



Effectiveness of the Compassion-Focused Therapy on Self-Criticism and Marital Intimacy among Couples

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Quantitative Study

Abstract

Background: The present study aimed to investigate the effectiveness of compassion-focused therapy (CFT) on self-criticism and marital intimacy among couples. A quasi-experimental pretest-posttest design with a control group was implemented.

Methods: The research method was quasi-experimental with pretest-posttest and control group design. The population consisted of all couples that volunteered to participate in the study in Mashhad, Iran, in 2021, and the sample included 30 individuals (15 people in each group). The participants were selected using the volunteer sampling technique and were randomly assigned to the experimental and control groups. The experimental group received 8 sessions of the CFT intervention, while the control group did not receive any psychotherapeutic intervention. The instruments implemented in the study included the CFT package, the Levels of Self-Criticism Scale (LOSC), and the Marital Intimacy Scale. The data of the study were analyzed using descriptive statistics, while the inferential data were analyzed by the multivariate analysis of covariance using SPSS software.

Results: There were significant differences between the experimental and control groups in terms of self-criticism ($F = 11.03, P = 0.003$) and marital intimacy ($F = 11.91, P = 0.003$). In other words, implementing the CFT intervention reduced self-criticism and increased marital intimacy among couples.

Conclusion: It was concluded that counselors, therapists (in the fields of couple therapy, family, and individual) and other specialists in mental health could implement the CFT intervention to reduce self-criticism and increase marital intimacy among couples.

Keywords: Couples therapy methods; Female; Humans; Interpersonal relations; Male; Marital therapy; Psychological tests; Psychometrics; Self-disclosure

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Introduction

Intimacy is a component of interpersonal relationships that includes either emotional or physical forms (Wong, Hall, Justice, & Hernandez, 2020). Intimacy means a close and personal relationship where an individual feels a sense of belonging to another individual (the other parties to a relationship) (Mashek & Aron, 2004). An actual intimate relationship is formed when there is the capacity for dialogues and mutual interactions, clarity, and sensitivity towards the other party's needs (Mashek & Aron, 2004). Maintaining intimacy in relationships for longer periods requires convenient emotional and interpersonal awareness concerning the other party to a relationship (Aronson, 2003). Underdeveloped intimacy skills result in the formation of quick and extremely close bonds that break down the boundaries of relationships and make it difficult to maintain them (Bershad, Haber, & Prentice-Hall, 1997).

Self-criticism refers to people's analyses of their performance in a negative way that disrupts their identities (Blatt & Luyten, 2011). Self-criticism is among the most prevalent properties of psychological impairments (Gilbert, McEwan, Gibbons, Chotai, Duarte, & Matos, 2012). Shame and self-criticism are related to a wide range of psychological issues like various types of depression, substance abuse, diet disorders, social anxiety, and psychosis (Gilbert & Irons, 2008). Thus, almost 70% of various auditory hallucinations have critical and adversarial content (Gilbert, 2010). Self-criticism in the relationships between married couples predicts reduced collaboration and agreement and increased criticism (Santor, Pringle, & Israeli, 2000). Self-criticism is a defense mechanism that has particular functions and complexities in the compassion-focused therapy (CFT) intervention (Gilbert, 2010).

Various solutions have been proposed to increase marital intimacy. One of them is to help married couples respect and love themselves and reduce their self-criticism. The CFT intervention dates back to thousands of years ago and has integrated various scientific approaches like (among others) evolutionary psychology, emotional neuroscience, attachment theory, behavioral sciences, cognitive-behavioral therapy, and the exercises of mindfulness and compassion to understand humans' conditions (Kolts, Hayes, & Gilbert, 2016). Something that every approach to psychotherapy shares is that it should be performed sympathetically, compassionately, respectfully, kindly, and in a supporting manner (Gilbert, 2010). The CFT is defined as being sensitive to suffering to alleviate and prevent it (Kolts et al., 2016). Self-compassion is an approach where a positive emotional attitude is adopted toward oneself, and a judgment-free stance is taken against personal weaknesses and shortcomings and the difficult moments of life (Zhang et al., 2019). Compassion has six main components where 3 components indicate positive aspects (kindness or compassion for oneself, self-consciousness, and shared humanity), while the remaining 3 components point to negative aspects (self-judgment, isolation, and over-differentiation) (Gilbert, 2009). The fear of compassion (self-compassion and receiving compassion from others) is related to self-criticism, depression, anxiety, and stress (Gilbert et al., 2012).

Based on the above discussions and the necessity of working on married couples, it is still unknown if the CFT intervention is effective on marital intimacy and couples' self-criticism. The current study aimed to answer this question.

Methods

The current study used a quasi-experimental with pretest-posttest and control group design. The population included all couples who volunteered to take part in the

study and fulfilled the inclusion criteria. Then, 30 participants called by announcement in Mashhad, Iran, in 2021, were selected using the volunteer sampling method and were randomly assigned into an experimental group (15 participants) and a control group (15 participants). Inclusion criteria were: 1) high scores on the Levels of Self-Criticism Scale (LOSC) and low scores on the Marital Intimacy Scale, 2) lack of involvement in other psychological treatments and interventions, 3) being at least 18 years old, and 4) volunteering to take part in the study. Exclusion criteria were: 1) absence in more than two treatment sessions, and 2) receiving other psychological interventions.

Procedures: The participants took the pretest where the LOSC and the Marital Intimacy Scale were implemented. Then, the experimental group received 8 ninety-minute sessions of the CFT intervention in the group format, while the control group was placed on the waiting list. The posttest was given after the CFT sessions were over. Table 1 shows the summary of compassion-oriented treatment sessions.

Table 1. Summary of compassion-oriented treatment sessions

Therapy summary	Session title	Session
First	Getting to know the basics of therapy	The first session aims to provide a general knowledge of the therapy basics. It includes the pre-test, the introduction of members and therapist, determination of therapy schedules, and broad familiarity with essentials of the compassion-focused therapy, exploring the notions of self-criticism, marital intimacy, and compassion.
Second	Getting to know the components of compassion and self-criticism	The second session aims to provide an overview of the components of compassion and self-criticism. It explains compassion components and investigates the compassion of group members and the characteristics of compassionate individuals.
Third	Teaching self-compassion	The third session seeks to teach self-compassion to the group members. It boosts the acceptance and warmth toward oneself, understanding and comprehension of others' problems, and attention to one's mental health.
Fourth	Getting to know oneself and factors influencing self-criticism	The fourth session seeks to explain further the self and the factors influencing self-criticism. It aims to encourage the members to know themselves and explore their personalities as individuals with or without compassion, develop self-compassion values and sympathy toward others, accept errors and mistakes, and forgive oneself for committing these mistakes.
Fifth	Further expanding compassion in life	The fifth session aims to revisit and expand compassion in the daily life of the members. It involves mental development, the notion of compassion, teaching understanding, accepting issues and likely changes, and confronting the challenges raised by these changes.
Sixth	Teaching compassion expression methods toward oneself and others	The sixth session teaches the compassion expression methods toward oneself and others. The session includes exercises to establish compassionate mental structures and use this concept in the daily lives of the members toward oneself and others.
Seventh	Investigating compassion expression methods	The seventh session examines the compassion expression methods. It teaches writing compassionate letters to oneself and others and recording and writing down actual compassion-focused situations and how the individual acts.
Eighth	Evaluating and employing compassion, discussion, and conclusion	The eighth session aims to evaluate and employ the function of compassion. It guides the group members to use the notion of compassion in an applied way in daily life. It also provides a discussion, conclusion, questions, and answers with the group members.

Ethical issues: The participants provided informed consent in accordance with the procedures outlined by the institutional review board; they were informed that they could withdraw from the experiment at any time. The control group received the intervention after the termination of the research.

LOSC: The instrument was developed by Thompson and Zuroff (2004) and includes 22 items to investigate internal self-criticism and comparative self-criticism. The reliability and validity of the scale were investigated by Thompson and Zuroff (2004) and Yamaguchi and Kim (2013), and its Cronbach’s alpha coefficient was determined at 0.90. Moreover, the scale was translated into Persian by Shariati et al. (2017), and its reliability and validity were investigated (Cronbach’s alpha coefficient = 0.87).

The Marital Intimacy Scale: The instrument was developed by Walker and Thompson (1983) and consists of 17 items that investigate intimacy among married couples. Walker and Thompson (1983) evaluated the reliability and validity of the scale, and its Cronbach’s alpha coefficient was determined at the range of 0.91-0.97. Moreover, Sanai Zaker et al. (2000) translated the instrument into Persian and investigated its reliability and validity with the Cronbach’s alpha coefficient equal to 0.96.

The CFT intervention package and analyzing method: The instrument was developed according to Gilbert’s theory (Gilbert, 2010). The obtained results were analyzed using the multivariate covariance analysis in SPSS software (version 26, IBM Corporation, Armonk, NY, USA).

Results

The descriptive analysis of the demographic variables of the study showed that the mean and standard deviation (SD) of age of the participants in the experimental and control groups were 34.30 ± 5.84 and 34.80 ± 6.23 , respectively. The mean and SD values of marital intimacy and self-criticism obtained in the two groups are presented in table 2.

Two assumptions including the covariance matrix equality and the normality of the variables were investigated using Box’s M test and Shapiro-Wilk test, respectively, and the results confirmed them ($P < 0.05$). Thus, the multivariate covariance analysis was found to be a convenient analytical tool in the current study. The results of the multivariate covariance analysis obtained for the experimental and control groups are as follows: Wilk’s lambda: value = 0.686, statistics = 5.73, assumption degree of freedom (df) = 2, error df = 25, $P = 0.009$, eta-squared = 0.314.

According to findings, a significant difference was observed between the components and intimacy in terms of linear combination. In other words, the CFT intervention had a significant influence on the composite dependent variable (intimacy and self-criticism) in the experimental group.

According to table 3, a significant difference was observed between the experimental and control groups in terms of the mean values obtained for marital intimacy and self-criticism.

Table 2. The mean and standard deviation (SD) of marital intimacy and self-criticism

Variable		Posttest		Pretest	
		Mean \pm SD	Participants	Mean \pm SD	Participants
Marital intimacy	Experimental	36.47 \pm 16.72	15	54.40 \pm 17.48	15
	Control	53.67 \pm 7.79	15	60.13 \pm 13.11	15
Self-criticism	Experimental	46.87 \pm 18.02	15	63.20 \pm 17.93	15
	Control	62.13 \pm 9.87	15	65.53 \pm 15.33	15

SD: Standard deviation

Table 3. A comparison of the two groups in terms of intimacy and self-criticism

Source	Variable	SS	df	MS	F	P-value	Effect size
Group	Marital intimacy	1580.07	1	1580.07	11.91	0.002	0.314
	Self-criticism	1586.12	1	1586.12	11.03	0.003	0.298

SS: Sum of squares; df: Degree of freedom; MS: Mean squares

In other words, the effect sizes of marital intimacy and self-criticism in the experimental group were 0.314 and 0.298, respectively, and they were considered high values.

Discussion

The aim of this research was to study the effectiveness of CFT on self-criticism and marital intimacy of couples. The findings of the current study were in line with the findings of Brennan et al. (2014), Boersma et al. (2015), Beaumont et al. (2016), Irons and Lad (2017), Cuppage et al. (2018), Krieger et al. (2019), Rayner et al. (2021), and Petrocchi et al. (2020), which showed the effectiveness of the CFT intervention on reducing self-criticism.

Boersma et al. (2015) believed that using the set of skills presented in the CFT approach reduced the rates of shame, self-criticism, and isolation. Moreover, Irons and Lad (2017) found that the CFT and cognitive-behavioral approaches reduced anxiety, depression, avoidant behavior, and post-traumatic disturbing thoughts, while it increased self-compassion (Irons & Lad, 2017). Tirch (2010) believed that the CFT intervention reduced self-criticism and psychological issues in people by increasing their self-consciousness, unconditional acceptance, sympathy, and constant attention to internal feelings. Brennan et al. (2014) found that the CFT technique made people aware of the aggressive and violent nature of self-criticism and let them face the disturbing events of their lives more gently and approvingly by using the techniques of self-consciousness and empowerment (Brennan, Emmerling, & Whelton, 2014). Neff and McGehee (2010) believed that the CFT intervention could encourage people to be more courageous and stop the faulty cycle of self-criticism. Diedrich et al. (2014) found that self-compassion regulated emotions and feelings and reduced negative emotions and feelings. Gilbert (2014) believed that self-compassion resulted in supportiveness, better understanding, kindness, and more helpfulness to others (Gilbert, 2014), and such factors enhanced the quality of interpersonal relationships and strengthened their intimacy (Bagarozzi, 2014). According to Gilbert, some actions and components of the CFT intervention like tolerating disturbances and taking care of well-being in addition to the skills adopted in the model including imagery, argument, and compassionate attention reduced clients' self-criticism (Gilbert, 2014).

The findings concerning the effectiveness of the CFT intervention on marital intimacy were in line with Lotfi et al. (2021), Shojaei Vazhnany et al. (2020), Araghian et al. (2020), Zahedi (2019), and Yousefi and Karimnezhad (2018), which confirmed the effusiveness of the CFT intervention on increasing marital intimacy.

Lotfi et al. (2021) found that adopting the solutions proposed in the CFT approach increased distinction and reduced marital conflicts among married couples. Shojaei Vazhnany et al. (2020) showed that implementing the techniques of the CFT intervention improved intimacy among couples and regulated their emotions. Araghian et al. (2020) concluded that the CFT approach had a significant effect on increasing the mental health components of families like the quality of interpersonal

relationships and the toleration of disturbance. Zahedi (2019) showed that the CFT-based strategies reduced marital conflicts and increased intimacy. Yousefi and Karimnezhad (2018) believed that the approach improved family relationships and increased forgiveness and intimacy among married couples. Jacobson et al. (2018) concluded that people with lower levels of self-compassion prioritized their needs over that of their spouses, and this caused dissatisfaction with marital relationships and increased conflicts in them. Yarnell and Neff (2013) concluded that compassionate attitudes caused people to consider others' needs and requests, and this reduced interpersonal conflicts and increased intimacy among human beings. Gilbert (2014) pointed to actions like the lack of judgment, sympathy, sensitivity, and empathy as the components of the CFT approach that could be combined with various skills like argument, attention, and compassionate behavior to increase intimacy among people (Gilbert, 2014). Those who have self-criticism do not love themselves and have an external locus of control correlating negatively with various aspects of psychopathology including interpersonal problems (Bagherian, Ahmadzadeh, Baghbanian, 2009).

Conclusion

Self-compassion helps people to learn loving each other and especially themselves. The limitations of this study were not selecting samples randomly, lack of comparison group, lack of follow-up phase, and using self-report instruments. We suggest the future researchers to carry out a study without these limitations to give us more precise results.

Conflict of Interests

Authors have no conflict of interests.

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