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Orginal Article

Comparing the Effectiveness of Acceptance and Commitment-Based Therapy and Compassion-Focused Therapy on Basic Psychological Needs, Maladaptive Magnification, and Stress Coping Strategies in Patients with Lupus

Seyed Mojtaba Aghili[*]
Zahra Poorbahman[**]
Ensiyeh Babaee[***]

Abstract

This study aimed to compare the effectiveness of acceptance and commitment therapy and compassion-focused therapy on basic psychological needs, maladaptive magnification, and stress coping strategies in patients with lupus. Given the importance of the role of stress in the recurrence and continuation of lupus episodes and the adverse effects of stress on most aspects of these patients' lives, patients need to receive the necessary training in coping with stress and satisfying psychological needs so that they can manage the situation well when faced with unavoidable stressful situations and remain protected from stress-related harm. The research method was a quasi-experimental design with a pre-test-post-test and control group. The statistical population of the study was all patients with lupus hospitalized in Ghaem and Razavi hospitals in Mashhad in 2022, of which 45 people were selected using a convenience sampling method and randomly assigned to 3 groups: experimental 1, experimental 2, and control group. Experimental group 1 received acceptance and commitment therapy, experimental group 2 received compassion-focused therapy, and the control group did not receive any psychological intervention until the end of the study. The research tools included the Basic Psychological Needs Questionnaire (BSNQ), the Adaptive Magnification Style (AIDS), and the Coping Strategies for Stress (CISS). The research data were analyzed using multivariate analysis of covariance and SPSS version 24 software. The results showed that compassion-focused therapy was more effective on basic psychological needs, maladaptive magnification, and coping strategies in patients with lupus ($p<0.05$). The results of the study indicate that compassion-focused therapy leads to an increase in the satisfaction of basic psychological needs and a

* Assistant Professor, Department of Psychiatry, Payam Noor University, Tehran, Iran. *Corresponding Author*: aghili@pnu.ac.ir

** Master of Psychology, Payam Noor University, Gorgan, Iran.

*** Assistant Professor, Department of Psychology, Payame Noor University, Tehran, Iran.

decrease in maladaptive magnification and coping strategies in patients by inhibiting automatic emotional reactions and cultivating a sense of human commonality.

Keywords: acceptance and commitment, compassion, basic psychological needs, maladaptive magnification, stress coping strategies, lupus.

Extended Abstract

Introduction

Lupus is an autoimmune disease in which the immune system mistakenly attacks the body's own cells, causing damage to body tissues. Lupus is about 9 times more common in women than in men. It usually affects people between the ages of 15 and 45. Symptoms include skin rashes, photosensitivity, mouth sores, arthritis, and fever. Given the importance of stress in the recurrence and continuation of lupus episodes and the adverse effects of stress on most aspects of these patients' lives, patients need to receive the necessary training in coping with stress and satisfying psychological needs so that they can manage the situation well when faced with unavoidable stressful situations and remain immune to stress-related damage. Given the importance of disease acceptance and stress coping strategies in lupus patients and the research gap in examining the aforementioned variables in lupus patients, this study seeks to answer the question of whether there is a significant difference between the effectiveness of acceptance and commitment therapy and compassion-focused therapy on basic psychological needs, maladaptive magnification, and stress coping strategies in patients with lupus.

Methods

The present study is a quasi-experimental study with a pretest-posttest design and a control group. After receiving the code of ethics from the Ethics Committee of Payam Noor University and coordinating with the research unit of Ghaem and Razavi hospitals in Mashhad, 45 people were selected using the convenience sampling method and randomly assigned to 3 groups: experimental group 1 (acceptance and commitment therapy), experimental group 2 (compassion-focused therapy), and control group. Experimental group 1 received acceptance and commitment therapy, and experimental group 2 received compassion-focused therapy in 8 60-minute sessions, twice a week in the hospital prayer room, and the control group did not receive any intervention until the end of the study. In addition to a

demographic information checklist (age, gender, education, marital status, duration of illness), the subjects completed questionnaires on basic psychological needs, maladaptive magnification, and stress coping strategies in two stages: before the intervention (pre-test) and after the intervention (post-test).

Research Tools

1. Basic Psychological Needs Questionnaire: Developed by LaGuardia et al. in 2000, this questionnaire consists of 21 questions rated on a 7-point Likert scale. Reliability coefficients for responses from participants about their mother, father, romantic partner, and friends were reported as 0.92 for each group.

2. Incongruent Magnification Questionnaire: Created by Riskind et al. in 2000, this questionnaire comprises six items that respondents rate on a 5-point scale ranging from 1 (not at all) to 5 (very much). The reliability coefficient, determined by Cronbach's alpha, was found to be 0.84.

3.Stress Coping Strategies Questionnaire: Designed by Endler and Parker in 1990, this questionnaire evaluates how individuals cope with stress through 48 statements reflecting three coping styles: problem-oriented coping, emotion-oriented coping, and avoidant coping. The overall reliability of the questionnaire is reported as 0.85, with a validity score of 0.78.

Results

The research findings indicate that both acceptance and commitment therapy, as well as compassion-focused therapy, are effective in addressing basic psychological needs, maladaptive magnification, and stress coping strategies in patients with lupus ($P<0.05$). Notably, compassion-focused therapy demonstrated a greater effectiveness in these areas for lupus patients.

Conclusion

It is important to recognize the differences in the effectiveness of the two therapeutic approaches, particularly the superior results associated with compassion-focused therapy. Acceptance and commitment therapy encourages patients to concentrate on their present feelings rather than dwelling on the past or future. This focus on the present helps patients experience changes in their environment as they truly are, rather than how their minds perceive them.Compassion-focused therapy promotes optimism regarding an individual’s capabilities by regulating negative emotions, reducing self-judgment, and enhancing self-perception of competence. Moreover, compassion exercises help individuals recognize their significant potential from various perspectives, forming part of their identity in both

motivational and emotional contexts. Additionally, by activating the security system and neutralizing the threat response, this therapy guides individuals to show kindness to themselves during difficult times, allowing them to tolerate stress without succumbing to negative thoughts and experiences. Ultimately, this therapy equips individuals to understand irrational evaluations, face challenges realistically and healthily, maintain hope, and navigate life's complexities with a more positive outlook.

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