

Introduction: Acceptance and Commitment Therapy (ACT-1)

Acceptance and Commitment Therapy (ACT - etiquette is to say this as the word, not the initials) is both a set of guiding psychological principles that just about everyone who works with ACT aspires towards and it is a form of Cognitive Behavioural Therapy (CBT). Traditionally, ACT is used in therapy for an increasingly wide range of conditions particularly anxiety-related, as well as pain, stress, phobias, addictions, (Forsyth & Eifert, 2007; Hayes, Strosahl, & Wilson, 2011; Harris, 2006). It is largely since 1999 and the release of the first main book on ACT by Hayes, Strosahl, & Wilson (1999) that ACT has attracted the most attention and interest in what is described as a third wave behavioural therapy.

There is a firm base of erudite literature and research on ACT. Rather than rehashing and repeating what Hayes and colleagues and others have said about ACT, the following scenario will be described with a view to illustrating the core principles of ACT, with a dash of Personal Construct Psychology - PCP¹ (Butt, 2008; Butler, 2009; Kelly, 1955), hopefully in a way that you the reader can relate to.

Read through the scenario (on the next page) a couple of times, then the following pages for an illustration and application of the principles of ACT. In so doing, the original work of Hayes, Strosahl, & Wilson (1999) together with what followed in the ACT literature including: Eifert & Forsyth, (2005), Forsyth & Eifert, (2007), Harris (2006, 2009) Hayes, & Strosahl, (2005); Hayes & Smith (2005), Hayes, Strosahl, & Wilson, (2011) and Lundgren & Dahl, (2006) amongst others is acknowledged.



Scenario

Suppose you are a nurse, doctor, mother, son, businessman/woman, bus driver, psychologist... whatever. Basically like your job but you are struggling with anxiety or thoughts and feelings, which at times, seem to take over. This may have stemmed from a particular incident or just built up over such a long time that you can't recall being without these feelings. You do not want to have these thoughts and feelings because they disturb your normal happy self and are painful. Some people you know say, "I leave my work at work, once I get home, that's it, I turn off from all that stuff". You wonder, "How can they do that?" "Why can't I do that?" Alternatively, maybe you have been struggling with something personal from the past, an event, a memory, or are worried about what the future holds for you. When you can, you go on holiday to get away from these thoughts and feelings and yet, the holiday is not what you had hoped for because they are still there, troubling you. There are things - people, places, sounds, smells, words, sights that make these feelings worse so you do your best to try not to think about or experience these things.

You have some degree of 'insight' because you recognized long ago that this was a problem and you needed to get control and move on. Life is really not going in the direction you had planned. You have tried just about everything, every 'self help' technique to escape these feelings but nothing has worked, still they are there, haunting you. You even got some professional help to try and get control over these feelings, psychotherapy, medication, acupuncture; none of that worked so you tried meditation, yoga, relaxation, self esteem books and workshops, assertiveness training, positive self talk, the list is as long as your arm. Your alcohol and or substance use increased over time, which you knew was not helping and made you worry even more. You managed to get that in check by turning to fitness, diet and exercise. Now you are fit but still life is a misery because this stuff you have been struggling with is just still there. In the extreme... "I have tried everything and nothing has worked, I will never be the person I was, I am damaged, I survived but I am damaged". Sometimes you lie awake at night because your mind is racing with all sorts of thoughts and feelings: I am unhappy, I am miserable, I am ... I can't If only..... It's not fair... I should... This is not normal, I know everyone has their problems but there must be something really wrong with me because I just can't break free from these thoughts and feelings. I am sick and tired of this stuff. This is not the sort of life I wanted. I used to like I wanted to but now I just don't have the energy.



Introduction: Acceptance and Commitment Therapy (ACT-2)

Okay, putting on a pair of ACT glasses with a set of PCP 'clip ons', lets have another look at this scenario. This time I have applied eight (8) colours to the text, each relates to a core principle in ACT - as viewed through my ACT glasses; others might see these or perhaps some additional combinations, that is fine. First I have provided a key to the principles and the colours represented in the text. Read through the key with the core principles and then on to the scenario and read it again a couple of times with reference to the key.

ACT Principles and Colour Key

Healthy Normality Myth: Or as I like to put it "At times, I am just as messed up as the next *normal* person".

From an ACT perspective, the idea that 'being in a state of well balanced psychological equilibrium, leaning towards jolly and contentment' is what being normal is, is preposterous. Underscoring this is our 'fix it' mentality. In ACT, ups and downs, something worrying, sadness, anxiety, fear, getting annoyed, anger, frustration (the list goes on), all of this is normal. The much propagated image of happy well balanced humans enjoying life to the full all-of-the-time while they drive this car or go on that holiday or wear these clothes is a myth. Moreover. constantly trying to achieve this healthy normality myth causes us nothing but misery and suffering because we are in a constant battle with our own cognition - our memories, emotions, attention, language and thoughts. Unique to ACT is an emphasis on what all this energy leakage costs, especially in regard to living the sort of life we want and being the sort of person we want to be (we pick this up in Values below). In ACT, the shift is from trying to attain psychological equilibrium (= control) to being flexible. This is referred to as 'psychological flexibility'; it could also be called psychological wisdom, it comes with understanding. compassion for yourself and forgiveness or giving back to your self what you lost in battle over all those years of struggle. Most importantly, a degree of psychological flexibility prepares us for whatever waves are on the horizon.

Cognitive Fusion : Being superglued to a thought, feeling, memory etc

Cognitive Fusion is an ACT expression that means 'buying into a thought or feeling or memory' to such a degree that it is a truth, a fact, an absolute. In the scenario *my mind is racing, I am unhappy, I have tried everything and nothing has worked* are examples of how we can fuse/glue with thoughts and feelings. In a Kellian sense this is like being 'tightly construed around one end of a construct' or just simply being stuck on a particular view. Constructively there are no 'givens', everything we construe is up for re-construing. Kelly called this 'loosening', in ACT this is 'defusion' and the beauty of ACT is it provides us with a range of techniques through mindfulness to *do it.* that is dissolve the thought glue.



Confronting the agenda/Control is the problem: We are all control freaks.

This is a primitive safety thing. When we feel we are in control we feel safe.. not being in control is very unsafe. In a Kellian sense, Safe - Unsafe is a 'core construct' - how important? Very important. It is not surprising that as we grow and develop, to some degree each of us grows into a 'control freak', some of us are just more obvious than others. The bottom line is, we all want to have control over our lives. In an ACT sense this includes anything that is unpleasant, especially thoughts and feelings. It is not the memory, the thought, the feeling, the grief, the fear that is the problem, it is the need to change, reduce, remove it, all of this is control. ACT points out the futility of trying to control something that is beyond our control and the damaging consequences of persisting with the struggle, the battle, which can never be won. This is where ACT parts company with first and second wave behavioural therapies. The aim with ACT is never to control anything: anxiety, pain, urges, symptoms and yet there is a basin load of evidence supporting the efficacy of ACT in improving quality of life with symptom reduction occurring as a by-product. In the scenario, struggling, seem to take over, disturb, how can they do that, tried just about everything, haunting and so on are all ways we get stuck on the need to control. This is very different from a top-down sense of 'being in control' that comes with acceptance and letting go of the struggle. In ACT this is called 'winning though surrender' (from Buddhist philosophy).

Workability: Flogging a dead horse?

The concept of 'workability' is central to ACT. If something works for you, great, do it. There are a couple of things to think about though. What is the cost? Is this a short-term benefit? What about the long-term? If someone gets relief from their pain by wearing a copper bracelet, great. Downing half a dozen G&Ts every night to 'get away from it all' might work for a while but the long-term costs are likely to be personal and social disintegration - hardily a workable solution. The items in pink in the scenario relate to workability - we try all manner of things to try and control, reduce what we struggle with - some conventional, some less conventional. Again, the issues from an ACT perspective are: 'Is this working?' 'What is the cost - on all levels?' 'Consequences - short-term? Long-term?' Or am I flogging a dead horse?

Loss of contact with the present moment: Preoccupied with the construed past or future.

To paraphrase Kelly (1955) no one needs to be the victim of his or her biography, there are always alternatives. ACT captures this but also points out the consequences of being preoccupied with the past or the future, which is a loss of touch with the here and now. If every morning we put on our blue 'retro glasses' and keep up the struggle with what happened in the past, or put on our purple 'tomorrow glasses' because we are so preoccupied with what might or might not happen or flip between the two, how can we experience the colours of today? This is one of the areas where skills in mindfulness comes into ACT - to help us to get in touch with the present moment and defuse, or dissolve the thought glue with past or future events. The words highlighted in orange in the scenario relate to how we can be preoccupied with things that have happened in the past or might happen in the future. Of course all this is important in our lives but the focus in ACT is more on the here and now with a view to living our lives according to what we value.



Experiential Avoidance : Or just 'avoidance' for short.

Similar to 'control', avoidance is primitive and generally, it serves us well. We learn that by avoiding things that are unpleasant, nasty and threatening, we keep safe and being in the 'safe zone' is a very good place to be. We also learn to avoid conflict (perhaps until we feel seriously disadvantaged). Avoiding trouble enables us to get on with life (or so we think). Avoidance is great for not burning yourself on the hotplate, it works, and there is little cost and lots of benefit. From an ACT perspective, avoidance is problematic when it is applied to more complex and abstract concepts such as thoughts and feelings. This is captured in the ACT expression: 'If you don't want it, you've got it.' Quite simply, it just does not work but we keep banging away, trying to avoid everything that is unpleasant because this strategy worked so well with crossing the road and not getting burned on the stove. So, if avoidance does not protect us from the things that are unpleasant or troublesome in our lives, what can we do? From a Kellian perspective avoidance exists in the light of its polar opposite which is acceptance as an Avoidance -Acceptance construct and this is part of the essence of ACT. What acceptance is not in ACT is 'putting up with' anything... as in "There is nothing I can do about this so I might as well accept it. Acceptance in ACT is having, holding, being willing to have, to hold, allowing yourself to experience... it is allowing yourself to have a wave... 'right now I am having a wave of... anxiety, doubt, fear, anger, sadness, joy, grief, disgust, tears. Why? Because I am human, this is what we do, or at least can do if we are willing to function from a framework of acceptance rather than avoidance.

Willingness

In a Kellian sense, willingness exists in the light of its polar opposite - unwillingness as a construct: *Willingness - Unwillingness*. In an ACT sense this is interwoven with the *No need to Control - Must have Control* construct. In the scenario *do not want to have* is unwillingness to be in the presence of..., it is coupled with a need to control. An ambulance driver might value 'being dependable and expert in emergencies'. If she or he avoids driving a particular part of town because of the struggle with anxiety related to an incident three years ago, the problem is not the incident or anxiety around the incident, it is the *unwillingness* to be in the presence of whatever is unpleasant about that experience and flogging the dead horse of control. Moreover, if she or he goes to work with the dread of a call in that vicinity hanging heavy then 'being dependable and expert in emergencies' is likely to suffer. Similarly the anxiety of withdrawal for a smoker trying to get free is not the problem in getting free so much as an unwillingness to be in the presence of that anxiety. Again, in ACT, if you are not willing to have it, you've got it.

Values: Kärnan

As if on cue, this crucial ACT Principle is not represented. The scenario begins with 'Suppose you are'. To paraphrase musician and composer Pete Townsend (1978), in a nutshell, Who are You? Values are not about what you are, own or have achieved - they are about what sort of a person you are and want to be, what you stand for, what you value. To illustrate this from a personal perspective - one of my values is 'improving the management of pain in children and adolescents', another is 'confidentiality', another is 'a sense of humour' (there are more). Values should not be confused with goals. Goals are things I can tick off - they might be in the service of what I value but they are not values per se. My Ph.D on 'The effects of distraction, b.whitaker@top-downpaincontrol.com \(\bigcirc \) http://www.top-downpaincontrol.com

relaxation and guided imagery on procedural fear and pain in children' was a goal, I ticked it off the list in 2002. It helped me to move closer to my 'pain in children' value, I will never tick this off a list because values aren't things you finish - those are goals and achievements. In a Kellian sense values are core constructs because they define the sort of person you are, they are superordinate and they have flow-on effects... I live my life in a particular way because valuing the rights of children and improving the management of their pain and fear around treatment is important to me. In an ACT sense though, how can I do that if I am in constant battle with my memories, emotions, attention, language and thoughts? In other words, how can I live the life I want to live if I am in a constant struggle with myself? The answer to this question is with great difficulty, if at all. The starting point with ACT is values; what sort of person we want to be, what we value. Since 2001 I have been referring to this as Kärnan (pronounced Shār-Nun, 'Shār' as cār). This Swedish word is close to quintessential; it means 'the seed' and also 'the core' - 'the heart' of the matter. This poses the important question in ACT 'What makes up Kärnan for you?' What is at the core, the heart of you? What do you stand for, how do you want to be remembered by the people who matter to you when you are gone? In sum, ACT is about first, living your life according to your values while riding the waves that come with being human; everything else is secondary.

Scenario

Suppose you are a nurse, doctor, mother, son, businessman/woman, bus driver, psychologist...
- a person, you basically like your job but you are **struggling** with anxiety or thoughts and feelings, which at times, **seem to take over**. This may have **stemmed from a particular incident** or just built up over such a long time that you can't recall being without these feelings. You **do not want to have** these thoughts and feelings because they **disturb** your **normal happy self** and are painful. Some people you know say, "I leave my work at work, once I get home, that's it, I turn off from all that stuff". You wonder, "How can they do that?" "Why can't I do that?" Alternatively, maybe you have been **struggling** with something personal from the past, an event, a memory, or worried about what the future holds for you. When you can, you go on holiday to get away from these thoughts and feelings and yet, the holiday is not what you had hoped for because they are still there, troubling you. There are things - **people**, **places**, **sounds**, **smells**, **words**, **sights** that **make these feelings worse** so you do your best to **try not to think** about **or experience** these things.

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