

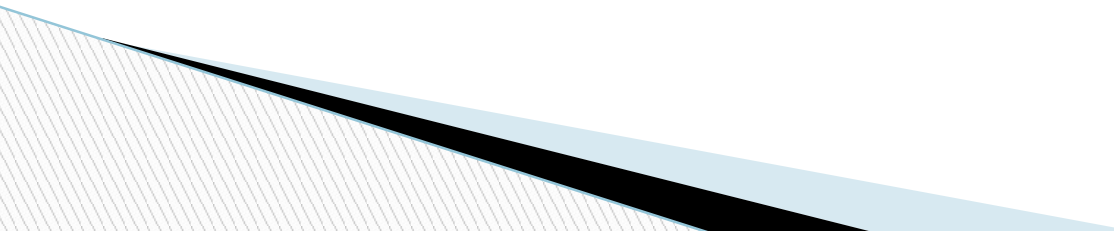
ACT FOR LIVING: Acceptance and Commitment Therapy

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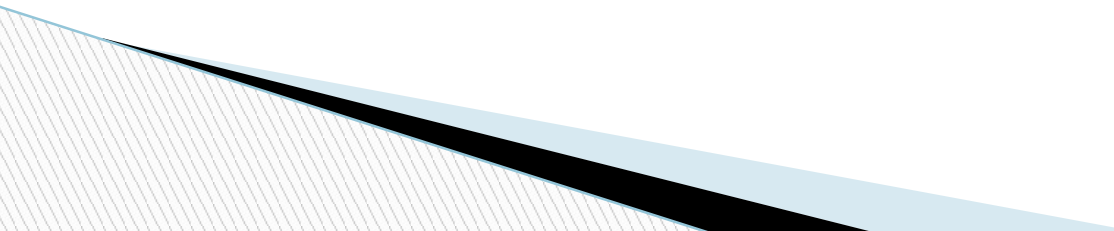


ANXIETY IS NOTHING TO FEAR:

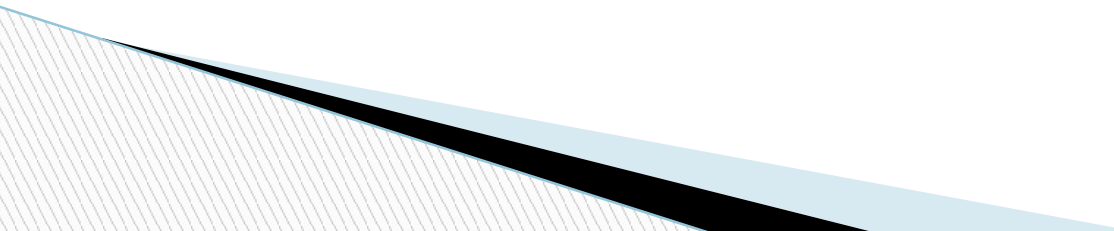
- ▣ Applying the ACT Model in working with Anxious and Depressed Clinical Populations

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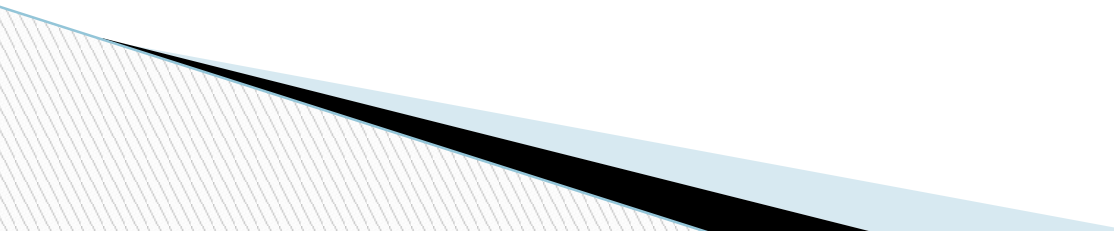
WHY?

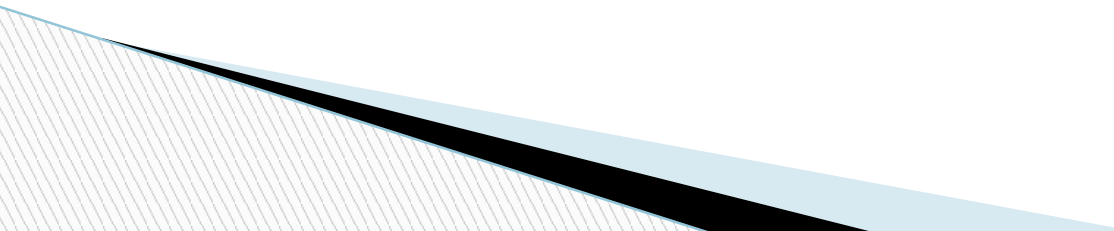
- Why is life so Difficult?
 - Why do we suffer?
 - Life is spelt H.A.S.S.L.E – Ellis
 - Life is Difficult -- M. Scott Peck
 - Act vs A.C.T.
 - The pursuit of happiness
- 

PERSPECTIVES ON RESISTANCE

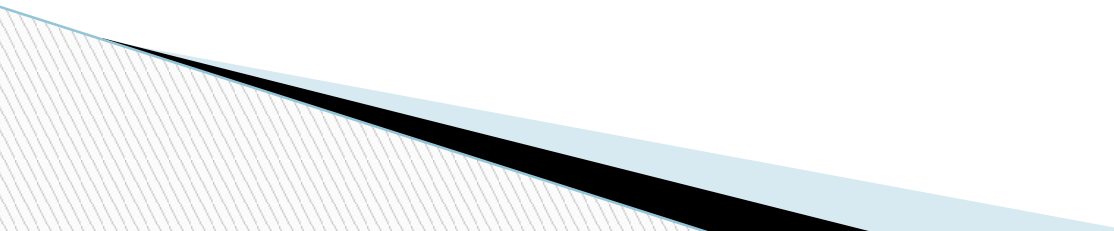
- Resistance maybe a reflection of the developmental level of your client
 - Resistance maybe a signal that the client is dealing with a very important issue that has many conflicts
 - Resistance maybe a result of the way the therapist and the client interact
- 

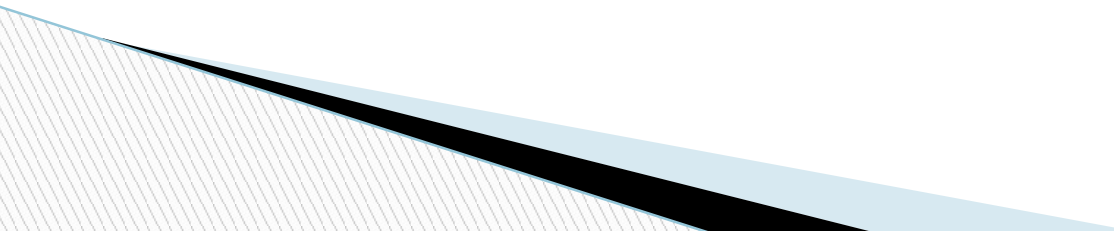
THE PURPOSE OF RESISTANCE

- Without a certain amount of resistance, we would have no stability, predictability, security or comfort
 - Change is fear and uncertainty
 - Certainty is familiar and comforting
 - Resistance can be a sign of good judgement, people often want new alternatives to problems before giving up old ways
- 

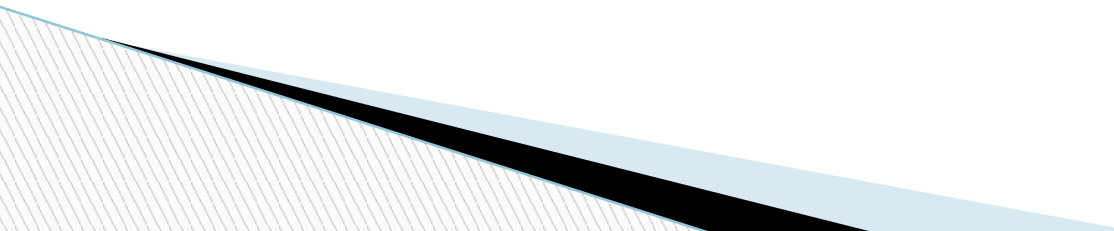
- Resistance in therapy is natural, necessary part of every client's problems.
 - Resistance *is* the problem at hand. Many clients are ambivalent about change.
 - People resist difficult change because of the underlying conflicts.
 - Plan for dealing with resistance and you plan to prevent stress and burnout
- 

REASONS FOR CLIENT RESISTANCE

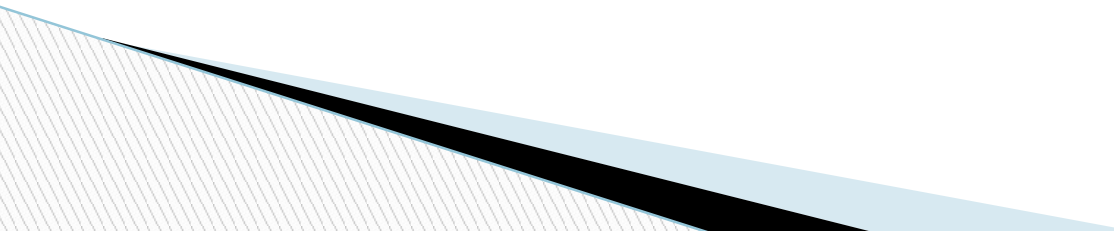
- Fear of Failure
 - Fear of Taking risks
 - Manipulation
 - Shame
 - Exhaustion
 - Lack of coping skills
 - Skill/knowledge deficit
 - Stress
- 

- ▣ *“We must never lose sight of the truth that clients often hold a tremendous amount of shame and stress in confronting their perceived inability to change”*
 - ▣ *Is ACT Behavioral Medicine? (see attached)*
- 

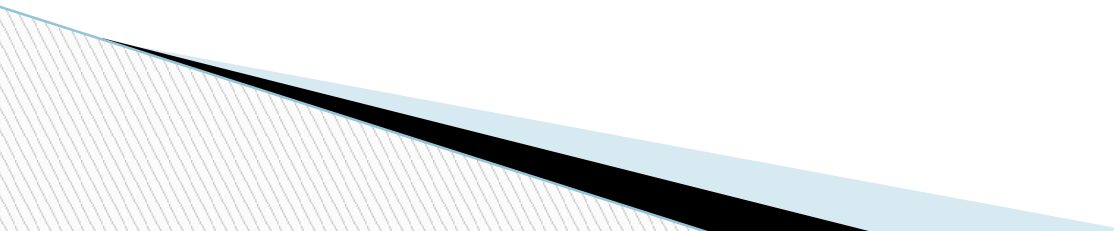
UNBLOCKING THE STUCK CLIENT

- Look for co-morbidity issues that are blocking change
 - Assess for unresolved grief and anger issues
 - Assess for emotional dysregulation
 - Ask the client what would change look like for them?
 - Consider evaluating your clients EQ
 - Equip and Empower with ACT
- 

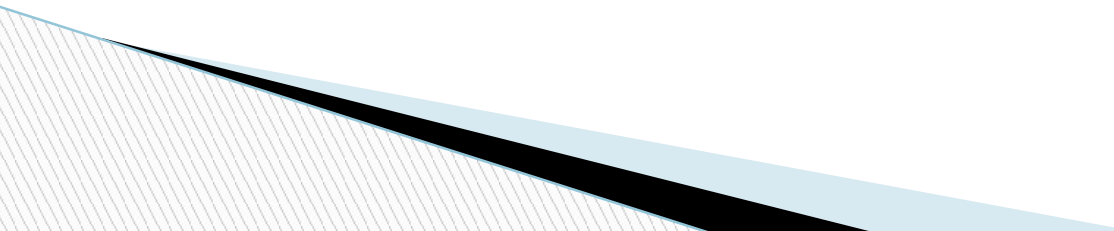
WHAT IS THE AIM OF ACT?

- To create a rich, full and meaningful life
 - Accepting the pain of living such a life
 - To find Mindfulness
 - To Commit to uncertainty
 - To embrace vulnerability
 - To tolerate and not despair
 - Hope from the hopelessness
- 

THE SIX CORE THERAPEUTIC PROCESSES OF ACT

- Contracting the Present Moment(*Be here now*)
 - Defusion (*watch your thinking*)
 - Acceptance (*open up*)
 - Self-as-Context (*pure Awareness*)
 - Values (*Know what matters*)
 - Committed Action(*Do what it takes*)
- 

PSYCHOLOGICAL FLEXIBILITY

- ▣ A six-Faceted Diamond
 - ▣ Figure 1 (over)
 - ▣ The ACT Triflex
 - ▣ Figure 2 (over)
 - ▣ **A** = Accept your thoughts and feelings, and be present
 - ▣ **C** = Choose a valued Direction
 - ▣ **T** = Take action
- 

THE DISTINCTIONS OF FUSION VS DEFUSION

- ▣ In a State of FUSION:

- thoughts are absolute truths

- a command you have to follow or obey

- a threat you get rid of immediately

- something very important that requires your attention

- something you won't let go of even if it worsens your life

□ In a state of DEFUSION:

You see a thought for what it is; nothing more or less than a bunch of words or pictures inside your head.

May or may not be true

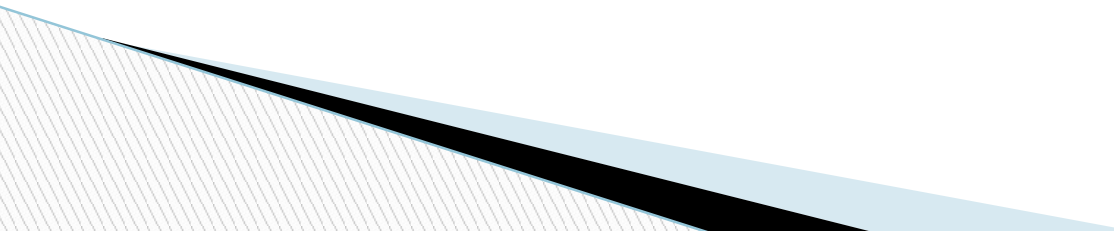
Not a command

Not a threat to you

may or may not be important



ASSESSING PSYCHOLOGICAL INFLEXIBILITY:

- ▣ Measuring Experiential Avoidance
 - ▣ Unworkable Action
 - ▣ Being stuck
 - ▣ Lack of values Clarity
 - ▣ Attachment to the Conceptualized Self
 - ▣ Taking the ACT to the client – see handout
- 

OPENING ACT: SESSION ONE

- Establish Rapport
- Take a History
- Obtain informed Consent
- Agree on Initial treatment goals
- Explain ACT
- Do a brief experiential exercise

*(adapted from Russ Harris –
ACT)*



SESSION ONE

▣ Two key Questions to ask the client:

1. What valued direction does the client want to move in?

2. What stands in the client's way?

3. What is the client fused with?

4. What private experiences is he/she avoiding?

A basic Guide to taking a history (see attached)

(Adapted from the work of Russ Harris -ACT©)



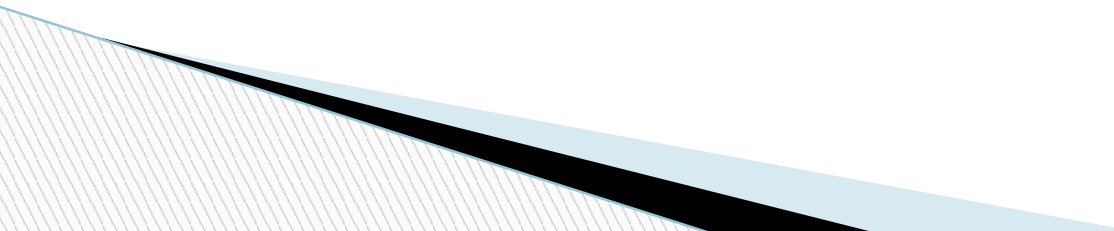
CLIENT WORKSHEETS

- ▣ The Bull's Eye
- ▣ Dissecting the Problem
- ▣ The life Compass
- ▣ The problems and Values Worksheet

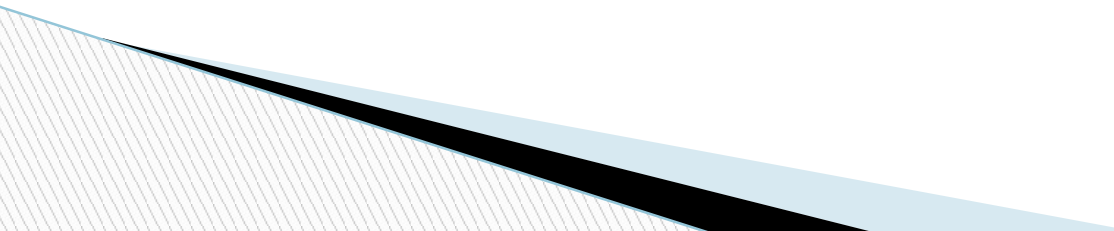
© Russ Harris -ACT



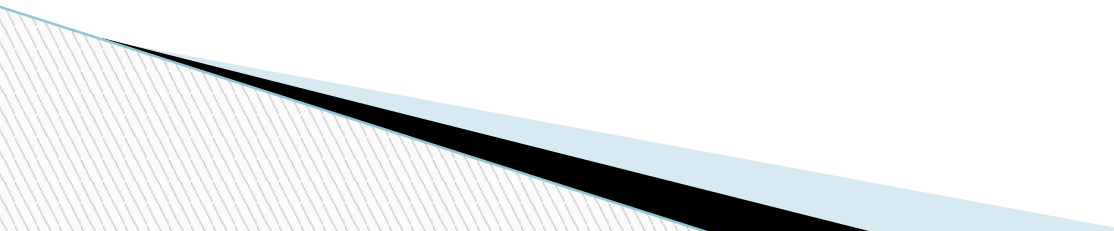
CREATIVE HOPELESSNESS

- Fully opening to the reality that trying too hard to control how we feel gets in the way of living a rich, full life.
 - Three simple questions:
 1. What have you tried?
 2. How has it worked?
 3. What has it cost?
- 

CONTROL

- Control is the problem not the solution
 - Tug of war
 - The quicksand
 - Pulling a push
 - A playful demonstration: *tug of war with the monster*
- 

WATCH YOUR THINKING

- Fusion to defusion
 - You are not your thoughts
 - Letting go
 - Out of your head into your life
 - The CBT model
 - We feel what we think
 - Looking at thoughts rather than from thoughts
- 

WATCH YOUR THINKING

- ▣ *So what's your mind telling you know?*
- ▣ *Can you notice what you're thinking now?*
- ▣ *Notice what your mind is doing*
- ▣ *So is that a helpful thought?*
- ▣ *Help clients see the fusion*
some exercises to try – let's get silly
Summary of Defusion Techniques handout©

ACCEPTANCE

- Allowing our thoughts and feelings to be as they are , regardless of whether they are pleasant or painful, opening up and making room for them, dropping the struggle.

(Russ Harris 2006)



WHAT IS ACCEPTANCE?

- Allow it to be there
- Expand around it
- Give it permission to be where it already is
- Let go of struggling with it
- Stop fighting with it
- Make peace with it
- Give it some space
- Let it be
- *****You do not have to accept every single thought and feeling*****

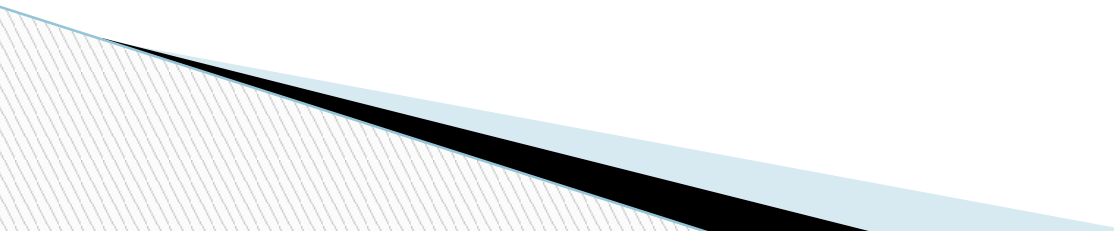
THE ACCEPTANCE TOOL KIT

- Observe
 - Breathe
 - Expand
 - Allow
 - Objectify
 - Normalize
 - Show self compassion
- 

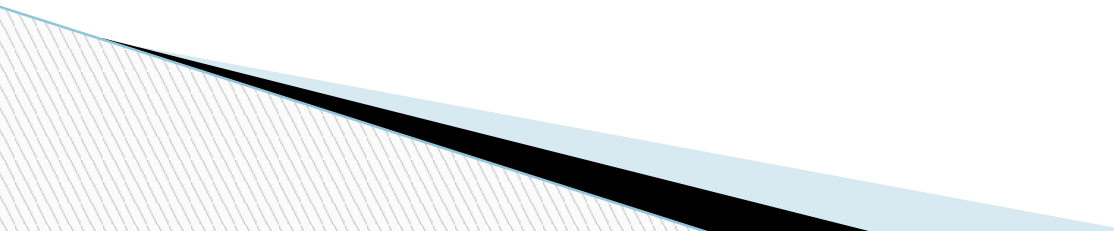
THE ACT ACCEPTANCE TECHNIQUES

- Healing Hand
 - Softening
 - Allowing
 - Expansion
 - The observing self
 - Noticing
- (see attached handout)

HERE AND NOW

- Contact with the present moment
 - Being in the here and now not there and then
 - Fully Conscious
 - Being Mindful
 - Mindfulness of the Breath
 - Breathe and Notice
 - Simple ways to get present (handout)
- 

KNOW WHAT MATTERS

- Values are statements about what we want to be doing with our life:
 - What matters
 - What meaning?
 - What's our purpose?
 - What do we want to become?
 - Are my values in line with my behavior?
- 

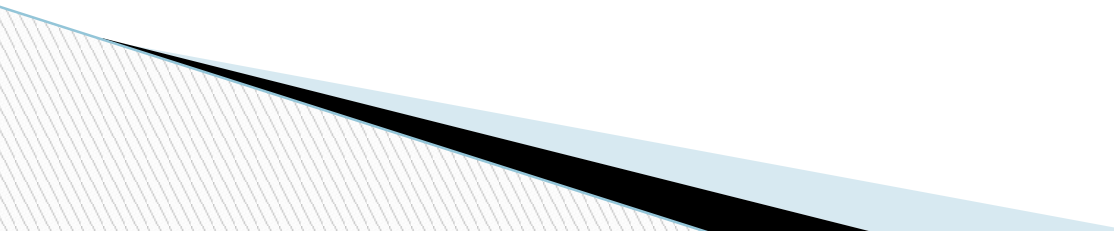
VALUES

- Value are here and now; goals are in the future
- Values never need to be justified
- Values need to be prioritized
- Values are freely chosen
- Values are in how you live

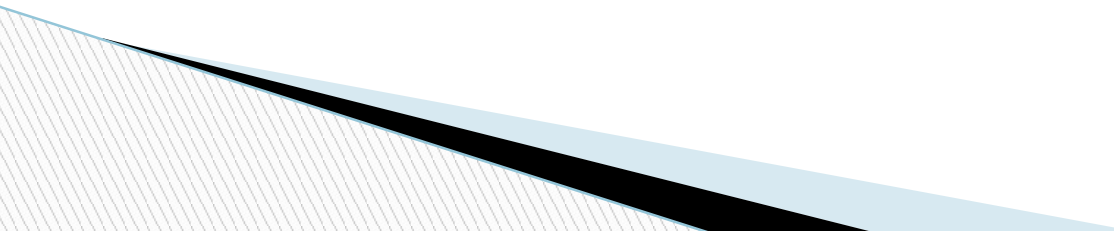
Common values Clarification
Techniques(Handout)



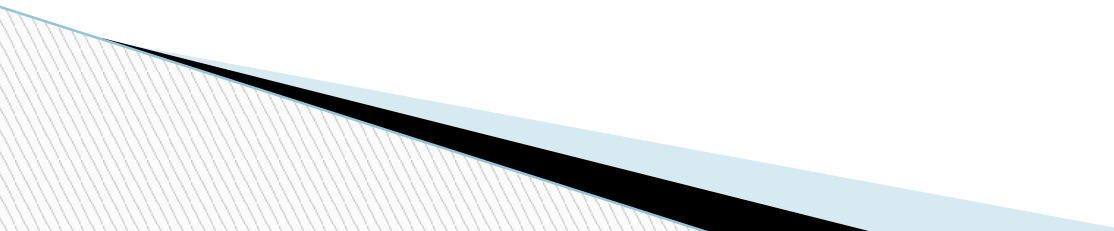
DO WHAT IT TAKES

- ▣ Committed action means doing, showing up and committing to our values and goals
 - ▣ Facing the fear and uncertainty
 - ▣ Being vulnerable (TED TALK- VULNERABILITY)
- 

COMMITTED ACTION

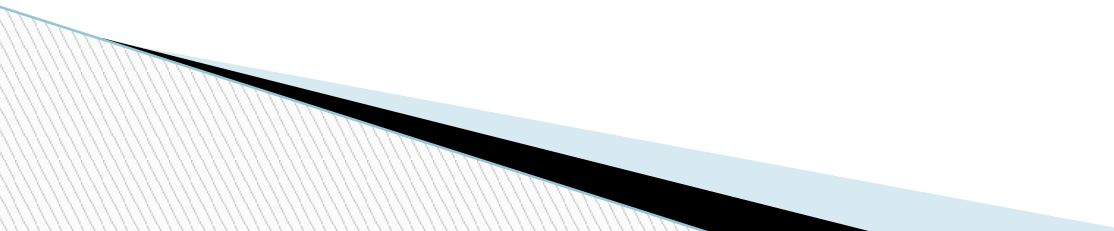
- 1. Choose a domain of life that is a high priority for change
 - 2. choose the values to peruse in this domain
 - 3. Develop goals
 - 4. Take action Mindfully
- 

S.M.A.R.T.

- S= Specific
 - M= Meaningful
 - A= Adaptive
 - R= Realistic
 - T= Time-framed
- 

BARRIERS TO ACTION

- F = Fusion
 - E= Excessive Goals
 - A= Avoidance of discomfort
 - R= Remoteness from Values

 - © Russ Harris
- 

BARRIER CRASH

- D= Defusion
- A= Acceptance of Discomfort
- R= Realistic Goals
- E= Embracing Values

- The ART OF ACT – *case illustration*

APPLICATIONS OF THE ACT MODEL

- THE T.A.M.E MODEL
- T= Teaching
- A = Anger
- M= Management through
- E= Education

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THE DAI TOOL - (Darvell Anger inventory) ©
Emotional Intelligence – Daniel Goleman

CLOSING THOUGHTS

- To thy own therapist be true
 - Be yourself
 - Be patient with any new model or approach
 - Practice makes progress
 - Apply ACT to your own life
 - Make mistakes and be vulnerable
 - Connect back to what matters
- 