

A Comparative Analysis of Psychotherapeutic Modalities: Efficacy of Cognitive Behavioral Therapy versus Acceptance and Commitment Therapy in Treating Anxiety Disorders

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Abstract. This study examines the efficacy of two leading psychotherapeutic approaches—Cognitive Behavioral Therapy (CBT) and Acceptance and Commitment Therapy (ACT)—in the context of treating anxiety disorders. Utilizing a mixed-method design, we sampled participants diagnosed with generalized anxiety disorder and employed standardized assessment tools to evaluate symptom reduction. Our findings reveal that while both modalities demonstrate significant effectiveness, CBT exhibits a more pronounced immediate impact on symptom alleviation, whereas ACT fosters greater long-term resilience. These insights contribute to the ongoing discourse regarding optimized therapeutic strategies for anxiety disorders, underscoring the necessity for personalized treatment approaches in clinical psychology.

Keywords: Cognitive Behavioral Therapy, Acceptance and Commitment Therapy, Anxiety Disorders, Psychotherapeutic Modalities, Clinical Psychology, Efficacy Comparison, Therapeutic Strategies

Introduction

Anxiety disorders represent a significant public health concern globally, affecting millions of individuals and significantly impairing their quality of life. With an increasing

prevalence of anxiety-related conditions, particularly exacerbated by global crises and social isolation, the urgency for effective therapeutic interventions has never been more pronounced. Cognitive Behavioral Therapy (CBT) and Acceptance and Commitment Therapy (ACT) have emerged as two of the most utilized psychotherapeutic modalities for anxiety disorders. CBT, grounded in cognitive theory, focuses on identifying and modifying distorted thought patterns, while ACT emphasizes psychological flexibility, encouraging individuals to accept their thoughts and feelings rather than fighting against them. Despite the widespread application of these therapies, there remains a gap in comparative efficacy research that informs practitioners on optimal treatment selection. This paper aims to address this gap by conducting a comparative analysis of CBT and ACT, employing a robust methodological framework. The structure of the paper will unfold as follows: following this introduction, we present a detailed literature review, followed by our research methodology, results, a discussion of findings, and concluding remarks that encapsulate the implications for clinical practice.

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References

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