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The Effectiveness of Acceptance and Commitment Therapy (ACT) on Cognitive Emotion Regulation and Life Quality of Women with Prolonged Grief Disorder from Cultural Perspective

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Abstract

This study was conducted with the aim of investigating the effectiveness of acceptance and commitment therapy on cognitive emotion regulation and life quality of women with prolonged grief disorder from cultural perspective. The statistical population enfolded all the women referring to counseling and treatment centers in the west of Tehran city in year 2023. The sample encompassed 30 females whom were selected via convenient sampling procedure and randomly assigned into two experimental and control groups 15 participants each. The research method was semi-experimental with a pretest-post-test and a control group. All the subjects responded to Prolonged Grief Disorder Symptoms (PG-13, 2021), Quality of Life 36-Item Short Form Survey (1992) and Cognitive Emotion Regulation Questionnaire (CERQ, 2002) before and after the intervention. The experimental group was exposed to acceptance and commitment therapy for 8 sessions,90 minutes each while the control group received none. The data were analyzed by applying multi variate and univariate analysis of covariance using SPSS-26 software. The results of data analysis showed that the intervention based on acceptance and commitment caused some significant variations in the scores of cognitive emotion regulation and life quality (P<0.05) of the participants in the experimental group compared to the control group. Based on the findings of the present study, it could be concluded that acceptance and commitment therapy was effective in improving the cognitive emotion regulation and the life quality of women with prolonged grief disorder, and it should be used as an effective and appropriate cultural intervention.

Extended abstract

Introduction: Prolonged Grief Disorder (PGD) is characterized by persistent and intense grief reactions lasting beyond six months after bereavement, leading to significant impairments in emotional, social, and physical functioning. The disorder is associated with heightened risks of chronic physical illnesses, substance abuse, and suicidal tendencies. Prolonged grief causes a major disruption in the quality of life of individuals, and in a person suffering from such syndrome, the risk of developing chronic physical illnesses, substance abuse, and suicide increases. The World Health Organization (2023) considers quality of life to be a concept that includes dimensions of physical health, mental state, social relationships, and environmental conditions. Quality of life is a subjective concept of feeling well and satisfied with life experiences, which encompasses both positive and negative aspects of life and reflects the way an individual perceives and reacts to their health status and other aspects of their life. Quality of life could be considered a suitable measure of prolonged grief disorder. Severe grief reactions are associated with reduced physical health, such as cardiovascular health problems, immune deficiencies, and sleep disorders. Traditional therapeutic approaches often focus on symptom reduction, but emerging evidence highlights the importance of improving emotion regulation and quality of life as key outcomes in grief therapy. ACT, a third-wave behavioral therapy, emphasizes psychological flexibility through six core processes: cognitive diffusion, acceptance, contact with the present moment, self-as-context, values clarification, and committed action. Previous research has demonstrated ACT's efficacy in treating anxiety, depression, and stress-related disorders, but its application in PGD remains underexplored. This study addresses this gap by examining whether ACT can enhance adaptive emotion regulation strategies and improve quality of life in women with PGD, offering a novel intervention for this vulnerable population. Therefore, this study was conducted with the aim of investigating the effectiveness of acceptance and commitment therapy on cognitive emotion regulation and life quality of women with prolonged grief disorder from cultural perspective.

Method: The statistical population enfolded all the women referring to counseling and treatment centers in the west of Tehran city in year 2023. The sample encompassed 30 females whom were selected via convenient sampling procedure and randomly assigned into two experimental and control groups 15 participants each. The research method was semi-experimental with a pre-test-post-test and a control group. All the subjects responded to Prolonged Grief Disorder Symptoms (PG-13, 2021), Quality of Life 36-Item Short Form Survey (1992) and Cognitive Emotion Regulation Questionnaire (CERQ, 2002) before and after the intervention. The experimental group was exposed to acceptance and commitment therapy for 8 sessions,90 minutes each while the control group received none. The data were analyzed by applying multi variate and univariate analysis of covariance using SPSS-26 software.

Results: The results of data analysis showed that the intervention based on acceptance and commitment caused some significant variations in the scores of cognitive emotion regulation and life quality (P<0.05) of the participants in the experimental group compared to the control group. Based on the findings of the present study, it could be concluded that acceptance and commitment therapy was effective in improving the cognitive emotion



regulation and the life quality of women with prolonged grief disorder. Effect sizes (η^2) ranged from 0.161 to 0.296, indicating moderate to large intervention effects.

Conclusions: ACT effectively improved cognitive emotion regulation and quality of life in women with PGD, underscoring its potential as a therapeutic intervention. These findings align with prior studies demonstrating ACT's efficacy in enhancing psychological flexibility and emotional resilience, supporting its role in mitigating PGD symptoms. By fostering acceptance, values-driven action, and cognitive diffusion, ACT addresses core PGD symptoms, offering a viable alternative to traditional symptom-focused therapies. Limitations include the study's restricted geographical sample and short-term follow-up. Future research should explore ACT's long-term effects and cultural adaptability in diverse populations. Clinically, integrating ACT into mental health services for bereaved individuals is recommended to enhance emotional and functional outcomes and it should be used as an effective and appropriate cultural intervention.

Authors Contributions: Alireza Meftahi: Brainstorming about the topic and collecting data, Dr. Susan Emamipour: Designed the general framework and modification of the article, Dr. Fariba Hasani: analyzed data. Mahmood Shafizadeh: Editing content and corresponding author. All authors reviewed and approved the final version of the article.

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