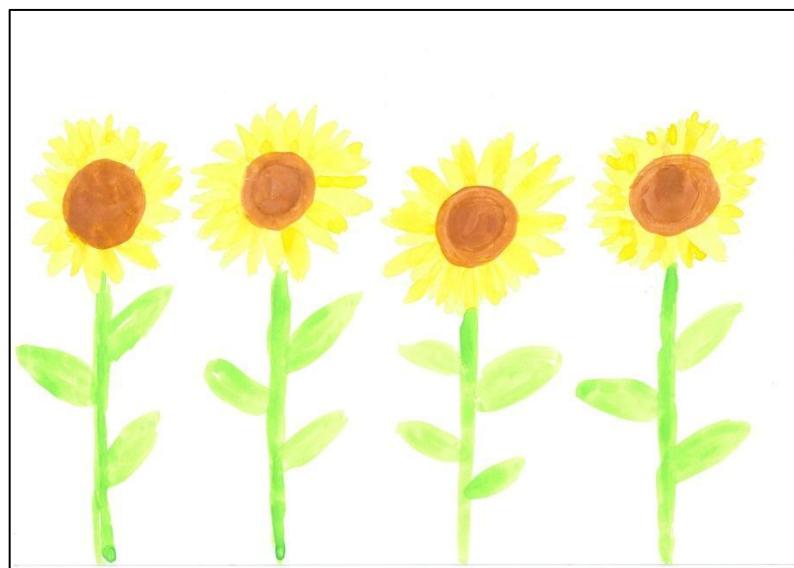


Figure 34. Participant CF's fourth session artwork.

CF painted four sunflowers, and explained she had thought of her dad giving her compassion, love, and support, as he is her most constant source of positivity and love. When feeling what it's like to be given compassion, CF felt so happy, peaceful, calm, and further explained, "more than happy actually, it's hard to describe, but it's all this positive feelings mixed into one". CF also felt strong, "like I can stand tall, like I can do anything". CF thought of symbolizing these feelings into sunflowers that stand tall and strong, with flowers that seem "happy, beaming, cheerful".

CF then brought up her concern about self-compassion to the therapist, saying, "I don't want to give myself kindness and compassion because then I'll go easy on myself and not work hard." The therapist discussed with CF how compassion is not the same as going easy on herself and how having compassion doesn't necessarily mean CF has to let go of her high standards or hard-working attitude. The therapist explained to CF that self-compassion entails wanting what's best for herself, always. This includes recognizing when an assignment is exhausting and difficult, but also recognizing that it is in CF's best interest to finish the assignment. Thus, self-compassion entails giving herself encouragement and support in a way that motivates and cheers her on, instead of berating or being harsh on herself to the point of upsetting her. The therapist asked CF to imagine being able to make herself feel like the sunflowers she painted, in essence being able to give herself self-compassion, and how powerful it can be for CF to be able to support herself like that. Listening to all this, CF shares that this makes sense to her. CF's never thought about it that way, and though she's not used to it, she shares that she's tired of being so negative on herself, and thus wants to try this new way of thinking.

4.2.6.5 Session 5

Procedure

The fifth session with CF was conducted on Monday, May 14th 2018 at the art therapy studio in X University, from 15.30 to 16.30. CF was instructed to ask herself what she needs right now and draw it.

Artwork, Observation and Discussion



Figure 35. Participant CF's fifth session artwork.

CF occasionally hummed to herself while painting, and she looked to be concentrating hard. CF explained the drawing represents how CF feels she needs compassion for a long time to help her move on from her problems, feel calm, and be motivated. When asked where she wants the compassion to come from, CF answered that she wants it from other people.

CF shared she'd been going through a hard time since the previous session and felt she had no one to give her support. The therapist noted CF had herself to give herself support and help. CF agreed, and discussed with the therapist the benefits of self-compassion; it was emphasized that self-compassion is especially helpful when there isn't anyone available to give us support.

With the therapist's help, CF self-reflected and figured out that there are two things she would like to do most right now; talk about her feelings and share them with someone, and to take a break from thinking about her stressors. CF then brainstormed ideas of how she can give herself those things when no one else is around. At the end of the session, CF looked more cheerful and smiled more, and expressed her excitement to go home and try these things. The therapist shared

CF has practiced mindfully thinking about what she needs and figuring out how to get it, and that this can be something she practices as part of self-compassion. CF agreed and expressed her willingness to practice this.

4.2.6.6 Session 6

Procedure

The sixth session with CF was conducted on Thursday, May 24th 2018 at the art therapy studio in University X, from 13:00 to 14:00. CF was instructed to draw a timeline of her life, with one section each for her past, present, and future. Furthermore, CF was instructed to take a compassionate, kind, and loving perspective of herself while making her timeline.

Artwork, Observation and Discussion

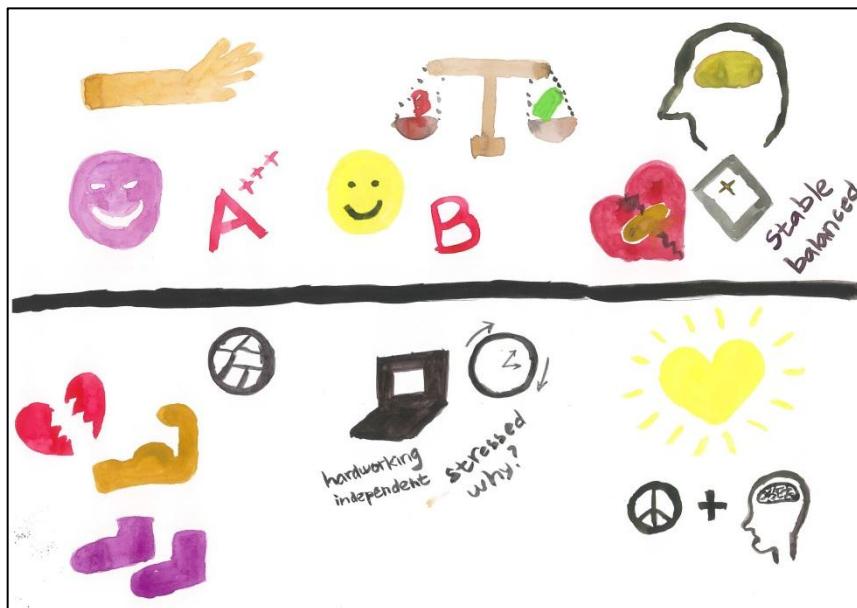


Figure 36. Participant CF's sixth session artwork.

CF explained that she had tried to keep a compassionate mindset by focusing on things that she likes about herself and what she's proud of herself for. In the "past" section, CF shared that she thought about how she had gone through

many problems and challenges, but still managed to do well in many aspects of her life. CF shared that there are problems and heartbreaks from her past that she's moved on from, but there are still some that she hasn't recovered and healed from. At the therapist's offer, CF shared and talked about those problems, at which point she cried and expressed how much those problems still hurt her.

After CF was ready to talk about her artwork again, CF continued by explaining her "present" section. CF explained that the "present" section expressed things that she is going through and things that she's proud of herself for. In the "future" section, CF drew symbols to represent things she wishes for herself in the future. CF believes with time, effort, and practice she can obtain all this, and she is optimistic about her future. At the end of the session, the therapist commended CF for successfully thinking of herself in a self-compassionate way, and CF remarks, "I think I'm getting better at it. It's pretty cool. It's really nice".

4.2.6.7 Session 7

Procedure

The seventh session with CF was conducted on Monday, May 28th 2018 at the art therapy studio in University X, from 13:00 to 14:00. During this final session, the therapist and CF first reviewed all the artworks CF had made and the activities and goals of each session. A discussion session followed in which CF shared her feelings during the therapy, what she had learned from doing the therapy, any insights she had gained and any changes she had felt. An evaluative discussion also followed where CF shared her impressions towards the art therapy program and the therapist.

Observation and discussion

While looking at her artwork, CF smiled and occasionally recounted how she had felt during each activity, and also that some of her drawings are “actually pretty nice”. During the discussion session, CF shared that she found art therapy to be interesting, as it is something new for her and she had never imagined how art therapy would be like. CF shares that she loves the idea of incorporating art and therapy to help people. Additionally, CF didn’t feel the process was pressuring at all, that she learned to express herself better through the session, and that the process was enjoyable and relaxing for the most parts. Specifically, CF liked that art therapy has helped her to calm down and be more open minded, and that it helped to bring out her positivities in an objective way.

CF also shared that this art therapy has given her many insights, including how “everything is objective, and you control your way of thinking. I shouldn’t be harsh on myself, and try to think in loving and caring way about and for myself.” CF also shares that she’s learned not to blame herself too much, but to also not let that make her vulnerable, weak, or *manja* (spoiled). Furthermore, CF has learned that, “you can criticize yourself, but always think things through”, referring to mindfulness and objectivity. Describing what changes she’s gone through, CF shares that she’s not as harsh on herself as she was before the therapy, that it’s easier for her to think and perceive objectively, that she feels less guilty when she’s not performing up to her standards, that she feels a bit more confident, and that she’s definitely more open-minded in the way she sees things and herself.

Regarding the therapist, CF thinks the therapist has shown appropriate qualities as a therapist, has given CF space when she’s doing her artwork, has given CF respect, has asked questions in appropriate manners, is very nice, and does not give any pressure to CF. At the end of the session, the therapist noted

and commended CF on the work and progress she had achieved, and encouraged CF to remember what she has learned and to continue practicing self-compassion. Finally, the therapist thanked CF for participating in the program, praised CF again for the improvements she's made, and parted ways.

4.6.3 Analysis Summary of Participant CF

Table 7

Analysis summary of participant CF's sessions.

Session	Summary
1. Draw with your eyes closed	Showed perfectionism. Able to self-reflect, be aware of, and discuss her perfectionism.
2. Self-portrait dialogue	Showed tendency to self-criticize. Not used to thinking of flaws and failures in objective, understanding way; however, able to do so when encouraged. Gained insight in thinking objectively and understandingly. Showed potential for increasing self-compassion.
3. Transforming the inner critic	Able to think mindfully about her self-critic, criticized self, and the current relationship between the two parts. Able to envision a healthy relationship between self-critic and criticized self, and able to discuss how to achieve it. Learned constructive criticism; how to self-criticize with gentler tone and encouraging words. Showed there is potential to increase self-compassion.
4. Acceptance and compassion	Still found it hard to give self-compassion because she thought of an issue with self-compassion. However, was able to talk through this with the therapist and see how self-compassion can help her, thus wants to try practicing it. Showed potential for increasing self-compassion.
5. Self-Compassion Break	Able to self-reflect and practice thinking mindfully. Able to explore more benefits of self-compassion and think of ways to give herself self-compassion. Showed potential for increasing self-compassion.
6. Compassionate Timeline	Can think self-compassionately, feels she's getting better at it, showed potential for increasing it further. Increase in rapport; able to discuss personal issues with therapist.
7. Termination	Enjoyed art therapy, learned many things, gained personal insights. Shows improvement in self-compassion.
Conclusion	There is overall increase in self-compassion.

For more detailed analysis, please see Appendix 9C (Participant CF's Detailed Analysis).

4.6.4 Post-Test: Self-Compassion Scale by Neff

Item no.	Positive Statements	Mean Total Score		Category	
		PRE-Test	POST-TEST	PRE-Test	POST-Test
		2.08	3.54	Low	High
3	When things are going badly for me, I see the difficulties as part of life that everyone goes through.	4	5	YES	
5	I try to be loving towards myself when I'm feeling emotional pain.	3	5	YES	
7	When I'm down and out, I remind myself that there are lots of other people in the world feeling like I am.	4	5	YES	
9	When something upsets me I try to keep my emotions in balance.	3	5	YES	
10	When I feel inadequate in some way, I try to remind myself that feelings of inadequacy are shared by most people.	4	5	YES	
12	When I'm going through a very hard time, I give myself the caring and tenderness I need.	2	4	YES	
14	When something painful happens I try to take a balanced view of the situation.	3	4	YES	
15	I try to see my failings as part of the human condition.	4	5	YES	
17	When I fail at something important to me I try to keep things in perspective.	4	4	NO	
19	I'm kind to myself when I'm experiencing suffering.	2	3	YES	
22	When I'm feeling down I try to approach my feelings with curiosity and openness.	4	4	NO	
23	I'm tolerant of my own flaws and inadequacies.	2	3	YES	
26	I try to be understanding and patient towards those aspects of my personality I don't like.	1	4	YES	

Item no.	Negative Statements	PRE-Test Score reversed	POST-Test Score reversed	Increase of Self-Compassion
1	I'm disapproving and judgmental about my own flaws and inadequacies.	1	2	YES
2	When I'm feeling down I tend to obsess and fixate on everything that's wrong.	1	3	YES
4	When I think about my inadequacies, it tends to make me feel more separate and cut off from the rest of the world.	1	3	YES
6	When I fail at something important to me I become consumed by feelings of inadequacy.	1	3	YES
8	When times are really difficult, I tend to be tough on myself.	1	3	YES
11	I'm intolerant and impatient towards those aspects of my personality I don't like	1	3	YES
13	When I'm feeling down, I tend to feel like most other people are probably happier than I am.	1	3	YES
16	When I see aspects of myself that I don't like, I get down on myself.	1	3	YES
18	When I'm really struggling, I tend to feel like other people must be having an easier time of it.	2	3	YES
20	When something upsets me I get carried away with my feelings	1	1	NO
21	I can be a bit cold-hearted towards myself when I'm experiencing suffering.	1	3	YES
24	When something painful happens I tend to blow the incident out of proportion.	1	4	YES
25	When I fail at something that's important to me, I tend to feel alone in my failure.	1	2	YES

4.7 Comparison of participants' posttest results

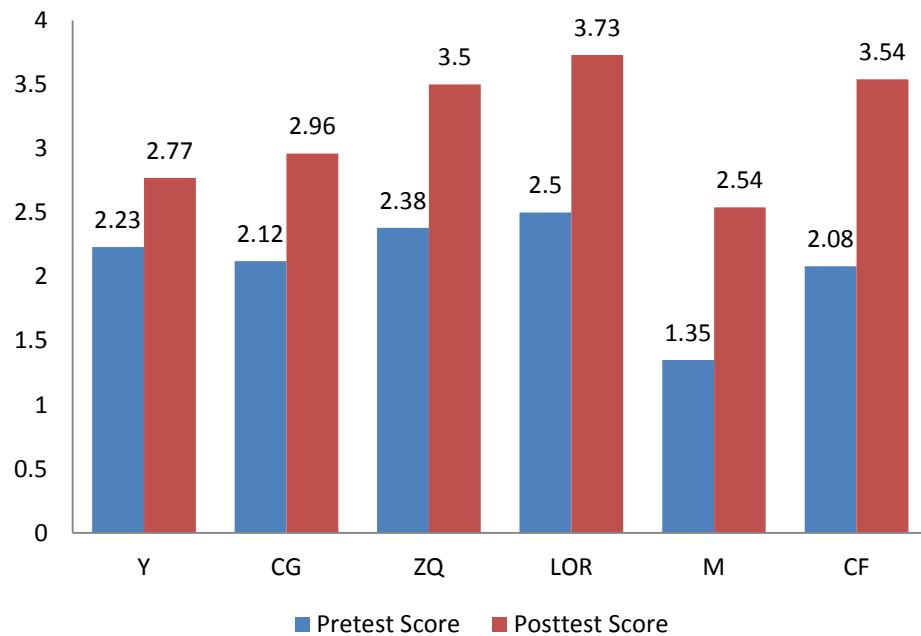


Figure 37. *Comparison of participants' posttest results.*

All participants experienced an increase in self-compassion after completing the art therapy program. The participant who experienced the most increase is CF (1.46 increase in self-compassion score), followed by LOR (1.23 increase), M (1.19 increase), ZQ (1.12 increase), CG (0.84 increase), and Y (0.54) increase. Before the therapy, all participants were categorized as having “low” self-compassion; all participants are now categorized in either the “moderate” or “high” self-compassion categories.

4.8 Evaluation of the therapy's intervention design

Table 8

Summary of Session 1 (Draw with Your Eyes Closed) for all participants.

Participant	Summary
All participants (Y, CG, ZQ, LOR, M, CF)	No problems in understanding instructions. All goals of the session were achieved through artwork and discussion.
Conclusion	Session was effective; instructions were clear and session's goals can be met for all participants.

Table 9

Summary of Session 2 (Self-Portrait Dialogue) for all participants.

Participant	Summary
Y, CG, LOR, CF	No problems in understanding instructions. All goals of the session were achieved through artwork and discussion.
ZQ	Did not follow instructions per se; drew an ideal version of self instead of present self. This may have happened because she was very preoccupied with dreams for her future; it was a recurring worry she often thought about. Also thought of message gained from the activity that was not related to self-criticizing, but related to her dreams; also can be explained by her preoccupation with them. However, all of session's goals were achieved through discussion.
M	No problem in understanding instructions. A note: the messages/lessons gained from the activity that M thought of was not related to self-criticizing; this does not mean M failed to understand the instructions, but she merely did not meet the therapist's expectation to reflect on her self-criticizing. Nevertheless, all goals of the session could be achieved through discussion.
Conclusion	Only one participant did not follow the instructions exactly. Two participants did not think of messages that were related to self-criticizing. Session's instructions can be revised in that it needs to be more specific (e.g. "draw yourself as you are in the present"). However, session's goals were met for all participants, thus session is effective.

Table 10

Summary of Session 3 (Transforming the Inner Critic) for all participants.

Participant	Summary
Y, CG, M, CF	No problem in understanding instruction. All goals of the session achieved through artwork and discussion. Found symbols for self-critic and criticized self separately and drew them together. Symbols for first and second drawing are the same (except for CF, who drew different symbols for her first and second drawings).
ZQ, LO	No problem in understanding instruction. All goals of the session were achieved through artwork and discussion. Drew images that represented the relationship between self-critic and criticized part.
Conclusion	All participants understood the instructions. Four participants found symbols for self-critic and criticized self separately and drew them together; one of them used different symbols for the first and second drawing. The other two participants drew images that represent the relationship between self-critic and criticized part. These show there are various ways participants can interpret the instructions differently but still follow them correctly to meet the session's goal. Session's goals were met for all participants, thus session is effective.

Table 11

Summary of Session 4 (Acceptance and Compassion) for all participants.

Participant	Summary
All participants (Y, CG, ZQ, LOR, M, CF)	No problems in understanding instructions. All goals of the session were achieved through artwork and discussion.
Conclusion	Session was effective; instructions were clear and session's goals can be met for all participants.

Table 12

Summary of Session 5 (Self-Compassion Break) for all participants.

Participant	Summary
All participants (Y, CG, ZQ, LOR, M, CF)	No problems in understanding instructions. All goals of the session were achieved through artwork and discussion.
Conclusion	Session was effective; instructions were clear and session's goals can be met for all participants.

Table 13

Summary of Session 6 (Compassionate Timeline) for all participants.

Participant	Summary
All participants (Y, CG, ZQ, LOR, M, CF)	No problem in understanding instruction. All goals of the session were achieved through artwork and discussion.
Conclusion	Session was effective; instructions were clear and session's goals can be met for all participants. Interesting to note that all but one participant did not draw the classic timeline format. However, the session's goal of thinking compassionately about one's life was met by all participants. This shows that the format of the timeline can vary between participants and this does not interfere with meeting the session's goals.

Table 14

Summary of Session 7 (Termination) for all participants.

Participant	Summary
All participants (Y, CG, ZQ, LOR, M, CF)	No problems in understanding instructions. All goals of the session were achieved through artwork and discussion.
Conclusion	Session was effective; instructions were clear and session's goals can be met for all participants.

Overall, all sessions were effective in that the goals of every session were achieved with all participants. In particular, sessions one (Draw with Your Eyes Closed), four (Acceptance and Compassion), and five (Self-Compassion Break) resulted in uniform results from all participants in terms of the pattern of artworks produced and outcome of thinking processes after hearing the instructions.

For session two (Self-Portrait Dialogue), two participants' (ZQ and M) thinking process regarding what message was gained from the activity was not what was expected (i.e. not related to self-criticizing). Nevertheless, a message that can be gained from the session that *is* related to self-criticizing was successfully thought of by the two said participants during the discussion session with the therapist.

For session three, two styles of drawing emerged. In the first style, participants drew the symbols they found for their self-critic and criticized self interacting in some manner; this was done by participants Y, CG, M, and CF. In the second

style, participants drew images that represented the nature of the relationship between their self-critic and criticized self; this was done by participants ZQ and LOR. Amongst participants adopting the first style, only CF used different symbols for her self-critic and criticized self in her first and second drawings.

It was interesting to note that for session 6 (Compassionate Timeline) all but one participant did not draw the classic timeline format. However, the session's goal of thinking compassionately about one's life was met by all participants. This shows that the format of the timeline can vary between participants and that this does not interfere with meeting the session's goals.

CHAPTER 5

CONCLUSION, DISCUSSION, AND RECOMMENDATION

5.1 Conclusion

Based on the data analysis conducted, several conclusions can be drawn. First, all participants showed changes between their pretest and posttest self-compassion scores. Specifically, the change of score from all participants are positive, i.e. all participants showed an increase in self-compassion score. Thus, it can be concluded that art therapy does have an impact on self-compassion, that art therapy can increase self-compassion, and that this can be done amongst perfectionistic university students.

5.2 Discussion

The idea of this study came from the observation that maladaptive perfectionist university students can benefit greatly from increasing their self-compassion (Ferrari et al., 2018; Lizmore, Dunn & Dunn, 2017; Mehr & Adam, 2016) and that thus far there are only very few published studies which focuses on applying art therapy specifically to increase self-compassion. Presently, the

author has only managed to find one study by Weiland (2012) which measures participants' levels of self-compassion before and after a form of art therapy is completed, and even in this study self-compassion was not the main focus. Furthermore, Weiland also found mixed results, with participants reporting increasing, decreasing, and unchanging levels of self-compassion. Therefore, results regarding the application of art therapy to increase self-compassion was still inconclusive. Weiland noted that the number of sessions in her study, which was two sessions, may have had a major contribution to the inconclusive results, and advised future studies to have more number of sessions. These previous findings thus resulted in an observation that there is a lack of research on the application of art therapy specifically to increase self-compassion, and the present study therefore aimed to see if it can be done.

The results of this study has provided the answer that the application of art therapy to specifically increase self-compassion can be successful, i.e. art therapy can be used to increase self-compassion. This is in conjunction with the writer's proposal that, with art therapy's many purposes, functions, and usefulness (AATA, 2013; BAATA in Edwards, 2004; Case & Dalley, 1992), there is a promising chance art therapy can be used to increase self-compassion. Furthermore, the study's intervention design of seven sessions also followed Weiland's (2012) recommendation to conduct a study of more than two session to see if self-compassion can increase with art therapy, and positively confirms it.

Some factors may be assumed to have contributed to the successful use of using art therapy to increase self-compassion. The first is art therapy itself. Through art therapy, a person can express and work through different issues and concerns (Case & Dalley, 1992). This was certainly the case for the participants,

as throughout therapy they were able to express and work through personal problems they had and gain personal insights regarding said problems. For example, Y was able to work through her problem with bulimia, CG could work through her problem of being unable to accept her family backgrounds, ZQ was able to work through her problem with accepting her bad past, and M was able to work through her second semester's problem. In working through their problems and concerns, the participants also practiced mindfulness to objectively assess their situations, practiced self-kindness, and practiced self-compassion in realizing they are suffering and being touched enough by that suffering to want to relieve it. Thus, their self-compassion was practiced and increased.

Other purposes of art therapy including exploring feelings, reconciling emotional conflicts, fostering self-awareness, self-expression, and reflections (AATA, 2013; BAATA in Edwards, 2004) may also be assumed to have helped in increasing the participants' self-compassion. Indeed, through art therapy the participants were able to express themselves, with all participants at some point in the therapy noting that drawing or painting has helped them to express themselves in a way they never thought of and couldn't through simply talking about it. By processing what they have expressed, the participants are in turn able to become more self-aware and given the opportunity to self-reflect.

From self-reflecting and gaining self-awareness, the participants were able to explore their feelings and reconcile emotional conflict; this includes exploring their feelings and thoughts about self-compassion, and any issues or conflicts they might have with self-compassion. Some of the issues the participants had about self-compassion and were able to work through during art therapy includes worrying that self-compassion can be used as a way to simply make excuses for

herself (Y), feeling that she does not deserve to give self-compassion (CG), worrying that giving self-compassion will lead to her spoiling herself (ZQ), uncertainty about when to practice self-compassion (LOR), and worrying that giving self-compassion means having to let go of her high standards (CF). By being able to explore and work through their issues with self-compassion through art therapy, the participants became more open to the idea of self-compassion and more ready to practice it, leading to an increase in their self-compassion.

Besides art therapy itself, another factor which can be assumed to have contributed to the successful use of art therapy to increase self-compassion is the number of sessions. As previously mentioned, Weiland (2012) had attempted to increase self-compassion using a form of art therapy in two sessions. Weiland found mixed results, with different participants reporting increasing, decreasing, and unchanging levels of self-compassion. Therefore, Weiland suggested that a higher number of therapy sessions may help to increase self-compassion, a suggestion which has been confirmed by the present study. An art therapy programme of seven sessions, in which artworks are created in the first six sessions, is able to increase self-compassion levels.

Another factor which can be assumed have contributed to the successful use of art therapy to increase self-compassion is the intervention design, in which every artwork-producing activity was selected and arranged to ensure a slow and comfortable, and thus successful, increase in self-compassion. Overall, the therapy was designed not to quickly and immediately raise self-compassion. Rather, it was designed to give participants time to explore and become aware of their current self-compassion levels, to explore and become comfortable with the concept of self-compassion, and to increase their self-compassion at a slow but

steady pace. For example, the first session's design, with an aim to trigger the participants' perfectionism, helped participants to be aware of their perfectionistic tendencies and low self-compassion; this subtly brought the idea of self-compassion into the participants' minds without explicitly discussing it or attempting to raise it. The second session's design to confront the self-critic also subtly helped participants to be aware of their low self-compassion and practice self-compassion without explicitly discussing it. Therefore, the first two sessions were designed to give the participants time to process their perfectionism and low self-compassion, before self-compassion was explicitly introduced discussed in the following sessions. This intervention design can be considered to have helped successfully increase the participants' self-compassion.

An additional factor that may have helped the success of the therapy is the rapport between the therapist and the participants. Since the screening interviews that were conducted before the sessions began and throughout the therapy process, the therapist endeavored to build a good rapport and relationship with each client and to provide a safe environment in which the participants can feel comfortable. In this way, the therapist gained the participants' trust. This good rapport may have helped to preserve the participants' motivation to participate in the therapy and willingness to follow instructions.

The present study's most significant advantage is that it is one of the first few, if not the first, study of art therapy which focuses solely on increasing self-compassion. While the writer was able to find other studies that have dedicated a few sessions from their art therapy program to focus on self-compassion (e.g. Ely et al., 2017), or have increasing self-compassion as a secondary aim of therapy (e.g. Weiland, 2012), the writer has not been able to find a study like the present

study, in which the exclusive primary aim is to increase self-compassion through art therapy, with every session dedicated to improving self-compassion. The present study also has its disadvantages, with its primary one being difficulties in generalisation. The participants of the study were all young adults, females, university students, and perfectionists; this is quite a specific population and precautions should be taken when generalizing the findings to other populations.

5.3 Recommendation

5.3.1 Recommendation for future research

As the present study was conducted with a relatively small number of six participants, future studies can include a higher number of participants. Furthermore, the study can be conducted on a wider range of population, including different age ranges, occupations, genders, geographic locations, cultural background, personality traits, or other psychological conditions. These can help extend the generalizability of the study's findings to a greater population.

Furthermore, the number of sessions in future studies may be increased to examine if it can lead to a larger increase in self-compassion. As higher number of sessions may cause feelings of mundaneness amongst participants, the art therapy activities should also be more varied in order to preserve participants' level of motivation to participate in the therapy. Different art media which can be explored to see if they can help increase self-compassion includes drawing and painting on other surfaces besides paper, sculpting, music, dance, and writing. Future studies may also include another post-test sometime after the art therapy programme has ended to see if the art therapy has lasting effects and if the higher level of self-compassion achieved at the end of the therapy can endure.

5.3.2 Recommendation for participants and other concerned parties

Participants are advised to remember what they've learned throughout art therapy that will help them maintain the healthy level of self-compassion they have managed to acquire by the end of the therapy. These include what self-compassion is, the benefits of self-compassion, how self-compassion can help them, and how to give self-compassion. For example, participants can remember to be mindful of their current emotions and state of mind. If they realize that they are 'suffering', they can extend self-compassion by thinking about how they can help themselves and try to give that to themselves.

Participants are also advised to not only remember the personal insights they've gained, but to also practice further self-reflection to help them grow as healthy individuals who understand themselves and their issues. Additionally, participants are also encouraged to share what they've learned about self-compassion to their family and friends; this will help the participants to remember what they've learned and also spread the knowledge about self-compassion.

Seeing as self-compassion comes with many benefits, parents and educators are encouraged to consider teaching about self-compassion and how to nurture it to their children and students. The earlier children can be introduced to the concept of self-compassion and taught ways they can give self-compassion, the better, as it will be easier for them to foster the habit of giving self-compassion.

Psychologists, therapists, counselors, and other mental health workers can also educate their clients on self-compassion and help them to acquire a healthy level of self-compassion. This can be achieved through various types of therapy including, as the present study has proven, art therapy.

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APPENDIX 4C (Participant Y's Detailed Analysis)

Analysis of Participant Y, Session 1

This session was successful in that the goal of the session was met, which was to trigger Y's perfectionism and bring it up for discussion. Y was thus made more aware of her perfectionism and was able to discuss it with the therapist.

Y's perfectionism was shown various times during this session. First, Y chose to draw very simply which she knew she can draw well even with her eyes closed; Y wanted to ensure that the end result would be as flawless as possible. This was again shown when Y saw lines which were out of shape and immediately erased them. Y's decision not to color was based on her belief that she would not be able to color well with her eyes closed; thus, rather than underperform, Y chose not to take action at all. Furthermore, Y shared that if she perceived her drawing as incorrect or having a flaw, she would feel uneasy until she corrects the flaw. Y's attitudes towards this session's activity and result are also the attitude she holds for almost all aspects of her life.

An analysis of Y's drawing infers Y feels lonely and isolated (*lone drawing*). The lack of color also infers Y is not very in touch with her emotions and is hesitant to express them. The simple lines and overall drawing, with its clear shapes, also implies Y is a straightforward and realistic person.

Analysis of Participant Y, Session 2

This session worked to introduce self-compassion and was successful in that its goal was met, which was to expose and confront Y's inner critic and build the strength of compassion and reason within, and increase Y's positive self-talk.

Y's perfectionism and self-criticizing self was seen from the many criticisms she wrote and how she was able to write many criticisms quickly. Y even lingered on and tried to think of more criticisms after the first many she wrote. It was interesting to note Y took much longer time to think of rebuttals; Y is clearly not used to this kind of mindset, in which she is to look at her flaws and failures in an objective, reasonable way. Despite this, Y was able to find objective and reasonable rebuttals and even advantages to her perceived flaws; this proves there is self-compassion within Y that can be further developed.

An analysis of Y's drawing infers again that Y avoids emotional experience (*tends to reject color, lack of color*). The simple lines and overall drawing, with its clear shapes, again implies Y is a straightforward and realistic person.

Analysis of Participant Y, Session 3

The third session aimed to strengthen Y's self-compassion, focusing on transforming the maladaptive self-critic to a constructive one. This was conducted by being mindful and extending compassion to the self-critic and the criticized self. Y was encouraged to envision and build a new relationship to the self-critic and between the self-critic and criticized self.

The session was successful since the goals were met. Y was able to be mindful of her self-critic; Y could see her self-critic has been harsh and relentless. Y was able to perceive her self-critic in an open, friendly, and accepting way; Y realized her self-critic is being critical because it wants Y to behave and do well. Furthermore, Y was able to become mindful of her criticized self and see that her criticized self is suffering because of the self-critic; this is a major part of self-compassion Y was able to do. Y was able to envision a healthy relationship between her self-critic and criticized self, in which her self-critic is less dominant and gives criticisms which helps the criticized self without making her suffer. Last, Y was able to think of how she can achieve this relationship. These all show Y is able to strengthen her self-compassion and is slowly but surely doing so.

An analysis of Y's drawing again infers Y feels lonely and isolated (*lone drawing*). The simple lines and overall drawing, with its clear shapes, again implies Y is a straightforward person. This is the first drawing in which Y uses color, indicating Y is becoming more in touch with her emotional experience.

Analysis of Participant Y, Session 4

The fourth session's goal was to create an image which represents feelings of acceptance and compassion to the self. This aimed to strengthen Y's self-compassion by helping Y explore and become more open to the idea of it.

Y found it difficult to think of an image which represents feelings of acceptance and compassion to herself, and so instead drew an external source of constant compassion; her dog, Boston. This indicates that Y still found it hard to extend

compassion to herself. Through the discussion session, Y was able to meet the goals of the session. Y was able to explore and see the benefits of self-compassion, which made her more open to the idea of it. Following this, Y was able to explore ways she can increase self-compassion, which is to first be mindful of her feelings and notice when she is 'suffering'. Y was able to practice this during the session by noting what is currently bothering her the most, which was her inability to open up to others, and her worry that others will not understand her. This showed that Y was able to become mindful of her emotions and thoughts, which will help Y increase her self-compassion.

A breakthrough occurred when Y opened up about her experience with bulimia; this showed Y was able to trust the therapist and that she is aware her bulimia is a problem. However, Y's inability to see how big of an issue her bulimia is and her perception that she can handle it and do not need a therapist shows Y still needs to work on increasing her mindfulness and self-compassion.

An analysis of Y's drawing again infers Y feels lonely and possibly isolated (*lone drawing*). The simple lines and overall drawing, with its clear shapes, implies Y is a straightforward and realistic person. Y's continued use of color indicates she is getting more in touch with and able to express her emotions.

Analysis of Participant Y, Session 5

The fifth session's objective was to strengthen Y's self-compassion by making Y practice being mindful of her current condition and asking herself what she needs. In this way, Y is exercising her mindfulness and self-kindness, and ultimately her self-compassion.

Y showed many promising signs that her self-compassion is increasing, no matter how small. Through the session's activity, Y was successfully able to be mindful of her current condition, which was feeling tired. Furthermore, Y was also able to mindfully conclude that what she currently needs is a break and rest. Y was also able to think of ways to give herself a break in her daily life. Additionally, Y also showed that she was doing work outside of therapy by self-reflecting at home and thinking about what she had learned during the sessions, and thus coming upon an issue she had with self-compassion. After discussing the issue with the therapist, Y shared she now understands self-compassion better, and feels better about the idea of giving herself kindness and self-compassion. All of

this showed that Y's self-compassion is improving. Moreover, Y showed further increase in self-compassion by being able to see that counseling and therapy can indeed help her with her bulimia. However, Y still showed some reservations regarding going to a counselor or therapist, thus indicating that Y still needs to work on her self-compassion.

An analysis of Y's drawing indicates that Y is now even more emotionally in touch with her emotions and even braver in expressing them; there is much more movement and energy implied in Y's drawing, as can be seen from the waves in the ocean and the radiating and bright sun. The relatively empty background and sole objects of one island, one tree, and a single solitary object in the sky again infers that Y feels lonely and possibly isolated. The simple lines and overall drawing, with its clear shapes, again implies Y is straightforward and realistic.

Analysis of Participant Y, Session 6

The sixth session's aim was to further increase Y's self-compassion by encouraging her to view herself in a compassionate manner and extend compassion to herself in the future. Showing that she had successfully met the session's objectives, Y was able to find things in her past and present she can be proud of herself for. Y was further able to compassionately wish for things in the future which she knows she most needs and can make her happy. Furthermore, Y also shared that she initially thought it would be much more difficult to take on a compassionate perspective when thinking of herself and her life; however, Y noticed that it was easier for her to do than it used to be before and at the start of the art therapy program. Y also remarked that now that she's learned about self-compassion and how to practice it, it has become something she does do, and does get easier to do. At the end of the session, Y also showed more interest in getting therapy for her bulimia, indicating that she is trying to take care of herself more. All of this shows that Y continues to grow in self-compassion, and that she is promisingly making an effort to increase her self-compassion.

An analysis of Y's drawing indicates that Y continues to express her emotions more and more. Although the drawing is colorless, there are many indicators of warm and positive emotions; the two girls are drawn smiling, there are lit candles to indicate heat and warmth, there are cupcakes which indicate the taste of sweetness, and a heart as a general symbol of love. The simple lines and overall

drawing, with its clear shapes, again implies Y is a straightforward and realistic person.

Analysis of Participant Y, Session 7

The seventh session's aim was to terminate, review, and evaluate, which Y and the therapist managed to successfully do. The therapist was able to review the objectives of each session and review lessons regarding self-compassion, while Y was also able to share what she had learned and what insights she'd gained from the therapy. Overall, Y has shown she has gained many personal insights, including better understanding her perfectionism, harsh self-critic, and problems, and also finding that art can be therapeutic for her. Y also learned ways to practice and increase self-compassion, such as criticizing herself constructively and objectively, being mindful of her current condition and of what she needs, and how to take care of herself. One of the most significant improvements Y showed was her decision to start therapy for her bulimia; this showed Y was able to mindfully realize her bulimia is a problem and she had the self-kindness initiative to take care of herself by dealing with the problem. All this indicates that Y's self-compassion has improved since before she started therapy, which can thus be concluded as a success.

APPENDIX 5C (Participant CG's Detailed Analysis)

Analysis of Participant CG, Session 1

This session was successful in that the goal of the session was met, which was to trigger CG's perfectionism and discuss it. CG was thus made more aware of her perfectionism and was able to discuss it with the therapist.

CG's perfectionism was shown various times during this session. First, CG shared that she found the activity to be stressful as she put pressure on herself to draw a lot, even feeling like this was a test that she must excel on; this shows how CG has high standards for herself even for small, seemingly fun tasks like drawing, and a task that objectively does not have any significance in her life, unlike an academic examination. CG's high demands on herself and her dissatisfaction with her efforts are shown through her comments. Furthermore, CG's decision not to color implies that, when faced with a task she feels she cannot perform outstandingly in, CG would rather avoid the task.

An analysis of CG's drawing infers that her decision to draw living, growing plants implies a desire within CG to grow and develop herself. The layers of flowers CG has drawn in certain places may also imply CG's tendency to ruminate, overthink, and fixate on a thought or problem. The lack of color also infers CG is not very in touch with her emotions and is hesitant to express them.

Analysis of Participant CG, Session 2

The second session worked as an introduction to self-compassion. This session was successful in that the goal of the session was met, which was to expose and confront CG's inner critic in a manner that is uniquely her own, and also build the strength of the voice of compassion and reason within CG, the voice that cares for herself and gives herself encouragement in a realistic manner when she struggles or face challenges. Furthermore, CG was also given the opportunity to increase positive self-talk.

CG's written criticism that she does not yet have a goal in life is rebutted with the explanation of wanting to make sure she chooses "absolutely the correct one"; this implies a fear of failure within CG, and is further evidence of her perfectionism. Additionally, this correlates with CG's decision in the previous not to color her drawing because it would be too difficult, which implies that, when

faced with a task she feels she cannot perform outstandingly in, CG would rather avoid the task. Thus, when faced with the possibility of failure, it seems that CG would remain stagnant than actually trying and facing the possibility of failure.

CG's perfectionism and self-criticizing tendency can also be seen clearly from the numerous self-criticisms she was able to think of and write in a short amount of time; CG even lingered and tried to think of more criticisms after the first set she wrote. Interestingly, CG took much longer to be able to think of rebuttals for each criticism, showing that CG is clearly not used to this kind of mindset, in which she is to look at her flaws and failures in an objective, reasonable way. Additionally, CG's initial comment that she feels like she is the only one around who is "having it bad" shows how CG has low levels of recognition of common humanity, an aspect of self-compassion which recognizes that everyone goes through failures and mistakes and have their own shortcomings and problems. A discussion in which the therapist attempted to raise CG's recognition of common humanity appears to have been successful, as CG noted this to be one of the interesting new insights she has gained from this session. Furthermore, CG was also ultimately able to find objective and reasonable rebuttals and also positive aspects of herself that can compensate for her criticisms, showing that there is self-compassion within CG that can be further developed and strengthened.

An analysis of CG's drawing infers that CG is beginning to feel more comfortable with being in touch with her emotions and expressing them, as can be seen from her use of colors for the eyes, lips, and face marks. The emphasized face marks may symbolize the criticisms she places on herself, how there are many of them, and how they are such an integral part of her that she must include them in her drawings.

Analysis of Participant CG, Session 3

The third session aimed to further strengthen CG's self-compassion, with a focus on transforming the maladaptive and harsh self-critic to a constructive self-critic. This was done by becoming mindful of, listening to, and extending compassion to the self-critic and the other part of self that is the recipient of the criticism (the criticized self). The activity then encouraged CG to envision, express artistically, and build a new relationship to the self-critic and between the self-critic and criticized self.

The session was successful, in that all the aforementioned goals were met by CG. First, CG was able to become mindful of her self-critic; CG could see that her self-critic has so far used harsh words on herself which has ultimately harmed CG, and have been continuously ‘yelling’ criticisms at her. CG was then able to approach and perceive her self-critic in an open, friendly, and accepting way; CG was able to realize and understand that her self-critic actually means well, in that it is being critical because it wants to push CG to be a successful and good person, and is afraid that CG will fail. In sharing her family story with the therapist, CG also shows awareness of her motivation for becoming successful, another promising evidence that CG is able to self-reflect and be taught to do so mindfully.

Furthermore, CG was able to also become mindful of her criticized self, and see that her criticized self is actually suffering from the harsh self-critic’s influence; her criticized self is feeling tired, burdened, and wants to rest. This is a major part of self-compassion which CG was able to do. CG was then able to envision a healthy relationship between her self-critic and criticized self, in which her self-critic and criticized self are equal to and balance each other, and her self-critic is there to help, and not harm. Lastly, with encouragement and help from the therapist, CG was able to think of ways through which she can achieve the relationship she wishes her self-critic and criticized part to have. These are all evidence that CG has the ability to strengthen her self-compassion and is slowly but surely doing so.

An analysis of CG’s drawing infers that CG feels lonely and possibly isolated (*lone drawings*). Her simple lines and overall drawing, with its obvious objects, imply that CG is able to communicate her ideas well, as can also be seen from how she is able to express herself well verbally, and that she is also a straightforward and realistic person. The relatively small size of the drawings implies that CG felt scared, uncertain, and figuratively “small” when confronting the subjects of this session.

Analysis of Participant CG, Session 4

The fourth session’s objective was to create an image which represents feelings of acceptance and compassion to the self. This aimed to further strengthen CG’s self-compassion, by helping CG explore and become more open

to the idea of giving self-compassion. This also included discussing the benefits of having self-compassion.

CG found it difficult to think of an image which represents feelings of acceptance and compassion to herself, and so instead drew an external source of constant compassion; her three best friends from high school. This indicates CG still found it hard to extend compassion to herself, but is able to feel it coming from external sources, and can thus become in touch with her emotional reactions towards receiving compassion, which were happy, touched, and grateful. Through the discussion session, CG was able to successfully meet the goals of the fourth session, which was to explore the idea of self-compassion. CG discussed issues such as not knowing how to give herself compassion and feeling like she doesn't deserve self-compassion, and together with the therapist managed to overcome those issues. By overcoming these issues, CG is thus more ready to increase her self-compassion. Furthermore, CG was then able to explore ways in which she can increase self-compassion, with the therapist's help; CG learned that what she can do to be self-compassionate is to first be mindful of her feelings and mental state and notice when she is in any way not feeling well or 'suffering'. CG's comment that this is something she wants to work on and improve, as she is tired of being so negative to herself, is a promising indicator that CG is slowly but surely increasing her self-compassion.

An analysis of CG's drawing again infers that CG is getting braver and more ready to be in touch with and express her emotions, as can be seen from her many use of various colours. The hurried and messy way CG colored, her decision not to erase her mistakes in drawing the hands, and her comment that she wanted to 'let loose' and not confine herself to her usual perfectionistic way all implies that CG is starting to not be too harsh on herself and can allow herself some mistakes and imperfections; this bodes well for the improvement of CG's self-compassion.

Analysis of Participant CG, Session 5

The fifth session's objective was to further strengthen CG's self-compassion by making CG practice being mindful of her current condition and then asking herself what she needs. In this way, CG is exercising her mindfulness and self-kindness, and ultimately her self-compassion.

This session showed how CG is capable of practicing and improving her mindfulness, a major dimension of self-compassion. Initially, CG's mindfulness was low, as can be seen from her thinking she needed all of the things she drew in order to be happy and also thinking that her mother's background automatically makes CG a 'bad' person. However, throughout the session and with help from the therapist, CG was able to think mindfully and see that what she actually needs is to be able to accept her family background and that her mother's background does not automatically define who CG is. Aside from realizing that what she needs most is to be able to accept her family background, CG was also able to reach new insights of what is making it difficult for her to accept her family background; that CG's perception of her mother and CG's inability to accept her family background has been heavily influenced by her grandmother; that the actions of other people (like her parents) do not define her, but that her actions does; and that her grandmother's saying are not facts, but are in fact opinions that may not necessarily be true. All these are evidence that CG was able to improve her mindfulness. Along with CG's positive reaction to the session and her agreeing to practice mindfulness and self-kindness, there is much implication that CG continues to increase her self-compassion, and much promise that she will continue to.

An analysis of CG's drawing indicates that CG has a lot on her mind, as can be seen by the many objects she drew. CG's childlike, 'cute', and expressive drawings implies that she has a similar personality. Her simple lines and overall drawing, with its obvious objects, again imply that CG is able to communicate her ideas well, as can also be seen from how she is able to express herself well verbally, and that she is also a straightforward and realistic person.

Analysis of Participant CG, Session 6

The sixth session's aim was to further increase CG's self-compassion by encouraging her to view herself in a compassionate manner and extend compassion to herself in the future. This was done by instructing CG to draw her past, present and future through a caring and supportive perspective.

Although at first, while working on the 'past' section, CG found it hard to keep a positive perspective on herself and thus took the perspective of someone who cares for her, CG was able to push herself to take her own perspective positively

while working on the 'present' and 'future' sections. CG was also able to think of things she is proud of herself for in both the 'past' and 'present' sections. Furthermore, CG shared that she has been practicing self-criticizing not in a harsh way, but rather in a friendly, understanding, and accepting way, and that it feels very pleasant to her. This has then encouraged CG to be kinder and more compassionate to herself, even if it still doesn't come naturally or very easily to her. All of this shows that CG continues to grow in self-compassion, and that she is promisingly making an effort to increase her self-compassion.

An analysis of CG's drawing indicates that CG continues to be more comfortable in expressing her emotions, as can be seen through the use of color. There is also an isolated theme to CG's drawings, as can be seen from the lone objects she drew and the image of the individual small island and the individual tree on it; these may reflect either CG's feelings of being lonely, or also her wish to be by herself and self-reflect. CG's drawing of her 'present' section is much more rich and detailed than the other sections, implying that CG is more focused her present now and thus also implies of CG's improving mindfulness.

Analysis of Participant CG, Session 7

The seventh session's goals were to terminate, review, and evaluate, all of which were successfully met by CG and the therapist. The therapist managed to review the objectives of each session and review lessons regarding self-compassion, while CG was able to share lessons she had learned and insights she'd gained from participating in the therapy.

CG has shown that she has gained many personal insights, including better understanding her negative-thinking tendencies, her issues, her harsh self-criticizing tendencies, and her initially low self-compassion. Regarding what she's learned, CG shared that going through the therapy has taught her how to be mindful and treat herself kindly; that everyone has their own strengths and weaknesses, that it is human to make mistakes, and that she is not alone in her troubles; and that she does not need to be harsh when criticizing herself but can instead self-criticize in an objective and constructive way. By thinking of and sharing these personal insights and lessons, CG has shown that her self-compassion has improved since before she started the art therapy program, which can thus be concluded as a success.

APPENDIX 6C (Participant ZQ's Detailed Analysis)

Analysis of Participant ZQ, Session 1

This session was successful in that the goal of the session was met, which was to trigger ZQ's perfectionism and bring it up for discussion. ZQ was thus made more aware of her perfectionism and was able to discuss it with the therapist.

YZQ's perfectionism was shown various times during this session. While drawing, ZQ used her hand as a guide to make sure she was drawing 'correctly' and exactly where she wants to. Her carefulness to not make mistakes and make a good drawing was shown through her slow and steady drawing manner. ZQ also had thoughts of wanting very much to make a good drawing and not wanting to make any mistake. Upon completing the drawing, even though ZQ can appreciate that the drawing is not too bad for something she did with her eyes closed, she still can't help but feel bothered by the mistakes she made. Furthermore, ZQ also shared how she always wants to do her best and will try her hardest for every task she faces; that her best efforts often do not satisfy her; and that she always feels she could've done better and have not worked hard enough. These are all evidence to her perfectionistic tendencies.

An analysis of ZQ's drawing infers ZQ is quite comfortable with expressing her thoughts and emotions, as can be seen through her use of colors. ZQ's drawing of hanging plants may also infer to current feelings of being 'hanged', unsteady, unstable, and non-independent. Her preoccupation with wanting to make a 'pretty' drawing also infers that ZQ cares a great deal about physical or outward appearances.

Analysis of Participant ZQ, Session 2

The second session worked as an introduction to self-compassion. The goals of this session were to expose and confront ZQ's inner; build the strength of the voice of compassion and reason within ZQ, the voice that cares for herself and gives herself encouragement in a realistic manner when she struggles or face challenges; and to give ZQ the opportunity to increase positive self-talk.

ZQ's perfectionism and inner critic was especially seen from her discussion with the therapist. While drawing, ZQ had thoughts of wanting to make a good

drawing and had made concentrated efforts to draw well with her non-dominant hand. Additionally, ZQ clearly places high pressure and expectations on herself, which would be fine if it weren't also for her belief that she is never doing enough, that she is failing, and that she will never be enough; these thoughts and harmful self-criticizing are clearly distressful to ZQ, as can be seen from her outburst of crying during the session, her exhaustion afterwards from thinking about it and crying, and her remark that she often cries herself to sleep when thinking she's not good enough. Moreover, ZQ also remarked that she often calls herself "fat", "dark-skinned", and "not pretty", and even though it upsets her, she can't seem to stop. These are all evidence of ZQ's perfectionism and harmful self-critic.

Although ZQ unfortunately did not confront her self-critics towards herself during this session, ZQ still managed to meet two other significant goals of the session; confront her inner critic regarding her drawing and expose her inner critic. In particular, ZQ was able to become fully aware of her harmful self-criticizing tendencies and how upsetting it actually makes her feel. Furthermore, this realization inspired ZQ to want to change and "not be so negative". All this, along with ZQ sometimes giving herself 'self-love' by telling herself she is pretty, are evidence that ZQ has it within her to give self-compassion, and that this can be developed and strengthened throughout therapy.

An analysis of ZQ's drawing infers again that ZQ is quite comfortable with expressing her thoughts and emotions, as can be seen through her use of colors. The left-side position of her drawing implies that ZQ's thoughts are dominantly focused on her past. The attention given to drawing the eyes indicates that social contact, perceiving the world, and expressing herself are aspects that matter greatly to ZQ.

Analysis of Participant ZQ, Session 3

The third session aimed to strengthen ZQ's self-compassion, focusing on transforming the maladaptive and harsh self-critic to a constructive self-critic. This was done by becoming mindful, listening to, and extending compassion to the self-critic and the criticized self. The activity then encouraged ZQ to envision, express artistically, and build a new relationship to the self-critic and between the self-critic and criticized self.

The session was successful, in that all the aforementioned goals were met by ZQ. First, ZQ was able to become mindful of her self-critic. ZQ could see that the way she has been self-criticizing so far is overbearing, suffocating, and ultimately harmful and disheartening. ZQ was then able to perceive her self-critic in an open and accepting way; ZQ was able to realize and understand that her self-critic actually means well, in that it is being critical because it wants ZQ to always improve herself so she can become the version of herself she idealizes, and that her self-critic is afraid ZQ will never reach her goals. Furthermore, ZQ was able to also become mindful of her criticized self, and see that her criticized self is feeling exhausted and sad, wants rest from the criticisms, wants to rest, and is ultimately suffering from the harsh self-critic; this is a major part of self-compassion ZQ was able to do.

ZQ's vision of a future relationship between her self-critic and criticized part was one where the self-critic simply did not exist; ZQ's wish to eliminate her self-critic for its harmful effects is a sign that ZQ is capable of self-compassion, in which she is recognizing that she is suffering and wants to alleviate it her suffering. However, this future vision confused ZQ, as she thinks her self-critic is necessary for her to improve herself, and thus should not be eliminated, yet at the same time she also wants to be free from the harsh effects of her self-critic. Through a discussion with the therapist, ZQ was guided to think about how a self-critic can be helpful and healthy if it is constructive, objective, and encouraging, and how ZQ can practice such healthy self-criticism. ZQ's responsiveness to this discussion and agreement to try and practice this new way of self-criticizing is a promising indicator that her self-compassion can be further strengthened.

An analysis of ZQ's drawing again infers ZQ is comfortable with expressing her thoughts and emotions, as can be seen through her many use of colors. Her preoccupation with wanting to make a 'pretty' tree infers and supports the analysis and ZQ's own statement that she cares a lot about physical or outward appearances. The sturdy-looking tree also mirrors ZQ's wish to become a strong person.

Analysis of Participant ZQ, Session 4

The fourth session's objective was to create an image which represents feelings of acceptance and compassion to the self. This aimed to further

strengthen ZQ's self-compassion, by helping ZQ explore and become more open to the idea of giving self-compassion. This also included discussing the benefits of having self-compassion.

ZQ's drawing depicts her feelings when receiving compassion, which were peaceful, calm, and content. Although ZQ did not explicitly state so, it can be implied that ZQ had created the artwork while imagining being given self-compassion from an external source, instead from herself. This infers that ZQ is still having difficulty giving self-compassion, which is understandable as she is still new to the concept and had thought of an issue regarding giving self-compassion. However, that ZQ was able to see the benefits of having self-compassion, that she had made an effort to practice self-compassion outside of the session, and had thought analytically about it enough to encounter an issue are all promising indicators that ZQ is making an effort to increase her self-compassion and can continue to do so. Furthermore, after discussing her issue regarding self-compassion, ZQ shared that she now feels more comfortable and open to practicing self-compassion.

An analysis of ZQ's drawing again infers ZQ is comfortable with expressing her thoughts and emotions, as can be seen through her many use of colors. ZQ controlled and careful brushwork also implies that she has good control and awareness of herself. The ocean, which ZQ drew, is a place of great depths and mystery, thus a probable indication that ZQ herself holds many secret she does not share with many people in her life. The prominent and relatively big sun she painted may imply of a longing for her father to be more present in her life. The lone sun, boat, male figure, and tree she drew may indicate of some lonely feeling. The tree's many leaves may also indicate the many thoughts she has in her mind. Furthermore, the many use of color on the lower half of the drawing paper implies ZQ is very much in touch and moved by her emotions.

Analysis of Participant ZQ, Session 5

The fifth session's objective was to further strengthen ZQ's self-compassion by making ZQ practice being mindful of her current condition and asking herself what she needs. Thus, ZQ is exercising her mindfulness and self-kindness, and ultimately her self-compassion.

Throughout this session, ZQ showed many signs that her self-compassion continues to strengthen and can even more. First, there was ZQ's experience of tripping and falling a few days before the session; ZQ's ability to fall without harshly criticizing herself over it, to think that it wasn't a big deal, to remind herself that everyone makes mistakes sometimes, and to not ruminate about it are all evidence that ZQ was able to give herself self-compassion, and successfully so. Furthermore, ZQ's comment about how self-compassion can help her to accept her 'bad' past and her excitement to practice it are promising indicators that ZQ will continue to exercise her self-compassion and that it can continue to increase.

Analyzing ZQ's drawing, the lack of color unlike her previous artworks may indicate that ZQ was uncomfortable at being in touch with the emotions evoked from this exercise, in particular emotions regarding her 'bad' past. The open doors may indicate that ZQ feels open and connected to her past experiences and future hopes. Her overall drawing with its obvious objects imply that ZQ is able to communicate her ideas well, as can also be seen from how she is able to express herself well verbally.

Analysis of Participant ZQ, Session 6

This session's aim was to increase self-compassion by encouraging ZQ to view herself in a compassionate manner and extend self-compassion in the future. This was done with instructions to draw her past, present and future from a caring and supportive perspective.

Through this session, ZQ continues to show that she has been practicing self-compassion, that her self-compassion is increasing, and that it can continue to increase. ZQ was able to think of her past, present, and future in a self-compassionate mindset, and had even remarked that she is finding it easier and easier to do so. Through her drawing, ZQ showed that she is able to find things to be proud of herself for and give herself the praise she deserves, thus extending self-kindness. ZQ also showed self-compassion through reflecting and deciding that she does not want to stay in a toxic, unhealthy mindset of constantly trying to impress someone who refuses to accept and appreciate her. The positive effects of self-compassion can also be seen through ZQ's comment that she feels better now than at the start of the therapy. Furthermore, ZQ's comment that she will

focus on taking care of herself in the future, that she has been actively trying to practice self-compassion in her own time, and that she is excited to continue to practice self-compassion are promising indicators that her self-compassion will continue to strengthen.

An analysis of ZQ's drawing again infers ZQ is comfortable with expressing her thoughts and emotions, as can be seen through her use of colors. Her desire to make a 'pretty' house again infers and supports the analysis and ZQ's own statement that she cares a great deal about appearances. The presence of plants and a tree implies there is a desire in ZQ to grow. A hand hidden behind her self-drawing infers ZQ is feeling some reservations in social interactions; this might refer to the previous session's theme of ZQ worrying other people will not accept her 'bad' past, showing that this is something that ZQ is still working on.

Analysis of Participant ZQ, Session 7

The seventh session's goals were to terminate, review, and evaluate, all of which were successfully met by ZQ and the therapist. The therapist managed to review the objectives of each session and review lessons regarding self-compassion, while ZQ was able to share lessons she had learned and insights she'd gained from participating in the art therapy program. ZQ showed that she has learned many things through the therapy, such as learning that drawing and painting can help her to figure out a problem; how to criticize herself in a healthier way; how to give herself self-compassion; and also that everyone needs self-compassion, not self-pity. By thinking of and sharing these personal insights and lessons, and in addition to her comment that she feels lighter and better now than she did at the start of the therapy, ZQ has shown that her self-compassion has improved since before she started the art therapy program and can even continue to improve. Thus, the therapy may be concluded as a success.

APPENDIX 7C (Participant LOR's Detailed Analysis)

Analysis of Participant LOR, Session 1

This session was successful in that the goal of the session was met, which was to trigger LOR's perfectionism and bring it up for discussion. LOR was thus made more aware of her perfectionism and was able to discuss it with the therapist.

LOR's perfectionism was shown various times during the session. LOR worked very slowly and carefully, and expressed she really wanted to make a good drawing. LOR also shared she was uncomfortable with other people looking at her mistakes; LOR even seems to cover her drawing hand so the therapist would not be able to see the mistakes she made. Next, LOR expresses that she doesn't like her drawing because it's very messy, and proclaims it to be not good. Furthermore, LOR admits that she rarely deems her best efforts as enough, and always believes she could've done better.

An analysis of LOR's drawing implies that her decision to draw living, growing plants also implies a desire within CG to grow and develop herself. The layers of flowers and ground LOR has drawn may also infer LOR's tendency to ruminate, overthink, and fixate on a thought or problem. The lack of color also infers CG is not very in touch with her emotions and is hesitant to express them.

Analysis of Participant LOR, Session 2

The second session worked as an introduction to self-compassion. This session was successful since its goals were met, which was to expose and confront LOR's inner critic in a manner that is uniquely her own, and also build the strength of the voice of compassion and reason within LOR, the voice that cares for herself and gives herself encouragement in a realistic manner when she struggles or face challenges. Furthermore, LOR was also given the opportunity to increase positive self-talk.

LOR's perfectionism and self-criticizing self was clearly seen through the session; LOR again seemed to be hiding her drawing hand from the therapist to hide her mistakes, LOR worked carefully, and expressed dissatisfaction at being unable to color inside the lines despite her efforts. Furthermore, LOR was able to quickly think of criticisms for her drawing and herself, and she further admitted

she often say the self-criticisms to herself. It was interesting to note that LOR took much longer to be able to think of rebuttals for each criticism; LOR is clearly not used to this kind of mindset, in which she is to look at her flaws and failures in an objective, reasonable way. Despite this, LOR was able to find objective and reasonable rebuttals; this proves there is self-compassion within Y that can be further developed and strengthened.

An analysis of LOR's drawing infers that LOR has quite an artistic side to her, as seen from her unusual choice in drawing. This may also infer that LOR is a risk-taker and is brave enough to try new things. LOR's use of color may suggest that LOR is beginning to feel more comfortable in being in touch with and expressing her emotions.

Analysis of Participant LOR, Session 3

The third session aimed to further strengthen LOR's self-compassion, with a focus on transforming the maladaptive and harsh self-critic to a constructive self-critic. This was done by becoming mindful, listening to, and extending compassion to the self-critic and the other part of self that is the recipient of the criticism (the criticized self). The activity then encouraged LOR to envision, express artistically, and build a new relationship to the self-critic and between the self-critic and criticized self.

The session was successful, in that all the session's goals were met by LOR. First, LOR was able to become mindful of her self-critic, and explored her self-critic's fears, wants, and intentions. From this, LOR could realize that her self-critic actually means well, in that it is being critical because it wants to help LOR not make mistakes and perform up to her high standards. Furthermore, LOR was able to also become mindful of her criticized self, and see that her criticized self is actually suffering under the self-critic harsh criticisms; this is a major part of self-compassion which LOR was able to do. LOR was then able to envision a relationship between her self-critic and criticized self, in which her self-critic does not criticize her too much and can be cooled down. With help from the therapist, LOR was able to figure out a healthy relationship that her self-critic and criticized self can have, and to think of ways through which she can achieve that healthy relationship. These are all evidence that LOR has the ability to strengthen her self-compassion and is slowly but surely doing so.

An analysis of LOR's drawing again infers that LOR is getting more comfortable with being in touch with and expressing her emotions, as can be seen through her use of color. LOR's depiction of evil implies to her mentioned interest in horror films and stories, while the relative 'cute' quality of the evil figure infers to a childlike quality LOR might still possess.

Analysis of Participant LOR, Session 4

The fourth session's objective was to create an image which represents feelings of acceptance and compassion to the self. This aimed to further strengthen LOR's self-compassion, by helping LOR explore and become more open to the idea of giving self-compassion. This also included discussing the benefits of having self-compassion.

LOR had drawn a representation of how she feels when she is given compassion by others, especially her mother; this implies that LOR still found it hard to extend compassion to herself, as confirmed by LOR herself in the discussion session that she still finds it hard to not criticize herself harshly and is unsure when to practice giving self-compassion. However, these also show LOR is able to become in touch with her emotional reactions towards receiving compassion and that she has been practicing trying to give herself self-compassion. Along with LOR agreeing to the therapist's tips on different ways to think about self-compassion and LOR's remarks that these new tips will help her in giving self-compassion and that she is willing to try them, these are all positive indicators that LOR's self-compassion can continue to grow.

An analysis of LOR's drawing again infers LOR is comfortable with expressing her thoughts and emotions, as can be seen through her use of colors. LOR carefully thought of symbolisms again infers to LOR's artistic instincts. LOR's careful coloring to stay inside the lines suggests of her perfectionism and carefulness in working.

Analysis of Participant LOR, Session 5

This session's objective was to strengthen LOR's self-compassion by making LOR practice being mindful of her current condition and asking herself what she needs. Thus, LOR is exercising her mindfulness and self-kindness, and ultimately her self-compassion.

Throughout the session, LOR showed promising signs that her self-compassion is increasing, no matter how small. Through the session's activity, LOR was successfully able to be mindful of what she currently needs, which is compassion both from herself and from other people. LOR deciding that what she needs is compassion both from herself and from other people also infers that LOR is beginning to see the benefits of self-compassion and the importance of having it. Additionally, LOR also showed that she was practicing self-compassion outside of therapy by practicing the tips on giving self-compassion which was discussed by the therapist at the previous session. Even more, LOR reports that the tip has helped her to stop her harsh self-criticizing and to talk to herself in a more encouraging way. These are all promising signs that LOR's self-compassion is increasing and can continue to.

An analysis of LOR's drawing again infers that LOR has quite an artistic side to her, as seen from her unusual choice in drawing. This may also infer that LOR is somewhat of a risk-taker and is brave enough to try new things. The ghoulish and skull-like head of her human-like figure also further confirms her mentioned interest in horror films and stories, the carefully thought of symbolisms again infers to LOR's artistic instincts.

Analysis of Participant LOR, Session 6

The sixth session's aim was to further increase LOR's self-compassion by encouraging her to view herself in a compassionate manner and extend compassion to herself in the future. This was done by instructing LOR to draw her past, present and future through a caring and supportive perspective.

Showing that she had successfully met the objectives of the session, LOR was able to think of things in her life and in herself that she likes. LOR was able to appreciate that she had grown up in a family who has given her lots of compassion and love and has taught her about them. Furthermore, LOR was able to mindfully think of her present struggles and situation, and is even able to be understanding to and forgive herself for a disappointment. Additionally, LOR was further able to make compassionate wishes for herself in the future. LOR also remarked that even though she doesn't find it easy, she has been practicing self-compassion and is able to do it; that she found it easier to think of her life and herself in a self-compassionate manner; that she can believe in herself; that

she can say encouraging words to herself; and that she feels more comfortable practicing self-compassion the more she does it. All of this shows that LOR continues to grow in self-compassion, and that she is promisingly making an effort to increase her self-compassion.

An analysis of LOR's drawing again infers that LOR has quite an artistic side to her, as seen from her unusual choices in making symbols; this may also imply that LOR can be a risk-taker and is brave enough to try new things. LOR's relatively matter-of-fact drawings suggests that she has a similar personality.

Analysis of Participant LOR, Session 7

The seventh session's goals were to terminate, review, and evaluate, all of which were successfully met by LOR and the therapist. The therapist managed to review the objectives of each session and review lessons regarding self-compassion, while LOR was able to share lessons she had learned and insights she'd gained from participating in the art therapy program. LOR showed that she has learned many things through the therapy, such as learning how to give herself compassion and kindness, and how to handle harsh criticisms from herself and from others. Furthermore, LOR also expressed she has gone through positive changes, significantly that she is now able to give herself self-compassion, that she does not criticize herself as much anymore, and that when she does, it is no longer harsh like it used to be. By thinking of and sharing these personal insights and lessons, LOR has shown that her self-compassion has improved since before she started therapy and can even continue to improve. Thus, the therapy may be concluded as a success.

APPENDIX 8C (Participant M's Detailed Analysis)

Analysis of Participant M, Session 1

This session was successful in that the goal of the session was met, which was to trigger M's perfectionism and bring it up for discussion. M was thus made more aware of her perfectionism and was able to discuss it with the therapist.

M's perfectionism was shown various times during this session. First, M had chosen to draw something that she thought she could draw even with her eyes closed, showing that M wanted to ensure that she drew 'correctly'. M also shared that she worried her drawing would not be good, again showing that M wanted to do well in her task. Even when M can tell herself that the drawing is not too bad for something that she drew with her eyes closed, she still has feelings of being bothered by the drawing and can't help but think of what she could've done instead to make it neater. Along with M's admission that she often thinks back about her past mistakes, failures, or any other things that she feels did not go as she wanted to and thinks of ways that she could've "done better", these remarks show the maladaptive perfectionistic qualities of setting high standards, perceiving high discrepancy between the standard and actual performance, and feeling dissatisfied with the performance. Furthermore, M's remarks also show her low self-compassion, such as her comment that she often ruminates her mistakes, tells herself she is stupid, and believes she's never able to meet the standards she's set.

An analysis of M's drawing infers that M has many things she wants to achieve, as can be inferred from her drawing a dynamic, moving car with the wheels turning. However, M also has a lot of worries and anxieties, implied by the repeated circular strokes in the wheels. Furthermore, M seems to still be fixated on the past or wanting to go back to the way things used to be, as can be inferred from the car facing and moving to the left. M's lone, solitary drawing may also imply a feeling of loneliness that M might have. The simple lines and overall drawing, with its clear shapes, also implies M is a straightforward and realistic person.

Analysis of Participant M, Session 2

The second session worked as an introduction to self-compassion. This session was successful in that the goal of the session was met, which was to expose and confront M's inner critic in a manner that is uniquely her own, and also build the strength of the voice of compassion and reason within M, the voice that cares for herself and gives herself encouragement in a realistic manner when she struggles or face challenges. Furthermore, M was also given the opportunity to increase positive self-talk.

M's perfectionism and self-criticizing self was clearly seen from the criticisms she wrote and how she was able to think of them quickly; in fact, M even personally said she was used to criticizing herself and thinking about herself negatively. Furthermore, it was evident that M was not used to looking at her flaws and failures in an objective, reasonable way, as shown by the longer time she needed to think of the rebuttals and her own admission that this was a new way of self-reflecting for her. Despite her difficulty, M still managed to find objective and reasonable rebuttals to her perceived flaws and failures which she could accept and agree on; this proves there is self-compassion within M that can be further developed and strengthened.

An analysis of M's drawing infers again that M has a confrontational personality (body stance of person drawn), yet she is also having problems in dealing with society (hands hidden behind the body). The expression of her self-drawing reflects M's own oft-worn expression of being sad, upset, or displeased, which may imply to M's presently dominant mood. Additionally, the left-side position of the drawing again implies that M has a fixation on her past.

Analysis of Participant M, Session 3

The third session aimed to further strengthen M's self-compassion, with a focus on transforming the maladaptive and harsh self-critic to a constructive self-critic. This was done by becoming mindful, listening to, and extending compassion to the self-critic and the other part of self that is the recipient of the criticism (the criticized self). The activity then encouraged M to envision, express artistically, and build a new relationship to the self-critic and between the self-critic and criticized self.

The session was successful, in that all the aforementioned goals were met by M. First, M was able to become mindful of her self-critic. M could see that her self-critic has so far been harsh and hurtful to herself. However, M could also approach her self-critic in an open, friendly, and accepting way, and recognize that her self-critic actually means well. M could recognize that her self-critic's intention in being so critical is to make sure that M does not make mistakes and always does the right thing, and that her self-critic is afraid of other people judging M badly, so it wants M to always do the right thing to avoid other people's negative judgment.

On the other hand, M was also able to be mindful of and listen to her criticized part; M was able to realize that her criticized part feels tired and overwhelmed from all the self-criticisms, wants the self-critic to not be so harsh and mean, and needs support and positive encouragement. Essentially, M was able to see that her criticized self is actually suffering under the harsh self-critic's scrutiny; this is a major part of self-compassion which M was able to do. M was then able to envision a healthy relationship between her self-critic and criticized self, in which her self-critic is less harsh and hurtful, and the criticized part is able to welcome the self-critic and not be hurt by it. Lastly, with guidance and help from the therapist, M was able to think of ways through which she can achieve the relationship she wishes her self-critic and criticized part to have. These are all evidence that M has the ability to strengthen her self-compassion.

An analysis of M's drawing again infers, from the left-side position of her drawings, that M has a fixation on her past. The relatively small and solitary drawings also again imply that M is feeling lonely and/or isolated. The simple lines and overall drawing, with its clear shapes, implies that M is a straightforward and realistic person and able to communicate her ideas well.

Analysis of Participant M, Session 4

The fourth session's objective was to create an image which represents feelings of acceptance and compassion to the self. This aimed to further strengthen Y's self-compassion, by helping M explore and become more open to the idea of giving self-compassion. This also included discussing the benefits of having self-compassion and issues M might have about giving self-compassion.

All the goals of the session was successfully met by M, which are promising signs of M's self-compassion growth. First, M was able to find an image which represented her feelings of being given compassion, which was sad and touched. This enabled a discussion through which M was able to explore the idea of self-compassion and what it entails, and the idea of giving it to herself. M was able to discuss her biggest challenge in giving self-compassion and work with the therapist to overcome it. The therapist also managed to make M realize the benefits of giving self-compassion, with which M agreed. Ultimately, M remarked that she likes the thought of having the self-compassionate mindset and wants to practice it. All this, along with M's discussion with the therapist at the very beginning of the session, in which she was able to think of something that can help her with her current predicament, are all promising indicators that M's self-compassion is increasing and can continue to do so.

An analysis of M's drawing again infers, from the left-side position of her drawings, that M has a fixation on her past. The solitary drawing also again implies that M is feeling lonely and/or isolated. The simple lines and overall drawing, with its clear shapes, implies that M is a straightforward and realistic person and is able to communicate her ideas well.

Analysis of Participant M, Session 5

The fifth session's objective was to further strengthen M's self-compassion by making M practice being mindful of her current condition and then asking herself what she needs. In this way, M is exercising her mindfulness and self-kindness, and ultimately her self-compassion.

Throughout the session, M showed many promising signs that her self-compassion is increasing, no matter how small. M was able to mindfully assess her current condition and realize what she needs most, which was time to heal and be better. Furthermore, M was also able to see how she can help herself move on (and thus help take care of herself) by unburdening herself with the problems she has carried around for so long; this was evident through M's agreement to share her second semester problem's story at the next session, and also through her sharing another issue, one with her parents, which had significantly bothered her. M also clearly could feel the positive effect of sharing her story and thus taking care of herself, as can be seen from her comment that it

had felt nice and relieving to do so, and she now feels lighter; this may encourage M to practice self-compassion even more. These are all promising indicators that M's self-compassion is increasing and can continue to do so.

An analysis of M's drawing again infers, from the left-side position of her drawings, that M has a fixation on her past. The relatively higher position of her drawing may infer that M is presently doing a lot of thinking, perhaps in the form of self-reflecting or exercising mindfulness. The solitary drawing also again implies that M is feeling lonely and/or isolated. The simple lines and overall drawing, with its clear shapes, implies that M is a straightforward and realistic person and is able to communicate her ideas well.

Analysis of Participant M, Session 6

The sixth session's aim was to further increase M's self-compassion by encouraging her to view herself in a compassionate manner and extend compassion to herself in the future. This was done by instructing M to draw her past, present and future through a caring and supportive perspective.

Showing that she had successfully met the objectives of the session, M was able to view herself in a compassionate manner by focusing on things she likes and even admire about herself. M was further able to compassionately wish for things for herself in the future. Many of M's remarks also indicate of her growing self-compassion and how it can continue to grow, such as her remark that she is getting better at thinking positively and self-compassionately about herself; that she believes she can reach her goals of being able to take care of herself; that she is tired of being so negative about herself; and that she is ready to make a change. The most significant progress in M's self-compassion this session was her ability to 'unburden' herself of a very significant problem she had during her second semester; through this, M showed that she was able to realize that carrying around the problem had made her suffer, that she was touched enough by her suffering to want to relieve it, and that she actively worked to relief herself of that suffering and burden by sharing her story with the therapist. Evidently, M herself felt the positive effects of self-compassion; she had remarked how nice and freeing it feels after finally sharing her story and had ended the session with a big smile on her face. These are all promising indicators that M's self-compassion is increasing and can continue to do so.

An analysis of M's drawing again infers, from the simple lines and the obvious shapes, that M is straightforward, realistic, and able to communicate her ideas well. The solitary figures also again imply that M is feeling lonely and/or isolated.

Analysis of Participant M, Session 7

The seventh session's aim was to terminate, review, and evaluate, which M and the therapist managed to successfully do. The therapist was able to review the objectives of each session and review lessons regarding self-compassion, while M in turn was also able to share what she had learned and what insights she'd gained from going through the art therapy program. The insights M shared she had gained through the therapy were how important it is to take care of herself, that it is important for her to give compassion to herself, and that she should focus on how to take care of herself and avoid things that make her feel helpless. The lessons M shared she had learned includes how to criticize herself in a better way, how to think mindfully of herself and her situations, and how to give herself self-compassion. In this session, M again showed that her self-compassion is present and increasing through her plan to see a doctor which specializes in STD to get a proper check-up, to discuss her situation, and to see what she can do to manage her STD; this shows the active attitude M now has to take care of herself. By thinking of and sharing these personal insights and lessons, in addition to her plan to consult with a doctor, M has shown that her self-compassion has improved since before she started the art therapy program and can even continue to improve. Thus, the therapy may be concluded as a success.

APPENDIX 9C (Participant CF's Detailed Analysis)

Analysis of Participant CF, Session 1

This session was successful in that the goal of the session was met, which was to trigger CF's perfectionism and bring it up for discussion with the therapist. CF's perfectionism was shown various times during this session. Throughout the drawing activity, CF had concerns over wanting to make a very good drawing but believing that she cannot make a drawing as good as she wants. Even though CF worked very hard to make a good drawing, as can be seen from her using her hand as a guide to draw and working slowly and carefully, CF still isn't satisfied with her results. CF further shared that this is how she feels with almost all her other assignments or tasks, in which she felt a huge pressure to do it as perfectly as she can. Significantly, CF shared that her perfectionism bothers and tires her, but she can't seem to help it.

An analysis of CF's drawing infers that her decision to draw living, growing beings in the form of trees imply a desire within CF to grow and develop herself. The layers of trees CF has drawn in certain places may also imply CF's tendency to ruminate, overthink, and fixate on a thought or problem. CF's readiness to use color suggests that she is in touch with and comfortable with expressing her emotions.

Analysis of Participant CF, Session 2

The second session worked as an introduction to self-compassion. This session was successful in that the goal of the session was met, which was to expose and confront CF's inner critic in a manner that is uniquely her own, and also build the strength of the voice of compassion and reason within CF, the voice that cares for herself and gives herself encouragement in a realistic manner when she struggles or face challenges. Furthermore, CF was also given the opportunity to increase positive self-talk.

CF's perfectionism and self-criticizing self was clearly seen throughout the session. Firstly, CF worked very carefully on her artwork, erased multiple times, and even sighed and sounded frustrated when unable to draw certain parts to her liking. Furthermore, it was evident from CF's behavior and comments that she was not used to objectively and reasonably examining her self-criticisms and

defending herself against her own harsh self-criticisms. However, when given time to think, self-reflect, and attempt to think objectively and reasonably, CF was successfully able to do so, which are promising signs that she has it within her to increase her self-compassion.

An analysis of CF's drawing infers that CF is concerned with expressing and communicating herself and making social contact, as can be inferred from the wide open eyes she's drawn. The solemn and serious expression of the face also suggests of CF's dominant attitude and mood. The relatively big size of the drawing (covering most of the paper) may imply to CF's desire to be seen or noticed.

Analysis of Participant CF, Session 3

The third session aimed to further strengthen CF's self-compassion, with a focus on transforming the maladaptive and harsh self-critic to a constructive one. This was done by becoming mindful, listening to, and extending compassion to the self-critic and the criticized self. The activity then encouraged CF to envision, express artistically, and build a new relationship to the self-critic and between the self-critic and criticized self.

The session was successful, in that all the aforementioned goals were met by CF. First, CF was able to become mindful of, listen to, and understand her self-critic. CF could see that her self-critic has so far caused her to suffer, but that it has good intentions in wanting CF to be successful, strong, and better. CF was also able to do the same self-reflection with her criticized self, and realize that her criticized self is tired, upset, feeling bad, and essentially suffering under the self-critic's harsh-but-well-meaning treatment. CF was then able to envision a healthy relationship between her self-critic and criticized self and, with encouragement and help from the therapist, was able to think of ways through which she can achieve the relationship she wishes her self-critic and criticized part to have. These are all evidence that CF has the ability to strengthen her self-compassion and is slowly but surely doing so.

An analysis of CF's drawing again infers again that CF is comfortable with expressing her emotions, as can be seen from her comfortable use of colors. The obvious drawing of objects imply that CF is able to communicate her ideas well, as can also be seen from how she is able to express herself well verbally. The

layers of paint in the red background and tornado again infers to how CF can ruminate over a problem.

Analysis of Participant CF, Session 4

The fourth session's objective was to create an image which represents feelings of acceptance and compassion to the self. This aimed to further strengthen CF's self-compassion, by helping CF explore and become more open to the idea of giving self-compassion. This also included discussing the benefits of having self-compassion.

CF's drawing depicts her feelings when receiving compassion from an external source, which implies that CF is still having difficulty giving self-compassion; this is understandable as she is still new to the concept and had thought of an issue regarding giving self-compassion, which was thinking that having self-compassion equals to 'going easy on herself' and letting go of her high standards. However, the therapist and CF were able to discuss this, in which the therapist explained how self-compassion does not entail going easy on herself, but rather giving herself encouragement and support in a way that motivates and cheers her on, instead of berating or being harsh on herself to the point of upsetting her. The concept and benefits of self-compassion are thus explored, and CF's agreement with them and willingness to practice self-compassion are promising indicators that CF's self-compassion can increase further.

An analysis of CF's drawing again infers again that CF is comfortable with expressing her emotions, as can be seen from her use of colors. The obvious portrayal of flowers imply that CF is able to communicate her ideas well, as can also be seen from how she is able to verbally express herself well. CF choice of drawing living plants also again suggest of her desire to grow.

Analysis of Participant CF, Session 5

The fifth session's objective was to further strengthen CF's self-compassion by making CF practice being mindful of her current condition and then asking herself what she needs. In this way, CF is exercising her mindfulness and self-kindness, and ultimately her self-compassion.

CF showed many promising signs that her self-compassion is increasing, no matter how small. Through the session's activity, CF was successfully able to be mindful of her current condition, which was needing support and compassion, wanting to express her thoughts, and wanting to take a break from thinking about her stressors. Furthermore, CF was able to find ways in which she can give herself self-compassion by fulfilling those needs by herself, which were through writing and playing the piano. CF was also able to explore more benefits of self-compassion, which was that it can be especially helpful when no one else but CF herself is available to give support and compassion. Along with CF's more cheerful demeanor and comment that she wants to practice asking herself what she needs at the end of the session, these are all positive indicators that CF's self-compassion can continue to grow.

An analysis of CF's drawing again infers again that CF is comfortable with expressing her emotions, as can be seen from her liberal use of colors. The obvious portrayal of heart, clock, and stars imply that CF is able to communicate her ideas well, as can also be seen from how she is able to verbally express herself well.

Analysis of Participant CF, Session 6

The sixth session's aim was to further increase CF's self-compassion by encouraging her to view herself in a compassionate manner and extend compassion to herself in the future. This was done by instructing CF to draw her past, present and future through a caring and supportive perspective.

Showing that she had successfully met the objectives of the session, CF was able to think of things that she likes about herself and things she is proud of herself for, both in the past and in the present. CF was further able to compassionately wish for things in her future, and was even optimistic that she can achieve them. Furthermore, CF also shared that she believes she is getting better at giving self-compassion and that she enjoys it. All of this shows that CF continues to grow in self-compassion, and that she is promisingly making an effort to increase her self-compassion.

An analysis of CF's drawing again infers again that CF is comfortable with expressing her emotions, as can be seen from her liberal use of colors. The obvious portrayal of all the various symbols she painted implies that CF is able to

communicate her ideas well, as can also be seen from how she is able to verbally express herself well.

Analysis of Participant CF, Session 7

The seventh session's goals were to terminate, review, and evaluate, all of which were successfully met by CF and the therapist. The therapist managed to review the objectives of each session and review lessons regarding self-compassion, while CF was able to share lessons she had learned and insights she'd gained from participating in the art therapy program. CF showed that she has learned many things through the therapy, such as how to think mindfully, how to give herself self-compassion, about self-compassion itself, and that she enjoys art therapy. CF also expressed that she has gone through numerous positive changes since participating in the therapy. By thinking of and sharing these personal insights and lessons CF has shown that her self-compassion has improved since before she started the art therapy program and can even continue to improve. Thus, the therapy may be concluded as a success.