

A meta-analysis of Acceptance and Commitment Therapy on anxiety, depression and stress for parents of children with chronic illnesses

Xiaohuan Jin, Cho Lee Wong*, Huiyuan Li, Jieling Chen, Yang Bai

The Nethersole School of Nursing, Faculty of Medicine, The Chinese University of Hong Kong, * Corresponding author



Background

Parents of children with chronic illnesses suffer from substantial psychological distress, typically like anxiety, depression and stress. Acceptance and Commitment Therapy (ACT) appears to be a promising approach for these parents, but there is a lack of systematic evidence. This review aims to systematically identify and appraise the application of ACT amongst the parents of children with chronic illnesses and its effectiveness in parental psychological anxiety, depression and stress.

Method

Seven databases (MEDLINE, PubMed, Embase, Cochrane Library, CINAHL, PsychINFO and Web of Science) were systematically searched from inception to October 2019. Two reviewers independently selected the studies, extracted the data and assessed the quality of the included studies by using the Joanna Briggs Institute Critical Appraisal tools. Results were obtained using meta-analysis.

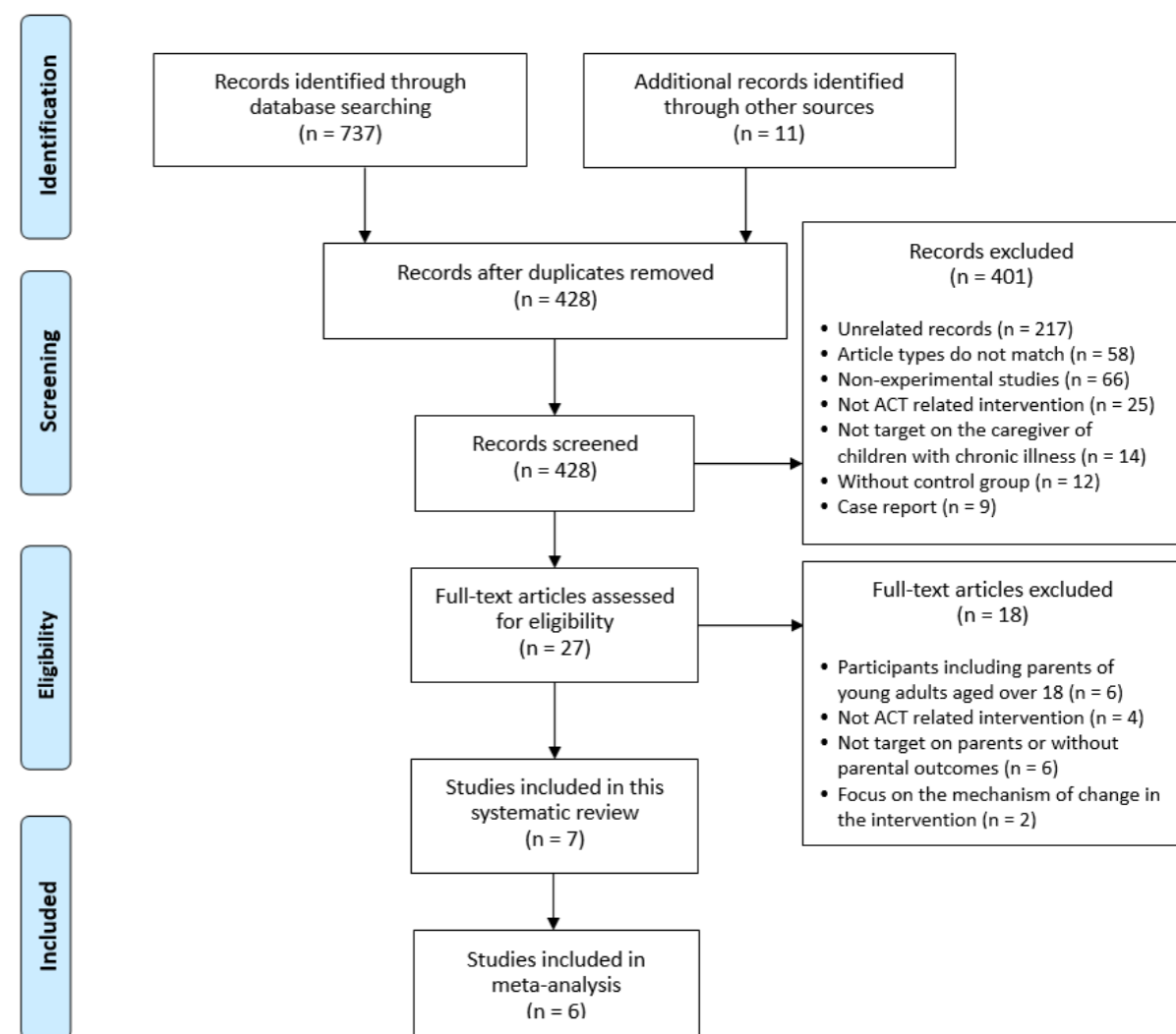


Fig. 1. Flowchart of selecting studies

Note. ACT: Acceptance and Commitment Therapy

Results

Six studies of trials involving 428 participants were included in this review (see Fig. 1). The meta-analysis showed that at postintervention, parents who received ACT presented with less depressive (SMD = -0.25, 95% CI: [-0.50, -0.001], $p = 0.05$) and stress (SMD = -0.36, 95% CI: [-0.57, -0.15], $p = 0.0007$) symptoms compared with those in the control groups. No significant effect on anxiety symptoms was found ($p = 0.16$) (see Fig. 2). At 4–6 months follow-up, the reductions in the symptoms of depression (SMD = -0.40, 95% CI: [-0.76, -0.03], $p = 0.03$), anxiety (SMD = -0.41, 95% CI: [-0.66, -0.15], $p = 0.002$) and stress (SMD = -0.42, 95% CI: [-0.68, -0.17], $p = 0.001$) in the ACT group were all significant compared with those in the control group (see Fig. 3).

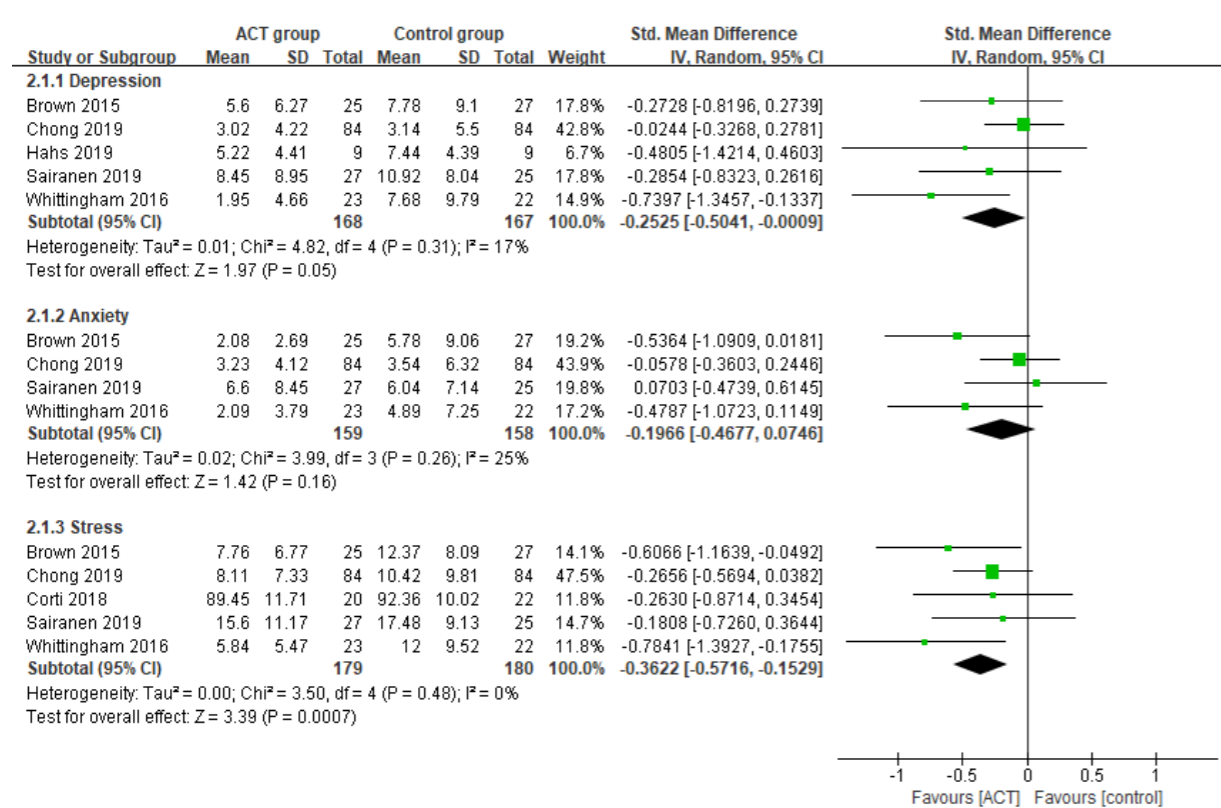


Fig. 2. Treatment for distress at post-intervention

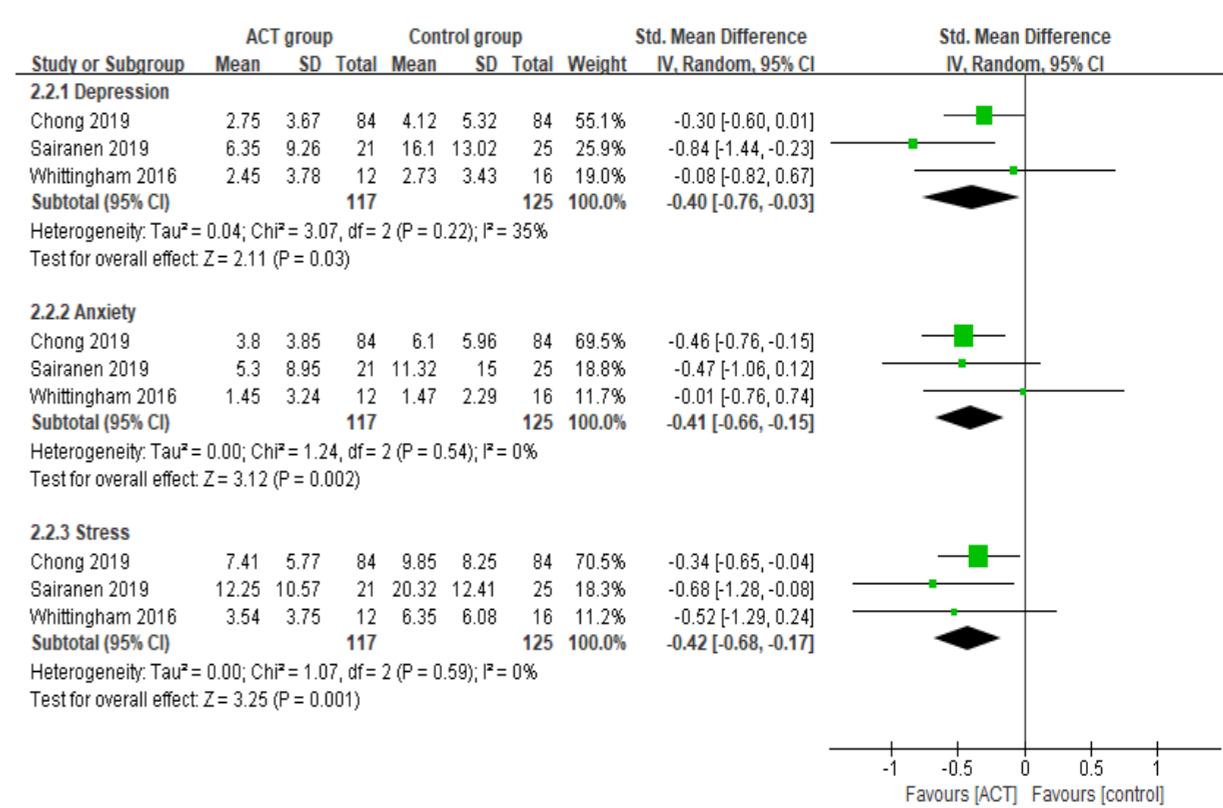


Fig. 3. Treatment for distress at follow-up

Conclusion

Current meta-analysis shows that ACT is effective in reducing parental depression and stress at postintervention and 4–6 months follow-up. A significantly better improvement in parental anxiety symptoms is not found immediately after intervention but observed at 4–6 months follow-up. These findings support ACT is an effective intervention to reduce parental psychological distress.