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Review Articles

In search of the person in pain: A systematic review of conceptualization, assessment methods, and evidence for self and identity in chronic pain

Lin Yu^a, Sam Norton^a, Anthony Harrison^a, Lance M. McCracken^{a,b,*}^a King's College London, Health Psychology Section, Psychology Department, Institute of Psychiatry, UK^b INPUT Pain Management, Guy's and St Thomas' NHS Foundation Trust, London, UK

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ABSTRACT

One way to develop psychological approaches to chronic pain is to improve our understanding of psychological processes that both underlie the impacts of pain and can be addressed in treatment. A set of processes that deserves further attention in this regard is those related to self or personal identity. The aim of this systematic review was to examine the conceptualizations of processes related to the self in studies of people with chronic pain, approaches to assess these processes, and the evidence for their role in relation to key measures of daily functioning. Fifteen distinct self-related processes were identified from 54 studies. These processes include three categories: a sense of self that is based on self-evaluation, a sense of self that is based on attributes or self-description, and a sense of self that is detached from these. Different methods, including questionnaires, interviews and experimental approaches were adopted to assess these self-related processes. Relations between self-related processes with daily functioning were examined. The evidence suggests that negative evaluations of the self are particularly associated with problems in daily functioning in people with chronic pain while a sense of self that is distinct from these evaluations is associated with benefit in this functioning. Overall a lack of order or theoretical clarity in the studies included is also identified from the review. It appears, however, that greater order can be achieved by applying the distinction between the conceptualized versus the contextual self from the Psychological Flexibility model.

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* Correspondence to: Health Psychology Section, Psychology Department King's College London, Guy's Campus, London SE1 9RT, UK. Fax: +44 207188 0184.

E-mail address: Lance.McCracken@kcl.ac.uk (L.M. McCracken).

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1. Introduction

Chronic pain represents a major public health problem with clear and significant economic and social impacts (Breivik, Collett, Ventafridda, Cohen, & Gallacher, 2006). Pain can dramatically diminish daily functioning and quality of life for chronic pain sufferers, decrease their work productivity, and escalate health care costs (Reid et al., 2011). Psychological approaches have been widely applied in chronic pain management, and appear beneficial (Jensen & Turk, 2014). However, the average effects of psychological treatments for chronic pain are small and further development is needed (Williams, Eccleston, & Morley, 2012). It is often proposed that one way to improve these treatments is to focus on improving our understanding of potential treatment mechanisms or processes (Morley & Keefe, 2007; Thorn & Burns, 2011). This understanding could then feed the development of treatment methods so that they more precisely target and significantly impact on these (McCracken & Marin, 2014; McCracken & Morley, 2014). One set of processes that deserves further attention in this regard is those related to self or personal identity.

It would seem that there is nothing so central to a person's well-being as their sense of who they are, their identity, or self (Rogers, 1961). And yet it appears that chronic pain can negatively impact on self or create struggles to defend or to hold onto the "real me" when faced with threats (Toye et al., 2013). The changes to one's life and apparent assaults on physical and psychological integrity associated with chronic pain are certainly experienced as impacting on who a person is, and perhaps who they may be in the future (Crombez et al., 2003).

There has been accumulating evidence for the role of self-related processes in chronic pain. Researchers have previously theorized about specific cognitive processes relevant to the impact of pain on the "self" (Pincus & Morley, 2001), and there are now numerous studies of sense of self in relation to daily functioning for people with chronic pain (Compañ et al., 2011; Harris, Morley, & Barton, 2003; Morley, Davies, & Barton, 2005; Pincus, Pearce, McClelland, & Turner-Stokes, 1993; Tang, Goodchild, Hester, & Salkovskis, 2010). There are also current treatment developments, particularly those based on mindfulness (Carmody, Baer, Lykins, & Olendzki, 2009), self-compassion (Gilbert & Procter, 2006; Neff, 2004), and the psychological flexibility model (Hayes, Strosahl, & Wilson, 1999; McCracken & Morley, 2014), that include self-related processes as a core therapeutic focus. These developments may represent an important opportunity.

Unfortunately the literature on self, including the literature on self and chronic pain, is not currently well organized. Part of the difficulty is that terms like "self" and "identify" can be ambiguous terms, having both everyday definitions and potentially more technical ones. In a comprehensive search it was found that there

are 66 self-related variables identifiable in the psychological literature (Leary & Tangney, 2003). This large number holds the potential to cause confusion. It would be better if the research focusing on self-related processes, including research into chronic pain, were organized, perhaps around a smaller number of core processes within a broader framework. There are published reviews that summarize what is known about the role of self in different conditions in general (Gillihan & Farah, 2005; Prebble, Addis, & Tippett, 2013), or in the context of dementia for example (Caddell & Clare, 2010), but none of these have focused on chronic pain.

A recently discussed three-dimensional conceptualization of the self holds the potential to organize approaches to self in research and treatment development (McHugh and Stewart, 2012; Foody, Barnes-Holmes, & Barnes-Holmes, 2012). This conceptualization of the self is rooted in a broader contextual cognitive behavioral or functional contextual model of human functioning (Hayes et al., 1999), now referred to as the Psychological Flexibility (PF) Model (Hayes, Luoma, Bond, Masuda, & Lillis, 2006). This model includes content, process, and context elements as the key defining features giving rise to a verbally conceptualized self or self as content, processes of ongoing awareness, and self that is detached or separate from content, also referred to as 'self-as-context'. This model of self is associated with Acceptance and Commitment Therapy (ACT; Hayes, Strosahl, & Wilson, 2012). The application of this model could serve as an organizing framework to summarize approaches to self in relation to chronic pain, and progress treatment development, through more precise understanding and more focused targeting at self-related processes. However, it is not known how well the literature on self and chronic pain reflects the three-dimensional conceptualization associated with this model.

The purpose of this study was to systematically review the literature on self and directly related processes in relation to chronic pain and to preliminarily examine the applicability of a functional contextual model of the self in chronic pain research as a potential organizing scheme. In turn, this review has three specific aims: (a) to investigate conceptualizations of processes related to self in studies of people with chronic pain and to organize these into a summary set of core processes, (b) to examine and evaluate approaches to assessment of self-related psychological processes in these studies, and (c) to summarize, if possible, evidence for the role of self in relation to key measures of daily functioning in people with chronic pain, particularly emotional and physical functioning.

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