




Comparing the Effectiveness of Compassion-Based Therapy with Cognitive-Behavioral Therapy on Social Well-Being and Hope for Life in Cancer Patients

Ensiyeh. Sharifpour¹, Hossein. Akbari Amarghan^{2*}, Hamid. Nejat³, Anis. Iranmanesh⁴

¹ Ph.D. Student, Department of Counseling, Mashhad Branch, Islamic Azad University, Mashhad, Iran

² Assistant Professor, Department of Counseling, Quchan Branch, Islamic Azad University, Quchan, Iran

³ Assistant Professor, Department of Educational Sciences, Mashhad Branch, Islamic Azad University, Mashhad, Iran

⁴ Associate Professor, Department of Mathematics and Statistics, Mashhad Branch, Islamic Azad University, Mashhad, Iran

* Corresponding author email address: drakbari54@yahoo.com

Article Info

Article type:

Original Research

How to cite this article:

Sharifpour, E., Akbari Amarghan, H., Nejat, H., & Iranmanesh, A. (2023). Comparing the Effectiveness of Compassion-Based Therapy with Cognitive-Behavioral Therapy on Social Well-Being and Hope for Life in Cancer Patients. *Journal of Assessment and Research in Applied Counseling*, 5(5), 62-68.

<http://dx.doi.org/10.61838/kman.jarac.5.5.8>



© 2023 the authors. Published by KMAN Publication Inc. (KMANPUB), Ontario, Canada. This is an open access article under the terms of the Creative Commons Attribution-NonCommercial 4.0 International (CC BY-NC 4.0) License.

ABSTRACT

Objective: The diagnosis of cancer and subsequent treatments cause psychological problems for many patients. The current research aimed to compare the effectiveness of compassion-based therapy with cognitive-behavioral therapy on the social well-being and hope for life of cancer patients.

Research Method: The research method was a quasi-experimental design with pre-test, post-test, a control group, and two experimental groups. The research population consisted of all cancer patients hospitalized in Imam Reza and Omid hospitals in Mashhad in the spring of 2021, from which 45 individuals were purposively selected and qualified to enter the study and were age-matched in two experimental and control groups. In this study, the Keyes' Social Well-being (1998) and Snyder's Hope Scale (2000) questionnaires were used. Data were analyzed using multivariate analysis of variance and follow-up tests with the multivariate covariance method by SPSS-23 software.

Findings: The results showed that in the post-test and follow-up, the average scores of social well-being ($F = 2.89$, $P = 0.003$) and hope for life ($F = 7.13$, $P = 0.001$) significantly increased in the experimental groups compared to the control. No significant difference was observed between compassion therapy and cognitive-behavioral therapy.

Conclusion: It seems that both compassion-based therapy and cognitive-behavioral therapy are effective in reducing psychological problems in cancer patients.

Keywords: Compassion-Based Therapy, Cognitive-Behavioral Therapy, Social Well-Being, Hope for Life, Cancer.

1. Introduction

Cancer is a significant health and medical challenge in the current century. It is a life-threatening disease that causes the death of over 7.6 million people worldwide annually. The diagnosis of cancer and its subsequent treatments often lead to psychological problems for many patients (Kamian, 2014). Many individuals diagnosed with cancer experience a period of psychological stress. In some patients, this stress dissipates on its own and does not lead to chronic psychological issues, being considered a natural adaptive reaction. However, some patients experience greater psychological harm, leading to a decrease in quality of life and daily functioning. The diagnosis of cancer and the chemotherapy process can adversely affect an individual's performance in various roles (Sabola et al., 2023), including social well-being (Pintado, 2017). The diagnosis of this disease as a highly stressful event and its difficult and complex treatment process create significant psychological turmoil in patients (Mousvi Diva et al., 2017). The numerous psychological and social issues that these patients often face can severely impact their social well-being and hope for life (Dupont et al., 2023). Social well-being is influenced by various factors, with life stress events being among the most significant and impactful. Thus, many researchers have studied the well-being of cancer patients using different research methods (Boehm, 2021). When an individual's well-being decreases, they may experience psychological problems, loneliness, isolation, and depression; factors that negatively affect the physical, psychological, and social dimensions of humans (Chai et al., 2019). Furthermore, if cancer patients possess high psychological flexibility, they have a better mental and psychological ability to understand situations and respond to stress and pressures (Leustek & Theiss, 2020).

Moreover, cancer has a more significant impact on hope for life compared to other chronic diseases (Proserpio et al., 2015). Hope for life, as an internal force, can enrich life and enable cancer patients to envision a future beyond their current disorderly and painful condition (Mansano-Schlosser et al., 2017). Syriopoulou and colleagues (Syriopoulou et al., 2017) state that cancer and its diagnosis negatively affect patients' hope for life, particularly impacting groups with social and economic limitations the most (Syriopoulou et al., 2017). Findings by Tan & Karabulutlu (2005) also confirm the presence of levels of despair in cancer patients (Tan & Karabulutlu, 2005).

To improve positive psychological characteristics such as hope for life and social well-being, there are various methods like cognitive-behavioral therapy and compassion-based therapy (Shirvani et al., 2019). Although these two methods have fundamental differences in their approaches and tactics, they believe that individuals' avoidance of emotions, feelings, unpleasant thoughts, and pains causes and exacerbates psychological problems (Lack et al., 2020). Compassion means gentleness and tenderness combined with a deep awareness of suffering and stress and striving for relief, including kindness to oneself in hardships and stressful experiences rather than self-judgment, the inevitable human commonalities of suffering and failure rather than isolation, and a balanced awareness of one's feelings and thoughts rather than excessive identification (Au et al., 2017). This therapeutic approach, recognizing the inevitability of suffering and stress and adopting a soothing and compassionate perspective towards oneself during stressful events, fosters a loving and accepting interaction with oneself (McLean et al., 2018). The research by Wilson et al. (2019) indicates the effectiveness of compassion-based therapy in enhancing psychological well-being (Wilson et al., 2019). Additionally, research by Taher-Karami et al. (2018) shows the effectiveness of compassion-based therapy in increasing resilience, hopefulness, and social well-being among menopausal women (Taher-Karami et al., 2018).

On the other hand, cognitive-behavioral therapy focuses on changing maladaptive cognitions and replacing them with functional ones (Bavadi et al., 2016) and helps patients identify and change their distorted patterns and dysfunctional behavior so that they can make desirable changes in their lives (Johannsen et al., 2018). Research has shown that changes in cognitions are an important part of adapting to a life-threatening illness like cancer, and individuals who believe they have the ability to control and challenge their irrational thoughts have a greater sense of control compared to those who lack this skill (Stefanopoulou & Grunfeld, 2017). Research findings indicate that changing irrational beliefs is associated with a reduction in psychological symptoms in cancer patients and acceptance of related conditions (Kangas et al., 2014).

Given the increasing prevalence of cancer in society as a serious risk to physical and mental health, examining psychological therapeutic methods to affect the psychological dimensions resulting from this phenomenon seems necessary. Since both cognitive-behavioral and compassion therapies have been effective and efficient methods in the field of mental health, but no comprehensive

research has been conducted on comparing these treatments on the research variables yet. Therefore, the purpose of the current research was to compare the effectiveness of compassion-based therapy with cognitive-behavioral therapy on the social well-being and hope for life of cancer patients.

2. Methods and Materials

2.1. Study Design and Participants

The present study was applied in aim and semi-experimental by design, incorporating a pre-test, post-test with a control group, and two experimental groups. The research population comprised all cancer patients hospitalized in Imam Reza and Omid hospitals in Mashhad during the spring of 2021. Out of these, 45 individuals who met the study's entry criteria and were willing to participate were purposively selected and randomly assigned to three groups: two experimental and one control. One experimental group received 10 sessions of cognitive-behavioral therapy in a group setting weekly, each lasting 90 minutes, while the other experimental group received 8 sessions of compassion-based therapy in a group setting weekly, each also lasting 90 minutes. The control group did not receive any treatment. Patients in both groups completed the research questionnaires both at the beginning and immediately after the interventions concluded. Inclusion criteria for the research were female cancer patients, aged between 30 to 70 years, diagnosed for at least 6 months, having at least a high school diploma, and scoring low on psychological well-being and hope for life questionnaires. Exclusion criteria included receiving psychotherapy outside of group sessions, lack of desire to continue participation, or absence from more than two therapy sessions.

Ethical considerations in this study ensured that participation was entirely voluntary. Participants were informed about the study details and regulations before commencement. The views and beliefs of individuals were respected. Members of the experimental and control groups were allowed to withdraw from the study at any stage. Additionally, members of the control group could receive the same intervention as the experimental group in similar therapeutic sessions after the study concluded. All documents, questionnaires, and confidential records were exclusively accessible to the investigators. Informed consent was obtained from all volunteers. Necessary permissions for conducting this study were acquired from the Ethics

Committee of the Islamic Azad University, Mashhad branch, with the identifier IR.IAU.MSHD.REC.1402.090.

2.2. Measures

2.2.1. Social Well-Being

The instrument used in the study was the 33-item Social Well-Being questionnaire developed by Keyes (1998) based on his theoretical model of the social well-being construct. Keyes used Cronbach's alpha to assess the questionnaire's reliability, obtaining scores of .57, .65, .81, .75, and .77 for social coherence, social actualization, social integration, social contribution, and social acceptance, respectively. In Iran, Heidari and Ghanaei found the overall Cronbach's alpha for the questionnaire to be .83 (Heidari & Ghanaei, 2008).

2.2.2. Hope

The Snyder Hope Scale, created in 2000 by Snyder et al., consists of 12 items rated on a five-point Likert scale from strongly disagree to strongly agree. Scores range from 0 to 48, with higher scores indicating greater hope and reflecting the individual's agency towards achieving goals and pathways to success. In the study by Fallah et al. (2011), the Cronbach's alpha of the questionnaire was calculated to be .79 (R. et al., 2011).

2.3. Interventions

2.3.1. Compassion-Based Therapy

Compassion-based therapy was conducted over eight weekly sessions lasting 90 minutes each, following the protocol by Gilbert (2009) (Gilbert, 2014), over two months.

2.3.2. Cognitive-Behavioral Therapy

Cognitive-behavioral therapy was conducted over ten weekly sessions lasting 90 minutes each, according to the protocol by Emami et al. (2018) (Emami et al., 2018), over two and a half months.

2.4. Data analysis

The first step in analyzing the collected data was to calculate descriptive statistics (mean, variance, and standard deviation) for the data, followed by inferential statistics to test the research hypotheses using multivariate analysis of

variance and follow-up tests with the multivariate covariance method, analyzed using SPSS-23 software.

3. Findings and Results

Demographic data indicated that 7 individuals, equivalent to 46.7% of the compassion-based therapy group, and 8 individuals from the cognitive-behavioral therapy group,

accounting for 53.3%, were women. 7 individuals in the control group, also representing 46.7%, were women. The mean age of individuals in the compassion-based therapy group was 66.33 years with a standard deviation of 5.98, while the mean age of individuals in the cognitive-behavioral therapy group was 68.87 years with a standard deviation of 4.24. The mean age of individuals in the control group was 69.2 years with a standard deviation of 3.05.

Table 1

Mean and Standard Deviation of Dependent Variables in the Experimental and Control Groups

Dependent Variables	Stage	Experimental Group Mean	Experimental Group SD	Control Group Mean	Control Group SD
Hope for Life	Pre-test	21.15	2.77	21.44	2.35
	Post-test	26.44	2.50	21.20	1.000
	Follow-up	26.17	2.76	21.24	1.012
Social Well-Being	Pre-test	67.67	5.40	65.92	6.11
	Post-test	80.10	5.78	66.90	6.10
	Follow-up	79.19	6.33	66.12	5.92

The results in Table 2 showed that after the interventions, there was a significant difference in the level of social well-being and hope for life among patients in the three groups of compassion-based therapy, cognitive-behavioral therapy,

and control ($p < 0.05$). The results from the covariance analysis indicated that there was a significant difference in the dependent variables of the study among the three groups ($p < 0.05$).

Table 2

Results of One-Way ANOVA for Within-Group and Between-Group Effects in Measuring Social Well-Being and Hope for Life

Variable	Source of Effect	Sum of Squares	Degrees of Freedom	Mean Square	F	Significance
Social Well-Being	Between-Group	425.73	2	212.86	2.89	0.003
	Within-Group	3091.06	42	73.59		
	Total	3516.8	44			
Hope for Life	Between-Group	546.31	2	273.15	7.13	0.002
	Within-Group	1607.33	42	38.27		
	Total	2153.64	44			

The results of the Tukey post-hoc test in Table 3 showed that there was a significant difference between the post-test scores of social well-being and hope for life in the compassion-based therapy group compared to the control, and also in the cognitive-behavioral therapy group compared

to the control ($p < 0.05$); however, there was no significant difference in the post-test scores of these two variables between the compassion-based therapy group and the cognitive-behavioral therapy group ($p > 0.05$).

Table 3

Tukey's Post-Hoc Test on the Effectiveness of Interventions

Dependent Variable	Group 1	Group 2	Mean Difference	Standard Error	Significance
Social Well-Being	Compassion-based	Cognitive-Behavioral	5.66	3.13	0.17
	Compassion-based	Control	7.13	3.13	0.04
	Cognitive-Behavioral	Control	1.46	3.13	0.02
Hope for Life	Compassion-based	Cognitive-Behavioral	6.80	2.25	0.88
	Compassion-based	Control	1.06	2.25	0.012
	Cognitive-Behavioral	Control	7.86	2.25	0.003

4. Discussion and Conclusion

The aim of the present study was to compare the effectiveness of compassion-based therapy with cognitive-behavioral therapy on social well-being and hope for life in cancer patients. The results showed that after the interventions, there was a significant difference in the level of social well-being among patients in the three groups of compassion-based therapy, cognitive-behavioral therapy, and control. These findings are consistent with the results of the study by Pinto-Gouveia et al. (2014), which indicated that compassion-based intervention therapy leads to the management of psychological outcomes of cancer by increasing psychological adaptability (Pinto-Gouveia et al., 2014), and also with the results of the study by Taher-Karami et al. (2018), which demonstrated the effectiveness of compassion therapy in increasing social well-being among women (Taher-Karami et al., 2018). Furthermore, Khalaj, Dolatshahi, and Bagheri (2018) in a study, showed that this therapeutic method significantly increases psychological well-being, hope for life, and psychological flexibility (Khalaj et al., 2020).

In compassion-based therapy, the individual indirectly increases realistic, effective, logical thinking, and reduces avoidance of psychological experiences by increasing awareness of their presence and focusing attention on the present moment, understanding the true meaning of life, and learning to free themselves from the turmoil caused by avoidance in order to reduce unpleasant internal experiences; in other words, the main mechanism of this therapy's effectiveness can be considered the improvement of functioning through increased psychological flexibility. Through this method, individuals can somewhat overcome the pains and thoughts associated with life's problems and prepare themselves for a future derived from a deep understanding of the meaning of life (Sabola et al., 2023; Tohidifar et al., 2021), thus potentially impacting social well-being. Compassion-focused therapy is particularly beneficial for individuals with cancer, as it teaches them to face the reality of their illness and its limitations, rather than feeling ashamed of the disease and its side effects or engaging in self-criticism. By strengthening a sense of gentleness and kindness towards themselves and others, patients gain the necessary awareness, emphasizing that illness and failure are not exclusive to certain individuals (Khalaj et al., 2020; Rostampour Brenjestanaki et al., 2020; Tohidifar et al., 2021). Therefore, the therapy aimed to

facilitate health and well-being in patients by helping them become aware of painful thoughts and feelings, enhancing their sense of self-efficacy.

Cognitive-behavioral therapy (CBT) can enhance social well-being by making patients aware of the negative impacts of emotions on their mental health and the benefits of a joyful life, motivating them to reduce negative emotions and thereby increase life's meaningfulness (Shahbazi et al., 2020). CBT educates individuals that, although they cannot change life's definite events, they can learn to alter their coping strategies. CBT interventions, by teaching behavioral techniques like relaxation, help patients reduce their psychological stress and improve their social relations and activities, thereby enhancing their social well-being (Emami et al., 2018).

The findings indicate significant differences in hope for life among patients in compassion-based therapy, CBT, and control groups after the interventions. This aligns with research showing psychological interventions improve cancer patients' hope (Rustøen et al., 2011; Shareh & Robati, 2021). Compassion-based therapy teaches kindness, self-understanding, avoiding excessive self-criticism, accepting difficulties, and inappropriate self-judgments, enhancing interpersonal intimacy, and psychological balance despite challenges (Tohidifar et al., 2021).

CBT patients also enhance their communication skills and social activities, boosting hope. Focusing on problem-solving skills helps patients familiarize themselves with automatic negative thoughts and learn to modify them, increasing life hope by familiarizing them with the negative impacts of adverse emotions (Emami et al., 2018).

Addressing cognitive-behavioral components in cancer is crucial for patients' stress reduction and adaptation. This approach, especially beneficial for cancer patients experiencing distress and sadness, can ultimately improve their psychological flexibility (Shahbazi et al., 2020).

5. Limitations & Suggestions

Both compassion-based therapy and CBT are effective in reducing psychological problems in cancer patients and are recommended alongside pharmacotherapy. The study faced limitations like a short follow-up period and reliance on self-reported questionnaires. Future research should consider both genders and different communities to enhance generalizability.

Acknowledgments

We would like to express our appreciation and gratitude to all those who cooperated in carrying out this study.

Declaration of Interest

The authors of this article declared no conflict of interest.

Ethics Considerations

The study protocol adhered to the principles outlined in the Helsinki Declaration, which provides guidelines for ethical research involving human participants.

References

- Au, T. M., Sauer-Zavala, S., King, M. W., Petrocchi, N., Barlow, D. H., & Litz, B. T. (2017). Compassion-Based Therapy for Trauma-Related Shame and Posttraumatic Stress: Initial Evaluation Using a Multiple Baseline Design. *Behavior therapy, 48*(2), 207-221. <https://doi.org/10.1016/j.beth.2016.11.012>
- Bavadi, B., Poursharifi, H., & Lotfi Kashani, F. (2016). The effectiveness of cognitive-behavioral therapy based 8-step pattern of cash to improve psychological well-being of women with breast cancer. *Iranian Quarterly Journal of Breast Disease, 8*(4), 41-51. http://www.ijbd.ir/browse.php?a_id=488&slc_lang=en&sid=1&printcase=1&hbnr=1&hmb=1
- Boehm, J. K. (2021). Positive psychological well-being and cardiovascular disease: Exploring mechanistic and developmental pathways. *Social and Personality Psychology Compass, 15*(6), e12599. <https://doi.org/10.1111/spc3.12599>
- Chai, X., Li, X., Ye, Z., Li, Y., & Lin, D. (2019). Subjective well-being among left-behind children in rural China: The role of ecological assets and individual strength. *Child: Care, Health and Development, 45*(1), 63-70. <https://doi.org/10.1111/cch.12630>
- Dupont, C., Gilissen, J., Dassen, F. C. M., Branco, R. M., Heins, P., Heffernan, E., & Bartels, S. L. (2023). Supporting early-career dementia researchers: Identifying support needs and ways forward via a European study. *Alzheimer's & Dementia, n/a*(n/a). <https://doi.org/10.1002/alz.13530>
- Emami, M., Askarizade, G., & Faziltpour, M. (2018). Effectiveness of cognitive-behavioral stress management group therapy on resilience and hope in women with breast cancer. *Positive Psychology Research, 3*(4), 1-14. https://ppls.ui.ac.ir/article_22634.html?lang=en
- Gilbert, P. (2014). The origins and nature of compassion focused therapy. *British Journal of Clinical Psychology, 53*(1), 6-41. <https://doi.org/10.1111/bjc.12043>
- Heidari, G. H., & Ghanaei, Z. (2008). The Normalization of Well-Being Social Inventory. https://scholar.google.com/scholar?lookup=0&q=Heidari+GH,+Ghanaei+Z.+The+normalization+of+well-being+social+inventory&hl=en&as_sdt=0,5
- Johannsen, M., O'Connor, M., O'Toole, M. S., Jensen, A. B., & Zachariae, R. (2018). Mindfulness-based Cognitive Therapy and Persistent Pain in Women Treated for Primary Breast Cancer: Exploring Possible Statistical Mediators: Results From a Randomized Controlled Trial. *The Clinical Journal of Pain, 34*(1). https://journals.lww.com/clinicalpain/fulltext/2018/01000/mindfulness_based_cognitive_therapy_and_persistent.9.aspx
- Kamian, S. (2014). Effectiveness of spiritual health education on increasing hope among breast cancer patients. *Iranian Journal of Health Education & Promotion, 2*(3), 208. <https://journal.ihepsa.ir/article-1-193-en.pdf>
- Kangas, M., Milross, C., & Bryant, R. A. (2014). A Brief, Early Cognitive-Behavioral Program for Cancer-Related PTSD, Anxiety, and Comorbid Depression. *Cognitive and Behavioral Practice, 21*(4), 416-431. <https://doi.org/10.1016/j.cbpra.2014.05.002>
- Khalaj, F., Dolatshahi, B., & Bagheri, F. (2020). Effects of Compassion-focused Therapy on Psychological Wellbeing, Life Expectancy, and Psychological Flexibility in Individuals With Human Immunodeficiency Virus [Research]. *Practice in Clinical Psychology, 8*(4), 317-324. <https://doi.org/10.32598/jpcp.8.4.726.1>
- Lack, S., Brown, R., & Kinser, P. A. (2020). An integrative review of yoga and mindfulness-based approaches for children and adolescents with asthma. *Journal of Pediatric Nursing, 52*, 76-81. <https://www.sciencedirect.com/science/article/pii/S0882596320300634>
- Leustek, J., & Theiss, J. A. (2020). Family communication patterns that predict perceptions of upheaval and psychological well-being for emerging adult children following late-life divorce. *Journal of Family Studies, 26*(2), 169-187. <https://doi.org/10.1080/13229400.2017.1352531>
- Mansano-Schlosser, T. C., Ceolim, M. F., & Valerio, T. D. (2017). Poor sleep quality, depression and hope before breast cancer surgery. *Applied Nursing Research, 34*, 7-11. <https://doi.org/10.1016/j.apnr.2016.11.010>
- McLean, L., Steindl, S. R., & Bambling, M. (2018). Compassion-Focused Therapy as an Intervention for Adult Survivors of Sexual Abuse. *Journal of Child Sexual Abuse, 27*(2), 161-175. <https://doi.org/10.1080/10538712.2017.1390718>
- Mousvi Diva, R., Moghadam, N., & Amani, O. (2017). Evaluating Family Functioning and Spiritual Health in Women with Breast Cancer, Cancer-Treated and Healthy Women [Research]. *Journal of nursing education, 5*(5), 49-56. <https://doi.org/10.21859/ijpn-05057>

Transparency of Data

In accordance with the principles of transparency and open research, we declare that all data and materials used in this study are available upon request.

Funding

This research was carried out independently with personal funding and without the financial support of any governmental or private institution or organization.

Authors' Contributions

All authors equally contributed to this article.

- Pinto-Gouveia, J., Duarte, C., Matos, M., & Fráguas, S. (2014). The Protective Role of Self-compassion in Relation to Psychopathology Symptoms and Quality of Life in Chronic and in Cancer Patients. *Clinical Psychology & Psychotherapy*, 21(4), 311-323. <https://doi.org/10.1002/cpp.1838>
- Proserpio, T., Ferrari, A., Vullo, S. L., Massimino, M., Clerici, C. A., Veneroni, L., Bresciani, C., Casali, P. G., Ferrari, M., Bossi, P., Galmozzi, G., Pierantozzi, A., Licitra, L., Marceglia, S., & Mariani, L. (2015). Hope in Cancer Patients: The Relational Domain as a Crucial Factor. *Tumori Journal*, 101(4), 447-454. <https://doi.org/10.5301/tj.5000366>
- R., F., M., G., M., D., & Me, A. (2011). Integrating Spirituality into a Group Psychotherapy Program for Women Surviving from Breast Cancer. *International Journal of Cancer Management*, 4(3), 141-. <https://www.magiran.com/paper/884246>
- Rostampour Brenjestanaki, M., Abbasi, G., & Mirzaian, B. (2020). Effectiveness of Compassion-focused Therapy on Psychological Flexibility recovery and Self-criticism decrease in Mothers with Mentally Retarded Children. *Biannual Journal of Applied Counseling*, 10(2), 1-18. <https://doi.org/10.22055/jac.2020.33836.1749>
- Rustøen, T., Cooper, B. A., & Miaskowski, C. (2011). A longitudinal study of the effects of a hope intervention on levels of hope and psychological distress in a community-based sample of oncology patients. *European Journal of Oncology Nursing*, 15(4), 351-357. <https://www.sciencedirect.com/science/article/pii/S1462388910001304>
- Sabola, N. E., Shattla, S. I., Sweelam, R. K., Shahin, M. A., & Shehata, H. S. (2023). Compassion-Based Intervention Protocol Effectiveness on Health-Related Outcomes of Women with Breast Cancer. *HIV Nursing*, 23(3), 923–934-923–934. <https://hivnursing.net/index.php/hiv/article/view/1853>
- Shahbazi, G., Moraveji, M., Keramati, S., Ghobadi Davod, R., Mohammadi, N., & Maryam, S. (2020). Comparison of the effectiveness of cognitive-behavioral and semantic therapy in a group manner on reducing perceived stress and improving the meaning of life in patients with breast cancer. *medical journal of mashhad university of medical sciences*, 63(4). https://mjms.mums.ac.ir/article_17870_en.html
- Shareh, H., & Robati, Z. (2021). Effect of Cognitive-Behavioral Group Therapy on Pain Self-efficacy, Fatigue, Life Expectancy and Depression in Patients With Multiple Sclerosis: A Randomized Controlled Clinical Trial [Original Research]. *Iranian Journal of Psychiatry and Clinical Psychology*, 26(4), 418-431. <https://doi.org/10.32598/ijpcp.26.3.225.11>
- Shirvani, S., Fallah, M. H., & Sedrpoushan, N. (2019). The Study of the Effectiveness of Compilation Parenting Education Based on ACT, CFT and Enriched Whit Islamic Teachings on First Elementary Children's self-esteem and Self-compassion of Their parents [Research Article]. *Iranian Journal of Educational Sociology*, 2(4), 44-55. <https://doi.org/10.29252/ijes.2.4.44>
- Stefanopoulou, E., & Grunfeld, E. A. (2017). Mind–body interventions for vasomotor symptoms in healthy menopausal women and breast cancer survivors. A systematic review. *Journal of Psychosomatic Obstetrics & Gynecology*, 38(3), 210-225. <https://doi.org/10.1080/0167482X.2016.1235147>
- Syriopoulou, E., Bower, H., Andersson, T. M. L., Lambert, P. C., & Rutherford, M. J. (2017). Estimating the impact of a cancer diagnosis on life expectancy by socio-economic group for a range of cancer types in England. *British Journal of Cancer*, 117(9), 1419-1426. <https://doi.org/10.1038/bjc.2017.300>
- Taher-Karami, Z., Hossieni, O., & Dasht Bozorgi, Z. (2018). Original Article The Effectiveness of Compassion-Focused Therapy on Resiliency, Self-discrepancy, Hope and Psychological Well-being of Menopausal Women in Ahvaz. *Journal of Community Health*, 5, 189-197. <https://doi.org/10.22037/ch.v5i3.19235>
- Tan, M., & Karabulutlu, E. (2005). Social Support and Hopelessness in Turkish Patients With Cancer. *Cancer Nursing*, 28(3). https://journals.lww.com/cancernursingonline/fulltext/2005/05000/social_support_and_hopelessness_in_turkish.13.aspx
- Tohidifar, M., Kazemianmoghadam, K., & Haroonrashidi, H. (2021). The Effectiveness of Compassion-Focused Therapy on Loneliness and Cognitive Flexibility in Elderly Men. *Journal of Psychological Studies*, 17(2), 97-116. https://psychstudies.alzahra.ac.ir/article_5811.html?lang=en
- Wilson, A. C., Mackintosh, K., Power, K., & Chan, S. W. Y. (2019). Effectiveness of Self-Compassion Related Therapies: a Systematic Review and Meta-analysis. *Mindfulness*, 10(6), 979-995. <https://doi.org/10.1007/s12671-018-1037-6>