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To cite this article: Rozita Amani & Arjang Saberi Khosroshahi (2020): The Structural Model of Marital Quality Based on Secure Attachment Style through the Mediating Role of Self-Compassion, Resilience, and Perspective-Taking, The American Journal of Family Therapy, DOI: 10.1080/01926187.2020.1813653

To link to this article: https://doi.org/10.1080/01926187.2020.1813653

Published online: 01 Sep 2020.
The Structural Model of Marital Quality Based on Secure Attachment Style through the Mediating Role of Self-Compassion, Resilience, and Perspective-Taking

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ABSTRACT
The study aims at elaborating a structural model of marital quality based on secure attachment style with the mediating role of self-compassion, resilience, and dyadic perspective-taking. It was a correlational study with structural equation modeling. The population included couples referring to the cultural centers of 22 districts of Tehran, Iran, among whom, 300 were selected using cluster sampling. The results indicated that secure attachment style, self-compassion, resilience, and dyadic perspective-taking have a significant direct effect on the quality of marriage ($p < 0.05$), and self-compassion, resilience, and dyadic perspective-taking play a mediating role in the relationship between secure attachment and marital quality.

ARTICLE HISTORY
Received 7 May 2020
Revised 6 August 2020
Accepted 19 August 2020

KEYWORDS
Marital quality; secure attachment style; self-compassion; resilience; dyadic perspective-taking

Introduction
Marriage is a ritual bond between a man and a woman established through specific ordinances or customs in different countries and religions to form a family. Waring Edward (2013) expressed that marriage is the source of the family life cycle. Marital relationship seems to be a kind of intimate and deep social bond between husband and wife that can bring them happiness or deep suffering (Pourmohseni Koluri, 2014). Spouses’ competencies and skills in establishing positive interactions and productive management of conflicts are significantly associated with feelings of trust, love and affection, as well as marital quality (Cupach & Metts, 1994).

Marital quality is defined to be the couple’s mental evaluation from their marriage, which can include different aspects of the marital relationship. The quality and survival of a marital relationship depends on elements that strengthen and perpetuate this relationship and create understanding (Spanier & Lewis, 1980). Glenn (1990) discusses two schools of thought
related to conceptualization and measurement of marital quality. The first is the school of individual feelings, which considers the marital quality as the couples’ feelings about their marriage and how they evaluate their relationship, while showing interest in defining single-criterion indicators and self-report. The second is adjustment school that, more or less, considers marital quality as an objective and a two-way feature of the relationship, and to measure it, considers concepts such as companionship, communication and conflict, and pays attention to multi-criteria behavioral indicators. Thus, taken as a multidimensional concept, marital quality includes not only the intrapersonal characteristics, but also the interpersonal characteristics of the spouses.

A review of literature on marital relations indicates that there are found two major orientations to the conceptualization and practical application of marital quality. In other words, marital quality is clearly considered as a concept that consists of two components including intrapersonal and interpersonal features of spouses. There are found many approaches including attachment theory to explain the marital quality related problems (Gholizadeh & Azizi, 2017).

Bowlby (1988) believed that the quality of an individual’s repeated interactions with primary caregivers forms his/her internal working model. The theory of attachment assumes that internal working models that form during childhood are very stable and affect adolescence and youth relationships in a way that orientate his/her experiences, perceptions, and attitudes (Marchand, 2004). Hazan and Shaver (1994) believed that attachment is a system that manifests itself in the adulthood. They defined three main patterns of adult attachment styles including secure, anxious/ambivalent, and avoidant. People with secure attachment style are more likely to consider themselves lovely and sociable, declare their helplessness and ask for support, and constructively regulate their negative feelings during the problem solving process.

Although many studies have shown that people’s attachment styles correlate with the quality of their marital relationship (e.g. Begum & Kumar, 2014; Hollist & Miller, 2005; Knoke et al., 2010; Sandberg et al., 2017; Scheeren et al., 2014), very few studies have addressed the pathway of this relationship and mediating variables through which attachment styles affect the couples’ quality of life. For example, Scheeren et al. (2014) found that attachment style is related to couples’ quality of life through conflict resolution. Givertz et al. (2013) also believe that attachment styles affect marital quality through interpersonal trust, claiming that people with insecure attachment experience a lower level of interpersonal trust than those with secure attachment, in turn, leading to lower marital quality. Of other mediating variables between attachment styles and marital outcomes are self-
compassion (Terzi, 2015), resilience (Bradley & Hojjat, 2017), and perspective-taking (Corcoran & Mallinckrodt, 2000).

Self-compassion means the ability to have a suitable distance from emotions in a way that the individual can fully experience them, but has a conscious view of them (Neff, 2003). Self-compassion is the acceptance of those aspects of the life that the individual is not interested in (Galhardo et al., 2011). According to the Neff and Beretvas (2013), people with high self-compassion were described by their partners as being significantly more affectionate, considerate, and warmer. Yarnell and Neff (2013) stated that low self-compassionate individuals fixate on their negative emotions which, in turn, may cause them to show more aggressive behaviors to anyone including their partners. The likelihood of compromising in times of conflict is higher among self-compassionate ones, since they can consider both sides’ needs more realistically.

Studies have shown that attachment styles can predict people’s self-compassion. For example, Arambasic et al. (2019) showed that anxious and avoidant attachment styles have a significant relationship with low self-compassion. Mesbahi et al. (2020) showed that there is a significant positive and negative relationship between secure and unsecure attachment styles (anxious and avoidant) with self-compassion in adults, respectively. On the other hand, self-compassionate individuals show positive relationship behaviors (Neff & Beretvas, 2013), high marital satisfaction (Maleki et al., 2019) and high marital quality (Jacobson et al., 2018). Most importantly, Terzi’s study (2015) showed that self-compassion can act as a mediating variable between attachment styles and marital functioning. According to Terzi’s findings, self-compassion plays a significant role as a mediator between couples’ attachment style and marital satisfaction. In contrast, Sebastian (2018) showed that self-compassion does not mediate the relationship between attachment style and marital satisfaction.

Resilience, as Smith et al. (1984) argued, is a process through which people become aware of their own abilities, but it can also be observed as a consequence of this process. Connor and Davidson (2003) called resilience an individual’s ability to strike a biopsychological balance against risky conditions. Resilience is one of the factors that can improve the psychological functions of the family in terms of thinking, mood, and behavior and increases the ability to cope with emotional, physical, and psychological problems (Rahmani et al., 2017).

Black-Hughes and Stacy (2013) compared the attachment styles of resilient and non-resilient female siblings, the results of which showed that women who were more secure attached to their own parents had higher resilience. Bender and Ingram (2018) stressed that attachment styles have a significant effect on people’s resilience through the mediating role of self-efficacy and self-care. Jenkins (2016) stated that attachment styles influence
people’s resilience through the mediating role of emotional coping styles. On the other hand, studies show that the level of resilience of couples has a significant positive relationship with their marital quality (Gianesini, 2011) and marital satisfaction (Huber et al., 2010). Most importantly, Bradley and Hojjat (2017) showed that avoidant attachment style can predict marital satisfaction in married people through a partial mediating role of resilience, while also examining this relationship, due to its complexities, has been suggested for future studies.

Dyadic perspective-taking is a kind of mental tendency toward putting oneself into someone’s place, a special kind of empathy to understand the situation of someone to think like him or her (Van der Graaff et al., 2014). Without taking others’ perspective, an individual may have interactions that are misunderstood by his/her partner; people with this ability may have a more positive outlook and can better meet others’ needs, interests, and desires (Long & Andrews, 1990).

In their study, Henschel et al. (2020) examined the relationship between triple attachment styles in people with perspective-taking from themselves and others by testing the level of skin conductance responses (SCRS). The results showed a significant negative relationship between the tendency to perspective-taking and skin conductance in people with secure attachment style. In other words, people with a secure style performed better in perspective-taking from others. A positive relationship between secure attachment style and perspective-taking in other studies has also been shown (Corcoran & Mallinckrodt, 2000; Moradi Siah Afshadi et al., 2017). Long and Andrews (1990) stated that the perspective-taking is directly related to marital adjustment. Cahill et al. (2020) found a positive effect of perspective-taking on couples’ marital satisfaction by performing a meta-analysis. Kellas et al. (2017) showed that there was a significant positive correlation between each couple’s perspective-taking and the level of marital satisfaction reported by the other partner. What stands to be more interesting is that (Corcoran and Mallinckrodt (2000) found that perspective-taking plays a mediating role in the relationship between attachment styles and conflict resolution in couples in that people with a safe attachment style perform better in perspective-taking from their life partner, and in this way they can overcome marital conflicts.

Individuals’ attachment styles have always been presented as predictor variable of marital outcomes in many of the studies mentioned above. However, in recent years, the focus has shifted from the predictor variables in these studies, i.e. attachment styles, to the mediating variables of this relationship. In other words, the important question of many studies in recent years has been how attachment styles affect marital outcomes. Therefore, according to the studies presented, it seems that the relationship between each of the mediating variables of our study (self-compassion,
resilience and dyadic perspective-taking) has been examined alone in other studies with attachment styles and marital consequences. In addition, each of these mediating variables has been applied alone in the form of structural models for predicting marital outcomes such as marital satisfaction (Bradley & Hojjat, 2017; Terzi, 2015), and resolving marital conflicts (Corcoran & Mallinckrodt, 2000) based on attachment style. It is worth mentioning that what we did for the first time in this study was to provide a comprehensive model of the juxtaposition of the three intrapersonal variables of self-compas-
sion, resilience, and dyadic perspective-taking in an interpersonal framework (i.e. attachment style) to predict the marital quality of couples. By providing such structural models, we can highlight the mediators through which predictor variables (e.g. attachment styles) have a relationship with criterion variables (e.g. marital outcomes). On the other hand, Iranian society is experiencing a transitional stage, facing high rates of divorce and marital problems (Amani et al., 2019) and developing structural models in the field of marital variables can provide an accurate view for researchers, therapists and policymakers to take steps to improve the marital status of Iranian couples. Given these issues, it seems very important to provide such a comprehensive model. Figure 1 is the conceptual model proposed in the current study to explain how the variables seem to be related together.

The hypotheses of the current study were as follows: (1) Secure attachment style has a direct effect on marital quality; (2) Self-compassion has a direct effect on marital quality; (3) Resilience has a direct effect on marital quality; (4) Dyadic perspective-taking has a direct effect on marital quality; (5) Secure attachment style affects marital quality indirectly through self-
compassion; (6) Secure attachment style affects marital quality indirectly through resilience; (7) Secure attachment style affects marital quality indirectly through dyadic perspective-taking

**Methodology**

**Study design and participants**

The current descriptive-correlational study, which employed structural equation modeling, was conducted on all couples referring to the cultural
centers of twenty-two districts of Tehran, Iran from winter to the end of spring 2019. Districts three, five and seven were selected out of 22 districts of Tehran using cluster sampling method. Since there were five variables in the present study and at least ten samples were required for each of them (Bartlett et al., 2001), the sample size was determined as 300 couples. Inclusion criteria were (1) at least eight years of cohabitation, (2) formal and legal marriage, and no other types of marital relationships, including white marriage and domestic partnership, etc., (3) no experience of grief for at least the past six months and (4) no history of addiction, divorce, and major relationship injuries. Exclusion criteria were (1) withdrawal from completing the questionnaire and (2) impatience in completing the questionnaire. Participated in the present study were 300 couples (300 women and 300 men). The mean age of men was 35.7 years old and that of women was 29.6 years old; history of cohabitation was less than 15 years in 46% of couples, 16-20 years in 36%, and above 20 years in 18%.

**Measurements**

**Marital Quality Scale (MQS)**
This scale developed by Busby et al (1995) is used to measure marital quality. It consisted of 14 items and three subscales of agreement, satisfaction, and consistency that together show the marital quality score. Higher scores indicate higher marital quality. The full-form of this scale has 32 questions developed by Spinner based on the theory of Lewis and Spanier (1979) on marital quality (Hollist & Miller, 2005). The items are scored based on a six-point Likert scale (from “we always disagree” = zero to “we have constant agreement” = 5). The reliability of the scale was measured in the study by Hollist and Miller (2005) using Cronbach’s alpha for the three subscales of agreement (0.79), satisfaction (0.80), and consistency (0.90). In the study by Yousefi (2012), Cronbach’s alpha coefficient of MQS for 14 items and extracted quadruple factors were satisfactory and high (above 0.7) which indicating homogeneity of items. The validity of the MQS was tested in relation to concepts such as marital satisfaction, couple’s cohesion, and couple’s contract by Yousefi and the relationship was significant among all of them ($P < 0.001$).

**Attachment Style Questionnaire (ASQ)**
ASQ developed by Collins and Read (1990) includes two parts of self-assessment of communication skills and self-description of the formation of attachment relationships in terms of close attachment patterns and consists of 18 items scored based on a five-point Likert scale from ‘Not at all true to me’ to ‘Absolutely true to me’. ASQ has three sub-scales: “closeness”
that measures the extent of intimacy and emotional closeness, “dependency” that the extent to which one feels that can rely on others when needed and they are available to him/her. “Anxiety” that measures the fear of having a relationship and the level of anxiety and fear of being rejected. Collins & Read developed the materials of their questionnaire based on the descriptions of three main attachment styles provided in adult attachment questionnaire developed by Hazan and Shaver (1994). The subscale of closeness (C) corresponds to secure attachment style, the subscale of dependency (D) can be roughly considered as the opposite of avoidance attachment, and the subscale of anxiety (A) corresponds to anxiety/ambivalent attachment (Feeney & Noller, 1996). Collins & Read reported Cronbach’s alpha for the subscale (C) as 0.69, subscale (D) 0.75, and subscale (A) 0.72. They also showed that the C, D, and A subscales remained stable for 2–8 months. In Iran, the reliability of attachment style questionnaire was assessed using a test-retest method as a correlation between two tests on a sample of 100 subjects. The results the two tests performed with a month interval indicated that the difference among A, D and C subscales was not significant and this test was reliable at 0.95 (Pakdaman, 2006). In the current study, we used, based on the samples characteristics, only the subscale of secure attachment style.

**Self-Compassion Scale-Short Form (SCS-SF)**

This scale developed by Raes et al. (2011) consists of 12 items scored based on a five-point Likert scale ranging from one “almost never” to five “almost always”. This scale measures three bipolar components in the form of six subscales of self-kindness versus self-judgment (reversal), mindfulness versus over-identification (reversal), and humanity versus isolation (reversal). In the study by Raes et al. the validity of SCS-SF was confirmed (internal consistency = 0.86). In studies performed in Iran, the Cronbach’s alpha for SCS-SF was 0.68, which confirms its validity (Sabze Aray Langroodi et al., 2014).

**The Resilience Scale (RS)**

RS developed by Connor and Davidson (2003) through reviewing resources in resilience from 1979 to 1991. To determine the validity of this scale, first the correlation of each phrase with the total score of the questionnaire was measured and then the factor analysis method was used. Evaluating the correlation of each score with the total score, except for phrase 3, coefficients 0.5 to 0.5 were obtained. Then, factor analysis was applied to phrases using principal components method. Before extracting the factors based on the correlation matrix, KMO and Bartlett’s sphericity tests were performed.
The KMO value was 0.5 and the Chi-squared value based on Bartlett’s test was 0.5, which indicated the adequacy of evidence to perform factor analysis. In a study by Samani et al. (2007) performed on students, the reliability of the questionnaire was 0.8 and its validity was also confirmed (by convergent and divergent validity and factor analysis).

**Dyadic Perspective-Taking Scale (DPTS)**

DPTS developed by Long and Andrews (1990) includes two subscales of self-dyadic perspective-taking (SDPT) and other-dyadic perspective-taking (ODPT). SDPT has 13 items that measure the extent of an individual’s perspective-taking in relationship with his/her spouse and is scored based on a five-point Likert scale ranging from zero “totally disagree” to four “totally agree”. A higher score on this scale reflects better perspective-taking of the individual in relationship with his/her spouse. This scale has two subscales of cognition and strategy. The Cronbach’s alpha coefficient of this scale was calculated to be 0.89 by Long and Andrews (1990), and 0.89 by Khojasteh Mehr and Abbaspour (2016). Its convergent validity coefficient in comparison with ENRICH marital satisfaction scale was 0.93 in a study by Khojasteh Mehr et al. (2013) and the convergent validity coefficient of the scale was 0.49 in a study by Khojasteh Mehr and Abbaspour (2016) in comparison with the Batson empathy scale (BEAS) of 0.49. ODPT has 20 items to measure individual’s perspective-taking from the viewpoint of his/her spouse, which is scored based on a five-point Likert scale ranging from zero “totally disagree” to four “totally agree”. A higher score on this scale reflects a better perspective-taking from the viewpoint of the spouse. This scale has two subscales of cognition and strategy. Cronbach’s alpha coefficient of the scale was 0.94 in a study by Long and Andrews (1990), while it was 0.93 in a study by Khojasteh Mehr and Abbaspour (2016). Long and Andrews (1990) reported a significant and positive validity coefficient for this scale in comparison with Hogan empathy scale (Hogan 1969).

**Procedure**

In the current study, we selected districts three, five and seven randomly out of 22 districts of Tehran using cluster sampling and distributed the questionnaires among the selected couples by the research team after obtaining consent from them. Thus, having selected the mentioned areas randomly, we opted cultural centers, cinemas and parks from these areas and then the couples who were present in these areas, once meeting the inclusion criteria, were asked to answer the questionnaires. All couples were assured that no identity information would be included in the questionnaires and that their information would remain completely secure.
After data collection, we used structural equation modeling for data analysis and assessment of the research model. Based on the employed structural model, we considered secure attachment style and marital quality as the predictive and criterion variables respectively and self-compassion, resilience, and dyadic perspective-taking as mediating variables. To analyze obtained date from questionnaires, we used LISREL software and reported the direct, indirect, and total effects of regression coefficients for all model paths. We used Goodness-of-fit index, normal fit index, relative fit index, incremental fit index, and comparative fit index evaluate the structural fit of the model.

**Results**

Pearson correlation and structural equation analysis were used for data analysis. One of the presuppositions of structural analysis is the normal or normative distribution of variables. The Kolmogorov-Smirnov test was used to explore the normal distribution of variables, which the results are presented in Table 1.

According to the results of Kolmogorov-Smirnov test shown in Table 1, the significance level of variables was \( p > 0.05 \). Hence, the study variables had a normal distribution.

Table 2 presents the correlation matrix among the variables. Accordingly, there was a positive and significant correlation among all variables. To test the research hypotheses, the model fit was investigated. Then, the structural equation model was used to evaluate the proposed model. First, the relationship among the variables was evaluated using overall fit of the model, and then the regression weights of the measurement models and the coefficients of the structural relationships were analyzed. According to Figure 2,

<p>| Table 1. Results of the Kolmogorov-Smirnov test to evaluate the normality of variables. |
|-----------------|-----|-----|-----|-----|</p>
<table>
<thead>
<tr>
<th>Variable</th>
<th>Mean</th>
<th>SD</th>
<th>t</th>
<th>P-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marital quality</td>
<td>2.74</td>
<td>0.51</td>
<td>0.023</td>
<td>0.200</td>
</tr>
<tr>
<td>Secure attachment style</td>
<td>2.69</td>
<td>0.52</td>
<td>0.019</td>
<td>0.200</td>
</tr>
<tr>
<td>Perspective-taking</td>
<td>3</td>
<td>0.52</td>
<td>0.025</td>
<td>0.200</td>
</tr>
<tr>
<td>Resilience</td>
<td>3.00</td>
<td>0.52</td>
<td>0.022</td>
<td>0.200</td>
</tr>
<tr>
<td>Self-compassion</td>
<td>3.13</td>
<td>0.56</td>
<td>0.035</td>
<td>0.074</td>
</tr>
</tbody>
</table>

<p>| Table 2. Correlation matrix of research variables. |
|-----------------|-----|-----|-----|-----|-----|</p>
<table>
<thead>
<tr>
<th>Variable</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marital quality</td>
<td>–</td>
<td>0.89**</td>
<td>–</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Secure attachment style</td>
<td>0.89**</td>
<td>–</td>
<td>0.78*</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Perspective-taking</td>
<td>0.83**</td>
<td>0.78*</td>
<td>–</td>
<td>0.87**</td>
<td>–</td>
</tr>
<tr>
<td>Resilience</td>
<td>0.84**</td>
<td>0.80*</td>
<td>0.87**</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Self-compassion</td>
<td>0.60*</td>
<td>0.60*</td>
<td>0.79*</td>
<td>0.80**</td>
<td>–</td>
</tr>
</tbody>
</table>

*\( P < 0.05 \); **\( P < 0.01 \).
conceptual model for explaining marital quality showed that the independent variable of secure attachment style is correlated to marital quality directly through self-compassion, resilience, and indirectly through perspective-taking mediators.

First, to determine the overall fit of the model, the fit index was considered. To better achieve the model fit, correction indices were considered. The insignificant paths were first eliminated, and then some of the proposed LISREL software modifications (e.g. calculating the covariance between the errors of the observed variables) were applied. The fit indices are presented in Table 3. For the \( \chi^2/DF \) fit index, values < 5 are appropriate and the closer to zero, the higher goodness of fit. GFI, IFI, CFI, and TLI values close to 0.90 are considered as acceptable goodness of fit, indicating good fit of the model. Regarding RMSEA, values \( \leq 0.05 \) indicate good fit of the model and values \( \leq 0.08 \) indicate a reasonable approximation error; values > 0.10 indicates that the model should be rejected. The fit indices presented in Table 3 indicate the optimum fitting of the model. Based on these results, the main hypothesis of the study was confirmed.

The effects of all paths in the structural equation model are shown in Table 4.

![Proposed conceptual model with regression coefficients for marital quality and secure attachment style with mediation of self-compassion, resilience, and perspective-taking.](image)

**Figure 2.** Proposed conceptual model with regression coefficients for marital quality and secure attachment style with mediation of self-compassion, resilience, and perspective-taking.

**Table 3.** Fit indices for the proposed model.

<table>
<thead>
<tr>
<th>fit model indices</th>
<th>( \chi^2 )</th>
<th>DF</th>
<th>( \chi^2/DF )</th>
<th>GFI</th>
<th>IFI</th>
<th>CFI</th>
<th>RMSEA</th>
</tr>
</thead>
<tbody>
<tr>
<td>model</td>
<td>1901-63</td>
<td>664</td>
<td>2.86</td>
<td>0.92</td>
<td>0.92</td>
<td>0.91</td>
<td>0.056</td>
</tr>
<tr>
<td>accepted range</td>
<td>–</td>
<td>–</td>
<td>&lt; 5</td>
<td>&gt; 0.90</td>
<td>&gt; 0.90</td>
<td>&lt; 0.08</td>
<td></td>
</tr>
</tbody>
</table>

**Table 4.** Coefficients of marital quality model based on secure attachment style with mediation of self-compassion, resilience, and perspective-taking.

<table>
<thead>
<tr>
<th>Regression Path</th>
<th>Regression Coefficient</th>
<th>( t )</th>
</tr>
</thead>
<tbody>
<tr>
<td>secure attachment style on marital quality</td>
<td>0.45</td>
<td>7.19</td>
</tr>
<tr>
<td>perspective-taking on marital quality</td>
<td>0.68</td>
<td>6.36</td>
</tr>
<tr>
<td>resilience on marital quality</td>
<td>2.01</td>
<td>5.53</td>
</tr>
<tr>
<td>self-compassion on marital quality</td>
<td>0.47</td>
<td>12.33</td>
</tr>
<tr>
<td>secure attachment style on understanding perspective-taking</td>
<td>0.35</td>
<td>7.76</td>
</tr>
<tr>
<td>secure attachment style on self-compassion</td>
<td>0.53</td>
<td>8.80</td>
</tr>
<tr>
<td>secure attachment style on resilience</td>
<td>0.16</td>
<td>5.08</td>
</tr>
</tbody>
</table>

\( t = 2.98 \) is significant at 0.01
Analysis of data from research hypotheses through regression coefficients in structural equation model showed the significant effect of secure attachment style on marital quality ($\beta = 0.45$, $P < 0.01$) (Table 4) and consequently, the first sub-hypothesis was confirmed. The results of Table 4 also show that the effect of dyadic perspective-taking on marital quality was significant ($\beta = 0.68$, $P < 0.01$); hence, the second sub-hypothesis was confirmed. The effect of resilience on marital quality was significant ($\beta = 0.22$, $P < 0.01$); thus, the third sub-hypothesis was also confirmed. The effect of self-efficacy on marital quality was significant ($\beta = 0.47$, $P < 0.01$) confirming the fourth sub-hypothesis. The effect of secure attachment style on dyadic perspective-taking was significant ($\beta = 0.35$, $p < 0.01$); the effect of secure attachment style on self-compassion was significant ($\beta = 0.53$, $P < 0.01$), and the effect of secure attachment style on resiliency was also significant ($\beta = 0.16$, $P < 0.01$).

Also, the Sobel test was used to investigate the mediating role of resilience, self-compassion, and perspective-taking on the relationship between secure attachment style and marital quality. The results are shown in Table 5.

The results of the Sobel test showed that perception taking variable has a significant mediating role in the relationship between secure attachment style and marital quality ($Z = 4.83$, $P < 0.01$) (Table 5). That is, secure attachment style with the mediating role of dyadic perspective-taking can predict marital quality, confirming the fifth sub-hypothesis. According to the results shown in Table 5, self-compassion has a significant mediating role in the relationship between secure attachment style and marital quality ($Z = 7$, $P < 0.01$). Hence, secure attachment style with the mediating role of self-compassion can predict marital quality, confirming the sixth sub-hypothesis. The results also showed that resilience has a significant mediating role in the relationship between secure attachment style and marital quality ($Z = 3.79$, $P < 0.01$). Hence, secure attachment style with the mediating role of resilience can predict marital quality. The results support the seventh sub-hypothesis of the study.

**Discussion and conclusion**

The present study investigated the direct effect of secure attachment style, dyadic perspective-taking, resilience, and self-compassion on marital quality.

**Table 5.** Evaluation of the effect of mediating role of resilience, self-compassion, and perspective-taking on the relationship between secure attachment style and marital quality using Sobel test.

<table>
<thead>
<tr>
<th>predictive variable</th>
<th>criterion variable</th>
<th>mediator variable</th>
<th>Sobel’s test (z)</th>
<th>P-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Secure attachment</td>
<td>Marital quality</td>
<td>Self-compassion</td>
<td>7.10</td>
<td>0.01</td>
</tr>
<tr>
<td>Secure attachment</td>
<td>Marital quality</td>
<td>Resilience</td>
<td>3.79</td>
<td>0.01</td>
</tr>
<tr>
<td>Secure attachment</td>
<td>Marital quality</td>
<td>Perspective-taking</td>
<td>4.83</td>
<td>0.01</td>
</tr>
</tbody>
</table>
as well as indirect effect of secure attachment style on marital quality through dyadic perspective-taking, self-compassion, and resilience in a population of couples selected from 22 districts of Tehran.

The results of the study showed that all hypotheses were confirmed. In this section, instead of examining the individual hypothesis, we scrutinize the three main pathways in the structural model. The first path is the relationship between secure attachment style and marital quality through the mediating role of self-compassion. The results showed that attachment style has a direct effect on marital quality (confirmation of the first hypothesis) which is consistent with that of many studies (e.g. Begum & Kumar, 2014; Hollist & Miller, 2005; Knoke et al., 2010; Sandberg et al., 2017; Scheeren et al., 2014). Self-compassion also had a direct effect on marital quality (confirmation of the second hypothesis), which is consistent with the results of Jacobson et al. (2018) Maleki et al. (2019) Neff and Beretvas (2013) study. Finally, attachment style had an indirect effect through self-compassion on marital quality (confirmation of the fifth hypothesis), which is consistent with the results of Terzi (2015).

In explaining this path, Neff and McGehee (2010) stated that parental care and individual self-compassion are closely related. Secured people have experienced a supportive and caring environment in their original family in the event of suffering, and this good family environment has nurtured a compassionate inner dialogue in them. Besides, based on findings showing that Oxytocin levels in the body are directly related to levels of trust, calm, safety, generosity and connectedness, and the brain, when giving and receiving compassion, releases oxytocin (Feldman et al., 2007), Neff & McGehee stated that a secure attachment style is formed in the family environment in which family interactions lead to the release of oxytocin in the individual and this amount of Oxytocin in the brain brings with it a compassionate mindset to the person. A secure person from a secure family, according to Bartholomew’s model, trusts others and think of them as supportive ones, while at the same time being confident in his or her value as a human being. This sense of worth and connection can facilitate self-compassion. In fact, secure people, unlike insecure people who need others to feel self-worth, while building constructive relationships with others, do not need them to create a sense of self-worth and believe in their own self-worth (Neff & McGehee, 2010).

According to Neff and Beretvas (2013), the higher the self-compassion of individuals, the higher the compassion is toward their partner. Neff & Beretvas showed that the partner of people with high self-compassion consider them to be affectionate, warm and considerate. Compassionate people show a high degree of solidarity with their spouse, and this state of affectionate in compassionate people leads to an increase in their intimacy with
their spouse. Compassionate people have more acceptability to their spouse and give them high autonomy. Seeing themselves as imperfect human beings, the compassionate people also regard their spouse’s limitations and mistakes reasonable. Likewise, because compassionate people have more affection and care for themselves, they are more inclined to set their spouse free and happy. But on the other hand, uncompassionate people are described by their spouse as an unattached person in their relationship. High levels of self-criticism, feelings of isolation, and rumination about negative emotions about oneself may lead to high levels of self-immersion, which in turn leads to disruption of interaction and intimacy in the marital relationship. In addition, non-compassionate people experience a high level of control and domination that results in less acceptance of the spouse and restriction of his or her freedoms. Neff (2003) stated that non-compassionate people have a higher rate of verbal aggression with their spouse than compassionate people and their negative emotions are more lasting and show more anger and reaction when there is a conflict. All of the above clearly leads to a high quality of marriage in compassionate people and a sharp decrease in non-compassionate people. Therefore, it can be said that the style of secure attachment with the formation of high self-compassion leads to an increase in the quality of the marital relationship.

The second pathway is the relationship between secure attachment style and marital quality through the mediating role of resilience. The results showed that resilience has a direct effect on marital quality (confirmation of the third hypothesis) which is consistent with the results of Giansini (2011) and Huber et al. (2010). Also, secure attachment style had an indirect effect through resilience on marital quality (confirmation of the sixth hypothesis), which is consistent with the results of Bradley and Hojjat (2017).

In explaining this finding, Bender and Ingram (2018) stated that people with a secure attachment style have a higher degree of resilience due to their belief in self-efficacy and greater self-care. They believe that the adopted attitude of secure people increases their effectiveness to such an extent that they believe they have the necessary ability to exercise control over their social environment. They also value mental/emotional, physical, and social self-care experiences and engage in these experiences, which is why these experiences help them when they have problems. Thus, resilient individuals, as stated by Skodol (2010), are able to use appropriate coping strategies in the field of marital relationship. Skodol believes that these people have high self-confidence and believe in their own ability to manage challenges, and because they are goal-oriented, they insist on achieving their goals and maintain a positive outlook. They have a great ability to express and understand emotions correctly and can interact effectively with
their spouse. This ability of empathy also helps them when they need social support from others, which in turn helps them achieve their goals. Bradley and Hojjat (2017) stated that couples often have problems with each other at some point in their lives. In such situations, resilient individuals are able to bounce back the relationship to its original state by maintaining a positive outlook on the future of the marital relationship and constantly striving to keep their relationship alive, even in the face of negative marital distress. Therefore, we believe that a safe person has high resilience, which brings strong self-efficacy, positivity toward the future, goal-orientation, problem-solving ability, and interpersonal communication skills, and the ability to receive and give social support (Hjemdal et al., 2011) which prepare the individual to have a quality relationship.

The third pathway is the relationship between secure attachment style and marital quality through the role of dyadic perspective-taking. The results showed that dyadic perspective-taking has a direct effect on marital quality (confirmation of the fourth hypothesis), which is consistent with the results of previous studies Long & Andrews (e.g. Cahill et al., 2020; Kellas et al., 2017; Long & Andrews, 1990). Also, attachment style had an indirect effect on the quality of marriage through dyadic perspective-taking (confirmation of the seventh hypothesis), which is consistent with the results of Corcoran and Mallinckrodt (2000).

To explain this pathway, Corcoran and Mallinckrodt (2000) stated that just as children with secure attachment freely explored new situations in Ainsworth’s laboratory studies of attachment, adults with secure attachment style can well explore their spouse’s perspectives and find possible solutions to a marital challenge. Similarly, Henschel et al. (2020) believe that secure individuals are much less likely to become over-aroused because of their high emotional load, and this enables them to cope with others without overwhelming in confusion compassionately and empathically and focus on their point of view. The tendency of secure people to dyadic perspective-taking is the result of this high emotional load and adopted physiological response to the emotions of others. However, the high level of physiological response in insecure people deprives them of the ability to focus on the perspective of others. On the other hand, according to the model of social exchange (Spanier & Lewis, 1980) according to which rewarding interaction increases the quality and stability of marital relationship, the ability to dyadic perspective-taking is considered to be one of the very important factors in social interactions, including marital interaction. Long and Andrews (1990) believed that awareness from a spouse’s point of view enables one to be familiar with and fit in his or her spouse’s expectations and desires, and helps couples to adjust their behaviors so that the life would be desirable and enjoyable for both. In general, according to the social
competencies model of interpersonal process in psychotherapy by Mallinckrodt (2001), attachment styles are clearly associated with some of the shortcomings and competencies in social self-efficacy and dyadic perspective-taking. These social competencies and shortcomings lead to the formation of behaviors, including dyadic perspective-taking, which, according to the social exchange model, play a fundamental positive role in individuals’ marital life. As a result, secure attachment style enhances their marital quality by creating the ability to dyadic perspective-taking.

**Implications for family therapy/practice**

The results of this study provided evidence regarding the importance of intrapersonal variables in the marital relationship. Researchers working in the field of family and couples should pay more attention to this type of intrapersonal variables in the field of intimate relationship in future studies. In this study, a comprehensive model was presented to investigate how the attachment styles of individuals affect their marital relationship and it was found that the three variables of self-compassion, resilience and dyadic perspective-taking that are themselves affected by the attachment style of individuals are able to play an important mediating role in the relationship between attachment and marital quality. Therapists working in the field of couple and family therapy, based on the findings of the present study and previous studies in this field, can have more control over how attachment styles work in intimate relationships. Because individuals’ attachment styles are relatively stable variables, and making changes to these styles, if not impossible, seems to be very difficult and time consuming, therapists can focus on the pathways through which the attachment style may affect marital consequences and address many of the marital problems by intervening in variables (such as self-compassion, resilience, and dyadic perspective-taking) that are shaped by people’s attachment style and affect their marital consequences to reduce clients’ marital problems and improve the quality of the relationship in them. In other words, if therapists promote self-acceptance in individuals using self-compassion, resilience, and dyadic perspective-taking treatment protocols, this self-acceptance will eventually lead to another (spouse) acceptance and increases empathy, affection, and caring for the spouse, in addition to the person involved, and reduces self-criticism, isolation, and rumination. On the other hand, by increasing resilience, a person can maintain a positive attitude toward his or her marital relationship and make continuous efforts to improve it, and in this way, in addition to his/her views, each partner can be aware of the others’ point of view regarding their marital relationship. To this end, couple therapists can take advantages of acceptance and commitment therapy (Neff & Tirch,
2013), mindfulness-based cognitive therapy and compassion-focused therapy (Frostadottir & Dorjee, 2019) to improve the rate of self-compassion in couples. Besides, they can utilize positive couple therapy (Singer & Skerrett, 2014) and resiliency-focused couple therapy (Greenan, 2020) to enhance the rate of resilience in couples. In addition, emotional activation therapy (Pietrzak et al., 2016) seems to be suitable to increase the rate of perspective-taking in couples. Thus, it can be expected that by focusing on such a comprehensive model, it is possible to increase the quality of marriage in the field of treatment in couples who are not satisfied with the quality of their marital relationship.

Limitations of the study
First, in the present study, self-report questionnaires were used to measure each of the variables. Second, the sample of the present study was from the middle social class of society and it should not be assumed that such a model is true for all strata of society. Thirdly, in conducting this study in Iranian society, which has its own culture and religious orientations, caution should be exercised in extending it to communities with other cultures although it is a kind of field study of scientific theories in societies with their own culture and provides very useful information about this type of society. The present study is a structural model and provides information about the effect of variables on each other. Because our study was cross-sectional, yet we cannot, based on the results of our own study, consider the type of causal and accurate effect obtained in experimental and semi-experimental intervention studies.

Future directions
Since psychological interventions are formed and modified based on fundamental research such as ours, it is recommended that future studies in this area focus on other mediating variables between attachment style and marital outcomes so that the dimensions of attachment affecting marital outcomes should be further clarified. It is also suggested that in later studies, the role of gender in the dynamics of each of the variables of this study be examined and the differences between men and women in each of these pathways be specified. It is also recommended to family and couple psychotherapists to use the structural model obtained from this study to use treatment methods that intervene in the mediating variables of this study in order to solve marital problems in people with unsecure attachment styles and enrich the marital quality of couples with a secure attachment style.
Acknowledgement

We appreciate all people who have cooperated with us in conducting this study.

Disclosure statement

We have no conflict of interest to disclose.

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