



Effectiveness of Acceptance and Commitment Therapy on Marital Boredom and Self-Compassion in Emotionally Divorced Women: A Quasi-Experimental Study

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Abstract

Introduction: Marital boredom and emotional divorce cause a gradual reduction in the emotional attachment of couples which is associated with feelings of alienation, apathy, and indifference between couples and replacement of positive emotions with negative ones. The present study aimed to investigate the effectiveness of acceptance and commitment therapy (ACT) on marital boredom and self-compassion in emotionally divorced women.

Methods: This quasi-experimental study was conducted using a pretest-posttest control group design. Forty women were selected using convenience sampling and were randomly divided into intervention (n=20) and control (n=20) groups. The participants filled the Emotional Divorce Questionnaire, the Marital Boredom Scale, and the Self-Compassion Scale in the pre-test and post-test. The intervention group received eight 90-minute sessions of ACT. Data were analyzed using a one-way analysis of covariance.

Results: Results suggested that ACT improved marital boredom ($F=372.714$ and $P<0.001$) and self-compassion ($F=353.178$ and $P<0.001$) in the post-test. The mean \pm SD post-test scores of marital boredom and self-compassion in the experimental group were 43.30 ± 4.45 and 42.95 ± 4.75 , respectively, which improved compared to the post-test of the control group.

Conclusions: Based on the results, holding ACT workshops may exert beneficial effects on reducing marital conflicts.

INTRODUCTION

Marriage meets many personal and social needs of men and women in their social and physical relations and other social customs. In other words, a healthy and constructive family with warm relationships and intimate interpersonal relations accelerates family members' development and progress. On the contrary, marital conflicts are mainly rooted in couples' mindset about each other and their relationship [1]. In the family system, members are connected to each other through strong, enduring, and emotional reciprocity and attachments. The intensity of their interests and

attachments may diminish over time, but survive throughout life. Marriage is a social institution where the function and effect of intimacy and developed social relations are manifested. It aims to meet couples' needs; in case of failing to do so through a positive solution, they may experience stress, failure, frustration, anger, and eventually mental problems [2]. This is how emotional divorce seeps into marriage. Statistics in Iran suggest that the national divorce rate has risen sharply and one in three marriages end in divorce. There is a stage before legal divorce called emotional divorce when

couples live together with little or no verbal and emotional connection between them [3, 4].

Divorce may root in marital boredom. Marital boredom and emotional divorce cause a gradual reduction in emotional attachment of couples which is associated with feelings of alienation, apathy and indifference between couples and replacement of positive emotions with negative ones [5]. In a disappointed marriage, one or both couples experience detachment from their spouse along with reduced interest and mutual relationship and they have significant concerns about the growing deterioration of their relationship and the progression to separation and divorce. Marital boredom is a gradual decrease in emotional attachment which includes reduced attention to the spouse, emotional alienation, and increased feeling of apathy and indifference towards the spouse [6].

Self-compassion reduces emotional divorce in women. Studies have reported self-compassion to be a strong predictor of mental health. It is negatively correlated with self-criticism, depression, anxiety, rumination, and thought suppression [7]. In addition, it is positively correlated with life satisfaction and social skills [8]. Self-compassion is a human trait consisting of kindness, fair judgment and connected emotions. It helps people find hope and meaning in life in the face of problems. It also refers to simply directing kindness toward oneself, openness to experience, and empathy for others' suffering [9, 10].

The growing trend of marital conflicts and emotional divorce and their negative impact on the mental health of couples, their children and the society encouraged researchers to seek strategies to strengthen marital relations and the foundation of the family [11]. A major strategy in this regard is acceptance and commitment [12]. ACT helps individuals to create a rich and meaningful life and to accept their suffering in life [13]. It is a behavioral therapy aiming to practice empirical avoidance and trying to control disturbing experiences. While being open to older clinical traditions and emphasizing patients' behavioral performance rather than the causation and psychological resilience, ACT has shown why it is detrimental to fuse empirical and cognitive avoidance [14, 15]. Glassman et al. [16] believed that ACT trains clients to accept their thoughts and emotions, choose new paths in life, and take committed action. Six core processes, defined as the major ingredients of ACT, are expansion and acceptance, cognitive defusion, the observing self, contact and connection with the present moment, values clarification, and committed action [17]. Various studies have investigated the effectiveness of ACT in marital boredom and self-compassion in women [18-21].

Many couples never refer to a therapist or counseling centers in courts while suffering from various degrees of marital dissatisfaction and experiencing some sort of emotional divorce [4]. The impacts of marital dissatisfaction are more lasting than divorce, and extend to people who are close to couples as well as their acquaintances, especially children. Accordingly, this study aimed to effectiveness of acceptance and commitment therapy on marital boredom and self-compassion in emotionally divorced women.

METHODS

This quasi-experimental study was conducted using a pretest-posttest control group design. Statistical population consisted of all women experiencing emotional divorce visiting counseling centers of Ahvaz in 2021. A sample of 40 women (20 per group) were selected using convenience sampling from among those who met the inclusion criteria and then, they were randomly divided into intervention and control groups. In the present study 20 students included in each group by use of G-power software with an effect size of 1.81, a test power of 0.90, and $\alpha=0.05$ [22]. Inclusion criteria were giving informed consent to participate in the study, minimum junior high school education, age between 20 and 45, scoring above the mean score in emotional divorce and marital boredom scales and having a score lower than the mean score in self-compassion scale, not being divorced, absence of drug abuse, not participating in other therapy sessions and not receiving individual therapy or medication. Exclusion criteria were receiving concomitant psychological therapies, using psychiatric drugs, unwillingness to cooperate and continue the study, facing a severe stressful event and missing more than two therapeutic sessions. The study was approved by the Ethical Committee of Islamic Azad University-Ahvaz Branch (code: 950517294). For ethical considerations, the researchers received written consent from the participants for participation in the research.

Instrument

Emotional Divorce Questionnaire: The Emotional Divorce Questionnaire was developed by Razeghi. It is a 22-item survey scored on a 5-point scale (Always=4, Often=3, Sometimes=2, Rarely=1, and Never=0). The lowest and highest scores are 0 and 88. Those who score 40 and higher experience a more severe emotional divorce. To validate the emotional divorce questionnaire, Rashid and Moradi [23] used the content validity and factor validity. To examine the content validity, several faculty members of Psychology and Sociology Department of Bu-Ali Sina University reviewed the questionnaire to see whether the questions measure emotional divorce. Data proved that the questionnaire can measure emotional divorce. Factor

analysis of data suggested that the Emotional Divorce Questionnaire measures three main factors, namely the desire to separate, feeling of loneliness, and disgust. The authors reported the reliability of this tool as 0.98 [24]. In the present study, Cronbach's alpha coefficient was 0.91 for the questionnaire.

Marital Boredom Scale: The 20-item Marital Boredom Scale was developed by Paynes. This scale measures the level of frustration or lack of emotion towards the spouse as well as physical exhaustion (fatigue, lethargy and sleep disorder), emotional exhaustion (depression, hopelessness and feeling trapped), and mental exhaustion (worthlessness, frustration and anger towards spouse). It is scored on a 7-point Likert scale from Never=1 to Always=7. The participants score the frequency of each item in their marital life. Four items are inversely scored. The marital boredom scores range from 20 to 140, with scores higher than 60 indicating higher boredom. Rakhshany et al. [25] reported the reliability of this scale equal to 0.81 based on Cronbach's alpha coefficient. In the present

study, Cronbach's alpha coefficient was 0.86 for the scale.

Self-Compassion Scale: The Self-Compassion Scale was developed by Raes. It is a 12-item survey scored on a 5-point Likert scale from 1 to 5 (1=Strongly Disagree to 5=Strongly Agree). Scores range from 12 to 60 and the higher the score, the higher the self-compassion. In a study by Shahazi et al. [26] in Iran, first, the scale was translated into Persian and its validity and reliability were examined. The total reliability of the scale was 0.91 using Cronbach's alpha coefficient and its validity was significant at 0.001. In the present study, Cronbach's alpha coefficient was 0.87 for the scale.

Intervention program

The content of eight 90-minute ACT sessions according to Hayes et al. [27] is shown in Table 1. Following therapy sessions, the intervention and control groups completed the post-test under the same conditions. Then, a summary of therapy sessions was provided to the control group.

Table 1. The Content of Acceptance and Commitment Therapy Sessions [27]

Sessions	Content
1	Communicating and building good relations, concluding a medical contract and therapeutic alliance with clients, stating the rules, goals and number of treatment sessions, and conducting a pre-test in the first session.
2	Calling and discovering, trying to promote re-reading of couples' experiences consciously, encouraging clients to abandon ineffective strategies. Measuring and giving feedback.
3	Demonstrating conflict-inducing and distressing issues and focusing on resolving them, listening to and discovering clients' narratives of extant problems, collecting information about the history of original attachment style and their current relationship and controlling them.
4	Increasing knowledge about underlying emotions, and desire positions, identifying negative interaction cycles and painful aspects of participants' experiences, observing emotional processing style, and identifying intrapersonal and interpersonal issues. The walking metaphor, the mindful bus metaphor, and reviewing defusion construction.
5	Reviewing previous assignments, weakening conceptualized self-reliance, distinguishing the conceptualized self from the observing self, creating awareness about the observing self.
6	Reviewing assignments, facilitating the wants and needs for reconstruction, interacting new perceptions and creating new essential solutions.
7	Expressing the concept of values, objective and dreams.
8	Summarizing and concluding with the help of clients, performing post-test.

Statistical Analyses

In order to find the significant difference between the two groups, univariate analysis of covariance was used. Assumptions of ANCOVA were measured before analysis. Kolmogorov-Smirnov test and Levene's test were used to indicate the normal distribution of data. Data were analyzed in SPSS version 27. All statistical analyses were performed at the 0.05 level of significance.

RESULTS

In this study, 38% of participants were between 20 and 31 and 62% were between 32 and 45 years old. The mean ages of intervention and control groups were 32.77 and 33.19 respectively. Indicators of central tendency and dispersion and results of Kolmogorov-Smirnov test for marital boredom and self-compassion are provided. Table 2 presents the mean \pm SD of research

variables in the experimental and control groups in the pre-test and post-test.

In order to find the significant difference between the two groups, a one-way analysis of covariance was used. Assumptions of ANCOVA were measured before analysis. Results of the Kolmogorov-Smirnov test indicate the normal distribution of data in the pre-test and post-test for marital boredom and self-compassion ($P > 0.05$) and data were normally distributed when conducting the analysis of covariance.

In addition, to examine the homogeneity of variances (equality of variances in the intervention and control groups), the Levene's test was used which was $F=1.40$ and $P=0.254$ for marital boredom and $F=1.37$ and $P=0.262$ for self-compassion. The homogeneity of regression slopes assumption was met for marital boredom ($F=2.47$, $P=0.072$) and self-compassion ($F=2.05$, $P=0.118$). Analysis of covariance is applicable according to the results. The one-way analysis of

covariance after controlling the effect of pre-test was used to compare the intervention and control groups using post-test scores and to determine the effect of ACT on marital boredom and self-compassion in women experiencing emotional divorce visiting counseling centers in Ahvaz. Results are presented in Table 3.

As shown in Table 3, given the effect size estimate, 93% of marital boredom and 86% of self-compassion variables from the total variances of the intervention and control groups were due to the effect of the independent

variable (ACT). The power of the test was 1, which indicates the adequacy of the sample size. There was a significant difference in the pre-test and post-test scores of participants in marital boredom when the influence of the pre-test results was eliminated ($P < 0.001$). Therefore, the ACT proved effective in improving marital boredom. There was a significant difference in the pre-test and post-test scores of self-compassion when the influence of the pre-test results was eliminated ($P < 0.001$). Therefore, the ACT proved effective in improving self-compassion.

Table 2. The Results of the Descriptive Statistics for the Research Variables in the Pre-test, and Post-test

Variables / Phases		ACT	Kolmogorov-Smirnov test		Control	Kolmogorov-Smirnov test		P (between Groups)
		Mean ± SD	Z	P	Mean ± SD	Z	P	
Marital boredom								
	Pre-test	69.75 ± 2.02	0.145	0.093	70.60 ± 1.35	0.229	0.079	0.614
	Post-test	43.30 ± 4.28	0.135	0.200	70.45 ± 2.80	0.172	0.123	0.001
	P (within groups)	0.001	-	-	0.999	-	-	-
Self-compassion								
	Pre-test	22.40 ± 2.85	0.212	0.078	23.20 ±2.93	0.177	0.100	0.713
	Post-test	42.95 ±4.57	0.146	0.114	23.25 ± 2.61	0.148	0.200	0.001
	P (within groups)	0.001	-	-	0.999	-	-	-

P (between and within groups): t-test; P: z-test

Table 3. The Results of one-way analysis of covariance (ANCOVA) for Assessing the Group Differences in Terms of the Research Variables,

Variables	SS	df	MS	F	P	η^2	Power
Marital boredom	8733.37	2	4366.68	372.71	0.001	0.93	1.00
Self-compassion	5559.25	2	2779.62	173.36	0.001	0.86	1.00

SS: Sum of squares; MS: Mean squares

DISCUSSION

The present study aimed to investigate the effectiveness of ACT on marital boredom and self-compassion in emotionally divorced women. Results suggested that ACT proves effective in improving marital boredom and self-compassion. The first result indicated that ACT proves effective in improving marital boredom in women experiencing emotional divorce. This finding is consistent with the results of previous studies [20, 28]. Mahmoudpour et al. [20] reported that there was a significant reduction in the loneliness of divorced women who received the ACT intervention. Ghorbani Amir et al. [28] showed that ACT led to an increase in positive cognitive regulation, resilient, self-controlling, and a decrease in negative cognitive regulation in divorced women.

To explain this, marital boredom is the result of a set of unrealistic expectations of a spouse and marriage combined with the stresses, realities, and ups and downs in life. Boredom arises when one spouse does not value the relationship as much as the other and the most important needs of one of the parties are ignored. Here, emotional-marital satisfaction and intimacy fade and they do not want each other. Healthy relationships promote couples' health in marital life. On the other hand, ACT encourages women to connect with and be attracted to the real values of their lives. It helps women to imagine a more rewarding life despite unpleasant

thoughts and feelings; this mindset leads to a reduction in marital problems such as marital boredom [11].

The ACT helps women detach themselves from their thoughts and emotions in order to modify negative cognitions such as depression and reduce marital boredom. In this therapy, experiential avoidance creates a traumatic process that contributes to the development and spread of marital and family conflicts. When a spouse experiences marital boredom, he/she makes continuous and fruitless efforts to get rid of the situation. ACT targets these avoidances to create a fundamental reopening to make individuals experience rather than control or change the negative assessments of marital boredom in their lives [13]. Therefore, in ACT, women not only have a full experience of thoughts and emotions, but also allow their spouse to have such an experience in order to reduce their marital burnout and boredom. In addition, through acceptance and defusion practices, women learn to accept their spouse the way he is without judging, humiliating, insulting or comparing him.

In addition, teaching a new concept of curiosity used in ACT make spouses' relationships take on a new form; therefore, the treatment is effective in improving marital relations and reducing marital boredom. Through this mechanism of change, when values are defined for participants, they become important and personal to them [20]. Thus, the participants resolve conflicts and

avoid marital boredom in a more adaptive way, and consequently they better understand the importance of the relationship with their spouse in life.

Results indicated that the ACT improved self-compassion in women experiencing emotional divorce. This finding is consistent with the results of Roohi et al. [18]. To explain this, it is claimed that through awareness-based exercises, ACT creates the grounds for creative helplessness towards solutions used by the person in relation to their unpleasant thoughts and feelings. By ACT, researchers aim not to create the feeling of helplessness or belief in helplessness, rather to give up one's previous strategies used to control these thoughts and feelings. These situations pave the way for introducing acceptance as an alternative solution, and through acceptance, an opportunity is provided to the individual to pay attention to the important and valuable matters in life [21]. Results indicated that when women try to avoid or get rid of unwanted thoughts and feelings, they not only fail, but also suffer a lot due to experiencing marital conflicts. This helped clients to feel unpleasant thoughts and feelings instead of trying to control them, and doing so made those experiences seem less threatening. Expressing pure and impure suffering helped women blame themselves less and be kinder to themselves.

Women who receive ACT can improve their hope and resilience by promoting their problem-solving skills and self-awareness, increasing their meaning of life, and improving their level of adjustment, which will result in fewer marital conflicts [29]. On the other hand, studies suggest that people who experience positive emotions exhibit unusual, flexible, and creative patterns of thinking. Positive emotions increase the desire to have multiple choices in life and they create multiple behavioral choices for individuals. In addition, positive emotions build a flexible and extensive cognitive structure in individuals and improves their ability to integrate broad topics. Furthermore, using this practice, women realized that many sufferings occur because individuals see people through their own thoughts and feelings and consider those thoughts true [30]. Through acceptance, the individual tends to move in the direction of his/her values; instead of focusing on unsuccessful solutions, they turn to solution-based behaviors. The

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negative thought and judgments cycle is broken, which in turn improves their performance. Maintaining value-based behavior significantly increases self-compassion in these women.

Every study has limitations. This study was conducted on women experiencing emotional divorce visiting counseling centers in Ahvaz and therefore, caution should be exercised when attempting to generalize its results to other centers and cities. Self-report was another limitation in this study.

CONCLUSION

By providing optimistic concepts of life to emotionally divorced women, the therapeutic and educational ACT raises hope and resilience in women in the face of marital conflicts. It reduces their marital boredom and boosts their self-compassion. It is therefore recommended to provide this intervention along with other psychological interventions in order to reduce the psychological and physical burden of caring for women with marital conflict.

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AUTHOR CONTRIBUTION

All authors contributed equally in preparing all parts of the research.

CONFLICT OF INTERESTS

All the authors declare that they have no conflict of interest

ETHICAL CONSIDERATION

The written consent has been obtained from all research units. Also, the authors affirm their observance of ethical rules when processing the results of the studies.

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