



Alexithymia and satisfaction in intimate relationships

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ARTICLE INFO

Article history:

Received 29 May 2008

Received in revised form 27 August 2008

Accepted 2 September 2008

Available online 11 October 2008

Keywords:

Alexithymia
Intimate relationships
Satisfaction

ABSTRACT

The present study examined the relationship between alexithymia and satisfaction in intimate relationships. One hundred and fifty-eight undergraduate students taking a first year psychology course completed the 20-item Toronto alexithymia scale (TAS-20) and two measures of relationship satisfaction: overall satisfaction with the relationship and sexual satisfaction in the relationship. Path analysis revealed a moderate negative relationship between alexithymia and both relationship satisfaction variables. These results support previous studies demonstrating a strong link between alexithymia and a host of interpersonal problems.

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1. Introduction

Sifneos (1973) proposed the word *alexithymia* to identify a cluster of behaviors he often observed in individuals experiencing various mental and physical health problems. Over the past few decades, the personality construct of alexithymia has come to be defined as the following set of basic features (Taylor, Bagby, & Parker, 1997): difficulty describing feelings to others; difficulty identifying feelings and distinguishing between these feelings and bodily sensations of emotional arousal; a stimulus-bound, externally oriented, cognitive style; and constricted imaginal processes. These features could be construed as the outward manifestations of what Sifneos (1973) and Nemiah (1996) have highlighted as a key feature of alexithymia; an inhibited inner emotional and fantasy life. Along with these basic features, several related characteristics have also been observed, such as problems processing emotional information (Suslow & Junghanns, 2002), difficulties in identifying facial expressions (Parker, Taylor, & Bagby, 1993), and lower capacity for empathy (Guttman & Laporte, 2002).

Levels of alexithymia have been found to be higher among those with somatoform disorders (Duddu, Isaac, & Chaturvedi, 2003), generalized anxiety disorder (Schut, Castonguay, & Borkovec, 2001), social anxiety and panic disorders (Fukunishi, Kikuchi, Wogan, & Takubo, 1997) than among those without mental health issues. Alexithymia has also been associated with eating disorders (Zonnevijlle-Bender, van Goozen, Cohen-Kettenis, van Elburg, & van Engeland, 2002), substance use (Cecero & Holmstrom, 1997), and problem gambling behaviors (Parker, Wood, Bond, & Shaughnessy, 2005) and boredom (Eastwood, Cavaliere, Fahlman, & East-

wood, 2007). Halmers and Mente (1999) found alexithymia to be associated with other unhealthy behaviors such as poor nutrition and a sedentary lifestyle among young men; an association that Waldstein, Kauhanen, Neumann, and Katzel (2002) also found in older adults.

The negative quality of life that seems endemic among individuals with alexithymia may be associated with the fact that they tend to have very poor social support networks. In fact, alexithymia has been associated with a variety of interpersonal problems. Malinckrodt and Wei (2005), for example, found emotional awareness, as indicated by lower levels of alexithymia, to be negatively associated with attachment anxiety and avoidance, and positively associated with social self-efficacy and social support in a sample of undergraduate university students.

In a study on adult attachment and alexithymia, Montebanocci, Codispoti, Baldaro, and Rossi (2004) found alexithymia to be positively associated with discomfort with closeness, placing relationships as secondary, and need for approval from others. Alexithymia was also found to be negatively associated with confidence in self and others—a set of indicators linked with insecure attachment. Previously, Troisi, D'Argenio, Peracchio, and Petti (2001) found alexithymia to be associated with insecure attachment among young men.

Vanheule, Desmet, Rosseel, Verhaeghe, and Meganck (2006) found alexithymia to be linked with “interpersonal indifference”: individuals scoring high on a measure of alexithymia did not expect much from other people, nor did they have a strong desire to fulfill the expectations of others. In a related study, Vanheule, Desmet, Meganck, and Bogaerts (2007) found alexithymia to be related to low levels of reported affection and connection to others, as well as problems expressing needs to others and coping with challenges faced in social situations within a clinical and

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undergraduate student sample. This work supports the earlier findings of Weirryb et al. (1996), who found an association between alexithymia and intimacy avoidance in a sample of undergraduate students. De Rick and Vanheule (2007) have suggested that alexithymic individuals have a strong need for independence stemming from their suspicion and lack of trust in others. Kauhanen, Kaplan, Julkunen, Wilson, and Salonen (1993), using a large population-based sample of middle-aged men, found a link between alexithymia and being single and socially isolated. Kokkonen et al. (2001) found similar results among a younger population-based sample: unmarried men had higher levels of alexithymia than married, cohabitating or divorced men.

Within people's lives, happy romantic relationships are linked to a host of positive outcomes, including lower blood pressure and stronger immune systems (Kiecolt-Glaser & Newton, 2001), lower mortality rates (Berkman & Glass, 2000), and greater life satisfaction (Fleeson, 2004; Nezlek, Richardson, Green, & Schatten-Jones, 2002). In short, our physical and mental well-being is greatly influenced by our intimate relationships. The ability to establish and maintain a satisfying romantic relationship requires an ability to identify emotions, as well as the ability to self-disclose these emotions to a partner (Carton, Kessler, & Pape, 1999; Meeks, Hendrick, & Hendrick, 1998; Noller, 1980). The ability to understand and appreciate (i.e., empathize) the feelings of one's partner are also critical to positive relationships (Wachs & Cordova, 2007). These behaviors are commonly referred to as being intimate, or more broadly, as relationship maintenance behaviors. Intimacy has been defined as a feeling of closeness and sharing of emotions and physical experiences with another person (Schaefer & Olson, 1981). Success with these relationship maintenance behaviors has also been linked to relationship satisfaction (Dindia, 2000; Sprecher, Metts, Burleson, Hatfield, & Thompson, 1995), which is strongly linked with relationship stability (Sprecher, 2002). Thus, important qualities required to establish and maintain intimate relationships appear to be lacking in individuals scoring high on measures of alexithymia. It is important to note, however, that while previous research has consistently linked alexithymia with behaviors and problems likely to generate problematic relationships, prior research has not directly explored the relationship between alexithymia and satisfaction with intimate personal relationships.

The purpose of the present study is to assess the relationship between alexithymia and satisfaction within intimate relationships. Specifically, this study will explore the link between alexithymia and overall relationship satisfaction, as well as the association between alexithymia and an important aspect of intimate relationships, sexual satisfaction.

2. Method

2.1. Participants

The sample consisted of 158 undergraduate students (34 males and 124 females) attending a small Ontario university. The participants ranged in age from 17 to 25 years, with a mean age of 19.41 years ($SD = 1.50$); 19.59 (1.67) for males and 19.35 (1.45) for females. Eighty-eight percent of the participants identified themselves as White, 6% as Asian, 2% as Black, 2% as Aboriginal, and 2% as "Other". All of the participants were currently in a heterosexual relationship of at least 3 months. The length of relationships ranged from 3 to 68 months, with a mean length of 17.64 months ($SD = 14.88$).

2.2. Measures

Participants completed the 20-item Toronto alexithymia scale (TAS-20; Bagby, Parker, & Taylor, 1994), various measures to assess

their intimate relationships, including the relationship assessment scale (Hendrick, 1988) and the global measure of sexual satisfaction (Lawrance & Byers, 1998), as well as the positive and negative affect schedule (Watson, Clark, & Tellegen, 1988).

2.2.1. Toronto alexithymia scale (TAS-20)

The TAS-20 is the most widely used self-report measure of alexithymia (Parker, Taylor, & Bagby, 2003; Taylor, Bagby, & Parker, 2003). The TAS-20 uses 5-point Likert rating scales to assess three factors: difficulty identifying feelings (DIF); difficulty describing feelings (DDF); and externally oriented thinking (EOT). These three factors added together determine the overall level of alexithymia. It should be noted that while the TAS-20 measures the cognitive components of the alexithymia construct well, it does not include items that directly assess a reduced fantasy facet of the construct. However, there is considerable evidence that the EOT factor directly assesses this aspect of the alexithymia construct (Bagby et al., 1994; Taylor et al., 1997). The TAS-20 has well established psychometric properties and has been shown to be a valid and reliable instrument with a variety of populations (Parker et al., 2003; Taylor et al., 2003). For the present sample, Cronbach's alpha coefficient for the 20 items was .84.

2.2.2. Relationship assessment scale (RAS)

The relationship assessment scale (RAS; Hendrick, 1988) assesses general satisfaction with a relationship using 7 items (e.g., How well does your partner meet your needs?) rated on 5-point Likert scales. Higher scores represent greater satisfaction with the intimate relationship in general. The RAS has demonstrated psychometric properties (Hendrick, Dicke, & Hendrick, 1998), including satisfactory test-retest reliability and internal consistency. Also, the RAS has been shown to be highly correlated with other commonly used measures of marital satisfaction (Hendrick et al., 1998). For the present sample, Cronbach's alpha coefficient for the 7 items was .92.

2.2.3. Global measure of sexual satisfaction (GMSEX)

The global measure of sexual satisfaction (GMSEX; Lawrance & Byers, 1998) was used to assess sexual satisfaction in the participants' current relationships. Participants were asked to rate their sexual relationship using five 7-point scales (e.g., 7 indicates 'Very Good' while 1 indicates 'Very Bad'). Higher scores represent greater sexual satisfaction with the relationship. The GMSEX has been shown to have good test-retest reliability and internal consistency (Lawrance & Byers, 1995). For the present sample, Cronbach's alpha coefficient for the 5 items was .94.

2.2.4. Positive and negative affect schedule (PANAS)

The PANAS (Watson et al., 1988) was included in order to control for mood as past research has questioned the confluence of alexithymia and current mood state. The PANAS was used to assess participants' affective state at the time they were completing the questionnaires. The PANAS includes a 20 item checklist; 10 items to assess positive affect (e.g., active) and 10 items to assess negative affect (e.g., afraid). Participants rate each item on 5-point Likert scales to indicate how they currently feel. The PANAS is a widely used measure with adequate psychometric properties (Gaudreau, Sanchez, & Blondin, 2006). For the present study, only negative affect was examined. For the present sample, Cronbach's alpha coefficient for the 10 items was .83.

2.3. Procedure

Participants were recruited from a large psychology class and asked if they would volunteer to participate in a study on "personality and intimate relationships". Volunteers provided informed

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