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Pathways to Adolescent Self-Esteem: The Mediating Role of Self-Compassion Between Self-Acceptance and Peer Support

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ABSTRACT

Adolescent self-esteem is a critical psychological construct that shapes mental health and Adolescent self-esteem is an important psychological construct associated with adolescents' psychological well-being and functioning. This study examined the structural relationships among self-acceptance, self-compassion, peer support, and self-esteem, with particular emphasis on the mediating role of self-compassion. Using a quantitative explanatory design, data were collected from 329 vocational high school students in South Solok Regency, West Sumatra, Indonesia, through cluster random sampling. Data were analyzed using Partial Least Squares–Structural Equation Modeling (PLS-SEM) with SmartPLS 4.0. The results showed that peer support significantly and positively predicted self-compassion (β = 0.543, $p < 0.001$) and self-esteem (β = 0.443, $p < 0.001$). Self-acceptance significantly predicted self-compassion (β = 0.277, $p < 0.001$), but did not have a significant direct effect on self-esteem (β = 0.056, $p = 0.187$). Self-compassion significantly and positively predicted self-esteem (β = 0.369, $p < 0.001$). Mediation analysis showed that self-compassion significantly mediated the relationship between peer support and self-esteem (β = 0.200, $p < 0.001$), indicating partial mediation, and fully mediated the relationship between self-acceptance and self-esteem (β = 0.102, $p < 0.001$). The model explained 59.0% of the variance in self-esteem ($R^2 = 0.590$). These findings highlight self-compassion as an important psychological mechanism linking both internal and interpersonal factors to adolescent self-esteem. The findings provide implications for school-based guidance and counseling programs that integrate self-compassion development with strategies for strengthening peer support.

INTRODUCTION

Adolescence is a challenging developmental period characterized by imbalances in the socioemotional system (Steinberg & Morris, 2001). Amidst this vulnerability, a healthy psychological state in adolescents is ideally characterized by positive self-esteem (Surzykiewicz et al., 2022). Conceptually, self-esteem refers to an individual's evaluation of themselves and the extent to which they believe they are valuable (Coopersmith, 1967). According to Kaur (2020), self-esteem reflects an individual's belief in their ability to face various challenges in life while also feeling worthy of happiness. Therefore, self-esteem plays a significant role in various aspects of an individual's life.

Low self-esteem in adolescents can negatively affect various aspects of life, ranging from decreased self-confidence to the emergence of psychological problems. Previous research has shown that low self-esteem is associated with various mental health problems (Bernard, 2013; Swann et al., 2007). Low self-esteem has also been associated with lack of motivation, depression, and suicidal thoughts (Neff, 2011). This is consistent with findings by Komarasasih and Suminar (2025), who reported that low self-esteem can trigger various problems among adolescents. Low self-esteem may result in feelings of insecurity (Rian & Putri, 2026), withdrawal from the social environment (Dwianda et al., 2026), and an increased risk of psychological disorders such as depression (Sari et al., 2026). Adolescents with low self-esteem may also frequently doubt their competencies, which can reduce

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their willingness to participate actively in the learning process and face potential challenges (Simbolon & Pasaribu, 2024).

Low self-esteem is also prevalent among adolescents in Indonesia. Nationally, approximately 14 million adolescents, equivalent to 35% of the Indonesian population aged 15 years and above, are reported to have low self-esteem (Silvi & Kardo, 2026). This finding is consistent with research by Utami and Astuti (2022), which showed that 83.01% of adolescents in Bogor Regency were in the low-to-moderate self-esteem category. Similar conditions have been found among more vulnerable adolescent groups, with 52.3% of adolescents living in orphanages in Padang City reporting low self-esteem (Febristi, 2020). A higher prevalence was reported in the school environment, where 90.2% of students in Jakarta were identified as having low self-esteem (Subu et al., 2022). Conversely, good self-esteem is associated with better academic achievement, as students with higher self-esteem are more capable of facing problems with an optimistic attitude, even when their academic abilities are average (Pratisca & Hariko, 2023). These findings indicate that low self-esteem remains a serious problem among Indonesian adolescents across various social contexts.

Various psychological factors contribute to the development of self-esteem, originating from both internal dynamics and interactions with the social environment (Rian & Putri, 2026). Self-acceptance, parenting styles, and peer influence are among the factors associated with self-esteem (Coopersmith, 1967). Bernard (2013) and Ryff (1989) further emphasized the significant relationship between self-acceptance and self-esteem. Stoic and Antika (2023) explained that self-compassion contributes to self-esteem, particularly by supporting optimism and positive self-evaluation. In addition, reciprocal peer support represents an important external factor that can strengthen adolescents' sense of self-worth (Shery et al., 2004). Social comparison and a supportive social environment that reinforces individual identity may also influence self-esteem (Cast & Burke, 2002). These perspectives suggest that self-acceptance, self-compassion, and peer support are important factors in the development of positive self-esteem.

Self-acceptance is an important psychological factor contributing to self-esteem. Research has shown that higher levels of self-acceptance are associated with higher self-esteem among adolescents (Alifia & Ruddin, 2025). Self-acceptance also plays an important role in adolescents' emotional well-being (Bernard, 2013). Through self-acceptance, adolescents may respond to experiences of hurt more adaptively and avoid becoming trapped in negative emotions that can undermine self-esteem (Wijaya & Trihastuti, 2025). Furthermore, self-acceptance enables adolescents to recognize and accept their strengths and limitations positively (Harahap et al., 2025), thereby developing more positive self-evaluations and a stronger belief that they are worthy of respect. Thus, self-acceptance can be considered an important foundation for the development of self-esteem (Oktaviani, 2019).

Another important internal factor is self-compassion. Self-compassion refers to an attitude of compassion toward oneself when experiencing failure, personal shortcomings, or unpleasant experiences (Neff, 2011). Individuals with high self-compassion tend to regulate negative emotions more adaptively and avoid excessive self-evaluation, enabling them to maintain a more positive view of themselves (Albrecht, 2021; Sun et al., 2016). Empirical findings also indicate that self-compassion is positively associated with self-esteem, with individuals reporting higher levels of self-compassion tending to demonstrate higher self-esteem (Rifai & Muslikah, 2025). Thus, self-acceptance and self-compassion represent important internal factors that may support the development of self-esteem in adolescents.

Furthermore, an important external factor influencing adolescent self-esteem is peer support (Ekasari & Andriyani, 2013). Peer social support refers to the presence of individuals of the same age who can be relied upon, respected, and cared for, and who provide adolescents with a sense of being loved, valued, and supported by their social environment (Murvi & Hariko, 2023). During adolescence, peers become an important source of social interaction because adolescents tend to

spend considerable time with their friendship groups. Support through social acceptance, attention, and positive interactions can help adolescents develop more positive self-esteem (Coopersmith, 1967; Husna & Hariko, 2025; Shery et al., 2004). Conversely, experiences of rejection or insufficient peer support may lead to negative self-evaluations and lower self-esteem (Asyia et al., 2022). Empirical findings show that peer support contributes positively to self-esteem, with adolescents receiving higher levels of peer support tending to report higher self-esteem (Wulandari & Wijayanti, 2023).

Importantly, previous studies suggest interconnected relationships among these three psychological factors. Peer support has been found to increase self-compassion among adolescents (Handraina & Hariko, 2026; Surasa & Murtiningsih, 2021), while self-compassion may also contribute to more positive self-acceptance (Handraina & Hariko, 2026; Indrawati & Kaloeti, 2022). At the same time, self-compassion plays an important role in increasing self-esteem (Holas et al., 2023), while peer support also contributes significantly to the development of adolescent self-esteem (Rifai & Muslikah, 2025; Wulandari & Wijayanti, 2023). These findings suggest that self-compassion may function as a psychological mechanism through which self-acceptance and peer support are associated with adolescents' self-esteem.

Although research on adolescent self-esteem has advanced considerably, previous studies have largely focused on direct relationships between variables or examined individual influencing factors separately. In reality, the development of self-esteem is a complex process involving interactions between internal and external factors. Research integrating self-acceptance, self-compassion, and peer support into a single structural model of adolescent self-esteem remains limited. In particular, the mediating role of self-compassion in explaining how self-acceptance and peer support relate to self-esteem has not been sufficiently explored. Support from peers and acceptance of oneself may not necessarily translate into positive self-esteem when adolescents continue to engage in excessive self-criticism and self-judgment when facing failure. Therefore, examining the mediating role of self-compassion is important for gaining a deeper understanding of the psychological mechanisms underlying the development of adolescent self-esteem.

This study aims to test a structural model explaining the relationships among self-acceptance, self-compassion, peer support, and self-esteem in adolescents. Specifically, this study examines the direct effects of self-acceptance, self-compassion, and peer support on self-esteem and investigates the mediating role of self-compassion in the relationships between self-acceptance and self-esteem and between peer support and self-esteem.

This study is expected to contribute empirically to the literature on factors associated with adolescent self-esteem and to clarify the psychological mechanisms underlying its development. Partial Least Squares–Structural Equation Modeling (PLS-SEM) was employed because this approach allows complex relationships among variables, including direct and mediating effects, to be examined simultaneously. The findings are also expected to provide a basis for developing intervention strategies to support adolescents' psychological and academic well-being and to strengthen the implementation of school-based guidance and counseling services. Based on this discussion, the proposed research model and hypotheses are presented in Figure 1.

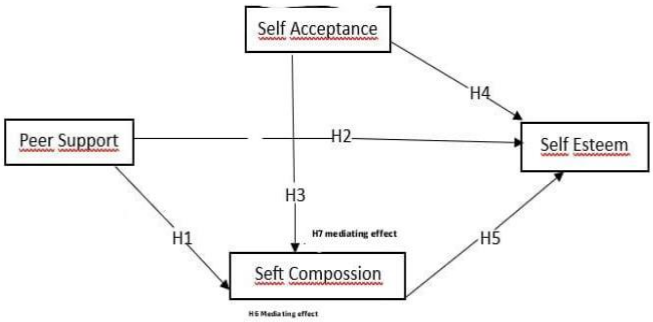

Figure 1. Hypothesis Model

METHODS

Research Design

This study employed a quantitative approach with an explanatory research design. The quantitative approach was chosen because the study aimed to systematically measure and test the relationships among the research variables and generate generalizable findings (Sugiyono, 2013). The study examined the relationships among the independent variables, namely self-acceptance and peer support; the mediating variable, self-compassion; and the dependent variable, self-esteem.

The study was designed to test seven hypotheses covering both direct and indirect effects among the research variables. Self-compassion was positioned as a mediating variable and was

Table 1. Respondent Demographics

Demographic Characteristics	Frequency (n)	Percentage (%)
Gender		
Male	135	41.03
Female	194	58.97
Family Status		
Biological child	327	99.40
Stepchild	1	0.30
Adopted child	1	0.30
Parental Status		
Both parents alive	291	88.45
One parent deceased	22	6.69
Both parents deceased	0	0.00
Parents divorced	16	4.86
Father's Education		
Elementary school	76	23.10
Junior high school	81	24.62
Senior high school	153	46.50
Diploma (D3)	5	1.52
Bachelor's degree (S1)	14	4.26
Master's degree (S2)	0	0.00
Mother's Education		
Elementary school	70	21.28
Junior high school	87	26.44
Senior high school	158	48.02
Diploma (D3)	2	0.61
Bachelor's degree (S1)	17	5.17
Master's degree (S2)	0	0.00
Doctoral degree (S3)	0	0.00
Father's Occupation		
Civil servant	8	2.43
Private-sector employee	4	1.22
Fisherman	0	0.00
Farmer	15	4.56
Daily laborer (construction/factory)	15	4.56
Driver (public transportation, motorcycle taxi, truck, etc.)	9	2.74
Small trader (stall, street vendor, etc.)	11	3.34
Entrepreneur/business owner	15	4.56
Indonesian National Armed Forces/Police	3	0.91
Migrant worker	0	0.00
Unemployed	0	0.00
Other	0	0.00
Parents' Monthly Income		
Below IDR 1,500,000	12	3.65
IDR 1,500,001–3,000,000	289	87.84
IDR 3,000,001–5,000,000	28	8.51
Above IDR 5,000,000	0	0.00

hypothesized to mediate the effects of self-acceptance and peer support on self-esteem among adolescent vocational high school students in South Solok Regency.

Participants and Procedure

The population of this study consisted of vocational high school (SMK) students in South Solok Regency, West Sumatra Province. This population was selected because vocational high school students generally fall within the adolescent age range of 15–18 years, which represents a critical developmental period for the formation of self-esteem. Both public and private vocational high schools in South Solok Regency were included in the study population.

The sampling technique used was cluster random sampling, with classes serving as the sampling units. This technique was selected because the study population was distributed across schools and naturally organized into classes in different locations within South Solok Regency. Cluster random sampling enabled the researchers to randomly select classes from the participating vocational high schools, after which all students in the selected classes were invited to participate (Sugiyono, 2018).

The sample size was considered adequate for PLS-SEM. Based on the 10-times rule, the minimum sample size can be estimated from the maximum number of structural paths directed at a single endogenous construct. In this model, self-esteem receives three direct paths from self-acceptance, peer support, and self-compassion. Thus, the minimum sample requirement based on this rule is 30 respondents (Hair et al., 2019). To obtain greater statistical power and representativeness, this study included 329 respondents, selected proportionally from randomly selected classes across vocational high schools in South Solok Regency.

The inclusion criteria were: (1) students enrolled in a vocational high school in South Solok Regency; (2) aged 15–18 years; (3) actively participating in school learning activities during the data collection period; and (4) willing to participate in the study and complete the questionnaire.

Data collection was conducted in several stages. First, the researchers obtained permission from the South Solok Regency Education Office and the principals of the vocational high schools serving as the research sites. Second, the researchers coordinated with guidance and counseling (BK) teachers at each school to determine the data collection schedule and selected classes. Third, the researchers explained the study objectives, participation procedures, and questionnaire completion instructions to the respondents, emphasizing that participation was voluntary and that the confidentiality of the collected data would be maintained. Fourth, the questionnaires were administered either in printed form or through Google Forms to students in the randomly selected classes. Finally, the completed questionnaires were checked for completeness before the data were processed and analyzed.

Table 2. Research Instruments

No.	Variable	Instrument	Aspects/Indicators	Number of Items
1	Self-Compassion	Self-Compassion Scale (SWD)	1. Self-Kindness 2. Self-Judgment 3. Common Humanity 4. Isolation 5. Mindfulness 6. Overidentification	26
2	Self-Acceptance	Bloom Self-Acceptance Scale (BSAS)	1. Confidence and ability to face life 2. Acceptance of one's strengths and weaknesses 3. Self-potential development 4. Freedom from feelings of inferiority 5. Acceptance by peers 6. Positive acceptance of criticism 7. Personal responsibility	31
3	Self-Esteem	Coopersmith Self-Esteem Inventory (CSEI)	1. Significance 2. Virtue 3. Power 4. Competence	44
4	Peer Support	Peer Support Perception Scale (PSPS)	1. Informational Support 2. Instrumental Support 3. Companionship Support 4. Esteem Support	20

Research Instruments

The research instruments consisted of psychological scales adapted into Indonesian. All instruments used a five-point Likert scale with the following response options: 5 = Very Appropriate, 4 = Appropriate, 3 = Fairly Appropriate, 2 = Inappropriate, and 1 = Very Inappropriate. The details of the research instruments are presented in Table 2.

The validity and reliability of the instruments were evaluated using the PLS-SEM measurement model based on three main criteria: (1) outer loadings of ≥ 0.70 for individual indicators; (2) Average Variance Extracted (AVE) of ≥ 0.50 as evidence of convergent validity; and (3) Composite Reliability (CR) of ≥ 0.70 as evidence of construct reliability (Hair et al., 2019; Fornell & Larcker, 1981).

Data Analysis

Data were analyzed using Partial Least Squares–Structural Equation Modeling (PLS-SEM) with SmartPLS version 4. The PLS-SEM analysis was conducted in two stages.

First, the measurement model (outer model) was evaluated by assessing convergent validity, discriminant validity, and construct reliability. Convergent validity was assessed based on outer loadings and Average Variance Extracted (AVE), while discriminant validity was assessed using the Fornell–Larcker criterion and the Heterotrait–Monotrait (HTMT) ratio. Construct reliability was evaluated using Composite Reliability (CR) and Cronbach's alpha (Hair et al., 2019).

Second, the structural model (inner model) was evaluated to test the proposed hypotheses. Hypothesis testing was conducted using the bootstrapping procedure with 5,000 subsamples to obtain the path coefficients, t-statistics, and p-values for each structural relationship. The mediating role of self-compassion in the relationships between self-acceptance and self-esteem and between peer support and self-esteem was assessed using the indirect effects in PLS-SEM. A mediation effect was considered statistically significant when the confidence interval (CI) of the indirect effect did not include zero (Hair et al., 2019; Ramayah et al., 2018).

In addition, the level of self-esteem among vocational high school students in South Solok Regency was described using descriptive statistics, including frequency distributions and percentages based on predetermined scale-score categories.

RESULTS AND DISCUSSION

Results

Outer Model

The measurement model was evaluated to assess the validity and reliability of the constructs in the research model. Convergent validity was assessed based on indicator outer loadings and Average Variance Extracted (AVE), while discriminant validity was assessed using the Fornell–Larcker criterion and the Heterotrait–Monotrait (HTMT) ratio. Construct reliability was evaluated using Composite Reliability (CR) and Cronbach's alpha (Hair et al., 2019; Hair & Alamer, 2022). Figure 2 presents the results of the measurement model evaluation.

Convergent Validity

Convergent validity was assessed based on the outer loading values of the indicators. According to Hair et al. (2021), an indicator is considered to meet the convergent validity criterion when its outer loading is ≥ 0.70, indicating that the indicator adequately represents its respective latent construct. The results of the convergent validity assessment are presented in Table 3.

As shown in Table 3, all indicators have outer loading values above 0.70. These results indicate that all indicators meet the required convergent validity criteria and adequately represent their respective constructs. Therefore, all indicators were retained for subsequent analysis, including structural model and hypothesis testing.

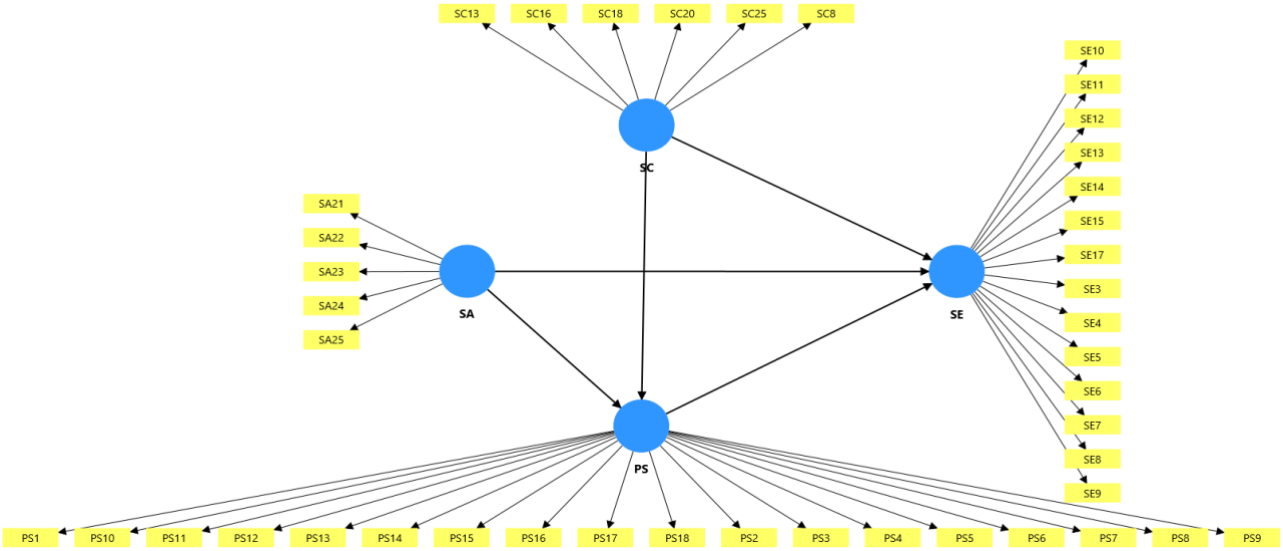

Figure 2. External Evaluation of the Research Model

Discriminant Validity

Discriminant validity was assessed to ensure that each construct was empirically distinct from the other constructs in the research model. In this study, discriminant validity was evaluated using the Fornell–Larcker criterion and the Heterotrait–Monotrait (HTMT) ratio. According to Afthanorhan et al. (2021), discriminant validity is established when the square root of the Average Variance Extracted (AVE) for each construct is greater than its correlations with the other constructs. For the HTMT criterion, a value below 0.90 is generally considered to indicate adequate discriminant validity, while a more conservative threshold of 0.85 may also be applied (Hair et al., 2021). The results based on the Fornell–Larcker criterion are presented in Table 4, while the HTMT results are presented in Table 5.

The results based on the Fornell–Larcker criterion indicate that the square root of the AVE for each construct is greater than its correlations with the other constructs. Thus, all constructs meet the Fornell–Larcker criterion for discriminant validity and demonstrate adequate empirical distinctiveness.

As shown in Table 5, all HTMT values between constructs are below the threshold of 0.90, ranging from 0.437 to 0.737. The HTMT values are 0.438 for the relationship between peer support and self-acceptance, 0.664 between peer support and self-compassion, and 0.737 between peer support and self-esteem. Furthermore, the HTMT values are 0.544 between self-acceptance and self-compassion, 0.437 between self-acceptance and self-esteem, and 0.712 between self-compassion and self-esteem.

These findings confirm that all constructs demonstrate adequate discriminant validity based on the HTMT criterion. Therefore, the measurement model satisfies the requirements for discriminant validity, indicating that the constructs measure empirically distinct concepts and can be retained for subsequent structural model analysis.

Reliability

Reliability testing was conducted to assess the internal consistency of the indicators within each construct. According to Hair et al. (2021), a construct is considered reliable when its Cronbach's alpha and Composite Reliability values exceed 0.70. The results of the reliability assessment are presented in Table 6.

The results indicate that all constructs have Cronbach's alpha and Composite Reliability values above the recommended threshold of 0.70. Specifically, Cronbach's alpha values range from 0.893 to 0.959, while Composite Reliability (rho_C) values range from 0.921 to 0.963. These findings

Table 3. Convergent Validity Test Results

Variable	Indicator	Outer Loading	Decision
Peer Support	PS1	0.771	Valid
	PS10	0.768	Valid
	PS11	0.801	Valid
	PS12	0.801	Valid
	PS13	0.732	Valid
	PS14	0.764	Valid
	PS15	0.709	Valid
	PS16	0.717	Valid
	PS17	0.724	Valid
	PS18	0.704	Valid
	PS2	0.730	Valid
	PS3	0.752	Valid
	PS4	0.838	Valid
	PS5	0.781	Valid
	PS6	0.770	Valid
	PS7	0.809	Valid
	PS8	0.765	Valid
	PS9	0.771	Valid
Self-Acceptance	SA21	0.805	Valid
	SA22	0.861	Valid
	SA23	0.852	Valid
	SA24	0.887	Valid
	SA25	0.778	Valid
Self-Compassion	SC13	0.817	Valid
	SC16	0.815	Valid
	SC18	0.861	Valid
	SC20	0.847	Valid
	SC25	0.725	Valid
	SC8	0.799	Valid
Self-Esteem	SE10	0.754	Valid
	SE11	0.785	Valid
	SE12	0.778	Valid
	SE13	0.783	Valid
	SE14	0.791	Valid
	SE15	0.726	Valid
	SE16	0.756	Valid
	SE17	0.791	Valid
	SE18	0.738	Valid
	SE19	0.754	Valid
	SE27	0.714	Valid
	SE3	0.803	Valid
	SE4	0.725	Valid
	SE5	0.797	Valid

confirm that all constructs demonstrate satisfactory internal consistency and are reliable for subsequent structural model and hypothesis testing.

Inner Model

Structural model evaluation (inner model) was conducted to assess the relationships among the constructs in the proposed research model. The evaluation included the assessment of the coefficient of determination (R^2) to determine the proportion of variance in the endogenous constructs explained by their predictor constructs. Hypothesis testing was then performed using the bootstrapping procedure with 5,000 subsamples to assess the significance and strength of the hypothesized relationships based on path coefficients, t-statistics, and p-values (Hair et al., 2021).

Table 4. Discriminant Validity Results Based on the Fornell–Larcker Criterion

Construct	Peer Support	Self-Acceptance	Self-Compassion	Self-Esteem
Peer Support	0.762			
Self-Acceptance	0.408	0.838		
Self-Compassion	0.656	0.498	0.807	
Self-Esteem	0.708	0.420	0.687	0.768

Table 5. Discriminant Validity Results Based on the HTMT Criterion

Construct	Peer Support	Self-Acceptance	Self-Compassion	Self-Esteem
Peer Support	—			
Self-Acceptance	0.438	—		
Self-Compassion	0.664	0.544	—	
Self-Esteem	0.737	0.437	0.712	—

Table 6. Results of Variable Reliability Test

Construct	Cronbach's Alpha	Composite Reliability (rho_A)	Composite Reliability (rho_C)
Peer Support	0.957	0.959	0.961
Self-Acceptance	0.893	0.895	0.921
Self-Compassion	0.910	0.913	0.929
Self-Esteem	0.959	0.960	0.963

R-Square

The coefficient of determination (R^2) was assessed to determine the proportion of variance in each endogenous construct explained by its predictor constructs (Hair et al., 2021). Higher R^2 values indicate greater explanatory power of the structural model. The results of the R^2 assessment are presented in Table 7.

As shown in Table 7, the R^2 value for Self-Compassion is 0.494, indicating that 49.4% of the variance in self-compassion is explained by self-acceptance and peer support, while the remaining 50.6% is explained by factors outside the research model.

The R^2 value for Self-Esteem is 0.590, indicating that 59.0% of the variance in self-esteem is explained by self-acceptance, peer support, and self-compassion. The remaining 41.0% is attributable to other factors not included in the model.

Based on the commonly used guidelines for PLS-SEM, R^2 values of 0.590 for self-esteem and 0.494 for self-compassion indicate moderate explanatory power. These findings suggest that the structural model provides a moderate level of explanatory power for both endogenous constructs.

Hypothesis Testing

Evaluation of the structural relationships among the constructs was conducted using the bootstrapping procedure in SmartPLS 4.0 with 5,000 subsamples. Hypothesis testing was based on the direction and magnitude of the path coefficient, with statistical significance determined by a *t*-statistic > 1.96 and a *p*-value < 0.05 (Hair et al., 2021). The results showed that four direct-effect hypotheses were supported, while one direct-effect hypothesis was not supported. Both indirect-effect hypotheses were statistically significant. The results of the hypothesis testing are presented in Table 8.

The results indicate that peer support has a positive and significant effect on self-compassion ($\beta = 0.543$, $t = 11.706$, $p < 0.001$). Peer support also has a positive and significant direct effect on self-esteem ($\beta = 0.443$, $t = 7.107$, $p < 0.001$). These findings indicate that adolescents who perceive greater support from their peers tend to report higher levels of self-compassion and self-esteem.

Self-acceptance has a positive and significant effect on self-compassion ($\beta = 0.277$, $t = 6.458$, $p < 0.001$). However, the direct effect of self-acceptance on self-esteem is not statistically significant (β

Table 7. R-Square Value

Endogenous Construct	R^2	Adjusted R^2
Self-Compassion	0.494	0.491
Self-Esteem	0.590	0.586

Table 8. Hypothesis Test Results

Relationship	Original Sample (O)	Sample Mean (M)	STDEV	t-Statistic	p-Value	Decision
Direct Effects						
Peer Support → Self-Compassion	0.543	0.546	0.046	11.706	<0.001	Supported
Peer Support → Self-Esteem	0.443	0.443	0.062	7.107	<0.001	Supported
Self-Acceptance → Self-Compassion	0.277	0.277	0.043	6.458	<0.001	Supported
Self-Acceptance → Self-Esteem	0.056	0.055	0.042	1.319	0.187	Not Supported
Self-Compassion → Self-Esteem	0.369	0.370	0.059	6.198	<0.001	Supported
Indirect Effects						
Peer Support → Self-Compassion → Self-Esteem	0.200	0.202	0.036	5.540	<0.001	Supported
Self-Acceptance → Self-Compassion → Self-Esteem	0.102	0.103	0.026	3.932	<0.001	Supported

= 0.056, t = 1.319, p = 0.187). Thus, the direct-effect hypothesis regarding the relationship between self-acceptance and self-esteem is not supported.

Furthermore, self-compassion has a positive and significant effect on self-esteem (β = 0.369, t = 6.198, $p < 0.001$). This finding indicates that higher levels of self-compassion are associated with higher levels of adolescent self-esteem.

The mediation analysis shows that the indirect effect of peer support on self-esteem through self-compassion is positive and significant (β = 0.200, t = 5.540, $p < 0.001$). Because the direct effect of peer support on self-esteem remains significant, self-compassion partially mediates the relationship between peer support and self-esteem.

Similarly, the indirect effect of self-acceptance on self-esteem through self-compassion is positive and significant (β = 0.102, t = 3.932, $p < 0.001$). Because the direct effect of self-acceptance on self-esteem is not significant, while its indirect effect through self-compassion is significant, self-compassion fully mediates the relationship between self-acceptance and self-esteem.

Overall, the findings demonstrate that self-compassion serves as an important mediating mechanism in the structural model. While self-acceptance does not directly predict self-esteem, its relationship with self-esteem operates through self-compassion. In contrast, peer support contributes to self-esteem both directly and indirectly through self-compassion.

Discussion

The findings provide empirical support for six of the seven hypotheses examined in this study. The results indicate that adolescent self-esteem is associated with both external and internal psychological factors. Peer support has a significant direct relationship with self-esteem and self-compassion, while self-compassion is positively associated with self-esteem and functions as a mediating mechanism in the relationships between peer support, self-acceptance, and self-esteem. In contrast, self-acceptance does not have a significant direct relationship with self-esteem. This pattern suggests that self-acceptance alone may not be sufficient to strengthen adolescents' self-esteem and that its contribution may depend on the development of a more adaptive way of relating to oneself, particularly through self-compassion.

The positive relationship between peer support and self-esteem is consistent with Coopersmith's (1967) view that self-esteem develops through social experiences involving acceptance, respect, affection, and recognition from significant others. During adolescence, peers

become increasingly important sources of social interaction and evaluation. Experiences of being accepted, valued, and supported by peers can provide adolescents with positive interpersonal feedback that contributes to more favorable self-evaluations. Previous studies have similarly demonstrated that peer support is associated with more positive self-esteem among adolescents (Rif'ati et al., 2018; Satria & Kurniawati, 2024; Mardiyah et al., 2025). Thus, the present finding reinforces the importance of adolescents' peer environments in the development of their sense of self-worth.

Peer support was also found to be positively associated with self-compassion. This finding suggests that supportive peer relationships may provide an interpersonal context in which adolescents can develop more compassionate attitudes toward themselves. When adolescents experience acceptance and emotional support from peers, they may be less likely to perceive difficulties and failures as evidence of personal inadequacy. Instead, supportive social experiences may facilitate more adaptive responses to negative experiences. This interpretation is consistent with Neff's (2003) conceptualization of self-compassion, which emphasizes self-kindness, common humanity, and mindfulness as mechanisms that enable individuals to respond to personal difficulties without excessive self-criticism. Previous research has likewise indicated that supportive social environments are associated with the development of self-compassion (Millfayetty, 2024).

The significant positive relationship between self-compassion and self-esteem further supports the importance of how adolescents respond to their own weaknesses, failures, and negative experiences. Adolescents who are able to treat themselves with kindness, recognize that difficulties are part of the shared human experience, and maintain balanced awareness of negative emotions may be less vulnerable to harsh self-evaluation. Consequently, they may maintain a more positive sense of self-worth. This finding is consistent with previous studies reporting a positive association between self-compassion and self-esteem (Stoic & Antika, 2023; Fitriani & Widjanarko, 2026). The present study extends these findings by positioning self-compassion not only as a direct correlate of self-esteem but also as a potential mechanism connecting social and intrapersonal factors to adolescent self-esteem.

An important finding concerns the non-significant direct relationship between self-acceptance and self-esteem. Although self-acceptance significantly predicted self-compassion, its direct relationship with self-esteem was not statistically significant. This finding differs from studies that have reported a positive direct association between self-acceptance and self-esteem. One possible explanation is that self-acceptance and self-esteem represent related but conceptually distinct psychological processes. Ryff (1989) conceptualizes self-acceptance as the ability to acknowledge and accept oneself, including one's strengths and limitations, whereas self-esteem involves a more evaluative judgment of one's own worth. Thus, an adolescent may be able to acknowledge and accept personal characteristics without necessarily evaluating the self as highly valuable.

This finding may also be understood within the developmental context of adolescence. Adolescents remain highly responsive to interpersonal evaluation, social comparison, peer acceptance, and feedback from their social environment (Harter, 2013). Consequently, accepting one's own characteristics may not immediately translate into a stronger sense of self-worth when adolescents continue to rely substantially on interpersonal experiences and social evaluation. The present finding therefore suggests that the relationship between self-acceptance and self-esteem may be more complex than a simple direct association.

In contrast, self-acceptance significantly predicted self-compassion. This finding suggests that accepting one's strengths and limitations may provide an important foundation for developing a compassionate orientation toward the self. When adolescents acknowledge their imperfections without excessive rejection or judgment, they may become more capable of responding to failure and personal shortcomings with kindness and balanced awareness. This interpretation is consistent

with the conceptual relationship between self-acceptance and self-compassion, in which acceptance of one's limitations can reduce excessive self-criticism and facilitate more adaptive self-treatment.

The mediation findings provide an important contribution to understanding these relationships. Self-compassion significantly mediated the relationship between peer support and self-esteem, while the remaining significant direct effect of peer support on self-esteem indicates partial mediation. This means that peer support may contribute to self-esteem through two complementary pathways. First, supportive peers may directly strengthen adolescents' feelings of acceptance, belonging, and social value. Second, peer support may foster self-compassion, which subsequently contributes to more positive self-evaluation. Therefore, the effect of peer support on self-esteem is not exclusively interpersonal or exclusively intrapersonal; rather, it appears to operate through both pathways.

Self-compassion also fully mediated the relationship between self-acceptance and self-esteem. The absence of a significant direct relationship between self-acceptance and self-esteem, combined with the significant indirect effect through self-compassion, suggests that self-acceptance may contribute to self-esteem primarily by facilitating a compassionate way of relating to oneself. In this process, accepting one's strengths and limitations may be transformed into a more positive self-evaluation when adolescents are able to respond to personal shortcomings and failures with self-kindness rather than self-criticism. This finding highlights self-compassion as an important psychological mechanism linking an individual's acceptance of the self to their broader sense of self-worth.

Taken together, these mediation findings provide a more nuanced explanation of adolescent self-esteem formation. Social support and self-acceptance do not operate independently of adolescents' internal psychological processes. Instead, the findings suggest that supportive interpersonal experiences and acceptance of the self may contribute to the development of self-compassion, which subsequently supports more positive self-esteem. This interpretation is consistent with Neff's (2003) framework, which positions self-compassion as an adaptive way of responding to personal difficulties and negative self-evaluations.

The model explained 59.0% of the variance in self-esteem ($R^2 = 0.590$), while self-acceptance and peer support explained 49.4% of the variance in self-compassion ($R^2 = 0.494$). These values indicate that the proposed model has moderate explanatory power for the endogenous constructs. Nevertheless, 41.0% of the variance in self-esteem remains unexplained by the variables included in the model. Other factors, such as parenting, academic achievement, social comparison, body image, school climate, or broader psychological characteristics, may therefore contribute to adolescent self-esteem and should be considered in future research.

Overall, this study contributes to the literature by integrating self-acceptance, self-compassion, and peer support within a single structural model of adolescent self-esteem. The main contribution lies in demonstrating that self-compassion functions as a psychological mechanism linking both interpersonal and intrapersonal factors to self-esteem. The findings indicate that strengthening adolescent self-esteem may require more than simply increasing peer support or encouraging self-acceptance. School-based guidance and counseling interventions may also benefit from explicitly developing self-compassion, particularly adolescents' abilities to respond to failure, personal limitations, and negative experiences with self-kindness, balanced awareness, and a sense of common humanity.

Implication

Theoretically, this study contributes to the literature on adolescent development by demonstrating the mediating role of self-compassion in the relationships between self-acceptance, peer support, and self-esteem. The findings indicate that self-acceptance is not necessarily associated with higher self-esteem through a direct pathway, but its contribution may operate through self-

compassion. Practically, the findings provide an empirical basis for guidance and counseling teachers and school counselors to develop interventions that address the psychological processes underlying adolescent self-esteem. Guidance and counseling services should not focus solely on increasing self-esteem directly, but should also facilitate self-compassion, self-acceptance, and positive peer interactions through individual counseling, group guidance, group counseling, and peer-support activities. Such interventions may help adolescents respond more adaptively to personal shortcomings and failures while creating a supportive and inclusive social environment within vocational high schools.

Limitation

This study has several limitations that should be considered when interpreting its findings. First, the cross-sectional design involved data collection at a single point in time; therefore, the findings cannot establish strong causal relationships or capture changes in the relationships among variables over time. Second, the participants were limited to vocational high school students in South Solok Regency, West Sumatra, so the generalizability of the findings to adolescents from other educational settings, geographical regions, and social contexts should be considered with caution. Third, the structural model explained 59.0% of the variance in adolescent self-esteem, indicating that 41.0% of the variance remained unexplained by the variables included in the model. Future research should therefore employ longitudinal designs and more diverse samples while expanding the structural model to include other relevant factors, such as parenting styles, body image, academic achievement, social comparison, school climate, and social media use.

CONCLUSION

This study demonstrates that self-compassion plays an important mediating role in the relationships among self-acceptance, peer support, and self-esteem among vocational high school students in South Solok Regency. Peer support is positively associated with self-esteem both directly and indirectly through self-compassion, indicating a partial mediation effect. Self-acceptance is positively associated with self-compassion but does not have a significant direct relationship with self-esteem; instead, its relationship with self-esteem is fully mediated by self-compassion. Self-compassion is also positively associated with self-esteem, highlighting its important role in the psychological processes underlying adolescent self-esteem. Overall, self-acceptance, self-compassion, and peer support explain 59.0% of the variance in self-esteem. The main contribution of this study is the empirical evidence that self-compassion serves as a psychological mechanism linking both self-acceptance and peer support to adolescent self-esteem. These findings suggest that efforts to strengthen adolescent self-esteem should not focus solely on self-acceptance or peer support but should also facilitate the development of self-compassion. In practice, guidance and counseling teachers can integrate self-compassion development and peer-support enhancement into school-based counseling programs to support adolescents' psychological well-being and self-esteem.

REFERENCES

Afthanorhan, A., Ghazali, P. L., & Rashid, N. (2021). Discriminant validity: A comparison of CBSEM and consistent PLS using Fornell & Larcker and HTMT approaches. *Journal of Physics: Conference Series*, *1874*(1), 12085. https://doi.org/10.1088/1742-6596/1874/1/012085

Albrecht, K.-A. (2021). *Self-compassion's protective role on well-being during the transition to post-secondary*.

Alifia, N. P., & Ruddin, F. (2025). *Hubungan Persepsi Citra Tubuh Di Media Sosial Dan Penerimaan Diri Terhadap Self-Esteem Pada Siswi Sma X*. Universitas Muhammadiyah Surakarta.

Asyia, A. D. N., Sinurat, G. D. N., Dianto, N. I. S. A., & Apsari, N. C. (2022). Pengaruh Peer-Group

Terhadap Perkembangan Self-Esteem Remaja The Influence of Peer Groups on the Development of Adolescent Self-Esteem. *Jurnal Penelitian Dan Pengabdian Kepada Masyarakat (JPPM)*, *3*(3), 147–159. https://doi.org/10.24198/jppm.v3i3.49286

Bernard, M. (2013). *The Strength of Self-Acceptance: Theory, Practice and Research*. https://doi.org/10.1007/978-1-4614-6806-6

Cast, A. D., & Burke, P. (2002). A theory of self-esteem. *Social Forces*, *80*(3), 1041–1068. https://doi.org/10.1353/sof.2002.0003

Coopersmith, S. (1967). *The antecedents of self-esteem*. San Francisco: freeman and company.

Dwianda, F., Yendi, F. M., Putra, A. H., & Ardi, Z. (2026). Hubungan Self-Esteem dengan Kecenderungan Social Anxiety pada Siswa SMA. *RIGGS: Journal of Artificial Intelligence and Digital Business*, *5*(1 SE-Articles), 14548–14555. https://doi.org/10.31004/riggs.v5i1.8154

Ekasari, A., & Andriyani, Z. (2013). Pengaruh peer group support dan self-esteem terhadap resilence pada siswa SMAN Tambun Utara BekasiI. *SOUL: Jurnal Ilmiah Psikologi*, *6*(1), 1–20.

Febristi, A. (2020). Hubungan faktor individu dengan self esteem (harga diri) remaja panti asuhan di Kota Padang tahun 2019. *Menara Ilmu: Jurnal Penelitian Dan Kajian Ilmiah*, *14*(1). https://doi.org/10.33024/jkm.v6i1.2308

Fitriani, A. A., & Widjanarko, M. (2026). Hubungan antara Self-esteem dan Self-compassion dengan Resiliensi pada Mahasiswa Tahun Pertama Perkuliahan. *SENTRI: Jurnal Riset Ilmiah*, *5*(2), 1134–1146. https://doi.org/10.55681/sentri.v5i2.5606

Ghozali, I., & Latan, H. (2014). *Partial Least Squares Konsep, Metode dan Aplikasi Menggunakan Program WARPPLS 4.0*.

Hair, J., & Alamer, A. (2022). Partial Least Squares Structural Equation Modeling (PLS-SEM) in second language and education research: Guidelines using an applied example. *Research Methods in Applied Linguistics*, *1*(3), 100027. https://doi.org/10.1016/j.rmal.2022.100027

Hair, J. F., Risher, J. J., Sarstedt, M., & Ringle, C. M. (2019). When to use and how to report the results of PLS-SEM. *European Business Review*, *31*(1), 2–24. https://doi.org/10.1108/EBR-11-2018-0203

Hair Jr, J. F., Hult, G. T. M., Ringle, C. M., Sarstedt, M., Danks, N. P., & Ray, S. (2021). Evaluation of reflective measurement models. In *Partial least squares structural equation modeling (PLS-SEM) using R: A workbook* (pp. 75–90). Springer. https://doi.org/10.1007/978-3-030-80519-7_4

Handraina, T., & Hariko, R. (2026). Role peer support and gratitude on the resilience of adolescent flood victims: Failure of self-compassion mediation. *Counsenesia Indonesian Journal Of Guidance and Counseling*, *7*(1), 241–257. https://doi.org/10.36728/cijgc.v7i1.6577

Harahap, M., Sukmawati, I., Hariko, R., & Febriani, R. D. (2025). Layanan Bimbingan Kelompok Menggunakan Teknik Problem Solving Dalam Meningkatkan Penerimaan Diri Siswa. *Edu Research*, *6*(4), 968–975.

Harter, S. (2013). The development of self-esteem. In *Self-esteem issues and answers* (pp. 144–150). Psychology Press.

Holas, P., Kowalczyk, M., Krejtz, I., Wisiecka, K., & Jankowski, T. (2023). The relationship between self-esteem and self-compassion in socially anxious. *Current Psychology*, *42*(12), 10271–10276. https://doi.org/10.1007/s12144-021-02305-2

Husna, S. B., & Hariko, R. (2025). Hubungan Dukungan Sosial Teman Sebaya Dengan Konsep Diri Siswa. *Pendas: Jurnal Ilmiah Pendidikan Dasar*, *10*(03), 230–243.

Indrawati, N. D., & Kaloeti, D. V. S. (2022). Pengaruh pelatihan self-compassion secara daring untuk meningkatkan penerimaan diri pada mahasiswa dengan fobia spesifik ringan. *Jurnal Empati*, *11*(3), 192–198. https://doi.org/10.14710/empati.2022.34470

Komarasasih, B., & Suminar, D. R. (2025). Meningkatkan Self-Esteem Siswa yang Pernah Putus Sekolah dengan Rational Emotive Behavior Therapy. *Jurnal Riset Dan Inovasi Pembelajaran*, *5*(2), 776–

785. https://doi.org/10.51574/jrip.v5i2.3550
Mardiyah, A., Ermawan, N. K., Aulia, S., & Marpaung, H. M. (2025). Peran Dukungan Teman Sebaya Dalam Pembentukan Rasa Percaya Diri Remaja Di MAN 2 Medan. *Jurnal Ilmu Bimbingan Dan Konseling*, *2*(3), 108–113.
Millfayetty, S. (2024). *Pengaruh Dukungan Sosial terhadap Resiliensi Melalui Self-Compassion pada Orangtua yang Memiliki Anak Autis*. Universitas Medan Area.
Murvi, I. M., & Hariko, R. (2023). Descriptive of peer social support of recipient students KIP. *Current Issues in Counseling*, *3*(1), 36–42.
Neff, K. (2003). Self-compassion: An alternative conceptualization of a healthy attitude toward oneself. *Self and Identity*, *2*(2), 85–101. https://doi.org/10.1080/15298860309032
Neff, K. D. (2011). Self-compassion, self-esteem, and well-being. *Social and Personality Psychology Compass*, *5*(1), 1–12. https://doi.org/10.1111/j.1751-9004.2010.00330.x
Oktaviani, M. A. (2019). Hubungan penerimaan diri dengan harga diri pada remaja pengguna Instagram. *Psikoborneo: Jurnal Ilmiah Psikologi*, *7*(4), 549–556. https://doi.org/10.30872/psikoborneo.v7i4.4832
Pratisca, S., & Hariko, R. (2023). Self Esteem of Junior High School Students. *International Journal of Multidisicplinary Research and Growth Evalution*, *4*(5), 814–818.
Ramayah, T., Cheah, J., Chuah, F., Ting, H., & Memon, M. A. (2018). Partial least squares structural equation modeling (PLS-SEM) using smartPLS 3.0. *An Updated Guide and Practical Guide to Statistical Analysis*, *1*(1), 1–72.
Rian, Y., & Putri, A. (2026). Studi Kasus Pada Siswa Dengan Low Self-Esteem Di Smp Negeri 2 Kota Pontianak. *Pendas : Jurnal Ilmiah Pendidikan Dasar*, *11*(1), 55–65.
Rif'ati, M. I., Arumsari, A., Fajriani, N., Maghfiroh, V. S., Abidi, A. F., Chusairi, A., & Hadi, C. (2018). Konsep dukungan sosial. *Jurnal Psikologi Universitas Airlangga*, *7*, 1–25.
Rifai, N. R., & Muslikah. (2025). Hubungan Antara Dukungan Teman Sebaya Dan Self-Compassion Terhadap Self-Esteem Di Sekolah Menengah Pertama. *FOKUS: Kajian Bimbingan Dan Konseling Dalam Pendidikan*, *8*(4), 412–425.
Rosenberg, M. (1965). Rosenberg self-esteem scale (RSE). *Acceptance and Commitment Therapy. Measures Package*, *61*(52), 18. https://doi.org/10.1037/t01038-000
Ryff, C. D. (1989). Happiness is everything, or is it? Explorations on the meaning of psychological well-being. *Journal of Personality and Social Psychology*, *57*(6), 1069. https://doi.org/10.1037/0022-3514.57.6.1069
Sari, C. A., Pramesti, D., & Fatimah, F. S. (2026). *The relationship between self-esteem and depression among middle adolescents*. *5*(2), 196–201. https://doi.org/10.56922/mhc.v5i2.3319
Satria, I. G. I. J., & Kurniawati, M. (2024). Pengaruh dukungan sosial teman sebaya terhadap kesejahteraan psikologis (studi pada mahasiswa perantau). *Innovative: Journal Of Social Science Research*, *4*(6), 2764–2775.
Shery, M., Msw, & Macneil, C. (2004). Peer Support: What Makes It Unique? *Int J Psychosoc Rehab*, *10*.
Silvi, Y., & Kardo, R. (2026). The Effect of Bullying on Self-Esteem of Grade X Students. *Journal of Practice Learning and Educational Development*, *6*(1), 465–470.
Simbolon, I., & Pasaribu, A. G. (2024). Pelayanan Pastoral Konseling Dalam Pengentasan Low Self Esteem Peserta Didik Kelas 6 SD Negeri Sipaholon. *Al-Furqan: Jurnal Agama, Sosial, Dan Budaya*, *3*(4), 2016–2043.
Steinberg, L., & Morris, A. S. (2001). Adolescent development. *Annual Review of Psychology*, *52*(1), 83–110. https://doi.org/10.1146/annurev.psych.52.1.83
Stoic, V. B., & Antika, E. R. (2023). Pengaruh self-compassion terhadap self-esteem pada siswa di SMAN 1 Semarang. *QUANTA: Kajian Bimbingan Dan Konseling Dalam Pendidikan*, *7*(3), 80–91. https://doi.org/10.22460/quanta.v7i3.4203

Subu, M. A., Waluyo, I., Al-Yateem, N., Riana, I., Dias, J. M., Saifan, A., Rahman, S. A., Ahamed, S. I., Jumiati, J., & Ahmed, F. R. (2022). Smartphone addiction and self-esteem among Indonesian teenage students. *2022 IEEE International Conference on Digital Health (ICDH)*, 104–106. https://doi.org/10.1109/ICDH55609.2022.00024

Sugiyono, D. (2013). *Metode penelitian pendidikan pendekatan kuantitatif, kualitatif dan R&D*.

Sugiyono, M. (2018). Penelitian Kuantitatif, Kualitatif, dan R&D [Quantitative Research, Qualitative and R&D]. *Alfabeta Bandung*.

Sun, X., Chan, D. W., & Chan, L. (2016). Self-compassion and psychological well-being among adolescents in Hong Kong: Exploring gender differences. *Personality and Individual Differences*, *101*, 288–292. https://doi.org/10.1016/j.paid.2016.06.011

Surasa, I. N., & Murtiningsih, M. (2021). Hubungan dukungan sosial teman sebaya terhadap harga diri remaja di smpn 258 jakarta timur. *Borneo Nursing Journal (Bnj)*, *3*(1), 14–22.

Surzykiewicz, J., Skalski, S. B., Sołbut, A., Rutkowski, S., & Konaszewski, K. (2022). Resilience and regulation of emotions in adolescents: Serial mediation analysis through self-esteem and the perceived social support. *International Journal of Environmental Research and Public Health*, *19*(13), 8007. https://doi.org/10.3390/ijerph19138007

Swann, W., Chang-Schneider, C., & Mcclarty, K. (2007). Do People's Self-Views Matter? *American Psychologist*, *62*, 84–94. https://doi.org/10.1037/0003-066X.62.2.84

Utami, T., & Astuti, Y. S. (2022). The relationship between self-esteem and depression in adolescent victims of cyberbullying: A cross-sectional study. *Indonesian Journal of Global Health Research*, *4*(4), 867–876.

Wijaya, T. A., & Trihastuti, M. C. W. (2025). Penerimaan Diri Dan Keterbukaan Diri Mahasiswa. *Psiko Edukasi*, *23*(1), 39–57. https://doi.org/10.25170/psikoedukasi.v23i1.7069

Wulandari, A., & Wijayanti, F. (2023). Dukungan teman sebaya dengan harga diri pada remaja. *Health Sciences and Pharmacy Journal*, *7*(1), 16–22. https://doi.org/10.32504/hspj.v7i1.801