



Comparison of the effectiveness of two therapeutic approaches based on acceptance and commitment and emotion-oriented therapy on the level of perceived stress, chronic pain and adherence to treatment in diabetic elderly

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Abstract

Aim: One of the most important challenges facing health care is providing pain management programs for elderly people who suffer from chronic and acute pain. Therefore, the aim of this research is to answer the question of whether treatment methods based on acceptance and commitment, and emotion-based treatment are effective on the level of perceived stress, chronic pain and adherence to treatment in the elderly with diabetes. Method: The research design of the present study is a semi-experimental one with a pre-test-post-test design with a control group. The subjects were randomly assigned to two experimental and control groups. The statistical population of this research is all diabetic elderly referring to the health centers of Rafsanjan who have symptoms of stress and chronic pain. Using the available sampling method based on random selection, people were placed in two experimental and control groups. And after the necessary arrangements with the elderly with diabetes and symptoms of stress and chronic pain who had the necessary conditions to participate, 30 people in the experimental groups (15 people in each group) and 15 people in the control group were randomly replaced and selected. **Results:** The findings showed that the groups were not significantly different in terms of gender, age and education level (p>0.05). Also, both treatment methods based on acceptance and commitment and emotion-based treatment, compared to the control group, reduce stress, chronic pain and increase treatment adherence in diabetic elderly (p<0.001) and the difference between the two methods There is significance (p>0.05). Conclusion: According to the findings of this research, it can be said that two therapeutic approaches based on acceptance and commitment, and emotionoriented therapy are effective in improving perceived stress, chronic pain and adherence to treatment in diabetic elderly compared to the control group.

Keywords: treatment based on acceptance and commitment, emotion-based treatment, stress, pain, adherence to treatment.

Introduction

Considering the fact that the elderly community both in the world and in Iran constitutes a significant part of the population and is increasing every year, the importance of examining its mental health becomes clearer. This group is exposed to a lot of stress due to their age and special social situation (Lashani, 2013).

On the other hand, recent researches show that combined treatments, i.e. medicine. drugs and psychotherapy, are better than only drug treatment (Morshedi et al., 2016). One of the non-pharmacological treatments is acceptance and commitment-based therapy, which studies show the effectiveness of this treatment for chronic pain among elderly people (Bardi et al., 2020).

Acceptance and commitment is a third-wave behavioral therapy approach that aims to increase participation in activities that provide meaning, validity, and value to people with persistent pain or distress (Paolini et al., 2020). It seems to be appropriate for the elderly population because many older people may have their own value orientation due to awareness of limited time to live (Mirk et al., 2011).

Also, emotion-based therapy is also a rehabilitation therapy that aims to recognize emotions and transform them into understandable messages and constructive behaviors. Emotion-oriented therapy is one of the therapeutic methods that focuses on the persistent negative cycles of interaction due to deep emotional vulnerability. This method tries to reduce confusion by intervening at the emotional level in order to promote close interactions that lead to greater interest and intimate relationships (Morshedi et al., 2014).

The relationship cycle emphasizes emotion-focused therapy on consistent and secure attachment patterns through care, support, and mutual attention to the needs of self and others (Smeri et al., 2021).

The elderly are more prone to depression and anxiety due to reduced self-confidence, lack of activity and movement, loss of friends and relatives, reduced material and physical independence, and suffering from chronic diseases. Taking into account the rapid growth of the elderly population and the fact that the elderly suffer from a decrease in their physical and mental abilities due to old age and the reduction of their abilities, and all kinds of diseases and mental problems threaten them, paying attention to the health of the elderly is of particular importance. Therefore, determining and comparing the effectiveness of two therapeutic approaches based on acceptance and commitment, and emotion-oriented therapy on the level of perceived stress, chronic pain and adherence to treatment in the elderly with diabetes will be very useful and enlightening.

One of the most important challenges facing health care is the provision of pain management programs for elderly people who suffer from chronic and acute pain. Unrelieved pain can be associated with depression, anxiety, fear, impaired physical function, impaired walking, and malnutrition. Ethical commitment to the management of pain and the relief of those who suffer is at the core of the professional obligations of health care (Lazaro et al., 2013). Therefore, the researcher decided to investigate the three problems of stress, chronic pain and non-adherence to treatment in diabetic elderly, which of these approaches has the ability to improve stress, chronic pain and adherence to treatment?

Method

The research design of the present study is a semi-experimental one with a pre-testpost-test design with a control group. The subjects were randomly assigned to two

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experimental and control groups. The statistical population of this research is all diabetic elderly referring to the health centers of Rafsanjan who have symptoms of stress and chronic pain. Using the available sampling method based on random selection, people were placed in two experimental and control groups. And after the necessary arrangements with the elderly with diabetes and symptoms of stress and chronic pain who had the necessary conditions to participate, 30 people in the experimental groups (15 people in each group) and 15 people in the control group were randomly replaced and selected.

Results

The findings showed that the groups were not significantly different in terms of gender, age and education level (p>0.05). Also, both treatment methods based on acceptance and commitment and emotion-based treatment, compared to the control group, reduce stress, chronic pain and increase treatment adherence in diabetic elderly (p<0.001) and the difference between the two methods There is significance (p>0.05).

Conclusion

The aim of the present study was to determine the effectiveness of treatment methods based on acceptance and commitment, and emotion-oriented therapy on the level of perceived stress, chronic pain and adherence to treatment in diabetic elderly. The findings of this research showed that the therapeutic approach based on acceptance and commitment improved perceived stress, chronic pain and adherence to treatment in diabetic elderly.

According to the findings of this research, it can be said that two treatment approaches based on acceptance and commitment, and emotion-based treatment are effective in improving perceived stress, chronic pain and adherence to treatment in diabetic elderly compared to the control group. In addition, the results showed that there was a significant difference between the two treatments in the variable of perceived stress, chronic pain, and adherence to treatment in diabetic elderly. The treatment based on acceptance and commitment has been able to improve the perceived stress, chronic pain and adherence to the treatment of diabetic elderly to a greater extent than the emotion-based treatment. In the present study, the effectiveness of treatment based on acceptance and commitment on reducing pain, perceived stress and improving adherence to treatment for the elderly based on principles such as acceptance, failure, self as background, living in the moment, value and committed action is significant. Acceptance and commitment therapy is an effective treatment for a wide range of concerns, and so far limited research has been published on the use of acceptance and commitment therapy in the elderly. The acceptance and commitment model of therapy is appropriate for this population because many older adults may have higher values due to the knowledge that their lifespan is limited. Considering the concept of old age and improving their health, more research should be done in the direction of the health of the elderly. Based on the present research, it is possible to deal with this issue by using available facilities and effective treatment based on acceptance and commitment.

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