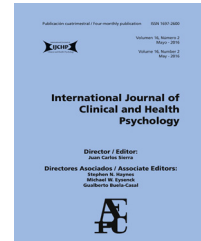




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ORIGINAL ARTICLE

The link between stress, well-being, and psychological flexibility during an Acceptance and Commitment Therapy self-help intervention

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KEYWORDS

Acceptance and
commitment therapy;
Well-being;
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Stress;
Experiment

Abstract

Background/Objective: Prolonged stress can overwhelm coping resources, leading people to seek mental health care. Acceptance and commitment therapy (ACT) is an intervention that enhances well-being and reduces distress, assumedly by means of increasing psychological flexibility (PF). We examined the association between a total increase in PF during an intervention and decreases in stress and increases in well-being during and after the intervention.

Method: The intervention was a randomized controlled trial of an ACT-based self-help intervention. Participants were 91 individuals reporting elevated levels of work-related stress. Measurements were completed at preintervention, postintervention, and 3-month follow-up.

Results: Structural equation models revealed that the total increase in PF during the intervention was negatively associated with a decrease in stress ($b = -0.63$, $SE = 0.14$, $p < .001$) and positively associated with an increase in well-being during the intervention ($b = 0.48$, $SE = 0.11$, $p < .001$), but not with a decrease in stress ($b = 0.03$, $SE = 0.27$, $p > .05$) and well-being ($b = -0.04$, $SE = 0.39$, $p > .05$) following the intervention.

Conclusions: Our study provides empirical support for decreasing stress and promoting well-being through ACT and emphasizes the potential of PF in promoting well-being.

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PALABRAS CLAVE

terapia de aceptación
y compromiso;
bienestar;
flexibilidad
psicológica;
estrés;
estudio ex post facto

Relación entre estrés, bienestar y flexibilidad psicológica durante una intervención de autoayuda de Terapia de Aceptación y Compromiso

Resumen

Antecedentes/Objetivo: El estrés prolongado puede inhibir los recursos de adaptación, llevando a las personas a solicitar servicios de salud mental. La Terapia de Aceptación y Compromiso (ACT) es una intervención que fomenta el bienestar y reduce la ansiedad, presuntamente mediante el aumento de la flexibilidad psicológica (PF). Examinamos la asociación entre un aumento total en PF durante una intervención y el descenso del estrés y el aumento del bienestar durante y después de la intervención.

Método: En un ensayo aleatorio controlado de una intervención de autoayuda con base en ACT participaron 91 individuos con niveles elevados de estrés laboral. Completaron mediciones pre, post y seguimiento a tres meses.

Resultados: Modelos de ecuaciones estructurales revelaron que el aumento total en PF durante la intervención está negativamente asociado a la reducción del estrés ($b = -0,63$, $SE = 0,14$, $p < 0,001$) y positivamente asociado con el aumento del bienestar durante la intervención ($b = 0,48$, $SE = 0,11$, $p < 0,001$), pero no con el descenso del estrés ($b = 0,03$, $SE = 0,27$, $p > 0,05$) y el bienestar ($b = -0,04$, $SE = 0,39$, $p > 0,05$) después de la intervención.

Conclusiones: Se proporciona base empírica de la reducción del estrés y el fomento del bienestar mediante ACT, enfatizando el potencial de PF para fomentar el bienestar.

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Nearly everyone experiences stress in daily life, such as work deadlines, family arguments or being late for an appointment. These stressors can have a strong impact on well-being (Almeida, 2005; Schönfeld, Brailovskaia, Bieda, Zhang, & Margraf, 2016; Thoits, 2010). One particular deleterious type of stress is related to work. People who work may experience a substantial level of work-related stress (Eurofound, 2005). In one U.S. report, 40% of all professionals stated that their job is very or extremely stressful (American Psychological Association Center for Organizational Excellence, 2014). Work-related stress is associated with increased absenteeism and reduced efficiency at work and large costs for society (Henderson, Glozier, & Elliott, 2005; Kalia, 2002; Sultan-Taieb, Chastang, Mansouri, & Niedhammer, 2013). Further, prolonged stress can lead to stress related disorders, which is subject to the Eleventh Revision of International Classification of Diseases and Related Health Problems (ICD-11) (Keeley et al., 2016; Maercker et al., 2013). Also it has been associated with a range of adverse health outcomes, such as anxiety and depression (Fawzy & Hamed, 2017; Herr et al., 2017; Melchior et al., 2007; Tennant, 2001), coronary disease (e.g. Li, Zhang, Loerbroks, Angerer, & Siegrist, 2014), and sleep problems (e.g. Faber & Schlarb, 2016).

Challenges of prolonged stress may at times exceed a person's capacity to cope effectively, and this is when mental health care may be sought. However, traditionally, the focus in mental health care has been on treating mental disorders and symptoms rather than promoting well-being (Seligman & Csikszentmihalyi, 2000). It has been recognized that mental health is more than simply the absence of mental illness. For instance, it has been addressed in the two-continua model of mental health that states that positive mental health or

well-being is related to, but different from mental illness (Keyes, 2005). Well-being can be broken down into emotional, social, and psychological well-being (Diener, Napa Scollon, & Lucas, 2009; Diener, Suh, Lucas, & Smith, 1999; Ryff, 1989). Emotional well-being refers to feelings of happiness and (life) satisfaction. Psychological well-being refers to living a rich life, in which one's abilities are taken into account. Social well-being refers to the feeling that one values and is valued by the society in which one lives.

Prior studies with population-based samples investigating the interdependence of well-being and psychopathology (Keyes, 2007; Lamers, Westerhof, Glas, & Bohlmeijer, 2015; Trompetter, de Kleine, & Bohlmeijer, 2016) showed that well-being protects against mental illness through components such as positive relationships with others, autonomy, and environmental mastery. Two such studies showed that well-being over time buffers against mental illness and disease later in life (Grant, Guille, & Sen, 2013; Lamers et al., 2015). The latter showed that a decrease in psychopathology was linked to improved well-being, and a decrease in well-being was linked to higher levels of psychopathological symptoms. Another study indicated that low well-being was strongly associated with depression 10 years later (Wood & Joseph, 2010), and another found that changes of levels of well-being were related to the prevalence and incidence of mental illness in a 10-year time span (Keyes, Dhingra, & Simoes, 2010). In sum, findings consistently support the two-continua model and indicate the relevance of well-being for mental health care.

The two-continua model and existing studies about the impact of well-being indicate the need for interventions that explicitly promote well-being (Hayes, Strosahl, & Wilson, 1999, 2012; Keyes, 2007). Acceptance and Commitment

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