

# Opinion: Adherence to Treatment from a Third Generation Contextual Behavioral Framework

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ISSN: 2578-0042



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**Submission:**  May 25, 2019

**Published:**  June 21, 2019

Volume 4 - Issue 5

**How to cite this article:** Cristian Leonardo Santamaría Galeano. Opinion: Adherence to Treatment from a Third Generation Contextual Conductive Framework. *Forensic Sci Add Res.* 4(5). FSAR.000604.2019. DOI: [10.31031/FSAR.2019.04.000604](https://doi.org/10.31031/FSAR.2019.04.000604)

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## Abstract

The development of contextual therapies is showing a vertiginous development posing a new perspective to approach psychological problems effectively, and conceiving behavior as a responsible choice of the individual. In this sense, given the importance of adherence to treatment in the intervention of addictive behavior, it is important to begin to conceptualize adherence to treatment from this approach of therapeutic intervention. It provides an approach to the conceptualization of adherence to treatment from a behavioral-contextual framework.

## Background

In recent years, the development of a new generation of psychological therapies, Contextual or Third Generation Therapies [1] is showing a vertiginous development and poses a new perspective to address psychological problems effectively in the field of clinical psychology and health [2-5]. These therapies develop techniques that do not favor the avoidance of symptoms, but incorporate the acceptance component as an essential element in the understanding of the problems of the human being [6], having as a central objective that “the subject operates according to their personal objectives, regardless of how they feel [2] (p.120). Among them, according to Luciano and Valdivia [7], is the Functional Analytical Psychotherapy of Kohlenberg and Tsai 1991, the Dialectical Therapy of Linehan 1993, the Integral Therapy of couples of Jacobson and Christensen 1996, the Therapy Cognitive-based Mindfulness by Segal, Williams and Teasdale (2002) and the Acceptance and Commitment Therapy by Hayes, Stroschal & Wilson 1999.

Within the paradigm of third generation therapies, the subject seeks to relate differently to certain thoughts and emotions [2], changing the function of private events and not their topography, because it is natural to be human feel discomfort, pain, sadness and aversion to certain events and circumstances [8]. In this approach, mental health is defined by broad and flexible repertoires of actions oriented to personal values and not by the absence of certain cognitive and emotional states valued as negative (pain, anxiety, fear, sadness, etc.) [9]. And emotions and thoughts (private events) are not understood as the cause of the behavior, if not, as actions that are related and are part of the contents of the person [8]. Contextual therapies assume behavior as a responsible choice of the individual and sustain their behavior in the acceptance of private events to reduce their experiential avoidance (emotions, feelings, thoughts, sensations) [10]. The foregoing denotes the active role of the person, as it is assumed that he does the best he can in each circumstance, and that deep down he does not consciously and voluntarily wish to ruin his life and that of those he loves [11].

Specifically, within these therapies, Acceptance and Commitment Therapy (ACT) has been widely applied in the approach to addictive behavior, showing its effectiveness in different studies [9,12-15]. However, adherence to treatment has been identified as a critical aspect in the field of drug dependence, since users have a high rate of dropouts and a higher rate of relapse [12,15]. Adherence to treatment, from the contextual behavioral approach, involves the development of different committed and valuable behaviors of active involvement with health care and control of the disease, interrelated and in constant execution, freely chosen, that impregnate one or several functions in the life of the client, which are closely related to the values of the person (in the dimension of health and well-being, of the family, of the couple’s relationship, etc.) and are developed for the achievement of individual objectives, which are aligned with these values; mediating the history of personal life, the patient’s vital context, the acceptance of their treatment, and the private events related to their diagnosis and treatment.

Under this perspective, the therapeutic adherence is specific to each person insofar as individual experience, private events, psychological flexibility and client context are recognized, as well as the role of the therapeutic regimen and the recommendations of the healthcare team in its life, as well as the committed actions that you must develop to cultivate your personal values involved in your diagnosis and treatment, and therefore, in the care of your health.

On the other hand, non-adherence to treatment is the failure of the patient to execute the therapeutic instructions, voluntarily or inadvertently, resulting from the low or null acceptance of his diagnosis, treatment and / or changes in treatment. the recommended lifestyle, the aversive functions that he has established with his treatment, the medical center where he receives attention and / or the assistance team, and the fight / avoidance relationship he maintains with private events (emotions, thoughts, memories, expectations, sensations, perception of the seriousness of the disease, credibility in the effectiveness of the treatment, etc.) on its diagnosis and treatment that generate discomfort, evidencing its psychological inflexibility. Non-adherence would be configured as an experiential avoidance pattern developed by the client, in order to control or not to come into contact with the discomfort generated by his diagnosis and treatment, finding short-term benefits, but increasing his long-term discomfort term, worsening their health status and moving away from their personal values, this being the cost of avoidance. In this sense, several researchers suggest that the processes of intervention of addictive behavior widely address acceptance, self-stigmatization and experiential avoidance [15,16], since they can increase the level of adherence to treatment and enhance the effects of therapy in reducing the level of substance dependence [17].

## Conclusion

Contextual therapies and within these, Acceptance and Commitment Therapy (ACT) are showing their effectiveness and effectiveness in different populations, being widely applied in the addictive behavior, emphasizing the processes of acceptance, psychological flexibility and values of the people, marking a change in the way of understanding human problems. In the field of drug dependence adherence to treatment is fundamental, so this article provides an approach to the understanding of adherence behavior from a behavioral-contextual framework, however, it is important to delve into the variables that from the postulates conceptual, methodological and empirical of this therapeutic approach, mediate adherent behavior.

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