

The associations of acceptance with quality of life and mental health following spinal cord injury: a systematic review

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Background

- Previous research has suggested that individuals with spinal cord injury (SCI) experience lower quality of life (QOL) and higher levels of psychological morbidities compared to the general population.
- Greater acceptance is associated with increased QOL and lower levels of depression, anxiety and post-traumatic stress disorder (PTSD).
- At present, a systematic review of the associations between acceptance, QOL, and mental health does not exist.

Methods

- Five online databases (PsycINFO, PubMed, Embase, Scopus, and Web of Science) were systematically searched.
- Quantitative and qualitative empirical studies exploring associations between acceptance and either QOL or mental health in individuals with SCI age 16 years or older were included.
- In total, 2,772 papers were screened independently by two raters (See Figure 1).
- Quality assessment was performed by two independent raters, and studies were rated either *good*, *fair* or *poor* depending on predefined criteria.
- Data on sample characteristics, study country and setting, study design and time of measurement, the measure of acceptance, measure(s) of adjustment, and key findings of the study were extracted and tabulated.
- The data was synthesized according to the psychological domain examined, including global and specific domains of QOL, well-being, satisfaction with life, mental health, depression, anxiety, and PTSD.

Key findings

- In total, 39 quantitative studies and two qualitative studies were included.
- Quantitative study quality was mostly *fair* (n = 17) followed by *good* (n = 13) and lastly *poor* (n = 9).
- In terms of QOL, greater acceptance was consistently related to greater global and psychological QOL, satisfaction with life, and well-being, but inconsistent evidence was found within the social QOL domain.
- In terms of mental health, greater acceptance was consistently associated with lower levels of depression and anxiety, while inconsistent evidence was found with regards to PTSD.
- Acceptance consistently predicted both QOL and mental health outcomes over and above what was predicted by a range of sociodemographic and injury-related variables, and psychosocial variables like social support, cognitive appraisals, and coping strategies.
- The strength of associations between acceptance, QOL and mental health decreased over time, indicating that acceptance either has little or no relevance over time, or that its long-term effect is mediated by other variables.

Aim

- The aim of this systematic review was to identify, critically evaluate and synthesize empirical studies on how acceptance was associated with QOL and mental health outcomes in individuals with SCI.

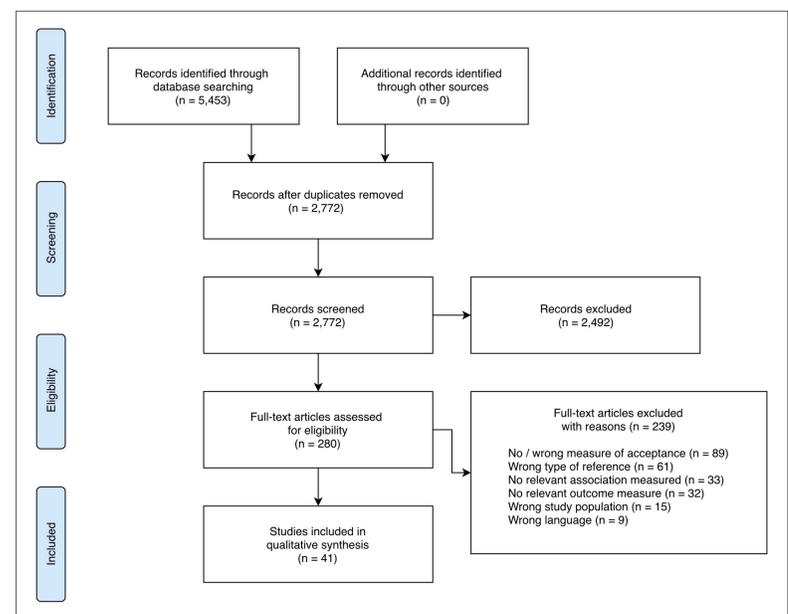


Figure 1. PRISMA flowchart.

Potential future directions

- Future studies should focus on addressing the methodological issues identified in this review, including conducting longitudinal studies with sufficiently large sample sizes and exploring the questionnaire items about acceptance measure what they are intended to measure.
- Future studies should further focus on exploring these associations within a dyadic framework because the adjustment process does not occur in a social vacuum.
- Lastly, future studies should investigate the effectiveness of therapeutic approaches like Acceptance and Commitment Therapy (ACT) that aim to stimulate acceptance of the current situation in order to engage in life in a rich and meaningful way.