

Comparing the effectiveness of pathological grief therapy with acceptance and commitment therapy on self-compassion in survivors of people who died with suicidal intent

Extended Abstract

Introduction

Introduction and Objective: Suicide survivors face an unexpected and possibly violent death at the same time as they lose their loved ones. Also, if survivors have seen the scene of the suicide or the body of the deceased or have heard details of the event from those who were present at the scene, this event will usually remain in their minds for a long time. On the other hand, the death of a loved one leads to feelings of loneliness and isolation from the surrounding environment. Self-compassion after loss is the empathetic behavior that an individual has with themselves and reminds survivors that pain and suffering are part of the life experiences of all humans and that the individual is not alone. One of these interventions that has recently been considered by researchers and is among the specific interventions that are effective in preventing the development of complex grief and other effects of grief in survivors is Acceptance and Commitment Therapy (ACT). The effectiveness of acceptance and commitment therapy on grief and bereavement is strongly influenced by cultural differences and religious issues, and caution should be exercised in generalizing it to other societies. A new treatment that has gained empirical evidence support is called pathological grief therapy. This treatment distinguishes between morbid grief and depression. The basic techniques for treating morbid grief are taken from interpersonal psychotherapy, cognitive-behavioral therapy, self-compassion training, and motivational interviewing. Therefore, this study aimed to compare the effectiveness of pathological grief therapy (CGT) and acceptance and commitment therapy (ACT) on self-compassion in survivors of suicide attempts in Kerman city.

Methodology

This quasi-experimental study was conducted with pre-test and post-test in two experimental groups and a control group. The statistical population included all suicide survivors in 1402, of which 30 people were selected by convenience sampling and divided into three groups of 10 people. The experimental groups underwent the therapeutic interventions of CGT and ACT, and the control group did not receive any intervention.

Discussion

The findings showed that both CGT and ACT had a significant effect on increasing self-compassion, but CGT with an effect size of 77% was more effective than ACT with an effect size of 51%..

Conclusion

CGT and ACT are effective in increasing self-compassion in suicide survivors. These results are consistent with previous research and emphasize the importance of ACT in improving quality of life and reducing symptoms of CGT. In CGT, especially in suicide survivors, individuals face intense feelings of guilt, shame, and anxiety. These feelings can increase self-criticism and reduce self-compassion, as survivors blame themselves for their loved one's death, and the struggle with blameful thoughts may continue. In such situations, not only is grief experienced in a more complex and intense way, but people are also unable to deal with their feelings appropriately and instead of supporting themselves, they punish themselves. Given that people in pathological grief, especially in grief from suicide, often experience intense feelings of guilt and self-blame, ACT therapy can

be an effective way to reduce this self-criticism. It helps survivors allow themselves to experience their feelings, but at the same time support themselves and show self-compassion instead of blaming themselves. Acceptance and commitment therapy can make a significant difference in the level of self-compassion. These positive effects on self-compassion indirectly lead to a reduction in symptoms of morbid grief and an improvement in the quality of life of suicide survivors. In other words, when an individual is able to accept and love themselves during the grieving process, this can help facilitate the process of psychological healing and reduce emotional suffering, thereby making a significant difference in the level of self-compassion. Finally, this study shows that increasing self-compassion can help facilitate the process of psychological healing in these individuals.

Keywords

morbid grief treatment, acceptance and commitment therapy, self-compassion, suicide survivors.

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