

Exploration of Psychological Masochism Through the Perspective of Clinical Psychologists

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DOI: <https://doi.org/10.70670/sra.v4i1.2424>

Abstract

Psychological masochism is finding pleasure and satisfaction in pain and suffering. It has a Hallmark outward manifestation of psychological phenomenon, in which individuals engage in activities that lead to their otherwise avoid-able suffering (Bekes, et al., 2016). The study of masochistic or self-defeating personality patterns is particularly relevant in Pakistani society, where endurance, sacrifice, and compromise are often highly valued. This study aims to explore the manifestation of psychological masochism in Pakistani cultural context, through the perspective of clinical psychologist. A qualitative research design was employed to explore and understand clinical psychologists' experiences and perspectives regarding psychological masochism. Data were collected through interviews with clinical psychologists using purposive sampling. Practicing Clinical psychologists with 5+ years of experience working with individuals aged 18-40 years were recruited in the study. A thematic analysis approach was used to identify patterns and themes from the interview data. The analysis resulted in the identification of two major themes, interpersonal comprising four sub-themes and Intrapersonal comprising five sub-themes, yielding a total of nine sub-themes. Two major themes were interpersonal and intrapersonal themes. Interpersonal themes included, Guilt-induction/Blaming others, Excessive Self-Sacrifice, Victim Identity, and Attention Seeking. While Intrapersonal themes included Self-Hate Guilt, Negativity Bias and Self-Defeating Behavior, Negative Self-Concept, Lack of Positive Affect, and Religious and Cultural Aspect.

Key Words: Psychological Masochism, Interpersonal, Intrapersonal

Introduction

Have you ever noticed the core theme of Pakistani dramas where the positive lead characters are seen to be excessively self-sacrificing and stay in suffering to nurture others and maintaining harmony within families? Have you seen people who watch tragedy movies or read tragedies? Have you ever seen people watching videos of accidents, and painful tragedies with visible discomfort, but choosing to watch to the end? All these individuals are manifestations of Psychological Masochism. Psychological Masochism refers to seeking pleasure and satisfaction through suffering and pain, as well as staying in otherwise avoidable suffering (Bekes et al., 2016). The masochistic personality disorder overlapped more than 50% with Borderline Personality Disorder, Avoidant Personality Disorder, and Dependent Personality Disorder,

indicating that many individuals who met criteria for masochistic personality disorder also displayed features of these disorders (Reich, 1987). Moreover, in the normal population, these traits are manifested as ordinary traits such as being adaptable, self-sacrificing, obedient, kind, thoughtful, and charitable, and enduring everything for loved ones (Millon, 2017). At the pathological end, masochism becomes self-defeating, as individuals seek failure or mistreatment, reject help, avoid pleasure, and engage in excessive self-sacrifice (Stone, 1993).

Psychological masochism, also known as psychic masochism, is defined as finding pleasure and satisfaction in pain and suffering. Masochistic personality traits are ordinary characteristics that may be seen in every person, however these are on a spectrum, if these traits increase in intensity, frequency and duration and cause dysfunctionality in social domain as well as cause psychological and emotional distress, due to associated negative motives and traits, these traits start giving an image of pathology. Masochism exists in varying degrees, as self-destructiveness can characterize anyone from psychotic self-mutilator to the one who works excessively at the cost of all other needs and desires. Moral masochists range from legendary martyrs to loving mothers (McWilliam, 1994).

The term masochism was first introduced by Krafft-Ebing on the name Australian novelist Sacher-Masoch, who wrote novels about men who are being tormented and humiliated by women. Krafft-Ebing defined masochism as wish to suffer and be dominated. However, he specifically defined it as a sexual behavior (Baumister, 1988).

Sigmund Freud gave the non-sexual version of masochism. He gave three types of masochism in 1924, sexual masochism, feminine masochism, and moral masochism. Sexual masochism is the same as explained by Krafft-Ebing, which is deriving erotic pleasure through pain, humiliation, and suffering. Where feminine masochism is the attribution of female characteristics by males. However, moral masochism is also known as psychic masochism. He gave the non-sexual version of masochism for the first time. According to Freud, it is a behavior associated with feelings of guilt and a need for punishment. He associated moral masochism with superego. Moral masochism is seeking of self-sabotaging and self-defeating behaviors due to unconscious guilt to attain moral balance (Freud, 1924). Freud related moral masochism with the need for punishment, unconscious guilt, and the death instinct which is directed inward. He also made an antonym analogy of masochism with sadism, and referring it as sadism directed towards self.

Contemporary theories conceptualize psychological masochism as maladaptive personality patterns. American Psychiatric Association included self-defeating personality disorder in DSM-III-R in 1994, which included self-defeating patterns, disregarding happiness, self-devaluation, submission, disregarding successful opportunities and staying in toxic relationships (American Psychiatric Association, 1994). It was later removed from subsequent versions of DSM because of its overlapping with other personality disorders making it difficult for clinicians to give an exclusive diagnosis of Self-Defeating Personality disorder. Moreover, it was argued that this diagnosis pathologies individuals who are actually the victims of abuse. Alongside, it was assumed to be typical behavior of females.

Role of Guilt in the Development of Self-Defeating Behavior

Inbar, Pizarro, Gilovich, and Ariely (2013) conducted an analysis of the connection between guilt and self-punishment using the concept of moral masochism. The hypothesis of the researchers was that guilty people are motivated by their guilt to suffer for the sake of restoring their moral balance. To confirm the hypotheses, the participants were encouraged to remember either guilt-inducing events, sad events, or neutral situations. Then, the participants had a chance to shock themselves with electricity. It was found that people, who remembered the events that induced guilt, used much stronger shocks compared to those who remembered sad and neutral events. Therefore, it was proven that the feeling of guilt promotes self-punishment but not just any

negative emotion. Moreover, it was observed that people who shocked themselves more felt less guilty. Therefore, it was clear that self-punishment was a form of atonement. The researchers proved the hypothesis that guilt could make people to self-punish themselves physically unconsciously as a result. Guilt-induced self-punishment can be related to self-harm behaviors and other forms of relieving from guilt including helping people and cleansing rituals (Inbar et al., 2013).

Statistics of Psychological Masochism

Reich studied 82 psychiatric outpatients and 40 non-patient volunteers using structured personality assessment measures to determine the prevalence of DSM-III-R self-defeating (masochistic) personality disorder. The results showed that 18.3% (15 out of 82) of the outpatients and 5% (2 out of 40) of the normal sample had self-defeating personality disorder (Reich, 1987). Past studies indicate that Self-Defeating Personality Disorder (SDPD) is relatively rare in the general population, but more common in clinical settings. Studies conducted in the community reported incidences of 0.8% for SDPD (Torgersen, Kringlen, & Cramer, 2001).

Research shows that masochistic tendencies are more common in females than in males. In past times, masochism had been associated with the feminine and women's submissive nature. Also, among women, those who were abused show more masochistic tendencies (McWilliam, 1991). Blum (1977) claimed that no evidence can be found that women are more masochistic than men.

Cultural and Religious Context

In a comparative study of young men from Pakistan and the UK, Pakistani men reported less equality based gender beliefs, placed greater importance on masculinity, and were less willing to seek psychological help. Traditional masculinity beliefs were associated with lower help-seeking intentions, suggesting that patriarchal gender norms may discourage emotional expression and support-seeking among Pakistani men (Visser, et al., 2020).

Pakistani gender norms promote women's subordination through restricted autonomy, limited decision-making power, and expectations of obedience and self-sacrifice. These norms are associated with low self-esteem, lack of confidence, anxiety, stress, and acceptance of abuse, demonstrating the significant impact of gender roles on women's psychological well-being and life experiences (Rizvi et al. 2014).

Islam teaches us self-care, as the Holy Prophet ﷺ says, “Your self has a right over you, and your body has a right over you” (Sahih al-Bukhari, 6134). The Quran also prohibits self-harm, “And do not throw yourselves into destruction with your own hands” (Al-Quran, 2:195). If Islam teaches us rights of human beings, alongside it teaches us about the rights of self, that one must not be hard with self. There is a pattern of staying and choosing toxic relationships in moral/psychological masochism, however in Islam, there is prohibition to deliberately choose bad circumstances for self. Similarly, masochistic individuals stay in their problems and do not try to get rid of them, whereas the Holy Prophet ﷺ says, “O servants of Allah, seek treatment, for Allah has not created a disease except that He has also created its cure” (Jami' at-Tirmidhi, 2038).

Significance of the Study

The present study aims to explore Psychological Masochism through the perspective of clinical psychologists. Psychological Masochism refers to seeking pleasure and satisfaction through suffering and pain, as well as staying in otherwise avoidable suffering (Bekes et al., 2016). A considerable number of individuals seek behaviors that result in disappointment, suffering, and pain. Psychological masochism mainly comprises, psychological and emotional suffering, while a smaller portion includes physical pain, excluding any sexual component. Most of the disorders including depression, anxiety, borderline personality disorder, and avoidant personality disorder,

have underlying features of psychological masochism (Reich, 1994). Individuals suffering from any of these disorders having features of psychological masochism, have the tendency to pathologize more than those with no such tendencies. These individuals can take themselves into depression and other mental pathologies to seek attention and satisfaction through their suffering. Most of the trends these days are manifestations of psychological masochism. The generalization of terminologies such as trauma, depression, anxiety etc., is a manifestation of psychological Masochism. As individuals seek attention and satisfaction by portraying themselves in a miserable state. Moreover, there is an increasing trend of self-diagnosis among individuals. They want themselves to be diagnosed with any illness. A recent Pakistani review reported that approximately 75% of Pakistanis self-diagnose themselves at least once in their lifetime. It was also noted that many individuals rely on internet information and informal sources rather than professional assessment (Ehtesham, et al., 2025).

Psychological masochism remains an underexplored construct, particularly in non-Western contexts. In Pakistan, psychological masochism has received little to no empirical attention. This gap is important given the potential prevalence of self-defeating and self-sacrificing tendencies within the sociocultural context.

Objective of the Study

To explore psychological masochism through the perspective of clinical psychologists.

Research Questions

- How is the phenomenon of psychological masochism clinically presented?
- What are the behaviors, cognitions, and emotions of the individuals who present with clinically significant psychological masochism?
- How are their relationships and daily functioning affected due to psychological masochism tendencies?

Method

The present study aims to explore psychological Masochism through the perspective of clinical psychologists. It comprises a qualitative research design. The upcoming section provides detailed account of methodology and procedure of the qualitative study.

Research Design

A qualitative research design was used to better understand ideas, opinions, or experiences related to psychological masochism. A qualitative research strategy called phenomenological research was used which aims to comprehend and characterize a phenomenon's fundamental elements.

Sampling Strategy and Sample Characteristics

A purposive sampling strategy was employed in this qualitative study. The sample comprised clinical psychologists working in different clinical, hospital, rehabilitation, and academic settings in Lahore, Pakistan. Participants were approached through their contact information. Clinical psychologists who were actively practicing and had experience working with individuals aged 18-40 years were recruited for the study. All participants had 5+ years of clinical experience and were between 30 and 40 years of age. Participants were recruited from different clinical settings, contributing a variety of professional perspectives. Clinical psychologists who were not currently involved in clinical practice, provided incomplete or insufficient information during the interview process were excluded from the study.

Procedure

Detailed review of the theoretical construct was done prior to make an interview guide. An Interview guide was developed on the basis of previous literature. Interviews were conducted using the interview guide from clinical psychologists, because they deal with individuals who exhibit psychological masochism leading to clinical attention. After presenting participant information sheet and taking informed consent, demographic sheet was filled by participants. A total of 8 clinical psychologists were contacted, out of whom only 5 agreed to participate in the study. Thus, the final sample consisted of 6 clinical psychologists with substantial professional experience in clinical assessment and psychotherapy.

Table 2.1

Shows Demographics of Participants

No.	Age	Gender	Education	Designation	Experience	Marital status
P1	34	Female	PhD	Senior Clinical psychologist	9.5 years	Married
P2	30	Female	MS-CP	Senior Clinical psychologist	7 years	Unmarried
P3	32	Female	MS-CP	Senior Clinical psychologist	7+ years	Married
P4	34	Female	MS-CP	Senior Clinical psychologist	8 years	Married
P5	32	Female	MS-CP	Clinical psychologist	7 years	Unmarried
P6	36	Male	PhD	Senior lecturer	6+ years	Married

All the ethical considerations were kept in mind such as taking departmental permissions, taking informed consent and explained the purpose of the study, confidentiality, voluntary participation, and the participant's right to withdraw at any time.

Result

This study aimed to explore the manifestation of psychological masochism through the perspective of clinical psychologist. This section will be discussing the results of qualitative study, in the form of themes derived from interviews, and verbatim of participants supporting themes. The research analysis process of thematic analysis was done to identify themes and patterns within qualitative data. It involves the identification of themes through careful reading and re-reading of the transcribed data (Braun & Clarke, 2006). The identified themes are given in figure 4.1.

Themes Derived from Interviews

The data collected through interviews were evaluated using a thematic analysis procedure, which yielded two major themes and four sub-themes for first major theme and five for the other.

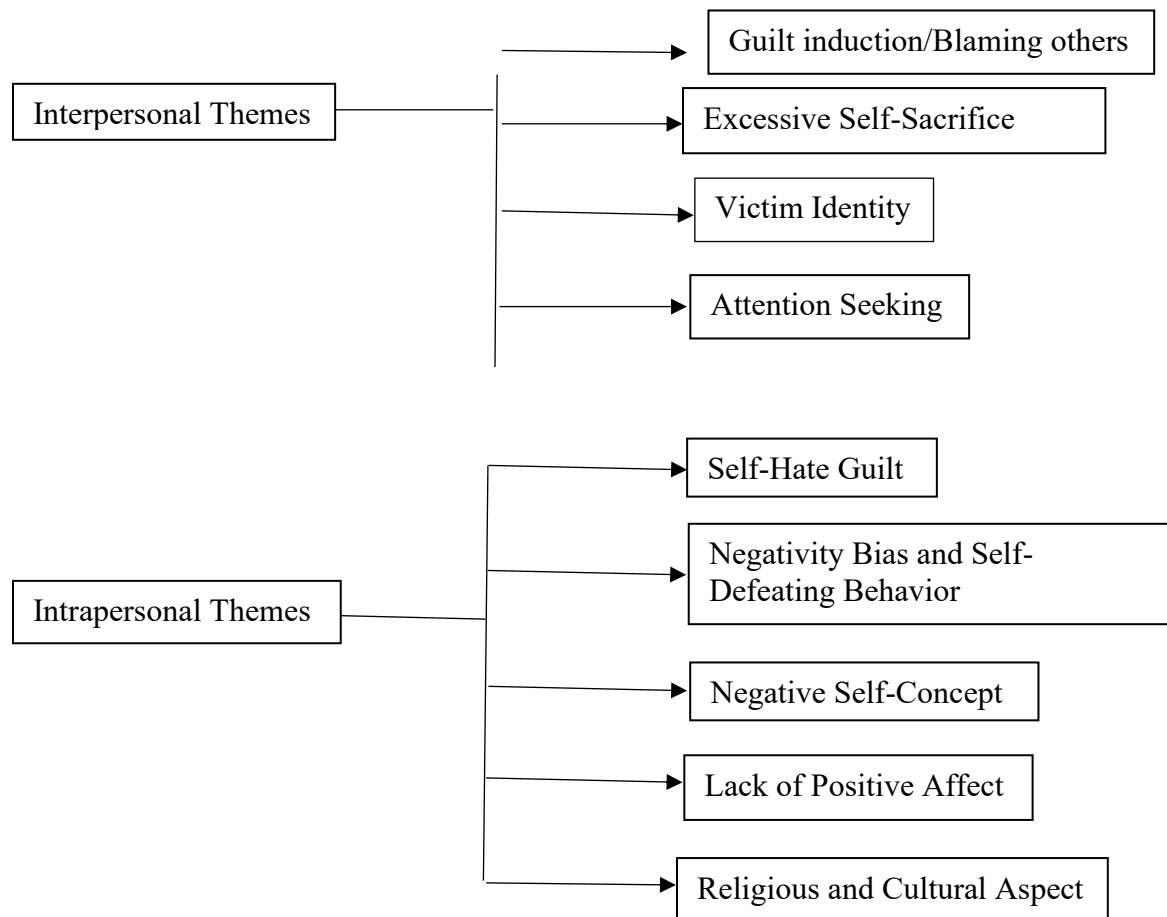


Figure 4.1 Presents Major Themes along with Sub-themes revealed in the study.

Interpersonal Themes

These include all the themes related to interactions and relationships with others, including guilt induction/blaming others, excessive self-sacrifice and people pleasing, victim identity, staying in toxic relationships, and attention-seeking behaviors.

Guilt induction/Blaming others

Guilt Induction or blaming others is the most frequent theme found in interviews. Such as Participant 4 said that:

What we say creating emotional emptiness, such people do so much self-sacrifice that they later use it to makes the other person feel guilty, trying to end the relationship.	جس کو ہم کہتے ہیں emotional emptiness create کرنا، اس طرح کے لوگ اتنا زیادہ self-sacrifice کرتے ہیں کہ پھر وہ اس کو استعمال کرتے ہیں کہ جب کوئی ان سے relationship ختم کرتا ہے تو اسے guilt ہوتا ہے۔
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Participant 5 said:

For them, other people are always responsible for their problems.	انکے نزدیک مشکلات کا زمہ دار ہمیشہ دوسرے لوگ ہی ہوتے ہیں۔
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These examples from interviews confirms the theme guilt induction/blaming others.

Excessive self-sacrifice and people pleasing

Excessive Self-Sacrifice and People Pleasing is also a prevalent theme among all interviews. As participant 1 said:

A major phenomenon underlying masochism is that their survival depends on their habit of giving only. They believe that if they do not keep giving, their survival is not possible and they will lose control. They feel having control only when they are on the giving end. Otherwise, they would think that control is not in their hands. Instead, when someone starts doing more for them, it feels unfamiliar to them.	جو ایک بہت بڑا phenomena ہے، masochism کے پیچھے کہ their survival depends upon their habit of giving only۔ انہیں لگتا ہے کہ وہ اگر دیں گے نہیں ناتو ان کا survival ممکن نہیں ہے اور وہ control lose کر دیں گے۔ انہیں control لگتا ہی تب ہے جب وہ صرف giving end پر ہو۔ Otherwise they would think کہ ان کے ہاتھ میں control نہیں ہے بلکہ ان کا جب کوئی زیادہ کرنے لگے گا تو یہ ایک unfamiliar چیز ہوگی۔
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Victim Identity

Victim Identity is the internalization of suffering, and labeling self as miserable, poor, alone, and victim.

Participant 1 said:

Some of them engage in a great deal of pain talk, saying things like, 'We are so helpless,' 'We have been treated unfairly,' or 'We are victims.' When they are sad or distressed, they talk excessively about their pain and suffering.	ان میں کچھ لوگ ایسے ہیں جو بہت زیادہ pain talk کرتے ہیں کہ ہم بہت بیچارے ہمارے ساتھ نا انصافی ہوئی ہم مظلوم ہیں وغیرہ۔ یہ لوگ جب اداس یا پریشان ہوتے ہیں تو pain talk بہت زیادہ کرتے ہیں۔
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Participant 5 said:

They tend to focus more on their own difficulties, exhibiting the cognitive bias of magnification, where they only see their problems, having believes such as only bad things always happen to me, bad things will keep happening to me, or only bad experiences kept happening to me.	انہیں اپنی مشکلات زیادہ نظر آتی ہیں، magnification کا cognitive bias ہوتا ہے، کہ بس اپنی مشکلات نظر آتی ہیں، کہ میرے ساتھ ہمیشہ برا ہی ہوتا ہے، میرے ساتھ برا ہی ہوگا، میرے ساتھ برا ہی ہوتا رہا ہے جیسے belief ہوتے ہیں۔
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These examples from interviews define the theme of victim Identity.

Attention seeking

Attention seeking theme was also observed in interviews.

Such as Participant 5 said:

These people perform vulnerability so that they start receiving attention from others and achieve others validation. Thus we call this performative vulnerability.	یہ لوگ vulnerability perform کرتے ہیں تاکہ اگلوں کی attention انکو ملنا شروع ہو جائے اور اگلوں کی validation ملنا شروع ہو جائے تو اسے ہم performative vulnerability کہتے ہیں۔
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Participant 3 said:

Such people put sad statuses or sad posts so that they can receive attention from others.	اس طرح کے لوگ sad status یا sad posts لگاتے ہیں تاکہ لوگوں سے attention ملے۔
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Intrapersonal Themes

It includes all the personal traits of individuals with psychological masochism. Almost all the interviews explained two categories of traits, these include Self-hate guilt, Negativity Bias and

Self-Defeating Behavior, negative self-concept and Abandonment anxiety, lack of positive affect and religious and cultural aspects.

Self-Hate Guilt

Self-hate guilt was present in almost all interviews, that masochistic individuals have extreme self-hate guilt as a driving force behind their self-defeating behaviors.

Participant 1 said:

These people do not forgive themselves for their mistakes, and they experience guilt. Then, they do not get out of their guilt.	یہ لوگ غلطی پر خود کو معاف نہیں کرتے، اور ان میں guilt آتا ہے، پھر جب لوگ اس guilt سے نکلتے بھی نہیں ہیں۔
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Participant 2 said:

When they fulfill any of their own needs instead of others, they feel guilt.	جب وہ دوسروں کی بجائے میں اپنی کوئی ضرورت پوری کرتے ہیں تو ان میں guilt آ جاتا ہے۔
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Negativity Bias and Self-Defeating Behavior

Negativity Bias and Self-Defeating Behavior is a very common explanation of psychological masochism among all interviews. Participant 1 said:

They will dismiss their own happiness and look for something negative or painful to focus on, so that their conscience can feel satisfied.	یہ اپنی happiness کو dismiss کر دیں گے اور وہ ڈھونڈیں گے کہ کہیں سے ہمیں کوئی negative بات مل جائے یا painful بات مل جائے تاکہ ہمارا conscience satisfy ہو جائے۔
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Similarly, participant 2 said:

They keep rejecting opportunities; we can say well-paying opportunities or opportunities in more competitive environments. They do not seek such opportunities, or they do not avail these opportunities much. As a result, they often remain stuck in certain jobs or circumstances that their success rate does not improve.	وہ opportunities جو کہ well-paying opportunities کو یا جو زیادہ competitive environment کی opportunities ہوتی ہیں وہ اس کو بہت زیادہ deny کرتے رہتے ہیں۔ وہ ان opportunities کو seek نہیں کرتے یا ان opportunities کو بہت زیادہ avail نہیں کرتے جس کی وجہ سے وہ ہمیشہ کچھ اس طرح کی jobs میں یا کچھ اس طرح کے circumstances میں stuck رہتے ہیں کہ ان کی success rate کو وہ improve نہیں ہو پاتا۔
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Negative Self Concept

Negative Self Concept is evident theme in various interviews.

Such as participant 2 said:

Such people always think negatively about themselves, saying things like, I am a failure. I cannot do anything in life. My life is full of question marks. I do not understand what to do. No one ever understands me. And whatever I do, no one will ever get happy with me.	اس طرح کے لوگ اپنے بارے میں negative ہی سوچتے ہیں کہ I am a failure میں کچھ کر ہی نہیں سکتا زندگی میں۔ زندگی میں تو بہت question mark ہے۔ مجھے سمجھ میں نہیں آتی میں کیا کروں۔ مجھے کبھی کوئی understand ہی نہیں کرتا ہے اور میں جو مرضی کر لوں، مجھ سے کبھی کوئی خوش ہی نہیں ہوگا۔
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Lack of positive affect

Lack of positive affect is a theme that can be observed as prevalent among interviews. Such as Participant 2 said:

If something is being added to their life, they are getting any happiness, if a change is coming, or if they are getting an opportunity, they will disregard it. Even if they have a positive experience with the same person with whom they have conflict, they will disregard or devalue that positive experience. Instead, they will give more value to, or overvalue, the conflict or the source from which they are having pain.	کوئی addition ہو رہا ہے ان کی life میں، کوئی change آ رہا ہے، کوئی خوشی مل رہی ہے، کوئی opportunity اور کوئی اور opportunity مل رہی ہے اس کو وہ ہر چیز میں disregard کر دیں گے یا even جس کے ساتھ conflict ہے اسی person کے ساتھ اگر کوئی اچھا experience ہو رہا ہے تو وہ اس اچھے experience کو بھی disregard کر دیں گے، devalue کر دیں گے اور اس چیز کو زیادہ value دیں گے یا اس چیز کو overvalue کریں گے جو ان کا conflict ہوگا یا جہاں پر سے ان کو pain مل رہی ہوگی۔
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These examples from interviews drive the theme of lack of positive affect.

Cultural and Religious aspects

It is a unique theme identified in one interview only.

Participant 1 said:

It is not only female clients, there are male clients also. In our society, these ideas are portrayed in this way because, it is evident, that a male is also raised by a mother. People are taught or made to believe that not prioritizing oneself, putting oneself behind, and giving importance to others is the right way to live. And, males are supposed to be strong, and a sign of that strength is to endure hardships without complaint. It is very common in any situation to hear the phrase, 'Men do not cry.'	صرف female نہیں male clients بھی ہیں، ہماری society میں ایسے portray کیا جاتا ہے کیونکہ ظاہر ہے male کی بھی تربیت کر تو ایک ماں ہی رہی ہے نا۔ تو ایسے portray کیا جاتا ہے یا سمجھا جاتا ہے کہ اپنے آپ کو ترجیح نہ دینا، خود کو پیچھے کرنا، دوسرے کو importance دینا، is the right way، اور males are supposed to be strong اور اس کی نشانی یہ ہے کہ وہ تکالیف کا بغیر شکایت کیے سامنا کرتا ہے جیسے بہت عام ہے کہ کسی بھی صورت حال میں کہہ دیتے ہیں "مرد روتا نہیں ہے"۔
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She further said,

Perhaps Islam promotes this, or may be Islam is interpreted in this way. No doubt, Islam teaches that you should keep compassion towards others, if you do a favor it will be virtuous. However, one part about the religion, about Islam, which is not communicated as much is that Islam also places great importance on the self. Ultimately, a person will first be held accountable for their own actions.	شاید یہ Islam promote کرتا ہے اور Islam کو لیا ہی ایسے جاتا ہے۔ No doubt Islam یہ کہتا ہے کہ آپ دوسرے کے ساتھ رحم کا یہاں معاملہ رکھیں یا آپ اگر احسان کر دیں تو بہت اچھے زمرے میں ہیں لیکن one part about the religion about Islam which no جو ہمیں اتنا communicate نہیں کیا جاتا وہ یہ کہ Islam self کو importance بہت زیادہ دیتا ہے کہ آپ اپنے آپ کو بھی آپ سے سب سے پہلے اپنے اعمال کا حساب دیا جائے گا۔
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Discussion

Discussion will be divided in two sections, first section will be discussing interpersonal themes and the second section will be discussing intrapersonal themes.

Interpersonal themes include four themes, Guilt Induction/Blaming others, Excessive Self-Sacrifice, Victim Identity and Attention seeking.

First theme guilt induction and blaming. The present study reveals that Guilt Induction/Blaming others is a very common theme in psychological masochism. Deleuze also signifies the importance of guilt, he believed that it is usually reversed, more indirect, it is guilt induction in

another person. Guilt is shifted onto someone else (Deleuze, 1991). During therapy these individuals emphasize the role of others in hurting the client, and making therapist feel that they need compensation (McWilliam, 1994). A prevalence study conducted among Pakistani adolescents revealed that 13.83% (174 out of 1,258) of the participants show clinical range of Blaming Others cognitive distortion. This finding shows that a considerable proportion of adolescents tend to attribute responsibility for their mistakes, problems, and negative outcomes to others rather than accepting personal accountability (Ishrat & Naz, 2020).

The second theme is excessive self-sacrifice related to self-sacrificing tendencies, characterized by neglecting one's own needs, emotions, and fulfill others expectations. The present study reveals that our culture and religious interpretations promote prioritizing others and sacrificing. Literature also reveals that masochistic individuals are excessively self-sacrificing in nature. They do excessive self-sacrifice to attain moral superiority (Psychodynamic Diagnostic Manual, 2017). The third theme is victim identity, related to perceiving oneself as persistently suffering, centralizing personal distress, habitual endurance of pain, labeling oneself as victim, and considering pain tolerance a characteristic and part of identity. Literature also supports that masochistic individuals use defense mechanism of victim entitlement, to gain attention and maintain relationships they believe that maybe if they keep demonstrating how hurt or needy they are nobody will leave them. It also related with the concept of introjective masochism, in which the patient holds suffering as a badge of personal superiority (McWilliam, 1994).

The last theme of interpersonal themes is attention seeking, characterized by masochistic traits to seek attention and validation through pain talk, victim narrative and self-harm. Literature suggests that a masochist not only accepts but even seeks suffering and presents it in the way of martyrdom, it is not because he wants to suffer and to punish himself, it is because suffering gives him a feeling of increased love, worthiness and attention (Berliner, 1958). For masochistic individuals if the only way to attract someone's attention, to feel love and affection, is to remain in a difficult situation, to suffer, to be victimized, to have an accident, to fall ill, then the person will unconsciously create these experiences (Kesar, 2022).

One of the main features of the Pakistani culture is collectivism, when people are socialized to be more interested in the good of their family and social groups than their personal benefits. Soomro and Memon (2010) discovered that the Pakistani respondents showed significantly higher scores of both horizontal and vertical collectivism because of strong family ties, high religiosity, and readiness to sacrifice their own interests in favor of the in-group. Pakistani society is characterized by a high level of importance of social acceptance, conformity, reciprocity, and harmonious interpersonal relations. Despite the fact that urbanization and globalization bring individualistic values into the Pakistani society, collectivistic values remain crucial for the establishment of interpersonal relations, family responsibilities, and readiness to make sacrifices in the Pakistani cultural context (Soomro & Memon, 2010). Thus, the collectivistic culture of Pakistan promotes psychological masochism.

The second major theme, Intrapersonal themes, also includes five themes, Self-Hate Guilt, Negativity Bias and Self-Defeating Behavior, Negative Self-Concept, Lack of Positive Affect, and Religious and Cultural Aspect.

The first intrapersonal theme is Self-Hate guilt, characterized by excessive guilt after mistakes or refusal, difficulty forgiving oneself, guilt over saying no to others and guilt over need fulfillment. Literature also supports this type of guilt. Millon says even when these individuals obtain successful outcomes, they feel guilt and anxiety instead of joy and happiness (Millon, 2017). When a person engages in any pleasurable action or fantasy, they may be subjected to sadistic punishment by the superego through guilt. Similarly, superego punishes on mistakes (Freud, 1924).

The second intrapersonal theme is Negativity bias and self-defeating behavior. These items are characterized by persistent focus on distressing thoughts, passive endurance of suffering, taking no action despite available solutions, selective attention to negative experiences, and engaging in harmful coping behaviors despite awareness of their consequences. According to literature, persons with clinical-level masochistic patterns seem to chase failure, mistreatment, disappointment, boredom, and sadness, and close their doors to things that would bring joy (Keser, 2022). Masochistic individuals believe that everything will end in catastrophe, and expect to be victimized (Millon, 2017).

The third theme is Negative Self Concept characterized by belief of being a failure and worthlessness, fear of failure, and a belief that one deserves criticism and humiliation. Menaker related moral masochism with self-image, which is formed in early childhood through the relationship with the mother. He says that our self-image is derived from two main sources which are one's own experiences of capability, and attitude and judgement of important people in their lives, such as mother. When the mother is rejecting the child develops a sense of unworthiness, yet due to the need of love, the child directs all negative feelings towards self while keeping mother idealized. Thus developing self-blame, self-devaluation, worthlessness and acceptance of all suffering (Menaker, 1953).

The fourth theme is lack of positive affect characterized by reduced ability to experience happiness, beliefs of undeserving of happiness, and avoidance of pleasurable activities. Literature reveals that masochistic individuals are unable to take pleasure from positive life events (American Psychiatric Association, 1989). Persons with clinical-level masochistic patterns seem to chase failure, mistreatment, disappointment, boredom, and sadness, and close their doors to things that would bring joy (Keser, 2022).

The last theme is Religious and Cultural Aspect characterized by selective interpretation of religious teachings and social norms related to particular gender roles, such as females being submissive, caring and compromising while males being pain enduring and self-sacrificing. The theme of Religious and Cultural Aspect is supported by literature from Pakistan indicating that religious beliefs and collectivistic cultural values play a significant role in shaping attitudes toward self-sacrifice and endurance of suffering. In Pakistani society, patience (sabr), sacrifice for others, and tolerance of suffering are considered as virtuous qualities reinforced through both cultural socialization and religious teachings. Pakistan's collectivistic culture promotes prioritization of family and social obligations over personal needs, promoting self-sacrificing behaviors and emotional restraint to maintain interpersonal harmony (Khan & Watson, 2006).

Conclusion

The study explored psychological masochism through the perspective of clinical psychologists, using qualitative research design. In-person interviews were conducted from eight clinical psychologists with 5+ years of work experience. Using Thematic analysis approach 2 major, Interpersonal and Intrapersonal, were identified. The findings of this study suggest that psychological masochism is a multidimensional construct comprising both interpersonal and intrapersonal themes.

Limitations of the Study

Although interviews were audio-recorded, occasional environmental distractions occurred during some interviews. These factors may have affected the clarity of recordings and the completeness of data retrieval during transcription and analysis.

Strengths of the Study

This study included clinical psychologists from diverse clinical settings, ensuring a broader range of professional experiences and viewpoints. Five in-depth interviews were conducted, which strengthened the richness, depth, and credibility of the qualitative data.

Implications of the study

The present study is the first exploratory study in Pakistan to study psychological masochism, providing a foundation for future indigenous researches. Moreover, the present study highlights a neglected behavioral and personality-related issue, encouraging researchers and mental health professionals to further investigate the phenomenon and develop culturally relevant assessment, prevention, and intervention measures to address this issue.

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