



The Relationship between Differentiation of Self and Sense of Coherence in Iranian students

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ABSTRACT

The way individuals balance between thinking/emotion systems in relationships could have different impacts on their ability to see the world as comprehensible, manageable, and meaningful. Accordingly, the present study investigated the relationship between differentiation of self and sense of coherence [SOC]. One hundred Iranian students filled Differentiation of Self Inventory [16]; and Orientation to Life Questionnaire [1]. Data were analysed using Pearson's correlation, multiple regression, and MANOVA. Results showed differentiation and its subscales (emotional reactivity, I position, emotional cut off, fusion with others) were all positively related to SOC. Total Differentiation positively predicted SOC. Moreover, except fusion, other subscales had significant and positive roles in prediction of SOC. No significant gender differences were found in differentiation and SOC. In sum, the findings showed more differentiated individuals, perceive their world more coherent, which in turn could have a positive influence on their health.

Keywords: Differentiation of self; Sense of coherence

INTRODUCTION

According to Aaron Antonovsky (1990), the real mystery is to understand how some people, some of the time, suffer less than others, move toward health [2]. Antonovsky (1996) posited the question "What explains movement toward the health pole of the health ease/dis-ease continuum?" which led him to formulate the concept of sense of coherence [SOC] [3]. SOC is a construct that refers to the extent to which one sees one's world as comprehensible, manageable, and meaningful [4]. It explains why people in stressful situations stay well and even are able to improve their health [9].

Another theory that views movement toward health on a continuum could be Bowen's (1972) Family Systems theory (1972). Family Systems Theory is arguably considered the most comprehensive theory of human functioning from a systems perspective [5, 16]. In this approach, individual symptoms and problems are placed in systemic context and explored in terms of the entire spectrum of functioning and relationships [10]. Of the various constructs that compose Bowen theory, differentiation of self is the personality variable most critical to mature development and the attainment of psychological health [14]. Many studies showed the role of differentiation and SOC in adjustment, health and well-being [13, 18]. Thus, the question is what is the relationship between differentiation with SOC? We could find only one study that considered differentiation and SOC together [12]. In the present study, our main purpose is investigating the specific relationship between the key variable of Bowen's (1972) family systems theory (i.e., differentiation of self) and SOC in Iranian students. We will explain the theoretical background and assumptions, the research questions, and hypotheses below [5].

Differentiation of self: the main construct of Bowen theory

Differentiation of self is defined as the capacity of a system and its members to manage emotional reactivity, act thoughtfully under stress, and allow for both intimacy and autonomy in relationship [16]. Differentiation of self is thought to operate on both an intra-personal (psychic) domain and interpersonal/relational level [18]. Within the intra-psychic dimension, differentiation of self entails a capacity for self-regulation—that is, an ability to distinguish between thinking and feeling systems, comfort with one's feelings and capacity to access them freely, along with the ability to achieve a solid sense of self and identify or express one's personal thoughts and perspectives [16]. On an interpersonal level, differentiation of self refers to the ability to experience intimacy with and independence from others [14]. [On this level] more differentiated individuals are comfortable with intimacy in close relationships and

therefore, the need to regulate feelings of anxiety with fusion or emotional cut off in relationships is decreased [16].

With another point of view, differentiation has four underlying factors. More differentiated people have one, more "emotional reactivity" which is the degree to which a person responds to environmental stimuli with emotional flooding, emotional liability, or hypersensitivity [15]. Two, better ability to take "I" position in important relationships [15]. Three, less "Emotional cutoff"; and four, less "fusion with others", they are comfortable with intimacy in close relationships and refrain from using fusion or emotional cutoff as relational mechanism for regulating anxiety [15].

Differentiation of self and SOC

SOC can be defined as a global orientation that expresses the extent to which one has a pervasive, enduring though dynamic feeling of confidence that [1]the stimuli deriving from one's internal and external environments in the course of living are structured, predictable and explicable; [2] the resources are available to one to meet the demands posed by these stimuli; and [3] these demands are challenges, worthy of investment and engagement [3]. The three inextricably intertwined components are called, respectively, comprehensibility, manageability, and meaningfulness [4]. Greater differentiation involves the ability to engage in thoughtful examination of situations, to maintain full awareness of one's emotions, and to experience strong affect or shift to calm, logical reasoning depending on circumstances [18]. With regard to Antonovsky's (1987) theory, these abilities are similar with characteristic of people with strong SOC [1].

Likewise, since the progressive understanding of what happens in one's life and by the familial, socio-cultural, and historical context a person is living in [14] would form SOC, it seems individuals' differentiation of their family, could have a strong relationship with their SOC as well, or even could predict it. Besides, Rogers'(2012) findings support this assumption that differentiation could have a positive association with SOC. Therefore, we hypothesised differentiation (total and subscales) would be positively correlated with and predicted SOC [19,12].

The findings of our study could provide some empirical support for the role of SOC in family therapy context. A basic assumption of Bowen systems thinking is that if a person changes her or his emotional functioning in the family, the system will eventually change [10]. Accordingly, if SOC could be predicted by the extent of differentiation, increasing SOC levels of a client (or a family) in family therapy sessions could increase level of differentiation and consequently their health.

Finally, as an additional goal, we want to examine gender differences in each variable. Previous findings are dissimilar with each other [18,9].By the way, it is hypothesised there would be significant gender differences in differentiation (total score) and SOC.

MATERIALS AND METHODS

Participants and Procedure

Our sample consisted of 100 students from a University in Tehran, Iran. Fifty-eight percent of participants were female. The age range was from 19 to 45 ($M = 27.23$, $SD = 4.64$), and 82% of them were single. Participants voluntarily answered to a demographic form and two questionnaires.

Measures

Differentiation of self

Differentiation was assessed using Persian version of Differentiation of Self Inventory, which first was developed by Skowron and Friedlander (1988); and then was revised by [16]. The DSI contains four subscales: an 11-item Emotional Reactivity (ER) scale, an 11-item "I" Position (IP) scale, a 12-item Emotional Cutoff (EC) scale, and a 12-item revised-Fusion with Others (FO) [18]. Its subscales are designed to assess interpersonal (i.e., fusion and emotional cutoff) and intrapsychic dimensions of differentiation problems (i.e., emotional reactivity and difficulty taking an "I" position) [18]. It consists of 46 one-sentence statements with responses that range between the extremes of 1 (not true at all of me) to 6 (very true of me) [12]. Scores on select items are reversed and summed across scales, so that higher scores on each subscale and the full scale all reflect greater differentiation of self (i.e., less emotional reactivity, greater ability to take an "I" position in relationships, less emotional cutoff, or less fusion with others) [18]. On the present study, Cronbach's alphas were $FO = .70$, $ER = .75$, $IP = .66$, $EC = .76$, and Full scale = .88.

Sense of coherence [9].

13-Items Orientation to Life Questionnaire is a short version of the two questionnaires that were developed by Antonovsky (1987) for evaluating SOC [1]. In this study, we used the Persian version of The SOC scale (13-items) [11]. Each of the questions can be answered using a 7-point Likert scale with an example of response choices ranging from never applies to always applies and with each response set worded specifically for the question (Rogers et al., 2012). A score of 13-63 points corresponded to a

lowSOC, 64-70 points to moderate SOC and 80-91 points to a high SOC [6]. In the present study, we aimed to consider only total SOC, and Cronbach's alpha for total SOC was .77.

RESULTS

Means, standard deviations, and inter correlations among all variables are presented in Table 1.

Table 1. Means, standard deviations, and inter correlations among all variables

1)	Variables	2)	M	3)	SD	4)	1	5)	2	6)	3	7)	4	8)	5
1.	Emotional Reactivity	9)	35.71	10)	8.32	11)		12)		13)		14)		15)	
2.	I Position	16)	42.74	17)	7.18	18)	.544**	19)		20)		21)		22)	
3.	Emotional Cutoff	23)	39	24)	8.99	25)	.551**	26)	.267**	27)		28)		29)	
4.	Fusion with Others	30)	38.31	31)	8.36	32)	.656**	33)	.459**	34)	.349**	35)		36)	
5.	Differentiation (Overall)	37)	155.77	38)	25.53	39)	.888**	40)	.702**	41)	.721**	42)	.793**	43)	
6.	Sense of coherence	44)	53.83	45)	10.76	46)	.634**	47)	.537**	48)	.496**	49)	.363**	50)	.651**

*p < .05; **p < .01.

The results of Pearson's correlations (Table 1) showed differentiation, and all of its subscales (ER, IP, EC, and FO) were all positively related to SOC. We used Linear regression analysis for investigating the probability whether differentiation could predict SOC or not. The regression analysis was significant (R = .708; R² = .501; F (4, 95) = 23.843, P < .01). Therefore, with ninety-nine percent sure, differentiation could predict SOC.

In the following, we evaluate the role of each of differentiation's subscales in predicting SOC [5].

Table 2. Regression coefficients

51)		52)	Unstandardized Coefficients		53)	Standardized Coefficients		55)	T
		56)	B	57) Error	54)	Beta			
58)	(Constant)	59)	10.668	60)	5.378	61)		62)	1.985*
63)	Emotional Reactivity	64)	0.569	65)	.149	66)	.404	67)	3.829**
68)	I Position	69)	.456	70)	.131	71)	.304	72)	3.473**
73)	Emotional Cutoff	74)	.266	75)	.104	76)	.222	77)	2.550*
78)	Fusion with Others	79)	-.183	80)	.125	81)	-.142	82)	-.465

Dependent variable: SOC.

*p < .05; **p < .01.

Except FO, other subscales of differentiation (i.e., ER, IP, and EC) have positive significant roles in predicting SOC (Note that higher scores on subscales, means fewer emotional response, greater I position, fewer emotional cutoff, and fewer fusion, respectively).

Additionally, MANOVA were conducted to examine significant gender differences on total differentiation and SOC. Results showed there were no significant gender differences (F (4, 95) = 2.167 and 1.898; P < .05, respectively).

DISCUSSION AND CONCLUSION

While the main hypotheses regarding positive relationship between differentiation (total and subscales) and SOC have been supported, the hypothesis about positive prediction role of differentiation and its subscales on SOC partly supported. The hypotheses about existing significant gender differences in differentiation and SOC (total scores) were not supported at all [7].

As expected, differentiation (total score) was positively correlated with SOC. this finding is consistent with [12]. This result confirms that the more a person has better ability to balance achieving an autonomous sense of self and maintaining close connections with important others, most notably with one's family [13]. the more he/she could perceives the stimuli deriving from one's internal and external environments as predictable, manageable and meaningful [19]. In addition, all the subscales were positively related to SOC. In other words, the findings confirm that greater differentiation of self, that is, lower emotional reactivity, better capacity to take an I position in relationships, less emotional cutoff, and lower fusion with others [17] are associated with stronger SOC [17].

Regression analysis showed generally, differentiation positively predict SOC. Three subscales (ER, IP, and EC) had positive role in predicting SOC. the role of ER was greater than others were. One explanation is that ER serves as the underlying fuel, leading one to either emotionally cutoff or fuse with others under stress [18]. FO in comparison with other subscales had less correlation with SOC, and didn't have a significant role in prediction. One explanation is the cultural context of our sample. The Fusion with Others scale reflects emotional over-involvement and/or over-identification with one's parents or significant others [17]. The characteristic of moderate fused people could be a normal part of the Iranian culture. The low levels of SOC and/or the small size of the sample would be another two important reasons. More research is needed to clarify this finding.

Taken together, based on these results, individual's level of SOC could fill the gap between the level of individual's differentiation and their function. More differentiated have more SOC, they are thought to be more capable of reflecting on, experiencing, and modulating their emotions, as well as being better able to cope with uncertainty and ambiguity while remaining calm within one's relationships [18], whereas low differentiated people, with their weak SOC, as Bowen (1972) assumed, are vulnerable to stress [5].

Unexpectedly, we couldn't find significant gender differences in total differentiation. By the way, our findings are consisted with Skowron (2004) and supports Bowen theory [13]. Bowen (1978, cited in Skowron & Friedlander, 1998) asserted that no gender differences exist on levels of differentiation. However [5,14]. Skowron and Friedlander's (1998) found women reported significantly greater ER than did men. The result was the same about existing gender differences on SOC. By the way, Larsson and Kallenberg (1996) reported men scored higher on SOC. In general, it seems women and men (at least among students), from different ways could reach to a consistent level of differentiation and SOC [8].

In sum, the findings showed the extent that people manage their thinking/feeling systems in their relationships are related with their SOC level, and generally can significantly predict it. The more their differentiation increase, the more they could improve their global orientation to life in a way promotes their health [10].

The findings could be used in family systems therapy, especially in "coaching" [10]. Which helps clients individually increase their differentiation in relationships. level of SOC could be a factor of client's differentiation level and in turn, shows the quality of his/her family as well; or it could be used as criteria for evaluating the usefulness of the therapy [19].

Our study was under some limitations, the most important was the sample size, which was the least appropriate size for correlational studies. The future study could investigate the relationship between our variables with an experimental design; or in a therapeutic context. Future research could also clarify the moderating/mediating role of differentiation between SOC and health.

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