An Introduction to Acceptance and Commitment Therapy (ACT): A Work in Progress

Sarah Khan, Department of Psychology, Honors College, College of Arts & Sciences
Mentor: Amy Murrell, Ph.D Department of Psychology, College of Arts & Sciences

Introduction to ACT

Acceptance and commitment therapy (ACT) is a type of behavioral therapy used to alter the way people interact with language, specifically so its effect on their psychological and emotional well being is reduced.

ACT is based on relational frame theory (RFT), which is based in the philosophy of science known as functional contextualism (Hayes et. al., 2004). Functional contextualism focuses on the context of events and analyzes them in terms of their function (Biglan, 1995). RFT describes how humans create "relational frames" through a learned form of responding that is based on contextual factors as well as a history of conditioning (Hayes et al., 1996).

ACT focuses on acceptance of unwanted experiences and emotions, choosing a particular set of values, and acting in a way that is consistent with these values. The main goal of ACT is to encourage clients to do what works in the long term rather than what makes them feel good in the short term (Kohlenberg et al., 1993).

Experiential Avoidance and PTSD Symptoms in Children

Posttraumatic Stress Disorder (PTSD) symptoms as defined by the Diagnostic and Statistical Manual of Mental Disorders-IV-TR (American Psychiatric Association, 2000) include "persistent re-experiencing of the traumatic event, persistent avoidance of stimuli associated with the trauma, and numbing of general responsiveness, and persistent symptoms of increased arousal".

Experiential avoidance involves excessive negative feelings about previous experiences, a desire to not experience such events, and efforts to control these events (Hayes, Strosahl, & Wilson, 1999).

Experiential avoidance is unique in that it encompasses several forms of avoidance including thought suppression, emotional numbing, and actual physical avoidance.

For example, a child who experiences a traumatic car accident may subsequently avoid cars altogether in an attempt to avoid feelings related to being in the accident (e.g., fear). In time, this avoidance could directly impact this child’s daily life as it makes it more difficult to transport the child (e.g., to school, sports).

Six Core Processes

There are six core processes of ACT:

1. Acceptance: Non-judgmental awareness of self and embracing of all thoughts, feelings, and bodily sensations.
3. Self as Context: A sense of self that is transcendent of a person’s behavior.
4. Contact with the Present Moment: Being trained to notice what’s present and labeling it without judgment.
5. Values: The chosen ideas that a person decides to live by.
6. Committed Action: Defining goals in specific areas and acting in ways to achieve these goals.

Purpose

Further examination of children’s reports of posttraumatic stress symptoms (as measured by the CPSS) may offer insight into children’s experiences following trauma. In addition, examination of how children self-report based on the traditionally utilized adult DSM-IV-TR (2000) PTSD criteria will be conducted.

Examination of individual items could lead to information about specific criteria of trauma symptoms that children tend to report (i.e., Do they endorse more avoidance items? More re-experiencing items? More increased arousal?) This may help researchers understand the differences between diagnosing adults and children based on DSM-IV-TR (2000) standards and expose the considerations that must be made in such a diagnosis.

Assessing experiential avoidance using AFO-Y standards may allow researchers to examine whether experiential avoidance plays a similar role in the development and maintenance of PTSS/PTSD in children as it has been found to in adults.

References


Measures

I will utilize part of a larger project to look at the relationship between two specific measures. This project is a dissertation by Christina M. Larson, M.S. entitled “Symptom Patterns in Children Exposed to Domestic Violence: The Role of Language in Development of Posttraumatic Stress”

In this study we are exposed to PTSD and avoidance measures for children including:

- Conflict Tactics Scale 2 (CTS2): Assesses the prevalence of specific behaviors during interpersonal conflicts
- Child Behavior Checklist (CBCL): Parents report the frequency of certain behaviors; used to measure symptoms of internalizing and externalizing
- Centrality of Events Scale, Shortened Version (CES): An assessment of cognitive fusion with an event

The measures I will look at include:

- The Child PTSD Symptom Scale (CPSS): Used to assess children’s posttraumatic stress symptoms and symptom severity. The test is based on the DSM-IV-TR criteria for PTSD. Children are asked to specify a traumatic or distressing event and answer questions about the event.
  - Sample items: “Having bad dreams or nightmares” or “Feeling upset when you think about it or hear about the event”

- Avoidance and Fusion Questionnaire for Youth (AFO-Y): Measures the extent to which the individual overweight with negative thoughts, feelings, and experiences
  - Sample items: “I push away thoughts and feelings that I don’t like.” and “I am afraid of my feelings.”

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